



Photo: Joel Levin and Mary Levin

SELF-STUDY MARCH 2013

Prepared for The Council on Education for Public Health

SELF-STUDY REPORT

TABLE OF CONTENTS

Criterion 1: The School of Public Health

1.1 Mission.....	1
1.2 Evaluation	9
1.3 Institutional Environment	20
1.4 Organization & Administration	25
1.5 Governance	30
1.6 Fiscal Resources.....	43
1.7 Faculty & Other Resources	50
1.8 Diversity.....	60

Criterion 2: Instructional Programs

2.1 Degree Offerings.....	68
2.2 Program Length	74
2.3 Public Health Core Knowledge	75
2.4 Practical Skills	78
2.5 Culminating Experience.....	86
2.6 Required Competencies	89
2.7 Assessment Procedures	97
2.8 Other Graduate Professional Degrees	103
2.9 Bachelor's Degrees in Public Health	105
2.10 Other Bachelor's Degrees	109
2.11 Academic Degrees	111
2.12 Doctoral Degrees	114
2.13 Joint Degrees.....	117
2.14 Distance Education or Executive Degree Programs	122

Criterion 3: Creation, Application, and Advancement of Knowledge

3.1 Research.....	125
3.2 Service.....	135
3.3 Workforce Development.....	142

Criterion 4: Faculty, Staff, and Students

4.1 Faculty Qualifications.....	149
4.2 Faculty Policies and Procedures	152
4.3 Student Recruitment and Admissions.....	156
4.4 Advising and Career Counseling	163

CRITERION 1: THE SCHOOL OF PUBLIC HEALTH

1.1. MISSION

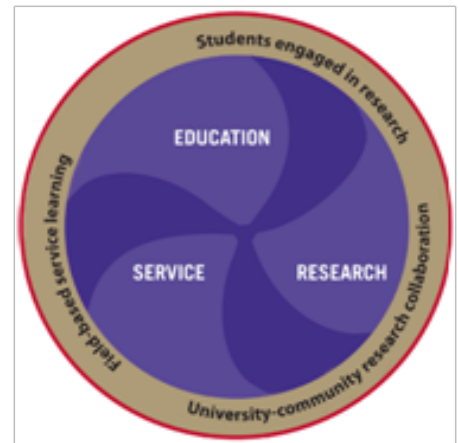
The school shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.

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

The 2011-12 strategic planning process (See *Criterion 1.1.E*) established the following mission statement for the University of Washington (UW) School of Public Health (SPH):

“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 three arms of the SPH mission are interdependent and benefit from their intersections and overlap. For example, the SPH believes that offering field-based service learning enhances the student’s educational experience while also promoting public health within a community. Students who engage in research advance the research and also gain analytic skills. Through university-community research collaborations, the SPH’s research efforts yield public health impact in the communities with which it works.



1.1.B. A statement of values that guides the school.

The Strategic Plan articulates the following values as foundational for the mission and activities of the SPH.

- **Integrity** - Adhere to the highest standards of objectivity, professional integrity, and scientific rigor.
- **Collaboration** - Nurture creative, team-based, and interdisciplinary approaches to advancing scientific research and knowledge and improving population health.
- **Impact** - Evaluate the effectiveness of our efforts, assessing if we have made a difference and learning from our experiences.
- **Innovation** - Create innovative approaches to educating and inspiring students and to answering important public health questions.
- **Diversity** - Embrace and build on diverse perspectives, beliefs, and cultures to promote public health.
- **Equity** - Promote equity and social justice in defining and addressing health and health care.
- **Excellence** - Recognize our SPH-wide strengths and the contributions of our faculty, staff, and students.
- **Stewardship** - Practice careful stewardship of the trust and resources invested in us.
- **Courage** - Bring courage, passion, and perseverance to advance public health principles in policy discourse.

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

During the strategic planning process, seven goals were articulated for the SPH. These embody the collective aspirations of internal and external stakeholders for the future development of the SPH. The SPH Strategic Plan also summarized a number of specific *strategies* (not to be confused with *objectives*) towards achieving each goal. These goals and strategies are listed below:

Goal 1: Strengthen our teaching

- 1.1 Review the current Master of Public Health (MPH) curriculum to ensure that graduates have the skills and practical competencies necessary to be productive, effective, and transformational public health leaders, scientists, and practitioners.
- 1.2 Evaluate establishing an abbreviated degree program for clinical professionals, including medical students.
- 1.3 Regularly review and modify programs so they do not become outdated.
- 1.4 Identify best practices and improve efficiencies in teaching and course offerings.
- 1.5 Strengthen the delivery of high-quality education in our undergraduate, MPH, MS, and PhD programs.
 - Establish mechanisms, such as hiring criteria and faculty incentives, to improve the quality of our teaching, advising, and mentoring.
 - Improve our pedagogical models and increase the use of adult learning methods, such as greater use of problem-based learning, as appropriate, through professional development and by bringing in practitioners as instructors and mentors.
- 1.6 Improve the quality and consistency of written and online curriculum materials.
 - Develop standardized teaching tools for use across departments.
 - Provide information and support for faculty to create and maintain comprehensive course websites.
- 1.7 Extend our teaching beyond the classroom.
 - Convene forums for community, workforce, and business partners to explore how to optimize limited resources to improve community and workplace health.
 - Provide opportunities for our students to teach public health to K–12 students, undergraduates, workers, and the general public.
- 1.8 Enhance our ability to advise and mentor students effectively.
 - Improve support for advising and mentoring of students by staff and faculty.
 - Strengthen School-wide student services.
- 1.9 Seek financial support for students through scholarships, training grants, and other mechanisms.
- 1.10 Expand the public health undergraduate program.
 - Create a pedagogically sound, high-quality undergraduate public health curriculum with elective areas of focus.
- 1.11 Broaden opportunities for public health training.
 - Offer additional and varied educational opportunities to public health practitioners, such as short-courses and certification programs.
 - Explore opportunities to use distance learning technologies effectively.
 - Consider developing public health content modules for use in other UW schools and colleges.

Goal 2: Strengthen our research

- 2.1 Develop and strengthen robust research support, both methodological (such as biostatistical collaborations) and procedural (such as assistance with grant proposal processing) to optimize the research experience for faculty.
- 2.2 Develop mechanisms (such as pilot grants) to assist junior faculty in initiating research programs.

- 2.3 Develop mechanisms to facilitate cross-disciplinary research, including mutually beneficial arrangements between departments and with other schools and colleges at UW.
- 2.4 Develop equitable, transparent, and predictable ways of recovering and allocating indirect costs.

Goal 3: Strengthen our collaborations with community partners

- 3.1 Become the go-to academic public health resource for the Pacific Northwest.
 - Increase the School's collaboration with public health practitioners on issues that affect the Pacific Northwest region.
 - Actively participate in promoting health through student practicums, internships, publications, and appearances in popular media; presentations to and participation on advisory and decision-making bodies; and providing evidence-based information.
- 3.2 Strengthen connections between research programs and the needs of communities and practitioners.
 - Promote community research links through outreach, consultative activities, support of translational and community-based participatory research, and rewarding faculty, staff, and students who collaborate effectively with community partners.

Goal 4: Globalize the school

- 4.1 Increase our engagement and formalize ties with key global health organizations, the private sector, advocacy organizations, and immigrant populations.
- 4.2 Globalize the curriculum, ensuring that the majority of courses at the School contain material relevant to global health concerns and provide a global context for national and local issues.
- 4.3 Recruit innovative faculty and students from around the globe.
- 4.4 Secure funding for junior faculty, fellows, and students to support career development and innovative global research and projects.

Goal 5: Improve our diversity

- 5.1 Establish a standing diversity committee in consultation with the School community.
 - Promulgate policies and communications designed to improve diversity.
- 5.2 Strengthen diversity within the curriculum.
 - Review the current curriculum to assure that core requirements for students in all programs include material and methodologies for understanding and addressing socioeconomic status, class, race, and other social determinants of health.
- 5.3 Diversify the School's faculty and staff.
 - Develop School-wide recruitment policies with guidelines and measurable goals that build on existing guidelines and draw on successful models. These policies should hold search committees, chairs, and the dean accountable for taking actions that ensure searches produce a diverse pool of applicants.
 - Design and disseminate SPH guidelines for mentoring and retention programs for underrepresented minority faculty and staff.
 - Establish a program to invite talented underrepresented minority faculty in public health disciplines to spend a half-year or a year at the School.
- 5.4 Strengthen recruitment and mentoring of students from underrepresented populations.
 - Develop and implement a robust student recruitment policy, including establishing the criteria for admission to SPH degree programs that promote diverse applicants.
 - Establish "pipelines" through connections to middle schools, high schools, and traditionally minority serving colleges.
 - Invest in community-building events and professional development activities for students from underrepresented populations.

Goal 6: Enhance our school community

- 6.1 Provide space and technological infrastructure to support educational and research goals.
- 6.2 Invest in School-wide events that bring our broad community together for rich interactions.
 - Celebrate academic life-cycle events, such as orientation and graduation.
 - Initiate collaborative, problem-solving exercises.
 - Enhance activities aimed at socializing and celebration.
- 6.3 Strengthen mechanisms for sharing information and collaborating across the School.
- 6.4 Invest in faculty and staff professional development, innovation, and leadership skill-building.

Goal 7: Promote the school

- 7.1 Present a strong, cohesive, School-level voice, articulating our Vision and Mission, and documenting the School’s contributions to the general public; University of Washington community; local and state leaders; colleagues regionally, nationally, and globally; and potential funders.
- 7.2 Develop and propagate key messages for use by faculty and staff—on the website, in printed materials, and via other communication media.
- 7.3 Build on existing strengths and highlight new areas of focus. For example, the SPH is the place to be if you want to:
 - Establish a strong foundation in the basic sciences of public health.
 - Address health concerns from a global perspective and play an active role in solving the health challenges of the Pacific Northwest region.
- 7.4 Revisit the School’s external image to align it with the directions set by this plan.
- 7.5 Develop a program to identify potential funders a process that will include experienced School-level professional staff and close coordination with faculty.
- 7.6 Emphasize support for faculty, staff, students, and facilities.
- 7.7 Build fundraising approaches around the priorities stated in this Strategic Plan.

In addition to these goals for “Strengthening the Core,” the Strategic Plan lays out a research agenda to advance the School’s contribution in six emerging public health challenges identified during the strategic planning process as priority areas for the SPH.

- A. Dissemination and Implementation Science**
- B. Genomics and Public Health**
- C. Global Environmental Change and Human Health**
- D. Health Policy and Health Systems**
- E. Obesity, Food, Physical Activity, and Health**
- F. Social Determinants of Health**

These initiatives are described in *Criterion 3.1*.

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

The table below lists the specific objectives and indicators that have been selected to track each of the Goals listed in *Criterion 1.1.C*.

Table 1.1.D. SPH Strategic objectives and the indicators by which they are measured

Strategic objectives	Indicator
<i>Goal 1: Strengthen our teaching</i>	
Maintain high student ratings of our teaching	Student ratings of classroom teaching
Maintain close contact between faculty and students	Student-faculty ratios
Maintain high level of self-assessed student competency among graduates	Student rating of academic standards on exit surveys
Maintain exemplary program as evaluated by Graduate School program reviews	10 year (i.e., maximum) approvals from Graduate School program reviews
Undertake curriculum innovation and renewal	[Qualitative Measures] Program reviews New degree programs/new certificate programs Discontinuance of languishing programs and courses
Integrate learning management systems (LMS) in our courses	Percent of core courses using a web-based learning management system
Increase undergraduate teaching	Student credit-hours in SPH undergraduate courses
Involve students in research	Number of research assistantships
Improve mentoring of students	Satisfaction with career mentoring
<i>Goal 2: Strengthen our research</i>	
Increase total direct grant support	Direct research-related grant support to SPH (\$)
Maintain high research productivity (articles in peer reviewed journals)	Publications of faculty in peer review journals per year (mean)
Maintain high research impact	Median h-index of faculty publications
Involve students in research	Percent of students who publish while in program
Expand research into new emerging areas	[Qualitative Measure] Development of new programs in the SPH/hiring of new faculty to lead or support these efforts
<i>Goal 3: Strengthen our collaborations with community partners</i>	
Increase distance learning opportunities for external audiences	Number of degree/certificate programs for external audiences
Continue to grow practicum program	Number of practicum sites with MOUs or affiliation agreements
Maintain expectation for faculty involvement in outside service activities	Percent of core faculty engaged in service activities Local National International
Promote research collaboration	Number of adjunct appointments Number of affiliate and clinical appointments
<i>Goal 4: Globalize the school</i>	
Globalize the curriculum	Percent of core courses utilizing global health content or examples
Increase faculty involvement in global education, research, and service projects	Number of faculty working on global education, research, and service projects
Increase the level of collaboration with professionals in low- and middle-income countries	Number of countries in which SPH has education, research, or service projects
Increase student participation in global projects	Percent of practicums in international settings
Attract international students	Percent of international students enrolled in SPH graduate programs

Goal 5: Improve our diversity	
Improve the diversity composition in the SPH	Percent of students from underrepresented groups Percent of staff from underrepresented groups Percent of faculty from underrepresented groups
Increase the proportion of full professors who are female	Percent of full professors who are female
Recruit, admit, and matriculate students from diverse backgrounds	Number of recruitment/pipeline events initiated or attended by SPH staff/faculty including pipeline events in high schools and community colleges Academic and financial support available for URM students
Create and sustain a welcoming climate for diversity	[Qualitative measures] Annual Diversity Committee report Annual Curriculum and Educational Policy Committee report on diversity Annual department chairs' reports to dean
Goal 6: Enhance our school community	
Create an optimal learning environment	Student assessment of space, facilities, and equipment
Enhance school identity and cohesiveness	Number of all-school events
Enhance student participation in governance and leadership	Percent of standing SPH committees with student member Number of students actively involved in Student Public Health Association (SPHA)
Enhance student services in the SPH	[Qualitative measures] Enhance Career Counseling Program Expand professional development opportunities for student services staff
Connect students with information, resources and opportunities	[Qualitative measure] Overhaul student-focused communication strategies within the SPH
Create vibrant SPH newsletter ("Soul Catcher")	Open rate for weekly online SPH newsletter
Goal 7: Promote the School	
Increase use of SPH Website	Number of visits to our website
Attract interest in SPH	Number of unique visitors to our website
Improve giving to SPH	Number of donors to the SPH
Active External Advisory Committee ("Dean's Council")	Regular meetings of External Advisory Committee ("Dean's Council")

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

From March through December 2011, several hundred students, faculty, staff, partners, and supporters contributed their time and ideas toward developing strategic goals and priorities for the UW School of Public Health. The SPH Strategic Plan can be found in **Appendix 1.1.E.i**. The process was designed to be comprehensive and inclusive, seeking broad engagement from faculty, staff, students, alumni, partners, and friends. We used traditional forms of engagement such as focus groups, surveys, and stakeholder interviews. Numerous discussions were held in the community, and input was given through online opportunities to participate in the process.

- Comments were collected from 30 informal focus-group discussions facilitated by Steering Committee members between April and June 2011. These were promoted as community-wide discussions about the future of the SPH. They were held in a variety of settings on campus and in

the community and attended by nearly four hundred faculty, staff, students, and community partners.

- A web-based survey was developed to reach as wide an audience as possible. It was heavily promoted among faculty, staff, students, alumni, and current and potential partners by email, website mention, and verbal mention. In addition, survey respondents were encouraged to promote the opportunity among their own contacts. For external stakeholders, we were particularly interested in understanding how the SPH could improve partnerships and prepare students with skills they need for the twenty-first century workforce, and what stakeholders viewed as the biggest challenges facing public health. A total of 822 individuals responded to the survey (232 alumni, 202 students, 152 faculty, 116 staff, and 120 external stakeholders). The full survey results are summarized in a separate document (*Appendix 1.1.E.ii*) and available online at http://sph.washington.edu/strategicplan/sph_survey_draft_analysis_062911.pdf.
- Stakeholder interviews were conducted with 19 individuals, including deans of associated schools at the University of Washington and representatives of partner agencies (*Appendix 1.1.E.iii*).

The strategic planning process also involved a weekend-long retreat where leaders, students, staff, faculty, and external stakeholders met to develop and refine SPH's mission, values, goals, and objectives for the coming decade. Furthermore, the strategic planning process generated a list of priority strategies to achieve these goals and objectives as described above.

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

The SPH's mission, values, goals, and strategies are prominently displayed on the SPH's website (http://sph.washington.edu/strategicplan/SPH_StratPlan_2012.pdf) and are promoted in print materials circulated with information about the Strategic Plan. The dean holds annual all-school meetings where these are also reiterated. A one-page handout was developed (see picture shown and *Appendix 1.1.F*) for use and display in offices and corridors to emphasize the importance of the SPH's mission and values in all aspects of teaching, research, and service.



Formal review occurs at multiple levels. These activities are described in more detail in *Criterion 1.2*.

1.1.G. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH has a concise mission statement, value statement, and set of goals that were developed through an inclusive strategic process involving, and with strong support from, faculty, students, staff, alumni, and external stakeholders.
- SPH departments also articulate mission, vision, and goal statements.
- The Strategic Plan includes specific strategies to achieve the SPH's goals.
- The SPH has specified a set of measurable objectives to help track progress toward the SPH's articulated goals.
- The Strategic Plan, including mission, values, goals, and strategies, has been widely disseminated to internal and external audiences.

Weaknesses/Challenges

- The Strategic Plan generated more goals and strategies than can completed in the short term; a multi-year phased-in timeline will be necessary to address all goals and strategies.

- The tracking of progress toward the SPH goals, including progress on each of the 35 articulated strategies, requires dedicated staff effort.

Plans

- The special assistant to the dean formally will track progress toward the goals, objectives, and strategies articulated in the Strategic Plan.
- Continue to use the goals and strategies of the Strategic Plan to direct and promote the activities of school leadership, faculty, staff, and students.
- Improve the efficiency and dissemination of measurable objectives.
- Assess and refine targets for the indicators related to these objectives.
- Continue to disseminate meaningful evidence of the SPH progress towards its goals.

This criterion is met.

1.2. EVALUATION

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

1.2.A. Description of the evaluation processes used to monitor progress against objectives defined in Criterion 1.1.D, including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole.

Evaluation is integral to the way the SPH and its constituent departments, programs, and centers operate. The objectives and measures described in *Criterion 1.1.D* constitute an important, but only partial, basis for evaluation, monitoring, and planning in the SPH. The SPH conducts, or is the subject of, a number of external and internal processes to monitor and evaluate its performance in teaching, research, and service. These evaluative quality-improvement processes usually combine quantitative indicators and qualitative information, but ultimately rely on considered judgment with regard to need for improvement, innovation, and/or re-allocation of resources. Evaluation is conducted at multiple levels: school level and department/program level.

School Level

Strategic Plan Implementation Monitoring

The special assistant to the dean formally tracks progress toward the goals, objectives, and strategies articulated in the SPH Strategic Plan and identifies and helps resolve problems in implementation. (See <http://sph.washington.edu/strategicplan/implementation.asp> for detailed tracking information.) Standing and *ad hoc* committees play significant roles in identifying priorities and carrying out the goals and strategies outlined in the Strategic Plan. The SPH Faculty Council, Curriculum and Educational Policy Committee, Diversity Committee and Distance Learning and Learning Technology Committee play key roles in monitoring (as well as implementing) the Strategic Plan. Periodic review of the SPH's Strategic Plan is formally addressed as part of the SPH Executive Committee's tasks.

School of Public Health Executive Committee Annual Retreat

Each summer, the School of Public Health Executive Committee (SPHEC) meets for an all-day retreat to review the status and plans for the various departments and the SPH as a whole. In previous years a notebook containing a comprehensive set of data tables formed a significant part of the background information for these reviews. In 2011, the first summer that Dean Howard Frumkin was dean, a two-day strategic planning retreat was held in place of the annual review. In 2012, the SPHEC retreat focused on the implementation of the Strategic Plan and other priority issues for each department and for the SPH as a whole.

Annual Report to the Provost

During the autumn and winter quarters, the dean's office prepares a budget request for the provost. This process is data-intensive, as the provost specifies an array of metrics from each school. These data include trends in student enrollments, teaching (student credit hours), and research. These reports are available in the *Appendix 1.2.A.i*.

SPH Curriculum and Educational Policy Committee

The committee addresses all curriculum and educational policy issues that affect the SPH as a whole. It reviews course enrollment, program learning objectives, and results of the annual student competency survey. Members of the committee usually chair or serve on their department curriculum committees, and so they are able to integrate departmental perspectives into the SPH-wide discussion, and vice versa.

Dean's Review

Every five years, the University president appoints a special committee to conduct a review of the dean. The process is similar to that used to review department chairs. Recommendations are made as to the dean's success at meeting SPH and University goals and expectations. As with the chair reviews, the process is an evaluation of the success of the SPH as a whole, as well as of the dean individually. Dean Wahl was reviewed in 2005. The current dean has been in place for fewer than three years and has not had a formal review.

Department/Program Level

External Accrediting Bodies

As indicated in ***Criterion 1.3.A***, several programs in the SPH are accredited by accrediting bodies other than Council on Education for Public Health (CEPH). Each of these organizations requires extensive analytic self-study processes, and each provides the programs with thoughtful evaluative feedback. In the most recent re-accreditation reviews, each of these programs received the maximum terms of re-accreditation. Copies of these accreditation reports may be found in ***Appendix 1.3.A***.

Graduate School Program Reviews

Since the last accreditation, four graduate programs in the SPH have been reviewed by the Graduate School. This in-depth process is similar to a CEPH review. The academic program/department conducts a detailed self-study and a review team assembled by the Graduate School includes senior faculty from outside the UW, faculty from outside the SPH, and faculty from within the SPH who are not in the department under review. Using the self-study document and interviews conducted during a two-day site visit, the review team examines the department's goals and plans in light of its record of achievements, overall quality, adaptability to change, and prospects for innovation, in the context of the SPH and the University as a whole. The program reviews were conducted on the following schedule:

2007	Master of Public Health Degree
2007	Graduate Certificate in Statistical Genetics
2009	Public Health Genetics Graduate Program
2009	Genetic Epidemiology Master of Science Program
2010	Public Health Graduate Certificate Program
2010	Department of Environmental and Occupational Health Sciences
2013	Department of Biostatistics

These reviews recommended the maximum interval until the next review, an indication that no significant concerns were identified. Nevertheless, each review included helpful recommendations for improving these academic programs. Copies of the self-studies and Graduate School reviews may be seen in ***Appendix 1.2.A.ii***.

Dean's Annual Review of Chairs/Departments

In 2011, Dean Frumkin initiated an annual process in which the chairs summarize the activities, successes, and problems in their respective departments. These reviews are structured to provide detailed information as per the form below (*Table 1.2.A*). Because almost all teaching, research, and service activities are initiated and performed at the department level, these annual departmental reviews serve as a comprehensive and detailed annual evaluation of the major functions of the SPH.

Table 1.2.A. Dean's metrics for department chair assessment

Area of Concern	Metrics	Annually	Every 5 years
OVERALL LEADERSHIP			
• Visionary leadership in his/her field	Can articulate a vision for the future of his/her field and its implications for department	X	
• National/international reputation	External reference letters		X
• Institutional leadership	Activities that promote and serve SPH and UW	X	
• Departmental leadership	Responses to 360 evaluation and/or internal reference letters		X
EDUCATIONAL LEADERSHIP			
• Visionary approach to education	Can articulate a vision for training in his/her field and relate it to department curriculum	X	
EDUCATIONAL MANAGEMENT			
• Department maintains top-tier training programs	External evaluations of training programs		X
• Department evaluates educational programs	All educational programs evaluated on a regular basis	X	
• Department rewards good teaching	Rewards in place for top teachers	X	
• Department addresses problems identified in educational program	Each below-expectation evaluation outcome for an educational program addressed and results verified	X	X
• Department evaluates courses	All courses evaluated each time offered	X	
• Department addresses problems identified in course evaluations	Each below-expectation course evaluation outcome addressed and results verified	X	
• Department provides teaching training to faculty and TAs	Faculty and TAs receive training in department or elsewhere at UW	X	
• Department provides strong student advising	Evidence of successful student advising Evidence of successful career counseling	X X	
• Department provides support for student tuition	Level of training grants or other student support	X	
RESEARCH LEADERSHIP			
• Visionary approach to research	Can articulate a vision for research in his/her field and relate it to department research portfolio and plans, including both expansion and contraction	X	
RESEARCH MANAGEMENT			
• Department has a strong and balanced research portfolio	Level of research funding Diversity of research funding sources Breadth of research topics Public health relevance of research topics	X X X X	
• Oversight of faculty funding	Faculty with research productivity below expectation identified and problems addressed	X	
• Supports faculty research efforts	Level of service for research activities	X	
SERVICE LEADERSHIP			
• Visionary approach to service	Can articulate a vision for service in his/her field and relate it to department activities, including both expansion and contraction	X	
SERVICE MANAGEMENT			
• Department maintains a strong portfolio of service	Record of service activities	X	

• Department provides incentives for service	Rewards for service activities are in place	X	
• Department efforts improve public health	Documented impact of departmental activity on public health	X	
HUMAN RESOURCE MANAGEMENT			
• Plans for faculty succession	Has a faculty succession plan	X	
• Faculty evaluation	100% of faculty evaluated annually	X	
• Faculty mentoring	100% of junior faculty mentored	X	
• Staff evaluation	100% of staff formally evaluated annually, feedback provided	X	
• Faculty and staff appropriately rewarded for achievement	Evidence of specific rewards	X	
DIVERSITY			
• Leads departmental commitment to diversity	Evidence of visible leadership	X	
• Recruits for diversity among faculty, staff, students	Faculty recruitment efforts Staff recruiting efforts Student recruiting efforts	X X X	
• Establishes a climate conducive to diversity	Evidence of departmental efforts to create a climate conducive to diversity	X	
FINANCIAL AND ADMINISTRATIVE			
• Academic business planning	Academic business plan in place	X	
• Maintains a departmental budget	Annual budget produced and tracked Potential shortfalls identified and addressed	X X	
• Continuous improvement in administrative efficiency	Specific efforts to increase efficiency and reduce costs	X	
ADVANCEMENT			
• Engages in advancement for department	Advancement activities (identifying and cultivating potential donors in collaboration with SPH Advancement staff)	X	
COLLABORATION			
• Strong collaboration across the SPH, UW, and externally	Specific examples of relationships formed or nurtured Specific examples of output from collaborations	X X	
INDIVIDUAL ACADEMIC ACHIEVEMENTS OF THE CHAIR			
• Research	Publications Grant activity	X X	
• Teaching	Courses taught Course evaluation results Students mentored Doctoral committees chaired/served on	X X X X	
• Service	Service activities to the SPH or UW Service activities to the profession Service activities	X X X	

UW Chair Reviews

Around the fifth year of a chair's term, the dean appoints a special committee to review his or her performance, in accordance with University policy (<http://www.washington.edu/admin/rules/policies/PO/EO20.html>). The committee consults with the incumbent regarding his or her views of past policies and practices and projections of departmental and personal goals. It also solicits comments from all involved constituencies: faculty, staff, students, other administrators, and colleagues from outside the University. Upon completion of the review, the committee prepares a report for the dean and the provost, and an overview and summary are shared with the department. This review serves, in part, as a review of the department, as well as the chair. Recommendations are made depending on the chair's success at meeting department and SPH goals and expectations. Since the last accreditation, the chairs of Epidemiology and Department of Environmental and Occupational Health Science (DEOHS) have been reviewed. Reviews of the chair of Biostatistics will be in 2013.

Departmental and Program Retreats

All SPH departments hold retreats at least once a year to discuss curriculum, students, faculty, and general policies. In addition, in departments with multiple tracks, such as DEOHS and Health Services, program faculty meet at least annually to review and evaluate educational policy, address curriculum and practicum issues, and develop enhancements to their programs.

Evaluation Data Resources

The SPH, departments, and programs are aided by data from the following sources.

UW Enterprise Data Warehouse

Over the past seven years the University has created a data warehouse for internal data users. The warehouse hosts a large array of data on applicants, students, classes, grants and contracts, faculty, and finances. The SPH has made excellent use of this resource in the computation of SPH indicators and for a large catalog of parameter-driven data reports on all aspects of the SPH. Demonstrations of the SPH's "Report Services" tools will be available for site visitors.

Graduate School

The Graduate School provides extensive analytic data to the SPH and departments on applicants, accepted students, and enrolled students. In addition, the Graduate School conducts an exit survey of all University master's and PhD graduates. The summary results are distributed to all schools and colleges. The survey asks students to rate such characteristics as departmental academic standards, adequacy of training, satisfaction with supervision and/or guidance, quality of the faculty, and overall quality of the program. It also asks whether students published a paper in a journal while in the program, whether they received financial support, and what their post-graduation plans are.

Office of Educational Assessment: Student Evaluation of Courses

It is SPH policy that all courses be evaluated by students. Most courses use one of the standard forms provided by the University's Office of Educational Assessment (OEA); instructors may substitute other instruments tailored to their particular courses. Results are reviewed by each department's curriculum committee or chair, and annually by faculty senior in rank at the time of faculty reviews. Recommendations to the faculty member based on these reviews are transmitted through the chair. In addition, the OEA produces aggregate reports summarizing student course evaluations by department. Copies of these reports can be found in ***Appendix 1.2.A.iii***.

SPH Student Exit Survey

The SPH has developed its own student survey. The most recent SPH-wide survey was conducted in spring 2012. This survey is used to supplement the Graduate School Exit Survey and has provided data for some of our indicators. The survey can be seen in ***Appendix 1.2.A.iv***.

