REVIEW FOR ACCREDITATION

OF THE

SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF WASHINGTON

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
April 8-10, 2013

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the School of Public Health at the University of Washington (UW). The report assesses the school’s compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2011*. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation, and a visit in April 2013 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 community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The School of Public Health is one of 16 colleges and schools on UW’s Seattle campus and is one of six professional schools in 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 2006 resulted in a seven-year term, which included submission of an interim report in 2008. Since the last site visit a new dean was hired, and he has recently completed an ambitious strategic planning process.

As the only accredited school of public health in the Northwest, the school 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 professional development opportunities for employees.

The school enrolls more than 830 students and employs about 150 full-time equivalent (FTE) faculty, making it among the largest providers of graduate public health education in the nation. The school’s extensive list of instructional offerings reflects this size. The school offers more than 45 degrees through its five departments, sponsors joint degrees with a number of other UW academic units and offers continuing education opportunities to the professional public health workforce.
Characteristics of a School of Public Health

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

a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.

b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.

c. The school shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the school of public health should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.

d. The school of public health shall maintain an organizational culture that embraces the vision, goals and values common to public health. The school shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the school’s activities.

e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.

f. The school shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

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

1.1 Mission.

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

This criterion is met. The school has a clearly formulated and publicly stated mission with supporting goals, objectives and values. The dean initiated a rigorous strategic planning process in spring 2011 to identify important emerging public health issues and to determine the school’s role in addressing and informing these issues. The 10-month process was comprehensive and involved several hundred students, faculty, staff, community partners and external stakeholders. The school oversaw informal focus groups, community-wide discussions, web-based surveys and interviews with stakeholders including deans of associated schools at the university. The process also included a two-day retreat. The school's mission is as follows:

The UW School of Public Health is dedicated to education to prepare outstanding, innovative, and diverse public health leaders and scientists; research to advance public health science and policies; and service to promote the health and well-being of communities locally, nationally, and globally.

The strategic planning process produced seven goals that address the core functions of the school (instruction, research and service) as well as directions for the future. For each goal, the school has identified strategic objectives and quantitative or qualitative measures to track performance. The goals are expansive and challenging, particularly the two goals of improving diversity and enhancing the school’s sense of identity and cohesiveness. Globalizing the school is a new goal based on the global studies program established in 2007. A Diversity Committee was created as part of the strategic plan; this committee is charged with many concrete goals and objectives.

The school’s strategic plan articulates the following values as foundational for the mission and activities of the school: integrity, collaboration, impact, innovation, diversity, equity, excellence, stewardship and courage.

The mission, values, goals and objectives are prominently displayed on the school’s website and are promoted in print materials about the strategic plan. The dean holds annual meetings for all school stakeholders during which stakeholders discuss the mission, values, goals and objectives. The school developed a one-page flyer for use and display in offices and corridors to emphasize the importance of the mission and values in all aspects of teaching, research and service.
1.2 Evaluation and Planning.

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

This criterion is met. Internal and external evaluations are conducted at the school, department and program levels. Numerous standing and ad hoc committees identify priorities and assure that goals and objectives are met. The special assistant to the dean tracks progress toward the school’s goals as defined in the strategic plan by monitoring the progress of committees and assuring that they are on course.

The Executive Committee holds an annual all-day retreat to review status and plans for each department and the school as a whole. In 2012, the Executive Committee retreat focused on strategies to implement the 2011 strategic plan.

In 2011, the dean initiated an annual review process for departments. Each department chair summarizes the status of his or her department, including activities, successes and challenges. The metrics include overall leadership; leadership in teaching, management and research; research management; service leadership and service management; human resource management; diversity; financial and administrative capabilities; advancement; collaboration; and individual academic achievements of each chair. In addition, the dean appoints a special committee to review each chair every five years. This review also includes a review of the department as a whole.

During the past seven years, the university has created a data warehouse that tracks applicants, students, classes, grants, contracts, faculty and finances. The school has been able to compile indicators and catalog parameter-driven data reports. The Graduate School provides analytic data to the school and its departments on applicants, accepted students and enrolled students. The Graduate School also conducts exit surveys of all master’s and PhD students. The surveys collect information on the students’ ratings of departmental academic standards, adequacy of training, satisfaction with guidance and supervision, quality of faculty and quality of the program.

Students evaluate all courses. Each department’s Curriculum Committee or chair reviews these evaluations. Recommendations to the faculty member based on the reviews are transmitted through the chair. The Office of Educational Assistance provides aggregate reports summarizing student course evaluations. The school has its own student exit survey and alumni survey.
The evaluation information is monitored, analyzed and shared with different audiences depending on the information. For instance, overall evaluation data are shared with the Executive Committee, with the Faculty Council and at retreats. The strategic plan implementation is shared with relevant individuals and committees responsible for implementing the plan. Survey results are shared with deans, department chairs, curriculum committees, coordinators and advisors. Data on research grants, productivity and impact are included in annual reports and reviews by the dean and the chief financial officer and used for planning and budgeting.

The school compiles detailed metrics and data about research grants, productivity and impact. These data inform planning and budgeting. However, the chief financial officer acknowledged during the site visit that full utilization of the university's database is a work in progress.

The self-study provides data on the school's performance for the last three years for each measurable objective. The targets appear to be appropriate yet challenging.

The associate dean for academic affairs and an Accreditation Writing Committee, consisting of those with the most detailed knowledge of the factors described in the document, had overall responsibility for the development of the self-study. The composition of the committee provided effective opportunities for meaningful input by important constituents. Constituents provided input to the Accreditation Writing Committee, and the committee assigned specific members various sections to write. The departmental Curriculum Committees, the Diversity Committee and the Student Services staff were especially active in providing input.

The associate dean for academic affairs conducted the initial review and editing of the document, and departments and/or student representatives also participated in the review and revision process. The Accreditation Writing Committee drafted the preliminary analyses of strengths, weaknesses and challenges. The committee solicited comments on the draft document from internal and external constituents by posting the draft on the school’s website.

1.3 Institutional Environment.

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

This criterion is met. UW is accredited by the Northwest Commission on Colleges and Universities and was last reviewed in 2003. UW responds to more than 30 specialized accreditors in areas such as architecture, construction management, dentistry, business, medicine, engineering, social work and nursing. In addition to CEPH, the School of Public Health responds to the Accreditation Council for Graduate Medical Education, the National Environmental Health Science and Protection Accreditation
Council, the Accreditation Council for Education in Nutrition and Dietetics (ACEND), the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) and the Commission on Accreditation of Healthcare Management Education (CAHME).

The School of Public Health is one of 16 schools and colleges on the UW campus in Seattle, Washington. The Health Sciences Center includes six professional schools: public health, dentistry, medicine, nursing, pharmacy and social work. Each school has the same level of independence and status, with deans reporting to the president through the provost on all budgetary and academic issues. The president reports to the Board of Regents, which has ultimate authority for the governance of the university. The Board of Regents’ 10 members are appointed by the governor and are responsible for appointing the president. The president is the chief executive officer of the university and is responsible for the institution’s programs in instruction, research and public service. The provost is the chief operating and academic officer of the university and reports directly to the president. The provost’s office is responsible for the development, implementation and oversight of the university’s academic programs, budget, research and faculty personnel matters. The provost provides leadership in educational and curriculum development, allocation of capital and operating budgets, management of academic and administrative personnel, allocation of space and long-range university planning. The dean of each school or college is responsible for these activities within his or her academic unit.

The dean of the School of Public Health formulates the school’s budget request in consultation with the department chairs and the school’s Faculty Council. The provost divides the academic portion of the state allocation among the schools and colleges.

Department chairs are responsible for overseeing the recruitment, selection and advancement of personnel. A departmental search committee recruits and reviews candidates, and proposed appointments are reviewed by the departmental faculty, the chair and the dean. The dean forwards recommendations to Academic Human Resources, the provost and the Board of Regents. The school’s Faculty Council must also review new appointments at the levels of associate and full professor.

The Graduate School establishes the minimum criteria for admission of graduate students and required credits for degrees. Individual departments within the school have established additional criteria. The dean oversees the school’s educational offerings, and the establishment and oversight of curricula is operationally part of the school- and department-level Curriculum Committees.
1.4 Organization and Administration.

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

This criterion is met with commentary. The school has an organizational setting that is conducive to public health learning, research and service. The dean is the leader of the school, and he is supported by a six-member executive staff. These positions include the assistant dean for advancement, the assistant dean for administration, the chief financial officer, the director of communications, a special assistant and an executive assistant. The associate dean for academic affairs assists the dean in the educational and curricular development of the school as well as in the oversight of academic personnel and student affairs. The associate dean for research and programs assists the dean in the practice and service mission of the school. He oversees the undergraduate major in public health and two of the school’s interdisciplinary programs: nutritional sciences and public health genetics. The school includes five departments, each headed by a chair who is appointed by and reports to the dean. Department chairs are responsible for curriculum development in consultation with departmental faculty, recruitment and recommendations for faculty appointments and promotions, recommendations for committee assignments, student recruitment, preparation of annual departmental budgets, requests for financial resources and space and appointment and oversight of staff. The two interdisciplinary programs (nutritional sciences and public health genetics) and the undergraduate public health major housed in the Office of the Dean operate as quasi-departments. They each have a director who reports to the associate dean for research and programs.

The commentary relates to the highly decentralized nature of the school. While this organizational structure can promote autonomy, it also leads to inefficiencies and redundancies. During on-site meetings, students, alumni and faculty members shared procedures from their program or department that other attendees said would be useful to them. The school’s administrative functions could be streamlined by centralizing procedures where appropriate and by creating opportunities to share best practices among units.

The school is involved in interdisciplinary collaborations in the local community, across the university, within the Health Sciences Center and throughout the school. The school’s Department of Global Health is a joint effort with the School of Medicine and serves as a hub for activities that involve faculty and students from throughout the university. The school also participates in the Interprofessional Education initiative, a collaborative effort to integrate teaching and experiential/service learning among students in the six health sciences schools. The school’s strategic plan identifies six emerging, interdisciplinary areas for scholarly pursuit. The dean provides funds for pilot grants and faculty hires in these areas; an interdisciplinary approach is a requirement for the grants and recruitments. In addition, the school houses
or participates in more than 35 research centers in the Seattle area. These centers provide environments that promote interdisciplinary and inter-institutional efforts to create and disseminate knowledge.

