

**Council on Education for Public Health
Adopted on September 7, 2018**

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

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the College of Public Health at the University of Iowa. The report assesses the college's compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2011*. This accreditation review included the conduct of a self-study process by college constituents, the preparation of a document describing the college and its features in relation to the criteria for accreditation, and a visit in April 2018 by a team of external peer reviewers. During the visit, the team had an opportunity to interview college and university officials, administrators, teaching faculty, students, alumni, and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the college and verify the self-study document.

The University of Iowa is located in Iowa City, Iowa, and the flagship campus has 11 colleges. In fall 2017, the university enrolled more than 33,000 students with roughly 24,500 as undergraduates, 5,800 as graduate, 1,800 as professional students, and 1,300 as post-graduates. The College of Public health is one of 11 colleges and schools on the University of Iowa's campus and is one of five professional colleges that the university designates as the University Health Science Colleges. The other colleges include dentistry, medicine, nursing, and pharmacy.

The college enrolls more than 500 students and employs about 77 primary faculty. The college's extensive list of instructional offerings reflects this size. The college offers more than 35 degrees through its five departments, sponsors joint degrees with several other university academic units, and offers continuing education opportunities to the professional public health workforce.

The college was established in 1999 and initially accredited in 2000. The college's last accreditation review in 2011 resulted in a seven-year term, which included a submission of an interim report in 2013.

Characteristics of a School of Public Health

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

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

These characteristics are evident at the college. The college is located in a regionally accredited university, and the faculty has the same rights, privileges, and status as faculty in other professional schools. The college's faculty are trained in a variety of disciplines, and collaboration within the college's departments and with other colleges and schools at the University of Iowa is evident in the college's research, teaching, and service activities. This collaboration fosters interdisciplinary communication. The college has strong ties to the public health workforce in the state of Iowa and Midwestern region, and these linkages foster the development of professional public health concepts and values. The college's policies and procedures align with its public health mission and vision. The college has resources to support all of its educational offerings, including professional master's degrees and academic doctoral degrees in the five core areas of public health knowledge. The college has a well-developed system of planning and evaluation that involves students at all levels and is responsive to current and emerging public health practice needs.

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.

This criterion is met. Initially developed in 1999, the mission, vision, values, and goals undergo review every five years as part of the strategic initiative planning process. The college's Executive Committee approved a revision in December 2015 after considering input from faculty, staff, students, and external collaborators via three open forums and posting of draft documents. The college's mission is as follows:

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.

The college's strategic initiative plan focuses on three aspirational goals regarding education, research, and impact. Each goal has a clearly-stated set of objectives, including a fourth set of objectives characterized as cross-cutting. Each objective is measured through a set of performance outcomes and tactical initiatives. The performance outcomes are measured quantitatively, and the tactical initiatives are typically measured qualitatively.

The college has eight stated values, which are reviewed as part of the strategic initiative process. The values reflect those of the university: Excellence, Learning, Community, Diversity, Integrity, Respect, Responsibility, and Social Justice. Faculty described to site visitors that the values are woven throughout the college's performance outcome measures and initiatives.

The mission, values, and strategic initiative plan are posted on the college's website for both internal and external stakeholders. Additionally, the mission and values are included in the orientation material for new faculty, students, visitors, and collaborating partners of the college. The progress reports are shared with the CPH Board of Advisors and the university provost and are made available to the public during the Annual State-of-the-College Address.

1.2 Evaluation and Planning.

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.

This criterion is met. As a result of the ongoing measurement activities related to the guiding statements, the college produces four summary documents annually: the five-year strategic initiative plan, an annual work plan, an annual progress report, and a dashboard. The strategic initiative plan provides a five-year

summary of accomplishments and summarizes the planning process to be used for the next five years. The annual work plan lists the tactical initiatives and activities that the college uses to achieve its objectives. The annual progress report provides a detailed statement regarding the accomplishment of the tactical initiatives and the performance outcomes. The dashboard provides an easily accessible way to review plan results through performance outcome trends. All documents are fluid and may be revised during the year based on intervening events.

Overall responsibility for review and action on the annual work plan and the strategic initiatives plan lies with the college Executive Committee. Data collection responsibilities are assigned to specific committee members, and members report on the work plan during meetings throughout the year. Using several college, university, and external sources of data, information gathered relates to the specific performance outcomes and tactical initiatives outlined in the strategic initiative and annual work plans. For example, the Office of Academic Affairs reviews graduation rates for degree programs. During its recent review, the office determined that tracking the retention rates between first and second year graduate students provided more timely information on student progress. These indicators are now included in the performance outcomes.

The Executive Committee is responsible for the college's self-study and initiated the process in October 2016. The committee gathered information through small work groups from October 2016 to July 2017 and a forum open to faculty, staff, and students. The committee used several mechanisms to solicit reviews from external groups including alumni and the practice community. These mechanisms included the CPH News Digest, the Iowa Department of Public Health Newsletter, the Board of Advisors, the Insight newsletter, the Iowa Public Health Association membership, and the Business Leadership Network membership. Alumni and community partners who met with site visitors stated that the college solicited their input for the self-study document prior to the completion of the first draft and were able to directly point out where their feedback had been incorporated into the document. The college posted a draft of the self-study on the main webpage and received additional input from faculty, staff, and students. Additionally, the university executive vice president and provost reviewed the document.

1.3 Institutional Environment.

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

This criterion is met. The University of Iowa is accredited by the Higher Learning Commission and was last reaffirmed in 2008-2009. The University of Iowa responds to more than 35 specialized accreditors in areas such as education, nursing, pharmacy, psychology, business, medical education, dance, music, recreation and parks, and dentistry. In addition to CEPH, the College of Public Health responds to the Commission on the Accreditation of Healthcare Management Education (CAHME) and the Accreditation Board for Engineering and Technology, Inc. (ABET).

The College of Public Health is one of 11 colleges and is located on the university's main campus in Iowa City, Iowa. The University Health Science Colleges include five professional colleges: public health, dentistry, medicine, nursing, and pharmacy. Each college has the same level of independence and status, with deans at all eleven colleges reporting directly to the executive vice president and provost. The executive vice president and provost reports to the Board of Regents, State of Iowa, which has ultimate authority for the governance of the university. The executive vice president and provost is charged with overseeing UI's academic programs, faculty matters, outreach and engagement, diversity, international programs, continuing education, information and resource management, and leadership responsibilities for the Council of Deans. The college routinely meets with the provost on various matters related to budgets, faculty recruitment, promotion and tenure, strategic planning, information technology, academic programs, and financing of large initiatives such as facility renovation. Each college also has relationships with the vice presidents of UI, who in turn report directly to the president.

The university central administration determines the amount of funds the college receives from the General Education Fund based on the previous year's allocation. There is the possibility of addition or subtraction based on tuition and fee generation as well as facilities and administrative costs recoveries. The dean and associate dean for administration meet annually with each department executive officer to review the department budget. As new sources of funding become available, the dean, in consultation with the Executive Committee, will direct resources to current or new initiatives.

Department Executive Officers (DEO) submit vacant faculty position requests to the dean's office annually. The dean, in consultation with the associate dean for administration, reviews and approves requests; decisions are guided by faculty recruitment priorities established by the Executive Committee. Faculty search activities receive approval from the college's Dean's Office, the Provost's Office, and the Office of Equal Opportunity and Diversity. Search committees for faculty positions include faculty and may include staff and students, as appropriate. The search committee recommends a viable candidate to the DEO, who then consults with the dean. Once the faculty candidate is approved and voted on by the department, the Executive Committee votes on the appointment. The final offer letter, with feedback on tenure offers from the Departmental Consulting Group and Collegiate Consulting Group, is reviewed the Dean's Office, the Provost's Office, and the Office of Equal Opportunity and Diversity.

Staff positions must be approved through the Dean's Office and the Office of Equal Opportunity and Diversity. Decisions are determined through review of organizational effectiveness and workforce planning conducted by the department. Staff recruitment processes are different between non-organized staff and organized staff.

The associate dean for academic affairs and the director of undergraduate programs, in consultation with the Undergraduate Program Committee and the Executive Committee, develop academic standards and policies for the undergraduate program. The Curriculum Committee provides the final review and approval of academic course offerings in the undergraduate program curriculum.

Academic standards and policies in the graduate program are based on those set by the university's Graduate College. The College of Public Health also further develops its own academic standards and policies. Departments are responsible for the oversight of academic standards and policies of their degrees with input from the associate dean for academic affairs and within the parameters set by the Graduate College.

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.

This criterion is met. The College of Public Health includes five departments: Biostatistics, Community and Behavioral Health, Epidemiology, Health Management and Policy, and Occupational and Environmental Health. Each is led by a department executive officer (DEO), who reports directly to the dean. The DEO leads the academic, recruitment, budget, and strategic planning for the department.

Executive authority rests with the dean, a position filled by an interim dean at the time of the site visit. A new dean for the College of Public Health was announced in May 2018 and will assume her duties June 2018. Four associate deans are responsible for administration, faculty affairs, research, and academic affairs.

The dean regularly meets with councils and committees consisting of leaders and other stakeholders for advisement. The Board of Advisors, the Executive Committee, and the Administrative Committee address policy development and strategic planning. The various faculty, staff, alumni, and research councils meet at least once a semester with the dean to discuss areas such as faculty policy changes, alumni engagement, collaborative research initiatives, staff issues, and graduate student events.

The college also includes three centers that support its academic, research, and practice goals: the Center for Public Health Statistics, the Institute for Public Health Practice, and the Iowa Institute of Public Health Research and Policy. The directors of these organizations report to the dean. During the site visit, college leaders explained that these collegiate based centers are partially supported by the college. These centers form an infrastructure within the college to support interdisciplinary collaboration. For example, the college-led Iowa Institute of Public Health Research and Policy supports public health faculty to achieve their

research goals by facilitating collaboration across departments, the university, and external government or private partners.

Site visitors heard another similar example from faculty during the visit through the college-led center, the Institute for Public Health Practice. The institute collaborates both externally and across campus with the College of Nursing, the Center for Disabilities and Development, and the Hardin Library for Health Sciences.

Several other examples demonstrate college support for collaborative education, service, and research within the college, across the university, and with organizations outside the university. Within the college, students have educational opportunities to interact with faculty, staff, and students from other departments through seminars, workshops, committee service, and group work during foundational public health courses. The college also offers joint MPH degrees with law, medicine, pharmacy, and veterinary medicine. Doctoral, masters, and undergraduate students may take appropriate courses outside the College of Public Health. The college is engaged with other health sciences colleges to form an inter-professional education steering committee, which developed a student organization and course. Finally, public health faculty serve as co-investigators on research led by other university departments. College faculty published 165 articles with faculty outside their own departments in 2017.