SPH Alumni Survey

The SPH conducted a survey of alumni in 2012 to gather information about:

1. Current employment of our graduates
2. Graduates' assessment of the skills and knowledge they need in their current jobs
3. Graduates' assessment of their SPH education
4. Graduates' recommendations for improving the SPH

The survey instrument is in ***Appendix 1.2.A.v***. Data from this survey and the exit surveys can be used to inform curriculum planning at the school, department, and program level.

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

The monitoring and analysis of evaluation information are described above, along with a description of the evaluation processes.

Principal audiences for this information are summarized in **Table 1.2.B.**

Table 1.2.B. Evaluation audiences

Evaluation information	Principal audiences
Overall evaluations of the SPH, Annual Budget Report (to the provost)	Discussed at scheduled SPHEC meetings, SPH Faculty Council meetings, retreats, and at <i>ad hoc</i> meetings and discussions
Strategic plan implementation monitoring	Special assistant to the dean uses a standardize tool for the individuals and committees responsible for implementation of the Strategic Plan to report progress
Evaluation of the departments (Non-CEPH accreditations, Graduate School review)	Debriefing meetings with the dean, associate deans and relevant chairs; formal reports are to dean and chairs; departmental faculty and staff meetings; used for quality improvement
Statistical reports on student evaluation of classes	Distributed to deans and chairs; discussed at departmental curriculum committee meetings; used by dean and chairs to recognize high-performers and identify low performers for mentoring
Evaluation of student competencies	Posted on SPH website; discussed at SPH and used by departmental curriculum committee meetings for quality improvement
Exit and Alumni Survey Data	Reviewed by deans, department chairs, curriculum committees, and/or graduate program coordinators and advisors
Data on applicants and enrollees	Distributed from Graduate School to deans, department chairs, and graduate program coordinators and advisors
Data on research grants, productivity, and impact	Generated in SPH Reports Services; reviewed by dean, associate dean for programs and research, chief financial officer, chairs; used for planning and budgeting

1.2.C. Data regarding the school's performance on each measurable objective described in Criterion 1.1.d. must be provided for each of the last three years.

Table 1.2.C. Indicators used to track SPH strategic objectives

Indicator	Target	2009-10	2010-11	2011-12
Goal 1: Strengthen our teaching				
Student ratings of classroom teaching	>4.0 (on a scale of 1 to 5, where 5 is highest)	4.0	4.0	pending
Student-faculty ratios [Criterion 1.7]	<7.0 (graduate students only)	5.0	5.3	5.3

Student rating of academic standards on exit surveys [Criterion 4.1]	Master's: 4.2 PhD: 4.5 (on a scale of 1 to 5, where 5 is highest)	Master's: 4.3 PhD: 4.5	Master's: 4.1 PhD: 4.5	Master's: 4.3 PhD: 4.6
10-year (i.e., maximum) approvals from Graduate School program reviews	100%	100% (2 of 2)	100% (2 of 2)	No reviews
Percent of core courses using a web-based learning management system	100%	na	na	80%
Student credit hours in undergraduate courses	Increase by 10% each year	10,201	12,308 (up 21%)	12,514 (up 2%)
Number of research assistantships	PhD: 150 Master's: 100	PhD: 159 Master's: 64	PhD: 165 Master's: 78	PhD: 156 Master's: 64
Satisfaction with career mentoring [Criterion 4.4]	Master's students 4.0 PhD students 4.0 (on a scale of 1 to 5, where 5 is highest)	3.6 3.9	3.5 4.0	3.3 3.9
<i>Goal 2: Strengthen our research</i>				
Direct research-related grant support to SPH (\$) [Criteria 1.6 & 3.1]	Increase by 5% per year	\$168,050,762	\$193,591,099^ (up 15.2% from 2009-10)	\$184,721,159 (down 4.6% from 2010-11, up 9.9% from 2009-10)
Mean annual number of publications of faculty in peer review journals [Criteria 3.1 & 4.1]	Assist. Prof. >2 Assoc. Prof. >4 Full Prof. >6	Assist. Prof. 2.6 Assoc. Prof. 4.7 Full Prof. 6.7	Assist. Prof. 3.5 Assoc. Prof. 4.2 Full Prof. 7.5	Assist. Prof. 3.5 Assoc. Prof. 4.8 Full Prof. 6.7
Median h (impact) index** [Criteria 3.1 & 4.1]	Assist. Prof. >5 Assoc. Prof. >10 Full Prof. >25	na	na	Assist. Prof. 6.5 Assoc. Prof. 13.5 Full Prof. 50
Percent of students who publish while in program [Criterion 3.1]	Master's: 20% PhD: 100%	Master's: 20% PhD: 79%	Master's: 21% PhD: 78%	Master's: 21% PhD: 82%
<i>Goal 3: Strengthen our collaborations with community partners</i>				
Number or degree/certificate programs for external audiences	Increase by one per year	4	4	7
Number of practicum sites with MOUs or affiliation agreements	Increase each year	35	43	48
Percent of core faculty engaged in service activities [Criterion 3.2]	Local/Regional: 33% National: 75% International: 33% Any: 100%	na	na	Local/Regional: 40% National: 70% International: 39% Any: 97%

Number of affiliate and clinical appointments (2)	> 400	439	470	490
Number of adjunct appointments (3)	> 125	143	149	156
<i>Goal 4: Globalize the school</i>				
Percent global health content or examples in core courses	100%	na	na	100%
Number of faculty working on global education, research, or service projects	Increase each year	na	na	58
Number of countries in which SPH has education, research, or service projects	Increase each year	na	na	112
Percent of practicums outside of the U.S.	> 20%	na	25%	23%
Percent of international students enrolled in SPH graduate programs	10% to 15%	13.5%	11.2%	9.3%
<i>Goal 5: Improve our diversity</i>				
% Faculty from under-represented groups [Criterion 1.8]	23.8% (4)	7.1%	7.9%	7.9%
% Students from under-represented groups (Graduate Students only) [Criterion 1.8]	23.8% (4)	8.0%	9.2%	9.5%
% Staff from under-represented groups [Criterion 1.8]	23.8% (4)	10.8%	10.7%	9.8%
% professors who are female [Criterion 1.8]	50%	32%	29%	31%
Number of recruitment events initiated or attended by SPH staff/faculty	25	na	na	20 (estimated)
<i>Goal 6: Enhance our school community</i>				
Student assessment of space, facilities & equipment	>4.0 (on a scale of 1 to 5, where 5 is highest)	Masters: 4.0 PhD: 3.5	Masters: 3.7 PhD: 3.5	Masters: 3.4 PhD: 3.5
Number of all-school events	>7 per year	na	na	7
% of SPH Committees that have student member	100% (of ten) (except Faculty Council)	na	na	7/10 (70%) (one vacancy currently being filled)

Open rate for weekly on-line SPH Newsletter	Weekly, Open rate >20%	na	na	35%
<i>Goal 7: Promote the school</i>				
Visits to School's Website	Increase by 5% per year	na	219,272	239,409 (up 9.2%)
Unique visitors to our Website	Increase by 5% per year	na	141,714	149,333 (up 5.4%)
Donors to the School	5% increase per year	748	728 (down 2.7% from 2009-10)	754 (up 0.8% from 2009-10; up 3.6% from 2010-11)
Regular meeting of Advisory Committee ("Dean's Council")	At least twice a year	na	na	Three meetings

- (1) The h-index is a measure of article impact used by SCOPUS. The h-index was developed by J. E. Hirsch and published in *Proceedings of the National Academy of Sciences of the United States of America* 102 (46):16569-16572 November 15 2005. Source: SCOPUS quantifies citations only after 1995.
- (2) Nonvoting appointment of faculty from outside of UW.
- (3) Nonvoting appointments in departments other than home departments.
- (4) Percent of underrepresented ethnic and racial groups in Washington State.

In general, the indicators above suggest that the SPH continues at a high level and/or is improving in the quality and quantity of teaching, research productivity, service and interdisciplinary collaboration, globalization, communications, and building a vibrant school community. On the other hand, we are still struggling with improving the diversity of our students, staff and faculty. Student rating of the adequacy of mentoring and their student space is also not satisfactory.

The measurement and tracking of these indicators represent only one aspect in which the progress towards the strategic goals is being monitored and promoted. Some of the objectives and indicators that will be used to measure progress towards these goals have been computed and tracked in the past; however, for some objectives, we do not have historical baseline measures. In addition, it is evident that quantitative indicators are not sufficient to track progress in implementing these strategies listed above; therefore, the dean has assigned a member of his staff the direct responsibility for tracking activities and progress related to the seven goals outlined in the Strategic Plan.

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

The overall responsibility for this self-study was given to the associate dean for Academic Affairs and a writing/review committee which consisted of the individuals in the SPH who had the most detailed knowledge of the various aspects of the SPH that are described in this document:

- Associate Dean, Academic Affairs (lead)
- Associate Dean, Research and Programs
- Assistant Dean, Administration
- Director, Student Affairs
- Assistant Director, Student Affairs
- Chief Financial Officer
- Special Assistant to the Dean for Strategic Planning

Chair, SPH Curriculum and Educational Policy Committee
Chair, SPH Diversity Committee
Chair, SPH Faculty Council
Director, Undergraduate Public Health Major
Manager, Academic Affairs
SPH Database Manager

The process can be summarized as follows:

- The constituency groups with the most direct knowledge and interest in the re-accreditation were briefed about the purpose of the reaccreditation, the issues to be addressed, and the timeline. These groups were asked to provide input through the members of the writing committee and included:
 - School of Public Health Executive Committee
 - School of Public Health Faculty Council
 - Curriculum and Educational Policy Committee
 - MPH Review Work Group
 - All faculty attending the All School Meeting (January 12, 2012)
- The various deliverables outlined in the CEPH document “Accreditation Criteria, Schools of Public Health, Amended June 2011” were assigned to members of the writing committee. Several constituencies were especially active in providing input and review for parts of the draft sections, especially a) departmental and SPH curriculum committees; b) Diversity Committee; and c) Student Services staff.
- Wider participation in self-study was enlisted, as needed, by the departmental and student representatives on these committees.
- Initial review/editing of each deliverable was done by the associate dean for Academic Affairs, and sections were returned to those designated for revision, where appropriate.
- Preliminary analysis of strengths, weaknesses/challenges, and plans for each criterion was drafted by members of the writing committee.
- Comments and input on the draft self-study was solicited from faculty, staff, and students, and from external constituencies via posting on the SPH website, and revisions were made as needed.

1.2.E. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH collects a wide range of both quantitative measures and qualitative information on progress toward its strategic goals and objectives.
- The SPH has dedicated resources and staff to promote and track the implementation of the Strategic Plan.
- The SPH Executive Committee reviews these measures at its annual retreats to plan actions to enhance the SPH’s programs.
- Departments and programs conduct similar review and planning activities annually.
- Each department in the SPH, under the auspices of the Graduate School, regularly conducts a detailed self-assessment and undergoes an extensive program review by a panel of external reviewers.
- By University code, the chairs of each department and the dean are extensively evaluated every five years.

- The provost requires detailed metrics from the dean annually as part of budget negotiations.
- The dean requires detailed accounting from the chairs annually.

Weaknesses/Challenges

- It has been difficult to establish defensible targets for many quantitative indicators.
- Greater use could be of available data resources and SPH metrics could be shared in more detail with faculty students and staff
- Many important aspects of the SPH cannot be adequately monitored with quantitative indicators.

Plans

- Continue to refine performance data and evaluation metrics
- Work to establish appropriate quantitative targets where possible.
- Continue to improve the scope, efficiency, and dissemination of performance data and evaluation metrics in the SPH.

This criterion is met.

1.3. INSTITUTIONAL ENVIRONMENT

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

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

The SPH is one of 16 schools and colleges on the University of Washington (UW) campus in Seattle. The SPH is one of six professional schools that comprise the Health Sciences Center; the others are Dentistry, Medicine, Nursing, Pharmacy, and Social Work. As in the other schools, the dean reports 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 governing the University.

The University of Washington is accredited by the Northwest Commission on Colleges and Universities and is a member of the Association of American Universities. Several of the SPH’s academic programs are accredited by other accrediting bodies, as described in **Table 1.3.A**. Copies of the reports of these accrediting bodies are included in **Appendix 1.3.A**.

Table 1.3.A. SPH educational programs and other accrediting bodies

Degree/Program	Department or Program	Accrediting Body
Occupational and Environmental Medicine (EOM) MPH Program	Environmental and Occupational Health Sciences	Accreditation Council for Graduate Medical Education
Undergraduate Program in Environmental Health	Environmental and Occupational Health Sciences	National Environmental Health Science and Protection Accreditation Council
Graduate Coordinated Program in Dietetics	Nutritional Sciences Program	Accreditation Council for Education in Nutrition and Dietetics (ACEND)
Certificate in Health Informatics and Health Information Management	Health Services	Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM)
Bachelor of Science in Health Informatics and Health Information Management	Health Services	Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM)
Master of Health Administration (MHA) Program	Health Services	Commission on Accreditation of Healthcare Management Education (CAHME)

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

Figure 1.3.B.i is the organizational chart of the University of Washington and illustrates the SPH’s equal status with the other schools and colleges. The relationship of the SPH within the Health Sciences and Medical Affairs Organization is illustrated in **Figure 1.3.B.ii**.

Figure 1.3.B.i. University of Washington organizational chart

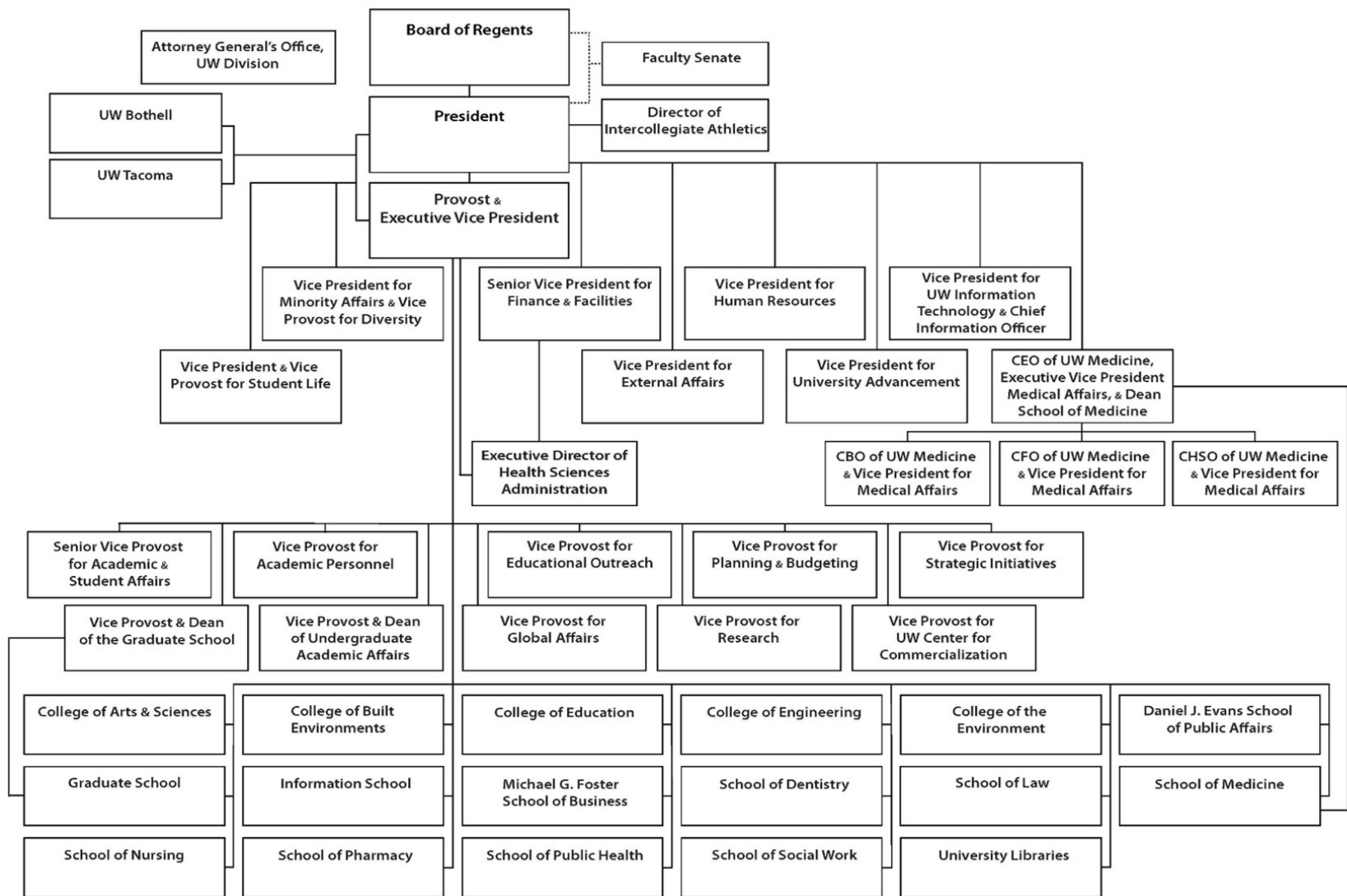
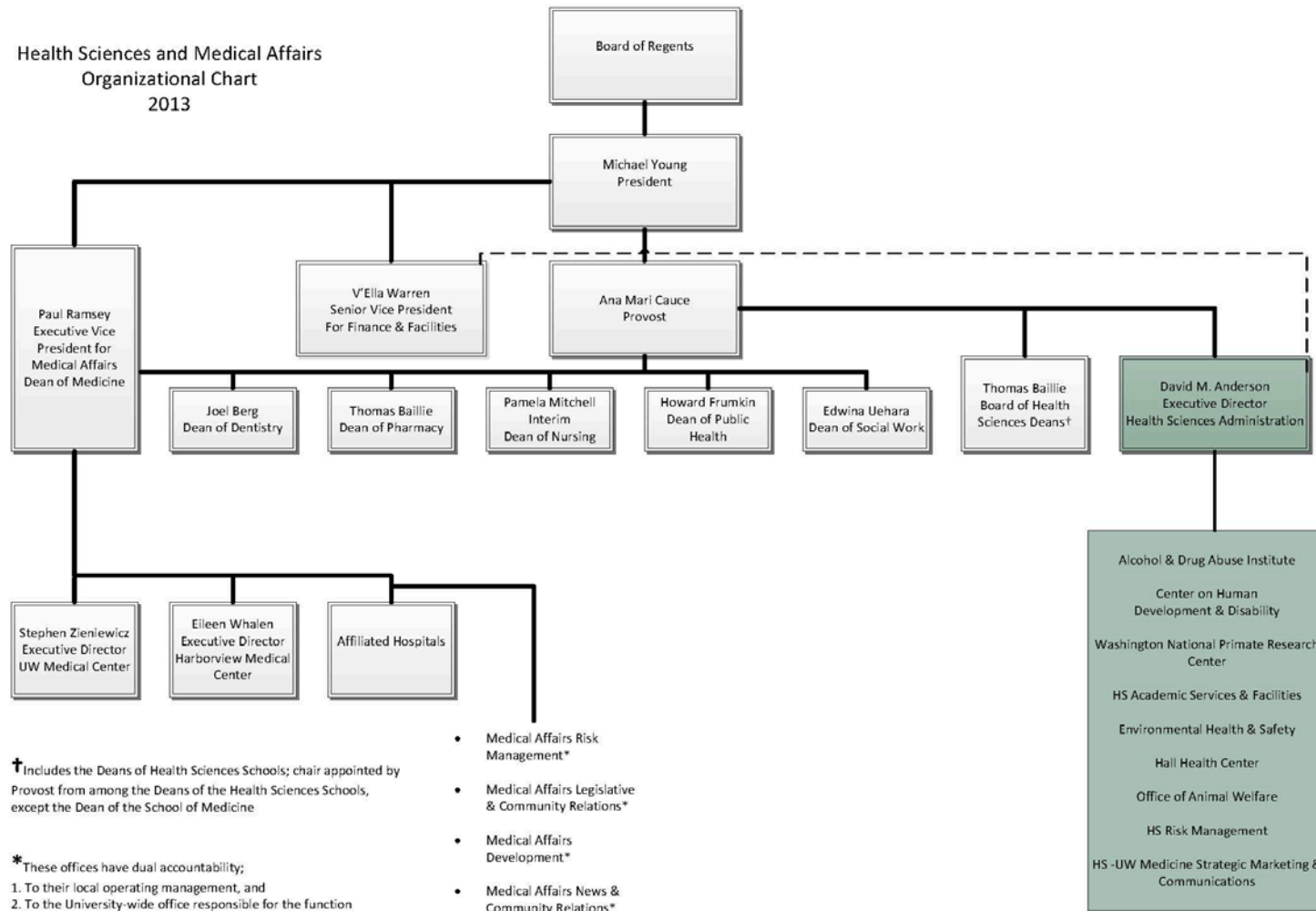


Figure 1.3.B.ii. Health Sciences and Medical Affairs organizational chart



1.3.C. Description of the school's level of autonomy and authority regarding the following: budgetary authority and decisions relating to resource allocation; lines of accountability, including access to higher-level university officials; personnel recruitment, selection and advancement, including faculty and staff; academic standards and policies, including establishment and oversight of curricula

The Board of Regents has ultimate authority for the governance of the University. Its 10 members are appointed by the governor of the State of Washington. In addition to their other responsibilities, the regents are responsible for appointing the president.

The president is the chief executive officer of the University and is responsible for the general welfare of the institution, including its programs in instruction, research, and public service. The president is directly responsible to the Board of Regents for the management of the University and is the University community's official representative to the regents.

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, formulation, and allocation of capital and operating budgets, management of academic and administrative personnel, allocation of space, and long-range University planning. In those areas for which the provost has responsibility, the deans report to the president through the provost.

Throughout the University, each dean oversees his/her respective school's or college's education and curriculum development, formulation and allocation of budgets, management of academic and administrative personnel, allocation of space, and long-range planning. The dean formulates the SPH's budget request in consultation with department chairs and the SPH's Faculty Council (elected by the faculty) and submits it every two years to the provost. It is the provost's task to divide the academic portion of the state allocation among the University's colleges and schools. The SPH also receives a percentage of the indirect costs recovered from grants and contracts originating from the SPH.

The dean participates in the Board of Health Sciences Deans, a forum for addressing the unique issues that face the six health sciences schools and for promoting inter-school coordination.

The University of Washington has a long and strong tradition of collegial, shared governance by faculty and administration. SPH faculty members participate in University governance through the Faculty Senate, an elected body with representation from all units. The Faculty Senate may propose policy in academic, personnel, or budgetary matters. To be put into effect, such proposals must receive the concurrence of the president and/or a majority of the voting faculty. Official University policies and procedures are contained in the *University Policy Directory* available online at:

<http://www.washington.edu/admin/rules/policies/index.shtml>.

Personnel recruitment, selection, and advancement are conducted according to established University policies. For faculty positions, a search is required, usually on a national level, before an appointment is made. Advertisements for faculty positions are reviewed by the director for Equal Opportunity, International Scholars Operations, and Academic Human Resources, to assure compliance with state and federal affirmative action and equal opportunity guidelines and U.S. Department of Labor guidelines. Candidates are reviewed by a search committee, and proposed appointments are reviewed by the departmental faculty and chair, the dean, Academic Human Resources, the provost, and the Board of Regents. New appointments at the levels of associate and full professor are reviewed by the SPH's Faculty Council. Promotions undergo a review process comparable to that of new appointments. The University of Washington policies on faculty and governance can be found online at:

<http://www.washington.edu/admin/rules/policies/FCG/FCGTOC.html>.

Academic policies and standards are set within the SPH and are subject to the policies and standards of the University. All graduate degrees offered by the SPH are authorized by the Graduate School. All new degree programs must be approved by the Graduate School. Thus, the Graduate School establishes the minimum criteria for admission of graduate students and required credits for degrees, and the schools and departments establish additional criteria. Since authority to grant graduate degrees resides in the Graduate School, the programs of the SPH are subject to the same 10-year reviews that are required of all University units offering graduate degrees. The academic policies of the Graduate School can be found at:

<http://www.grad.washington.edu/fac-staff/gpa-gpc/>.

1.3.D. Identification of any of the above processes that are different for the SPH than for other professional schools, with an explanation.

Not applicable.

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

Not applicable.

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

Not applicable.

1.3.G. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH is one of 16 schools at the University of Washington and enjoys the same status and autonomy as all other schools.
- The SPH has well-established, formal relationships within the University's governance structure and is subject to the policies and standards of the University.
- The dean participates as a full member of the Board of Deans of the University of Washington.
- The dean is a full member of the Board of Health Sciences Deans.
- The SPH is well positioned to create a strong collaborative interprofessional education experience for future students due to the strong commitment of the Board of Health Sciences Deans to the Interprofessional Education (IPE) effort (see ***Criterion 1.4.C***).
- The dean, chairs and faculty participate in many University committees that are outside the SPH; e.g., dean – dean search committees, dean review committees; chairs – search committees, department and program review committees; faculty – faculty search committees, Faculty Senate, UW Emergency Preparedness Committee.

Weaknesses/Challenges

- None

Plans

- None

This criterion is met.

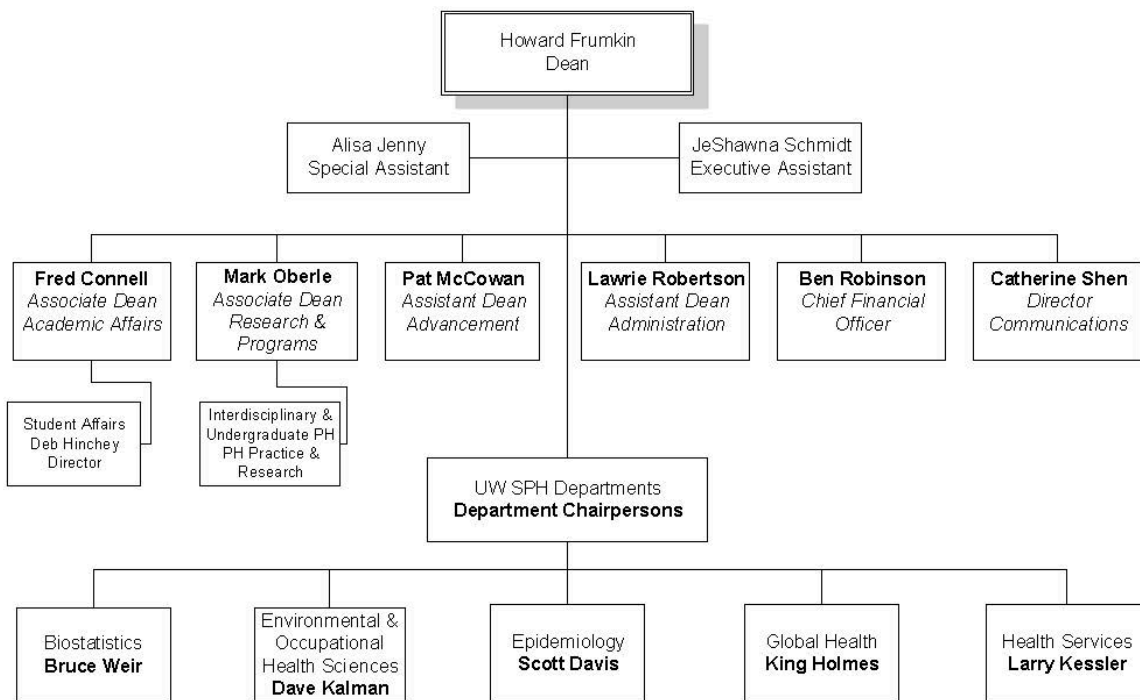
1.4 ORGANIZATION AND ADMINISTRATION

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

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

The **Figure 1.4.A** below illustrates the overall organization of the SPH and names the SPH's executive faculty and staff.

Figure 1.4.A. School of Public Health organizational chart



20130301

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

The dean is assisted by the following associate deans:

- Academic Affairs
- Research & Programs

The executive staff reporting directly to the dean is as follows:

- Assistant Dean Advancement
- Assistant Dean Administration
- Chief Financial Officer
- Director of Communications
- Special Assistant
- Executive Assistant

The SPH's five academic departments are:

- Biostatistics
- Environmental and Occupational Health Sciences
- Epidemiology
- Global Health
- Health Services

The following are brief descriptions of the positions outlined in *Figure 1.4.A*.

Dean (Howard Frumkin)

Dean Frumkin oversees the SPH's operations. The responsibilities of the dean include:

- Overall leadership of the SPH
- Strategic planning
- External relations and visibility
- Fundraising, development, and constituency-building
- School and student advocacy
- Liaison between UW administration and SPH faculty
- Organizational planning and development

Associate Dean for Academic Affairs (Frederick A. Connell)

Associate Dean Connell assists the dean in the educational and curricular development of the SPH as well as in the oversight of academic personnel and student affairs. The responsibilities of the associate dean for Academic Affairs include:

- Oversight of faculty appointment, promotion, and tenure in the SPH to ensure SPH and University procedures are followed
- Oversight of innovations, enhancements, and maintenance of the SPH's academic programs and curriculum, including distance learning and learning technology
- Oversight of faculty and student databases
- Oversight of student affairs
- Oversight of the SPH's CEPH accreditation

Associate Dean for Research and Programs (Mark W. Oberle)

Associate Dean Oberle assists the dean in the practice and service mission of the SPH. He also oversees the newly established undergraduate major in public health and two of the SPH's interdisciplinary programs: Nutritional Sciences and Public Health Genetics.