1.5 Governance.

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

This criterion is met. School governance is led by the dean and school administrators, with active participation from faculty, staff and students. The departments have a major role in governance, as many of the functions and decisions occur at the departmental level. The school’s committee structure includes the following well-defined committees:

- Executive Committee
- Faculty Council
- Curriculum and Educational Policy Committee
- Diversity Committee
- Practicum Committee
- Distance Learning and Technology Committee
- Student Services Committee
- Dean’s Council
- Communications Committee
- Tuition Committee
- Strategic Planning Committee
- Accreditation Writing Committee

The Executive Committee is the primary advisory body to the dean and serves as a forum for information and exchange and discussion among the school's leaders. Its membership includes the dean, associate and assistant deans and department chairs. The committee advises the dean on the curriculum and educational policy, faculty policy, long-range planning, budget and external affairs.

The Faculty Council includes one elected representative (and alternate) from each of the school's academic departments and one elected representative from each of the two interdisciplinary programs. The dean serves as an ex-officio member of the committee. The committee 1) recommends faculty appointments, promotions and tenure and 2) advises the dean on academic policy, resource and salary allocation and budgets, operations, long-term planning, development of common goals, facility requirements and community relations. The committee also provides oversight and coordination of the activities of the school's standing and ad hoc committees.

The Curriculum and Educational Policy Committee is composed of appointed representatives from each department, the interdisciplinary programs and the undergraduate public health major. Ex-officio members include a student representative and the associate dean for academic affairs. The committee is the primary body that oversees the school's instructional programs by evaluating, reviewing and approving proposed courses, programs and program competencies; establishing core degree competencies; reviewing and approving changes in the MPH curriculum; monitoring undergraduate, graduate and certificate program curricula; reviewing departmental procedures for evaluating teaching
effectiveness; and discussing school-wide and interdepartmental curriculum issues. Each department and interdisciplinary program also has a Curriculum Committee that reports to the Curriculum and Educational Policy Committee.

The Diversity Committee is co-chaired by a faculty member and a staff member and includes faculty, students and staff from the school's departments. The committee develops policies and establishes mechanisms to promote diversity across the school, strengthen diversity in the curriculum and recruit and retain a diverse faculty, staff and student body.

The Practicum Committee is made up of the associate dean for academic affairs, director of student services, assistant director for student services and representatives from departments in the school. The committee assists the director of student affairs—who is also the practicum coordinator—and reviews practicum guidelines and procedures for identifying and evaluating practica.

The Distant Learning and Learning Technologies Committee includes the associate dean for academic affairs and one or more representatives from each department and the Northwest Center for Public Health Practice. It serves as a forum for discussing innovation in teaching and learning related to distance learning and learning technologies, identifying target audiences for distance-learning courses and making recommendations for distance learning.

The Communications Committee is chaired by the director of communications and includes the school's web producer and departmental communications staff who handle web design, content creation, social media and print publications for their respective units. The committee coordinates the website, social media, communications and database initiatives and is charged with increasing the public's awareness of the school's contributions to health and society.

The Student Services Committee is composed of the director and assistant director of student affairs and student services staff from all departments and programs in the school. The committee promotes communication and serves as a forum for student-related policies and procedures.

The Tuition Committee is composed of faculty members who examine the long-term strategic goals of tuition and program fees. This committee meets as needed, but has been important as the school transitions its funding model, as discussed in Criterion 1.6.

The Strategic Planning Steering Committee includes 23 members representing faculty, staff, students and external stakeholders. Members are diverse with respect to level of seniority, content area expertise and
community affiliations. The committee led the strategic planning process in 2011 that included participation of faculty and community partners.

The school has a decentralized organizational structure that places substantial decision-making at the departmental and/or program levels. Each department has an internal governance structure that is responsible for student recruitment, admission and award of degrees; design and implementation of program curriculum; faculty recruitment and recommendation of faculty promotion and tenure; and strategic planning.

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. The committees have active student involvement and participation.

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

The administration, faculty and students reported that they value the culture of decentralization. Site visitors identified instances of duplicated efforts among departments and missed opportunities for coordination in some cases. However, extensive collaboration is evident in the interdisciplinary programs. The physical dispersion of offices and classrooms across the campus may contribute to the independent nature of the departments.

Students are active in the school’s governance structure. The Student Public Health Association and the Undergraduate Student Public Health Association are the student-led organizations. The student government unifies students among the many graduate and undergraduate programs and provides a consolidated student voice. These associations promote communication among students across departments and provide feedback to the Dean’s Office. Student association members serve as representatives on school-wide and departmental committees.

Students recently formed the School of Public Health Student Advisory Council, which includes students from the departments (ie, graduate and professional student senators), representatives from the Student Public Health Association and the Undergraduate Student Public Health Association and representation from school-wide standing and ad-hoc committees. The council promotes information-sharing and advises the dean in budgeting matters and short- and long-term planning.
1.6 Fiscal Resources.

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

This criterion is met. The school currently has sufficient resources to fulfill its mission and goals. The school's budget is based on four sources of income: 1) designated operating funds from indirect cost recovery from grant and contracts, 2) general operating funds from tuition revenue to the state and state appropriation targeted to the Department of Environmental and Occupational Health, 3) other operating funds from endowments and 4) restricted operating funds from grants and contracts, extension tuition and fees and gifts. The university distributes general operating funds to the school. The departments and the dean receive an allocation based on historical allocations. Decreases in state funds have been severe, with a 50% reduction in state support of the university since 2009. Large increases in revenues generated by raising tuition rates have offset this decrease in state funds. Table 1 presents the school’s budget for 2006 through 2012.

Funds for the school increased dramatically from 2007 to 2008 when restricted operating funds increased from $66 million to $122 million due to the establishment of the Department of Global Health jointly between the School of Public Health and the School of Medicine. This department currently has the second largest research portfolio of all departments at the university. Data in Table 1 reflect the full amounts from the Department of Global Health with no adjustment for joint management of the department. Revenue and expenditure numbers would be different if only the school’s portion of the global health activities were included in the table.

From 2006 to 2012, restricted operating funds tripled from approximately $60 million to $185 million and designated operating funds doubled to $8 million. General operating funds remained relatively stable over the last seven years. Other operating funds increased but represent only 0.4% of the total school funds. Currently, the school generates 80% of its operating budget from grants and contracts.

Major expenditures include operating costs, faculty and staff salaries and grant and contract subcontracts. Travel expenditures, currently at $9 million, also increased over the reporting period. Student support increased marginally from 2006 to 2012, with the majority of the increase occurring in the last year.

Three internal changes have impacted the resource expenditures of the school: 1) the creation of the Department of Global Health; 2) implementation of an Activities-Based Budget (ABB) at the university level; and 3) implementation of a modified ABB at the school level.
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<th>Table 1. Sources of Funds and Expenditures by Major Category, 2006 through 2012</th>
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<td><strong>Source of Funds</strong></td>
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<td><strong>Total</strong></td>
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Beginning in fiscal year 2012, the university moved to an ABB model and discontinued general operating funding. Instead, the school receives tuition-based revenue based on student credit hours and student majors minus a 30% university tax. Using the ABB model, the school retains 35% of facilities & administration (F&A) funds associated with grants and contracts. This is a decrease in net designated operating funds to the school, since the school had historically retained 43% of F&A. ABB does not change the amount of other operating funds or restricted funds. The school anticipates that the ABB model will result in an increase in net revenue to the school due to tuition retention. With ABB, the school has sought out more teaching opportunities and projects a 5% increase in its budget as a result.

The school identifies seven objectives by which it measures the adequacy of its resources. Three objectives relate to financial support of students and the teaching mission of the school, two relate to research-related support, one relates to the school operating within its budget and the final objective relates to faculty salaries. The school meets the target in research-related grant support and operating within budget. The school relies heavily on research funding rather than state funds to support faculty positions. The current expectation for faculty to generate their own salaries depends on the specific department in which the faculty member is appointed. Some faculty members have greater teaching loads, which influence the expectation of salary support from grants.

The school does not meet its targets for support for students, return of indirect costs to the school and the competitiveness of faculty salaries relative to peer institutions. The increase in student support from 2011 to 2012 is positive, but students in the self-supporting MHA program were concerned about the costs of the program and the limited financial assistance options available. Increasing tuition puts a financial burden on self-pay students who are not eligible to receive state funds or some teaching and research assistantships. Also, the school may have difficulty achieving targets for faculty salaries given that the university has frozen salary increases for the last four years. School leaders anticipate a 2% to 3% increase in salaries in the current year, but such an increase will be insufficient to make substantial headway in achieving the school’s self-defined target in this area.

During the site visit, leaders of some departments indicated that they have sufficient fiscal resources because of revenue-generating online programs. Others expressed concern about the ABB model because its heavy reliance on enrollment numbers disadvantages graduate programs—although the university provides some adjustment. Junior faculty members acknowledged that there is pressure to bring in large percentages of their salary from research funds, but they also said that they receive the tools and support they need to be successful researchers.
1.7 Faculty and Other Resources.

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

This criterion is met with commentary. In 2012, the school had 10 primary faculty members in social and behavioral sciences and 27 to 33 primary faculty members in each of the other four core areas of public health. Faculty numbers in the School of Public Health remained constant or decreased slightly over the last three years (with the exception of the newly created Department of Global Health).

Student-faculty ratios (SFRs) remained relatively constant from 2009 to 2011. SFRs are low, approximately 5:1 for primary faculty for the school overall, and range from a low of 2:1 to 9:1 across core areas. While the ratios for epidemiology and health services are within the appropriate range, students told the site visit team that it can be difficult to connect with faculty advisors because faculty members have heavy teaching and research loads and cannot take on additional graduate students.

The total number of non-faculty personnel is approximately 500, and many of these individuals are grant-funded. The school appears to have sufficient administrative and other staff to meet its teaching needs. Each department has state-funded staff including an assistant to the chair, an administrative financial manager, a payroll staff member, a curriculum staff member and a student support staff member. Certain departments and programs have additional state-supported staff. During the site visit, junior faculty said that research support varies by department and would be enhanced if additional administrative staff were available to provide assistance with putting grants together.