On site, students suggested the need for continued efforts at inter-professional collaboration within the college and across health sciences, suggesting their perception that the departments within the college can sometimes operate in silos.

1.5 Governance.

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

This criterion is met. College governance is led by the primary decision-making bodies that include the dean, associate deans, DEOs, program directors, faculty, staff, and students. The college-wide committee structure includes the following well-defined committees:

- Administrative Committee
- Faculty Council
- Promotion and Tenure Committee
- Departmental Consulting Group
- Staff Council
- Board of Advisors
- Diversity and Inclusion Committee
- MPH Program Committee
- CPH Graduate Student Association
- CPH Undergraduate Student Ambassador Program
- Executive Committee
- Curriculum Committee
- Collegiate Consulting Group
- Research Council
- Alumni Advisory Council
- Awards Committee
- Global Public Health Committee
- Undergraduate Program Committee
- CPH Graduate Student Ambassador Program

As described in the previous criterion, the dean has ultimate decision-making responsibility, but meets regularly with the Board of Advisors, various faculty, staff, and research councils, the Graduate Student Association, the Administrative Committee, and the Executive Committee. The Executive Committee oversees planning and evaluation activities and is guided by the strategic initiative work plan. Any college committee or council can recommend a strategic initiative, but it must be reviewed and approved by both the dean and Executive Committee.

The Executive Committee discusses major expenses related to personnel, facilities, and special initiatives and provides input to the dean for budget and resource priorities. Research awards are directed by the faculty investigator.

Undergraduate admission to the college is considered by a committee comprised of the director of the undergraduate programs, associate dean for academic affairs, an undergraduate advisor, and an undergraduate recruitment specialist. Admission procedures are coordinated by the university Office of Admissions for all undergraduate programs, but the college is selective and maintains full control of student admissions. The undergraduate faculty explained to site visitors that since the undergraduate program is still in the early stages of implementation, they are purposefully controlling enrollment. The college awards the bachelor's degrees.

Graduate admission is controlled by individual departments. For MS, MHA, and PhD degrees, the departments review, recommend, and decide on admission. For MPH programs, departments review applications and recommend students for admission to the MPH Program Office. The Graduate College verifies that applicants meet the minimum requirements for admission. The Graduate College awards the graduate degrees.

Faculty promotion and tenure is an extensive process involving numerous committees and faculty for a final decision. The process starts with the Departmental Consulting Group, then moves to the department head, and then goes to a Collegiate Consulting Group composed of members of the collegiate Promotion and Tenure Committee for a vote. The dean reviews the material, provides a recommendation, and then submits the packet to the provost for a recommendation. The final recommendation is subject to the Board of Regents approval.

Faculty who met with site visitors state there are numerous opportunities to be involved in faculty governance. Despite the large number of committees and councils, faculty also state they are well informed of major changes and are often asked for feedback on important issues.

College faculty members maintain memberships on a wide range of university committees. The list includes the Council of Deans, Health Sciences Policy Council, University Faculty Senate, the Graduate College Council, Research Council, the university Diversity Group, and other charter committees.

Students are involved in college governance through positions on committees such as the Curriculum Committee, Awards Committee, Diversity and Inclusion Committee, Global Public Health Committee, MPH Program Committee, and Undergraduate Program Committee. Additionally, graduate students can participate in student organizations. The current list of graduate student organizations includes the CPH Graduate Student Association, CPH Graduate Student Ambassadors Program, Biostatistics Student Organization, Community and Behavioral Health Student Association, Epidemiology Student Association, Iowa-Illinois Industrial Hygiene Student Association, and Iowa Student Association of Healthcare Leaders.

The CPH Undergraduate Student Association was under development at the time of the site visit. The Undergraduate Program Committee informed site visitors that students have drafted a constitution and are in the process of creating by-laws. Faculty expect the undergraduate student organization to be formally meeting by fall 2018.

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.

This criterion is met. The college budget has been largely consistent throughout the last seven years with small fluctuations that reflect the changing nature of national funding trends. As shown in Table 1, research revenue dropped from fiscal year 2012-2013 but increased in fiscal year 2014 and now appears to have stabilized. On-site discussions with faculty indicate this is due to the loss of senior faculty with large grants. Revenues from the General Education Fund (GEF), which is determined primarily by university central administration, are increasing every year. College budget revenues and expenditures have been close to \$57 million during fiscal years 2011-2017. The college can retain GEF funds from year to year, and the university adjusts the portion of their GEF budget attributed to facilities and administrative cost recoveries based on a three-year average, limiting sharp drops to the college budget. Gifts are a major source of revenue, and the college reports these as cumulative since they are applied to an endowment.

College revenues are derived largely from two main sources of funding: the GEF and grants and contracts. Full-time tenured faculty are expected to offset 50% of their salaries on grants. In the past three years the college exceeded that target with percent of faculty salary offset through external funding at 54%, 58%, and 60%. The college also measures financial performance through research expenditures per FTE. A target amount of funding per FTE is \$500,000 and the college exceeded that target in the last three years. The college greatly exceeded their fundraising campaign target of \$25 million in each of the last three years

with having raised over \$40 million cumulatively by the end of fiscal year 2017. The college recently added another financial performance indicator of an alumni giving rate of 8%. It has been at 5% in fiscal years 2016 and 2017.

Table 1: Available Sources of Funds and Expenditures by Major Categories: FY2011-FY2017							
	FY2011 (\$)	FY2012 (\$)	FY2013 (\$)	FY2014 (\$)	FY2015 (\$)	FY2016 (\$)	FY2017 (\$)
Sources of Funds							
GEF Allocation ¹	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 ²	952,965	867,375	817,759	1,152,123	1,491,975	2,374,081	1,987,547
Service Centers ³	752,115	723,868	781,471	807,213	1,065,722	996,336	918,575
Grants & Contracts ⁴	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 ⁵	0	2,016,369	141,769	0	0	0	0
UI Center for Advancement ⁶	1,756,992	1,624,266	949,900	1,032,581	3,235,487	251,596	1,429,056
Total Revenue	63,531,212	65,459,165	47,854,345	58,952,987	56,765,218	55,192,360	56,748,631
Expenditures							
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
Facilities & Administrative (F&A) Costs ⁷	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
Total Expenses	56,295,913	58,211,326	59,570,051	53,969,237	55,607,353	55,098,949	57,085,021

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

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

³ Service Centers revenues represent service functions supported by user charges.

⁴ Includes direct costs and facility and administrative (F&A) costs awarded.

⁵ Cost Share funding for construction.

⁶ Represents gifts, new pledges and investment income to accounts at the UI Center for Advancement.

The university has a decentralized budgeting system with a high level of autonomy for the college within the parameters set forth by the university. The state allocation has historically been based on need and historical levels. Site visitors learned in meetings with college and university leaders that the university is in the process of adopting a new budget model. It is described as a responsibility-centered management model oriented for growth in majors and credit hours. Faculty stated that the college is poised to benefit from the new budget model and look forward to the forthcoming changes.

During site visit discussions, college representatives stated that the college maintains a positive balance of \$23 million at the end of fiscal year 2017 from cumulative savings and sponsored research carry-forward funds. These funds are used to support strategic initiatives and sponsored research projects.

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.

This criterion is met. The college faculty complement is adequate and meets all full-time quantitative faculty requirements in the five core public health knowledge areas. Primary faculty headcount ranges from 11 to 18 in the core disciplines and primary FTE ranges from 10.71 to 16.72. The undergraduate degree maintains a primary faculty headcount of 33 with a combined FTE of 31.28.

The student-to-faculty ratios (SFR) are all less than 10:1 for the core knowledge areas, the undergraduate program, and the MHA program. The SFRs by total faculty for academic year 2018 are as follows: 2.35 for biostatistics, 3.45 for community and behavioral health, 6.20 in epidemiology, 2.31 for health management and policy, 4.28 in occupational and environmental health, 2.33 in the undergraduate program, and 6.52 for the MHA program.

The college uses three performance outcome measures to assess adequacy of its resources. One performance measure, which is the number of primary faculty, is tracked with no specific target. The second measure is the number of graduate and professional student credit hours taught. There is a five-year target of 6,900 credit hours. The college exceeded that target in the past two fiscal years. The final outcome measure is the number of undergraduate student credit hours taught. The college set a five-year target of 7,150 credit hours and taught 2,325 in the most recent year.

The college has a somewhat geographically distributed faculty, but most faculty are housed in the Riverside Drive building location. All primary faculty have office space at this location. Physical space for research, including wet and dry labs, is distributed through eight buildings on campus as well as five off campus locations. Faculty, alumni, and community stakeholders explained there are plans for a north wing addition to the college's main building for increased lab space and somewhat tenuous plans for other new health sciences interdisciplinary lab space nearby.

Computer resources for students are substantial. There are brand new computer facilities in the college building both for study as well as for class. Library resources are sufficient to support the research and teaching missions of the college with access to a high volume of books, journals, and electronic resources.

1.8 Diversity.

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

This criterion is met. The college demonstrates a strong and active commitment to increasing diversity that is evident in its core values, its well-established diversity committee, policies, programs, and curricula. The college identifies the following domestic racial and ethnic categories as underrepresented: African American or Black, Hispanic or Latino, American Indian or Alaska Native, Native Hawaiian and other Pacific Islanders, and Asians. The rationale for these populations is that the university and state of Iowa are predominantly white.

To systematically promote a culture of collaboration and inclusion, the college includes diversity as a core value to achieving its mission and established the Diversity and Inclusion Committee with representation of faculty, staff, and students. The college's diversity value and committee directly support the broader university 2016-2021 strategic initiative to "create a more inclusive campus culture" and its specific subtasks to recruit a more diverse faculty, staff, and students; to advance understanding of diversity; to emphasize diversity in the curricula; to build programs that support underrepresented students; and to foster social, academic and service opportunities for cultural groups. The committee uses the university's broad definition of diversity to include religion, age, disability, sexual orientation, gender identity, and economic status in addition to race and nationality. The committee's annually-reviewed diversity goals are to attract, develop, and retain a diverse faculty, staff, and student body; promote a culture free of harassment and discrimination; and teach how cultural differences affect health in order to be effective public health professionals. The monthly meeting minutes demonstrate that the Diversity and Inclusion Committee actively addresses all aspects of the diversity policy, reviews curricula, and develops and implements ongoing programming for students, faculty, and staff. The committee reviews the college's diversity plan annually in collaboration with the college Executive Committee.

The college both complies with federal and state laws and the broader University of Iowa policies as well as sets out its own additional requirements to create and sustain an environment free of discrimination and harassment. The University of Iowa Operations Manual and Code of Student Life, posted on the university's website, clearly displays these policies. In addition, an online Code of Student Life also outlines student rights and the policies that protect them from discrimination and harassment as well as defines expectations for their behavior. The university also requires students and faculty to complete sexual harassment training. The college monitors that this training has occurred on time and requires an additional unconscious bias training in its new faculty orientation.