The responsibilities of the associate dean for Public Health Practice and Programs include:

- Coordination of collaborations with state and local institutions and organizations
- Oversight of interdisciplinary program activities
- Oversight of the SPH undergraduate major in Public Health program
- Promotion and facilitation of interdisciplinary research
- Promotion of collaborative research opportunities and research support service
- Representation on the UW Research Advisory Board and other UW research coordination committees

- Participation in selection of University-wide research scholars and restricted grant applications
- Promotion of SPH research activities at the national level by participation on national advisory boards and committees

Assistant Dean of Advancement (Pat McCowan)

The assistant dean of Advancement plans, manages, and directs the SPH's efforts to attract private support from individuals, corporations, and foundations. The responsibilities of the assistant dean of Advancement include:

- Management of the SPH advancement activities and strategies
- Oversight of alumni relations
- Oversight of steward and honor donors to the SPH
- Liaison for the SPH Dean's Council
- Major gifts and planned giving

Assistant Dean for Administration (Lawrie Robertson)

The responsibilities of the assistant dean for Administration include:

- Oversight of SPH's general operations and administration
- Planning and management of information technology, data, and computing support group
- Planning and management of SPH human resources
- Planning and management of SPH space, facilities, and equipment
- Coordination of efforts to achieve administrative efficiencies
- Planning and management of the SPH's emergency preparedness and environmental health and safety activities

Chief Financial Officer (Ben Robinson)

The responsibilities of the chief financial officer include:

- Fiscal oversight and financial management for SPH
- Development and management of the SPH's UW budgets
- Financial decision support, policies, procedures, and reporting
- UW budget planning and oversight

Director of Communications (Catherine Shen)

The responsibilities of the director of Communications include:

- Internal and external communications, print and digital
- Media relations
- Social media

Special Assistant to the Dean (Alisa Jenny)

The responsibilities of the special assistant include:

- Planning and coordination of strategic planning activities
- Oversight of SPH Strategic Plan implementation
- Coordination of special initiatives

Department Chairs

Each department is headed by a chair who is appointed by and reports to the dean, as shown in *Fig. 1.4.A*.

The responsibilities of the department chair include:

- Curriculum development and coordination in consultation with departmental faculty
- Recruitment and recommendations for faculty appointments and promotions
- Recommendations for SPH and University committee assignments, after consultation with involved faculty
- Student recruitment
- Preparation of annual departmental budgets

- Requests for financial resources and space
- Appointment and oversight of staff

Academic Programs based in the Office of the Dean

Two nondepartmental interdisciplinary programs are housed administratively in the office of the dean: Nutritional Sciences and Public Health Genetics. These two programs operate as quasi-departments. They have their own directors and are overseen by the associate dean for Research and Programs. In addition, the undergraduate Public Health major program also has its own director and is overseen by the associate dean for Research and Programs.

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

The SPH participates in, initiates, and promotes a large number of policies and activities to support interdisciplinary cooperation and collaboration.

University level

- In the past 10 years, the SPH has developed concurrent degree programs with the schools of Medicine, Dentistry, Nursing, Social Work, Public Affairs, Business, International Affairs, and Arts and Sciences (Anthropology, Statistics). (See ***Criterion 2.13***).
- Approximately 35 percent of attendees in SPH courses are from outside the SPH.
- Many of the core/primary faculties in the SPH have joint or adjunct appointments in other departments in the university (See ***Criterion 1.7***).
- Conversely, the SPH departments have appointed a large number of faculty to joint or adjunct appointments in the SPH (See ***Criterion 1.7***).
- Our Department of Global Health is the focal point for global health activities involving faculty and students from throughout the University.
- The associate dean for Research and Programs is a member of the UW Research Advisory Board and other University-wide research coordinating committees.

Within Health Sciences

- The SPH participates in (and co-chairs) the initiative on Interprofessional Education (IPE), a large collaborative effort to integrate teaching and experiential/service learning among students in the six health sciences schools (see ***Appendix 1.4.C***).
- The SPH provides training, especially through the Department of Epidemiology, for post-doctoral fellows from throughout the Health Sciences.
- The new Department of Global Health was created to be jointly housed within the SPH and the School of Medicine.
- The SPH participates in several interschool research training programs (see ***Criterion 3.1***).
- The associate dean for Academic Affairs meets monthly with his counterparts from the six health sciences schools to discuss common concerns regarding students, curriculum, and programs.
- SPH faculty teach the public health course in the School of Medicine.
- Incoming SPH students read and participate in inter-school activities related to the “Common Book” they read prior to starting school. (The common Book for 2012 was *The Spirit Catches You and You Fall Down*, by Anne Fadiman.)

Within the SPH

- The SPH has developed a number of Graduate Certificate Programs that enable students to obtain a “minor” in an area of Public Health outside of their primary department. Students from outside the SPH also enroll to obtain these Graduate Certificates (see ***Criterion 3.3***). In addition, within the SPH, students have the opportunity to pursue an MPH/MHA degree.

- The SPH is home to several degree programs that are interdisciplinary: Nutritional Sciences, Public Health Genetics, and Pathobiology. In addition, the Maternal and Child Health Program includes MPH students from both Health Services and Epidemiology.
- Many faculty in the SPH have joint or adjunct appointments in other SPH departments.
- Within the SPH, coordination of the curriculum is maintained by the SPH Curriculum and Educational Policy Committee (CEPC) which has overall responsibility for the MPH degree and for coordination of courses offered by the SPH.
- Many courses are cross-listed, and students face no barriers in taking courses outside of their department and, indeed, outside of the SPH.
- The SPH Strategic Plan identified six emerging, interdisciplinary areas for scholarly pursuit (See *Criterion 1.1*). The dean is supporting a large effort to pursue these efforts by providing considerable funds for pilot grants and faculty hires in these areas. Interdisciplinarity is a criterion for the pilot grants and the faculty recruitments.

Within the region and local community

- The SPH has long and strong interdisciplinary collaborations with many research institutes within the Seattle area, including the Fred Hutchinson Cancer Research Center, Seattle Children's Hospital Research Institute, Group Health Cooperative's Research Institute, Seattle VA Research and Development Program, Seattle Biomedical Research Institute (SBRI), and others.

1.4.D. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH departmental structure promotes strong, discipline-based research and teaching programs.
- The SPH participates in, initiates, encourages, and promotes a wide range of interdisciplinary curricular, research, and service activities with partners from the wider University community, within the SPH, and the local and regional community.
- The SPH houses or participates in over 35 research centers.
- These research centers provide environments that promote cutting-edge, interdisciplinary, and inter-institutional efforts to create and disseminate new knowledge.

Weaknesses/Challenges

- The administrative and financial burden of creating new departments has resulted in the SPH locating interdisciplinary and other units (e.g., Social and Behavioral Sciences, Nutritional Sciences, Public Health Genetics, Maternal and Child Health, Pathobiology, and others) within departments or in the office of the dean. This produces a complexity that is a challenge administratively and in terms of communication to outside audiences (especially prospective students).
- The Department of Global Health was established to exist jointly in the SPH and the School of Medicine. This has necessitated a considerable effort to develop workable faculty, administrative, and financial policies and procedures. The Memorandum of Understanding (MOU) that codifies these policies and procedures is included in *Appendix 1.4.D*.

Plans

- Continue to promote interdisciplinarity in teaching, research, and service.
- Develop better and better-understood administrative systems to support interdisciplinary programs and activities.
- Provide better, clearer information about the wide range of interdisciplinary academic programs, research, courses, and service opportunities through SPH and departmental websites and other communication vehicles.

This criterion is met.

1.5 GOVERNANCE

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

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

Important SPH-wide committees include the SPH Executive Committee (SPHEC), the Faculty Council, the Curriculum and Educational Policy Committee (CEPC), the Diversity Committee, the Practicum Committee, the Distance Learning and Technology Committee, the Student Services Committee, the Dean's Council, the Communications Committee, and the Tuition Committee. The SPH Strategic Planning Steering Committee was formed to guide the SPH's 2011 strategic planning process; the SPH Accreditation Writing Committee was formed to coordinate the self-study process for accreditation.

School of Public Health Executive Committee (SPHEC)

Charge:

- Advise the dean on matters related to SPH-wide budget allocations, curriculum and educational policy, faculty policy, long-range planning, and external visibility.
- Provide a forum for information-sharing and deliberation among leaders of the SPH, including the dean, associate deans, chairs, faculty and student representatives.

Composition: SPHEC is composed of the dean, the assistant and associate deans, the department chairs, chair of the faculty council, a student representative, and key staff in the office of the dean.

Minutes can be found in ***Appendix 1.5.A.i.***

Faculty Council

Charge:

- Make recommendations to the dean regarding proposed faculty appointments, promotions, and tenure.
- Advise the dean on matters involving academic policy, including priorities, resource and salary allocation, and budgets.
- Advise the dean on the day-to-day operations and long-term plans, develop statements of common goals, coordinate areas of common interest, review facility requirements, and promote community relations.
- Provide oversight and coordination of the activities of SPH standing committees and *ad hoc* committees that the Faculty Council establishes.
- Bylaws can be found in ***Appendix 1.5.A.ii.***

Composition: The Faculty Council is composed of one elected representative (and alternate) from each of the SPH departments and one elected representative from the Interdisciplinary Programs (Nutritional Sciences and Public Health Genetics). The dean also serves as an *ex-officio* member. The composition of this committee for the 2012-13 academic year is David Grembowski (chair), Karen Edwards, Howard Frumkin (dean; *ex-officio*), James Hughes, Joel Kaufman, Jonathan Mayer, Andy Stergachis, and Ashlee Harty (staff).

Minutes can be found in ***Appendix 1.5.A.iii.***

Curriculum and Educational Policy Committee

Charge:

- Evaluate, review, and approve proposed courses, programs, and program competencies.
- Establish core degree competencies for all SPH degree programs.
- Review and approve proposed changes in the MPH curriculum, including any changes of required courses, credits, and competencies.
- Monitor curricula in all programs (undergraduate, graduate, certificate) within the SPH and SPH-affiliated UW extension courses and certificates.
- Review departmental procedures for evaluating teaching effectiveness.
- Provide a forum for discussion and decisions regarding SPH-wide and interdepartmental curriculum issues.
- Charge statement can be found in ***Appendix 1.5.A.iv***.

Composition: The Curriculum and Educational Policy Committee is composed of faculty members appointed from each department, each interdisciplinary program, the undergraduate Public Health major. A student representative and the associate dean for Academic Affairs serve as *ex-officio* members. The composition of this committee for the 2012-13 academic year is Patricia Wahl (chair), Shirley Beresford, Frederick Connell (*ex-officio*), Karen Edwards, Stephen Gloyd, Donna Johnson, Sara Mackenzie, Mark Oberle, Claire Rainey (student), Michael Rosenfeld, Patricia Totten, and Ashlee Harty (staff).

Minutes can be found in ***Appendix 1.5.A.v***.

In addition to this SPH-wide committee, each department as well as the interdisciplinary programs has a curriculum committee.

Diversity Committee

Charge:

- Develop and advocate for policies and initiatives that will improve the diversity of the SPH community.
- Establish mechanisms to monitor, measure progress, and promote accountability towards these goals.
- Strengthen diversity within the curriculum.
- Implement recruitment and retention policies to ensure a diverse faculty, staff, and student body.
- Develop and implement activities to create and sustain a welcoming climate for diversity.
- Bylaws can be found in ***Appendix 1.5.A.vi***.

Composition: This committee is co-chaired by a faculty member and a staff member, and includes faculty, students, and staff from across all SPH departments. The composition of this committee for the 2012-13 academic year is India Ornelas (co-chair), Deb Hinchey (co-chair), Janice Camp, Frederick Connell (*ex-officio*), Gitana Garofalo, Susan Inman, Biraj Karmacharya, Aaron Katz, David Katz, Laura Martinez, Kate McGlone West, Carey Purnell, Deepa Rao, Krishna Richardson, Tiffany Sin, Ala Soofian, and John Davis III (staff).

Practicum Committee

Charge:

- Advise and assist assistant director of Student Affairs in her role as Practicum Coordinator for the SPH
- Review and approve practicum guidelines
- Approve procedures and policies for identifying appropriate practicums for students, and coordinate practicum requests among the different departments in the SPH and the various practicum sites within the community and health agencies.
- Develop plans for the evaluation of practicums.
- Review requests for practicum waivers and make recommendations to accept or deny the requests.

Composition: The committee is composed of the associate dean for Academic Affairs, the director of Student Services, assistant director for Student Services, and representatives from SPH departments. The composition of this committee for the 2012-13 academic year is Frederick Connell (chair), Kitty Andert, Julie Brunett, William Daniell, Debra Doyle, Amanda Graybill-Pennington, Deborah Hinchey, Colleen Huebner, Anne Lund, Kate O'Brien, Stephen Schwartz, Jack Thompson, and Steven Zeliadt.

Distance Learning and Learning Technology Committee

Charge:

- Serve as a forum in SPH for discussing and encouraging innovation in teaching and learning, particularly related to distance learning and new learning technologies.
- Facilitate implementation of the Canvas learning management system and Tegrity lecture capture software in order to offer a consistent learning experience for SPH students.
- Identify, articulate, and differentiate among potential target audiences for SPH distance learning courses, certificates, and degree programs.
- Advocate on behalf of faculty, departments, and programs in negotiating terms of agreement with Professional and Continuing Education (PCE) for course development, management, and support.
- Make recommendations on behalf of SPH related to distance learning and learning technologies to decision-making bodies such as departmental and SPH-wide curriculum committees.

Composition: The committee is composed of the associate dean for Academic Affairs and one or more representatives from each of the SPH departments and the Northwest Center for Public Health Practice. The composition of this committee for the 2012-13 academic year is Frederick Connell (co-chair), Ann Downer (co-chair), Janice Camp, Donna Denno, Joel Felix, Tom Furtwangler, Stephen Gloyd, Victoria Holt, James Hughes, David Kalman, Mark Oberle, Sarah Paliulis, Donna Porter, William Welton, and Ashlee Harty (staff).

Minutes can be found in *Appendix 1.5.A.vii*.

Dean's Council

Charge:

- Advise the dean on the direction of the SPH to achieve its service, research, and teaching missions.
- Help connect the SPH with local, national, and global stakeholders and partners.
- Serve as ambassadors, championing the SPH and its contributions to the public at large.
- Assist in building financial support for the SPH through advocacy and making introductions where appropriate.

Composition: Community leaders and supporters of the SPH, by invitation.

Communications Committee

Charge:

- Coordinate the numerous web, social media, communications, and database initiatives that are underway throughout the SPH's departments, centers, and programs.
- Serve as liaison between the dean's office and the departments on web, database, and technical matters.
- Help to create and implement SPH-wide web applications.
- Increasing the public's awareness of the SPH's contributions to health and society through various communication channels

Composition: This committee is chaired by the director of Communications and includes the SPH web producer, departmental communications staff who handle web design, content creation, social media, and print publications for their respective units. The composition of this committee for the 2012-13 academic year is Catherine Shen (chair), Jennifer Ames, Angie M. Buck, Janice Camp, Shannon Delaney, Sarah Fish, Gitana Garofalo, Cathy Greenbaum, Gail I. Greenwood, Maggie Helsel, Adrienne M. Hidy, Deb Hinchey, Jeff Hodson, Susan Inman, Alisa Jenny, Katie Kerr, Tim Knight, Karen Luetjen, Megan Lynn, Patricia McCowan, Rory Murphy, Bobbi Nodell, Donna M. Porter, Elizabeth Robichaud, Kevin M. Schuda, Sheryl Schwartz, Elizabeth Sharpe, Deborah K. Shattuck, Nancy Shawn, Barb Byrne Simon, Missie F. Thurston, Candace Tkachuck, and Carmen Velasquez.

Student Services Committee

Charge:

- Serve as a forum for communication, formulation, and coordination of SPH student-related policies and procedures.

Composition: This committee is composed of the director of Student Affairs, assistant director of Student Affairs, and student services staff from all SPH departments and programs. The composition of this committee for the 2012-13 academic year is Deb Hinchey, Amanda Graybill-Pennington, Brit Exworthy, Tory Brundage, Susan Inman, Carey Purnell, Gail Greenwood, Barb Snyder, Carmen Velasquez, Cindy Moore, Donna Porter, Gitana Garofalo, Grace Wong, Julie Brunett, Katie Wakefield, Jennifer Tee, Kate O'Brien, Rory Murphy, Rachel Reichert, Merry Thach, Maggie Helsel, Kitty Andert, Julie Nevins, Trina Sterry, Shannon Delaney, and Brandon Guthrie.

Minutes can be found in ***Appendix 1.5.A.viii***.

Strategic Planning Steering Committee

Charge:

- Led the strategic planning process.
- Facilitated discussions across the SPH and with community partners about the future vision of the SPH.
- Contributed to and reviewed drafts of the Strategic Plan document.
- Presented recommendations to department faculty, staff, and students on the plan.

Composition: The committee was composed of 23 faculty, staff, students, and external stakeholders representing a broad range of seniority, content area expertise, and constituencies within the SPH and community. The committee roster can be found in ***Appendix 1.1.E.i***.

Tuition Committee

Charge:

- Deliver to the dean a proposal for the long term, strategic goals of tuition and program fees. The proposal will focus on tuition-based programs and should include quantitative targets.

Composition: Ben Robinson (chair), Leigh Alderman, Julie Beschta, Fred Connell, Joseph Delaney, Shannon Delaney, Scott Emerson, Stephen Gloyd, Deb Hinchey, Colleen Huebner, Anne Lund, Donna Porter, Kevin Schuda, Nick Yasinski, Michael Yost

Accreditation/Self-Study Writing Committee

Charge:

- Coordinate the accreditation self-study process.
- Write, compile, and review drafts of the self-study document.
- Inform and obtain comments from department faculty, students, staff, and other stakeholders on the self-study.

Composition: The committee is composed of the associate dean for Academic Affairs, manager of Academic Affairs, associate dean for Research and Programs, chair of the Faculty Council, chair of the Curriculum and Educational Policy Committee, director of Student Affairs, director of the undergraduate Public Health major, SPH chief financial officer, dean's special assistant for strategic planning, and a student representative.

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

- general school policy development*
- planning and evaluation*
- budget and resource allocation*
- student recruitment, admission and award of degrees*
- faculty recruitment, retention, promotion and tenure*
- academic standards and policies, including curriculum development*
- research and service expectations and policies*

General SPH policy development

SPH operates within the governance guidelines and systems of the University of Washington, as determined in large part by the UW Faculty Senate, UW Faculty Code, the Graduate School, and the office of the provost.

Within this framework, SPH-wide policy, internal allocation, and strategic planning decisions are made primarily by the SPH Executive Committee (SPHEC) with input from the SPH's Faculty Council, faculty, students, and other constituencies.

SPHEC is concerned with all issues affecting the SPH, particularly resource allocation, strategic planning, development, external visibility, faculty affairs, and educational policy. The committee meets monthly and is advisory to the dean. It makes collegial decisions on these matters based on input from faculty, staff, and students, including input from the standing committees. The interests of the faculties of each department are represented in SPHEC by their chairs. At these meetings, issues of SPH-wide importance that have been raised at departmental faculty meetings and by the students are presented and discussed. In addition, the dean informs the department chairs and associate deans of important University-wide initiatives and policy issues.

The standing committees that contribute to governance in the SPH are: the Faculty Council, the Curriculum and Educational Policy Committee, the Practicum Committee, the Distance Learning and Technology Committee, the Diversity Committee and the Practicum Committee.

- Each unit on campus, as per the UW Faculty Senate, has a Faculty Council, which contributes to SPH-wide policies on faculty expectations, appointments, and promotions. The Faculty Council reviews and votes on faculty appointments, promotions, and awards of tenure and advises the dean on matters involving SPH policy, including priorities, resource and salary allocation, and budgets. Each department must elect a representative and an alternate to the Faculty Council. Terms are for three years and may be renewed once by a vote of the department faculty. All voting members of the faculty are eligible to serve, including joint faculty who hold voting rights in SPH. Each year, the Faculty Council elects a chair, whose term may be renewed. The Bylaws of the SPH Faculty Council can be found in *Appendix 1.5.A.ii*.
- The Curriculum and Educational Policy Committee formulates SPH-wide academic policies, oversees the curriculum, and approves new courses and programs, as well as course and program changes at the SPH level. It reports to the Faculty Council.
- The Practicum Committee sets and monitors policies and procedures for the MPH practicum.
- The Diversity Committee develops, promotes, and implements policies and activities to create and sustain an open and inclusive environment for all faculty, staff, and students.
- The Distance Learning and Technology Committee coordinates and monitors distance learning online capabilities of the SPH.

These standing committees may present issues and recommendations to SPHEC for discussion and action. All of these committees are advisory to the dean.

Students participate in the governance of the SPH through representation on standing SPH-wide and departmental committees. Students are encouraged to bring proposals and concerns to departmental and program meetings and to SPHEC. Students also contribute to the governance of the SPH through the Student Public Health Association and the Undergraduate Student Public Health Association. These organizations receive funding from the dean to support meetings and other student-run events.

The departments in the SPH play a major governance role and are given considerable autonomy and responsibility for resource use, faculty recruitment and mentoring, curriculum development, and student admissions, advising, and monitoring. All departments hold faculty meetings at least once a month to review emerging issues, discuss potential initiatives, and provide a forum for all faculty and student representatives to participate in the governance and decision-making of the department.

The faculty is essential in the formulation of academic and student-related policies and standards. Executive Order IV: Legislative Authority of the Faculty (<http://www.washington.edu/admin/rules/policies/PO/EOIV.html>) states:

... the President authorizes the University faculty to formulate regulations for the immediate government of the University and to share responsibility with him or her...and the academic deans in such matters as:

- A. Educational policy and general welfare;
- B. Policy for the regulation of student conduct and activities;
- C. Scholastic policy, including requirements for admission, graduation, and honors;
- D. Approval of candidates for degrees;
- E. Criteria for faculty tenure, appointment, and promotion;
- F. Recommendations concerning campus and University budgets;
- G. Formulation of procedures to carry out the policies and regulation thus established.

Planning and evaluation

SPH-wide Planning

The SPH completed a comprehensive strategic planning process in 2011. Several hundred students, faculty, staff, partners, and supporters contributed their time and ideas toward developing strategic goals and priorities for the SPH. Implementation began in 2012, will continue in phases for the coming years, and will be tracked formally by the special assistant to the dean. Review of the progress towards the SPH's strategic goals occurs annually at the SPHEC summer retreat, where modifications are made based on input from the department faculty, students, and partnering organizations.

The dean meets monthly with the Faculty Council to discuss developments, solicit suggestions, and respond to concerns on aspects of the SPH, especially as they relate to faculty affairs. The dean also reviews the plans for the SPH with the Dean's Council, which meets quarterly, to solicit its input on strategic directions for the SPH. The SPH Student Advisory Council also meets with the dean to provide input and feedback on SPH policy, including budget decisions that affect students.

Departmental and Program Planning

Annually, all departments meet in a retreat format to formally discuss academic and research activities and make plans related to program development, research, faculty, and departmental initiatives and needs. In departments with multiple teaching program tracks, the faculty associated with these tracks also conduct periodic retreats and reviews to evaluate their programs and plan efforts for program enhancements. The dean meets annually with the chairs to review all aspects of their respective departments to discuss departmental concerns and plans (see *Criterion 1.2.A*).

In addition, every 10 years, the Graduate School conducts formal reviews of each graduate program in the SPH. As a part of this process, the departments or programs develop formal plans to respond to issues (including both concerns and opportunities) identified by these reviews.

Budget and resource allocation

Based on the SPH's Strategic Plan and goals, as well as departmental needs, the dean develops a biennial budget that is presented by the dean to the provost. Allocations for state funds are distributed to the office of the dean, on the basis of teaching performed (student credit hours), student enrollment, indirect cost recovery, and "provost supplement," which is determined by a number of factors. These funds are in turn allocated to the office of the dean for its operations and programs and to the departments per established and transparent formulae. The formulae for this allocation process are developed by the chief financial officer in consultation with the chairs and the associate dean for Research and Programs. In general, revenues generated by teaching, enrollment, and indirect cost return are allocated to the departments in proportion to their respective activities. The budget and resource allocation process is described in more detail in *Criterion 1.6*.

Student recruitment, admission, and award of degrees

The departments bear the major responsibility for student recruitment, admissions standards, student selection, academic standards, and tracking fulfillment of degree requirements. The faculty has clearly defined rights and responsibilities in these activities. The Office of Student Affairs plays a central coordinating and funding role in efforts to recruit a diverse student body and works together with the departments in these efforts. A detailed description of the SPH's student recruitment and admissions process is provided in *Criterion 4.3*.

The Graduate School sets broad requirements for admission; however, department/program/track faculty determines the specific degree/track criteria and standards for admissions. Applicant selection is determined by department/track faculty. At the UW, students apply simultaneously to both the Graduate School and to specific academic programs in the SPH. The Graduate School provides administrative

support for admissions such as data processing, verifying admissions materials (e.g., transcripts), and collecting the application fee.

Department/track faculty determine graduation requirements and standards within the general (usually minimum) requirements dictated by the Graduate School and accrediting bodies. Degrees are formally granted by the Graduate School based on departmental recommendations.

The dean's office 1) oversees the development of the SPH *Academic Programs Catalog*, 2) maintains the SPH's website, which serves for many prospective students as the point of first contact with the SPH, and 3) houses the Office of Student Affairs (OSA) that helps applicants and current students with problems related to choice of program, financial aid, and the MPH practicum requirement. OSA plays a major role in minority recruitment, which involves staff training, frequent attendance at outreach events, and identification of financial support for students from diverse backgrounds.

Faculty recruitment, retention, promotion, and tenure

Faculty recruitment, retention, promotion, and tenure are shared responsibilities of the departments and the SPH's Faculty Council, with the dean having final decision-making authority for the SPH.

Faculty Recruitment

Departments are generally responsible for identifying needs for new or replacement faculty and, with permission of the dean, for conducting appropriate national searches. In recent years, because of the general economic downturn, the provost has requested a formal hiring plan annually from the deans of all UW schools and colleges. These are compiled in consultation with the chairs. The provost has the authority to approve or ask for revisions in these hiring plans.

An explanation of the procedures for recruiting, appointing, and promoting faculty can be found in the *University Policy Directory* (Chapter 24), online at

<http://www.washington.edu/admin/rules/policies/FCG/FCCH24.html>,

in the *SPH Academic Affairs Handbook* in **Appendix 1.5.B**, and on the web at

<http://sph.washington.edu/gateway/handbook/>.

In general, the decision to offer an appointment to a new faculty member requires a vote of the faculty of the department in which the candidate would be hired. The Faculty Council reviews the qualifications of the candidate and makes its recommendation to the dean. The dean reviews the proposed appointment, and then forwards it to the president and provost with his recommendation. The proposal is reviewed by the provost. Final approval is awarded by the Board of Regents.

Faculty Retention

Through the hiring process, new faculty orientation, mentoring, and annual review, the SPH seeks to hire, retain, and promote faculty of the highest caliber. SPH faculty often receive competitive offers from other institutions. Faculty who receive offers from other employers are requested to complete a UW Report of Competitive Offer form. The department may make a counter-offer to retain outstanding faculty, occasionally preemptively. The faculty in the five SPH departments have authorized the chairs to negotiate retention offers.

Promotion

It is the responsibility of the Faculty Council to develop (with concurrence from SPHEC and the dean) criteria for promotion, to inform departments of these requirements, to specify appropriate review materials, to establish time schedules for review, and to gather all necessary information for promotion decisions.

After the review of a proposed appointment, promotion, or tenure proposal, the Faculty Council makes a recommendation to the dean. If the department chair and faculty do not agree on a particular proposed appointment or promotion, the Faculty Council also plays a fact-finding role. To qualify for promotion,

faculty must perform at a high standard in teaching and in research or academic public health practice, and they are encouraged to provide service to the professional, SPH, University, and general communities. Outstanding performance in one area may compensate partially for modest activity—but not for inadequate performance—in another.

Each fall, senior departmental faculty review all faculty beneath the rank of professor for possible promotion. Reviews are conducted using the general University guidelines (*University Policy Directory*, Chapter 24)

<http://www.washington.edu/admin/rules/policies/FCG/FCCH24.html>

and the guidelines established by the Faculty Council in the *SPH Academic Affairs Handbook (Appendix 1.5.B)*.

If the departmental faculty recommend promotion, the recommendation and the packet of supporting materials is sent to the dean, who refers the proposal to the Faculty Council. The Council reviews the proposal and makes a recommendation to the dean, who forwards the proposal to the provost with his or her recommendation.

Tenure

Historically the SPH had a limited, finite number of tenure positions assigned to each department in the SPH. Most faculty join the SPH without a commitment of tenure (the UW calls these appointments “WOT,” without tenure by reason of funding). WOT faculty have the same voting privileges and rights as tenured faculty, except for a guarantee of salary support. WOT faculty are supported from departmental funds for teaching and by external grants and contracts for research. They can be released from UW employment only for reasons of misconduct and loss of funding (less than 50% over one year).