The school has space in many buildings on campus including the Magnuson Health Sciences Building and the University Tower. Off-campus space includes the Sandpoint Facility and the Fred Hutchinson Cancer Research Center. The school occupies 200,705 net assignable square feet on campus and 79,795 square feet off campus. Classroom space is assigned by the classroom services division of the Health Sciences Administration and is not under the control of the school.

The previous accreditation report indicated that the school had been given approval for a footprint on campus, adjacent to the current Health Sciences Building, for construction of a building of approximately 65,000 net square feet. The school continues to seek funding for the construction of this building. The university is in the initial stages of a fundraising campaign, and the provost indicated that a teaching building for all the health science schools is one of two top priorities for the campaign.

The university provides centralized resources to faculty, staff and students for e-mail and discounted licensed computer software. The school maintains 13 servers and a secure central database. The departments are responsible for obtaining and maintaining computer resources for faculty and students.
Resources are purchased from departmental or grant funds. The university's student technology fee program has a competitive process for purchasing computer resources for student use. The school receives $10,000 to $50,000 from this revenue source annually. The computer resources are adequate and range from a low of 90 desktops for biostatistics to a high of 400 desktops for global health.

The university has a library network of 25 facilities serving three campuses. The six health sciences schools created a library program for the greater health sciences community. The Health Sciences Library and its 42 FTE professional and clerical staff serve 25,000 students and faculty located on and off campus. Resources include print journal subscriptions, books, electronic journals and databases. The library also includes computer support services, Smartboards and audio-visual equipment. The library resources are extensive and support faculty and student teaching and research.

The school has collaborations, many of which are formalized by affiliation agreements, with several local institutions. The school has several global partners including universities and foundations. These relations allow faculty and students to collaborate on research, educational and service activities.

The school assures sufficient faculty and other resources by tracking indicators related to SFR, student space, library access, electronic journals and electronic databases. The school has reached the targets for three indicators and nearly reached the targets for the remaining two indicators.

During the site visit, students and faculty indicated that they considered the space allocated to the school to be of good quality and of sufficient size for laboratories, offices and other academic needs. Recent space improvements paid for by the university have positively impacted the school and allowed consolidation of certain groups of faculty. The consolidation has improved faculty and student communication and interactions. The Harris Hydraulics Facility underwent a major renovation for the Department of Global Health.

The commentary relates to the school’s geographic spread and the effect this has on the school’s ability to improve its cohesiveness and singular identity. Faculty reported that the school is so spread out that it is difficult for faculty to meet informally, to form collaborative research projects and to learn best-practices. Students said that they are disinclined to travel to campus (or other locations) to participate in lectures, seminars and other activities because of the time and effort required to commute across Seattle. School leaders are aware of these challenges and are trying to work within this reality. For example, the director of student services uses her office space to create a communal area for students. The dean holds “Hanging with Howie” monthly events for students from across the school and the Office of Communications produces an electronic newsletter intended to support cohesiveness and shared opportunities.
1.8 Diversity.

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

This criterion is met. Improving diversity is one of the seven goals in the school’s strategic plan. As a result, the school has established a standing committee charged with promulgating policies and communications designed to improve diversity. The plan mandates a review of every curriculum to ensure that all programs include material and methodologies that address socioeconomic status, class, race and other social determinants of health. The school is developing school-wide recruitment policies with guidelines and measurable outcomes to diversify faculty, staff and students.

The school defines underrepresented populations as Hispanic/Latinos, African Americans, Native Americans and Pacific Islanders because individuals from these groups have historically been underrepresented in the school in comparison with the population of the state. The school also includes disparities in privilege, socioeconomic status, family history of participation in higher education, gender identity, sexual identity, disability, nationality, religion and military service in its definition of disparities.

During the site visit, the co-chair of the Diversity Committee described the challenge of retaining diverse faculty members because the school struggles to match packages offered by other universities. The committee is focusing on faculty recruitment this year and will focus on student recruitment next year.

The Diversity Committee developed a set of guidelines for faculty searches that have been approved by the dean, department chairs and the Faculty Council. The school’s current goal is to make offers to six new faculty members—one in each department—using the new guidelines. In the past two years, 14 of the 26 new faculty hires were from diverse backgrounds.

The entire university is engaged in planning initiatives that embrace the changing demographics, the challenges of global work and the difficult economic times. The chief diversity officer of the university is charged with developing goals and priorities that embed diversity throughout the university. The university’s Diversity Council drafted a diversity blueprint that defines goals related to leadership and governance; student, faculty and staff diversity; curriculum and research; and institutional and classroom climate. Strategic priorities and recommended action steps accompany each goal.

The school’s Office of Student Affairs recently hired a staff member to focus specifically on recruitment and student outreach with an emphasis on diversity. During the site visit, this staff member described the school’s strategy of establishing pipelines with community colleges and high schools as a recruitment tool.
The school also chooses a book each year that all incoming students (and other members of the school community) are encouraged to read. Cultural competence and issues of diversity are often themes of the chosen book, and this activity creates opportunities for dialogue all year long. Students told site visitors that the book was incorporated into their courses and that the resulting discussions further enhanced the school’s commitment to diversity.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. The school offers undergraduate public health degrees, academic and professional master’s degrees, academic doctoral degrees and joint degrees. In addition to offering the MPH in the five core knowledge areas, the school offers MPH tracks in areas such as maternal and child health, global health, nutritional sciences and public health genetics. The school offers generalist MPH and MHA degrees in traditional and executive formats. Table 2 presents the school’s degree offerings.

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<thead>
<tr>
<th>Table 2. Degrees Offered</th>
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<tbody>
<tr>
<td>Bachelor’s Degrees</td>
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<tr>
<td>Environmental Health</td>
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<tr>
<td>Health Informatics and Health Information Management</td>
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<td>Public Health</td>
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<tr>
<td>Public Health</td>
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<tr>
<td>Master’s Degrees</td>
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<tr>
<td>Biostatistics</td>
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<tr>
<td>Biostatistics: Clinical Research</td>
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<tr>
<td>Environmental Health</td>
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<tr>
<td>Occupational and Environmental Exposure Sciences</td>
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<tr>
<td>Toxicology</td>
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<tr>
<td>Environmental and Occupational Health</td>
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<tr>
<td>Environmental and Occupational Health: Occupational Medicine Residency</td>
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<tr>
<td>Epidemiology</td>
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<tr>
<td>Epidemiology: Clinical Research</td>
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<tr>
<td>Global Health</td>
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<td>Epidemiology: Maternal and Child Health</td>
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<tr>
<td>Global Health</td>
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<tr>
<td>Health Metrics and Evaluation</td>
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<tr>
<td>Leadership, Policy, and Management</td>
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<tr>
<td>Peace Corps International</td>
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<tr>
<td>Health Services</td>
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<tr>
<td>Health Services: Executive</td>
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</table>
### Table 2. Degrees Offered

<table>
<thead>
<tr>
<th>Health Services: Clinical Research</th>
<th>MS</th>
<th>MPH</th>
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<tbody>
<tr>
<td>Community-Oriented Public Health Practice</td>
<td>MPH</td>
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<tr>
<td>Health Systems and Policy</td>
<td>MPH</td>
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<tr>
<td>Health Services: Maternal and Child Health</td>
<td>MPH</td>
<td></td>
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<tr>
<td>Social and Behavioral Sciences</td>
<td>MPH</td>
<td></td>
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<tr>
<td>Public Health Nutrition</td>
<td>MPH</td>
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<tr>
<td>Nutritional Sciences</td>
<td>MS</td>
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<tr>
<td>Public Health Genetics</td>
<td>MPH</td>
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<tr>
<td>Genetic Epidemiology</td>
<td>MS</td>
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<tr>
<td>Health Administration</td>
<td>MHA*</td>
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<tr>
<td>Health Informatics and Health Information Management</td>
<td>MHIHIM</td>
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### Doctoral Degrees

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<tr>
<th>Biostatistics</th>
<th>PhD</th>
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<tbody>
<tr>
<td>Statistical Genetics</td>
<td>PhD</td>
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<tr>
<td>Environmental and Occupational Hygiene</td>
<td>PhD</td>
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<tr>
<td>Toxicology</td>
<td>PhD</td>
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<tr>
<td>Epidemiology</td>
<td>PhD</td>
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<tr>
<td>Global Health: Implementation</td>
<td>PhD</td>
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<tr>
<td>Global Health: Metrics</td>
<td>PhD</td>
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<tr>
<td>Global Health: Pathobiology</td>
<td>PhD</td>
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<tr>
<td>Health Services</td>
<td>PhD</td>
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<tr>
<td>Nutritional Sciences</td>
<td>PhD</td>
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<tr>
<td>Public Health Genetics</td>
<td>PhD</td>
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### Joint Degrees

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<th>Anthropology</th>
<th>PhD/MPH</th>
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<tbody>
<tr>
<td>Business</td>
<td>MBA/MPH</td>
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<tr>
<td>Dentistry</td>
<td>MSD/MPH</td>
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<tr>
<td>Health Administration</td>
<td>MHA/MPH</td>
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<tr>
<td>International Affairs</td>
<td>MAIS/MPH</td>
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<tr>
<td>Law</td>
<td>JD/MPH</td>
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<tr>
<td>Law</td>
<td>JD/MHA</td>
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<tr>
<td>Medicine</td>
<td>MD/PhD</td>
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<tr>
<td>Medicine</td>
<td>MD/MPH</td>
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<tr>
<td>Medicine</td>
<td>MD/MHA</td>
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<tr>
<td>Molecular and Cellular Biology</td>
<td>PhD/MS</td>
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<tr>
<td>Nursing</td>
<td>MN/MPH</td>
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<tr>
<td>Public Affairs</td>
<td>MPA/MPH</td>
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<tr>
<td>Public Affairs</td>
<td>MPA/MS</td>
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<tr>
<td>Public Affairs</td>
<td>MPA/MHA</td>
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<tr>
<td>Social Work</td>
<td>MSW/MPH</td>
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<tr>
<td>Veterinary Medicine</td>
<td>DVM/MPH</td>
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* Offered in an executive format

In addition to core coursework in the five knowledge areas, a practicum and a culminating experience, all MPH students must complete additional track-specific coursework. Additional biostatistics courses address topics such as designing studies, categorical data analysis and survival analysis. Environmental and occupational health courses address topics such as exposure monitoring, risk assessment, waste
management/pollution and the built environment. Students earning the MPH in occupational and environmental medicine take courses in toxicology, health and safety problems in industry and environmental health and complete case studies about relevant topics. The site visit team reviewed course syllabi and confirmed that the school offers sufficient advanced-level coursework to support these degree programs.