Several current college policies, trainings, services, and activities enhance diversity and create a supportive environment for faculty, staff, and students to learn and grow. The college's ADA-compliant building

additionally includes a gender inclusive restroom and lactation room. The college website follows national accessibility guidelines and has a visible, dedicated diversity tab highlighting events and resources on the topic. Several college staff also completed LGBTQ safe zone training in order to serve as resources and allies to these community members. Finally, the college sponsors a rich array of diversity-related programming including welcome luncheons and receptions for students of color and LGBT students, potlucks, diversity movies with panel discussions, workshops, unconscious bias training, arts and photography display, and conference sponsorships. At least 11 diversity-related events per year occurred in 2017 and 2018.

The college's curricula aim to develop understanding of diversity and culture through including material in required courses. Topics include social, economic, and cultural determinants of health, human rights, health equity, social justice, advocacy, and program development in diverse communities. The Diversity and Inclusion Committee is in the process of developing a systematic way to review curricular and service learning opportunities for their inclusion of diversity concepts and experiences. During several site visit meetings, the chair of the Diversity Committee, the director of the undergraduate program, and the chair of the Curriculum Committee, explained that forming such a system is, in fact, a key upcoming initiative. A student on the Diversity Committee also shared that they would like to provide the Curriculum Committee with case studies and examples to support diverse discussions in classes.

The college has a broad set of approaches to recruiting and retaining a diverse faculty and staff. The college follows guidelines of and works in collaboration with the university Office of Equal Employment Opportunity and Diversity. Advertisements for faculty and staff positions appear in publications that reach applicants from diverse backgrounds. For faculty, recruitment efforts also include emphasizing the college's core diversity value in position descriptions, networking at national and regional meetings, and linking with pipeline universities where possible candidates are enrolled or work.

To support the success of faculty from minority groups once hired, the college provides faculty two mentors addressing shared research interests and faculty responsibilities respectively. Mentors may come from outside the college or university, which helps new minority faculty find a suitable match. The college also provides junior faculty with funding opportunities. Faculty and staff may participate on the Diversity and Inclusion Committee and in all multicultural programming sponsored by the college.

During the site visit, both university and college leaders emphasized the importance of recruiting a diverse faculty, which in turn supports recruiting a diverse student body. They discussed three new university-level initiatives to achieve this goal. The interim chief diversity officer brought together a half-day forum on supporting faculty recruitment and retention with funds from athletics. The university athletics program is also going to underwrite a Big 10 collaborative effort to create a pipeline program of post-doctoral

fellowships for underrepresented students, who ideally would eventually become faculty. The Graduate College has a National Science Foundation program to encourage minority students to move from undergraduate to graduate study, from graduate to post-doctoral study, and from post-doctoral study to faculty positions. College leaders talked about the importance of the unconscious bias training in influencing the faculty search and hiring process. Leaders emphasized that the process could take eight to ten years before observing change.

Multiple recruitment strategies specifically attempt to attain a diverse graduate student body. The college either collaborates with national programs and/or provides faculty for summer programs to engage minority undergraduate students. All of these programs serve as recruiting opportunities where students meet professors and learn about public health. During the site visit, two Latino master's students explained that they came to the university specifically because of their experiences with the summer engagement programs in biostatistics and research.

The college's Diversity and Inclusion Committee has offered 41 scholarships to underrepresented students from 2013 to 2018. In addition, the Graduate College offers multiple mechanisms for underrepresented minorities to obtain scholarships or fellowships.

The college also collaborates with the university's Office of Graduate Ethnic Inclusion and the Center for Diversity and Enrichment on graduate and undergraduate recruitment, respectively. The center reaches out to pre-college minority youth with information on public health degrees and careers.

To evaluate and monitor the effectiveness of the college's diversity initiatives, the college has administered a diversity climate survey, set targets for recruitment, and reported results of its entire strategic plan on the college website and to the Board of Advisors. The college also reports to the university's Chief Diversity Office, which also annually monitors and reports on goals for race and ethnicity among faculty, staff, and students. The diversity climate survey has been administered three times between 2010 and 2015, and will be offered again in 2018. It measures perceptions of the college's efforts to promote diversity and availability of, participation in and areas for new diversity programming among other topics. In 2015, over half of students participated in at least one diversity-related activity, and 87% agreed or strongly agreed that the college is "a welcoming and inclusive place for all students, staff and faculty members from underrepresented or underserved groups."

According to data, 38% of the overall undergraduate student and 20% of the graduate student populations represented minority groups in 2017, exceeding both the state of Iowa's level of 14.4% and the university target outcome measure of 16% (and exceeding the entire university's level for undergraduates). However, among graduate students in particular, the specific minority groups such American Indians and other native

groups, Hispanic/Latinos, and African Americans remain underrepresented compared to the state population, while Asians are overrepresented. Faculty (14%) and staff (9%) representation falls below the overall targets. Despite the challenge, university and college leaders remain committed to increasing diversity as demonstrated by an expansive set of student and faculty recruitment and retention strategies, which show great promise in enhancing college diversity over the long term.

The location of the university in a state with very little diversity is a key environmental factor affecting meeting diversity-specific benchmarks for the faculty, staff, and student body of the college and the university in general. Still, many recruitment and retention programs focused on underrepresented groups are in place and being created. Pipeline programs appear to be effective. A promising approach is the student ambassador program where masters and doctoral students engage and encourage the very diverse undergraduate program to continue at Iowa for a masters' in public health.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 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.

This criterion is met. The college offers undergraduate public health degrees, academic, and professional master's degrees, academic doctoral degrees, joint degrees, and distance-based degrees. In addition to offering the MPH in the traditional five core knowledge areas, the college offers an MPH general track and an MPH for practicing veterinarians. An MHA is available in both a traditional and executive format. The college offers several joint professional degrees in law, medicine, pharmacy, and veterinary medicine. Table 2 presents the college's degree offerings.

In addition to core coursework in the five knowledge areas, a practicum, and a culminating experience, all MPH students must complete CPH: 4101 Introduction to Public Health and additional concentration-specific coursework.

Students in the community and behavioral health concentration take additional courses in health behavior and health education, community-based participatory research, health communication campaigns, designing and implementing interventions, and research methods in community and behavioral health.

Epidemiology students take courses in surveillance mechanisms, epidemiology data management and analysis, statistical methods, practicing evidence-based public health, and pathogenesis of major human diseases.

The occupational and environmental health program requires students to take courses that cover occupational health, injury and violence prevention, occupational safety, environmental toxicology, and rural health and agricultural medicine.

Table 2: Degrees Offered		
	Academic	Professional
Bachelor's Degrees		
Public Health		BA, BS
Master's Degrees		
Quantitative Methods		MPH
Community and Behavioral Health		MPH
Epidemiology	MS	MPH
Policy		MPH
Occupational and Environmental Health	MS	MPH
General Track		MPH
Practicing Veterinarians		MPH ¹
Biostatistics	MS	
Clinical Investigation	MS	
Health Policy	MS	
Industrial Hygiene	MS	
Agricultural Safety and Health	MS	
Healthcare Administration		MHA ²
Doctoral Degrees		
Biostatistics	PhD	
Community and Behavioral Health	PhD	
Epidemiology	PhD	
Health Services Policy and Management	PhD	
Occupational and Environmental Health	PhD	
Industrial Hygiene	PhD	
Agricultural Safety and Health	PhD	
Joint Degrees (Combined, Joint, Dual)		
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
UI Graduate College- Urban and Regional Planning		MA or MS/MS (Occupational and Environmental Health)
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)

¹Distance program

²Residential and executive programs

Students in the MPH in policy take courses in health policy, health policy analysis, legal aspects of healthcare, healthcare quality management, health economics, health law, and Medicare and Medicaid policy.

The quantitative methods degree requires students to take additional courses in regression modeling and ANOVA, biostatistical computing, applied data analysis, bioinformatics, experimental design and analysis, statistical inference, and longitudinal data analysis.

MS degrees are offered in biostatistics, epidemiology, clinical investigation, health policy, occupation and environmental health, industrial hygiene, and agricultural safety and health. PhD degrees are offered in the five core areas in addition to industrial hygiene as well as agricultural safety and health.

The college offers several undergraduate to graduate (BA/MPH, BS/MPH, BA/MS, and BS/MS) degrees. The BA/MPH and BS/MPH tracks can be incorporated with any concentration. Students can pursue a BA or BS/MS in epidemiology and a BS/MS in industrial hygiene.

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.

This criterion is met. Students in all MPH programs must earn a minimum of 42 semester credits to graduate. The college has not awarded any degrees for fewer than 42 credit hours in the past three years.

The university's semester system includes 15-week instruction periods. All three semester hour courses have a minimum of 37.5 contact hours per semester. Courses that do not have the required face-to-face contact time meet the credit hour standard by covering the same material in the same depth as the traditional version.

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.

This criterion is met. Students obtain knowledge in the five core areas of public health through successful completion of five core courses, each worth three semester credit hours, for a total of 15 credit hours. Table 3 presents the required core courses. A review of the syllabi indicates that each course provides appropriate depth and breadth of material needed to address the core competencies in each area. No waivers of the core courses are permitted.

Core Knowledge Area	Course Numbers and Titles	Credits
Biostatistics	BIOS: 4120 Introduction to Biostatistics	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
	Total	15

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 students' areas of specialization.

This criterion is met. The MPH degree requires a well-coordinated, planned, supervised, and evaluated practicum for its students. The practicum aims to allow students to directly apply theories and demonstrate competencies from their courses in a public health practice setting relevant to the student's professional interests. Students register for CPH: 7000 MPH Practicum Experience, a three credit, 200-hour field practicum, after completing all core courses and most other course requirements. Students identify appropriate public health agencies in collaboration with their faculty advisors and the practicum course director. Students draft a proposal to produce a specific project-based deliverable for approval by the practicum course director and an approved preceptor from the site. Students may complete the 200 practicum hours over one or two semesters. The practicum course director assists in project development, supports the student, and provides the final grade; the preceptor represents the public health organization, trains students in their roles, and provides feedback to the course director. Students submit a written report and poster presentation following the experience. All MPH students complete the same practicum requirement, including those in the joint degree bachelor and master's degree programs. The college does not permit waivers of the practicum requirement.

To learn about the practicum, students attend a professional development seminar called *Preparing for the Practicum*. They also receive a detailed syllabus for the course describing each step in the practicum process. The syllabus points to the ICON course website, which tracks course progress and includes lists of prior practicum sites and proposals. This course website is immediately available to students upon admission to the program to allow early preparation for the practicum. Students traveling abroad for their experience can obtain guidelines, policies, safety tips, and health insurance from the university's website on international programs.