The awarding of tenure can come a) upon promotion to associate professor, if the faculty member was hired as a *tenure track* assistant professor; b) upon joining the faculty, if the faculty member was hired as a *tenured* associate or full professor; or c) most commonly, by a vote of the senior faculty to award tenure to a seated member of the faculty. This last option has been applied to senior faculty with a track record of excellence in teaching, research, and service and who have demonstrated a commitment to the University through exemplary departmental citizenship. Award of tenure requires letters from external referees, a vote of the Faculty Council, and approval of the dean. More recently, with the adoption of the Activities-Based Budgeting (ABB) method of allocating revenues to the UW Schools and Colleges, the notion of “tenured positions” has become uncertain, because allocation to the units is no longer based on the “tenured positions” in each unit. Currently, any commitment of tenure requires that the department and school demonstrate that there are projected, sustainable resources to support the tenured position.

Academic standards and policies, including curriculum development:

The Graduate School sets minimum requirements for graduate degrees, such as credits and grades. Specific academic requirements, standards, and policies for each program in the SPH are determined by departmental faculty. The requirements for all degree programs in the SPH exceed the requirements of the Graduate School. An analogous relationship exists with the Office of Undergraduate Education for undergraduate programs.

Departmental faculty establish standards and policies for their academic programs, and the SPH Curriculum and Educational Policy Committee provides oversight to ensure compliance with SPH standards and policies. Generally, the responsibility for curriculum development lies with the departments, each of which has its own curriculum committee. The Curriculum and Educational Policy Committee reviews any proposed new course, degree and certificate programs, or modifications to existing courses and programs. It ensures course integration across the SPH by noting any gaps or overlaps in the curriculum, and occasionally initiates SPH-wide efforts in curriculum development, e.g., recent initiatives in the areas of public health ethics and human biology.

The Curriculum and Educational Policy Committee monitors all curricular matters related to the educational mission of the SPH, reviews and approves changes to the curriculum, and makes recommendations, as appropriate, to the SPHEC and the dean. Because the MPH degree involves courses throughout the various departments, the Curriculum and Educational Policy Committee has a special role in reviewing and approving any changes in the requirements and expectations for the MPH. The committee also reviews the departmental peer teaching evaluation procedures.

The associate dean for Academic Affairs, with guidance from the Curriculum and Educational Policy Committee, oversees all degree programs and assures they are implemented consistently across departments, including developing and updating program learning objectives and the inclusion of course learning objectives in all syllabi.

The University's Graduate Faculty Council reviews each graduate program in the University on a 10-year rotation cycle and approves new degree program applications before they are sent to the state Higher Education Coordinating Board for approval. The review process for the Graduate Faculty Council is similar to the CEPH accreditation review. The department/program prepares a self-study document according to University-wide specifications. A review committee is formed, consisting of three to four University faculty outside the SPH and two to three non-UW faculty members involved with similar programs at their home institutions. After the self-study is reviewed, a two-day site visit is conducted to meet with the program director, coordinator, faculty, students, department chair, and the dean. The review committee drafts a report and distributes it to the program for comments on its accuracy. A final report is distributed to the Graduate Faculty Council, which then meets with the internal review committee members, the department chair, and the dean to discuss the report and make any final recommendations.

Programs reviewed by the Graduate Faculty Council since the last CEPH accreditation include: Graduate Certificate in Statistical Genetics (2007); Master of Public Health (2007); Public Health Genetics PhD (2009); Master of Science in Genetic Epidemiology (2009); Public Health Graduate Certificates (2010); Environmental and Occupational Health Sciences MS and PhD (2010).

Research and service expectations and policies

All faculty in the SPH are expected to engage in research, and all must comply with the standards for research established by the University through the Human Subjects Division and Office of Research. Specific policies for the SPH have been developed by SPHEC concerning which faculty titles can be principal investigators on externally funded grants and contracts. Research and service expectations for promotion at each rank are established by the elected Faculty Council, approved by SPHEC, and published in the SPH Academic Affairs Handbook (*Appendix 1.5.B*). These expectations are described in *Criterion 3.2.A*.

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

The SPH is guided and governed by a number policy documents.

1. The University of Washington Faculty Code:
<http://www.washington.edu/admin/rules/policies/FCG/FCGTOC.html>
2. The policies of the Graduate School: <http://www.grad.washington.edu/policies/>
3. The Graduate School Memoranda:
<http://www.grad.washington.edu/policies/memoranda/index.shtml>
4. Student Conduct Code for the University of Washington:
<http://apps.leg.wa.gov/WAC/default.aspx?cite=478-120>
5. SPH Faculty Bylaws: <http://sph.washington.edu/gateway/handbook/>
6. SPH Academic Affairs Handbook: http://sph.washington.edu/gateway/handbook/hb_full.pdf

The SPH Faculty Bylaws and Faculty Handbook can be found in *Appendix 1.5.A.ii* and *Appendix 1.5.B*.

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

SPH faculty serve on close to 100 University-level councils, committees, and advisory boards. These service activities are listed in ***Appendix 1.5.D*** along with the SPH faculty who serve on these. In addition, staff and students participate on a number of University committees, especially committees involving diversity and University events.

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

Each department has two students elected to serve as University-wide Graduate and Professional Student Senators. Each senator represents student issues and concerns at the Graduate and Professional Student Senate (GPSS) meetings which occur on a semi-monthly basis. The senator is also responsible for appropriation of the annual GPSS allocation of budget money to the programs.

Within the SPH, the Student Public Health Association (SPHA) and Undergraduate Student Public Health Association (USPHA) are official student groups whose purpose is to integrate and unify students across the multiple graduate and undergraduate departments and programs at the SPH, and to create a consolidated voice to address student concerns as they arise. They seek to promote a positive educational experience for all students by creating interdisciplinary learning experiences; encouraging open communication between departments and among students, the Dean's Office, and other SPH decision-making bodies; and promoting cross-departmental social interaction for the purposes of enjoyment and networking. SPHA also delegates representatives to all SPH-wide committees of student interest. Current committees with student representation include:

- School of Public Health Executive Committee
- Curriculum and Educational Policy Committee
- Diversity Committee
- Distance Learning and Learning Technologies Committee
- Accreditation Committee
- MPH Curriculum Review Work Group
- Tuition Committee
- Practicum Committee (position to be filled)

Within all departments, students participate in governance as appointed representatives at faculty meetings, and on admissions, curriculum, and academic affairs committees. In addition, the Pathobiology program has a Student Affairs Committee that is charged with maintaining and increasing, as necessary, effective communication between the faculty and students of the Pathobiology Program.

This past year, students also established the School of Public Health Student Advisory Council. The Council includes students from the departments (Graduate and Professional Student Senators), representatives from the Student Public Health Association and the Undergraduate Student Public Health Association, as well as representation from the various SPH-wide permanent and ad-hoc committees (see ***Figure 1.5.E*** on the next page). While primarily an information-sharing body, the Student Advisory Council also serves to advise the dean in budgeting matters and is involved in long and short range planning for the SPH.

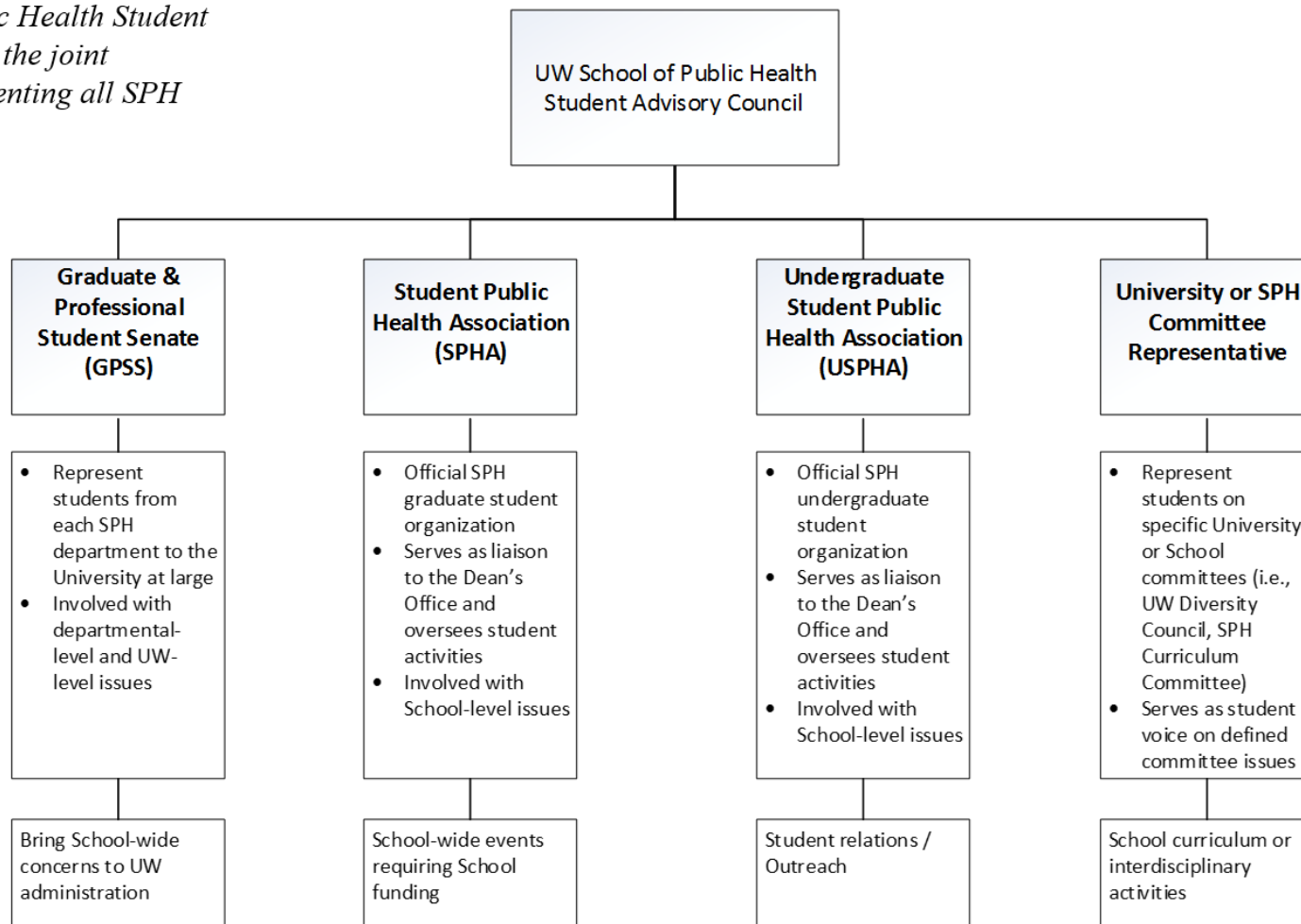
Figure 1.5.E. Composition of Public Health Student Advisory Council

The School of Public Health Student Advisory Council is the joint organization representing all SPH students

The Council is comprised of representatives from each of these bodies

Role of each respective body within the Council

Specific activities related to SPH-SAC



1.5.F. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH has an effective system of governance that gives faculty a major role in academic policy, promotion and tenure decisions, budget deliberations, and space allocation.
- The faculty play a dominant role in curricular and educational policy, appointments, promotion and tenure, and through the SPH Faculty Council.
- The committee structure in the SPH and departments includes student representation and functions effectively for communication, policy, planning, and evaluation.
- The SPH *Academic Affairs Handbook*, written by SPH faculty, gives a clear, comprehensive overview of appointment, promotion, and tenure criteria and procedures, as well as other SPH policies that affect faculty.

Weaknesses/Challenges

- Because of competing demands, including, but not limited to, the need to compete for grant funding (faculty) and work obligations (students), faculty and students vary in the degree to which they are able to contribute to SPH governance and other University service.

Plans

- Continue to upgrade the SPH website to provide clear access to University and SPH policies, procedures, and developments affecting the SPH community.
- Continue to encourage all departments to contribute broad faculty and student participation in planning, governance, and University service.

This criterion is met.

1.6 FISCAL RESOURCES

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

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

This section summarizes the financial picture of the SPH. First, the different types of revenues that the SPH uses for its operations are described. Second, the allocation processes for each of these revenue streams are described in two parts: a) the historical allocation process, and b) the future allocation process. This distinction is important because the University is currently implementing an Activity-Based Budgeting (ABB) system for Fiscal Year (FY) 13. This will significantly alter the future allocation processes. Finally, this section will summarize the major financial trends for the SPH over the past seven years.

Types of revenues streams

The SPH has four revenue streams.

1. **Designated Operating Funds (DOF):** These consist primarily of indirect cost recovery funds from grants and contracts.
2. **General Operating Funds (GOF):** There are two sources of GOF: a) University-controlled funds which are a combination Washington State funds allocated by the state legislature to the University and tuition revenues; and b) a state appropriation from the State Industrial Insurance Fund specifically targeted to the Department of Environmental and Occupational Health Science.
3. **Other Operating Funds (OOF):** These are primarily revenues from endowments.
4. **Restricted Operating Funds (ROF):** These funds fall into four categories: a) grants and contracts; b) extension tuition and fees (tuition and fees from self-sustaining academic programs and classes taught through the University Educational Outreach division); c) revenues from recharge centers (e.g., transfers for biostatistical consultation); and d) gifts.

Summary of allocation processes

Historical Allocation Process (pre-2012)

DOF: These funds are primarily indirect cost recovery (ICR). Historically the University returned the full school allotment of indirect costs. In FY11, for example, this amount was equal to 43 percent of the total indirect costs generated from SPH's sponsored awards. Each year, SPHEC decided how much of these funds would be kept in the dean's office for common services (e.g., student support, database management) and the remainder (generally over 95 percent of total ICR) was allocated to the departments in proportion to how much ICR they generated.

GOF: In the historical allocation, there was no way to distinguish between tuition revenue and University allocations from the state treasury. The distribution of GOF funds to the academic units was based on the historical amount received in the prior year, with a percentage increase (or decrease) dictated by the availability of funds and directives from the state legislature. Prior to 2012, GOF funds were passed directly to the departments (and the office of the dean, for its allocation), in proportion to the previous biennial allocation. Occasionally, additional University funds—either one-time or ongoing—were added to the allocation to the SPH for specific purposes (e.g., program expansions, minority faculty recruitment, dean's recruitment package, etc.).

The component of GOF from the state Industrial Insurance Fund was allocated solely to the Department of Environmental and Occupational Health Services. No University or dean's office overhead was taken from these funds.

OOF: The allocation process was a two-step process: a) the first two quarterly interest disbursements were kept by central administration as a form of overhead; b) all subsequent distributions were allocated to the departments that "owned" the endowments. No dean's overhead was charged.

ROF: These funds were also allocated directly to the departments responsible for their generation. No dean's overhead was collected on these revenues.

Current Allocation Process (2012 – present)

Beginning (approximately) in FY12, both the University and SPH allocation methodology changed. At the University level the historical allocation of GOF has been discontinued, replaced by an Activities-Based Budgeting (ABB) methodology. Under this system, tuition-based revenue is allocated to schools by a complex formula involving a weighted average of student majors in, and student credit hours (SCH) taught by, each school. Thirty percent of generated and collected tuition revenues are held back by the provost. In addition, a percentage of the SPH's share of indirect cost return is also retained centrally. Finally, the provost uses these held funds and the (diminishing) legislative allocation to the University to provide "Provost's Discretionary Funds" to schools and colleges to ensure no school or college experiences a dramatic shortfall due to these changes, as well as to promote or compensate for other needs.

At the SPH level, the allocation process also changed. First, because of ABB, there is no longer a separate, historically based allocation to the office of the dean. GOF, DOF, and revenues derived from teaching in the UW Educational Outreach division are now "taxed" (i.e., a dean's office tax) to provide for the operating expenses of the dean's office. Second, the internal SPH allocation of these funds is now made using a transparent methodology/algorithm to link allocations to departments with activity (ICR generation, student enrollments, and teaching). Third, because of program reorganizations, the dean's office expenses now include the operations for two programs that had previously been housed in the Department of Epidemiology (Nutritional Sciences and Public Health Genetics) and the new undergraduate Public Health major.

DOF: Because of the new University methodology, the current model returns 35 percent of all Facilities and Administration (F&A) generated by SPH sponsored awards. This represents a net decrease in return of ICR to the SPH, as previously the SPH averaged 43 percent return of F&A which was off-set by a one-time provost award.

GOF: The net tuition-based revenues are calculated by reducing the gross tuition by the amount of uncollected tuition, and then a 30 percent University overhead tax is levied against the revenue; the remainder is allocated to the SPH for internal distribution. Funds from the State's Industrial Insurance Fund continue to be awarded directly to the Department of Environmental & Occupational Health.

OOF: This allocation process is unchanged from the historical process.

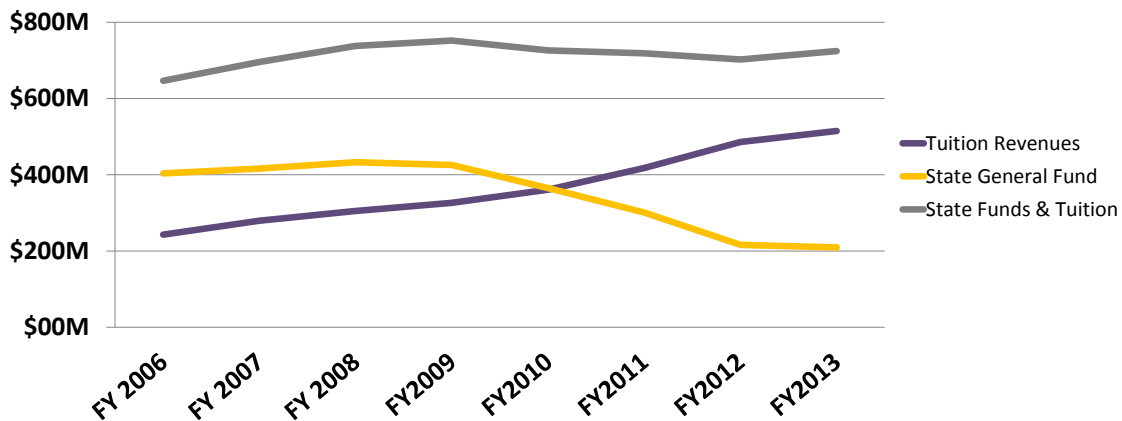
ROF: The process is unchanged for all types of ROF except University Educational Outreach tuition and fees. These fees are now subject to the dean's office tax.

Changes in financial environment

There have been three major changes in the external financial environment:

1. Large reduction in state support of the University: The state of Washington has reduced funding for the University of Washington by 50 percent since 2009. The following chart (*Figure 1.6.A.i*) provides additional detail:

Figure 1.6.A.i. Tuition and state funding



- Minimal Growth in National Institutes of Health (NIH) research budgets: As with other academic institutions, the University and the SPH have felt the impacts of the minimal growth in NIH research budgets. The SPH generates over 80 percent of its operating budget from grants and contracts, with NIH being the single largest funder. The SPH has been successful in securing grant funding from NIH, but it has come at a greater cost as the funding level continues to decrease.
- As seen in the chart, to maintain the same total funding, tuition revenues have increased significantly. This has had several repercussions. Tuition revenues were increased by raising the tuition rates, and this directly impacts student recruitment. Additionally, school operations have changed as tuition revenues became an increasing component of the total revenues.

In addition to the changes in the external environment, there have been three significant changes within the internal environment.

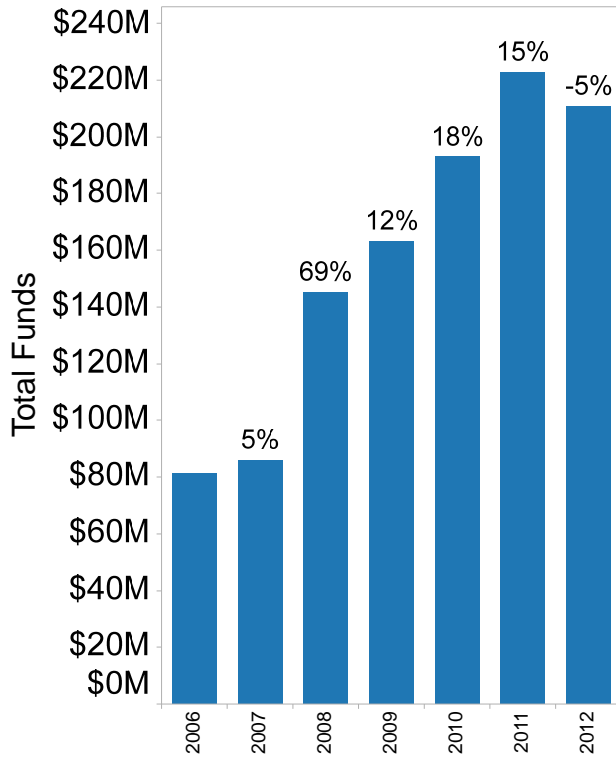
- Creation of Global Health Department: The department of Global Health was created in 2007. The department is joint between the SPH and the School of Medicine. The department has experienced enormous growth and currently has the second largest research portfolio of all departments at the University. The department has proven to be a significant financial strength given the overall decrease in NIH funding.
- Adoption of Activity-Based Budgeting (ABB) by the University: The University adopted an ABB model over the past seven years. FY13 is the first year of full implementation after three years of implementation. As mentioned above, ABB directly ties the distribution of GOF to a school's teaching activities. This increases the SPH's ability to forecast, but it also creates very explicit financial incentives related to teaching. The full impact of ABB will be assessed over the next several years.
- Implementation of modified ABB within the SPH: In response to ABB, the SPH has adopted a similar funding model for distribution of GOF to the departments. Full implementation of the SPH model will occur in FY15 following three years of transition. The model accounts for a broader range of school revenue sources since, due to the university ABB allocation system, the traditional pass-through of University funds to the departments is no longer possible. Throughout its implementation, the new SPH model will be evaluated by three criteria: impact on school programs, logistics of implementation, and acceptability.

Trends in the SPH Budget

Overall Trend

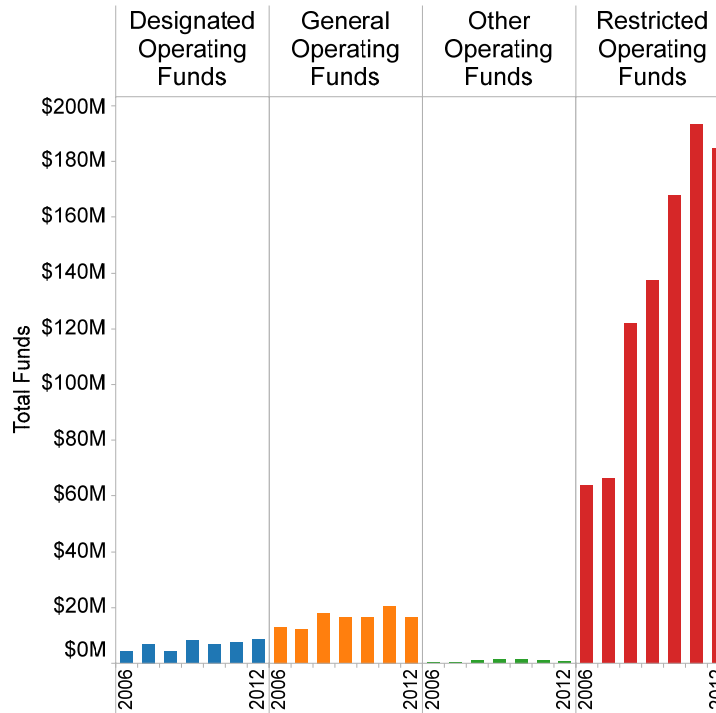
The chart below (**Figure 1.6.A.ii**) summarizes the strong financial growth of the SPH over the past seven years. This strength is particularly noteworthy given the strong negative pressures from the external environment that are highlighted above. There are no immediate financial concerns for the SPH.

Figure 1.6.A.ii. Total funds by fiscal year



The chart below (*Figure 1.6.A.iii*) shows the trends across the four types of revenue streams.

Figure 1.6.A.iii. Trends by source of funds



1.6.B. A clearly formulated school budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. This information must be presented in a table format as appropriate to the school. See CEPH Data Template 1.6.1.

Table 1.6.B. Sources of funds and expenditures by major category (CEPH Data Template 1.6.1)

Revenues and Expenditures for UW School of Public Health by Fiscal Year							
REVENUES	2006	2007	2008	2009	2010	2011	2012
Designated Operating Funds	\$4,367,706	\$7,019,471	\$4,344,352	\$8,088,245	\$6,767,346	\$7,418,257	\$8,597,328
General Operating Funds	\$13,057,508	\$12,166,463	\$17,929,447	\$16,222,083	\$16,516,578	\$20,559,409	\$16,672,179
Other Operating Funds	\$207,834	\$349,402	\$898,391	\$1,319,678	\$1,687,419	\$1,076,883	\$789,226
Restricted Operating Funds	\$63,761,608	\$66,300,698	\$122,011,033	\$137,481,799	\$168,050,762	\$193,591,099	\$184,721,159
Total	\$81,394,657	\$85,836,033	\$145,183,223	\$163,111,805	\$193,022,105	\$222,645,648	\$210,779,893
EXPENDITURES							
Faculty Salary	\$15,607,713	\$16,470,416	\$18,428,666	\$21,094,658	\$22,804,907	\$23,916,391	\$24,032,941
Staff Salaries	\$28,073,224	\$29,328,179	\$38,112,050	\$43,645,799	\$47,275,479	\$51,545,603	\$50,450,807
Faculty and Staff Benefits	\$8,577,068	\$9,850,747	\$11,994,820	\$13,917,426	\$15,584,666	\$19,815,821	\$21,733,622
Operations	\$12,375,608	\$12,591,743	\$40,451,034	\$42,781,675	\$52,556,447	\$67,624,272	\$55,114,787
Travel	\$2,252,019	\$2,154,587	\$6,466,957	\$8,198,549	\$9,790,222	\$10,717,113	\$9,416,701
Student Support	\$2,320,635	\$2,153,631	\$2,558,611	\$2,571,651	\$2,803,210	\$2,927,669	\$3,743,787
Grant and Contract Subcontracts	\$12,188,390	\$13,286,731	\$27,171,084	\$30,902,048	\$42,207,174	\$46,098,779	\$46,287,248
Total	\$81,394,657	\$85,836,033	\$145,183,223	\$163,111,805	\$193,022,105	\$222,645,648	\$210,779,893

Notes:

1. Table includes full amounts from Global Health with no adjustment for joint management of the SPH.
2. Table includes full amounts from UWEO activities under the UWEO org code of 255.
3. Table excludes F&A funds.
4. The source of funds only includes the funds that were expended. It is not a full accounting of the revenue for a fiscal year. This is consistent with the last report.

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

Not applicable.

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

The UW school of Public Health uses the six measurable objectives below to track the adequacy of its resources.

Table 1.6.D: Adequacy of Fiscal Resources

Objective	Target	2009-10	2010-11	2011-12
Institutional support is adequate for the number of students enrolled in the SPH	Institutional support per FTE student >\$24,000	\$17,866	\$23,119	\$20,779
Ability to provide student aid/support for graduate students	Training grant & stipends per FTE student >\$17,000/yr	\$10,306	\$9,815	\$ 15,079
Adequacy of indirect cost returned to SPH for research	RCR returned to school (% of modified direct costs) >16.2%	8.7%	8.4%	9.0%
Adequacy of institutional support to pay for teaching	Institutional support per student-credit hour taught >\$600	\$481	\$561	\$496
Direct research-related grant support to SPH (\$)	Increase by 5% per year	\$168,050,762	\$193,591,099^ (up 15.2% from 2009-10)	\$184,721,159 (down 4.6% from 2010-11) (up 9.9% from 2009-10)
SPH operates within budget	Revenues >= expenditures	Yes	Yes	Yes
Adequacy of faculty salaries** to remain competitive with peers* Rank of faculty salaries > 5 th among top 10 SPHs	5 th or better (where 1 st is highest and 10 th is lowest salary among our peers)	Assist. Prof. (4 th) Assoc. Prof. (8 th) Full Prof. (10 th)	Assist. Prof. (9 th) Assoc. Prof. (10 th) Full Prof. (10 th)	Assist. Prof. (9 th) Assoc. Prof. (10 th) Full Prof. (10 th)

^jump due to one-time large awards

*US News and World Report 2011 top 10 are: UC Berkeley, UCLA, Columbia, Emory, Harvard, Johns Hopkins, U of Michigan, U of Minnesota, U of North Carolina, U of Washington

**Source: ASPH Faculty Salary Reports

1.6.E. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The transition to activity-based budgeting (ABB), recently implemented by the University of Washington, rewards the large amount of teaching, including service teaching, provided by SPH.
- The anticipated increase in the amount of undergraduate teaching and majors will result in increased revenue back to the SPH under the ABB model.
- The SPH houses a number of very large grants which, because of their size, will be unlikely to move from SPH.
- Changes in state policy have resulted in the University retaining all tuition revenues which, combined with ABB, gives the SPH more control over its revenues.
- SPH has more leeway in setting tuition for its graduate degrees.

Weaknesses/Challenges

- There has been a 50 percent decline in state support for UW in the past three years, only partially made up by increases in tuition funding coming to the UW.
- The transition to fee-based systems for some SPH programs (e.g., the Community-Oriented Public Health Practice MPH) places the entire cost of the program on students, who may also incur additional expenses for electives.
- The SPH has limited resources for student aid, outside of grant-based support (e.g., RA-ships and traineeships)
- The SPH is predominantly funded by grants and contracts (>80 percent of operating budget), which is a source of significant vulnerability, particularly in light of anticipated reductions in the level of federal funding of research.
- Faculty salaries compare poorly to those at our peer institutions.
- Gift and endowment revenues constitute an inadequate proportion of operating expenses.
- The Department of Environmental and Occupational Health Sciences is heavily dependent on the funds it receives from the Industrial Insurance Fund, which is subject to political and legislative support for its continuing existence.

