REVIEW FOR ACCREDITATION
OF THE
SCHOOL OF PUBLIC HEALTH AND COMMUNITY MEDICINE
AT THE
UNIVERSITY OF WASHINGTON

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES: February 14-16, 2006

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# TABLE OF CONTENTS

Introduction ................................................................................................................................................... 1

Meeting of CEPH Criteria .............................................................................................................................. 3

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.A.</td>
<td>Mission and Goals</td>
<td>4</td>
</tr>
<tr>
<td>II.A.</td>
<td>Accredited Institution</td>
<td>5</td>
</tr>
<tr>
<td>II.B.</td>
<td>Organizational Setting</td>
<td>7</td>
</tr>
<tr>
<td>III.</td>
<td>Governance</td>
<td>10</td>
</tr>
<tr>
<td>IV.</td>
<td>Resources</td>
<td>12</td>
</tr>
<tr>
<td>V.A.</td>
<td>Professional Degrees and Concentrations</td>
<td>16</td>
</tr>
<tr>
<td>V.B.</td>
<td>Core Knowledge, Practice and Culminating Experiences</td>
<td>18</td>
</tr>
<tr>
<td>V.C.</td>
<td>Learning Objectives</td>
<td>21</td>
</tr>
<tr>
<td>V.D.</td>
<td>Assessment of Student Achievement</td>
<td>22</td>
</tr>
<tr>
<td>V.E.</td>
<td>Academic Degrees</td>
<td>23</td>
</tr>
<tr>
<td>V.F.</td>
<td>Doctoral Degrees</td>
<td>24</td>
</tr>
<tr>
<td>V.G.</td>
<td>Joint Degrees</td>
<td>24</td>
</tr>
<tr>
<td>V.H.</td>
<td>Nontraditional Format</td>
<td>25</td>
</tr>
<tr>
<td>VI.</td>
<td>Research</td>
<td>26</td>
</tr>
<tr>
<td>VII.</td>
<td>Service</td>
<td>28</td>
</tr>
<tr>
<td>VIII.A.</td>
<td>Faculty Qualifications</td>
<td>30</td>
</tr>
<tr>
<td>VIII.B.</td>
<td>Faculty Development</td>
<td>30</td>
</tr>
<tr>
<td>VIII.C.</td>
<td>Faculty Diversity</td>
<td>31</td>
</tr>
<tr>
<td>IX.A.</td>
<td>Student Recruitment and Admission</td>
<td>31</td>
</tr>
<tr>
<td>IX.B.</td>
<td>Student Diversity</td>
<td>32</td>
</tr>
<tr>
<td>IX.C.</td>
<td>Advising and Career Counseling</td>
<td>33</td>
</tr>
<tr>
<td>IX.D.</td>
<td>Student Roles in Governance</td>
<td>34</td>
</tr>
<tr>
<td>X.A.</td>
<td>Ongoing Evaluation</td>
<td>34</td>
</tr>
<tr>
<td>X.B.</td>
<td>Self-Study Process</td>
<td>36</td>
</tr>
</tbody>
</table>
Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the School of Public Health and Community Medicine (SPHCM) at the University of Washington (UW). The report assesses the school's compliance with the criteria for accreditation of schools of public health. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation and a visit in February 2006 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, teaching faculty, students, alumni and advisory board members, and to verify information in the self-study by reviewing documentation provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

The SPHCM is one of 17 colleges and schools on the UW's Seattle campus and is one of six professional schools within the health sciences center. It was first accredited in 1970 and has been continually accredited since that time. The school's last accreditation review in 1999 resulted in a seven year term, which included submission of an interim report in 2001. Since the time of the last site visit, the SPHCM has undergone a period of strengthening resources, expanding degree and program offerings and solidifying its policies and processes; during the last accreditation review cycle, the SPHCM was under the leadership of an interim dean, and the appointment of a permanent dean shortly after the last site visit provided the opportunity for much of this growth and change.

As the only school of public health in the Northwest, the SPHCM both draws on resources and works to serve a broad geographic area, including Alaska, Idaho, Montana, Oregon, Washington and Wyoming. The school also has close partnerships in UW's immediate community, using the local health department as a training site for students and providing ample professional development opportunities for employees. Among the school's most salient characteristics is its well-developed research program, and the school regularly publishes a newsletter, which is distributed throughout the region, to update practitioners on developments in its research program.

The school enrolls approximately 780 students and employs approximately 200 full-time equivalent (FTE) faculty, making it among the largest providers of graduate public health education in the nation. The SPHCM's extensive list of instructional offerings reflects this size. In addition to two non-degree certificate programs, the school offers more than 30 degrees through its five departments and sponsors joint degrees with a number of other UW academic units.

This report is prepared in two sections. The first, "Meeting of CEPH Criteria," analyzes the school's compliance with the *Criteria for Accreditation of Schools of Public Health, Revised January 2002* and becomes the official report to the university following adoption by the CEPH board of councilors. The second section, "Site Team Observations and Recommendations," is not adopted by the CEPH governing
body and is intended only to offer the consultation and advice of the site visit team to school officials as they proceed with supporting and sustaining the growth and development of the school.
Meeting of CEPH Criteria

Characteristics of a School of Public Health

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

1. The school and its faculty shall have the same prerogatives and status as other professional schools which are components of its parent institution.

2. The school shall function as a consortium of disciplines which addresses the health of the community and focuses on instruction, research, and community service. A school of public health should be a multidimensional university center on community health. The special learning environment of a school of public health shall provide for interdisciplinary communication, development of professional public health concepts and values, and stress problem solving.

3. The school shall provide the focus for a wide array of both academic and professional interests and activities that relate to the health of the public. The school should provide a rich intellectual climate that stimulates and facilitates multidisciplinary exchanges of ideas between academics and professionals. The school should facilitate an environment which stimulates both individual creativity and initiative and collaborative and cooperative activity among its faculty.

4. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the public health areas noted in Criterion V. and must offer education at the masters level sufficient to provide a concentration in each of the five specified areas. The school shall offer the Master of Public Health degree (MPH) and at least one doctoral level degree which is relevant to one of the five specified areas of public health.

5. The school shall plan, develop and evaluate its instructional, research and service programs in such a way as to assure sensitivity to the perceptions and needs of its students and to combine educational excellence with applicability to the world of public health practice.

These characteristics are evident in the SPHCM. The school’s dean reports to the provost on all budget and academic matters, as do the other heads of UW’s professional schools and colleges, and the dean has rights and privileges equivalent to theirs. The school’s organization and size allows it to serve as a central and multidisciplinary source of public health training and research. Its five departments—biostatistics, environmental and occupational health sciences, epidemiology, health services and pathobiology—operate, to a great extent, quite autonomously, yet the school’s governance structure draws constituents from all departments together to forge a centralized mission and identity. This allows each department to focus on developing its strengths and specialties while providing opportunities for information sharing and collaboration. The school has identified a clear and specific set of guiding public health values and has developed steps to ensure that the values are operationalized throughout the SPHCM’s work.
Cross-disciplinary collaboration and interface with the practice community take place in a number of ways. Many faculty members collaborate on research projects across departments, and faculty are extremely active in the university’s interdisciplinary research centers, particularly the Fred Hutchinson Cancer Research Center (FHCRC). Additionally, faculty collaborate with external organizations and conduct community-based research. Many of these projects involve opportunities for student involvement; in fact, the school has offered approximately 200 funded research assistantships to students in recent years. Students also interact extensively with public health practitioners through the practice placement or internship, which are required of all professional degree students. The school’s MPH in Community-Oriented Public Health Practice offers an extensive and integrated exposure to the practice community.

The school’s resources have been supportive of its extensive program of educational offerings, which go far beyond the minimum requirements articulated in the accreditation criteria. As was true during the last accreditation review, however, the school’s faculty resources are highly contingent on research funding. Research funding supports the vast majority of the faculty effort, with an extremely small proportion of faculty effort funded through state sources. The school already faces a challenge identifying funding sources needed to maintain its faculty at current levels, and this challenge will likely increase given the current climate of decreasing availability of federal research dollars. The school is also embarking on a capital campaign to fund construction of a recently-approved dedicated building on the health sciences campus. While this additional space will obviously not be available for some time, it should address another challenge to the school’s resources: the current space allocation results in geographic dispersal of the school’s labs and other resources and makes interaction among faculty and students and development of a sense of community a challenge.

The SPHCM’s curricular offerings and overall educational structure have been enhanced by the implementation of a strategic and systematic planning process. Curricula and educational policies are regularly reviewed in the departments and in school-wide committees that incorporate departmental perspectives. The governance structure, which begins with department-level activity, has allowed productive review activities to flourish. For example, some departments conduct intensive teaching reviews, which incorporate peer review, observation and student perspectives. The SPHCM has procedures in place to survey alumni and regional stakeholders and to incorporate a variety of constituent perspectives into its planning process.

**Criterion I. Mission and Goals**

The school shall have a clearly formulated and publicly stated mission with supporting goals and objectives.

This criterion is met with commentary. The UW SPHCM has defined a clear and concise mission statement, goal statements and objectives for instruction, research and service. The mission statement is published in the catalog of academic programs and on the school’s website. In addition, the dean’s office
addresses matters related to mission, goals and objectives in Updates, a newsletter published twice annually and distributed within the university and to external organizations.