The practicum course director must approve both the project site and the preceptor. To begin the site selection process, all students meet with their faculty advisors, the practicum course director, or the MPH director to obtain ideas for potential organizations. Faculty advisors support selection of preceptors by

extending the network of options. Students must select organizations based on their professional interests, career goals, and concentrations. The practicum course director advises students to have several ideas in case one project does not come together or get approval. For students who wish to conduct their practicum at their current place of employment, the practicum course director explains that the project must differ from his or her current work activities; these students are also advised to find a preceptor who is not their current supervisor. The practicum course director shared with site visitors that most students find projects without major issues; students who choose to do their project at a great distance from the university have the most challenges because the faculty network may not be as strong from afar.

The selected site must have a practitioner who is qualified to serve as a preceptor to guide the student. During the preceptor approval process, the practicum course director reviews his or her curriculum vitae and communicates directly about the expectations for the role during a phone call. The preceptor must demonstrate project and organizational experience, time to supervise and teach the student, and the ability to support professional development and serve as a role model. The practicum course director further explained that a qualified preceptor must have experience relevant to the student's project in an organization that carries out public health practice. An MPH is a valuable qualification, however, it may not be sufficient without experience.

Preceptors are provided the *Practicum Preceptor Orientation* guide, which includes practicum requirements, preceptor responsibilities, student responsibilities, course director contact information, and evaluation processes and forms.

Using a standard form on the course website, the student drafts a three-page proposal describing the public health problem; the project goals, objectives, activities and competencies addressed, and timeline. Students select two-discipline specific and four cross-cutting core competencies to demonstrate during the project. The student must produce specified project deliverables. Both the preceptor and the practicum course advisor must approve the proposal.

The college has developed systematic approaches for monitoring the students' progress and evaluating their performance, as well as strategies receiving feedback from students on the preceptors and practicum sites. Students report their progress through three posts to the course's online discussion forum, which the practicum course director reviews. Students also complete a midpoint practicum progress report that checks for goal changes, progress toward goals, and whether assistance from the college is needed. In addition to regular meetings with the student, the preceptor completes a midpoint and final practicum progress report. The brief midpoint survey assesses student progress toward goals and work quality, checks on communication with the student, and offers assistance. The follow-up survey assesses student professional behavior, competency attainment, and overall performance. The practicum course director

determines the student's final grade, based on preceptor feedback, the final report, and presentation. To obtain feedback on the preceptor and practicum sites, the practicum course director asks students to share concerns during the experience and to share verbal feedback at the end of the program. Starting in fall 2018, students will complete a written satisfaction survey.

The faculty and student body has created relationships with a wide variety of public health and health care organizations at the local, state, national, and international levels, thus providing a range of practicum experiences that can meet varied student interests. A list of the college's network of public and private agencies includes the Iowa Department of Health, several Iowa and other state and county public health departments, a state hygiene laboratory, the Centers for Disease Control, other universities, hospitals, veterans affairs health care systems, community and/or behavioral health clinics, treatment centers, an asthma education and advocacy coalition, an immigration resource center, research and policy institute, other community organizations, and public health and health promotion organizations.

The preceptor list includes 82 qualified staff from organizations from 2016 to fall 2017, most of whom hold post-graduate degrees. Preceptors hold high level or otherwise appropriate roles in their organizations including executive directors, directors, presidents, professors, state epidemiologists, bureau/section chiefs, clinical directors, health promotion program managers, community health managers, program coordinators, research managers, disease prevention specialists, and health educators.

During discussions with students, a student who finished the practicum spoke positively of her experience finding a placement and applying her coursework. She still maintains contact with her preceptor and states that the organizational relationship is a foundation for the future. A current practicum student expressed that the presentation, supporting materials, and course director were all very helpful in understanding and navigating the process. In addition, further conversations with former and current preceptors shared positive interactions with both students and the practicum course director. They explained how the practicum course director actively found qualified students, assured students' projects fit the agency needs, and even supported one preceptor in working through an issue with a challenging student. Preceptors offered that students came to the projects well-grounded in theory and gave examples of how their projects brought the host agency beneficial deliverables that remain in current use.

Review of practicum projects indicated products highly appropriate for MPH students. Examples include development of a sexual health education program and toolkit to train health educators for university students; development of methods, a survey instrument, and toolkit to evaluate the mental health and substance abuse component of a post-prison reentry program; a qualitative study of Iowa's transition of Medicaid to managed care to inform the advocacy efforts of the managed care ombudsman; an analysis and report on survey results evaluating standardization of a nutrition curriculum pilot in five preschools along with a written proposal for a community garden to address food insecurity; a needs assessment for

gaps in guidelines-based asthma education, followed by a provider education training to address these gaps; and an assessment of the challenges in collecting animal bite data from reporting agencies followed by educational outreach materials and forms to improve reporting.

In addition, the self-study noted that two medical residents had completed projects in both the 2017 and 2018 academic years respectively. These projects appropriately allowed for application of public health competencies.

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.

This criterion is met. The culminating experience for all MPH students is a final paper and either a poster or presentation that demonstrates how students synthesize and integrate their core public health knowledge and skills in a professional setting. MPH students enroll in the culminating experience after completion of the 200-hour practice experience. Students provide a personal assessment of how two concentration-specific and four cross-cutting core competencies are addressed by their practice project and how students are able to take theory into practice. The student must demonstrate through the presentation or poster his or her ability to synthesize competencies and present the synthesis in a professional manner.

Information on the MPH culminating experience is provided in the university catalog and the college's graduate student handbook. The practicum course director evaluates the written report and the presentation or poster, along with an additional faculty member. Students are graded as satisfactory or unsatisfactory for the culminating experience and the practicum together as a single course.

Site visitors reviewed samples of student work from both graduate professional degrees and found them to be comprehensive and appropriate for a master's degree.

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 professional public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).

This criterion is partially met. The college has competency sets at many levels: bachelors, masters, doctoral, and concentration. The MPH program's core competencies are based on the Association of Schools and Programs of Public Health (ASPPH) competencies.

Competencies for the academic degrees (MS and PhD) are developed by faculty in each department using guidelines and trends identified by literature reviews, national organization recommendations, and feedback from alumni and employers. The undergraduate program competencies are based on the CEPH 2016 criteria public health bachelor's degree foundational domains and competencies.

The first concern relates to the lack of differentiation of competencies between the BA and BS in public health degrees. Both undergraduate degrees share one set of competencies with no distinction between the two degree types. While there is acceptable overlap of common knowledge, skills, and abilities, reviewers expect some amount of separation of competencies between a BA and a BS that is reflective of the unique skill set students demonstrate. In addition to the university's natural science general education courses, BS public health students take courses with more of a foundation in science such as biology, chemistry, computer science, microbiology, GIS applications, and other areas. Instead of taking additional science-based courses, the BA public health students enroll in more liberal arts and social science courses such as health economics, anthropology, social marketing, culture and healing, media and health, and social inequality. Curricula between the two degrees is not identical, therefore the competencies should not be identical. Faculty stated the Undergraduate Program Committee did not initially think students in the BA vs. BS would go in different career directions and therefore did not differentiate the competencies. The college's response to the site visit team's report confirms that no action was taken, in part, because this concern has become moot upon adoption of CEPH's revised accreditation criteria.

The second concern pertains to the absence of a set of concentration-specific competencies for the MPH generalist track. Each concentration must have its own distinct set of concentration competencies that reflect the skill set students attain and guide the curriculum. Faculty stated during the site visit that they are planning to phase out this concentration, and the college's response reiterated this intent. The Council will clear this concern upon receipt of appropriate documentation through the substantive change process.

The third concern is lack of depth in competencies for three of the four joint degrees. Through discussions on-site with the MPH Program Committee and other faculty, site visitors learned that some joint professional degree students, i.e., MPH/MD, MPH/PharmD, and MPH/DVM, do not declare an MPH concentration and essentially take a general MPH course of study with no specific coursework beyond the core required courses. Students do not leave the college with a set of concentration-specific skills. While each professional joint degree has three competencies, each developed from the shared credit courses, which are located in the other professional colleges, the competencies are not at a level reviewers expect for a graduate student. For example, students are expected to discuss, describe, understand, and recognize rather than apply their knowledge and skills. The college's response to the site visit team's report clarified that JD/MPH students take one of the college's existing concentrations and attain those competencies and

indicated that the college is developing new concentrations with unique competencies for each of the remaining joint degree programs.

The self-study presents a matrix mapping the core and concentration-specific competencies to required core and concentration courses. All MPH core competencies map to the required core courses, and most concentration competencies map to more than one concentration-specific course.

The fourth concern is the mapping of concentration-specific competencies to the thesis for PhD students. The PhD in occupational and environmental health and the PhD in industrial hygiene map their concentration competencies to OEH 7000: Thesis. The college cannot guarantee that every student will receive appropriate exposure and assessment on this competency because all practicum projects are different. At the time of the site visit, the MPH in quantitative methods mapped one of its concentration specific competencies, "Function as a collaborator on public health projects, taking a leadership role in the design and implementation of projects" to CPH 7000: MPH Practicum Experience. The college's response to the site visit team's report provided sufficient documentation to demonstrate that it has rectified the concern relating to the MPH in quantitative methods.

Graduate students are made aware of competencies through course syllabi, student handbooks, orientation activities, and the college's website. Undergraduate program competencies are available on the college's website as well as course syllabi. Reviewers confirmed that competencies are made available through the various described avenues.

The college uses multiple methods to routinely monitor changes in practice and research for relevancy of core and concentration competencies. As part of the required departmental review process every seven years, competencies are checked for alignment of knowledge and skills necessary for employment upon graduation. Competencies are also reviewed on an ad hoc basis as new developments emerge in various disciplines and as faculty engage in research activities that generate new knowledge. Faculty also review recommendations from national organizations and groups for updates on competencies. The college also gathers input from external stakeholders such as alumni, employers, and advisory boards as a way to assess the changing practice of public health and how students can be prepared to enter the workforce.

As the undergraduate program evolves, the college anticipates making changes to student expectations based on ASPPH and CEPH recommendations. The college plans to use feedback from supervisors in the experiential learning process to determine if additional skills need to be added or reinforced in the undergraduate curriculum.

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.

This criterion is met with commentary. The college evaluates student performance through course assessments, the practicum and the culminating experience, and performance in research experiences. Course assessments include exams, papers, projects, and other class assignments. Mastery of competencies and student progress is monitored by departments and student advisors and varies based on discipline and degree type.

The university requires that undergraduate students earn a minimum of at least 2.0 and a term GPA of at least 1.5 to remain in good academic standing. The college further requires bachelor's degree students to earn a C- or higher on courses that are prerequisites for subsequent courses. The graduate college specifies that master's degree students must have a cumulative university GPA of 2.75 or greater and doctoral students a cumulative GPA of 3.0 or better to remain in good academic standing. The college places additional requirements on MPH students and requires a B- or higher on all MPH core courses to remain in good academic standing.