Plans

- SPH is increasing its levels of teaching and enrollment, especially in the undergraduate programs.
- SPH has increased investment in fund-raising staff; the dean is taking a hands-on role in seeking private and philanthropic support for SPH, including scholarships.
- The office of the dean has hired a grants manager to facilitate preparation of grant proposals.
- SPH CFO is developing improved tools for financial account and forecasting to improve financial management and planning throughout the SPH.
- SPH will continue to use the UW Office of Continuing and Professional Education for self-sustaining programs to expand its audiences, to increase revenues, and to diversify revenue sources.

The criterion is met.

1.7 FACULTY AND OTHER RESOURCES

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

1.7.A. A concise statement or chart defining the number (headcount) of primary faculty in each of the five core public health knowledge areas employed by the school for each of the last three years. If the school is a collaborative one, sponsored by two or more institutions, the statement or chart must include the number of faculty from each of the participating institutions. See CEPH Data Template 1.7.1.

Table 1.7.A. Headcount of primary faculty

	2010	2011	2012
BIostatistics	31	30	27
ENVIRONMENTAL AND OCCUPATIONAL SCIENCES	30	29	29
EPIDEMIOLOGY	35	34	33
GLOBAL HEALTH	20	22	25
HEALTH SERVICES ADMINISTRATION (Health Services)	26	26	27
SOCIAL AND BEHAVIORAL SCIENCES	10 (HSERV)*	9 (HSERV)*	10 (HSERV)*
Totals	152	150	151

*We do not have a Department of Social and Behavioral Sciences; all Social and Behavioral Sciences Faculty are appointed in the Department of Health Services (HSERV).

1.7.B. A table delineating the number of faculty, students and SFRs, organized by department or specialty area, or other organizational unit as appropriate to the school, for each of the last three years (calendar years or academic years) prior to the site visit.

Table 1.7.B.i. Faculty, students, and student/faculty ratios by department or specialty area (2009-10)

Department	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	31	29.5	16	3.2	47	32.6	80	75.0	2.5	2.3
Env. & Occ. Hlth. Sci.	30	28.6	2	0.1	32	28.8	70	66.9	2.3	2.3
Epidemiology	35	32.4	38	4.2	73	36.6	267	240.9	7.4	6.6
Global Health	20	19.4	31	4.8	51	24.2	79	71.6	3.7	3.0
Health Services	36	34.0	20	2.2	56	36.2	309	269.7	7.9	7.5
Total	152	143.9	107	14.5	259	158.4	805	724.1	5.0	4.6

Table 1.7.B.ii. Faculty, students, and student/faculty ratios by department or specialty area (2010-11)

Department	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	30	27.1	14	1.2	44	28.2	81	76.5	2.8	2.7
Env. & Occ. Hlth. Sci.	29	28.5	3	0.2	32	28.6	76	71.1	2.5	2.5
Epidemiology	34	31.7	35	1.9	69	33.6	244	220.2	6.9	6.6
Global Health	22	21.8	31	4.8	53	26.6	82	75.9	3.5	2.8
Health Services	35	31.8	23	1.2	58	33.0	326	296.4	9.3	9
Total	150	140.9	106	9.3	256	150	809	740.1	5.3	4.9

Table 1.7.B.iii. Faculty, students, and student/faculty ratios by department or specialty area (2011-12)

Department	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Biostatistics	27	26.1	15	1.2	42	27.3	85	80.7	3.1	3.0
Env. & Occ. Hlth. Sci.	29	28.5	4	0.2	33	28.7	77	73.3	2.6	2.6
Epidemiology	33	31.4	35	1.8	68	33.1	242	216.4	6.9	6.5
Global Health	25	24.8	33	4.9	58	29.8	95	84.7	3.4	2.8
Health Services	37	34.0	23	1.4	60	35.4	338	304.2	8.9	8.6
Total	151	143.8	110	9.5	260	153.3	837	759.3	5.3	5.0

Calculations. FTE for primary faculty was computed based on their paid FTE averaged over the academic year. "Other Faculty" have their primary appointments in departments and schools outside of the SPH; we made the very conservative assumption that .05 FTE (5%) of their professional time (with a few specific exceptions) was committed to the SPH.

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

Table 1.7.C summarizes the number of nonfaculty, nonstudent employees at the SPH. Many of these individuals are attached to research projects. These numbers are a "snap-shot" on October 1 of each year. As can be seen from the table, the number of staff has remained fairly constant in recent years, as has the gender distribution and the percent of staff from underrepresented minority racial and ethnic groups. Because almost all employees are full-time, the calculation of FTE was not attempted.

Table 1.7.C. Headcount of Administrative Personnel

Indicator	2010	2011	2012
Total	491	506	509
Male	152 (29%)	151 (27%)	154 (30%)
Female	339 (71%)	355 (73%)	355 (70%)
Underrepresented minority	26 (11%)	30 (11%)	23 (10%)

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

The SPH occupies 200,705 (72 percent) net assignable square feet (ASF) designated as “on campus” and an additional 79,795 (28 percent) ASF designated as “off-campus” for a total of 280,500 ASF (*Appendix 1.7.D* gives more detailed information on space by department and use). Note that most classrooms supporting SPH instruction are not under the control of the SPH, but are assigned through the Classroom Services division of Health Sciences Administration.

SPH Space by use (Table 1.7.D.i): Faculty occupy 29,386 ASF; administration and staff (including service space and storage), 115,670 ASF; student use spaces, 2,126 ASF; wet laboratories (including animal quarters and lab service space), 46,960 ASF; computer spaces, 1,046 ASF; specialized instruction spaces beyond general assignment classroom spaces (see below), 3,237 ASF; other non-laboratory research related spaces assigned to the SPH, 64,870 ASF; and conference space, 17,205 ASF. The following table summarizes SPH assigned spaces.

Table 1.7.D.i. SPH space by usage category

Usage Category	On Campus	Off Campus	Total Assignable Sq. Ft. (ASF)	% of SPH Total
Faculty	23,927	5,459	29,386	10.5%
Staff/Administration	74,512	41,158	115,670	41.2%
Student meeting space	1,622	504	2,126	0.8%
Instruction	1,638	1,599	3,237	1.2%
Laboratory	39,644	7,316	46,960	16.7%
Computer	874	172	1,046	0.4%
Other Research	46,436	18,434	64,870	23.1%
Conference	12,052	5,153	17,205	6.1%
Totals	200,705 (72%)	79,795 (30%)	280,500	100.0%

Since the last CEPH review, SPH has doubled its total space up from 130,300 to 280,500 ASF. This growth has largely resulted from three factors: the creation of the Joint Department of Global Health (107,837 ASF); the University's acquisition of the UW Tower Building which hosts two floors (21,370 ASF) of expanded and consolidated SPH research projects serving the Biostatistics and Health Services Departments; and a rapid increase in the SPH's research portfolio in terms of annual award levels from \$83 million in FY05 to \$153 million in FY12.

As noted, nearly all of the lecture halls, classrooms, and seminar rooms used by the SPH are administered by Health Sciences Administration under the oversight of the Board of Health Sciences Deans. They are shared among all health sciences schools, and classroom scheduling can be problematic if room requests are not planned well in advance. While these rooms are not included in the accounting of SPH space, SPH

does control 4,167 ASF in specialized instructional space devoted to unique SPH activities (e.g., Global Health Classroom).

Student Spaces (Table 1.7.D.ii)

Nowhere is the space landscape changing more than in spaces that best serve emerging student requirements. Laptops, smart phones, Internet-based learning management systems, Skype, social network connections, and an expanded Wi-Fi reach mean accessing academic resources, finding conducive study areas, being connected to instruction and instructors, or even working collaboratively with fellow students is increasingly important. In the midst of these learning and electronic revolutions, traditional notions of space are evolving and require re-evaluation.

An additional influence is the growing emphasis at UW on interprofessional learning and practice. This necessary shift will require new approaches to the design of learning and collaborative learning spaces. Furthermore, with the addition of the Public Health undergraduate major program, it has become increasingly important for SPH to provide both graduate and undergraduate space dedicated to student use. In May, 2013, the School will add the offices for the Public Health Major (300 ASF and a general student lounge (505 ASF) and). As a flexible open space, the lounge will provide a student controlled and managed gathering space for both undergraduate and graduate students. It will become a locus for student-sponsored talks, student association meetings, and a relaxed environment for catching up emails and informal chats with colleague students. Plans are underway for further remodeling of the key upper campus Raitt Hall location for interdisciplinary student activities and resource center (1,094 ASF). This Center is envisioned to provide space for upper campus advising, informational meetings, the Global Resource Center, and to stimulate cross-disciplinary collaboration with upper campus academic units (Arts and Sciences, Public Affairs, International Affairs, Law School, School of Business, Education, Engineering, and the Information School).

Throughout 2012-13 academic year, SPH is conducting a future-oriented space design and programming initiative. One outcome will be to redefine student, support, and practice spaces that better match future trends and requirements. The University is committed to a multi-year capital initiative to transform the Health Sciences learning spaces (T-Wing) to address instructional requirements in the coming 20 years and beyond. These spaces will be designed to be flexible spaces that can optimally utilize UW learning technologies as they are introduced. They will promote collaborative educational experiences for our students and their health professional colleagues.

Below is the distribution of student spaces including offices and carrels managed by each department.

Table 1.7.D.ii. SPH space for students, TAs, and RAs by department

Department/Group	Student Study and Work Spaces	Specialized Instructional Space	Other
Biostatistics	3,360		513
Environmental & Occupational Health Sciences	1,002	550	639
Epidemiology	1,667		1,879
Global Health	3,828	2,036	7,957
Health Services	2,234		425
Office of Dean/School-wide Programs	1,174		404
Totals	13,265	2,586	5,684

Space occupied by departments is summarized in *Table 1.7.D.iii* below.

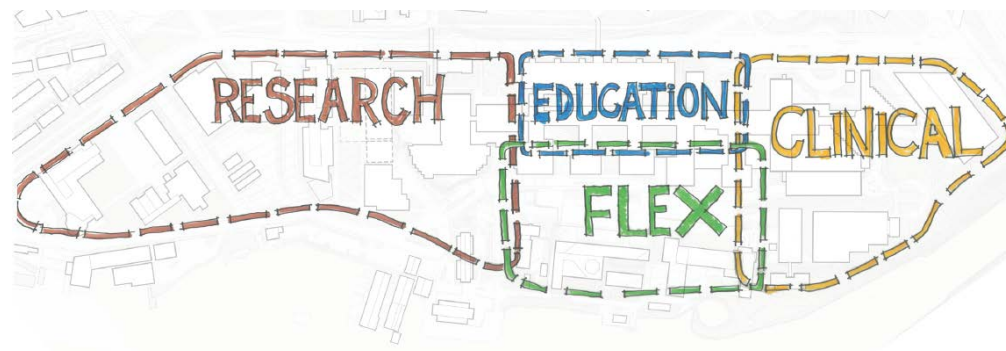
Table 1.7.D.iii. SPH space by department

<i>Department</i>	<i>On Campus</i>	<i>Off Campus</i>	<i>Assignable Sq. Ft.</i>	<i>% of SPH Total</i>
Biostatistics	30,192	5,609	35,801	12.8%
Environmental & Occupational Health Sciences	64,047	5,097	69,144	24.7%
Epidemiology	24,112	128	24,240	8.6%
Global Health	49,543	58,294	107,837	38.4%
Health Services	18,780	10,667	29,447	10.5%
Office of the Dean	14,301	0	14,301	5.0%
Totals	200,705 (72%)	79,795 (28%)	280,500	100.0%

Community Partners Space: These figures do not include the extensive space allocated to SPH faculty whose research and/or office space is at institutions where the SPH or University maintains a formal affiliation agreement relationship. The most significant of these independent research institution relationships include: the Fred Hutchinson Cancer Research Center, the Seattle Department of Veterans Affairs Hospital, Seattle Biomed, Group Health, and Children’s Hospital and Medical Center.

SPH space plans: Looking forward, SPH plans to leverage the transdisciplinary resources of other campus units and the move toward interprofessional approaches to health professional education. As part of the draft South Campus Precinct Master Plan (see space placements concept diagram below *Figure 1.7.D.*), the SPH is in the process of programming space for a new building through an aggressive capital campaign led by Dean Frumkin (up to 150,000 ASF). This space will return many of the off-campus faculty and their projects to the main campus. It will facilitate undergraduate and graduate student access to faculty and promote collaborations among the health sciences schools.

Figure 1.7.D. South Campus Precinct Plan – Space Placement Concepts Diagram



To lead efforts to transform the education of health professionals for improved health outcomes (local to global), SPH is actively participating in the Board of Health Sciences Deans' six-school Interprofessional Education Initiative. This decade-long “Distinctively Washington” effort will create a more efficient, highly collaborative, and cost-effective means for delivering health professionals’ education. It will utilize current, remodeled, and new-building spaces to promote innovative, transdisciplinary educational experiences and transform professional perspectives for both students and faculty. Included in this Health Sciences-wide initiative will be the creation of new, state-of-the-art general assignment instruction classrooms and supporting spaces/technologies, as well as an extensive modernization of current instruction spaces. Together, these capital projects will be the centerpiece of the University’s next capital campaign.

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

The laboratories that serve SPH faculty are listed below. Each is described in more detail in *Appendix 1.7.E.*

a. Department of Biostatistics

None

b. Department of Environmental and Occupational Health Sciences (DEOHS)

DEOHS occupies nearly 33,000 ASF of lab space on and off campus for the following departmental laboratories:

- Environmental Health Analytical Laboratory/Trace Organic Analytical Center
- Toxicology Laboratory
- Air Pollution Research Laboratory
- Functional Genomics Laboratory
- Ergonomics and Safety Laboratory
- Exposure Sciences laboratories
- Field Research and Consultation Group Laboratory
- Environmental and Occupational Health Microbiology Laboratories (EOHML)
- Dermal Exposure Laboratory

c. Department of Epidemiology

None

d. Department of Global Health

The Department of Global Health has laboratory facilities in three primary locations:

- The facility at 1616 Eastlake Ave East includes a total of approximately 10,000 ASF of laboratory space.
- The Department of Global Health (DGH) occupies two laboratory spaces at the Harborview Medical Center's Ninth and Jefferson Building (NJB).
 - The Neisseria Reference Laboratory (NRL)
 - Chlamydia Research Laboratory (CHRL)
- The International Clinical Research Center (ICRC) Central Specimen Repository houses samples from multiple HIV prevention research studies.

e. Department of Health Services

None

f. SPH-Wide Interdisciplinary Programs

- Genetic Epidemiology Laboratory
- Nutritional Sciences Laboratories

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

University of Washington computing resources

- The University provides faculty, staff, and students several options for centrally managed resources for e-mail and websites (department, course, and individual) that all the departments

- use through the University of Washington Information Technology (UWIT) organization.
- The University provides many services for faculty, staff, and students, such as cloud-based email, calendaring, and document management from Google and Microsoft Live, online access to articles from scientific journals, large poster and slide printing, nationwide Internet dialup service, and wireless network access covering nearly 100 percent of all UW campus locations.
- Each year, the SPH applies for and receives between \$10,000 and \$50,000 of the University's technology innovation funds, which are supported by the UW student technology fee. These funds are used to extend student access to available technologies and services.
- The University provides free or discounted licensed software from Microsoft, Adobe, and other academic software companies to students, faculty, and staff for campus and home use (thus extending the potential for remote access to UW resources).
- The UW has invested heavily in new computer and network-based technologies to enhance both research and instruction. "UWired" is the University of Washington forum for promoting broad-based discussions, experimentation, and analysis of the following areas:
 - Innovation in teaching and learning with technology tools (Tegrity and Canvas)
 - Fluency in information technology
 - New ways for students and faculty to access technology-enabled tools and resources
- UWired is the University's intellectual "commons" to address uses of information technology in all facets of the University's instructional mission. UWired is not an operating unit but rather a source for new ideas about technology-enabled teaching, learning, and new practices and services, as well as the ongoing evaluation of such practices and services.

SPH computing resources

- The SPH centrally maintains 13 servers to support web-based applications and their development for the SPH and its departments.
- The SPH provides a secure central database of faculty, grant, and student information and provides access to these data through secure data services, SharePoint Intranet, and reporting services websites.
- The SPH has developed and deployed web-based applications for use by the departments and programs, including: an events calendar, a content management system, faculty appointments and biographies, searchable faculty research interests, an alumni contact/mentoring information submission service, and a jobs listing service.
- A central report server provides links to real-time reports as well as to structured queries to access the UW's Enterprise Data Warehouse and Financial Cube for decision support and information retrieval.

The departments and research centers also provide computer and information support. This is described in ***Appendix 1.7.F.***

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

UW Libraries is a network of 25 facilities serving three campuses: Seattle main campus, and the Bothell and Tacoma branch campuses. Available electronically and via reference services on a 24/7 global basis ("Any Time Any Place Library"), the UW Libraries system maintains a collection of more than 7 million cataloged volumes (1.8 million in annual checkouts) and journal articles available via download; an equal number of older journals in microform format; more than 100,000 Libraries-licensed online journal titles with access to 120,000 journals; 500,000 electronic books; 600,000 locally digitized items within 300 collections, and several million items in other formats. Annually, the UW Libraries system supports 3 million separate log-in sessions to over 300 Libraries-databases. See the fact sheet in ***Appendix 1.7.G.***

To maintain pace with global service requirements and rapidly expanding electronic tools, the system is constantly evolving to provide worldwide access to growing electronic collections. In 2011, over 15,000 reference questions were responded to; 750,000 student uses were drawn up of digitized items via course reserve, and 9 million separate sessions were conducted on Libraries' websites. The UW Libraries Catalog is a fully integrated, computerized system that provides bibliographic information and circulation status for the cataloged holdings of the University Libraries.

Important for the Public Health community, the six health sciences schools created access to a library program tailored to the special requirements of health professions. The mission of the Health Sciences Library (HSL) is to advance scholarship, research, education, and health care by anticipating information needs, providing essential resources, and facilitating learning for the greater health sciences community. The HSL staff strives to integrate this knowledge at the point of use for clinicians, researchers, administrators, instructors, and students within a distributed multi-state educational environment. HSL supports six schools: Dentistry, Medicine, Nursing, Pharmacy, Public Health, and Social Work. A primary user population of over 25,000 students and faculty are located both on campus and at clinical sites through the five-state WWAMI (Washington, Wyoming, Alaska, Montana, and Idaho) region. Serving this large geographic area requires us to focus our efforts on providing web-based knowledge resources regardless of physical location of the user. The HSL contracts with the National Library of Medicine to be the National Network of Libraries of Medicine, Pacific Northwest Region, connecting health professions across the region to information services.

HSL staff includes 27 FTE professionals and 15 FTE classified staff and student assistants, including 12 FTEs funded by grants and contracts for special projects. Knowledge resources include 5,940 current print journal subscriptions; 408,675 book titles, which include all textbooks and media; 940 electronic journals, and 283 databases available via the web. All online content is made available through the HSL website which includes links to all the UW Libraries' electronic resources. While rich in historical depth, the HSL focuses on digital provision of information and is particularly strong in clinical reference (i.e., drug information, evidence-based sources). Linkage to the online article is standard in core databases such as PubMed. The Health Sciences database includes links to an additional array of filtered, no-cost, high-quality resources. Documents not available online may be requested for fast delivery. The HSL is a national leader in the delivery of documents via the web. Resources in the health sciences as well as the extensive collection of the entire University Libraries in relevant areas such as computing, engineering, public policy, technology, and business are available to all users. In addition, strengths in social sciences, psychology, ethics, law and other disciplines are backed by a two-state network of university libraries, the Orbis-Cascade Alliance.

Curriculum support services include a full-service computing lab composed of 80 PCs in four classrooms, and 50 drop-in stations for independent student learning in an area referred to as the Commons. In addition, the Commons has Smartboards, VCRs and other AV equipment. Wireless access is available throughout the library as well as 50 public PCs for research, study, and email access. Several group study rooms are available, and the HSL offers a Reserves collection and anatomical models with a mediated e-reserves system for instructors. Librarians lead or participate in several information and education system research and developed projects and are active participants in national and international professional associations such as American Medical Informatics Association (AMIA), Medical Library Association (MLA), and Association of Academic Health Science Libraries (AAHSL).

The departments also maintain small libraries for faculty and student use.

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

Collaborations

The SPH maintains formal and extensive affiliations with a small number of prestigious local institutions where faculty and students collaborate on educational, research, and service activities. A number of these

relationships are formalized through institution-to-institution affiliation agreements. A significant number of scientists and practitioners from each of these institutions have regular, research, or affiliate academic appointments in the SPH, and many SPH faculty have formal appointments on the professional staff of these organizations:

- Bastyr University
- Battelle Seattle Research Institute – Battelle Memorial Institute
- Fred Hutchinson Cancer Research Center
- Group Health Research Institute
- Infectious Disease Research Institute
- Inland Northwest Health Services
- Kitsap County Health District
- Pacific Medical Centers
- Public Health – Seattle & King County
- Rand Corporation
- Seattle Biomed
- Seattle Children’s Medical Center and Research Institute
- Snohomish County Health Department
- Swedish Medical Center – Swedish Family Medicine
- Veterans Affairs Puget Sound Health Care System
- Washington State Department of Health
- Washington State Department of Labor and Industries
- Washington Department of Social and Health Services
- Washington State Health Care Authority

Key Global Partners:

- Health Alliance International
- Infectious Diseases Institute at Makerere University
- Kenya Medical Research Institute (KMRI)
- Kenyatta National Hospital (KNH)
- Program for Appropriate Technology in Health (PATH)
- Public Health Foundation of India
- The Gates Foundation
- University of California San Francisco (UCSF)
- University of Nairobi
- University of Namibia
- University of Queensland

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

Table 1.7.I. Faculty and other resources

Indicator	Target	2009-10	2010-11	2011-12
Student Faculty Ratios	<8	5.0	5.3	5.3
Student, TA, RA Space	15,000 sq ft	na	na	13,265 sq ft
Library Access	84 hrs/wk	na	na	77½-hrs/wk
Electronic journals	>900	na	na	940
Electronic databases	>250	na	na	283

1.7.J. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- SPH has a large faculty representing all core public health areas.
- Student-faculty ratios in all departments allow students to benefit from frequent and consistent contact with faculty.
- Resources of the University of Washington, including libraries, computing infrastructure, and laboratories, are a major asset and resource for SPH students, faculty, and staff.
- The SPH is co-located with other health sciences schools and physically close to the rest of the University, which promotes shared educational, research, service, and administrative collaboration.
- Faculty enjoy extraordinarily close working arrangements with neighboring research, clinical, and public health resources, many of whom have formal affiliation agreements with the University and the SPH.

Weaknesses/Challenges

- The size and complexity of the SPH's student body, programs, research, and service activities continues to place difficult demands on financial and space resources.
- Approximately half of SPH space is located outside of the Health Sciences Campus. This space dispersion inhibits student-faculty, student-student, and faculty-faculty interactions.
- The need for classroom space, particularly for small seminar rooms, is increasing, which limits the flexibility of scheduling new courses or additional sections of courses.
- We have inadequate student space.

Plans

- The dean has placed a high priority on a "School of Public Health Building," and the dean and the advancement team are actively seeking donors for this building.

The criterion is partially met.

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.

1.8.A. A written plan and/or policies demonstrating systematic incorporation of diversity within the school.

Required elements include the following:

- i. Description of the school's under-represented populations, including a rationale for the designation.***
- ii. A list of goals for achieving diversity and cultural competence within the school, and a description of how diversity-related goals are consistent with the university's mission, strategic plan and other initiatives on diversity, as applicable.***
- iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the school should also document its commitment to maintaining/using these policies.***
- iv. Policies that support a climate for working and learning in a diverse setting.***
- v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.***
- vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.***
- vii. Policies and plans to recruit, develop, promote and retain a diverse staff.***
- viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.***
- ix. Regular evaluation of the effectiveness of the above-listed measures.***

1.8.A.i. Description of the SPH's underrepresented populations, including a rationale for the designation.

The SPH defines underrepresented populations as Hispanic/Latinos, African-Americans, Native Americans, and Pacific Islanders because individuals in these groups a) have historically been underrepresented in the SPH in comparison with their numbers in the general populations, and b) their voices in the SPH and their membership in the public health profession are essential to eradicating inequities in health status in our community, the nation, and the world. Ethnicity and race, however, are not the only characteristics that may affect the inclusiveness and climate in the SPH. Differences in privilege, socioeconomic status, family history of participation in higher education, gender identity, sexual orientation, disability, nationality, religion, and military status also demand that leadership, faculty, students, and staff conduct themselves with cultural awareness, respect, and appreciation for the value of diversity in our school and our profession.

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

One of the seven Strategic Plan goals for the SPH is to "Improve our diversity." Below we list the objectives and strategies that were specified in the Strategic Plan.

Establish a standing diversity committee in consultation with the SPH community. (DONE)

- Promulgate policies and communications designed to improve diversity.

Strengthen diversity within the curriculum.

- Review the current curriculum to ensure core requirements for students in all programs include material and methodologies for understanding and addressing socioeconomic status, class, race, and other social determinants of health.

Diversify the SPH's faculty and staff.

- Develop SPH-wide recruitment policies with guidelines and measurable goals that build on existing guidelines and draw on successful models. These policies should hold search committees, chairs, and the dean accountable for taking actions that ensure searches produce a

diverse pool of applicants.

- Design and disseminate SPH guidelines for mentoring and retention programs for underrepresented minority faculty and staff.

Strengthen recruitment and mentoring of students from underrepresented populations.

- Develop and implement a robust student recruitment policy that promotes a diverse student body.
- Establish “pipelines” through connections to middle schools, high schools, and community colleges.
- Invest in community-building events and professional development activities for students from underrepresented populations.

These goals are entirely in concert with those of the University as a whole. Over the past several years, the University of Washington has engaged in a series of planning initiatives to shape its future as a premier research and education institution in the context of changing demographics, challenges of global scale, and tough economic times. As part of planning for change, the president asked the chief diversity officer to lead the University Diversity Council in developing goals and strategic priorities to embed diversity across the University. The UW Diversity Council drafted a Diversity Blueprint (*Appendix I.8.A.i*), which defines six goals encompassing major areas of emphasis for diversity: leadership and governance; student, faculty, and staff diversity; curriculum and research; and institutional and classroom climate. For each goal, there are strategic priorities and recommended action steps for both administrative and academic units and persons who will be accountable for oversight and progress. Institutional level metrics have been developed by a team of University assessment professionals and researchers. The Blueprint is a guide for planning. Each academic and administrative unit, including the SPH, is developing a plan based on assessment of needs and priorities in relation to those identified in the Blueprint. The sum total of these planning efforts will constitute a University of Washington Diversity Plan.

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

The University of Washington, as an institution established and maintained by the people of the state, is committed to providing equality of opportunity and an environment that fosters respect for all members of the University community. The University and the SPH support a climate free of harassment and discrimination as articulated in Executive Order No. 31: Nondiscrimination and Affirmative Action (<http://www.washington.edu/admin/rules/policies/PO/EO31.html>).

This policy has the goal of promoting an environment that is free of discrimination, harassment, and retaliation. To facilitate that goal, the University retains the authority to discipline or take appropriate corrective action for any conduct that is deemed unacceptable or inappropriate, regardless of whether the conduct rises to the level of unlawful discrimination, harassment, or retaliation. Specifically, this policy:

- Prohibits discrimination or harassment against a member of the University community because of race, color, creed, religion, national origin, citizenship, sex, age, marital status, sexual orientation, gender identity or expression, disability, or military status.
- Prohibits any member of the University community, including, but not limited to, the faculty, staff, or students, from discriminating against or unlawfully harassing a member of the public on any of the above grounds while engaged in activities directly related to the nature of their University affiliation.
- Prohibits retaliation against any individual who reports concerns regarding discrimination or harassment, or who cooperates with or participates in any investigation of allegations of discrimination, harassment, or retaliation.

1.8.A.iv. Policies that support a climate for working and learning in a diverse setting.

The University of Washington School of Public Health is committed to developing a more diverse and culturally competent faculty, staff, and student body in order to better serve communities in our region and beyond. Our commitment to diversity is supported by the UW Board of Regents.

Underlying all public health research and training activities is an appreciation of the effect that cultural and socioeconomic diversity have on the health of communities. There must be an understanding of the behaviors, attitudes, and policies that enable public health to work effectively in cross-cultural situations. We recognize that cultural and sociodemographic diversity enriches the process of discovery by engendering multiple modes of thinking about problems and communicating ideas. Opportunities for enrichment accrue to those institutions that successfully cultivate diversity within their educational, research, and outreach activities. Schools that fail to achieve and maintain a diverse constituency of students, faculty, and staff risk becoming increasingly removed from leading-edge educational and research opportunities in public health and losing relevance in their communities.

All regions of the country, including the Pacific Northwest, are becoming more diverse in racial and ethnic makeup. As the problem of racial and ethnic disparities in health outcomes continues to grow, policymakers and the general public increasingly look to health professional schools to address these urgent and unacceptable circumstances. Because we are one of the few schools of public health in the Northwest, it is particularly important for us to be up to the challenge (<http://sph.washington.edu/prospective/diversity.asp>).