The mission of the SPHCM is to promote population health, prevent illness, disability, and injury, and ensure efficient, effective and equitable health care systems through education, research, and service.

To fulfill its mission, the goals of the SPHCM are to:

a. Educate innovative, effective, and culturally competent public health researchers, faculty, and practitioners.
b. Advance knowledge in the public health sciences through research and discovery.
c. Contribute to sound health policies and increase recognition of the importance of public health through dissemination and community collaboration.

For each of the identified goals, the school has defined objectives, and for each objective, the school has identified quantitative or qualitative measures to track performance. Because the school is succeeding well in achieving goals and objectives, the tracking strategy aims to either ensure that the school maintains its current level of performance or, where appropriate, improve performance by five percent per year.

The school examines the mission and goals and revises them periodically as a part of self-study and strategic planning processes. In addition, the mission and goals are addressed in annual meetings of the Executive Council; regular program reviews conducted by the Curriculum Committee and the Graduate School; student and peer evaluations of teaching; and student exit and alumni surveys.

By way of commentary, the site team endorses the school’s efforts to identify specific targets in the many areas where they currently do not exist and to discover more meaningful measures. For tracking progress in meeting objectives, the school might readily take direction from strategic planning decisions regarding appropriate numbers of enrolled students, minority faculty and adjunct appointments. Also, if, as the self-study suggests, all objectives cannot be measured annually because of time and resource demands, the school may wish to prioritize measures, developing a cyclical timetable for most and reserving annual evaluations only for those areas identified as the most essential or critical for institutional effectiveness.

Criterion II.A. Accredited Institution

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 SPHCM is one of 17 schools and colleges on UW’s Seattle Campus. Figure 1 presents the organization of the university. The university is accredited by the Northwest Commission on Colleges and Universities.
The SPHCM is one of six health sciences colleges at UW. Figure 2 presents the organizational chart for the UW’s health sciences component. The dean of the SPHCM has the same reporting line to the provost as each of the other health sciences colleges and as each of the other 16 colleges at UW. The dean is a full member of the Board of Health Sciences Deans and currently chairs that body.
Criterion II.B. Organizational Setting

The school shall provide an organizational setting conducive to teaching and learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration and shall foster the development of professional public health values, concepts and ethics, as defined by the school.
This criterion is met with commentary. The self-study and discussions during the site visit present a clear picture of an internal organization that is supportive of teaching, learning, research and service. Five departments (Biostatistics, Epidemiology, Environmental and Occupational Health Sciences [DEOHS], Health Services and Pathobiology), incorporate programmatic divisions and interdisciplinary degree programs. Additionally, the school is involved with more than 30 interdisciplinary research centers and institutes. Figure 3 outlines the SPHCM’s organization.

Figure 3. SPHCM Organizational Chart

During the site visit, faculty and administrators noted that plans are underway to create a new department, Global Health, based on a substantial gift from the Gates Foundation. The SPHCM and UW School of Medicine are jointly creating the Global Health department. This will be the second such joint department in the university (the other is a collaboration between Engineering and Medicine). In conjunction with this development, a process will be initiated this spring to dissolve the department of Pathobiology and move its faculty to Global Health.
The organizational structure is highly supportive of interdisciplinary coordination, cooperation and collaboration. There are numerous interdisciplinary training grants, degree programs and concentrations, research programs and other opportunities for scholarly exchanges.

The self-study and discussions during the site visit acknowledge the barriers to interdisciplinary research created by current indirect cost recovery practices, as these practices make it difficult for funds to be shared across departmental or other organizational barriers. Strategies to address this in order to improve incentives for collaboration are under serious consideration.

The site visit team noted and affirmed the school's assessment that some major interdisciplinary programs, including Nutritional Sciences and Social and Behavioral Sciences, which are currently subsumed under existing departments due to budgetary constraints, would optimally have their own departmental homes. Budgetary constraints inhibit the formation of additional departments in the absence of gifts such as the one made by the Gates Foundation to support Global Health.

The school's identified public health values are comprehensive and well stated. In many cases, they clearly influence the school direction. For example, the new MPH in Community Oriented Public Health Practice was developed in response to the value focused on building partnerships between academic public health and communities.

The commentary centers on Value I. Value I, "respect for and inclusion of diverse values, beliefs and cultures in research and teaching" needs further work in order to be fully operationalized. The school's challenges in this area emerged most clearly in discussions with students. Students did not note overt negativity by the faculty as much as an absence of discussions that acknowledge and confront the complexities of public health. Students felt that many courses do not address issues of health disparities, racism etc. Many felt affected by the small number of underrepresented minority students and felt that the environment made it difficult for them to speak up about minority issues in class. One student noted during the group lunch with site visitors, “This group today is the most diverse I have experienced here. Usually I am the only minority in my class.” Exceptions to this were noted for certain programs (eg, the MHA), faculty and courses, but the overall impression from the student perspective is that this school value is not fully understood and embraced.

Alumni also addressed the topic of instruction relating to diverse populations in response to a question about what advice they would provide the school today based on their experiences. “Students need more understanding around health disparities,” commented one alumna, and other alumni reinforced the idea.

The school leadership and some faculty appear aware of the need for efforts to operationalize this value, and the dean has formed a Diversity Task Force, which she chairs, to address the issue. The task force expects to assess the culture in the school around diversity and cultural competence, identify
weaknesses and needs and conduct workshops to help change the culture. The dean indicated that there are other activities and models throughout the university, including faculty workshops and documented best practices, which can be accessed for additional support of efforts to improve in this area.

Criterion III. Governance

The school administration and faculty shall have clearly defined rights and responsibilities concerning school governance and academic policies. Where appropriate, students shall have participatory roles in school governance.

This criterion is met. The SPHCM has a well-developed internal governance structure. Committees have defined and complementary charges, and the structure allows ample opportunity for faculty and students to participate in governance at the school level. Much governance, however, is organized at the departmental level, which creates both an environment of departmental autonomy and variation in policy and procedure.

The School of Public Health Executive Committee (SPHEC) is the primary advisory body to the dean on all issues affecting the school. Members include the dean, associate deans, chairs of each academic department, director of student services, assistant to the dean, school administrator and a student representative. The SPHEC meets monthly for information-sharing and deliberations on matters including budget allocation; policy development as it relates to faculty, research, curriculum and students; strategic planning; and program development. The SPHEC receives, and acts on, recommendations from the other school-level committees and from a variety of contacts with faculty, staff and students. SPHEC members review and modify the school’s operating plan annually during a committee retreat.

Other committees include the Faculty Council, Curriculum and Educational Policy Committee, Practicum Committee, Distance Education Committee, Extended Degree Program Steering Committee, Diversity Task Force, Accreditation Committee and Web Advisory Committee. Both of the latter bodies are ad hoc committees formed to address specific projects. The Accreditation Committee was formed in 2004 to plan and implement the self-study process, and the Web Advisory Committee addresses database, web and technical matters and includes school technology staff members from various departments. The SPHCM has also recently convened an External Advisory Board, with plans for regular, ongoing meetings.

The Faculty Council develops criteria for faculty appointment, promotion and tenure, which must be approved by the SPHEC. The Faculty Council also reviews all appointments at the level of associate professor and above and reviews and makes recommendations to the dean on all promotion and tenure proposals. In addition to administrative and staff ex-officio members, membership consists of one elected faculty representative from each department.
The Curriculum and Educational Policy Committee is the primary forum for discussion and decisions on school-wide curriculum issues, complementing the individual curriculum committees that operate within each department. The Curriculum and Educational Policy Committee’s tasks include reviewing and forwarding for SPHEC approval all proposals for new courses, degrees and programs; establishing standards for course syllabi; reviewing departmental evaluation procedures for teaching effectiveness; overseeing core course scheduling; and approving any changes to MPH courses or requirements. The committee plays a particularly important role in addressing the MPH program, as the MPH program involves required courses from multiple departments. The associate dean for academic affairs chairs the committee, which includes one student representative and appointed members from each department, generally representing the department’s own curriculum committee.

The Distance Education Committee, which includes the associate dean for public health practice and faculty members from all departments, is charged with investigating standards for distance learning delivery. The Extended Degree Program (EDP) Steering Committee, which includes the dean, associate dean for academic affairs, department chairs, EDP director and staff and faculty members with EDP experience, provides a forum for discussion and coordination of the EDP’s mission with the school. The EDP Steering Committee is responsible for this program’s budget allocation, curriculum and educational policy and planning. The Practicum Committee, with administrative and cross-departmental faculty and staff membership, establishes procedures for identifying practicum sites, coordinates practicum requests across departments, plans for evaluation of practica and reviews practicum waiver requests. The Diversity Task Force, chaired by the dean and including cross-departmental faculty, students and staff, will develop and implement a school diversity plan, setting goals and identifying tactics for achieving them.