MPH students are expected to synthesize and integrate competencies in a professional practice setting through the MPH practicum experience. Students are assessed, through a formal written report, on how their selected competencies were applied for the practicum project. As a requirement for the final report, students must attach a template that identifies and discusses how at least two concentration-specific and four core competencies are addressed in their project.

Students also engage in directed self-reflection during their course of study. MPH students must complete a self-assessment survey of their competence on the core competencies during the practicum and culminating experience. Some departments also require their students to self-assess on concentration-specific competencies, however this is not a centralized practice. For example, the Department of Health Management and Policy require students at the beginning of their first semester to complete a self-assessment on the competencies. Students self-assess at least annually thereafter, and a mentoring team monitors this to ensure students are meeting program milestones.

For students in the MS or PhD public health degrees, in addition to completing the various types of coursework assignments, students must also demonstrate mastery of competencies through a thesis, comprehensive exam, a combination of both, or the dissertation (for doctoral students).

The college reports high graduation rates in the master's degree programs. Degree completion for the MPH is 88%, 84%, 86%, and 71% for students entering in the academic years 2012-13, 2013-14, 2014-15, and 2015-16. Students are allowed six years to complete their master's degree. The academic master's degrees also have high graduation rates of 86%, 90%, 83%, and 84% in academic years 2012-13, 2013-14, 2014-15, and 2015-16.

Doctoral degree students have a 10-year maximum time to graduate allowance. The PhD degrees have graduation rates of 80%, 82%, and 50% for students entering in the academic years 2008-09, 2009-10, and 2010-11. The 2010-11 cohort will not meet the minimum threshold required by this criterion because the attrition rate is 45%. Students in the 2011-12 and 2012-13 cohort both have an attrition rate of 36%, while high, it is still within the CEPH threshold for doctoral degrees, and these groups of students have yet to reach the maximum time allowed to graduate.

The first bachelor's degree cohort matriculated in academic year 2016-17. The college has not graduated any bachelor's degree students and do not expect to report on this outcome measure until 2020.

The college uses several methods to gather employment data from graduates up to one year post-graduation. Data is captured at time of graduation and afterwards through avenues such as LinkedIn, Facebook, and a student's faculty advisor. Results from the college's efforts show high job placement rates across the graduate degrees for the last three years. MPH graduates have job placement rates of 96%, 96%, and 97% from 2014-2016; MS students have job placement rates of 90%, 95%, and 95%; and job placement rates for the PhD degrees are 90%, 100%, and 100%. The undergraduate program has not graduated any students yet and therefore has no data on post-graduation outcome measures.

The college assesses its graduates' abilities to perform competencies in the workplace through a survey, focus groups, and interviews. Alumni were questioned regarding their perceptions of how well their education prepared them for the workforce. The questions were adapted from the MPH core competencies. Respondents strongly agreed that the college prepared them in competency areas such as valuing and engaging community partners, written skills, conveying complex information to public health audiences, implementing and evaluating public health programs, and oral communication skills. Conversely, over half of the respondents answered that they did not feel prepared in the area of conflict resolution. Employers provide feedback to the college via small group meetings with the MPH director as well as interviews. College employers indicate that graduates have a high technical ability in the core public health areas but would like their employees to have additional skills in managerial aspects of public health. The college also received input that upon graduation, students should possess presentation skills, the ability to collaborate as a team member, and leadership skills. As a response, the college created optional professional

development seminars on presentation skills and leadership ability. Discussions on-site with alumni and employers confirmed these findings.

The commentary pertains to the response rate of the alumni survey. While the response rate of 38.3%, in combination with other data sources, has allowed the college to extract actionable information, future survey and input responses should not be less than that rate for meaningful data. The college has hired a program assessment and evaluation coordinator who will be developing a more systematic process to assess students, alumni, and employers. Discussions on site with the coordinator indicate the college is looking to use more efficient and targeted methods to obtain feedback from alumni and to shorten the current surveys.

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.

This criterion is met. The college offers one graduate professional degree, with two subtracks, other than the MPH, the Master of Health Administration (MHA) and the Executive MHA (EMHA). The MHA is a 60-credit hour program that prepares students for executive positions in a variety of health care organizations through an emphasis on patient-centered care and strong business skills. This lock-step program has 51 required credit hours and nine elective credit hours. There is a required summer internship and several alternatives for the culminating experience. Both the MHA and the EMHA are accredited by CAMHE.

The EMHA is a 45-credit hour program designed for students with an advanced professional degree or five years of healthcare related experience. There is no elective course work. The rationale for the EMHA program is to offer practicing health administrative personnel with five years of experience an opportunity to enroll in the MHA program without leaving their professional employment. The program's instruction spans 23 months with EMHA courses taught one at a time by primary and adjunct faculty on the Iowa City and Des Moines campuses. The two campuses are connected using Zoom video conferencing software so that students and faculty simultaneously interact with one another live. The EMHA program uses the same core competencies and evaluative process as the MHA. The cumulative experience is described in Criterion 2.5.

MHA and EMHA students acquire an overview to public health core knowledge through three courses: CPH 6100: Essentials of Public Health, HMP 5230: Managerial Epidemiology, and HMP 4004: Introduction to Healthcare Organization and Policy. The first course is updated to cover the introductory knowledge areas outlined in the 2016 CEPH criteria and includes information on public health history, philosophy, values and core functions, the ten essential services, the social determinants of health, the five core disciplines, and future public health challenges. The second course provides students with an understanding of epidemiologic tools applied to healthcare management. The final course covers population health topics related to the determinants of health and the roles of healthcare and public health in affecting health outcomes of a population. Students also complete HMP 5320: Analytics for Healthcare Management, which includes concepts of probability and statistics.

The MHA and Executive MHA have different culminating experiences. The culminating experience for the MHA includes the required internship between the first and second semesters and two additional courses at the end of the program, HMP: 6150:0001 MHA Integrative Capstone and MHP: 6355 Leadership of Healthcare Organizations. The former course integrates competencies from the programs four competency domains: leading people, managing resources, setting strategic direction, and improving population health.

The second course places emphasis on emotional intelligence as reflected in subdomains of leading people through professionalism and team development.

The executive MHA culminating experience is the required course, HMP: 6150:0002 MHA Integrative Capstone. The course contains four elements that includes meeting during the fall and spring semesters, classes not covered in other courses, completion of an Ifolio, and a project that addresses a complex health administration or leadership challenge. As part of the project, students write a paper that addresses all seven executive MHA key competencies. Students present their project to a departmental faculty panel and their preceptor.

2.9 Bachelor's Degrees in Public Health.

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.

- **the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease**
- **the foundations of social and behavioral sciences**
- **basic statistics**
- **the humanities/fine arts**

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).

- **the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society**
- **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**
- **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**
- **the underlying science of human health and disease including opportunities for promoting and protecting health across the life course**
- **the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities**
- **the fundamental concepts and features of project implementation, including planning, assessment and evaluation**
- **the fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries**
- **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**

- **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).

Students must demonstrate the following skills:

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

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.

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:

- **advocacy for protection and promotion of the public's health at all levels of society**
- **community dynamics**
- **critical thinking and creativity**
- **cultural contexts in which public health professionals work**
- **ethical decision making as related to self and society**
- **independent work and a personal work ethic**
- **networking**
- **organizational dynamics**
- **professionalism**
- **research methods**
- **systems thinking**
- **teamwork and leadership**

This criterion is met. The college offers a BA and BS in public health and enrolled its first cohort in fall 2016. Both BA and BS students complete eight required core courses, each equivalent to three credit hours for a total of 24 credits. The courses are as follows: CPH 1400: Fundamentals of Public Health, CPH 1600: Public Health Science: Inquiry and Investigation in Public Health, CPH 2400: The U.S. Health System in a Global Context, CPH 2600: Introduction to Public Health Methods, CPH 3400: Health, Work, and the Environment, CPH 3500: Global Public Health, CPH 3700: Methods for Program Implementation and Evaluation, and CPH 4999: Public Health Capstone: Practice of Evidence-Based Public Health. Students also take three required one-credit seminars. Both bachelor's degrees take an additional 21-26 credit hour courses in public health required courses, 10-15 credit hours in public health elective courses, the experiential learning requirement, and 45 credit hours in general education courses. Undergraduates must maintain a minimum of a 2.0 GPA and earn at least 120 credits to be considered for graduation.

Through a combination of general education and public health requirements, undergraduate students are introduced to the four general domains of science, social and behavioral sciences, math/quantitative reasoning, and humanities/fine arts. Students satisfy these domains through general education courses such as human biology with a lab, calculus, statistics, social and psychological determinants of health, fundamentals of public health, art and visual culture, and introduction to music.

Undergraduate students receive instruction in the nine foundational domains as defined by CEPH. Each foundational domain and corresponding subset of topic areas are introduced and covered by more than one course in the required public health curriculum. Students receive additional reinforcement of foundational domains through BA and BS required courses. Since the first cohort of undergraduates matriculated in fall 2016, the curriculum has not been taught in its entirety. Faculty expect that by the end of 2019, all of the required courses will have been taught.

Students demonstrate their attainment of skills in public health communication and information literacy. Various assessment methods are used in the public health communication skill area such as a recorded presentation, writing assignments, a final course paper, group wiki projects, and case study assignments. The information literacy skill area is assessed through a major project in CPH 1400: Fundamentals of Public Health, which is the final paper and presentation. Students must produce a final paper that reviews a public health issue and applies the socioeconomic framework to identify possible interventions and solutions. The report must also include a full literature review. Other methods by which students are assessed on information literacy attainment are group wiki projects, smaller writing assignments, and problem sets.

Undergraduate students must complete an experiential and cumulative activity. Students must choose at least one of the following experiential activities: public health research, public health internship, global learning project, or a service learning project. The undergraduate program director informed site visitors that only a handful of students have completed the experiential activity since the first cohort enrolled in fall 2016. None of the undergraduate students have completed the capstone yet. Faculty anticipate offering the first capstone course in fall 2019. The capstone is still under development, however it was described to site visitors as group learning through a semester-long project that incorporated skills and competencies taught throughout the undergraduate curriculum.

All undergraduate students are exposed through various methods to the 12 cross-cutting concepts. The majority of exposure is through the undergraduate curriculum in courses such as CPH: 1400 Fundamentals of Public Health, CPH: 2050 Second Year Seminar, CPH: 3500 Global Public Health, and CPH: 2600 Introduction to Public Health Methods. Additionally, the college offers co-curricular experiences that expose undergraduate students to the cross-cutting concepts that include guest lecturers, presentations in the college spotlight series, and career seminars.

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.

This criterion is not applicable.

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.