The SPH aims to create a climate that supports working and learning in a diverse setting through the following policies:

1. Encouraging engagement in learning and high academic achievement for all students.
 - Ensuring that all underrepresented students participate equitably in high-impact educational experiences.
 - Providing adequate assistance and support infrastructure to ensure access to and success in high-impact educational experiences for underrepresented students.
 - Creating more high-impact programs focused on diversity.
 - Increasing underrepresented student interaction with faculty particularly in areas such as career advising, mentorship for graduate and professional study, internships, and professional development opportunities.
 - Providing leadership development around diversity issues for all UW students interested in becoming peer mentors, facilitators, or participants in other leadership activities.
2. Ensuring that the built environment is welcoming and accessible for all people and cultures.
 - Encouraging a new perspective on accessibility that prioritizes Universal Design over compliance and Americans with Disabilities Act (ADA) minimums, and build this into practice.
 - Monitoring and addressing access/infrastructure for students with diverse needs, such as observation of religious customs and gender neutral bathrooms.
 - Monitoring and addressing restroom accessibility issues for students with mobility concerns, particularly in reference to classroom space/restroom proximity.
 - Encouraging diverse visual and physical representations across campus from art installations to building design to website and media campaigns.
3. Viewing disability as a type of diversity and having resources in place to help students with disabilities thrive within SPH.
 - The University of Washington Disability Resources for Students Office (DRS) was established in 1978 following the enactment of the Rehabilitation Act of 1973 by the U.S. Congress. [Section](#)

[504](#) of the Rehabilitation Act of 1973 and the [Americans with Disabilities Act](#) of 1990 (ADA), mandate that appropriate and reasonable academic accommodations be provided to students with disabilities.

- In addition our Disabilities, Opportunities, Internetworking, and Technology (DO-IT) Center provides resources for faculty to make their curricula more accessible for students with disabilities <http://www.washington.edu/doi/Faculty/Resources/Doit/>.
- Since 1978, we have been committed to providing academic accommodations to qualified students with disabilities at the UW. DRS strives to support the University in the inclusion of students with disabilities as independent, responsible, and productive members of the campus community.

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

Topics related to diversity and cultural competence are covered in several courses offered by the SPH. Cultural competency is currently covered as a three week module in HSERV 510: Society and Health, which is required of all MPH students. Several other courses on racial/ethnic disparities are offered within the SPH and other health sciences schools (including EPID 590: Cancer Disparities; HSERV 590: Community-based participatory research; FAMED 557: Hispanic Health and Health Care Disparities; FAMED 525: African American Health and Health Disparity). In addition to the coursework offered by the SPH, the SPH and departments include aspects of cultural competency as part of their student orientations. SPH has joined other health sciences schools to choose a “Common Book” that all incoming students are expected to read. This year, the book focused on cultural competence in public health and has created opportunities for dialogue throughout the entire school year.

The SPH Curriculum and Educational Policy Committee and the departmental curriculum committees are responsible for the review, development, and maintenance of coursework and educational opportunities that address diversity, health disparities, and cultural competency. Each degree program has competencies related to these themes. As part of the implementation of the SPH Strategic Plan, the Diversity Committee, together with the MPH Curriculum Review Work Group, is currently reviewing the MPH curriculum to identify areas where cultural competency and diversity-related content are covered and/or could be improved. In addition, the SPH Office of Student Affairs strives to provide students with service-learning opportunities that will enable them to interact with diverse populations in a public health setting. This takes place through SPH-wide service days, regularly publicized volunteer opportunities and the MPH practicum experience.

1.8.A.vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.

The SPH Diversity Committee, as one of its first priorities, has developed a set of guidelines for faculty searches. These guidelines have been approved by the dean, department chairs, and the Faculty Council, and are now being used for all SPH faculty searches/recruitments. They are summarized below and included as ***Appendix 1.8.A.ii***.

1. Department chairs should determine whether women and racial/ethnic minorities are underrepresented on faculty at the departmental level, and set departmental priorities for hiring based on this information. Search committees should be made aware of departmental priorities prior to beginning the search.
2. New faculty should be hired using a deliberate search process, which should involve convening a search committee to review and recommend candidates.
3. Chairs should ensure diverse representation on search committees. Committees should include a minimum of one student.

4. Search committees should include recommended language regarding diversity in job advertisements (see figure below).
5. Search committees should market positions widely, including outreach to minority-serving institutions, professional organizations, and LISTSERVs. Committee members should make personal contact with diverse candidates.
6. Search committees should recruit candidates until applicant pool includes adequate representation from women and underrepresented minorities and reflects the hiring priorities of the department. The department chair will review the diversity of the pool of eligible candidates before candidates are asked to come for campus visits.
7. Search committees should consider diversity in their review of candidates and use selection criteria that include diversity-related teaching, research, and service experience. The Diversity Committee will provide examples of criteria, if needed.
8. Search committees should structure the interview process such that it ensures that candidates meet with a diverse group of interviewers and are made aware of diversity efforts within the SPH and on campus. Diversity committee members are available to meet with candidates during campus visits, if needed.
9. All searches that result in a potential offer must submit a diversity report to the office of the dean along with the draft offer letter for the dean's review and approval. The faculty diversity search checklist reporting form can be found in *Appendix 1.8.A.iii*.

LANGUAGE FOR JOB ADS

The UW School of Public Health is committed to a diverse academic community. We view diversity as essential to our mission, for more information please see the following website: <http://www.washington.edu/diversity/>.

The University of Washington is an Equal Opportunity Affirmative Action employer. The University is building a culturally diverse faculty and staff and strongly encourages applications from women, underrepresented minorities, individuals with disabilities, and protected veterans.

The University's Office of Equal Opportunity and Affirmative Action (EOAA) also reviews advertisements for new faculty openings prior to their submission for publication to ensure compliance with University, state, and federal regulations. There is a multi-tiered process for review of any advertisement for faculty openings to ensure that diversity goals are considered and regulations are met.

The University may make special recruitment and outreach efforts to increase the pool of qualified minority and women applicants, and schools and departments are expected to do so. Departments will continue to receive information regarding potential minority candidates. Recognizing that good recruitment efforts may incur additional costs, the provost's office may augment departmental funds for these purposes. Nondepartmental funds may be available to meet requirements of new hires.

In terms of retention, there are several affinity groups for diverse faculty and staff. All faculty are assigned mentors within their departments to help through the tenure and promotion process, including third-year reviews and annual reports. Department chairs also review workloads of their faculty to ensure that mentorship to underrepresented students and service to underrepresented communities are recognized in the tenure and promotion process. The Diversity Committee plans to review policies related to promotion and retention of diverse faculty and make recommendations as needed.

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

SPH is committed to recruitment and retention of a diverse staff. We view the recruitment, hiring, and retention of excellent and diverse staff as critical to academic excellence, and to the future of public health's efforts to promote health and eliminate health disparities. The priority of the Diversity

Committee has been to focus on the recruitment and retention of diverse faculty; however, the Committee plans to create a similar set of recommendations for hiring staff.

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

The SPH Office of Student Affairs recently hired a 50 percent FTE to focus specifically on recruitment and prospective student outreach, with an emphasis on diversity. This position, in partnership with staff and faculty within the SPH, as well as offices across campus, is in the process of developing a comprehensive plan to recruit and retain a diverse student population. Current efforts focus on the following:

- Assessing recruitment efforts that are currently underway within the SPH
- Networking with established University of Washington offices to include the SPH in diversity related recruitment efforts locally, regionally, and nationally
- Developing a SPH-specific outreach plan focused specifically on underserved minorities
- Updating existing and creating new marketing materials
- Establish pipelines with community colleges and high schools in the area

The SPH Diversity Committee is also committed to the retention and graduation of our diverse students; to this end, the Committee is seeking to establish more formal opportunities for student mentorship. Additionally, the Office of Student Affairs connects students to existing resources on campus that serve diverse students, including the Q Center, the Graduate Opportunities and Minority Achievement Program, and the Center for Experiential Learning and Diversity. In partnership, the Diversity Committee and the OSA is implementing a quarterly event series focused on various aspects of diversity and incorporating diverse voices.

1.8.A.ix. Regular evaluation of the effectiveness of the above-listed measures.

Evaluation of the policies and activities identified above is the responsibility of the Diversity Committee (described below), which will compile an annual Diversity Report, including quantitative metrics and an accounting of concrete efforts to “Improve our diversity” as outlined in the SPH Strategic Plan. This report will be presented to the dean, SPHEC, and Faculty Council and will include recommendations for needed action. In addition, as described in ***Criterion 1.2***, the annual departmental reports to the dean include substantial reporting requirements for describing diversity-related activities at the department level. A copy of the most recent report can be found in ***Appendix 1.8.A.iv***.

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

As mandated by the SPH Strategic Plan, a standing SPH Diversity Committee was created in March 2012. This committee replaced the SPH’s Diversity Task Force and was given a broader and clearer mandate, as described above. This 18-member group of students, staff, and faculty includes representation from each department, as well as the dean’s office. This group has been charged with developing and advocating for policies and initiatives that will improve the diversity of the SPH community. The Committee reports to the dean of the School of Public Health and is responsible for mobilizing students, staff, and faculty to support and implement such policies and initiatives. The by-laws and committee charge are included as ***Appendix 1.5.A.vi***.

The first priority of the committee has been the development of stronger policies to ensure that faculty searches are conducted in a manner to maximize the diversity of the applicant pool, as described in ***Criterion 1.8.A.vi*** above. In the past several years, searches for faculty in the SPH have utilized a predecessor of the current guidelines, the “Faculty Advancement Recruitment Toolkit” that was developed by the previous Diversity Task Force. In the past two years, 14 of the 26 new faculty hires

were from diverse backgrounds.

In response to strong student interest, a student subcommittee has been formed to discuss and address student needs and concerns related to diversity. The subcommittee leaders report to the Diversity Committee at its monthly meetings.

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

The overall plan for “Improving our diversity” was established through broad input from all SPH stakeholders during the 2011-12 strategic planning process (described in ***Criterion 1.1***). The SPH Diversity Committee is charged with determining priorities and establishing a work plan to implement the Strategic Plan.

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

The Diversity Committee is the focal point for diversity planning, implementation, and monitoring of diversity improvement efforts in the SPH. In this work, the Diversity Committee is guided by the UW Diversity Blueprint and the SPH Strategic Plan. ***Criterion 1.8.A.ix***, above, describes the evaluation procedures that have been established to monitor planning, activity, and progress. The special assistant to the dean also regularly monitors progress on the implementation of this goal—as well as all other goals—of the SPH Strategic Plan (<http://sph.washington.edu/strategicplan/implementation.asp>).

1.8.E. Identification of measurable objectives by which the school may evaluate its success in achieving a diverse complement of faculty, staff, and students, along with data regarding the performance of the program against those measures for each of the last three years. CEPH Data Template 1.8.1. At a minimum, the school must include four objectives, at least two of which relate to race/ethnicity. Measurable objectives must align with the school’s definition of under-represented populations in Criterion 1.8.a.

Table 1.8.E (CEPH Data Template 1.8.1) summarizes the trends in achieving a diverse complement of faculty, staff, and students.

Table 1.8.E. Diversity Indicators (CEPH Data Template 1.8.1)

Indicator	Method of Collection/ Data Source	Target	2009-10	2010-11	2011-12
Students* from underrepresented groups	Self-report/UW Data Warehouse	23.8%**	8.0%	9.2%	9.5%
International students*	Self-report/UW Data Warehouse	15%	13.5%	11.2%	9.3%
Faculty from underrepresented groups	Self-report/UW Data Warehouse	23.8%**	7.1%	7.9%	7.9%
Staff from underrepresented groups	Self-report/UW Data Warehouse	23.8%**	10.8%	10.7%	9.8%
Full professors who are women	SPH Faculty Database	50%	32%	29%	31%

*Does not include undergraduates

**Percent of underrepresented ethnic and racial groups in Washington State

1.8.F. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- At all levels, the University and the SPH support improving diversity composition and climate.
- Improving diversity is one of seven goals articulated in the 2012-2020 SPH Strategic Plan.
- SPH has an energetic Diversity Committee with representation by faculty, students, and staff from throughout the SPH.
- The hiring of diverse faculty has improved in the past two years.
- New policies and procedures are in place to promote more vigorous searches for diverse faculty hire, including a diversity report that has to be filed with the dean's office for all faculty searches that results in an offer.
- The dean requires an annual accounting from the chairs on the efforts made in their departments to increase the diversity of students, staff, and faculty, improve the diversity climate, and enhance the curricular content related to culture, inequities, and health disparities.
- The UW Office of Disability is one of the leaders in the field.

Weaknesses/Challenges

- As illustrated by the data in *Table 1.8.E.*, the SPH is far from meeting its targets for a diverse faculty.
- There has not been a careful review of how diversity and health inequities are examined and treated in courses taught by all departments in the SPH.
- SPH lacks resources to make attractive recruitments for diverse faculty and students.

Plans

- The SPH Diversity Committee now reports annually to SPHEC on issues, accomplishments, policies, recommendations, and initiatives to enhance diversity in the SPH.
- In collaboration with the SPH Curriculum and Educational Policy Committee, the Diversity Committee will strengthen diversity within the SPH's curricula, including material and methodologies for understanding and addressing socioeconomic status, class, race, and other social determinants of health.
- The SPH will use teaching systems such as Tegrity (video lecture capture software) to help students with hearing handicaps.
- The Diversity Committee will develop and implement recruitment policies and measurable goals that ensure searches produce diverse applicant pools. The Diversity Committee will also develop and implement initiatives for mentoring and retention of underrepresented minority faculty, staff, and students.
- The Diversity Committee will work to create and sustain a welcoming climate for diverse faculty, staff, and students. The Diversity Committee will also develop and implement activities including ongoing professional development for faculty and staff so that they can provide such a climate for students and for each other, and build an environment that is welcoming and accessible for all people and cultures.
- The leadership of the SPH will continue to raise financial resources to recruit and retain faculty and students from diverse and/or disadvantaged backgrounds.

This criterion is partially met.

CRITERION 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 masters degree in at least the five areas of knowledge basic to public health. The school may offer other degrees, professional and academic, and other areas of specialization, if consistent with its mission and resources.

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

The SPH offers a wide range of professional and academic degrees. These are listed in *Table 2.1.A. (CEPH Template 2.1)* and summarized below.

Undergraduate degrees

The SPH offers three undergraduate degree programs: BS in Environmental Health, BA or BS in Public Health, and BS in Health Informatics and Health Information Management. The Department of Global Health sponsors an undergraduate minor.

Professional degrees:

MPH: The Master of Public Health is offered in the five core areas: Biostatistics, Environmental and Occupational Health Sciences, Epidemiology, Health Services, and Social and Behavioral Sciences (which is administered through the Department of Health Services). In addition, the SPH provides opportunities for pursuing an MPH in several subspecialty areas: maternal and child health, global health, nutritional sciences, public health genetics, and other sub-specializations as indicated in *Table 2.1.A.* The SPH offers one option for an executive (part-time/part distance) MPH program: the Executive MPH (eMPH) administered through the Department of Health Services.

MHA: The SPH also administers a Master of Health Administration (MHA) degree. This degree, offered in both in-resident and executive formats, is formally in the Graduate School's interdisciplinary group structure. Nevertheless, the administrative responsibility, the academic leadership, and the majority of faculty for these programs are housed in the SPH's Department of Health Services.

Master of Health Informatics and Health Information Management (MHIHIM): In Autumn quarter 2013, the SPH will offer a new 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 management systems, and integrate health data and electronic health records.

Academic degrees:

The SPH offers Master of Science (MS) and doctorate degrees (PhD) through the Departments of Biostatistics, Environmental and Occupational Health Sciences, Epidemiology, Global Health, and Health Services, as well as through the interdisciplinary programs in Nutritional Sciences and Public Health Genetics. SPH also offers (within the Department of Global Health) a PhD program in Pathobiology.

Concurrent (joint) degree programs

In response to interest from colleagues and students in other UW schools, SPH has created a large number of concurrent (joint) degree programs with other schools/colleges of the University: Arts and Sciences (Anthropology), Business, Dentistry, International Affairs, Law, Medicine, Nursing, Public Affairs, and Social Work. The concurrent programs are administered by specific departments in the SPH, as indicated in the *Table 2.1.A*.

Certificate programs

The SPH offers a large number of Certificate Programs, both for-credit and not-for-credit. These are described in *Criteria 3.3.C*.

Residency programs

The SPH participates in an Occupational and Environmental Medicine and Preventive Medicine residency programs for physicians.

Table 2.1.A. Instructional matrix (CEPH Template 2.1.1)

Bachelor's Degrees		
Environmental Health	BS	
Health Informatics and Health Information Management	BS	
Public Health	BA or BS	
Global Health Minor	Minor	
Master of Public Health (MPH)		
Department/Program: Track	Academic	Professional
Biostatistics		X
DEOHS: Environmental and Occupational Health		X
DEOHS: Environmental and Occupational Health/Occupational Medicine Residency		X
Epidemiology: General Track		X
Epidemiology: Global Health Track		X
Epidemiology: Maternal and Child Health Track		X
Global Health: General Track		X
Global Health: Health Metrics and Evaluation Track		X
Global Health: Leadership, Policy, and Management Track		X
Global Health: Peace Corps International Track		X
Health Services: Executive MPH (eMPH)		X
Health Services: General Track		X
Health Services: Community-Oriented Public Health Practice		X
Health Services: Health Systems and Policy		X
Health Services: Maternal and Child Health		X
Health Services: Social and Behavioral Sciences		X
Nutritional Sciences: Public Health Nutrition		X
Public Health Genetics: Public Health Genetics		X
Master of Health Administration (MHA)		
Master of Health Administration: In-Residence Program		X
Executive Master of Health Administration (EMHA)		X
Master of Health Informatics and Health Information Management (MHIHIM)		
Master of Health Information & Health Information Management (enrollment begins Autumn 2013)		X
Master of Science (MS)		

Biostatistics: General Track	X	
Biostatistics: Clinical Research Track	X	
DEOHS: Environmental Health	X	
DEOHS: Occupational and Environmental Exposure Sciences	X	
DEOHS: Toxicology	X	
Epidemiology: Clinical Research	X	
Epidemiology: Epidemiology	X	
Health Services: Health Services	X	
Health Services: Clinical Research	X	
Nutritional Sciences: Nutritional Sciences	X	
Public Health Genetics: Genetic Epidemiology	X	
Doctor of Philosophy (PhD)		
Biostatistics: Biostatistics	X	
Biostatistics: Statistical Genetics Track	X	
DEOHS: Environmental and Occupational Hygiene	X	
DEOHS: Toxicology	X	
Epidemiology: Epidemiology	X	
Global Health: Implementation Track	X	
Global Health: Metrics Track	X	
Global Health: Pathobiology	X	
Health Services: Health Services	X	
Nutritional Sciences: Nutritional Sciences	X	
Public Health Genetics: Public Health Genetics	X	
Concurrent (Joint) Degrees*		
Anthropology (with Epidemiology, Global Health, Health Services)		PhD/MPH
Business (with Health Services MHA program)		MBA/MHA
Dentistry (with Epidemiology and Health Services)		MSD/MPH
Health Administration (intra SPH with Health Services)		MHA/MPH
International Affairs (with Epidemiology and Global Health)		MAIS/MPH
Law (with Global Health, Health Services, and Public Health Genetics)		JD/MPH
Law (with Health Services MHA Program)		JD/MHA
Medicine (with Biostatistics, DEOHS, Epidemiology, Global Health, Health Services, and Pathobiology)	MD/PhD	
Medicine (with Epidemiology, Global Health, and Health Services)		MD/MPH
Medicine (with Health Services MHA program)		MD/MHA
Molecular and Cellular Biology (with Epidemiology)	PhD/MS	
Nursing (with Global Health and Health Services)		MN/MPH
Public Affairs (with DEOHS, Epidemiology, Global Health and Health Services)		MPA/MPH
Public Affairs (with DEOHS and Epidemiology)	MPA/MS	
Public Affairs (with Health Services MHA program)		MPA/MHA
Social Work (with Global Health and Health Services)		MSW/MPH
Veterinary Medicine (Washington State University and EMPH program, by individual arrangement)		DVM/MPH

*MSD=Master of Science in Dentistry; MAIS = Master of Arts in International Studies; MN=Master of Nursing; MPA=Master of Public Administration

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

The SPH *Academic Programs Catalog*, which provides an overview of the SPH's programs, appears in *Appendix 2.1.B.* and can be found on the SPH's website at: <http://sph.washington.edu/publications/catalog.asp>.

Additional information for prospective students may be found online at the corresponding department or program website as listed in the table below. The publications of the departments and programs (tracks), including comprehensive descriptions of their curricula, are available at the following websites:

Undergraduate programs	http://sph.washington.edu/prospective/ug_programs.asp
Public Health undergraduate major	http://sph.washington.edu/uph/
Environmental Health major	http://deohs.washington.edu/academics/undergraduate
Health Information and Information Management	http://depts.washington.edu/hihim/

Graduate Programs	http://sph.washington.edu/prospective/graduate.asp
Biostatistics	http://www.biostat.washington.edu/pro
Environmental and Occupational Health Sciences	http://deohs.washington.edu/prospective-students/graduate-program
Epidemiology	http://depts.washington.edu/epidem/adm/
Global Health	http://globalhealth.washington.edu/students-alumni/prospective-students
Health Services	http://depts.washington.edu/hserv/prospective
Health Administration	http://depts.washington.edu/mhap/
Maternal and Child Health	http://depts.washington.edu/mchprog/about
Nutritional Sciences	http://depts.washington.edu/nutr/prospective.html
Pathobiology	http://globalhealth.washington.edu/pabio
Public Health Genetics	http://depts.washington.edu/phgen/index.shtml

2.1.C. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH offers a wide range of undergraduate and graduate-level professional and academic degree programs.
- The SPH offers MPH programs in each of the five core areas of knowledge basic to public health, as well as in a number of other public health specialties.
- The SPH also offers a graduate professional degree in Health Administration and will be adding a Master of Health Information & Health Information Management in autumn 2013.
- The SPH offers part-time MPH and MHA degrees for mid-career working professionals.
- The SPH offers PhD degree programs in each of the five core areas of knowledge basic to public health (a PhD in the areas of social and behavioral sciences can be pursued as a concentration in the Health Services PhD).
- The SPH collaborates with other UW schools and departments to provide a large number of concurrent degree programs.

Weaknesses/Challenges

- The large number of degree, concurrent degree, and certificate programs offered by the SPH can be confusing to potential applicants.

Plans

- Continue to enhance the SPH's website to help potential applicants understand the SPH's offerings and choose the program(s) best suited to their needs and interests.
- Continue to expand and improve the SPH's professional and academic programs to meet the changing needs and opportunities in the field.
- Continue to develop innovative programs to meet the evolving educational needs of the field.

This criterion is met.

2.2 PROGRAM LENGTH

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

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

The University of Washington School of Public Health, consistent with the rest of the campus, schedules classes on the “Quarter System.” Quarters have an instructional period of 10 weeks. A “credit” is equivalent to 1 contact hour per week, or 10 contact hours per quarter. The general expectation is that for each contact hour, students will spend two to three hours out of class reading, studying, preparing assignments, etc. Therefore, a student enrolled in a 3-credit course would usually spend 30 hours in class and 60-90 hours working outside of class on the course. For courses that do not have formal in-class sessions (e.g., thesis work, fieldwork, etc.), the expectation is that the student will devote between 30 and 40 hours per credit per quarter on the course.

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

All Master of Public Health (MPH) degrees require a minimum of 63 (quarter) credits. The Master of Administration (MHA) degree, in-residence and executive versions (EMHA), require a minimum of 72 and 68 (quarter) credits, respectively.

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

All SPH MPH programs require a minimum of 63 quarter credits (equivalent to 42 semester credits). The SPH has not awarded any MPH degrees to any student who took fewer than 63 quarter credits in the past 3 years.

2.2.D. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- SPH meets the requirements of the Council on Education for Public Health for program length.

Weaknesses/Challenges

- None.

Plans

- None.

This criterion is met.

2.3 PUBLIC HEALTH CORE KNOWLEDGE

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

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

All students enrolled in MPH degree programs are required to take a course in each of the five core public health areas as defined by CEPH. All departments have an introductory course that meets the requirement for the MPH core knowledge areas.

- Biostatistics 511
- Environmental and Occupational Health 511
- Epidemiology 511
- Health Services 510 (Social and Behavioral Sciences)
- Health Services 511

For in-residence students, there are several options for meeting these requirements (*Table 2.3.A.i.*). These options are either more advanced courses (e.g., Epidemiology 512 and 513 substituting for Epidemiology 511) or courses that are designed to be more relevant for certain MPH majors (e.g., Global Health 511 for Health Services 511).

Students in the Executive MPH (eMPH) have alternative choices in some areas.

The Community-Oriented Public Health Practice (COPHP) has an integrated two-year series of problem-based learning modules that address all five core areas. These modules are organized as indicated in *Appendix 2.3.A.*

All MPH students are required to undertake a practicum, as described in *Criterion 2.4.* In addition, all MPH students conduct a culminating project, as described in *Criterion 2.5.*

Table 2.3.A. Core public health knowledge courses: MPH (CEPH Data Template 2.3.1)

Core knowledge area	Track	Course number and title	Credits
Biostatistics	All	BIOST 511 – Medical Biometry	4
		OR	---
		BIOST 508 – Biostatistical Reasoning for the Health Sciences	4
		OR	---
		BIOST 517 – Applied Biostatistics I and BIOST 518 – Applied Biostatistics II*	4 4
EMPH	BIOST 502 – Introduction to Statistics in Health Sciences and BIOST 503 – Application of Statistics to Health Sciences	4	
		1-3	
COPHP	HSERV 591 (q2)** – Biostatistics and HSERV 592 – COPHP Biostatistics Lab	3	
		1	
Epidemiology	All	EPI 511 – Introduction to Epidemiology	4
		OR	---
		EPI 512 – Epidemiologic Methods I and EPI 513 – Epidemiologic Methods I*	4 4
		COPHP	HESERV 591 (q2+q5)** – Epidemiology
Environmental Health Sciences	All	ENVH 511 – Environmental and Occupational Health	3
		ENVH 510 – Global Environmental and Occupational Health	4
		COPHP	HSERV 591 (q4)** – Environmental Health Science & Policy
Social and Behavioral Sciences	All	HSERV510 – Society and Health	3
		EMPH	HSERV 577 – Health Behavior and Preventive Medicine
	COPHP	HSERV 591 (q1)** – Community Development and HSERV 591 (q3)** – Health Behavior and Health Promotion	3
			4
Health Services Administration	All	HSERV 511 – Introduction to Health Services and Global Health	3-4
		Glbl Hlth	GH 511 – Problems in Global Health
	COPHP	HSERV 591 (q1)** – Communities and Systems and HSERV 591 (q4 and 5)** – Health Policy	3
6			

*Advanced Option

**The COPHP core curriculum is a two-year, integrated six-quarter (q) sequence of six 6-credit courses: HSERV 591 (q1-q6). Although this is an integrated curriculum, each quarter concentrates on different core areas of knowledge using a problem-based learning (PBL) pedagogy (See *Appendix 2.3.A*).

2.3.B. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- All MPH students have well-defined requirements to assure fundamental competence in the areas of knowledge basic to public health. In-resident MPH students have options for fulfilling these requirements.
- For some programs, course requirements to ensure fundamental competence in the areas of knowledge basic to public health have been crafted to be relevant to their major field of interest (e.g., public health practice, global health).
- SPH Curriculum and Educational Policy Committee (CEPC) is responsible for overseeing the MPH programs and ensuring that all programs adequately address the areas of knowledge basic to public health. The CEPC must approve any substitutions for the required courses.
- CEPC defines and approves the expected core competencies for the MPH programs.

Weaknesses/Challenges

- Students who enter the MPH programs vary in their prior education and work experience, which makes it harder to create standard core courses that fit everyone's learning goals.

Plans

- Continue to coordinate and monitor the equivalency of alternative courses that address the core public health areas of knowledge to ensure they adequately address the expected MPH core competencies.

This criterion is met.

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.

2.4.A. Description of the school's policies and procedures regarding practice experiences, including the following: selection of sites, methods for approving preceptors, opportunities for orientation and support for preceptors, approaches for faculty supervision of students, means of evaluating student performance, means of evaluating practice placement sites and preceptor qualifications, criteria for waiving, altering or reducing the experience, if applicable

All MPH students must complete a 120- to 240-hour practicum. Students may elect to complete as many as 6 credits (240 hours) for their practicum, and students in the Community Oriented Public Health Practice (COPHP) and Nutritional Sciences Programs are required to do so. The Practicum for most students is overseen by the assistant director of Student Affairs. In addition, several programs in the SPH (e.g., COPHP, Nutritional Sciences, Public Health Genetics) have designated faculty who take responsibility for organizing practicums for their students, and the student services staff of the various programs/tracks may also assist MPH students in finding practicums and faculty advisors. The Practicum Steering Committee establishes policy for all practicums in the SPH and supports the assistant director of Student Affairs in her role as the SPH Practicum Coordinator. A summary of the MPH Practicum policies and procedures is given below and is also available in the Practicum Syllabus (*Appendix 2.4.A.i*). Full policies and procedures for the practicum are described in the MPH Practicum Program Handbook, updated in February 2013 (*Appendix 2.4.A.ii*).

Goal and learning objectives

The **goal** of the practicum is to provide students an opportunity to apply the knowledge and skills being acquired through their courses of study in a planned, supervised, and evaluated practical experience. These opportunities can take place in a variety of agencies and organizations, including local and state public health agencies, as well as local, state, national, and international nongovernmental agencies and organizations.