The External Advisory Board consists of leaders from governmental and community-based organizations as well as private healthcare and industry sites. Members of the External Advisory Board who met with the site visit team presented a number of specific and substantive suggestions that could be useful in guiding the school’s ongoing planning and assessment. For example, several individuals discussed particular topical training needs that have arisen in their field; other individuals discussed a need for the school to develop and emphasize communications approaches to both publicize the school’s activities and assure that public health is represented in governmental policy development and decision-making. In particular, committee members emphasized the need to develop capacity for a clear voice and appropriate participation in media discussions that have traditionally emphasized the School of Medicine over the SPHCM. The committee members indicated that similar discussions had arisen at the initial meeting, and they praised the school’s dean for her openness to, and solicitation of, candid feedback. The External Advisory Board clearly represents an excellent resource for the school. At present, members have little sense of how their work will proceed, but the dean expressed to the site visit team a clear intent to capitalize on the board’s energy and expertise.
While these committees conduct governance at the school level, the school’s decentralized structure emphasizes much decision-making at the departmental and degree program levels. Each department has an internal governance structure, including committees that address curriculum, faculty recruitment and strategic planning. Some departments, such as the large Health Services Department, further organize committees for specific degree programs. The school-wide committees receive feedback and membership from the department and program-level committees, allowing faculty to directly participate in those decisions most immediately pertinent to them while developing consistencies as appropriate at the school level.

Faculty also serve on numerous university-level committees, including committees of the Faculty Senate, the Human Subjects Committee and various university search committees.

**Criterion IV. Resources**

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

This criterion is met with commentary. The SPHCM’s resources include funds from the state of Washington, research grants and contracts, indirect costs derived from research grants and contracts, gifts, library resources, computer resources and space for students, faculty and research facilities. As indicated in Table 1, below, the school’s overall income has undergone very significant growth since the last site visit. From 1998 to 2004, the school’s funding increased 72%, from $43,347,692 to $74,619,538.

### Table 1. SPHCM Funding for 1998-2005

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<td>State general funds</td>
<td>7,323,493</td>
<td>8,406,434</td>
<td>5,572,613</td>
<td>6,998,613</td>
<td>5,637,020</td>
<td>7,327,919</td>
<td>5,394,717</td>
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<td>State Dept. of Labor &amp; Industry Funds</td>
<td>4,879,355</td>
<td>5,310,009</td>
<td>6,305,236</td>
<td>5,179,387</td>
<td>6,664,923</td>
<td>5,889,130</td>
<td>6,008,189</td>
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<tr>
<td>Other UW funds, including RCR</td>
<td>*</td>
<td>*</td>
<td>3,582,115</td>
<td>2,360,077</td>
<td>3,402,687</td>
<td>3,534,886</td>
<td>6,246,722</td>
</tr>
<tr>
<td>External grants &amp; contracts (direct)</td>
<td>30,738,695</td>
<td>35,538,412</td>
<td>42,258,986</td>
<td>44,543,254</td>
<td>50,843,886</td>
<td>52,352,088</td>
<td>56,163,623</td>
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<tr>
<td>Gifts</td>
<td>406,149</td>
<td>470,767</td>
<td>546,835</td>
<td>574,749</td>
<td>751,733</td>
<td>717,607</td>
<td>807,287</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>43,347,692</strong></td>
<td><strong>49,725,622</strong></td>
<td><strong>58,265,785</strong></td>
<td><strong>59,655,912</strong></td>
<td><strong>67,300,249</strong></td>
<td><strong>69,820,749</strong></td>
<td><strong>74,619,538</strong></td>
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* included in state general funds

The state follows a two-year funding cycle, and comparison of state general funds provided in the 2000-2002 and 2002-2004 budget cycles reveals that the growth of state funds was approximately four percent, reflecting only a cost of living increase. State general funds support teaching; however, these funds are only sufficient to support approximately 41 faculty positions and offer essentially no support for operations or staff. Ordinarily, all senior faculty are expected to generate at least 50% salary support from research grants and contracts. When a senior tenured professor receives salary support from extramural
sources, the state funds allocated for that member can support additional non-tenured faculty. This practice has allowed the school to increase its teaching faculty to a total complement of 198.5 FTEs.

Research grants and contracts have largely created the substantial growth of the overall school budget during the past seven years; these revenues have increased 83% in direct costs, representing approximately 85-90% of the school’s total funding. This attests to the excellence of the school’s faculty and research programs. The SPHCM ranks first among the schools of dentistry, medicine, nursing, public health and pharmacy in the amount of external funds that support its operating costs, at 83%. Among this group, the SPHCM ranks second only to the School of Medicine in direct expenditures for instruction and research at $67.8 million.

The school receives Research Cost Recovery (RCR) funds from the university that represent approximately 26% of the total indirect costs that UW receives from SPHCM research grants and contracts. Over 90% of the school’s RCR funds are returned to departments, based on their level of research activity. The dean’s office retains the remainder of the RCR funds to support school-wide initiatives. Additional school funds come from the State Department of Labor and Industries (L & I). These funds go directly to a single department, DEOHS. Approximately one-third of L & I funding supports service, consulting and special field and laboratory studies for the state’s industries and workers, and the remainder supports DEOHS faculty, students, teaching and infrastructure.

A number of faculty receive research support that accrues directly to other UW schools or to affiliated institutions where they have appointments. For example, 40 SPHCM faculty who are based at the FHCRC generated $51,462,854 in grant funding, and faculty based in affiliated institutions such as the Seattle Biomedical Research Institute (SBRI), the Veterans’ Affairs Medical Center, Harborview Medical Center and others generated an additional approximately $15 million in research funding. Though faculty receiving these awards have primary academic appointments in the SPHCM, the school receives no RCR funds from faculty grants at these institutions.

The first area of commentary pertains to the school’s extremely heavy reliance on research funding, rather than state funds, as the means for supporting faculty positions. The site visit team noted with concern the current expectation that most faculty will derive 80% of their support from grants and contracts. This, coupled with the fact that tenured faculty in the school generally receive a commitment of 50% salary coverage from state funds, may limit the school’s ability to recruit new faculty; in fact, the school notes multiple examples where recruitment of desired candidates has been unsuccessful for this reason. Furthermore, there is no direct link between the number of students taught by the school’s faculty and state funds allocated to the school. Thus, state funding is not supportive of efforts to meet the school’s expanding demands for teaching. The SPHCM student body increased from 641 in 2003 to 705 in 2004, and the school’s faculty is increasingly called upon to teach additional students from other schools in the health sciences. The dean is currently engaged in discussions with the new UW president.
and provost about increasing revenue allocations to a level commensurate with teaching obligations. Success of these discussions will be important for the school’s ability to maintain an excellent teaching program while maintaining current levels of students and degree programs. The school’s admirable research and teaching programs may be at risk, based on their high dependence on faculty’s ability to continue to secure grants and contracts in a time of flat or declining federal support for biomedical and public health research.

Faculty numbers have remained constant over the past three years. Table 2 presents student-faculty ratios (SFR) for the SPHCM and its departments. While these ratios are low, the site visit team learned that there is a recognized core of faculty who are more active in the teaching program and in advising student theses. Faculty in the regular professorial track are expected to teach courses and advise and mentor students, while faculty in the research professorial track can, but are not required to, contribute to instruction. Many research faculty do contribute to teaching, especially through mentoring students’ research projects. The school appears to have sufficient administrative and other staff to meet research and teaching needs. The total number of non-faculty personnel is 396, with the largest number of staff in the Health Services department and DEOHS.

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<tr>
<th></th>
<th>Biostatistics</th>
<th>DEOHS</th>
<th>Epidemiology</th>
<th>Health Services</th>
<th>Pathobiology</th>
<th>SPHCM</th>
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<tr>
<td>2003 FTE faculty</td>
<td>36.4</td>
<td>30.1</td>
<td>52.9</td>
<td>55.4</td>
<td>28.0</td>
<td>202.8</td>
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<td>2003 FTE students</td>
<td>75.5</td>
<td>73.5</td>
<td>193.0</td>
<td>263.3</td>
<td>36.0</td>
<td>641.3</td>
</tr>
<tr>
<td>2003 SFR</td>
<td>2.1</td>
<td>2.4</td>
<td>3.6</td>
<td>4.8</td>
<td>1.3</td>
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<td>2004 FTE faculty</td>
<td>34.0</td>
<td>32.6</td>
<td>52.8</td>
<td>56.8</td>
<td>30.0</td>
<td>206.3</td>
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<tr>
<td>2004 FTE students</td>
<td>76.5</td>
<td>81.5</td>
<td>202.0</td>
<td>268.2</td>
<td>45.0</td>
<td>673.2</td>
</tr>
<tr>
<td>2004 SFR</td>
<td>2.3</td>
<td>2.5</td>
<td>3.8</td>
<td>4.7</td>
<td>1.5</td>
<td>3.3</td>
</tr>
<tr>
<td>2005 FTE faculty</td>
<td>34.4</td>
<td>30.9</td>
<td>51.8</td>
<td>55.9</td>
<td>25.4</td>
<td>198.5</td>
</tr>
<tr>
<td>2005 FTE students</td>
<td>77.0</td>
<td>79.0</td>
<td>218.0</td>
<td>282.8</td>
<td>49.0</td>
<td>705.8</td>
</tr>
<tr>
<td>2005 SFR</td>
<td>2.2</td>
<td>2.6</td>
<td>4.2</td>
<td>5.1</td>
<td>2.0</td>
<td>3.6</td>
</tr>
</tbody>
</table>