Advanced courses related to health systems and policy address health policy research, health policy development, health economics, health law and ethics. Students studying social and behavioral sciences must take courses in social determinants of health, strategies of health promotion, community approaches to health promotion, health economics and advanced biostatistics.

Students studying public health nutrition take courses that address topics such as nutrition and chronic diseases, nutrition and metabolism, maternal and infant nutrition and research design. Public health genetics requires courses in genetic epidemiology, genomics, ethical issues in public health genetics, pharmacogenetics and toxicogenetics and genetics law.

The school’s community-oriented public health practice MPH degree is organized into blocks over a two-year period. Each block uses case studies to address the five core areas as well as advanced content related to the social and behavioral sciences.

The executive MPH requires students to take courses about decision support models, applied community research, program evaluation, qualitative research methods, health economics, health communication, ethics and financial management for health professionals.

The MHA degree is formally part of the Graduate School’s interdisciplinary group structure; however, the administrative responsibilities, academic leadership and the majority of faculty are housed in the school’s Department of Health Services. This degree is offered in traditional and executive formats.

Beginning in fall 2013, the school will offer a master’s degree in health informatics and health information management. This program will prepare graduates to lead the development of enterprise-scale health care and public health information systems and integrate health data and electronic health records.

MS and PhD degrees are offered through all departments as well as through interdisciplinary programs in nutritional sciences and public health genetics. The PhD in pathobiology is offered through the Department of Global Health.
2.2 Program Length.

An MPH degree program or equivalent professional public health master’s degree must be at least 42 semester-credit units in length.

This criterion is met. All MPH tracks require a minimum of 63 quarter credits. The school has not awarded any MPH degrees for fewer than 63 quarter credit hours in the past three years.

The university’s quarter system includes 10-week instructional periods. A credit is equivalent to one contact hour per week for 10 weeks plus additional time for reading, studying and preparing assignments. Therefore, a three-credit course, which is typical in the MPH program, entails 30 in-class hours and 60 to 90 hours working outside of the classroom.

2.3 Public Health Core Knowledge.

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

This criterion is partially met. All MPH students are required to take at least one course in each of the five core knowledge areas. The school has identified multiple courses in each core area that meet the requirement; these options usually allow students to take a more advanced course if they have the proper preparation.

The concern relates to the use of the course “Problems in Global Health” (GH 511) as an option to prepare students in the core area of health services administration. MPH students in the global health track are allowed to count Problems in Global Health as the health services administration core course. This course is oriented to global health issues and serves as an introduction to global health. It contains important topics such as poverty, international aid, foreign policy and roles for health workers in global health; however, a comparison of the GH 511 syllabus with the syllabus of the health services administration course required of all other MPH students (HSERV 511) reveals significant differences between the two courses in relation to coverage the health services administration core area. GH 511 does not address topics such as planning, organization, administration, management, evaluation and policy analysis of health and public health programs.

Faculty told site visitors that waivers of core courses are infrequent. When waivers are granted, faculty review the student’s prior coursework in the area and determine the comparability of prior study.
2.4 Practical Skills.

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

This criterion is met. All MPH students must complete a practicum of at least 120 hours. Students may elect to complete as many as six credits (240 hours), and students in the community-oriented public health practice and the nutritional sciences tracks must complete a 240-hour practicum. The assistant director of student affairs is the school’s practicum coordinator; she is assisted by the Practicum Steering Committee. The following MPH programs designate faculty members to organize practica: 1) community-oriented public health practice, 2) nutritional sciences, 3) public health genetics and 4) executive MPH. All other MPH students select a faculty advisor. Learning contracts created in collaboration with the faculty advisor must include individualized learning objectives.

School leaders told site visitors that they are working to improve the practicum process. The assistant director of student affairs is responsible for providing more structure and developing more sites and site supervisors. She is reaching out to new potential sites and has begun a “practicum brown bag” series where potential sites can visit the campus and speak with potential practicum students. The brown bag initiative has already provided more sites. Faculty advisors often help students find sites, and the Northwest Center for Public Health Practice, housed at the school, helps students identify potential sites. Students confer with their faculty advisors on an as-needed basis.

Site supervisors must have a population-based health perspective and (preferably) a master's degree in a relevant discipline. These individuals must be willing to spend scheduled time with students. When a site is identified, a standard affiliation agreement is executed. The school maintains a database containing updated descriptions of all approved practicum sites.

A site supervisor handbook describes the expectations and responsibilities of the site and site supervisor; however, there is no formal orientation unless the site supervisor requests it. If an orientation is requested, it is provided in person, when possible. The assistant director of student affairs and/or the student’s advisor addresses any questions or challenges that might arise during the course of the student’s practicum.

The faculty advisor monitors the progress of the practicum and notifies the assistant director of student affairs if there are any problems or concerns. The faculty advisor also evaluates the experience, reviews the site supervisor’s evaluation of the student and reviews the student's written assignment and poster. At the time of the site visit, the school was developing a student evaluation form to capture the quality of the
experience and supervisor from the student’s perspective. Questions such as “Would you recommend this site to another student?” will be on this evaluation form.

In 2012, a more stringent waiver policy was put in place. To waive the required practicum, a student must have at least three years of population-based public health experience under the supervision of a master’s-level supervisor. The student must also demonstrate that he or she has met the practicum’s learning objectives. Students requesting a waiver must complete the waiver application, and the Practicum Steering Committee makes a decision on whether to waive the practicum. The number of students receiving a waiver decreased from 19 in 2010 to three in 2012.

During the first year, the community-oriented public health practice practicum provides students with the opportunity to practice what they learn in the classroom in a local health department. The school has a well-established working relationship with the Seattle and King County Health Department, which is a large, community-based health agency. Students take the practicum seminar the first semester and then complete the practicum field experience during the second semester.

The occupational medical residency practicum is a 12-month practicum with approximately six months devoted to patient-care learning. Practicum rotations for occupational medical residents are described in the self-study and include work in off-site settings such as the Washington Poison Center, the Veterans Administration of Puget Sound and the Central Washington Occupational Medicine Clinic.

Through an agreement with the US Army, the school provides coursework for a few preventive medicine residents who are also pursuing an MPH. The practicum year of their residency training at the Madigan Army Medical Center fulfills their MPH practicum requirement.

Students pursuing joint degrees with the School of Medicine, School of Social Work and School of Public Affairs can often substitute their fieldwork for the school’s practicum requirement when their experiences address the school’s learning objectives, the students are closely supervised and evaluated and when the fieldwork requirements from these schools are more extensive than those of this school.

The agencies used for practica for the last two years are listed in the self-study and include more than 125 sites. Sites range from local health departments to locations in South America and Africa.
2.5 Culminating Experience.

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

This criterion is partially met. All MPH programs require a culminating experience. The master’s thesis is the most common culminating experience for the MPH. The thesis is a rigorous scholarship-based study on a research question selected by the student in consultation with his or her advisor. The self-study indicates that the MPH thesis is designed to 1) consolidate and advance knowledge about a research topic, 2) apply research methods to create new knowledge, 3) develop research skills and 4) gain expertise in a specialized area of interest. A thesis also serves as the culminating experience for the MS degree. While the focus of the thesis for the MPH and MS might address different study questions, faculty told site visitors that the thesis for the two degrees is essentially the same.

A master’s capstone project is an option for the executive MPH, the MPH in environmental health, the MPH in health services and the community-oriented public health practice program. Capstone projects are an alternative to a master’s thesis; they address a public health problem in a community setting and apply evidence-based solutions to the problem. The capstone is also designed to develop community partnerships and solutions. The capstone is required to be as rigorous and scholarship-based as the thesis.

Students earning an MS in environmental and occupational exposure science complete a portfolio. While the thesis for the other MS degrees is designed to build research skills and advance scientific knowledge, the portfolio is intended to develop practical skills for students focused on professional careers. The portfolio requires the completion of an internship, a field-based project and a written report. Students document their learning experiences in a web-based portfolio.

The MHA program requires students to complete the capstone consulting project, which is an integrative project relevant to a healthcare organization with recommendations of ways to handle an issue. The student works directly with a preceptor in the organization to identify and analyze a management problem and formulate recommendations.

The dissertation is the culminating experience for doctoral programs and is a major research study that contributes new knowledge. The dissertation follows the requirements of the Graduate School and is discussed in more detail in Criterion 2.12.

The concern relates to the thesis completed by MPH students. Each department has its own written policies, but on-site review indicated that the policies uniformly direct students to focus their project or
study in one area. This is inconsistent with the requirement that the culminating experience provide an opportunity for students to synthesize and integrate the knowledge acquired in coursework and other learning experiences across the MPH curriculum. For example, the guidance for the MPH thesis in the Department of Epidemiology specifically states that the thesis does not need to “include techniques and knowledge from other disciplines (e.g., molecular biology, health services)”. This guidance applies to both MS and MPH students.

2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The school must identify competencies for graduate professional public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).

This criterion is partially met. The school has developed competency sets at many levels: school, department (in some cases), program and track.

The self-study lists a set of “generic” competencies for all MPH students. The self-study also lists “core-area-specific competencies” for all MPH students that are the learning objectives for the five core courses. The large number of competencies makes it difficult to identify what a student is expected to achieve in the MPH program. On-site review of the syllabi for the MPH core courses showed inconsistencies between the stated learning objectives and the competencies that are expected to be addressed, as indicated in competency matrices.

The first point of concern relates to the lack of a uniform set of core MPH competencies that are used consistently across departments regardless of track. Different versions and partial lists of competencies are listed in the self-study, website, core course syllabi and handbook—making it difficult to identify a clear set of competencies for the MPH degree programs. In meetings, faculty expressed different interpretations and some confusion about the competencies.

The second point of concern relates to the use of competencies for the undergraduate degrees. The competencies for all undergraduate public health students were only found in the self-study. The undergraduate competencies are not found on the website, program descriptions or on syllabi. Students who met with site visitors were not aware of the use or purpose of competencies in their degree program.