The **learning objectives** for the Practicum are designed to move students toward mastery of the generic MPH competencies and, also, to focus their practicum on achieving specific learning objectives of importance to each individual student. The student's learning contract articulates the ways in which the following learning objectives are incorporated into their practicum project.

The generic **learning objectives** of the MPH Practicum are to:

- Describe and discuss the role, structure, functions, budget, funding, and culture of the hosting organization.
- Describe and discuss the demographics of the population(s) served by the agency and the potential impact of the practicum on that population.
- Describe and discuss the public health issue addressed by the practicum project.
- Demonstrate evidence-based rigor in the application of public health problem solving skills.
- Demonstrate an ability to work as a member of a team.
- Communicate effectively with professional colleagues, clients, and/or community groups.
- Demonstrate cultural competence to the degree possible and appropriate in the context of the student's specific practicum experience.

In addition, when preparing the learning contract (*Appendix 2.4.A.iii*) for the practicum, each student, together with her/his advisor, defines *individualized learning objectives* describing the specific knowledge and skills that the student hopes to gain from the practicum experience.

Selection of sites

The SPH has recently hired a new assistant director of Student Affairs who is charged with providing more structure and strengthening the learning experience afforded by the practicum. As one of her priorities she is enhancing the outreach processes to potential sites in order to better connect students to practicum opportunities. The practicum office maintains web postings of all past and potential sites for students to review as they think about starting their practicum. Potential sites and site supervisors are currently identified in several ways:

- The assistant director of Student Affairs has begun seeking out and building new relationships with potential sites.
- We have initiated a “practicum brown bag” series which affords sites the opportunity to spend an hour on campus speaking with interested MPH students.
- Contacts within the practice community also notify the SPH Practicum Office about practicum opportunities and work with the Assistant Director to craft appropriate position descriptions.
- Students frequently find community sites through their faculty advisors, in addition to on their own, that are well matched to their professional and academic interests.
- The Northwest Center for Public Health Practices is also a valuable asset for identifying agencies and projects for student practicum.

Criteria for site selection are:

- The practicum site must provide an opportunity for the student to develop further and apply specific skills or competencies learned in the academic program (e.g., assessment, program planning, evaluation, management, data analysis, policy development, etc.).
- The site must provide a supervisor who is willing and able to spend regularly scheduled time with the student and provide guidance. In addition, the site supervisor should have a population health perspective and be qualified to evaluate the professional competency of the student.
- The site should afford the student regular contact with public health practitioners.
- The site supervisor should exhibit a willingness to increase student responsibility and independence gradually over the duration of the practicum experience.
- The site must provide appropriate logistical support, such as a workspace, access to a computer, phone, and/or photocopying.

Whenever possible, the assistant director of Student Affairs or a representative from her/his program visits potential practicum sites to establish rapport and discuss expectations related to hosting an MPH student. After a site has been identified, the SPH’s standard affiliation agreement is completed by representatives of the practicum site (*Appendix 2.4.A.iv*). The assistant director of Student Affairs, sometimes in collaboration with the faculty from specific programs (e.g., COPHP, Nutritional Sciences, etc.) maintains descriptions of all approved practicum opportunities. Students may review these descriptions to select potential practicum sites or may propose alternate sites, which must be approved by the faculty adviser.

Methods for approving preceptors

For many of our practicum sites we have longstanding relationships with the site supervisors and have witnessed their prior success as practicum mentors. In addition, many practicum preceptors are alumni of our MPH programs. For new relationships we generally expect the practicum site supervisor to have a minimum of a master’s degree in a relevant discipline. This requirement is to assure that the site supervisor can adequately mentor and evaluate our students at a professional level. The supervisor’s professional and academic credentials are noted on the student’s learning contract and reviewed by the Assistant Director of Student Affairs. (The COPHP, Nutritional Sciences, and Public Health Genetics MPH programs designate faculty who assist in the approval of practicum sites and preceptors.)

Orientation and support for preceptors

The general expectations and responsibilities of the site and site supervisor are delineated in the Site Supervisors Handbook (<http://sph.washington.edu/practicum/files/SiteSupervisorHandbook.pdf>) (*Appendix 2.4.A.v*). The learning contract requires that the student also articulates individual learning objectives for her/his practicum. Additionally, we provide in-person site supervisor orientation upon request. The assistant director for Student Affairs and the student's faculty advisor are expected to clarify expectations, identify needed resources, and solve problems prior to the student's beginning the practicum or during the practicum, as needed.

Approaches for faculty supervision of students

Each student must select a faculty advisor for his/her practicum. In some programs (e.g., Nutritional Sciences, Executive MPH) a single designated faculty member serves as the advisor for all practicums. The faculty adviser helps the student develop the learning contract/objectives and reviews and signs the contact prior to the field placement. The faculty advisor ensures that the field placement negotiated by the student and the site is appropriate and that it meets department and program requirements and monitors the progress of the project with the student and site supervisor. Additionally, the faculty advisor is responsible for notifying the assistant director for Student Affairs if there are problems with a particular agency or site supervisor so that issues may be dealt with expeditiously. The faculty advisor is also responsible for evaluating the quality of the experience, and reviewing the site supervisor's evaluation of the student (see section below) and the written assignment and poster presentation. The faculty advisor authorizes academic credit upon satisfactory completion.

Means of evaluating student performance

Site supervisors complete a formal evaluation form for each student (*Appendix 2.4.A.vi*). This evaluation addresses the student's professional habits and behavior, communication skills, and performance. In addition the site supervisor is asked to comment on the student's mastery of the learning objectives identified at the start of the practicum in the learning contract. The faculty advisor reviews the student's practicum report and assesses the degree to which the student has mastered both the generic and individual learning objectives for the student's practicum. Finally, the student is asked to self-assess the learning and professional growth that has occurred during the practicum.

In addition, the student completes a written assignment (see <http://sph.washington.edu/practicum/assignment.asp> for guidelines) and creates a poster presentation describing the context, objectives, methods, and results of the practicum project.

Means of evaluating practice placement sites and preceptor qualifications

Students assess their practicum experience as part of their written assignment; however, we are developing a new form for the student evaluation of their practicum experience. This form is meant to solicit evaluative information about the quality of the experience and mentorship from the student's perspective (i.e., "Would you recommend this site to another student for their practicum?"), as well as information about the site and the site supervisor. These evaluations will assist the assistant director of Student Affairs advising future students and/or in providing special assistance to sites.

Criteria for waiving

Students requesting a general waiver of the practicum must have a minimum of three years of population-based public health experience under the supervision of a master's level supervisor. Students must have documentation of "experience in application of basic public health concepts and of specialty knowledge to the solution of community health problems." Because the practicum is supposed to provide an opportunity for students to apply public health concepts in a practice setting, students who want to waive the practicum must demonstrate that they have done this previously through a supervised and evaluated experience. Furthermore, to waive the practicum, the student must document that he/she has achieved the

explicit learning objectives of the practicum (see above).

Students must obtain the MPH Practicum Waiver Application from the assistant director of Student Affairs and submit it and supporting materials (*Appendix 2.4.A.vii*) within the first two quarters of their program. The Practicum Steering Committee reviews the application and makes a decision about the waiver request within one month, but may, in some cases, invite the student to a panel-style interview to answer questions about the experiences that are being proposed as a substitute for the Practicum.

Community-Oriented Public Health Practice (COPHP) Practicum

COPHP is a distinct MPH program within the department of Health Services for students who want to pursue a career in community-based public health practice. The COPHP practicum is a six-credit experience (two credits per quarter over three quarters) during the student's first year and has comparable learning objectives as described above. The purpose of the practicum during the first year of the COPHP program is to provide students an opportunity to practice application of their classroom learning within a local health department. The student is expected to function in roles both as a student and practitioner within the health department. The student applies the theory, knowledge, and skills being learned in the classroom during the first year of her/his MPH studies. Field experience is considered to be service-learning and therefore students are expected to make a substantive contribution to the work of the health department within the limits of their responsibility and authority. The result is a service-learning experience that should be of mutual benefit to the health department, the student, the University and, most importantly, the community served by the health department.

During the first year, the COPHP Practicum consists of two modules, the Practicum Seminar and the Practicum Field Experience. The Practicum Seminar is an autumn quarter course that is designed to provide the student with selected skills that will contribute to a successful field experience and an enhanced knowledge base about Public Health—Seattle & King County (including its structure, functions, and the communities it serves). This knowledge enables the student to both learn and serve more effectively in the Practicum Field Experience offered during the winter and spring quarters of the first year.

The second module, Practicum Field Experience, begins during the winter quarter and continues through the spring quarter of the first year. In this course, students are matched to a project or program within Public Health—Seattle & King County, with supervision from a Public Health—Seattle & King County employee who is also a clinical faculty member at the University. The faculty member is responsible for ensuring that the student's site supervisor is well versed in the learning objectives of the practicum before they mentor a student. The student's faculty advisor collaborates with the site supervisor to provide supervision, consultation, and expert assistance to the student as appropriate. Public Health—Seattle & King County has served as the field experience site for the first year due to its long history of collaboration with the University and because it is an outstanding example of a large community-oriented public health agency. Working in a single, yet large and diverse, agency provides the students with a common field experience problem during the first quarter and a common practice model for applying learning from the problem-based learning curriculum during the first year.

Occupational Medicine Residency Practicum

Occupational Medicine Residents have substantial field experience/practicum requirements that far exceed what is expected of other MPH students in time commitment, supervision, and rigor. The total time in these field experiences is 12 months, although approximately half that time is devoted to patient-care-oriented learning.

The goals of the Occupational Medicine Residency Practicum are to:

- Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement.

- Locate, appraise, and assimilate evidence from scientific studies.
- Participate in the education of patients, families, students, residents, and other health professionals.
- Work effectively as a member or leader of a health care team or other professional group.
- Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.
- Work effectively in various health care delivery settings and systems relevant to their clinical specialty.
- Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate.
- Advocate for quality care systems.
- Work in interprofessional teams to enhance patient safety and improve patient care quality.
- Participate in identifying system errors and implementing potential systems solutions.

Residents work in the following off-site settings:

- Boeing Company
- Veterans Administration Puget Sound
- Work Clinic
- Group Health Cooperative
- Valley Medical Center Occupational Medicine Clinic
- Central Washington Occupational Medicine Clinic
- Washington Department of Labor and Industries
- Washington Poison Center
- International health agencies involved in worker protection

Preventive Medicine Residents

By arrangement with the U.S. Army, the SPH (among other schools of public health in the country) provides the academic course work for a small number of preventive medicine residents from the Public Health (PH) Residency Program of Madigan Army Medical Center, most of whom also pursue an MPH degree as part of their program. An extensive practicum year of their training occurs at Madigan Army Medical Center, located at Fort Lewis, WA, and is accepted as fulfilling the practicum requirement for the MPH (see section below).

Concurrent students

Concurrent (joint) students from the School of Medicine, the School of Social Work, and the School of Public Affairs are permitted to substitute their practicum/fieldwork requirements for the usual SPH practicum because 1) these experiences address the learning objectives of the SPH practicum, 2) the students are closely supervised and evaluated, and 3) the fieldwork requirements are far more extensive in terms of time and effort than the requirements for the SPH practicum. The fieldwork courses for these three schools are summarized in ***Appendix 2.13.B***.

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

The SPH faculty believe that a wide range of organizations and agencies can provide a valuable field experience for students. In general, any organization that provides, plans for, coordinates, organizes, pays for, or regulates public health services is a valid training site. In the past two years MPH students have conducted their practicums in over 125 sites. These have ranged from placements with clinics and

administrative departments with local health departments to international placements in South America or Africa. MPH practicum sites for students are listed in *Appendix 2.4.B*.

Some examples of practicum sites are:

- Federal agencies: Department of Health and Human Services, Department of Veterans Affairs, Occupational Safety and Health Administration
- State, county, or city health departments
- Other state and local health and social service agencies
- Managed care organizations
- Neighborhood health centers and community clinics
- Hospitals (public, not-for-profit, for-profit, psychiatric, rehabilitation)
- Community mental health centers
- Environmental health consulting companies
- Industrial settings
- Nongovernmental organizations
- Government clinics and hospitals in low-income countries

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

Students requesting a waiver must have a minimum of two years of substantial experience in application of basic public health concepts, skills, and knowledge. If a student can show that specialty knowledge acquired in their departmental program has been applied previously in a supervised field context using a population approach to health problems, a waiver will be considered. In 2012, more stringent criteria for waivers, described in *Criterion 2.4.A*, were implemented.

Number of Waivers Granted by Year

2010: 19 2011: 16 2012: 3

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

The UW SPH does not have a preventive medicine residency program, but provides the MPH training for Preventive Medicine Residents from Madigan Army Medical Center. We have graduated two Madigan Preventive Medicine Residents in the past three years.

“During this [practicum] year, residents gain a broad experience in applying the tools of public health to address current public health issues. Residents manage the influenza, rabies, tuberculosis, and other communicable disease control programs; support the Fort Lewis Tobacco Cessation Program; investigate and report sentinel diseases; provide travel medicine services; and provide education to commanders, soldiers, health care workers, and other beneficiaries on various public health programs. Residents gain extensive experience in occupational and environmental medicine. Each resident completes an in-depth epidemiologic research project, and usually presents findings at a national meeting.”

(<http://www.mamc.amedd.army.mil/preventivemed/phrp-training.htm>)

We participate in an Occupational Medicine Residency program that is run in coordination with the Occupational and Environmental Medicine Program in the Department of Environmental and Occupational Health. In the past three years, seven students have completed the UW Occupational Medicine Residency. Their practicum experiences are summarized in *Table 2.4.D*, below.

Table 2.4.D. Practicum rotations for UW Occupational Medicine Residents (2010-2012)

Graduating year	Rotations
2010: Graduate 1	<ul style="list-style-type: none"> • Central Washington Occupational Medicine Clinic • Group Health Cooperative • Valley Medical Center Occupational Medicine Clinic • Veterans Administration Puget Sound • Poison Center • Work Clinic at Highline Community Hospital
2010: Graduate 2	<ul style="list-style-type: none"> • Group Health Cooperative • Valley Medical Center Occupational Medicine Clinic • Brunei Ministry of Health • Veterans Administration Puget Sound • Poison Center • Work Clinic at Highline Community Hospital
2010: Graduate 3	<ul style="list-style-type: none"> • Washington Department of Labor and Industries • Group Health Cooperative • Valley Medical Center Occupational Medicine Clinic • Veterans Administration Puget Sound, • Poison Center • Work Clinic
2011: Graduate 1	<ul style="list-style-type: none"> • Valley Medical Center Occupational Medicine Clinic, • Group Health Cooperative • Work Clinic at Highline Community Hospital, • Washington Department of Labor and Industries
2012: Graduate 1	<ul style="list-style-type: none"> • Brunei Ministry of Health • New Zealand Accident Compensation Corporation (government) • Occupational Safety and Health Administration • Valley Medical Center Occupational Medicine Clinic • Veterans Administration Puget Sound
2012: Graduate 2	<ul style="list-style-type: none"> • Work Clinic • Veterans Administration Puget Sound • Group Health Cooperative • Poison Center • Washington Department of Labor and Industries, • Valley Medical Center Occupational Medicine Clinic
2012: Graduate 3	<ul style="list-style-type: none"> • Brunei Ministry of Health • Veterans Administration Puget Sound • Poison Center • Cambodia Ministry of Health • Vietnam Ministry of Health • Occupational Safety and Health Administration • Boeing

2.4.E. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- A wide variety of practicum experiences are pursued by MPH students in all departments.
- SPH has agreements with more than 100 community agencies, including local, state, and international agencies, for student practicum and research activities. (Students are also free to find additional sites for extramural academic pursuits.)

- We have recently developed an enhanced waiver protocol.
- We have developed new relationships with other professional schools at the UW whose experiences have been integral in helping us restructure our practicum program.

Weaknesses/Challenges

- The practicum program at SPH is in transition. Although we have been able to provide our students with ample practicum opportunities in the past, our current process is working to improve the logistics of the practicum and to enhance the experience so that it is a cornerstone of the student's learning.
- The past waiver policy did not conform to CEPH's expectations.

Plans

- We are simplifying practicum processes and paperwork for students, faculty, and site supervisors.
- We are conducting a needs assessment to determine which software tools (e.g., web-based forms management and database) might best enhance the student learning experience and allow for better program management.
- We have revised the practicum learning objectives and requirements to make it a more effective and relevant educational experience for all MPH students regardless of department, program, or student background.
- We are developing a practicum evaluation form for students to provide feedback on their experiences, sites, and site supervisors.
- We are working to enhance our outreach to community organizations by networking locally and at conferences in order to create more and better opportunities for our students seeking practicum sites.
- We are designing better training tools for site supervisors who wish to host our students.
- We are welcoming agency reps to campus for "Lunch and Learn" sessions, where students and potential supervisors can meet one another in an informal setting.
- We plan to coordinate our career services and alumni relations efforts with the practicum so that the practicum can become a launching pad and networking tool for our students as they prepare for graduation.

This criterion is partially met.

2.5 CULMINATING EXPERIENCE

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

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

MPH Program

All MPH programs require a culminating experience.

Master's Thesis

Most of the MPH degree tracks require a master's thesis. The thesis is an opportunity for students to consolidate and advance the knowledge gained during graduate studies, to exercise and expand the research skills learned in the program, and to develop expertise in a specialized area of interest. The process of identifying a topic or question of interest, defining and designing a study to provide information on the topic, obtaining appropriate data, analyzing the data using proper techniques, interpreting the results correctly, and documenting the entire process in a written report, is a key component of the learning process and an important way to assess student performance.

Each student works closely with a thesis advisor to identify an area or problem of interest, poses a number of potential project ideas, narrows and hones these ideas into a feasible thesis question or hypothesis, and designs the study, using either primary or secondary data to address the question. The design, conduct, write-up, and presentation of the thesis project is a major effort and is generally regarded by alumni as one of the most important and useful aspects of their graduate experiences. Examples of acceptable designs for the thesis include analytic studies (e.g., case-control studies), program evaluations, case studies, policy analyses, descriptive studies, and experiments or quasi-experiments (rarely performed for a master's thesis). When a thesis significantly contributes to a scientific body of knowledge, the student is encouraged to publish the results in a scholarly journal.

Master's Capstone Project

The Executive MPH and the MPH degrees in Environmental Health, Health Services, and Community Oriented Public Health Practice Programs give the student the option of doing a master's capstone project as an alternative to a master's thesis. Like a master's thesis, a capstone project is a major, rigorous, scholarship-based, and demanding undertaking. Where the thesis is designed to apply research methods to the challenge of creating new knowledge, the objective of the capstone project is to address a real public health problem in the community. (The COPHP Capstone Handbook, which is used as a model, is found in *Appendix 2.5.A*).

The capstone project has the following goals:

Experiential Goals

To contribute to solving a community health problem in a meaningful, effective, and culturally sensitive fashion; specifically:

- To work to solve a public health problem in a community setting.
- To find and apply evidence-based solutions to a defined community problem.
- To work productively with other people and to develop successful community partnerships and solutions.
- To explore problem-solving methods in the contexts of specific communities and populations.

- To understand the organizational, political, economic, and social contexts that can promote or constrain public health interventions.

Academic Goals

- To develop advanced public health assessment and problem-solving skills.
- To develop comprehensive knowledge in an area or areas of special interest.
- To evaluate the successes and weaknesses of the project through either formal evaluation and analysis or reflection.
- To hone communication skills and use them to summarize findings in professional-quality written and oral presentations.

Table 2.5.A compares the characteristics of the capstone project and the thesis.

Table 2.5.A. Comparison of capstone projects and thesis projects

	Master’s Capstone Project	Master’s Thesis
Principal intent	To identify and solve a problem of practical importance to a public health agency or a defined community; to improve public health practice or community health	To create new knowledge
Is the report/thesis a “scholarly” project?	Yes—the student must identify and synthesize evidence relevant to the project. The student must also identify local historical, social, organizational, economic, and community contexts in which the community-oriented master’s project will occur	Yes—the student must identify and synthesize relevant to the research
Is this a research project?	It can be IF it has direct, practical usefulness to the sponsoring agency, organization, or community	Yes
Is data analysis involved?	It can be IF it has direct, practical usefulness to the sponsoring agency, organization, or community	Usually
Does the student critically evaluate the results and quality of the project/research?	Yes, including a self-reflective evaluation of the project	Yes
Principal audience	Agency, organization, or community where the project is conducted; in some cases, the larger professional community	Larger professional community
Is the project/thesis report publishable in a professional journal?	Yes (most likely in practice-oriented journals)	Yes

Master of Health Administration Program

The integrative project for the MHA program is called the Capstone Consulting Project. The project places student teams to work in a real-world environment, studying a problem of current importance to a health care organization and recommending to the organization how the problem should be handled. The projects provide students with an opportunity to work directly with a project preceptor and others in the organization in identifying and analyzing a management problem and in the formulation and presentation of a recommended course of action. Through interim reports and final presentations, team members also have an opportunity to polish their presentation and communication skills. Throughout the project,

students may discuss issues, ambiguities, and “learnings” that come from their experience with faculty and colleagues. Ultimately, successful completion of the project assignments requires students to organize and work as an effective team to “get the job done.”

The projects are complex and time-sensitive. They also affect people in the organization, and therefore have political, as well as analytical dimensions. They provide exposure to the realities that often confront managers as they try to solve problems and make changes in their organizations. As such, the project experience is intended to help students transition from classrooms to jobs.

2.5.B. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- All professional degree students complete a rigorous culminating experience—master’s thesis, capstone project, or capstone consulting project—that challenges students to integrate the skills and knowledge they have obtained during their master’s program.
- Each type of culminating experience is modeled to exercise and extend the specific skill-set emphasized in the student’s program.
- Master’s students rate the adequacy of research and professional training highly. On a scale of 1 to 5, with 5 being the best score, these ratings have averaged 4.0 over the past 3 years.

Weaknesses/Challenges

- Students occasionally have difficulty finding faculty committee members 1) whose interests match the topic of the students’ theses/capstones, or 2) who are willing to serve on thesis committees.
- Some students in concurrent degree programs have difficulty completing the culminating project in a timely fashion.

Plans

- The SPH is initiating workshops and providing resources to improve mentoring/advising culminating projects.
- Advisors to concurrent students are encouraging these students to settle on a thesis/capstone early in their programs.

This criterion is met.

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 (bachelors, masters and doctoral).

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

[Note: In the SPH we use the term *competency* to signify skills and abilities that we expect graduates to have mastered and demonstrated. They can be viewed as program/degree *outcomes*. *Learning objectives*, on the other hand, refer to the learning outcomes related to specific courses and experiences (e.g., the Practicum). Mastery of learning objectives should lead to mastery of expected competencies.]

Below are listed the competencies for students seeking the various degrees offered in the SPH. The department-, program-, and track-specific competencies are found in **Appendix 2.6.B**.

Competencies for all SPH students, regardless of degree program

Upon satisfactory completion of all degree programs at the SPH, graduates will be able to:

- Distinguish between individual and population health.
- Apply evidence-based decision making and critical thinking to public health problems.
- Communicate effectively and persuasively, both orally and in writing.

Competencies for all undergraduate students, regardless of degree program:

- Compare and contrast prevention vs. treatment and health vs. healthcare.
- Discuss the determinants of health and illness and the contribution health care and public health make to the health status of the population with particular attention to inequities in and among populations.
- Describe the history and structure of public health systems.
- Describe the role of advocacy and civic engagement in public health.
- Practice teamwork, interdisciplinary collaboration, and community partnerships.

Generic competencies for all MPH students:

- Describe the factors influencing the balance between individual susceptibility and population determinants of health.
- Demonstrate creativity, inquisitiveness, and evidence-based rigor in the application of public health problem-solving skills.
- Critically read and evaluate quantitative and qualitative research findings contained in medical, public health, and social science literature.
- Work effectively in and with diverse cultures and communities (cultural competency).
- Apply appropriate analytic tools and emerging technologies to defining, describing, and intervening public health problems.
- Describe major quantitative, qualitative, and mixed methods research study designs and their advantages and limitations.
- Identify and respond with integrity to ethical and social issues in diverse contexts and promote accountability for the impact of policy decisions upon public health practice at local, national, and international levels.

- Demonstrate professional and ethical behaviors within the appropriate management structure (academic, governmental, or other), including ability to work effectively with professionals from other disciplines.

Core-area-specific competencies for all MPH students:

Biostatistics:

- Select and interpret appropriate graphical displays and numerical summaries for both quantitative and categorical data.
- Explain the logic and interpret the results of statistical hypothesis tests and confidence intervals.
- Select appropriate measures of association of nominal and continuous variables.
- Select appropriate methods for statistical inference to compare one group to a standard, or two or more groups to each other.
- Develop or evaluate a statistical analysis plan to address the major research questions of a public health or biomedical study based on the data collected and the design of the study.
- Explain the roles of sample size, power, and precision in standard study designs.

Environmental and Occupational Health Sciences:

- Specify the major chemical, microbial, and physical health hazards found in air, water, food, soil, and wastes, and describe their principal effects on health.
- Describe basic strategies for identifying, evaluating, preventing, and controlling exposures to health and safety hazards in environmental and occupational settings.
- Describe methods for assessing health risk and identifying acceptable levels of risk associated with environmental and occupational hazards.
- Describe the potential influence of biological, behavioral, socioeconomic, political, and cultural factors on environmental and occupational health risks.
- Identify major environmental and occupational health problems associated with morbidity and mortality, in industrialized countries and in developing countries.
- Describe potential impacts of demographic change, economic development, built environments, environmental pollution, and climate and ecosystem change on health, food security, and water resources.
- Describe major regulations, policies, and institutions involved in controlling or mitigating environmental and occupational health risks.
- Discuss the importance of environmental justice and sustainability in addressing problems related to the environment and health.
- Communicate information to a target audience about environmental and occupational health risks, influential factors, and prevention strategies, and anticipate or identify risk perceptions and relevant concerns in the target audience.

Epidemiology:

- Define and appraise the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services.
- Evaluate the integrity and comparability of data and identify gaps in data sources.
- Define and calculate measures of disease frequency and measures of association between risk factors and disease.
- Describe the major *epidemiologic* research study designs and their advantages and limitations.
- Describe the major sources of bias in epidemiologic research (confounding, selection bias, and measurement error) and the ways to evaluate and reduce bias.
- Apply guidelines to support whether an association is causal.
- List and define the basic terms and methods used in outbreak investigation, infectious disease

epidemiology, chronic disease epidemiology, disease prevention trials, and evaluation of screening tests.

- Appropriately select and use modern information technology tools to identify, locate, access, assess, and use health information and data to inform public health decision-making.
- Critically review the relevant scientific literature, synthesize the findings across studies, and make appropriate public health recommendations based on current knowledge.
- Interpret results of an epidemiologic study, including the relation to findings from other epidemiologic studies, the potential biological and/or social mechanisms, the limitations of the study, and the public health implications.
- Explain the importance of epidemiology for informing scientific, ethical, economic, and political discussions of health issues.
- Recognize the basic ethical and legal principles pertaining to the collection, maintenance, use, and dissemination of epidemiologic data.
- Communicate *epidemiologic* information to lay and professional audiences.
- Apply epidemiologic skills in a U.S. or global public health setting, specifically in the formulation or application of public health programs or policies.

Health Services (Health Administration and Policy):

- Describe how the health care and public health systems contribute to the public's health and to the intermediate goals of equity, efficiency, and effectiveness.
- Describe the history, components, organization, and operation of the health care and public health systems.
- Explain how the structure and functioning of health systems affect its performance.
- Discuss the determinants of health and illness and the contribution health care and public health make to the health status of the population with particular attention to inequities in and among populations.
- Describe the major public policy issues that affect health and health care.
- Describe the major strengths and weaknesses of the health care and public health systems and their underlying causes.
- Illustrate how health care and population health interventions can be better integrated.
- Identify and evaluate the major challenges facing a health system and identify alternative approaches to improving the system's performance.
- Describe the pros and cons of health care financing strategies and programs that can be achieved through either government or private mechanisms, and illustrate using either domestic or international examples.
- Explain how socioeconomic, political, behavioral, and biological factors can determine health and disease and how this knowledge can be used to assess population health and develop strategies for disease prevention and health promotion.
- Articulate the health status of the United States in comparison to other countries over the past several decades.

Social and Behavioral Sciences:

- Describe the key components of core theories and models of behavior and behavior change, and assess how these theories apply to specific public health problems that are influenced by individual, community, institutional, and societal determinants;
- Outline and explain a conceptual model of the factors affecting population health and health inequalities, define the individual-level and contextual-level social determinants of population health and health inequalities in the conceptual model, and explain their relationships and potential mechanisms of influence.
- Apply evidence and theory-based approaches in developing social and behavioral science

- interventions to improve individual and population health and reduce health inequalities.
- Specify multiple targets and levels of intervention for social and behavioral science interventions and policies.
- Identify and describe health promotion principles and strategies for designing programs to improve health care using U.S. and/or international public health systems.
- Identify and describe a community: its demography, culture, formal and informal organizations, interactions, leadership, relevant stakeholders, physical attributes, and how the community views itself.
- Define cultural competency as it applies to working with diverse individuals, organizations, and health care and public health systems and communities.
- Identify and describe tools to assess and improve organizational and community assets and resources, and explain their application in addressing health needs.
- Describe strategies for collaborating with communities in assessing health needs, designing and implementing programs to address these needs, evaluating program outcomes, promoting community health, and conducting research (e.g., community based participatory research).

Competencies for all MHA students:

The Master of Health Administration program emphasizes application of core management concepts and theories within clinical processes, health enterprises, and public health programs and career contexts.