During the SPHCM’s previous re-accreditation review, Criterion IV was deemed partially met, largely because of the severe shortage of conveniently located facilities. The 1999 CEPH site visit report commented that, while there had been some improvement since a prior site visit, the on-campus space was “…still woefully inadequate for a school that has such an extraordinary reputation.” The school has obtained additional space since the 1999 re-accreditation. The SPHCM now occupies a total of 130,300 net square feet (NSF) of space compared to approximately 107,000 NSF in 1999. This space is almost equally divided between on-campus and off-campus sites. The new university space (approximately 23,000 NSF) occupied by the faculty and students since the last site visit represents a significant improvement, especially with regard to laboratory facilities, but the school’s physical facilities remain dispersed.
The SPHCM has space in the F-wing of the Magnuson Health Sciences Building. Some departments also occupy space in other areas of the Magnuson Health Sciences Building, eg, the Department of Health Services’ space in the H-wing; in other on-campus locations, eg, the Nutritional Sciences laboratories in Raitt Hall; and in several off-campus sites. In fact, the geographic distribution of SPHCM encompasses 13 sites, most of which are off campus. Examples include the Roosevelt Building, adjacent to campus, which houses new DEOHS laboratory and office space; the District Building, three blocks away, which houses some Health Services Department faculty and of the Cardiovascular Clinical Trials Center; and additional locations that are miles from campus. These locations include a variety of office building spaces in downtown Seattle and the Veterans Administration Puget Sound Health Care System, which houses faculty from the Department of Health Services. In addition, over 40 faculty and many doctoral students and research assistants occupy research and office space in the Public Health Sciences building at the FHCRC, and 10 faculty have research programs located at the SBRI. Both the FHCRC and the SBRI are located in the Seattle biotechnology corridor, approximately 10 minutes’ drive from campus, and are served by regular shuttle bus routes.

The school’s geographic spread warrants commentary. The dispersion of the school’s faculty makes it much more time consuming and difficult to facilitate interdisciplinary interaction. For students, the absence of a central space where the majority of school activities can occur necessitates travel to multiple sites to work with faculty. This, in turn, makes it difficult for students to interact with one another and with faculty from different departments and research programs.

The school has been given approval for a footprint on campus, adjacent to the current health sciences building, for construction of a new building of approximately 65,000 NSF of faculty office, teaching and student space. The construction of this new building is a high priority initiative, and the school is working with the university to seek approval to front the funds needed so that work can begin while the school undertakes a full capital campaign. The school’s leadership has also begun to sequester building funds by decreasing the percent of RCR funds distributed to academic departments from the school’s central budget. The proposed building will allow for some continued growth, but more importantly, it should provide an opportunity to consolidate at least some faculty, students and research programs currently housed off-site.

In other domains, the school benefits from UW’s excellent resources. The university provides faculty and staff with centrally managed resources for e-mail and web pages through a computing and communications organization. Students have a separate university-managed system. The university is building a Wi-Fi internet for the entire campus targeted for completion in two years.

The school and each department appear to have the computer resources needed for research, teaching and administration. The SPHCM maintains 10 servers in support of web-based applications and has a secure database for faculty, research grant and student information and provides access through a
secure intranet. Departments are responsible for obtaining and maintaining computer resources for their faculty, staff, and students. These resources are purchased from departmental or grant funds. The university Student Technology Fee program has a competitive process for providing funds for computer purchase, and SPHCM departments have used this mechanism to obtain computers and software for student computer labs.

The UW encompasses three campuses and includes a network of 25 library facilities comprised of several major libraries, including a Health Sciences Library, and many subject-oriented libraries. The library system is extensive, providing faculty, students and staff access to the resources needed for research and teaching including print journals, books, databases, electronic journals, etc. The UW library system was ranked 12th among 120 academic research libraries in North America by the Association of Research Libraries.

As the only school of public health in the Northwest region of the U.S., the SPHCM can access governmental public health agencies, NGOs, and community, industry and research organizations from several states for conducting research and providing service to the community. MPH student practicum sites in recent years have included locations in Washington, California, Virginia and Pennsylvania, as well as Mexico, Peru, India and South Africa. In addition, the school has formal affiliations with a number of local institutions where faculty and students collaborate on research, educational and service activities.

The school uses a variety of outcome measures to assure sufficient resources. These measures include the SFR, expenditure per student FTE, research funds per faculty FTE, total space, gifts and total funding. All of these measures indicate that the school has undergone substantial growth over the three-year period from 2002 to 2005. For example, student FTEs increased from 592.3 in 2002-2003 to 705.8 in 2004-2005, and expenditures per student FTE increased from $16,531 to $17,562. Space has increased from 106,838 NSF to 130,300 NSF, and research expenditures per faculty FTE have increased from $496,963 to $530,462. Further growth is planned, and the proposed new building represents a major component of this growth.

Criterion V.A. Professional Degrees and Concentrations

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

The areas of knowledge basic to public health include:

1. Biostatistics - collection, storage, retrieval, analysis and interpretation of health data; design and analysis of health-related surveys and experiments; and concepts and practice of statistical data analysis;
2. Epidemiology - distributions and determinants of disease, disabilities and death in human populations; the characteristics and dynamics of human populations; and the natural history of disease and the biologic basis of health;

3. Environmental health sciences - environmental factors including biological, physical and chemical factors which affect the health of a community;

4. Health services administration - planning, organization, administration, management, evaluation and policy analysis of health programs; and

5. Social and behavioral sciences - concepts and methods of social and behavioral sciences relevant to the identification and the solution of public health problems.

This criterion is met. The SPHCM offers professional degrees in the five core areas, including MPH degrees in biostatistics, epidemiology, environmental health sciences and social and behavioral sciences and an MHA degree in health administration. Professional degrees are organized through four of the school’s five departments, and the departments of epidemiology and health services and the DEOHS offer multiple specializations for MPH students. The school also offers its MPH and MHA degrees in alternative schedule formats, with a three-year, extended-format MPH and an executive MHA option available through the health services department.

Table 3. Instructional Programs (Departments in bold)

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<tr>
<th></th>
<th>BS</th>
<th>MPH</th>
<th>MHA</th>
<th>Joint Degree</th>
<th>Extended Degree</th>
<th>MS</th>
<th>PhD</th>
</tr>
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<tr>
<td>Environmental and</td>
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<td>Occupational Health</td>
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<td>X</td>
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<tr>
<td>Environmental &amp; Occupational Health</td>
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<td></td>
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<td>X</td>
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<tr>
<td>Environmental &amp; Occupational Hygiene</td>
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<td>Genetic Epidemiology</td>
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<td>Maternal &amp; Child Health</td>
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<td>Health Services</td>
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<td>X</td>
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<td>Health Administration</td>
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</tr>
</tbody>
</table>
The SPHCM offers academic degrees at both the masters and doctoral level in all five departments. As with the MPH, students in three of the five departments may choose among multiple specializations. The school also offers a number of joint degree opportunities. Eight degrees are eligible for concurrent study with the school’s masters degrees; they are organized through various SPHCM departments. Joint degrees available with the MPH include the MD (medicine), MPA (public administration), JD (law), MSW (social work), MSD (pediatric dentistry), MN (nursing) and MAIS (international studies). Joint degree programs, including those conferring MD, MPA and MBA degrees are also available in combination with the school’s MHA and academic degree programs, and a joint MHA/MPH option is available. The school also offers two undergraduate degrees. Table 3 on the preceding page presents the SPHCM’s degree offerings.

Criterion V.B. Core Knowledge, Practice and Culminating Experiences

Each professional degree program identified in V.A., as a minimum, shall assure that each student a) develops an understanding of the areas of knowledge which are basic to public health, b) acquires skills and experience in the application of basic public health concepts and of specialty knowledge to the solution of community health problems, and c) demonstrates integration of knowledge through a culminating experience.

This criterion is met with commentary. All MPH students are required to take courses in the core areas of public health knowledge. Students pursuing the MPH in Community-Oriented Public Health Practice (COPHP) receive the core curriculum in an integrated two-year sequence, divided among a series of eight blocks, in the Problem-Based Learning model. This model uses case studies structured around topical areas including community assessment, social action and health policy to integrate various elements of the five core areas. All other MPH students must take at least one course in each of the five core areas; they may choose between two or more courses in each area to fulfill the requirement. The core curriculum for these students is presented below in Table 4.

<table>
<thead>
<tr>
<th>Core Area</th>
<th>Course Name</th>
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<tbody>
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<td>Biostatistics</td>
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<td>BIOST 511</td>
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<td>Applied Biostatistics I and II</td>
<td>BIOST 517 &amp; 518</td>
</tr>
<tr>
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<td>Environmental and Occupational Health or</td>
<td>ENVH 511</td>
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<tr>
<td></td>
<td>Occupational and Environmental Epidemiology or</td>
<td>ENVH 570</td>
</tr>
<tr>
<td></td>
<td>Risk Assessment for Environmental Health Hazards or</td>
<td>ENVH 577</td>
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<td></td>
<td>Children’s Environmental Health or</td>
<td>ENVH 517</td>
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<td>Occupational Health Policy</td>
<td>ENVH 584</td>
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<td>Epidemiology</td>
<td>Introduction to Epidemiology or</td>
<td>EPI 511</td>
</tr>
<tr>
<td></td>
<td>Epidemiologic Methods I and II</td>
<td>EPI 512 &amp; 513</td>
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</table>
The commentary pertains to the environmental health requirement for MPH students, other than those pursuing the COPHP track. Students may choose among five courses: Environmental and Occupational Health, Occupational and Environmental Epidemiology, Risk Assessment for Environmental Health Hazards, Children’s Environmental Health and Occupational Health Policy. While all of these courses address environmental health themes and competencies, none of the courses, except for ENVH 511, Environmental and Occupational Health, appear to address all of the school’s identified MPH environmental health core competencies in a direct manner. For instance, the 2004 syllabus for Occupational and Environmental Epidemiology did not show evidence of coverage of the school’s identified core competencies relating to 1) identifying relevant regulatory problems and legislative authorities and 2) effectively communicating environmental risks and prevention strategies to communities. Similarly, the syllabus for Children’s Environmental Health showed little evidence of coverage of the two aforementioned competencies and coverage of the competency relating to describing basic methods of assessment and control of environmental health hazards. The Risk Assessment and Occupational Health Policy syllabi showed similar deficiencies in addressing all of the core competencies.