This criterion is met. The college offers 14 academic degrees; seven each at the master's and doctoral levels. All students in the academic degree programs are required to take both EPID 4400: Epidemiology I: Principles and CPH 6100: Essentials of Public Health to ensure familiarity with the basic public health principles and applications of epidemiology. Students have the opportunity to take courses in other areas of public health outside of their specialty. Review of course syllabi indicates that there is appropriate breadth of public health content.

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

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.

This criterion is met. The college offers seven doctoral degrees, of which five are in the core areas of public health, as shown in Table 2. There is extensive doctoral-level coursework available for all programs.

Most doctoral students are supported by research or as teaching assistants and have the opportunity to obtain additional forms of support in specialized fellowships, scholarships, and dissertation funding. The college and departments attempt to provide travel funds to attend and present at professional meetings in addition to research-related travel expenses. The college did note that due to the era of declining funding there are fewer assistantships available, but faculty use every method available to connect doctoral students with financial resources.

Enrollment in the agriculture safety and health and industrial hygiene programs is very low, however through discussions with faculty, reviewers learned that the department considers the size of the concentrations appropriate. The smaller concentrations were created as part of a large training grant with specialized areas of focus.

Twelve of 93 total doctoral students graduated in the past year with a combined program graduation rate of 80%. Despite the large enrollment numbers in concentrations such as biostatistics and epidemiology, it appears that doctoral students progress through the program in a timely manner.

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.

This criterion is partially met. There are eight joint degrees listed by the college: four at the undergraduate level offered with other liberal arts colleges, and four at the graduate level offered with professional colleges at the university and Iowa State University. A maximum of 12 credits are available for sharing and must be taken as program electives. Students take the required public health core courses and are not permitted to share those credits with the degree outside of the college.

The college has an MOU with three liberal arts colleges in the state, Coe College, Cornell College, and Grinnell College. Qualified undergraduate students at one of these liberal arts colleges (along with undergraduates at the university) are able to enroll in MPH courses during their senior year. Students may choose any MPH concentration and are still expected to meet the same expectations as a direct admit graduate student. Students that pursue this joint degree are able to earn a BA/BS and MPH in five years.

The concern relates to the lack of an organized public health curriculum for three of the four joint degree professional students, i.e., MPH/MD, MPH/PharmD, and MPH/DVM. Faculty described to site visitors that that joint degree graduate students do not declare an MPH concentration and essentially take a general public health curriculum beyond the core courses, with course input provided by their advisor. While the coursework approved to count for both degrees is verified as being public health and appropriate for an MPH, the student's plan of study of somewhat ad hoc and not consistent with standalone MPH concentrations.

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 or correspondence education course or degree is the same student who participates in and completes the course and degree and receives academic credit.

This criterion is met. The college offers one distance program, the MPH for practicing veterinarians, as shown in Table 2. The MPH for practicing veterinarians is offered in collaboration with the Iowa State University College of Veterinary Medicine and has existed since 2007. Students participate in two, two-week summer sessions, one on each campus, with the remainder of courses available through distance learning using the Iowa Courses Online (ICON) management system.

The MPH for practicing veterinarians is offered to provide working veterinarians an opportunity to enroll in an accredited MPH program while continuing their professional practice. The need for the program results from the emphasis in public health on preparedness in the areas of zoonotic diseases, food security, and foodborne diseases that arise in the economic activities in the state of Iowa. Program enrollment fluctuates between 24-26 students on a yearly basis.

The administrative and student support is the same as that provided to on-campus students. These support services include but are not limited to program faculty, the academic program directors, practice course directors, educational media coordinator, library liaison, and IT personnel. Based on conversations during the site visit, faculty and students view these services as appropriate and sufficient.

For the practicing veterinarians concentration, the required coursework is the same as that for other MPH students, the core competencies are the same, but students take a distinct set of concentration courses only offered to their concentration. Students also complete the practice and the culminating experiences for the MPH degree. There is no difference between academic standards, student monitoring, and evaluation between the traditional MPH degrees and the online degree.

The MPH program verifies student identity by providing each student with a unique username and password. The program also uses secure proctoring with in-person proctoring or the online ProctorU service. Finally, faculty meet personally with students during the two, two-week summer sessions and get to know the students personally.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The college has a vast research enterprise. It is funded at just less than \$40 million per year for the past two years among primary faculty. There are 55 primary investigators (PI) among the college's 79 primary faculty. Faculty collaborate on an additional \$23 million in annualized research expenditures, enhancing the environment for discovery and expanding mentor opportunities for students. Indirect cost recovery was \$9 million in 2017. College administrators explained that current university funding model allows for budget adjustments based on a three-year rolling average of approximately 18% of the total facilities and administrative cost recoveries. In the new budget model, approximately 60-70% will be attributed to the college.

Many diverse funders sponsor work at the college including NIH, HRSA, CDC, subcontracts from other universities, and private foundations. The college has particular strengths in epidemiology, public health practice, health services management, environmental and occupational health, and biostatistics research. It is highly collaborative across campus, nationally, and internationally.

There has been a fair amount of variability in research funding in the last seven years with a major impact on the bottom line for the college. However, faculty are continuing to do high-quality research that is frequently cited and are engaging both the community and students in their work at a very high rate. The college has a comprehensive plan in place for training graduate students in research as well as training students in research ethics. The college offers research coursework for undergraduate engagement in research and numerous research methods courses for graduate students. The college also offers pilot funding opportunities for student-led research through one of its centers.

The college has 22 ambitious targets for research, though in some cases has not reached those targets. Recent retirements and relocations of senior faculty have had an impact. Junior faculty are submitting a high volume of proposals that are likely to be for lower funding levels than those of senior faculty but that are appropriate for their development as independent scholars. The college and university administration stated to site visitors that they are satisfied with progress toward their ambitious goals.

The research infrastructure at the university and in the college is impressive and responsive to the needs of the faculty and students. There is a mechanism in place to assure that the research proposed by faculty is aligned with the missions of the college and university.

3.2 Service.

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

This criterion is met. Grounded in the college's mission and values of community and responsibility, the college demonstrates a strong commitment to and culture of service from both faculty and students. The college encourages service through an organizational infrastructure that enables community outreach, faculty promotion and tenure policies that require service, and classroom and extracurricular opportunities for student service. Faculty members serve the profession and practice of public health through a broad array of service activities that demonstrate notable national leadership in the field, while maintaining a commitment to the state of Iowa and surrounding local communities.

From 2016 through March 2018, 71 faculty have participated in 548 unfunded activities that fit the definition of service. Each faculty member completed an average of 7.7 activities. One-third of the 548 activities involve service on national boards, committees, and professional associations. Twenty-two percent of the activities involve serving as a peer reviewer, journal editor or *ad hoc* reviewer for multiple peer-reviewed journals, scientific reports, or books on a range of topics such as rural health, environmental toxicology, occupational hygiene, aging, health behavior, or statistics. Another 19% includes faculty service on advisory panels, study sections, or review panels to review grants for professional associations, to monitor studies, or to develop research standards for national government funding agencies (e.g., NIH, NHLBI, CDC, USEPA, NIOSH). Also, at the national level, another 4% of service activities provide consultation, testimony, or technical support to other universities, national government agencies (e.g., the White House, USDA, US Department of Defense), or associations.

In addition to national service to the profession, the college has a strong state-level service presence. Nine percent of faculty service activities involve service on state boards, committees, or professional associations. Faculty members advise state government agencies such as the Iowa Departments of Health

and Transportation and the Iowa Governor's Conference on Public Health. The college supports local public health practice particularly in cities and counties surrounding the university. Another nine percent of its activities involve advising or volunteering for community-based organizations and boards to address specific issues or to do general planning.

Thirteen faculty members have also completed 34 funded activities since fiscal year 2016, receiving up to \$17.3 million for this work. Funded projects serve local and national government agencies, including the state health and transportation departments and the US Departments of Health and Human Services and Agriculture, as well as universities, hospitals, and foundations. Other contracts with the state's department of health, hygienic laboratory, and public policy group include service components. During the site visit, research center directors offered examples of evaluation of state nutrition assistance programs, production of the Iowa health fact book, and other efforts to respond to the analysis needs of state public health agencies.

Both the university and college value service as part of the promotion and tenure process. At the university level, the online University of Iowa Faculty Handbook Tenure and Promotion Policies require a report and peer review of "expected service contributions in the ... community, the State of Iowa, and the profession." The college's procedure also sets this same requirement, and each department provides specific details on its own expectations, which vary in the type and amount required. In general, the specific departmental guidelines consistently emphasize community to international level service to the profession (e.g., journal peer review/editorial boards, study sections, professional association leadership and participation on taskforces) and service to the state of Iowa. Faculty members are expected to spend 25% of time on service-related activities.

When asked about the value of faculty service in the promotion and tenure process, faculty members emphasized that research, service, and teaching are equally weighted because service is a key part of the college's public health mission. In a specific example, a faculty member up for tenure described how serving the data analysis and reporting needs of the state through her role with Iowa Cancer Registry is a critical and expected part of her job even through the contract does not directly cover this work.

The college supports and provides opportunities for student service by planning service activities, supporting student-led organizations, including students in the faculty's funded service projects, and by offering service-learning courses. Since 2016, the college has organized service activities at various local non-profits, such as Habitat for Humanity, food shelves, or free medical clinics. During the site visit, students asserted the value of these projects in hands-on learning about public health as well as offering fun team-building activities. The Graduate Student Association plans and sponsors service events such as an Earth Day education event for kids at a park, a fundraiser for an environmental education nonprofit organization,

and a blood drive. During the site visit meeting with students, a community and behavioral health student added that she is the service chair who plans activities in Iowa City for her department-specific student organization.

Five faculty members have engaged students in eight of their 34 funded service activities since 2016. These students have worked on issues such as healthy food retail interventions, non-motorized traffic monitoring, child passenger restraints, workforce health, and rural health policy. In addition to these college-sponsored service opportunities, many students choose to volunteer at non-profit organizations, such as hospitals or medical clinics, Planned Parenthood, or the Humane Society, based on their own initiative and interests.

Lastly, the college incorporates service learning into courses. For example, community and behavioral health students may take CBH 6220: Health Communication Campaigns. Students are required to develop a health education campaign in partnership with the City of Iowa City. Undergraduate students may choose to take CPH 3750: Undergraduate Service Learning in Public Health as part of their experiential learning requirement.

To evaluate the success of its service activities, the college has a set of six measurable objectives for faculty service and has performed well for the last two years. In 2017, the college exceeded three of its four professional service objectives which are: 1) 85% of primary faculty serve as peer reviewers or editors; 2) 60% of primary faculty serve on national or international boards or professional associations; and 3) 20% serve on state boards or professional associations. The college also exceeded one of its two measured service objectives, 15% of primary faculty provide consultations, testimony or technical support. No measureable objectives have been set for student service to the profession or community.

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.