The third point of concern relates to the lack of rigor among several sets of track competencies. The self-study includes competency sets for all of the degree programs at the school. Considerable variability exists in the MPH track competencies among the departmental programs. For example, the MPH program in environmental and occupational health has four competencies: the first two indicate the student will meet the “generic” and “core-specific learning objectives,” and the last one is to summarize a
practicum. This leaves only one substantive competency for track-specific coursework. Several other MPH and MS programs have similar issues. For the PhD program in nutritional sciences, some competencies are written at the level of “awareness” rather than at a higher level.

The fourth point of concern relates to the degree of overlapping competencies for the MPH and MS degree programs for a discipline within a department. For example, the MPH and MS degrees in biostatistics list many of the same competencies. Also, few differences can be found between the MS in biostatistics and the MS in biostatistics in clinical research. Examples of overlapping competencies are also repeated in other departments, despite the fact that required coursework and other expectations differ. Site visitors found a large amount of redundancy among the MPH and MS degree curricula with little differentiation among competencies, required courses or theses projects.

The self-study presented a matrix mapping the departmental MPH, MS and PhD degree competencies to required core and programmatic courses. For many core courses, the syllabi do not contain the learning objectives corresponding to the competencies listed in the self-study. Not all syllabi include the learning objectives. In addition, the matrix shows that many competencies are only evaluated in the practicum and culminating experience. On many course syllabi, the learning objectives are not clear and may be presented as goals, aims, purposes or explanation of the course. Some syllabi intermix goals with other course information such as attendance requirements. These inconsistencies make it difficult for a student to know what knowledge and skills he or she is expected to attain by the end of the course.

Faculty reported different processes for developing the competencies for degree programs. The Curriculum and Educational Policy Committee related a long and iterative process for developing the school-wide and generic competencies for all students. Committee members indicated that the development of competencies is a work in process and may not extend down to programs yet.

2.7 Assessment Procedures.

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

This criterion is partially met. The school evaluates students through self-assessment, performance on coursework, the practicum, the culminating experience and academic advising. The school surveys students each spring about their perceived mastery of degree competencies, and students receive feedback via email. Alumni who met with site visitors said that they did not know how to evaluate themselves and they did not think the automated feedback was useful.

The first point of concern relates to the lack of clear assessment based on competencies at all degree levels. As discussed in Criterion 2.6, the competencies are used inconsistently across programs and
students are evaluated on the successful completion of courses, practica and culminating experiences, but reviewers found little evidence of this assessment being based on the established competencies. The self-study notes, and on-site interviews confirmed, that the school expects faculty and staff advisors to monitor student progress. Students and alumni who met with site visitors said that the benefits and support received from an advisor varies by individual.

Students must take all required courses for a grade and must successfully pass exams and complete assignments for each course. Coursework includes papers, presentations, group projects, service-learning activities and exams. For graduate students, a GPA of 2.7 (out of 4.0) or higher is required, and graduate students must maintain a 3.0 GPA to graduate. Undergraduate students must maintain a 2.0 GPA to be enrolled at the university. In addition, the BS in environmental health requires students to earn at least a 2.0 in every course that is counted toward the major, and BS and BA in public health students must have a cumulative 2.0 GPA in all foundations courses and the capstone experience.

Faculty advisors assess students’ performance outside of the classroom through the practicum experience. Site preceptors evaluate students based on competencies identified in the learning contract. Students complete a self-assessment of their attainment of the identified competences and the overall experience, write a reflection paper and develop and present a poster. The practicum syllabus states that the practicum is intended to move students toward mastery of the generic MPH competences and requires students to define three to five individualized learning objectives.

MPH and MS students must complete rigorous theses or capstone projects to fulfill the requirements of their degrees. The experiences are assessed based on students’ ability to demonstrate that they can operate at the expected level. Similarly, all PhD students must write an acceptable dissertation and pass a final oral exam. This process, which is explicitly prescribed and monitored by the Graduate School, assures that students have achieved the level of skill necessary to contribute knowledge at the doctoral level. The preliminary and general exams for doctoral students are designed to test comprehensive knowledge in the discipline as well as specific knowledge related to the area of the dissertation.

The school reports high graduation rates in each of its degree programs. Graduation rates for the BA and BS in public health were 100%, 100% and 94% in the last three years. Degree completion for the BS in environmental health was 87%, 77% and 55% (nine of 22 are still enrolled) in the last three years. Students in the HIHIM BS major have produced graduation rates of 91%, 84% and 70%. All master’s degrees have a six-year maximum allowable time to graduation, and the MPH program reports graduation rates between 78% and 93% each year. Graduation rates for the MHA degree have been above 90% almost every year, and graduation rates for the MS degree are between 80% and 90% each year.
year. PhD students have 10 years to complete the degree, and more than 80% have successfully finished within the maximum allowable time.

The second point of concern relates to the response rate to the survey that collects job placement information. The school surveys alumni every five to seven years, and the last survey was conducted in 2012. By degree, the response rates were 6% (MS), 7% (MHA), 12% (MPH) and 17% (PhD). The school is expected to report on the job placement of graduates every year, and current practices do not require annual data collection or adequately distinguish the rate of employment within one year of graduation. In addition, when response rates are below 30%, the school is expected to take action to improve these rates. CEPH does not require that data collection occur through traditional/formal survey methods or that data be collected at a single point in time. Some schools and programs prefer to collect information throughout students’ final semester and during the first year post-graduation, updating data as each individual graduate secures employment or proceeds to another education/training program. Such an approach allows schools and programs to present more accurate data, as some students secure employment or admission to further education before graduating and some take some time after graduation to do so.

Although response rates were extremely low, graduates who responded to the last alumni survey did report high rates of employment. At the MPH level, 92% said they were employed and 6% said they were continuing their education. All 21 MHA respondents reported employment. Of the 12 MS students who responded, nine were employed, and three were seeking additional education. At the PhD level, 81% were employed and 19% were seeking additional education. The school did not have employment data for undergraduate students because the BS and BA degrees have not been housed in the school long enough to collect these data. The school has plans to collect this information after spring 2013.

2.8 Other Graduate Professional Degrees.

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

This criterion is met. The school offers the MHA degree in traditional and executive formats. MHA students take courses in health services, epidemiology, quantitative methods, health policy, organizational behavior, health economics and environment of care. In addition, MHA students complete a summer internship in a healthcare delivery organization and complete a team-based consulting or capstone project.

The school started a master of health informatics and health information management (HIHIM) in August 2012 as a self-sustaining degree program in the Department of Health Services. The first students will enroll in August 2013. Students will be required to take courses in epidemiology, health management,
health services and quantitative methods and complete a capstone project focused on a management project in healthcare and healthcare-related organizations.

Although the school categorized the MS in occupational and environmental exposure science as an academic degree, site visitors determined that it is more appropriate to classify it as an other professional degree because the purpose is to train students for professional practice. The program’s website states that graduates “are employed as industrial hygienists and safety professionals by industrial firms, government agencies and private consulting firms.” While students can choose between a thesis and a portfolio as the culminating experience, in practice, most students complete the portfolio option. On-site discussions with program leaders revealed that students want a practice-oriented degree with sufficient depth in the area of environmental and occupational exposure sciences (rather than a more broadly focused MPH degree). Students are required to take courses in epidemiology, statistics and environmental health sciences.

2.9 Bachelor’s Degrees in Public Health.

If the school offers baccalaureate public health degrees, they shall include the following elements:

Required Coursework in Public Health Core Knowledge: students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses. Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor’s degree at the parent university. The experience may be tailored to students’ expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is met. The school offers the following bachelor’s degrees in public health: BS in environmental health and BA/BS in public health. The BA/BS has been housed in the school since March 2012; it was previously available through the College of Arts and Sciences. The BS in environmental health has been offered since 1947. It is also accredited by the National Environmental Health Science
and Protection Accreditation Council (EHAC) and is administered by the school’s Department of Environmental and Occupational Health Sciences.

Undergraduates admitted to UW may apply to the BA or BS in public health program after completing a minimum of 45 credits and maintaining a minimum cumulative GPA of 2.5. The difference in the BA and BS degrees relates to the requirement for 20 additional credits of science courses for the BS degree, as prescribed by the university. The public health degree requirements are the same for both degrees. Students complete 35 credits of public health foundation courses, which include courses in environmental health, epidemiology, biostatistics, global health, geography and health, public health practice and contemporary issues in public health. Students also must complete 15 credits of public health electives. The electives may be chosen from courses across the university and may include anthropology, biology, environmental health, global health, geography and health services. The program office for the undergraduate degrees includes two staff members who serve as advisors for BS and BA students.

The BS in Environmental Health is a well-established program with admissions similar to the BA/BS in public health. The curriculum includes 20 credits of environmental health courses, two microbiology courses, an introduction to epidemiology course, a biostatistics course and three environmental health selectives. Students must complete an internship that provides practical experience. Faculty from the Department of Occupational and Environmental Health Sciences teach the environmental health courses and supervise the practice experience. Students have one staff advisor, three environmental health advisors and two biomedical sciences advisors.

2.10 Other Bachelor’s Degrees.

If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

This criterion is met. The school offers a BS in health informatics and health information management (HIHIM), which is housed in the Department of Health Services. This undergraduate program has been in operation for more than 20 years. It prepares individuals for a career in health information management and is accredited by the Commission on Accreditation for Health Informatics and Health Information Management Education. The program prepares students to analyze and manage health information and patient data. Five faculty members from the Department of Health Services teach and advise students in the program.

The program requires 65 credits from 16 HIHIM courses focused on data needs and data use in public and private health systems, organizational theory, computer systems in healthcare, health information systems analysis, management theory and application, quality assurance theory and application and finance and legal issues.
2.11 Academic Degrees.

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

This criterion is partially met. The school offers 11 academic master’s degrees and 11 doctoral degrees, as shown in Table 2. All doctoral degrees are administered through the school’s five departments. Although the PhD in pathology is an interdisciplinary program, it is housed in the Department of Global Health. The MS and PhD degrees in nutritional sciences and public health genetics are administered by their respective departments with oversight by the associate dean for research and programs. The PhD in statistical genetics is a joint program between the Department of Biostatistics and the Department of Statistics in the College of Arts and Sciences.