Like MPH students, MHA students complete coursework in the five core areas. Their coursework, which includes classes specifically designed for their degree program, typically focuses on each core area in a health systems model, and the curriculum requires multiple courses to address the core areas of epidemiology and social and behavioral sciences.

The school requires a practice experience for all professional degree students. Students in the MPH COPHP program complete their practice placement during the first year of enrollment in a three-quarter sequence. Students attend the Practicum Seminar during autumn quarter, which develops knowledge and skills necessary for successful fieldwork. The Practicum Field Experience, in which they enroll for the following two quarters, matches students to a project at the Seattle/King County health department. Students are expected to make a substantive contribution to the health department’s work. Students’ faculty advisors collaborate with identified site supervisors, and students function in both practitioner and student roles throughout the service learning experience.

All other MPH students complete a three-credit, 120-hour practicum in a setting of their choice. The SPHCM practicum coordinator maintains an extensive list of approved practicum opportunities, and students who wish to perform their practicum at an unlisted site may do so, if the site is approved and completes the school’s standard affiliation agreement. Practicum sites are varied and provide rich opportunities for public health practice in settings that support students’ individual goals and programs of
It is not clear, however, to what extent departments prepare students for non-technical aspects of field work, including working effectively as a team member, engaging communities and communicating to the public as well as to professional colleagues.

The school outlines specific responsibilities for the site supervisor, faculty advisor and the student. The site visit team learned, however, that preceptors do not always feel certain that they are providing appropriate guidance for students. While the school's practicum coordinator is available to individuals, the school may wish to offer formal preceptor training, providing an orientation to SPHCM values and foci. All parties conduct evaluations of the practice experience, and students produce a paper documenting the experience. Many students create poster presentations of their practicum experience and exhibit them during the annual SPHCM practicum fair.

The formal, required practice experience for both in-residence and Executive MHA (EMHA) students takes place in the capstone consulting experience, which also encompasses these students’ culminating experience. Program faculty and staff seek out healthcare administrative settings that identify a specific, well-defined problem and a preceptor to supervise students’ work. For the in-residence MHA program, students work in consulting groups to address the problem through a series of analytical tasks, interim reports and presentations in the work site, ultimately producing a comprehensive recommendation for addressing the problem. Individuals receive specific components of the task to complete, and all members of the team work closely with their preceptors through the series of tasks, which are evaluated on an ongoing basis by MHA faculty. Students produce written reports and final presentations. Executive MHA students follow the same general procedures, but they work alone and typically in their existing workplaces. Despite the setting, EMHA students must work on a specific, identified problem with an identified preceptor, differentiating the capstone project from their usual work assignments.

Students in the MHA program may also choose to complete an internship during the summer between their first and second years. Internships are typically 10-week paid experiences. Internship sites, which are identified primarily by the MHA program coordinator and by SPHCM alumni, primarily consist of hospitals but include other health care settings as well. The MHA office maintains job descriptions, and students may choose to work with their advisors to identify appropriate positions from among the available options. Students and preceptors complete evaluations at the internship’s conclusion. The program encourages these experiences, and many students are motivated to complete them, not only for the practice application opportunity they provide but also for the future employment and networking opportunities they present.

For the culminating experience, the majority of MPH students complete a masters’ thesis. Students work closely with their thesis advisors to identify research questions and appropriate study designs. Theses may include case-control studies, program evaluations, policy analyses, case studies or descriptive studies, among other categories. Students pursuing the Extended Degree MPH, the MPH in
Environmental Health or the COPHP program may choose a capstone project in lieu of a thesis. The capstone project addresses an actual public health problem in the community. Capstone goals include exploring problem-solving methods in the context of a specific community/population, developing comprehensive knowledge in an area of interest and developing advanced public health assessment and problem-solving skills.

**Criterion V.C. Learning Objectives**

For each program and area of specialization within each program identified in Criterion V.A., there shall be clear learning objectives.

This criterion is partially met. The SPHCM faculty has developed general learning objectives for the MPH, MHA, MS and PhD degrees; for the undergraduate minor in public health; and for undergraduate majors in public health, environmental health and health information administration. The MPH program includes overarching learning objectives, core area-specific objectives and track-specific objectives. Track-specific objectives have also been developed for the MS and PhD programs. Learning objectives in all of these degree programs and tracks are both well-written and student-centered. SPHCM students may find learning objectives for degree programs and tracks on websites as well as in printed materials for programs.

The faculty has been encouraged to use developments in the field, new knowledge in the disciplines and feedback from students and colleagues to define course objectives for syllabi. The COPHP program has adopted a commendable strategy of defining learning objectives first and then designing courses that will allow students to meet them.

The school periodically reviews learning objectives to reflect changing need of public health education and practice. The 2003 IOM report, *Who Will Keep the Public Healthy?*, the Council on Linkages’ *Core Competencies of Public Health Practice* and the Association of Schools of Public Health’s *Core Masters in Public Health Competency Development Project* have provided resources for review of objectives and departmental curricula. Major revisions in curricula are reviewed by the SPHCM Curriculum and Educational Policy Committee.

Developments in public health education and needs expressed by faculty, students and alumni contribute to learning objectives updates. Objectives are also examined as part of the reviews of departmental graduate degree programs conducted by the Graduate School. Finally, using the strategic plan, the dean has appointed ad hoc committees to conduct examinations of the curricula of specific programs within the school.

The site team’s examination of selected syllabi across departments, however, revealed considerable variations in the quality and appropriateness of statements of objectives. Too many syllabi lack learning objectives altogether, featuring course objectives and topical outlines instead. Some objectives state
what students should “examine” or “understand” rather than what students should know and be able to do in order to complete the course successfully. The site team concluded that while the curriculum mapping project connected courses to overarching and core area specific learning objectives, these objectives have not yet been transferred or translated to syllabi across curricula. The school may now provide resources and opportunities for faculty to develop student-centered learning objectives for course syllabi in which they are missing or inappropriately stated.

**Criterion V.D. Assessment of Student Achievement**

There shall be procedures for assessing and documenting the extent to which each student has attained these specified learning objectives and determining readiness for a public health practice or research career, as appropriate to the particular degree.

This criterion is partially met. The SPHCM has developed procedures to assure that in the course of completing the required curriculum students have the opportunity to meet the program’s stated learning objectives. The school-wide Curriculum and Educational Policy Committee has mapped specific learning objectives for courses, capstone projects, theses and practica to various overarching objectives.

Overall assessment of students occurs in classroom performance, practicum and capstone projects, theses and dissertations and preliminary and general examinations. Students’ progress and performance are monitored by course instructors, faculty advisors, program-specific student counselors and thesis/dissertation supervisory committees.

The school uses a variety of indicators to measure student progress and achievement: an exit survey rating of the quality of instruction, an alumni survey rating of quality of instruction, time to graduation (five years or less for MPH and MS students) and employment status after graduation. Regarding graduation data, the site visit team learned through discussion with the faculty that, while the school does not officially designate students into part-time and full-time tracks, some students progress through their degree programs on a part-time basis, and students may move from one status to another. In order to more effectively assess the impact on student success, the school may wish to consider separately tracking the satisfaction, progress, time to completion, and percent completion for full- and part-time students.

The SPHCM has succeeded in addressing some of the major concerns of the 1999 site visit report; for example, the school implemented tracking of student success and job placement of graduates. Through interviews with departmental leaders, the site team learned that some degree programs use specific criteria for judging students’ achievement of competencies but that use of specific criteria for such judgments is not a widespread practice. Assessment strategies, in their current state, generally emphasize inputs rather than student outcomes. The MPH mapping project, for example, ensures that learning objectives are covered but not the extent to which each student has attained specified learning objectives. It appears that courses, the capstone project and practicum have been regarded as assessments rather than as learning strategies or opportunities. As far as any of these learning strategies
is concerned, grades alone represent too aggregate a measure to provide an assessment of specific knowledge and skills. The linkage between assignments and learning objectives, therefore, needs to be made explicit for students so that they understand what they must know and be able to do in order to meet course, program and faculty expectations. Such linkage will also help instructors to insure that students cannot complete requirements without meeting essential learning objectives.

Additionally, the practicum’s current assessment methods fail to ensure that all students’ practice experiences connect with broader learning objectives. Modifying the practicum agreement in the *Master of Public Health Student Handbook* to require students to identify practicum learning objectives that reflect program objectives as well as public health theory and practice would assist in ensuring that practice placements support overall MPH objectives. Clearly defining the faculty advisor’s role in assessing the student’s achievement of those objectives would also strengthen the practicum. In particular, it may be helpful to provide a standardized format for advisors to give students substantive written and oral feedback on the experience, project and poster presentation. The site visit team commends the faculty for the design of *The Community-Oriented Masters Project Handbook*, whose contract and assessment formats provide useful models.