This criterion is met. As part of the strategic plan, the college aims to provide “strong training and education programs for practicing professionals” by providing non-degree continuing education activities and collaborative training for identified needs. Two federally funded regional centers run by the college support offering these activities. Since 2015, these institutes have offered 181 training programs, more than doubling from 33 in 2015 to 79 in 2018. In addition, since 2015, nine faculty members have offered 13 funded continuing education activities. Workforce development activities reached over 60,000 participants from 2015 to 2017. Major topics include emergency preparedness, occupational health, agricultural safety, rural health, and health care quality improvement. The college also offers four certificate programs to current professionals in public health practice who want to expand their skills.

Key organizations in the college's infrastructure develop and lead workforce development programs. The college has funded and established the Institute for Public Health Practice (IPHP) to improve the public health system and strengthen the public health workforce through community collaboration and multi-sector partnerships to provide training and technical assistance. This flagship workforce development organization for the college aims to 1) assess education and training needs; 2) plan training programs offered in multiple methods; 3) implement faculty-student projects and field placements; 4) evaluate workforce trainings; and 5) support the college in advancing practice. Since 2001, the IPHP has housed and led the Midwestern Public Health Training Center (MPHTC). Supporting IPHP objectives, MPHTC is one of ten federally funded agencies that coordinate public health workforce development activities for the region including Iowa, Kansas, Missouri, and Nebraska. The associate dean for academic affairs directs these institutes.

In addition to MPHTC, federal funding has been a key factor in creation of centers that conduct workforce development. The college houses five other research-funded centers that offer workforce training and continuing education. The Heartland Center for Occupational Health and Safety provides continuing education, graduate training, and outreach to the four-state region with a focus on agricultural safety and occupational health. The National American Indian and Alaska Native Addiction Technology Transfer Center focuses on training for the treatment and prevention of substance abuse in these communities. The federally-funded Great Plains Center for Agricultural Health is one of 11 national centers, which provides both hands-on and distance-based trainings to adopt best practices for the prevention of agricultural worker injury and illness. The Healthier Workforce Center of the Midwest is a collaboration among the college, Washington University, and the Nebraska Safety Council. As one of six Total Health Worker Centers, its outreach facilitates the adoption of best practices to promote employee health and injury prevention.

Rather than a systematic, overall approach to needs assessment, the self-study explains that the college conducts workforce needs assessments through multiple methods such as surveys, end of training evaluations, focus groups, interviews, and advisory board input through its several institutes and centers. In conducting assessments, the college's centers collaborate with different stakeholders such as state and local health departments, community-based organizations, businesses, and associations. As an example, through conversations with stakeholders, the MPHTC learned about educational needs that led to the creation of training videos. The MPHTC also conducts assessments for local public health departments to identify workforce training opportunities. In a second example, the Institute of Public Health Research and Policy conducted a mixed-method needs assessment related to a state public health database for a contract with the Iowa Department of Public Health. This led to a training program for state and local health department staff. The Heartland Center for Occupational Health and Safety collects course evaluations and needs assessments after each event to guide its own future conference themes and workshop topics and the conferences of other partners.

Several policies, practices, and partnerships support workforce development. As the college's primary organizations for offering workforce development, the IPHP/MPHTC hires staff with skills in instructional design and media specialists such as videographers. The organization aims to provide distance-learning training opportunities in order to expand its reach. The group has invested in the IPHP learning management system, through which it tracks and provides online trainings, registrations, course evaluations, and pre-post tests. IPHP is currently creating a data warehouse to allow analysis across the many projects. During the site visit, IPHP leaders explained the organization both collaborates with and shares these resources with other organizations in their workforce development activities.

The college offers seven non-degree public health certificate programs with varying lengths; three are aimed at current university students, but the other four are open to wider audiences. Certificate courses are the same courses offered to masters' students and certificate participants take these classes alongside them, assuring rigor in their development and review. The college's website clearly posts the admission, course, and grade requirements for successfully completing each certificate program. The general public health certificate is targeted toward professionals working in public health practice. Three additional workforce development certificate programs are targeted to those who already have a clinical degree or other professionals with specific learning interests. These certificates are the agricultural health and safety certificate, the translational and clinical investigation certificate, and the new health care management certificate. The following three certificate programs only accept current university students: the emerging infectious disease epidemiology certificate, the biostatistics certificate, and the undergraduate public health certificate.

The college has seen a decline in the number of enrollees in the graduate certificate in public health. As of 2018, 32 students were enrolled in a certificate program, a 33% decline since 2016. When asked about possible reasons for the enrollment drop during the site visit, the associate dean for academic affairs explained that, at least for the public health certification, more students have opted to take the entire masters' program part-time.

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.

This criterion is met. The college's faculty members have the academic background and experience to support the college's instructional programs, research activities, and service initiatives. Only a limited number of additional faculty are used in any of the departments to support the extensive and highly qualified primary faculty.

The self-study document identifies 77 tenured, tenure-track, and non-tenure track primary faculty members and 16 adjunct faculty members who constitute 2.2 FTE faculty. All but two of the primary faculty has instructional responsibilities, and these two individuals have extensive administrative roles. Only two of the primary faculty do not hold a doctoral degree; both are in the Department of Health Management and Policy, and both have a master's degree. Of the adjunct faculty, four individuals hold a doctoral degree in public health. Each of the additional faculty has a specific instructional role, especially related to technical areas such as veterinary science. Clinical faculty provide the college with depth in practice experience in all the disciplines, especially health management and policy. The 15 faculty who hold the MPH degree amplify the practice experience of the faculty.

Primary faculty hold the statuses of tenured (43), tenure-track (19), and non-tenure track (16). These statuses are spread relatively evenly across the departments, with the largest number of faculty in community and behavioral health holding the status of tenure-track. The non-tenure track faculty are primarily in instructional and service roles. Primary faculty hold the ranks of professor (29), clinical professor (6), associate professor (16), clinical associate professor (3), assistant professor (17), and clinical assistant professor (6). Again, the spread of faculty across the departments by rank is relatively equal. The distribution of faculty by status and rank provides the college with experienced academic leadership in all areas allowing the opportunity for junior faculty mentoring and availability of established research and service expertise.

The college tracks 15 performance outcome measures associated with faculty qualifications. The measures are various research and service activities. For example, the college has established a target of 500 publications in peer-reviewed journals per year. For the past three years faculty have published 449, 453, and 427 articles. Another performance measure is the percent of primary faculty providing service as members of community-based organizations, community advisory boards, or other groups. The target is 15%, and in the past two years, 19% and 18% of primary faculty provided service in the described capacities.

4.2 Faculty Policies and Procedures.

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

This criterion is met. Faculty recruitment, appointment, and promotion policies and procedures are well established and publicly available. Faculty development resources are in place, and there is a clear evaluation process for instruction. A few faculty members who had recently completed the tenure/promotion process or are in the middle of it described to site visitors the support from the college in areas that include regular mentoring meetings, mentoring plans, annual reviews, and clear policies and procedures.

Faculty appointment is typical of the health sciences and includes an option for tenure-earning potential with a focus on research that includes extramural salary support of 50%. The candidate initiates the promotion and tenure process through notifying the DEO of their intent. As described in Criterion 1.5, the departmental consulting group and the collegiate consulting group review the dossier and make recommendations to the dean, who in turn makes a recommendation to the provost.

The college establishes various programs such as faculty mentoring and development, leadership development, and trainings for new DEOs and assistant or associate deans. The college continually evaluates the effectiveness of the faculty training programs and updates them regularly to align with current practices and policies. The university also offers additional resources through the Center for Teaching. Faculty described to site visitors the many resources the Center for Teaching offers as well as examples of trainings they have taken through the center.

Every course must solicit teaching evaluations from students using an online product from CollegeNet called ACE (Assessing the Classroom Environment). ACE uses a standard set of questions, but each department has the ability to add additional questions. Faculty, DEOs, and the associate dean for academic affairs all have access to the ACE results. If the student evaluations are low in a particular course, the associate dean for academic affairs will meet with the DEO and course instructor to discuss the course. Either improvement will be made to course content or the course instructor will need further training, if necessary. Faculty are also evaluated on instructional effectiveness through peer evaluation that includes classroom observation, syllabi review, and review of other materials. The Executive Committee revised its peer evaluation policy to include more regular evaluation. Assistant professors require one peer review per year for each course they teach.

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.

This criterion is met. Only in existence for three years, the undergraduate program has already seen a steady increase in applications and enrollments from 2016 to 2018. In contrast, the number of master's student applications is declining but appears to be offset by increasing numbers of doctoral student applications over the last two years. The decline in applications and enrollment occurs across all six MPH degree programs, five MS degree programs, and the agricultural safety and health PhD degree. Faculty members are developing new strategies to recruit MPH students including using the undergraduate program as a funnel to the master's programs.

In addition to the specific and deliberate approaches taken to recruit a diverse population described in Criterion 1.8, the college appropriately tailors recruitment strategies for the MPH and BA/BS programs. For

the undergraduate degree, the college collaborates with the university Office of Admissions on regional college fairs. Students also participate in campus visit days. The college recently implemented a student ambassadors program, in which students who represent the program reach out to prospective students through email, social media, or outreach to high schools. Site visitors spoke with a practitioner with a daughter in the undergraduate program who described how the undergraduate staff and faculty met with her daughter several times to answer questions and allow shadowing opportunities. The practitioner was very complimentary about faculty taking their time to personally make sure the degree was the correct fit for her daughter.

The college has multiple techniques to recruit graduate students. On campus, the college holds information fairs for undergraduates at the university about public health and its degree programs. Faculty members attend these on-campus fairs as well as regional “This is Public Health” fairs. The college has invested in systems to track and follow up with students in their process of expressing interest in the college so that they receive timely and helpful follow up. Admitted students are also invited on “admitted student day” to visit the college and to reinforce their decision to attend the college. Finally, the college aims to provide funding to all graduate students in the form of assistantships, scholarships, and fellowships to increase student recruitment and admission.

At the time of the site visit, reviewers identified a lack of consistency among the various admission and recruitment materials, the website, and the online university catalog. Reviewers found a multitude of discrepancies in areas such as admission requirements for the undergraduate and graduate programs, course elective offerings, and even the advertisement of joint degrees and certificates. For example, the Health Management and Policy department’s recruitment material lists a joint MHA in regional planning, but this degree is not on the college’s website nor included in the self-study document. At the site visit, the director of the MHA program explained that this joint degree is being phased out and has not enrolled students in a few years. Another brochure lists an interdisciplinary program of a human toxicology program that is not described on the website or in the self-study. Faculty explained that this is not an official program of the college but has leadership from individuals within the college. Reviewers cross-checked the university catalog and college-provided material for degree course requirements and found misalignment between the two for the PhD degrees. Faculty and staff explained that the undergraduate materials are updated every six months, while the graduate materials are updated annually, but on different cycles. The college agreed that some inconsistencies should be addressed, while some can be explained as reasonable. The college’s response to the site visit team’s report demonstrated that these inconsistencies had been rectified in the months that followed the site visit.