All MS and PhD students are required to take courses in public health areas outside their home departments and are encouraged to explore additional public health areas and topics through electives. Students earning academic public health degrees are often enrolled in classes with students from other public health disciplines, which contributes to their exposure to the breadth of public health.

Biostatistics MS and PhD students are required to choose at least nine credits from a list of courses in epidemiology, environmental health, health services and biological science related to public health. In addition, all students earning a biostatistics degree must take a consulting course in which students in other departments in the school bring in problems for which they need statistical support. This experience exposes biostatistics students to issues related to many areas of public health.

Students in environmental and occupational health sciences are required to take 12 credits of biostatistics and epidemiology and choose from coursework in management, policy and public health-related biological science as electives.

Students in the global health PhD program specialize in one of two areas: metrics or implementation science. Metrics provides students with advanced training in independent, rigorous and timely scientific measurements to accelerate progress on global issues by identifying major problems, assessing how well society addresses those problems and guiding resource allocation to maximize health improvements. Implementation science focuses on the systematic application of scientific approaches to assess efficacy. Student study how interventions can be scaled up with speed, fidelity, efficiency, quality and coverage. Global health students in both tracks must take at least eight credits of epidemiology, eight credits of biostatistics/quantitative methods, eight credits in health systems research and four credits in leadership and management.
MS and PhD students in the Department of Health Services must take eight credits of epidemiology, at least eight credits of biostatistics and additional courses that cover a wide range of public health issues and perspectives. Required coursework addresses health policy, social and behavior science and health economics.

The MS and PhD degrees in pathobiology are intended to bring together the concepts of biology, medicine and public health, particularly as applied to global health issues. The program requires students to apply a multidisciplinary perspective to the study of public health problems such as viral, bacterial and parasitic diseases, as well as conditions such as cancer. Students must take four credits of epidemiology and four credits of global health coursework. In addition, required coursework addresses global health problems from the perspectives of human biology, epidemiology, microbiology and health behavior.

MS and PhD students in nutritional sciences must take at least eight credits of biostatistics, a four-credit course in public health nutrition and courses in nutrition and chronic disease and research design. Seminars and electives also focus on health behavior and programmatic and policy issues related to human nutrition and health.

Students enrolled in the MS in genetic epidemiology and the PhD in public health genetics are required to take at least eight credits of epidemiology, at least four credits of biostatistics, a three-credit course in legal, ethical and social issues in public health genetics and (for PhD students) a course in health services administration and policy.

The master’s thesis is the culminating experience for the academic MS degree. The thesis is intended for students interested in building their research skills and in applying advanced scientific tools in their work. The portfolio option expands the opportunities for development of practical skills for students focused on professional careers. Students selecting the portfolio option complete an internship, a field-based project and written report and document their learning experience in a web-based portfolio. Both options require a minimum of nine credits.

Academic doctoral degrees require a dissertation as the culminating experience. All students must meet the following Graduate School requirements:

- Completion of a program of study and research as planned by the graduate program coordinator in the student’s major department and the Supervisory Committee
- Passage of the general examination
- Preparation of a dissertation that is a significant contribution to knowledge and clearly indicates training in research. Must be accepted by the dean of the Graduate School
• Credit for the dissertation should be at least one-third of the total credits earned. The candidate must register for a minimum of 27 credits of dissertation over a period of at least three quarters; at least one quarter must come after the student passes the general examination.
• Passage of the final examination, which is usually devoted to the defense of the dissertation.

Each department and/or program has its own specifications for the general (qualifying) exam and other prerequisites for the dissertation. The university’s Graduate School monitors all dissertations by requiring that a Graduate School representative—a senior faculty member from a department outside of the student’s department—be a member of the Examining Committee. Upon completion of the student’s dissertation defense, the external representative submits a report to the Graduate School and rates the fairness and rigor of the process. Site visitors’ review of these reports indicates that all doctoral exams administered by the school have been judged to be fair and rigorous.

The concern relates to the requirement of an epidemiology course for all academic degrees. The MS in biostatistics includes epidemiology as an option—and while reviewers understand that biostatistics students are likely to take courses in epidemiology—a course in this discipline is not an explicit requirement. In addition, the curriculum for the MS in nutritional sciences does not include a course in epidemiology.

2.12 Doctoral Degrees.

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

This criterion is met. The school offers a PhD degree in each of the five core areas of public health as well as other areas, as shown in Table 2. During the site visit, students commented that the school has many doctoral-level courses available in each department. They also spoke highly of the mentoring they receive from their faculty advisors. The number of faculty in each department appears to be sufficient to support the doctoral programs. The number of enrolled doctoral students ranges from a low of four in nutrition sciences to a high of 87 in epidemiology. The nutritional sciences program had one newly admitted student in 2011-2012. In 2011-2012, no students graduated from the PhD programs in environmental and occupational hygiene and public health genetics; one student graduated from nutritional sciences; two graduated from toxicology and pathobiology; seven graduated from biostatistics; eight graduated from health services; and 19 graduated from epidemiology.

Funding for doctoral students varies by department. Types of funding include research assistantships, teaching assistantships, traineeships and collaborations with outside agencies and organizations. All doctoral students are supported financially. The size of each doctoral program is limited by the ability of the faculty to provide research assistantships from grants and other sources of external support. The nutritional sciences program does not have sources of funding beyond research grants to support.
doctoral students, which has resulted in the department having larger numbers of students in its dietetics program and a small number of students in its doctoral program.

The school provides many options for areas of study through a variety of courses and multiple degree programs. The number of faculty who provide research mentoring is large. On-site discussions with doctoral students confirmed that they are satisfied with the mentoring they receive and the quality of the program compared with similar degrees from other universities.

2.13 Joint Degrees.

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

This criterion is met. The school's 16 joint degree programs, as shown in Table 2, have all been developed in accordance with the guidelines established by the university's Graduate School. Students must be admitted to each degree individually and must fulfill the academic requirements of each program. Joint degrees are managed by designated faculty in each participating program to ensure coordination of the curriculum and adequate support and supervision of students. Only a handful of students enroll in a joint degree program each year. The MD/MPH and MSW/MPH programs enroll the most students: about five to 10 students enter each program each year.

Medical students may apply to the MD/MPH program during their first year of medical school. Students complete all requirements for the MPH degree during a five-quarter period between their third and fourth years of medical school. Students usually pursue an MPH in environmental and occupational health sciences, epidemiology, global health or health services.

The MSW/MPH is a three-year program that prepares students to work at the interface of social work and public health. Students participating in this program may choose an MPH track from those housed in the Department of Health Services.

The other joint degree programs are usually offered to specific students who express a unique interest. Not all joint degree programs enroll students continuously. Minimal course sharing occurs in the joint degrees. When credits from another program are proposed to count toward the public health degree, each program has a process to determine the acceptability of the credits. The most common approval method is through the student's faculty advisor based on a comparison of syllabi.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is met. The school offers an executive format for the MPH and MHA degrees. The programs are designed for mid-career professionals who want to earn the degree while maintaining professional employment.

The executive MPH (eMPH) program is specifically intended for professionals in public, community and environmental health. The curriculum is delivered through a combination of distance learning and required on-campus sessions during weekends and in the summer. The on-site commitment involves eight sessions per year (for two years); each session lasts between two and five days. Slightly less than half of the curriculum is offered in a distance format. All instructors in the eMPH program have academic appointments in the School of Public Health or, in a few cases, other schools at UW; thus, they are held to the same requirements and expectations as those teaching courses in a traditional format. The program has its own administrative support that is funded through program revenues. The quality of teaching and the content of courses are monitored by program faculty, the Department of Health Services Curriculum Committee and the school’s Curriculum and Educational Policy Committee. The program has admitted a 16-student cohort each year and plans to increase to a 24-student cohort for the next admission cycle. Students work in eight-member groups on case studies and other projects.

The executive MHA (EMHA) program primarily enrolls individuals who are clinically trained and who do clinical work. The program meets nine times each quarter: three days per week for three weeks. The program matriculates about 40 to 50 students each year in two cohorts (compared with 25 to 30 students each year in the traditional MHA program). When comparing the MHA and EMHA programs, courses (and instructors) are the same for about 90% of the curriculum. All instructors in the EMHA program have academic appointments in the Department of Health Services. The program has dedicated administrative support, in addition to support provided by the UW Professional and Continuing Education division, which manages the financial aspects of both the in-residence and executive programs.

Students in the eMPH program typically take exams while participating in the on-campus components of the program. In some distance-based courses offered through the UW Professional and Continuing Education division, students have the option of a proctored exam at approved facilities in Seattle or
Bellevue, or through a process by which students at a farther distance may find and request a particular proctor in their local area. When necessary, these students use library proctor services, other universities or work-related proctors.

Because the EMHA program is taught entirely on campus, participation in classes and attendance for exams is monitored in the same way as for in-residence programs. Class sizes are small, and faculty are able to monitor and mentor students based on individual needs and interests.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The school has built an extensive research portfolio that is consistent with its mission. Faculty are expected to engage in high-quality research, sustain research productivity and achieve a scholarly reputation through publications. The school emphasizes peer-reviewed research and educating future public health researchers. The research portfolio includes community-based, clinical and laboratory research projects with a strong interdisciplinary focus across the various areas of public health. The school has 38 research centers that serve as focal points for research activities.

The school receives significant grant funding: $169 million in 2009-2010, $193 million in 2010-2011 and $184 million in 2011-2012. Research funding has increased substantially since the Department of Global Health was created in 2007. Assistant professors are expected to generate two publications each year, associate professors have an expectation of four publications and full professors have an expectation of six publications.

The school’s faculty members are active in numerous community-based research projects through collaborations with local health agencies and community-based organizations. Data for the last three years show that community-based research composed 15% ($30 million) of the school’s research funding. Students are involved in about half of the community-based grants.

On-site discussions with faculty confirmed that research is a primary focus. Faculty members must generate research funding to maintain their salaries. The 38 research centers are nuclei for research collaborations on a variety of topics and provide an infrastructure to promote research.