**Criterion V.E. Academic Degrees**

If the school also offers curricula for academic degrees, then students pursuing them shall have the opportunity and be encouraged to acquire an understanding of public health problems and a generic public health education. These curricula shall cover as much basic public health knowledge as is essential for meeting their stated learning objectives.

This criterion is met. The school offers academic masters (MS) and doctoral (PhD) degrees in each of the five departments. Biostatistics, Health Services and Pathobiology have a single track for their MS and PhD degrees. The DEOHS has four MS tracks (environmental health, industrial hygiene, safety and ergonomics, and toxicology) and two PhD tracks (environmental and occupational hygiene and toxicology). The department of Epidemiology has three MS tracks (general epidemiology, genetic epidemiology, and nutritional sciences) and three PhD tracks (general epidemiology, public health genetics and nutritional sciences). The MS and PhD degrees in nutritional sciences and the PhD in public health genetics are not strictly SPHCM degrees. They are awarded through the Graduate School’s interdisciplinary group structure, although administrative responsibility, academic leadership and the majority of the faculty rest within the Department of Epidemiology.

Students in academic degree programs are encouraged to acquire a broad public health perspective. Masters and doctoral students in different departments experience exposure to a broad public health perspective in different ways. Some departments require a certain number of electives from a menu of courses that cover the biological, physical and social and behavioral sciences, some departments require a series of mini courses that cover a range of topics and some departments require attendance at seminars where speakers discuss the public health perspectives of their work. For example, biostatistics
students take introductory courses in biostatistics with MPH students and must select electives from two lists: one with a methodological emphasis, which includes courses in health services area, and one with a biologic emphasis, which contains a broad choice of courses. Pathobiology and DEOHS students must take core courses in biostatistics and epidemiology. Epidemiology students take electives from university courses relating to the biologic, physical and social/behavioral sciences.

Beyond curricular requirements, the school exposes academic degree students to broader public health perspectives through interdisciplinary faculty appointments. While biostatistics students may not take environmental health or health services courses, several faculty have joint appointments in the two departments, and these faculty provide exam questions that tend to be oriented to their areas of expertise, which encourages students to develop knowledge in these areas. Faculty with joint appointments also give seminars in one another’s departments.

**Criterion V.F. Doctoral Degrees**

The school shall offer at least one doctoral degree which is relevant to one of the five specified areas of basic public health knowledge.

This criterion is met. The SPHCM offers the PhD degree in each of its five departments. In the DEOHS, there are two tracks: environmental & occupational hygiene and toxicology. Department of Health Services doctoral students do not pursue formally differentiated tracks, but students concentrate their course work in one of eight areas. The Epidemiology department technically offers three doctoral tracks; however, the PhD in nutritional sciences and in public health genetics are administratively based in the department but conferred through the Graduate School’s Interdisciplinary Group degree structure. Fifteen core faculty members participate in the nutritional sciences interdisciplinary program, most of whom have appointments in the departments of Epidemiology, Health Services and Pathobiology. Other faculty are drawn from the schools of Medicine and Nursing, the College of Arts & Sciences, the School of Aquatic and Fishery Sciences and the FHCRC.

**Criterion V.G. Joint Degrees**

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

This criterion is met. The school participates in a large number of concurrent degree programs. While these serve to enrich the academic opportunities for students at the university, the site visit team learned that the impetus for these programs has not originated within the school but from other schools within the university. Thus, the SPHCM offers most of these concurrent degrees largely as a service to other schools. Currently, there are six concurrent degree programs that involve various MPH degree tracks and the MHA. All departments, except Biostatistics, participate in concurrent degree programs, often offering options in a number of different tracks. For example, the MD/MPH degree is offered in environmental & occupational health sciences and in epidemiology. The MPA/MPH is offered in the environmental & occupational health track in DEOHS, in epidemiology and in the health policy and research track in the
Department of Health Services. One concurrent degree, a JD/MPH in the public health genetics track in the Department of Epidemiology, is currently pending approval, and a MPH/DVM (veterinary medicine) is being planned. Concurrent MPA/MS degrees are offered in the DEOHS tracks in toxicology, industrial hygiene and environmental health. At the doctoral level, there is a concurrent MD/PhD program in epidemiology. Concurrent MHA degree programs offered in the health administration track of the Department of Health Services include the MBA/MHA, MPA/MHA and MD/MHA.

Students in these programs must be admitted separately to each degree program, and the students are expected to fulfill the academic requirements of each program as if they were pursuing a single degree. While there are opportunities for some savings in time and tuition because selected required courses for each degree can be counted as electives for the other degree, this does not detract from the academic rigor of the individual degree programs involved.

Criterion V.H. Nontraditional Format

If the school offers degree programs using nontraditional formats or methods, these programs must a) be consistent with the mission of the school and within the school's established area of expertise; b) be guided by clearly articulated student learning outcomes which 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 which take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers nontraditional programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess teaching and learning methodologies and to systematically use this information to stimulate program improvements.

This criterion is met. The SPHCM offers both an extended MPH and an executive MHA. Both self-supporting programs are targeted toward mid-career health services professionals who work full-time while pursuing their degrees.

The Extended MPH Degree Program (EDP) is housed in the Department of Health Services and has an autonomous administrative structure consisting of a director, associate director, program coordinator and program assistant. The curriculum consists of core courses in the five basic areas that parallel the requirements for other MPH programs and a series of additional courses in research methods, program evaluation, administration and management. Regular SPHCM faculty, primarily from the Health Services Department, teach the majority of the courses, and faculty from the Graduate School of Business Administration teach some management-oriented courses. The curricular focus was based on information gathered from a variety of stakeholders, including surveys of staff at health care agencies. The curriculum is regularly reviewed. In addition to the program's Steering Committee, which meets twice a year to discuss the curriculum and ensure a solid link to other SPHCM departments, an External Advisory Board meets every two years. This body, which consists of representatives from public and private community health agencies in Washington, Idaho and Oregon, provides feedback on how the EDP can best address the professional community's needs. Additionally, the full EDP faculty meets
annually for review, problem solving and strategic planning. The EDP also conducts periodic alumni surveys, and past survey results have led to the development of additional courses.

All courses are evaluated through both standard Health Services Department course evaluation forms for students and through narrative evaluations developed specifically for the EDP program. The program director reviews all evaluations before distributing them to course instructors. All EDP courses also undergo periodic review through the Health Services Department’s Teaching Effectiveness Review process, which involves systematic review of course materials, in-class observation and review of student evaluations and grades.

The EDP program is a three-year program, combining intensive four-week summer sessions, independent study and weekend seminars during the academic year. Students must complete a practicum and a thesis or masters project. EDP staff encourage students to complete practica in settings other than their own worksites; when such an arrangement is not possible, students must arrange to undertake significant work on projects unrelated to their regular employment.

Program staff are responsible for all student support services. The program director and co-director maintain office hours while students are on campus and are regularly available by phone and e-mail. Staff maintain regular, frequent, often informal contact with students. The associate director provides quarterly updates to all students on progress and current status, and staff contact any students who appear to have difficulty.

The EMHA consists of a curriculum essentially identical to the in-residence MHA, and the same program staff supports both programs, in large measure. The EMHA offers the degree in a two-year format involving three-day sessions once a month for 24 months along with supplementary real-time web and teleconferencing sessions. Because the EMHA is self-supporting, administrative and student services are coordinated between the program and the UW Extension, the university’s self-sustaining administrative wing. Curricular organization, administration and planning parallel the in-residence MHA program. As with the EDP program, the EMHA has an External Advisory Board comprised of regional leaders in healthcare management who provide feedback on program offerings as they relate to the needs of the professional community.

**Criterion VI. 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. An essential goal of the school is to train public health researchers and practitioners. This goal depends on a faculty that is actively engaged in research and on the availability of student support, through graduate research assistantships and training grants. The UW is a Research 1
institution, and the SPHCM is among the top five schools in the university in attracting extramural funds to support faculty and student research; this extensive research portfolio allows the school to achieve its goal relating to training public health researchers and practitioners.

Policies and procedures at the school promote and facilitate research. All professorial faculty at the school are expected to engage in research and to disseminate the new knowledge discovered through publication of the results. Research originates from individual faculty and from interactions among faculty. Department chairs discuss faculty research plans in annual individual meetings. In addition, the associate dean for research is charged with facilitating interdisciplinary research by identifying opportunities for funding and supporting the development of interdisciplinary proposals. The school provides infrastructure to support faculty in the preparation, financial and administrative approval of research applications, although there is variation among the departments in the amount of infrastructure available to faculty to support preparation of applications for funding. Indirect cost funds returned to the departments support this infrastructure, as well as the development of new and interdisciplinary initiatives. Post-award management of grants and contracts is the responsibility of the investigators, supported by departmental grants and contracts administrators. All faculty are required to attend a university-sponsored workshop on grants and contract management.

The salary structure provides incentives for faculty to be engaged in research. State funds, which are designated for the support of teaching, partially support the salaries of a very limited number of tenured faculty (41 faculty positions in 2005), so funds from grants and contracts constitute the vast majority of funding for the faculty complement of 198.5 FTEs in 2005.