The recruitment process appears to successfully encourage applications of high quality students for both the BA/BS undergraduate degrees. Applications for direct admissions have increased from 126 in 2016 to

200 in 2017 and 2018. The count of standard admissions has nearly doubled from 32 in 2017 to 58 in 2018. Nearly all direct applicants were admitted and 20-25% finally enrolled. Two-thirds of standard applicants were admitted in 2017 and nearly all enrolled, mostly as full-time students. Undergraduate students exceed the ACT target and nearly reached the high GPA target.

The number of MPH applications dropped by half from 285 in 2016 to 143 in 2018, while the number of doctoral students has increased from 95 in 2016 to 143 in 2018. Faculty at the site visit offered explanations of competition from the increasing numbers of schools offering public health and the current healthy economy. They further noted that this decline creates an opportunity to think of creative approaches to growing their enrollment, such as the new student ambassador program and the undergraduate-to-graduate degree programs with other colleges. In fact, a few new small colleges have approached the college to offer such joint programs on their own campus. The college enrolled about one third of its masters' degree applicants and 20-26% of its doctoral degree applicants. The college has attracted well-prepared, quality applicants as indicated by almost meeting the 60% target yield rate of applicants who are accepted. Additionally, enrolled students in all master's and doctoral programs exceed the high GRE and GPA targets.

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.

This criterion is met. Undergraduate and graduate students have a dedicated advisor. Graduate students also have a faculty advisor with shared public health interests.

Satisfaction surveys indicate overall satisfaction with advising and career counseling services. Beyond the university's services, the college offers public health-focused networking and career counseling tailored to the needs of bachelors, masters, or doctoral students and to the needs of students with academic or professional degrees. Acting very intentionally on the opportunity for improvement, the college offers more career counseling and professional development workshops through its ongoing extracurricular programming.

For the undergraduate BA and BS degrees, a full-time dedicated undergraduate program advisor works with students upon admission through completion of the program. The college plans to hire a second undergraduate advisor as enrollment numbers grow. The university coordinates a student advisor network and offers ongoing meetings to train and inform undergraduate advisors on policies and other key issues. All undergraduate public health students must meet with the advisor before registering for classes each semester in order to track progress toward their degrees and make adjustments. In addition to working with a staff advisor, students who declare an intention to graduate with honors meet with a faculty advisor and the undergraduate program director to make sure they follow honors program requirements. When

asked about advising, undergraduates spoke very positively of their experiences. One student noted that the undergraduate advisor is accessible and knows all students on a first name basis. In addition, the undergraduate student advisor reported to site visitors that faculty will come to her if they are concerned about a student so that she can reach out to them.

At the graduate level, the college matches students and faculty with similar research interests. During the first semester of enrollment, faculty ask students about their long-term goals and help students draft a plan of study to ensure a systematic approach to graduation in a desirable timeframe. Faculty members also follow up with students throughout semester to make sure that they engage in regular discussions. Students are able to change advisors and are also free to engage with informal faculty advisors. Through discussions on-site, several students described productive, helpful relationships with their faculty advisors that include receiving help not only with class selection, but also with networking and career advice. Dual degree students described help from advisors in selecting courses that work well with both degrees. In addition, many alumni reflected having long-term professional relationships with their advisors well after graduation, which includes both continued mentorship as well as collaborative opportunities.

Faculty members receive training on their role as advisors at the faculty orientation and department faculty meetings. The college's online Faculty Handbook describes faculty advisors' responsibilities. During the site visit, faculty also explained they have a mentoring plan and regular meetings with senior faculty as well as a monthly meeting with the DEO to discuss advising. The university Office of Teaching and Learning offers training on advising in either one-on-one consultations or small group seminars.

To support graduate faculty as advisors, each department in the college employs an academic program coordinator. As a first point of contact for students, these coordinators address routine curriculum and registration questions. They maintain student files, track course enrollment and student performance, assist with registration, and help to recruit and counsel prospective students. When asked about these staff, students shared with site visitors how one coordinator worked with another department to make it easy for the student to attend an outside class, and one coordinator provided administrative support getting signatures from faculty.

The college provides graduate and undergraduate career counseling tailored to the public health degree. At the undergraduate level, the university-wide career center offers career counseling and courses, leadership courses, and experiential education opportunities. More specific to the needs of public health students, the college offers a three-semester career development course that includes a focus on skills needed up on graduation with a public health degree, such as conducting a job search, resume and cover letter writing, interviewing, and applying to master's programs in public health. In addition to these courses,

the undergraduate student advisor also provides public health specific career counseling during meetings with students, the advising website, and a newsletter.

For master's and doctoral students, the university Graduate College provides professional development opportunities and career services. Specific to public health, the college provides career counseling through faculty relationships, networking opportunities, career workshops, and opportunities for job experience. To build students' job-searching networks, faculty advisors connect students with colleagues as well as recommend professional associations and conferences. The college or department also offers students funding to attend and present at these conferences with networking opportunities; in particular, MPH students receive funding to attend the American Public Health Association and Iowa Governor's Conference on Public Health.

With an external grant, the college also offered 80 graduate students a career assessment and discussed how results apply to job searching. Since 2017, the college's Graduate Student Association has planned professional development programs such as alumni panels, workshops on cover letter and resume writing, or networking and job searching, as indicated by the association's meeting minutes.

Graduate student satisfaction with advising and career counseling is assessed with a six-question online survey sent to new graduates. Given low response rates in the 2016 academic year, the college simplified administration so all degree programs receive the same survey and added a gift card drawing incentive. The response rate increased from 52% in 2016 to 60% in 2017. In both years, students indicated the greatest satisfaction with faculty mentoring, guidance from academic advisors, guidance from student services staff, and opportunities for hands-on experience. While still indicating satisfaction, students rated their career counseling and professional development opportunities lower. No survey currently measures satisfaction with the new undergraduate program's advising and career counseling services, but the college's assessment and evaluation coordinator is currently developing one.

During the site visit, faculty members explained that many professional development opportunities were recently developed in response to the needs identified in the 2016 and 2017 survey. Student comments suggest that these efforts have been effective. During the site visit, students described the value of the many Graduate Student Association events as well as of the college's spotlight time when no students have courses so they can attend professional development workshops. Students reported their departments also offer professional development training.

The College of Public Health has a clearly defined process for communicating and resolving academic concerns that is available for students and faculty in multiple places. First, the student should attempt to resolve the issue directly with the faculty member. If the concern is still not resolved, the student may

elevate the issue to the DEO, followed by the college's associate dean for academic affairs. If the issue remains unresolved within the college process, the student may file a formal complaint to the Office of the Provost, which upon review, may lead to charges and a formal hearing. Throughout this process, the university Office of the Ombudsperson is a resource that confidentially answers questions about university policies and offers conflict resolution, mediation, and advocacy for students without fear of retaliation. In the last three years, there have been no formal grievances.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

University of Iowa
College of Public Health

April 25-27, 2018

Wednesday, April 25, 2018

- 8:30 am Executive Session and Additional Documentation Request
- 9:30 am Meeting with Core Leadership Team
Joseph Cavanaugh
Margaret Chorazy
Elizabeth Chrischilles
Lori Cranston
Jeffrey Dawson
Anjali Deshpande
Vickie Miene
Keith Mueller
Edith Parker
Corinne Peek-Asa
Christine Scheetz
Peter Thorne
Tanya Uden-Holman
Thomas Vaughn
Marcia Ward
- 10:45 am Break
- 11:00 am Meeting with Self-Study Committee
Kathy Andrews
Jeffrey Dawson
Cassie Harrington
Amanda Jorgensen
Daniel McMillan
Keith Mueller
Corinne Peek-Asa
Becky Toner
Tanya Uden-Holman
Laurie Walkner
- 11:45 am Break
- 12:00 pm Lunch with Students
Mikaela Mikkelsen
Austin Wu
Ashley Holstun
Kurayi Mahachi
Michael Parisi-Mercado
Vanessa Au
Michael Brumm
Jayson Clinger
Javier Flores
Chelsea Hicks
Danielle Riley
- 1:30 pm Break
- 1:45 pm Meeting with Undergraduate Program Faculty
Rema Afifi
Knut Carter

Margaret Chorazy
Jason Daniel-Ulloa
Jeffrey Dawson
Brandi Janssen
Matthew Nonnenmann
Faryle Nothwehr
Kimberly Williams

2:45 pm Break

3:00 pm Meeting with MS and PhD Program Faculty

Rema Afifi
Ryan Carnahan
Elizabeth Chrischilles
Jeffrey Dawson
Nathan Fethke
Paul Gilbert
Jacob Oleson
Patrick O'Shaughnessy
George Wehby
Brad Wright

4:00 pm Break/Executive Session

5:00 pm Adjourn

Thursday, April 26, 2018

8:30 am Meeting with Faculty Related to Research, Service, Workforce Development

Sato Ashida
Natoshia Askelson
Mary Charlton
Christopher Coffey
Brandi Janssen
Jacob Oleson
Vickie Miene
Edith Parker
Corinne Peek-Asa
Diane Rohlman
James Torner
Tanya Uden-Holman
Laurie Walkner
Marcia Ward

9:45 am Break

10:00 am Meeting on MPH, MHA, and Combined Degree Programs

T. Renee Anthony
Sato Ashida
Margaret Chorazy
Anjali Deshpande
Knut Carter
Dan Gentry
Jeanie Kimbel
Ian Montgomery
Edith Parker
Paula Weigel

11:15 am Break

12:00 pm Lunch with Alumni and Community Stakeholders

Suzanne Bentler
Mara Cheney
Kathryn Crawford
Kaitlin Emrich
John Heinemann
Dave Koch
Todd Linden
Jennifer McDanel

Heather Meador
Jake Riley
Patrick Ten Eyck

1:30 pm

Break

2:00 pm

Meeting with Leadership of the University
Sue Curry
John Keller

2:30 pm

Break

3:00 pm

Meeting with Faculty and Key Staff Related to Faculty Issues, Student Recruitment, and Advising
Rema Afifi
Gwendolyn Archibald
Wei Bao
Grant Brown
Paul Gilbert
Lexie Just
Torrie Malichky
Katherine McCullough
Matthew Nonnenmann
Patrick O'Shaughnessy
Michael Pentella
Kelli Ryckman
Dan Shane
Brian Smith
Sophie Switzer
Kimberly Williams
Xi Zhu

4:00 pm

Break

5:00 pm

Adjourn

Friday, April 27, 2018

9:00 am

Executive Session and Report Preparation

12:15 pm

Exit Briefing

1:00 pm

Team Departs