Students actively participate in research projects through research assistantships, volunteer opportunities and thesis and dissertation work. The doctoral programs are integrally tied to faculty research. In 2011-
2012, 15% of master’s students and 62% of PhD students received research assistantships. Approximately 21% of master’s students and 82% of PhD students published in 2011-2012. The significant number of students listed as co-authors on presentations and publications provides evidence of the opportunities available for student involvement.

3.2 Service.

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

This criterion is met. The school’s service activities are numerous and comprehensive and demonstrate continued, consistent commitment to community and professional service. The establishment and growth of the Northwest Center for Public Health Practice (NWCPHP) continues to strengthen the school’s ability to provide training to state and local public health and to build ever-stronger relationships with the community. The school has contracts in the northeast region of the US to help teach and train public health professionals. In-person and distance-based webinars on relevant topics and trends are available. Current topics include business planning for public health practitioners and lead exposure. NWCPHP provides three fee-based, on-site training opportunities: 1) a management certificate program, 2) a leadership program and 3) a summer institute. The summer institute’s curriculum changes yearly to reflect current topics in public health.

The school encourages and expects faculty service efforts as is evident in the school’s Academic Affairs Handbook. Contribution to public health practice is a criterion for promotion. The university permits faculty to use one day a week for outside consulting in an effort to establish working relationships with outside agencies and government, which is seen as a win-win enterprise. Faculty members complete a “Summary of Outside Professional Services” form, which reports paid and unpaid outside activities.

The Health Policy Center Initiative, housed in the Department of Health Services, provides services to help move health policy analysis and decision making forward at all levels of government. The International Training and Education Center for Health, housed in the Department of Global Health, provides training and education internationally. In the center’s 10 years in existence, its budget has grown from $50 million to $500 million. The Strategic Analysis, Research and Training (START) program created by the Bill and Melinda Gates Foundation provides support services to the Department of Global Health. While this work is solely focused on international efforts now, the school and the foundation hope to create domestic research opportunities in coming years. Faculty and students have also worked with environmentally focused nonprofit groups such as the Washington Toxics Coalition and Washington Physicians for Social Responsibility and food and nutrition-centered agencies, such as organic farms.
The school has more than 60 affiliation agreements with outside agencies, including six state health departments in the northwest US, public health departments for Seattle and King County and the Washington State Department of Labor and Industries.

3.3 Workforce Development.

The school shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

This criterion is met. The school engages in multiple activities that support the professional development of the public health workforce. These activities are largely administered through the school’s departments and centers.

The Department of Environmental and Occupational Health Services assesses the workforce training needs of its target audience through periodic alumni surveys, evaluation forms for continuing education courses, e-mail surveys of participants in the Occupational Medicine Ground Rounds and discussions with faculty and participants in workshops, conferences and courses. NWCPHP assesses the need for continuing education and workforce training through the Regional Network Steering Committee. This long-standing advisory committee convenes formally twice a year to review and update plans and activities. The committee’s members include representatives from state, local and tribal public health organizations in all six states. The Department of Global Health’s International Training and Education Center for Health (I-TECH) plans and implements trainings that address the specific needs and resources of the countries with which it is working. These are collaborative efforts with the ministries of health and education for each country. The Department of Biostatistics holds a summer institute in statistical genetics. The self-study provides a comprehensive list of externally funded workforce development and training support activities.

The school offers 12 graduate certificate programs in areas such as global health, health behavior and health policy. These 15-credit programs are usually taken by matriculated students; thus, they are not the school’s primary contribution to workforce development. The executive MPH program offers a certificate in public health practice for current public health professionals who may not be able to commit to a full MPH program. It combines on-site and partial distance-learning courses over three quarters and includes the same introductory and core public health courses taken by all first-year eMPH students.

The MHA program offers a certificate in medical management in collaboration with the university’s Education Outreach program. This certificate is geared toward mid-career physicians and other clinical practitioners seeking preparation for executive positions in healthcare organizations.
Additional certificates are offered through the PWCPHP, the Pacific Northwest OHSA Education Center and the International Training and Education Center for Health for completion of their specific trainings. These certificates do not confer any credit from the university.

Historically, the school did not have a central database to track these certificate programs. Some operate independently and some operate within the university’s Professional and Continuing Education Office. There is a newly formed Distance Learning and Learning Technology Committee chaired by the associate dean of academic affairs that is designed to help the distance-learning programs work together to enhance the school’s distance-learning capacity.

NWCPHP works closely with other state universities in the region, as well as state health departments, the Washington Public Health Association and the Northwest Portland Area Indian Health Board, which represents 43 federally recognized tribes in Washington, Oregon and Idaho. I-TECH partners with ministries of health and education in more than 16 low-income countries in Africa, South America and Asia. The Northwest Center for Occupational Health and Safety is one of 18 education and research centers funded by the National Institute for Occupational Safety and Health.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The school has a qualified faculty complement able to support its mission, goals and objectives. The school has 151 primary faculty members and 105 secondary faculty members who participate in teaching, research and service. Faculty members have a variety of areas of expertise including the core areas of public health, computer science, mathematics, occupational medicine, geography, microbiology, economics, anthropology, education and toxicology. Faculty members have public health degrees from CEPH-accredited schools and programs.

The large number of qualified faculty enhances the school’s strengths in areas such as educational preparation, practice experience and research and instructional competence. The school has faculty with excellent research expertise, as indicated by its research portfolio. Many faculty members have worked in public health agencies or in practice prior to their appointments at the school.

The school identified six indicators through which it assesses the qualifications of the faculty. Three indicators relate to faculty qualifications and include educational achievement (whether the individual has a doctoral degree), number of publications in peer-reviewed journals and median H-Index, which is
determined from the number of citations to published work. Three indicators relate to the evaluation of faculty by students and include student ratings of academic standards, classroom teaching and satisfaction with supervisor and/or guidance. All targets have been met or exceeded. Site visitors determined that the targets are ambitious, yet appropriate, and maintain the high level of quality at the school.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The rules and regulations governing faculty are available on the university’s website and are documented in the UW Policy Directory. The school has an Academic Affairs Handbook that is highly detailed and is available on the school’s website. The handbook contains information related to the processes of faculty hiring, appointment, promotion, tenure and yearly activity reporting.

Faculty members are classified as assistant professor, associate professor, professor, research assistant professor, research associate professor, research professor, lecturer, senior lecturer and principal lecturer. The Academic Affairs Handbook defines each category of faculty in terms of required qualifications, length of appointment and roles. The school confers the title of clinical faculty to individuals with a primary appointment with an outside agency or non-academic unit of the university or in private practice.

The Academic Affairs Handbook provides information on criteria for promotion related to research, teaching, academic public health practice and service. Specific targets in each category provide guidance to faculty and include minimum and expected targets for promotion and tenure. Faculty may decide to be evaluated for promotion based on documented academic public health practice activities, but these individuals must also have some evidence of traditional research as indicated by articles published in peer-reviewed publications. For all categories of faculty, research, teaching and service are essential components of the review. Global health hiring letters clearly state expectations for tenure and promotion. For tenure and promotion, junior faculty with joint appointments said that they get two reviews: either one from each department annually or one from each department in alternating years.

The school conducts faculty evaluations annually with a focus on junior faculty. Junior faculty members are reviewed collectively by senior faculty on an annual basis for contributions to research, teaching and service. The senior faculty members provide specific suggestions and recommendations for improvement. The chair of the department meets individually with each faculty member to review past performance and a letter is written by the chair to the faculty member to summarize the meeting. During on-site discussions, junior faculty members said that they benefited from the annual evaluations. Faculty
teaching is evaluated annually (every three years for full professors) by peer review, which includes observation in the classroom and written evaluation, and by student evaluations collected each time a course is taught.

Both the university and the school provide support for faculty development. The university provides an orientation for new faculty. The school provides an additional half-day orientation for new faculty. Senior mentors are assigned to junior faculty members at the school level. The mentoring programs differ by department, but all involve several senior faculty members who mentor an individual junior faculty member. The Department of Health Services has its own professional development group to mentor assistant professors. Biostatistics provides two new mentors every year to junior faculty. Each year, senior faculty members meet to discuss the junior faculty member’s progress over that year on a scale of 1 to 5 and assess potential progress. The assessment is then provided to the individual in writing.

The university's Center for Teaching and Learning provides instructional resources for all faculty members and the university’s Center for Curriculum Transformation supports faculty in teaching about cultural diversity. Junior faculty members spoke highly of the Teaching Scholars’ Program, which is led by the School of Medicine. The school has large center grants such as the Clinical and Translational Science Award, and the Center for Aids Research provides significant seed funding for research. Other internal awards are provided by the school’s Emerging Areas pilot awards and the university’s Royalty Research fund. These funds allow faculty to subsequently write external proposals and receive funding. Senior faculty have assisted junior faculty by putting them on their grants and by reviewing grant proposals.

On-site meetings confirmed that junior faculty members are knowledgeable about the requirements for advancement in the school, receive support for their development and are aware of resources available to them to advance their research and teaching.

4.3 Student Recruitment and Admissions.

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

This criterion is met. The school recruits and retains qualified students capable of engaging in the school’s learning activities and developing competence for a career in public health. The school recruits students via information tables at local, regional and national fairs; professional meetings and conferences; presentations to high school, community college and current UW students; departmental websites; advertising in publications, on external websites and through social media outlets; electronic mailings; and recommendations from alumni and college advisors. International students are also recruited through collaborative activities at institutions around the world. Student program coordinators who met with site
visitors said that building relationships with other advisors on campus is important so that those advisors know their students will be prioritized in their future studies.

The school recruits at the annual American Public Health Association (APHA) and Washington State Public Health Association meetings and participates in Association of Schools of Public Health outreach efforts. The school supports its diversity initiatives by working with on-campus resources and by attending conferences such as SACNAS (devoted to advancing Hispanics, Chicanos and Native Americans in Science) and ABRCMS (Annual Biomedical Research Conference for Minority Students).

Individual departments also hold information sessions, and the school hosts an admitted student visiting day when accepted applicants can meet with current students, faculty and staff. The Office of Student Affairs has recently begun to centralize the school’s recruitment efforts and outreach, with departments and individual programs providing more targeted activities. The Office of Student Affairs has a .50 FTE staff person who focuses specifically on outreach to prospective students, particularly those who would contribute to the diversity of the student body.