The school’s faculty are active in numerous community-based research projects through collaborations with local health agencies and community-based organizations. The school’s centers are a primary location for this type of research. Discussions with the site visit team indicated that these projects involve the active participation of community members, and that the nature of many projects is derived from specific needs identified by community members. Faculty contact with community constituents occurs at various levels, including participation in continuing education programs, which builds relationships that can provide the foundation for research development or collaboration.

School funds derived from federal and non-federal grants and contracts, including grants and contracts obtained by faculty based in the FHCRC, has grown from $27,829,306 in 1997-98 to $103,814,942, representing a 373% increase. Ninety percent of this revenue is derived from federal sources. SPHCM faculty with appointments in other institutions including the Group Health Cooperative, SBRI, the Pacific Northwest Research Institute and others also have additional research activities funded through grants and contracts at these affiliated institutions that are estimated to be approximately $15 million. Faculty research is regularly presented in the school publication “Spotlight on Research,” which is mailed to a wide range of constituents and available on the school’s web site.
The school uses both quantitative and qualitative measures to evaluate the success of its research programs. The quantitative research outcome measures include number of grant submissions, number of grants awarded, research revenue and indirect cost return. Data for the past three academic years show a steady increase in grant application submissions, from 460 to 515, and a fairly flat number of awards (323, 338 and 337, respectively) and research dollars generated ($52.8, $66.2 and $58.6 million, respectively). Indirect cost return increased at about seven percent per year ($3.9, $4.2 and $4.4 million, respectively), most likely because more successful grants were generating full indirect cost recovery. The qualitative measures used for evaluation of research include examination by the chairs and deans of the research environment, the general directions of research initiatives, and new initiatives that are underway. In addition, the number and quality of the research publications are examined and discussed at annual faculty reviews. Total numbers of faculty publications are not centrally tracked – there is no mechanism in place to do this – although the school is planning to develop an online CV system to improve monitoring of faculty publications, grant awards and presentations.

Students at the school are actively involved in research. There is a thesis requirement for most MPH and all MS degrees and a dissertation for the PhD degrees. The thesis and dissertation represent independent research projects and the school expects that they result in the publication of papers in peer-reviewed journals. Masters students typically are expected to publish at least one paper, and doctoral students typically publish three to four papers. Student exit survey results for the years 2002-2004 indicate that approximately 80% of responding students planned to publish their thesis or dissertation results. Students also serve as research assistants on funded projects, and the number of assistantships has steadily increased from 199 in 2002 to 237 in 2004.

Criterion VII. Service

The school shall pursue an active service program, consistent with its stated mission, through which faculty and students contribute to the advancement of public health practice, including continuing education.

This criterion is met. The SPHCM clearly supports service activities of faculty and continuing education opportunities in support of public health practice, as documented in a range of evidence including the Academic Affairs Handbook, memoranda of understanding with many regional organizations, release time for faculty to pursue consulting and the establishment of the position of associate dean for public health practice.

Faculty and students engage in a wide range of professional and community service pursuits. Faculty are very entrepreneurial and have done an outstanding job in developing partnerships across the region and the world. Service pursuits assist the school, communities, business and public health departments find solutions to health-related problems, develop new technologies and contribute to economic growth and population health in Washington state and far beyond its borders.
The SPHCM has links to public health departments and academic institutions in the Northwest, including Alaska, and to an international network of universities. The SPHCM is currently establishing a faculty service tracking system that should enable it to better evaluate the types and distribution of service and to assess where new opportunities exist.

Faculty serve as members of a great number of local boards, have created partnerships with public health agencies and have worked to address specific, locally situated concerns. For example, a number of service activities target improving linguistic health access for people of color in Seattle, where 25% of people over the age of five speak a language other than English at home. Faculty hold leadership positions in professional organizations and foundations and consult with business, industry and NGOs. The school’s health policy faculty organizes the annual Washington Health Legislative Conference, the largest nonpartisan conference of its kind in the state, which brings together a wide variety of stakeholders.

The appointment of an associate dean for public health practice and the creation of the academic public health practice track for faculty tenure review represent significant innovations, implemented since the last accreditation review, signaling the school’s broad-based commitment to support and growth of a culture of service. The well-entrenched service program complements the school’s research and teaching efforts as well. For instance, the DEOHS responded to a request from a construction company for help on how better to control silica at construction sites. Faculty subsequently wrote a NIOSH proposal and obtained funding for three graduate student research projects.

The school provides numerous institutes and continuing education and training programs in Seattle and in partnership with states in Region X on preparedness and other public health topics. Departments offer specialized institutes like Leadership in Public Health Emergencies, for which academic credit is offered. These training programs also offer opportunities for student practica. Staff and faculty affiliated with the Northwest Center for Public Health Practice produce an extensive array of training programs for public health and other professionals at sites throughout the region. Offerings range from short courses to intensive residential summer institutes. Due to increased demand and travel distances, the center has expanded its summer institute to multiple sites throughout the Northwest, rather than having one offering in Seattle, and the curricula have been developed and refined through close collaboration with local practitioners. Local practitioners often co-teach courses with SPHCM faculty. The center has also established virtual training programs using web conferencing to improve public health practice and to provide specific technical assistance to tribal governments, states and local communities. The monthly, hour-long webcasts cover a variety of topics and typically are viewed live by approximately 200 participants. While service teaching requests have grown exponentially, especially in epidemiology and biostatistics, state funding has remained constant. These services meet an important need which will
continue to grow as new public health threats emerge and turnover in the public health workforce increases as baby boomers retire.

Criterion VIII.A. Faculty Qualifications

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

This criterion is met. The school has a very strong faculty in terms of size, educational preparation, research and teaching competence, practice experience, disciplinary distribution and multidisciplinary nature. Research productivity is outstanding, and teaching evaluations are strong. Many faculty are involved in public health practice, and community based research is an emphasis in the several departments where it is most appropriate. Alumni praised the faculty’s understanding of “real life public health.”

The total of 198.5 faculty FTE greatly exceeds the number needed to sustain a strong program. Even with many faculty heavily involved in research, the variety and quality of faculty available for teaching is exceptional.

Criterion VIII.B. Faculty Development

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. Both the self-study and discussions during the site visit document a clear and strong commitment to faculty development, which is implemented through multiple opportunities for review by and discussion with more senior faculty and administrators as well as through university activities. Expectations for faculty and evaluation procedures are clearly documented in both school and university handbooks. Faculty research, teaching and service are all essential components of review. The school has officially adopted a specific review approach to assess those faculty who emphasize “academic public health practice,” instead of pursuing a more traditional research path. This system rewards and validates public health practice that is appropriately rigorous and publicly reported.

All departments emphasize faculty development strongly and implement a series of development activities, though operationalization differs across departments. Activities include annual reviews, assigning mentors, providing seed funding for research, holding orientations and engaging in peer evaluation of teaching. The Department of Health Services, for example, has a particularly well-developed peer evaluation system that provides detailed, substantive feedback to each faculty member yearly. All SPHCM faculty may also access UW resources, including services that tape faculty classroom sessions, interview students and tailor individualized feedback to identified needs.
Faculty at all ranks commented on the pressures created by the need to generate all or most of their salaries through extramural funding. For example, junior faculty described the challenges of juggling multiple grants, and the difficulty in finding time for creative thinking while constantly working to stay funded. Junior faculty did note that school policies provide some time to support research development after hiring, through the delay of full teaching responsibilities. Only nine credit hours total (three classes) are required for promotion to associate professor.

**Criterion VIII.C. Faculty Diversity**

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

This criterion is met with commentary. The school’s policies and procedures documenting its commitment to providing equitable opportunities to qualified individuals are clear. This commitment is strongly supported by the university administration.

The school tracks data on faculty composition against numerical goals for the proportion of women and under-represented minority faculty, which are established by the provost based on a calculation that examines the national pool of available graduates in each disciplinary area. As the school notes in the self-study, the school falls short of these goals. It is close to meeting the target with respect to female faculty but is further from its minority faculty goals. In the case of both female and minority faculty, the school has proportionately more at the assistant professor level than the associate professor level and proportionately more at the associate professor level than at the full professor level. In other words, the newer hires show the effects of the efforts to increase gender and under-represented minority diversity in the faculty. It is interesting to note that proportionately more women and minority faculty are in the research track than the regular track. During the site visit, faculty and leaders consistently stated that the two tracks are considered equal in value and primarily reflect a difference in emphasis.

The commentary refers to the resource constraints on recruiting and retaining women and minority faculty, which the school highlights among its challenges in the self-study. The inability to offer more than 50% tenure (at best), the need for faculty to generate most of their salary through research, and the lack of competitive salaries combine to greatly inhibit progress in this area. The university administration recognizes this trend. Despite strong budgetary constraints, at this time, the provost is providing funds to help recruit a Native American faculty member with 100% tenure.

**Criterion IX.A. Student Recruitment and Admission**

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. The SPHCM has clearly stated admissions requirements and enrolled 29% of applicants in 2005. The SPHCM promotes the school's programs through a variety of passive and more active recruitment channels such as department websites, career fairs and communication with college advisors. The school also recruits internationally through the school's worldwide network of institutions. Both recruitment and admissions activities are primarily conducted at the departmental level, consistent with the school's decentralized operating structure. For prospective students who are unsure about which department or degree path to pursue, the Office of Student Services offers assistance in finding the best fit for their interests and aspirations. Departments determine both their capacity for new students each year and the precise standards for admission. Throughout the school, application levels remain high, as do admission standards. Across departments, accepted student grade point averages averaged 3.5 to 3.6. Graduate Record Examination scores for accepted students ranged from 1211 to 1376.