The Office of Student Affairs encourages prospective students to contact the office if they are undecided about which program best fits their educational and career goals. When possible, the office arranges in-person meetings between the prospective student and an academic advisor. After prospective students have selected a program, program and departmental staff coordinate the admissions procedures to ensure that academic advising and other student relationships are established and maintained.

Applicants to the BS or BA in public health must complete the following requirements to be considered for admission:

- Minimum of 45 credits completed
- Minimum cumulative GPA of 2.5
- Minimum grade of 2.0 (out of 4.0) in one of the following topics: environmental health, health services, global health, anthropology, political science, psychology or sociology (specific undergraduate-level courses are defined)
- Minimum grade of 2.0 in one introductory science course: biology, chemistry or physics

In addition to these minimum requirements, the school also considers the applicant’s overall academic record, grades in coursework related to the major and personal statement. Transfer students must also apply for general admission to the university and follow the guidelines established by the UW Office of Admissions.

Applicants to a master’s- or doctoral-level program in the school must complete a UW Graduate School application and a departmental program application. The Graduate School screens applicants to any
graduate program to ensure that the university’s minimum requirements are met. Applicants must meet the following requirements to be considered for a graduate program:

- Minimum 3.0 GPA as an undergraduate
- Narrative statement of professional goals and objectives
- Three personal recommendations
- College transcripts
- Specific prerequisite coursework (for some programs)
- GRE scores above the 50th percentile (may be waived or substituted in specific situations)
- TOEFL scores for international applicants

Each department includes an admissions committee that reviews applications and makes recommendations. Applicants are evaluated on the basis of the entire application rather than any single criterion, and relevant work and/or research experience is weighted heavily by most programs.

Applications to all degree programs in the school have generally remained stable over the last two years. About 55% to 60% of applicants to the undergraduate programs are accepted. A similar percentage of applicants are offered admission to the MHA program, while the MPH and MS programs accept about 35% of applicants, and the PhD programs accept about 25% of applicants. Of those accepted, nearly all BA and BS students choose to enroll, between 50% and 70% enroll in the MPH, MS and MHA degrees and between 38% and 50% enroll in PhD degrees. Student enrollment in most degree programs has remained fairly consistent over the last three years. Exceptions include the BA/BS program, which moved to the school in March 2012, and the PhD in global health, which started in fall 2012. Several MPH tracks in the Department of Health Services have also been discontinued or consolidated in the last three years.

The school has identified six measures by which it evaluates its success in enrolling a qualified student body. The school tracks 1) the number of applicants to each degree program, 2) admission selectivity, 3) matriculation rates, 4) the ability to attract students from under-represented groups, 5) quantitative GRE scores among enrollees and 6) verbal GRE scores among enrollees. The indicators related to the volume of applications, admission selectivity and matriculation of accepted students have declined in recent years. Those who met with site visitors attribute these declines in part to the financial hardships facing the state and nation. The school has hired a student outreach coordinator who is responsible for evaluating recruitment efforts across the school in a more centralized way.

4.4 Advising and Career Counseling.

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

This criterion is met with commentary. MPH students are assigned an advisor at the time of acceptance to the program. Each advisor works with the student to design a course of study based on degree requirements and the student's experience and area of concentration. The school uses a team approach
to advise undergraduate students. Students who met with site visitors said it is easy to switch advisors or consult with multiple faculty and staff members, as needed.

During the site visit, some students expressed dissatisfaction with the advising process at the school. MPH students said they were disappointed to not receive any feedback after completing the competency self-assessment at the end of their first year. When graduate students begin their thesis or dissertation, the faculty member guiding the research effort becomes the advisor.

Doctoral students work closely with the chair of their Dissertation Supervisory Committee, and rate their satisfaction with advising/supervising at 4.3 out of 5 for the past three years. Faculty members serve as mentors when they are members of a Dissertation Supervisory Committee.

The commentary relates to the school’s limited career counseling services. Students and alumni who met with site visitors said they were not aware of many services; and these representatives were likely the more engaged members of the student and alumni body. The school has identified career counseling as an area for improvement and has created a web-based career development guide with links to tips for resume writing, job searching and job interviewing. The school is also tapping into the university’s career counseling resources, including hands-on career counseling, meeting with students one-on-one to help with career search needs and improving online resources.

The students did report that job postings are available online and are kept up to date. Unlike the MPH program, the MHA program employs a full-time career advisor for its students. MHA students expressed high satisfaction with the career counseling services available.

Students have many ways to communicate personal concerns and grievances. Department staff, faculty, program directors, student advisors and the Office of the Dean are all possible avenues. In addition, each department has an appointed student member who serves as a student senator. This senator is available to hear any concerns from students. The Student Public Health Association, which is advised by the director of student affairs, is another venue for students to take concerns. Students can also submit anonymous questions and comments at monthly events hosted by the dean.

The school has a formal protocol for grievances; however, most issues are minor and are handled at the departmental level. The associate dean for academic affairs steps in if the parties cannot resolve the situation. No official grievances have been filed in the last three years.
Monday, April 8, 2013

8:30 am  Site Visit Team Request for Additional Documents
Fred Connell

9:00 am  Meeting with School Leadership
Howard Frumkin
Fred Connell
Mark Oberle
Bruce Weir
Dave Kalman
Scott Davis
Larry Kessler
King Holmes
Deb Hinchey
Alisa Jenny
Patricia McCowan
Ben Robinson
JeShawna Schmidt
Catherine Shen

10:30 am  Break

10:45 am  Meeting with Administrators Related to Finances, Data and Resources
Denis Brasfield
Fred Connell
David Grayston
Mark Oberle
Ben Robinson

11:30 am  Meeting with the Faculty Council
David Grembowski
Karen Edwards
James Hughes
Joel Kaufman
Robert Martin

12:15 pm  Lunch with Students
Claire Allen
Sara Diedrich
Onyinye Edeh
Anna Engstrom
Katie Freeman
Michael Garcia
Amy Leang
Jean McDougall
Arianna Miles
Momoka Nakamura
Ashley Petersen
Stephanie Rosse
Jill Schulte
Genya Shimkin
Ala Soofian
Zosia Stanley
Spenser Troiano
Julie Weis
Janelle Wierenga
1:15 pm  Break

1:30 pm  Meeting with Student Program Coordinators
Deb Hinchey
Kitty Andert
Tory Brundage
Julie Brunett
Brit Exworthy
Gitana Garofalo
Amanda Graybill-Pennington
Gail Greenwood
Susan Inman
Julie Nevins
Kate O’Brien
Carey Purnell
Rachel Reichert
Barb Snyder
Trina Sterry
Jennifer Tee
Katie Wakefield

2:00 pm  Meeting with the Diversity Committee
India Ornelas
Deb Hinchey
Daniel Enquobahrie
Gitana Garofalo
Susan Inman
Biraj Karmacharya
Aaron Katz
David Katz
Lianne Sheppard

2:45 pm  Break

3:00 pm  Meeting with Faculty Related to Research
Shirley Beresford
Sharon Browning
Connie Celum
Glen Duncan
Karen Edwards
Elaine Faustman
Jeffrey Harris
Patrick Heagerty
King Holmes
Mark Oberle
Judy Wasserheit

3:45 pm  Meeting with Junior Faculty
Michelle Averill
Ruanne Barnabas
Daniel Enquobahrie
Margaret Madeleine
India Ornelas
Rosa Solorio
June Spector
Timothy Thornton
Daniela Witten

4:30 pm  Executive Session

5:00 pm  Adjourn

Tuesday, April 9, 2013

8:00 am  Meeting with the Dean’s Council and External Stakeholders
Sanjay Chheda
Christopher Elias
Dan Evans
Susan Morgenszttern
James Norman
Ross Prentice
David Shoultz

9:00 am  Meeting with University Leadership
Ana Mari Cauce

9:15 am  Break

10:15 am  Meeting with Faculty Related to Curriculum
Patricia Wahl
Shirley Beresford
Fred Connell
Karen Edwards
Stephen Gloyd
Donna Johnson
Jaisri Lingappa
Mark Oberle
Claire Rainey
Michael Rosenfeld

11:10 am  Break

11:20 am  Meeting with Faculty Related to MPH and Practicum
Janet Baseman
William Daniell
Peter House
Colleen Huebner
Fred Connell
Julie Brunett
Stephen Gloyd
Amanda Graybill-Pennington
Karen Hartfield
Deb Hinchey
Anne Lund
Mark Oberle
Jack Thompson

12:10 am  Break

12:15 pm  Lunch with Alumni
Blythe Adamson
Caleb Banta-Green
Ruben Conner
James Dai
Laura Denman
Kevin Do
Marilyn Hair
Renee Heffron
Joon Ho-Yu
Christy Huang
Rebecca Hubbard
Stephen Hunt
Richard Lau
Katie Leach Kemon
Anique Lennon
Tom Lewandowski
Stacey Morrison
Jennifer Nelson
Annie Phare
Lee Pyne-Mercier
Cynthia Spencer
Bahaa Wanley
Melissa Winters

1:05 pm  Break

1:15 pm  Meeting with Faculty Related to PhD and MS Programs
David Sherman
Karen Edwards
Rich Fenske  
Emmanuela Gakidou  
David Grembowski  
Ken Rice  
Michael Rosenfeld  
Nick Smith

1:45 pm  Break
1:55 pm  Meeting with Faculty Related to MHA and Executive Degrees  
Christopher Johnson  
Mark Oberle  
Ed Walker  
William Welton

2:15 pm  Break
2:30 pm  Meeting with Faculty Related to Undergraduate Degrees  
Jack Goldberg  
Susan Inman  
John Kissel  
Sara Mackenzie  
Mark Oberle  
Kathleen Peterson  
Trina Sterry  
Elaine Tran

3:10 pm  Break
3:20 pm  Meeting with Faculty Related to Service and Workforce Development  
Janet Baseman  
Janice Camp  
Luann D'Ambrosio  
Ann Downer  
Abigail Halperin  
Susan Inman  
Donna Johnson  
Tao Kwan-Gett  
Barbara McKnight  
Mark Oberle  
Sarah Paliulis  
Jack Thompson  
Chuck Treser  
Judd Walson

4:15 pm  Executive Session
5:00 pm  Adjourn

Wednesday, April 10, 2013

8:30 am  Executive Session and Report Preparation
11:30 pm  Exit Interview