**Criterion IX.B. Student Diversity**

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

This criterion is met with commentary. The SPHCM has clear and comprehensive policies of non-discrimination, and university policy explicitly prohibits discrimination on the basis of race, color, creed, national origin, sex, sexual orientation, age, marital status, disability or status as a disabled veteran or Vietnam era veteran. However, quantitative data that would enable the SPHCM to determine if all components of the policies are being equitably applied are limited, as the school compiles data only on race/ethnicity, international status and gender. Women constitute the majority of new students, ranging from 57% to 67% over the self-study period. Minority students currently comprise approximately 22% of the school.

The school actively recruits students of color to the extent that its resources permit. For example, it engages with disadvantaged youth in Seattle through its Saturday Academic Series, hosts an annual Minority Association of Pre-Health Students annual conference and coordinates with the Graduate Opportunities & Minority Achievement Program (GO-MAP). The school’s Office of Student Services recruits McNair scholars, health sciences minority students at UW and students from Heritage College, a primarily Hispanic-serving institution in Washington’s Yakima Valley. The school’s certificate program, housed with the EDP, was implemented in part to provide academic experience for under-represented populations that enables them to apply for the MPH program. School staff informed site visitors that a general lack of familiarity with public health, as a discipline, often represents a barrier to recruitment in populations of color. Additionally, there remains a need for increased financial aid in order for SPHCM to compete successfully for underrepresented minorities. Difficulty in recruiting and retaining minority faculty compounds the problem of increasing minority enrollment, as does Washington State’s anti-affirmative action legislation, I-200, and overall lack of state funding support for the university and school.
For example, because of funding constraints, the SPHCM no longer recruits on-site at historically black colleges and universities and other schools with large minority enrollments, although staff maintain contacts with academic advisors at those schools.

The commentary pertains to the school’s ongoing challenge in attracting minority students. The school-wide low rate of minority applications (four percent) and minority enrollments (eight percent of applicants) in 2005 do not bode well for sustaining or growing minority representation. The SPHCM provides strong evidence of commitment to growing and retaining a diverse student body, including undertaking the important step of addressing the school’s diversity climate. Creating the Diversity Task Force and preparing a diversity climate study, pursuing strategies to promote cultural competence and preparing a plan to promote racial and ethnic diversity among faculty and students all represent important approaches.

**Criterion IX.C. 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 with commentary. Most academic advising relies initially on assigned faculty advisors and later, during the thesis or dissertation phase, on research advisors selected by students. Pressure on faculty to fund their salaries through research clearly puts strains on the current student advising system, with masters students feeling lack of time with advisors most keenly. For broader career counseling, students may access the UW’s career services resources. The SPHCM is in the process of developing a comprehensive career services website to assist students in preparing for and finding jobs in public health.

The commentary pertains to continuing student dissatisfaction with faculty advising and mentoring, as identified by the school. In a recent survey, 77% of students rated advising as good or better and 79% of alumni rated advising they received as good or better. Satisfaction data might provide more information if analyzed by degree program, race/ethnicity, sex and other indicators. Students with strong practice orientations explained to site visitors that they perceive greater difficulty in finding advisement that meets their specific needs. The school’s great research strength, which students uniformly commend, creates a culture that presents challenges to practice-oriented MPH students who wish to identify advisors and mentors who align more closely with their specific goals.

Advising for students in some departments and programs is more highly structured than in others. For example, biostatistics students who met with site visitors characterized the advising experience as highly variable. No formal mechanisms exist to ensure that these students identify a research topic and advisor in a timely fashion, for example. Students explained that they often become occupied with completing courses and requirements early in their enrollment, and, without formal structures and supports, they may struggle to find an appropriate research mentor in time to begin thesis work. One of the consequences of less rigorous academic advising is that students may be delayed in completing their degree requirements.
The EDP, on the other hand, provides structured and personal assistance in identifying research advisors, alongside individually tailored program planning. Program staff require students to submit quarterly updates on progress and the development of a written performance contract for the research phase, and these tools allow staff to identify and assist individuals who encounter difficulties. The DEOHS is in the process of establishing guidelines for students and prospective mentors on how to choose the right mentor, expanded quarterly evaluations of the advisor/advisee relationship, exit surveys and departmental guidelines for evaluating teaching and mentoring when considering pay increases and promotions.

**Criterion IX.D. Student Roles in Governance**

Students shall, where appropriate, have participatory roles in conduct of school and program evaluation procedures, policy-setting and decision-making.

This criterion is met. Student representatives attend faculty meetings and participate on various committees in their departments and programs. Students also have full voting roles on significant school-level committees, including the SPHEC and the Curriculum and Educational Policy Committee. Many students participate in the Student Public Health Association (SPHA), which provides a formal voice for students. The SPHA critiqued drafts of the SPHCM self-study and provided substantive commentary. Accreditation committee members incorporated much of the commentary into the self-study, and the site visit team learned that the dean has addressed or continues to work on other components identified by students during the process.

The extent of student participation in governance and in curriculum improvements varies across departments, as some departments provide greater opportunities for participation than others. One student commented that she had responded repeatedly to numerous e-mail notices from her department soliciting participation in departmental committees, which had never resulted in any follow-up, while other students commented that their departments are eager to facilitate student participation in governance. Leadership at the school-wide level may be necessary to assure that students in all departments and programs have ample opportunities to participate in governance and develop skills there that they can take to work after graduation.

**Criterion X.A. Ongoing Evaluation**

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

This criterion is met. SPHCM uses a variety of external and internal evaluations of its academic, research and service missions. Among formal external processes, the school uses accrediting bodies (CEPH and accreditors for individual programs), Graduate Faculty Council Reviews (six programs reviewed since 1999), department chair reviews (in the fifth year of a Chair’s term) and the dean’s review (every five years). Internal school-wide evaluation methods include Strategic Planning, an Executive
Committee annual retreat, Curriculum and Educational Policy Committee proceedings, the Alumni Board, the External Advisory Board and coordinating meetings between SPHCM and FHCRC leadership.

Additional evaluation and planning processes are conducted in annual departmental program retreats and in program-specific projects. Recent examples include the dean's ad hoc committees to address planning for the International Health joint degree and the SPHCM's response to the IOM’s recommendations regarding health policy. The latter project has resulted in a five-year plan for including more health policy content throughout the school's programs.

Faculty evaluation occurs in annual reviews conducted by senior faculty for instructors, assistant professors and associate professors. Chairs meet with instructors and assistant professors annually, with associate professors every two years and with full professors every three years. All faculty also receive peer reviews of their teaching.

The SPHCM conducts extensive data collection, including surveys of students and alumni created in the school, and the UW Graduate School and Office of Educational Assessment provide additional data that support ongoing evaluation and planning.

The school has identified a variety of measures and assessment tools to evaluate the effectiveness of evaluation and planning activities, all of these focused on three strategic goals: building the science base for health protection and improvement, strengthening health education opportunities and building new alliances to bridge science and practice.

Strategic planning has improved markedly since the last CEPH site visit. A committee appointed by the dean in July 1999 to address current strengths and weaknesses and to plan for the school's future development and direction has improved overall evaluation activities. Staff, students and alumni as well as a number of external sources provided information and recommendations that led to the publication of a strategic plan in 1999-2000. Since that time, the SPHEC conducts annual reviews of the plan using data along with a summary of trends in key student, faculty, research and curricular developments.

The site visit team learned that preparations for a new strategic plan are underway. The External Advisory Board and Alumni Advisory Board have already enthusiastically presented ideas for components of the new plan. In addition, annual retreats of departments and the most recent Executive Committee retreat have considered additional components. Once the newly revised vision statement and goals of the university have provided an essential context, the school is poised to develop a new strategic plan.
Criterion X.B. Self-Study Process

For purposes of seeking accreditation by CEPH, the school shall conduct an analytical self-evaluation and prepare a self-study document that responds to all criteria in this manual.

This criterion is met. In the fall of 2004, the dean formed an ad hoc Accreditation Committee composed of faculty or student representatives from each department at the school and the associate dean for academic affairs in an ex officio role. Beginning in November 2004, committee members led discussions among the faculty, reviewed student and alumni surveys and participated in writing drafts of the self-study document. The process gave stakeholders the opportunity to review mission, goal and value statements, and to report strengths and weaknesses. The committee made a commendable effort to include points presented in faculty comments. Drafts of the document were circulated to students, faculty, staff and external stakeholders for feedback. The resulting self-study document is well-written and thorough and presents a clear analysis of the school’s strengths as well as challenges and plans for improvement.

The self-study document includes the school’s responses to recommendations in the CEPH accreditation report of 1999 regarding tenure-track positions; additional on-campus and office space; core requirements for the MHA degree; the delineation of learning objectives in syllabi; the identification of monitoring and evaluation measures; and the creation of a self-study analyzing strengths and weaknesses.

The self-study document concludes with an effective summary of strengths and weaknesses that responds to accreditation criteria and provides a roadmap to guide SPHCM’s efforts in meeting challenges within the contexts of its mission and goals.