Upon satisfactory completion of the MHA program, graduates will be able to:

- Identify the main components and issues of the organization, financing, and delivery of health services and public health systems in the U.S.
- Describe the legal and ethical bases for public health and health services.
- Explain methods of ensuring community health safety and preparedness.
- Discuss the policy process for improving the health status of populations.
- Apply the principles of program planning, development, budgeting, management, and evaluation in organizational and community initiatives.
- Apply principles of strategic planning and marketing to public health.
- Apply quality and performance improvement concepts to address organizational performance issues.
- Apply “systems thinking” for resolving organizational problems.
- Communicate health policy and management issues using appropriate channels and technologies.
- Demonstrate leadership skills for building partnerships.

Generic competencies for all MS students:

Upon satisfactory completion of the MS program, all graduates will be able to:

- Describe major research study designs used in their field of study.
- Critically review the scientific literature, synthesize the findings across studies, and make appropriate recommendations based on current knowledge.
- Organize data and information, prepare technical reports, and give oral presentations appropriate to the scientific community and/or the general public.
- Demonstrate disciplinary knowledge.
- Demonstrate professional and ethical behaviors.
- Work effectively with professionals from other disciplines.
- Analyze, interpret, and use data for addressing questions relevant to an area of research.
- Formulate a hypothesis or practical research question, design a study or plan to obtain experimental or observational data, and conduct an appropriate analysis to support an evidence-based assessment of the results.

Generic competencies for all PhD students:

Upon satisfactory completion of the PhD program, graduates will be able to:

- Meet the generic SPH learning objectives for the MS degree (see section above).
- Demonstrate comprehensive understanding and in-depth knowledge of a methodology or subject area.
- Demonstrate knowledge of the discipline within the context of the field of public health.
- Conceive, conduct, and disseminate independent research.

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

Program- and track-specific competencies are listed **Appendix 2.6.B**, organized by degree.

2.6.C. A matrix that identifies the learning experiences (eg, specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies defined in Criteria 2.6.a. and 2.6.b are met. If these are common across the school, a single matrix for each degree will suffice. If they vary, sufficient information must be provided to assess compliance by each degree and concentration. See CEPH Data Template 2.6.1.

Due to the large volume of information, we have included CEPH Data Templates 2.6.1 for all degrees and programs outlined in **Criteria 2.6.A** and **2.6.B** in **Appendix 2.6.C.i**. Syllabi for required courses are included by department or program in **Appendix 2.6.C.ii**. Schedules of course offerings for the last three years are included by department or program in **Appendix 2.6.C.iii**.

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

The review and analysis of the degree and concentration competency matrices (CEPH Data Templates 2.6.1) resulted in:

- Changes in the content of some of the core and track-required courses.
- Clearer definition of the generic learning objectives for the practicum.
- SPH Curriculum and Educational Policy Committee prioritizing the development of ideas for how to assure that learning in the areas of 1) public health biology, and 2) public health ethics is incorporated into the training and/or expectations for *all* MPH students.

Furthermore, the work throughout the SPH that went into updating competencies was generally felt to be very useful in realigning the course content with changing expectations for our students; specifically, a greater emphasis on information gathering, critical thinking, analysis, and synthesis.

2.6.E. Description of the manner in which competencies are developed, used and made available to students.

Course learning objectives are developed by the instructors and are an integral part of the course syllabus. The SPH requires that all syllabi be organized in a standard format which makes them uniformly organized and readily available to students who are considering taking a course, to colleagues who are interested in the course, and to students who are enrolled in the course (<http://sph.washington.edu/gateway/syllabi.asp>). Furthermore, the SPH has explicit expectations for the wording of learning objectives in the syllabi (http://sph.washington.edu/gateway/learning_objectives.asp). Instructors are likely to revise and update the course learning objectives each year based on developments in the field, issues of emerging importance, new knowledge in the discipline, and feedback from students and colleagues. Any new course or significant course change requires a formal review that must be

reviewed by the SPH Curriculum and Educational Policy Committee and then by the UW curriculum office.

The SPH's Curriculum and Educational Policy Committee is responsible for coordination and review of the generic competencies for all degrees.

Program-specific competencies are developed by the core faculty responsible for teaching in that program. Departments and specialty tracks, as a rule, have program review retreats, usually in the summer where both methods and content are discussed and revised.

Degree competencies are posted on the departmental and SPH websites, as well as in some printed program materials, and are used as the basis for the annual Competency Survey (described in *Criterion 2.7.A*, below) of first-year and graduating students.

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

The SPH has a number of means by which it assesses and updates the teaching in the SPH, including program competencies. In general, the SPH updates its learning objectives in response to needs and opportunities perceived by the dean, faculty, students, alumni, and community, and in recognition of developments in public health education.

First, feedback from students, alumni, and faculty provide insight to enhance, expand, or refine program learning objectives. These reviews are usually carried out as part of a regular curriculum revision process, so that the development of new learning objectives is linked to the revision or development of courses. Major revisions in curriculum are reviewed by the SPH Curriculum and Educational Policy Committee.

Second, the departments assess their program competencies in relation to developments in the field through Graduate School reviews. These reviews of departmental graduate degree programs are conducted every 10 years. They involve an extensive self-study and a site visit by external reviewers. Curriculum and the effectiveness of the degree programs are scrutinized as part of these reviews, and outside experts make recommendations, if appropriate, on the need for curricular development.

Third, the stimulus for curriculum development—and updating of competencies—may arise in direct response to the assessment of developments in educational societies or from needs expressed by students, faculty, or alumni. For example, our programs in Health Informatics and Health Information Management are very responsive to guidelines promulgated by the American Health Information Management Association.

Finally, the SPH Strategic Plan not only outlines in detail the strategies for “Strengthening our teaching,” it also requires the vigilant monitoring of the implementation of these strategies. The table below lists these strategies and the groups that are responsible for a) implementing the strategy, and b) reviewing progress.

Of particular importance is Strategy 1.1, “Review of the current MPH curriculum.” This review is being conducted by an ad hoc MPH Review Work Group appointed by the dean. This group, whose membership includes students, faculty, staff, and external stakeholders (Listed in *Appendix 2.6.F*), has worked for the past year reviewing current MPH curricula, getting input from various internal and external stakeholders, and drafting models for a new MPH curriculum in the SPH. The group will be presenting its recommendations this spring (2013).

The special assistant to the dean has been given the responsibility to ensure that implementation is moving forward, and is responsible for reporting to SPHEC on the progress of the SPH Strategic Plan implementation (see <http://sph.washington.edu/strategicplan/implementation.asp> for details). The Curriculum and Educational Policy Committee and the Distance Learning/Learning Technology Committee have lead roles in these efforts.

Table 2.6.F. Strategic plan implementation schedule for curricular activities

Strategy	Implementing Group	Reviewed by	Status	Comments
1.1 Review the current MPH curriculum.	MPH Review Work Group	CEPC/Faculty Council	Underway in 2012	Proposed timeline from Jan 2012 - June 2013
1.2 Evaluate establishing an abbreviated degree program for clinical professionals, including medical students.	MPH Review Work Group	CEPC/Faculty Council	Underway in 2012	Included as part of the MPH Review effort
1.3 Regularly review and modify programs so they do not become outdated.	Dept/Programs/CEPC	CEPC/Faculty Council	Underway in 2012	Included with the CEPH self-study; CEPC will survey departments for current practices
1.4 Identify best practices and improve efficiencies in teaching and course offerings.	Dept/Programs/CEPC	CEPC/Faculty Council	Underway in 2012	Included with the CEPH self-study; CEPC will survey departments for current practices
1.5 Strengthen the delivery of high-quality education in our undergraduate, MPH, MS, and PhD programs.				
a. Establish mechanisms to improve the quality of our teaching, advising, and mentoring.	Faculty Council/CEPC	Dean/Dept chairs	tbd	Determining timeline
b. Improve our pedagogical models and increase the use of adult learning methods.	Dept/Programs/CEPC	CEPC/Faculty Council	2013-14	CEPC will survey departments for current practices
1.6 Improve the quality and consistency of written and on-line curriculum materials.				
a. Develop standardized teaching tools for use across departments.	Distance Learning and Technology Committee	CEPC/Faculty Council/Dept chairs	2013-14	Launching with the UWIT new initiative
b. Provide information and support to faculty to create and maintain comprehensive course websites.	Distance Learning and Technology Committee	CEPC/Faculty Council/Dept chairs	2013-14	Launching with the UWIT new initiative
1.7 Extend our teaching beyond the classroom.				
a. Convene forums for community, workforce, and business partners to explore how to optimize limited resources to improve community and workplace health.	NWCPHP/DEOHS/Others	Dean/Dept chairs	2014-15	
b. Provide opportunities for our students to teach public health to K-12 students, undergraduates, workers, and the general public.	Student Services Staff	Dean/Dept chairs	2014-15	
1.11 Broaden opportunities for public health training.				
a. Offer additional and varied educational opportunities to public health practitioners, such as short-courses and certification programs.	Dept/Programs/CEPC	CEPC/Faculty Council	2012-14	Distance Learning & Technology Committee surveys Departments for current practices
b. Explore opportunities to use distance learning technologies effectively.	DL/LT Committee/Reps from each department	CEPC/Faculty Council	2013-14	
c. Consider developing public health content modules for use in the five other UW health sciences schools.	Interprofessional Education Committee	CEPC/Faculty Council	Underway in 2012	

2.6.G. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- Explicit competencies are articulated for all educational programs in the SPH.
- Course syllabi contain learning objectives that are consistent with these competencies.
- Faculty, curriculum committees, and special *ad hoc* committees review and update program competencies in response to developments in the field, and to faculty, student, alumni, or external input, including the SPH's Strategic Plan.
- The MPH Review Work Group has undertaken a comprehensive review of the MPH programs in the SPH and will present its findings and recommendations in the spring of 2013.
- Students assess their mastery of degree competences at the end of their first year and in the spring of the year in which they graduate.

Weaknesses/Challenges

- Ensuring that faculty write properly constructed (i.e., behavioral) learning objectives for the syllabi of their courses.

Plans

- The various curriculum committees (SPH, department, and program) will continue to monitor and refine degree/program/track competencies.
- Departments and faculty will continue to monitor developments in their fields and to expand curricular opportunities in emerging areas of public health.
- Disseminate, discuss and implement recommendations of the MPH Review Working Group.

This criterion is met.

2.7 ASSESSMENT PROCEDURES

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

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

The SPH uses several procedures to monitor and ensure student progress toward meeting program competencies:

Annual Competency Survey

Each spring, students who have completed their first year of study and those who are graduating complete a self-assessment of their mastery of degree competencies. Students receive immediate feedback via email listing the competencies that they indicate that they have not mastered satisfactorily. This information is particularly helpful for students just finishing their first year, as it points to areas where they need additional training.

Statistical data from these surveys is used by the Curriculum and Educational Policy Committee. The department and track curriculum committees scrutinize these reports for monitoring weaknesses in the curriculum and suggesting areas of needed improvement.

These reports can be found at http://sph.washington.edu/gateway/competencies_survey_reports.asp.

Classroom performance

All students are required to take a prescribed set of courses and a specified number of electives. These are described in program-specific guidelines (available for review at the site visit). All core courses must be taken for a grade (e.g., 4.0, 3.9, etc.), and all students must successfully complete the class examinations and assignments for each course. All graduate students are required to maintain a grade point average of 3.0 to graduate. A grade of 2.7 or above is required in each course to be counted toward the degree requirements.

Practicums

The Practicums serve an important role, not only in giving students the opportunity for practical, hands-on experience in public health practice settings, but also in providing a means for faculty to assess and intervene regarding a student's skills and knowledge in areas outside the classroom. Many of the competencies established for MPH students cannot be assessed in the classroom alone. The Practicum (as well as the culminating experiences, below) provide opportunities for both mastering and assessing important program-generated competencies. Assessment of the student's master of competencies is performed through evaluations by the site mentor, as well as through self-assessment and reflection, which are a required part of a student's practicum paper.

Master's thesis and capstone projects

MPH and MS students must meet a high standard of quality to receive credit for a thesis or capstone project. In many ways, the thesis—and to a comparable extent, the capstone project—serves as a “proof of the pudding” demonstration that a student can operate on a professional level, incorporating many of the competencies expected of master's level graduates. The thesis and the capstone project is reviewed and critiqued in detail as the student develops his/her project, carries it out, and writes it up in a prescribed format. The thesis or capstone report must be approved by at least two faculty members.

Dissertation: preliminary and general examinations

Similarly, all PhD students must write an acceptable dissertation and pass a final oral examination. This process, explicitly prescribed and monitored by the Graduate School, contains several intermediate outcomes to measure progress and to demonstrate that the student has achieved the level of skill necessary to contribute to knowledge in the field at the doctoral level. The dissertation is supervised and approved by the student's dissertation supervisory committee, which includes four or more faculty, at least one of whom (the Graduate School Representative) has an appointment outside of the student's department. The dissertation is presented at an open seminar and must be of sufficient quality and originality to be published in a peer-reviewed journal.

Each PhD student must pass preliminary exams and a general exam, which are designed to test comprehensive knowledge in the discipline as well as specific knowledge in at least one subject area (typically in the area of the dissertation). The Graduate School Representative formally evaluates the process of the exams, and the supervisory committee evaluates the student's performance. SPH student performance is almost always rated "above average" or "excellent" compared to other doctoral candidates throughout the University.

Advising

Students are assigned a primary advisor upon entering a program. To avoid potential performance problems, students undergo intensive scrutiny in the first quarter and throughout the first year, and appropriate assistance is offered if necessary. When a student begins work on a thesis or dissertation, the faculty member with whom the student is doing research often becomes the advisor.

In addition, all departments, interdisciplinary programs, undergraduate programs, and some program tracks (e.g., Maternal and Child Health) employ graduate program assistants or advisors to support and monitor the progress of students. During their time in the program and at the time of graduation, every student's program is checked by both the faculty advisor and the departmental graduate program staff to ensure that all requirements have been met. In this way, both the faculty advisor and the graduate program staff monitor every student. This process certifies that program requirements are adequately met and ensures that any difficulties or deficiencies in the student's educational program are addressed.

2.7.B. Identification of outcomes that serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees (including bachelors, masters and doctoral degrees) for each of the last three years. See CEPH Data Templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of the graduates at any level who can be located, an explanation must be provided.

Degree Completion

CEPH Data Template 2.7.B is included in **Appendix 2.7.B** for our undergraduate, MPH, MHA, MS, and PhD programs. The Graduate School's maximum time for completion of a master's degree is 6 years, and for a PhD it is 10 years. Generally, undergraduates declare majors in their sophomore year, and the expectation is that they complete the major in two years. **Tables 2.7.B.i** and **2.7.B.ii** summarize the information for the most recent cohorts.

Table 2.7.B.i. Degree completion rates (2010-2012)

Degree	Target	% completing within UW's expected or maximum time	70% graduated in:	80% graduated in:
Undergraduate	~2 years	70%	2-3 years	2-4 years
MPH	6 years	78-93%	3-4 years	4-7 years
MHA	6 years	87-94%	2 years	2-3 years
MS	6 years	81-89%	3-4 years	4-6 years
PhD	10 years	80-83%	6-8 years	8 years

Over 80 percent of MHA, MS, and PhD graduates who responded to the 2012 Alumni Survey reported finding employment or enrolling in additional graduate education within six months of receiving their degree from the SPH (*Table 2.7.B.ii*). Among MPH graduates, 76 percent reported finding employment within six months, which is approximately in line with the CEPH target of 80 percent for 12 months out.

Table 2.7.B.ii. Graduates (2000-2011) reporting employment or enrollment in additional education within one and six months of graduation*

Degree	Six-month target	% employed within one month of graduation	% employed within six months of graduation
MPH (n=138)	80%	48%	76%
MHA (n=34)	80%	61%	82%
MS (n=22)	80%	50%	80%
PhD (n=64)	80%	81%	93%

Table 2.7.B.iii. CEPH Data Template 2.7.2. Destination of graduates by employment (graduating cohorts 2007-2011)*

Indicator	MPH	MHA	MS	PhD
Employed	65 (92%)	21 (100%)	9 (75%)	22 (81%)
Continuing education/training (including post-docs)	4 (6%)	0	3 (25%)	5 (19%)
Actively seeking employment	2 (3%)	0	0	0
Not actively seeking employment	0 (0%)	0	0	0
Total	71	21	12	27

*Source: 2012 Alumni Survey

The results of the 2012 alumni survey indicate that over 90 percent of students who graduated between 2007 and 2011 were employed or in continuing education or training (*Table 2.7.B.iii*).

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

The 2012 Alumni Survey was conducted via an online survey tool. Requests to participate in the survey were sent to all available email addresses of SPH alumni. The purpose of the survey was 1) to learn about the current employment of the alums, 2) to get feedback on their education experience at SPH, and 3) to elicit suggestions for improving the SPH. Despite efforts to maximize response rates to this survey, returns were disappointingly low, possibly because many of the same potential respondents were surveyed previously as part of the SPH strategic planning process. *Table 2.7.C* summarizes the number of responses and response rates for recent graduates.

Table 2.7.C. Response rates, 2012 alumni survey

Degree	Graduated before 1990	Graduated 1990 to 1999	Graduated 2000 to 2012 (approx. response rate)	Total
MPH	26	34	138 (8%)	198
MHA	23	11	34 (7%)	68
MS	15	21	22 (3%)	58
PhD	11	21	64 (12%)	96
Total	75	87	258	420

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

Few students from the SPH have participated in the certifying exam of the National Board of Public Health Examiners (NBPHE). As a consequence of NBPHE policy, the SPH has not been provided aggregate data on the pass rate among students from the SPH.

The Graduate Coordinated Program in Dietetics has experienced a 98 percent completion rate over the last five years. Students graduating from the Nutritional Sciences program who take the exam have had a 100 percent first time pass rate since they were granted accreditation in 2009. They are one of very few programs in the country with a 100 percent pass rate.

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

Table 2.7.E summarizes the assessment of respondents to the 2012 Alumni Survey regarding how helpful their degree program was in 1) obtaining employment, and 2) in preparing them for their current job.

Table 2.7.E. Helpfulness of degree in obtaining and performing current job, 2012 alumni survey (scale of 1 to 5, 5 highest)

Degree	Helpfulness in obtaining current job	Helpfulness in performing current job
MPH	4.1	3.9
MHA	4.3	3.9
MS	4.3	4.0
PhD	4.8	4.5

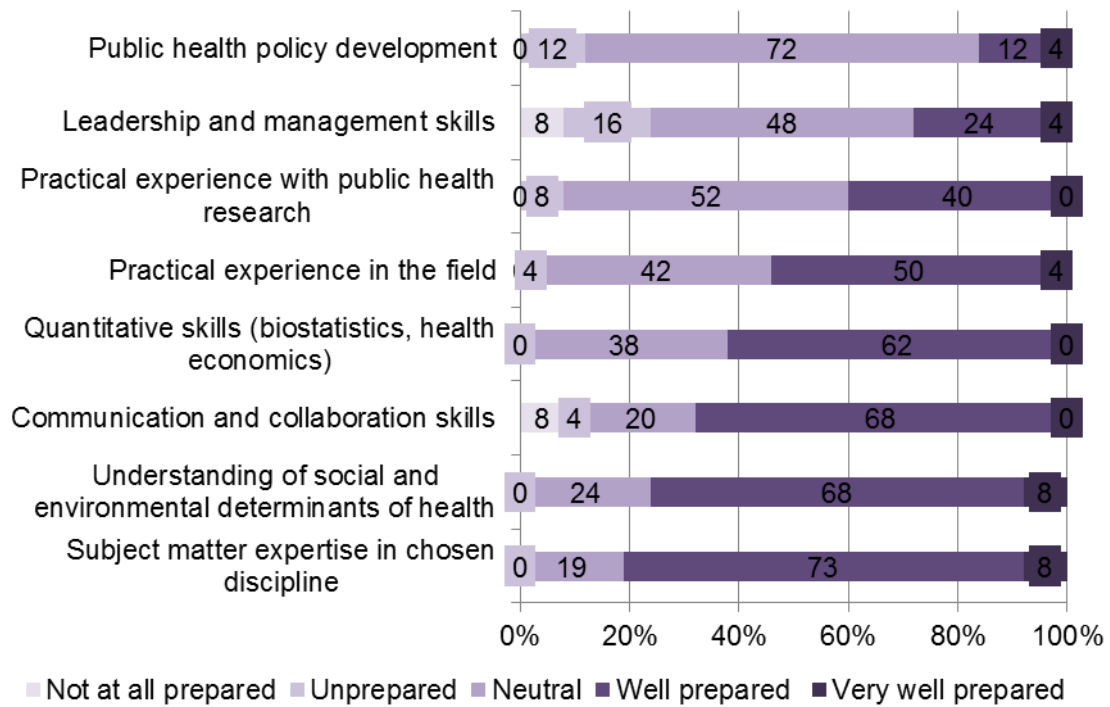
These data suggest that the education received at SPH was helpful for both obtaining employment and in performing professional duties. PhD graduates appeared to have found their education to be most helpful.

The strategic planning process surveyed 28 employers about the assessment of the preparedness of our graduates for work in their organizations. The following chart summarizes their responses.

The majority of respondents thought students were “well prepared” or “very well prepared” in five of the eight areas (see **Figure 2.7.E.** below):

- 81 percent (21) of respondents selected “Subject matter expertise in chosen discipline (i.e. Biostatistics, Epidemiology, Environmental and Occupational Health Sciences, Global Health, Health Services, or other specific discipline).”
- 76 percent (19) selected “Understanding of social and environmental determinants of health.”
- 68 percent (17) selected “Communication and collaboration skills.”
- 62 percent (16) selected “Quantitative skills (biostatistics, health economics, etc.).”
- 54 percent (14) selected “Practical experience in the field.”

Figure 2.7.E. Employer assessment of SPH graduates’ preparation in various areas.



The data above suggest that policy, leadership, and management preparation was rated as most lacking. These skills are often developed on the job; nevertheless, these results (discussed during the strategic planning process) stimulated a number of strategic goals and strategies to rectify these deficiencies (see **Criterion 2.6.F**).

2.7.F. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH uses an array of assessment mechanisms—in courses, practicum, capstone projects, and dissertations, self-assessment tools, and mentoring—to ensure that students master the expected competencies for their respective degrees and tracks.
- In addition to the detailed competency survey that students take in their first and last years, course exams and assignments, practicum evaluations, and the rigorous supervised culminating experience enable the faculty to monitor and ensure mastery of expected competencies.
- The SPH Curriculum and Educational Policy Committee monitors curriculum in the SPH to ensure that all degree and program learning objectives are met through required courses, seminars, practicums, and culminating projects.

- More than 80 percent of graduate students graduate within the limits set by the Graduate School.
- Alumni and employer surveys indicate that graduates give high ratings to the quality of their educational experience.

Weaknesses/Challenges

- Because alumni surveys are time- and resource-intensive for both SPH staff and respondents, they are conducted only every five to seven years.
- Low response rates and nonrespondent bias affect confidence in the findings of exit and alumni surveys.
- Policy, management, and leadership skills/preparation of graduates were found by employers to be less developed than subject matter and analytic skills.

Plans

- The SPH Curriculum and Educational Policy Committee will continue to monitor courses to ensure that they teach the articulated degree and specialization competencies.
- Programs will be encouraged to use the competency lists as a tool in advising and mentoring students.

This criterion is met.

2.8 OTHER GRADUATE PROFESSIONAL DEGREES

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

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

The MHA/EMHA program curricula encourage students to master, synthesize, and apply knowledge from the full range of management disciplines while emphasizing leadership accountability for effective organizational and systemic performance. Above all else, the MHA program aims to develop emotionally-aware, transformational leaders who are competent at early career-entry and mid-career entry levels through the MHA and EMHA programs, respectively. MHA and EMHA graduates will be immediately effective at creating, building, and supporting transformation of their chosen organizations and the nation's health care delivery system throughout their subsequent management careers—through beginning placements in early career nonclinical management (MHA) and mid-career clinical and nonclinical management (EMHA)—and transformational leadership roles upon graduation.

Throughout the MHA and EMHA content development, the curricula balance and integrate classroom, experience-based, and practice-integrated learning. The educational experience, based on adult learning concepts, moves progressively from concept introduction, through skill development, to concept and skill integration, to competency development, and finally to leadership development.

The MHA program curriculum consists of 75 quarter credits offered over two academic years. The curriculum is scheduled in a normal “day program” on-campus schedule with 60 percent of the credits offered in the first program year and 40 percent of the courses offered in the second program year. The program requires students to complete a summer internship in a health care delivery organization between the first and second years of the program. Students must complete a team-based consulting or capstone project in the final quarter of the MHA program. Students enter the program with minimal work experience and most frequently enter their careers in entry-level, nonclinical managerial roles. Twenty-five to fifty percent of MHA graduates enter the industry through administrative fellowships.

The Executive MHA (EMHA) program curriculum consists of 68 quarter credits offered over 24 months. The program is scheduled as an on-site weekend-based program with three courses offered in three 3-day weekend sessions over the eight quarters in the program. Students entering the program are mid-career executives, 75 percent of whom come from clinical backgrounds in health delivery organizations. The curriculum is heavily organized to take advantage of student experiences in current management roles using a strong adult-learning oriented leadership development model.

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

Within the MHA and EMHA programs, public health content and context is strongly included and emphasized within each curriculum framework. This is done by requiring courses in the following areas as appropriate to the degree:

- a) Introduction to Health Services (HSERV 511, 4 cr.)
- b) Epidemiology and Critical Evidence Appraisal (HSMGMT 501, 4 cr.)
- c) Quantitative Methods in Management (HSMGMT 570, 3 cr.)
- d) Health Policy Development (HSERV 552, 3 cr.) or Public Health Law (HSERV 551, (2 cr.)
- e) Organizational Behavior (HSMGMT 510, 4 cr.)
- f) Environment of Care (HSMGMT 577, 2 cr.)

g) Health Economics (HSMGMT 514, 3 cr.)

The total public-health-oriented credit load from these course areas is 28.6 percent of the total curriculum in each program (28.6% x 68 to 75 credit hours = approx. 19 to 21 quarter credits).

2.8.C. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The MHA degree is highly rigorous and devotes more than a quarter of its curriculum to core public health skills and knowledge.
- Students in the in-residence MHA program sit alongside MPH students in some of their courses and have the opportunity to share and hear different views on topics such as health policy and systems development.

Weaknesses/Challenges

- None.

Plans

- The MHA program is developing its self-study in preparation for its re-accreditation by the Commission on Accreditation for Health Informatics and Information Management Education (CAHME) during the 2013-14 academic year.
- Over the next academic year, the MHA faculty will consider bringing additional social and behavioral content into the MHA/EMHA curricula.

This criterion is met.

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 bachelors degree at the parent university. The experience may be tailored to students' expected post-baccalaureate goals (e.g., 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.

2.9.A. Identification of all bachelor's-level majors offered by the SPH. The instructional matrix in Criterion 2.1.A. may be referenced for this purpose.

A Bachelor of Arts with a major in Public Health and a Bachelor of Science with a major in Public Health have been available within the School of Public Health since March 2012. Prior to this date, a Bachelor of Arts and Bachelor of Science in Individualized Studies: Public Health was available to students through the University of Washington's College of Arts and Sciences since 2000. The program is administered through the SPH office of the dean.

A Bachelor of Science in Environmental Health has been available to students since an undergraduate program in sanitary science was established in 1947 in the Department of Public Health and Preventive Medicine, in the School of Medicine. Authority to grant the BS was transferred to the School of Public Health when it was established in 1970. The BS in Environmental Health is accredited by the National Environmental Health Science and Protection Accreditation Council (EHAC) and is administered by the SPH's Department of Environmental and Occupational Health Sciences (DEOHS).

The SPH also has a BS in Health Informatics and Health Information Management which is housed administratively 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.

2.9.B. Description of specific support and resources available in the school for the bachelors degree programs.

BA/BS in Public Health

- The Director of the undergraduate program, Sara Mackenzie, is a physician and clinical instructor in the Department of Health Services and is responsible for the overall direction, budgeting, and oversight of the program.
- A full-time program and advising manager provides the day-to-day management of the program including advising and problem solving with students; serving as liaison between faculty, instructors, and undergraduate students; identifying experiential learning, scholarship, and fellowship opportunities and responding to outside funding proposals; ensuring conformity to program, institutional, and SPH policies and regulations; and providing operational support for program admissions, assessment, budgeting, records management, and office management. In addition, the program manager works closely with the director of the undergraduate program and the Undergraduate Steering Committee on curriculum design, new course proposals, and revisions of program requirements.
- A full-time academic advising and recruiting coordinator is responsible for advising prospective and current students regarding course of study, career options, academic planning, degree requirements, and community development. In addition, the advisor works with the director of Student Affairs to develop outreach on campus, at community colleges, and in high schools.
- The Undergraduate Steering Committee has representation from the SPH's contributing departments and interdisciplinary programs and serves to guide curriculum direction, new course approval, and evaluation of existing course work.
- The Undergraduate Student Public Health Association (USPHA) is a student-run organization that is active across campus and serves as a peer resource for students interested in public health. USPHA serves as a student voice to guide undergraduate public health academic offerings and operations.

BS in Environmental Health

- The director of the undergraduate program, Christopher D. Simpson, is an associate professor in DEOHS and is responsible for the overall direction, budgeting, and oversight of the program.
- A full-time program manager and advisor is responsible for the day-to-day operation of the program, including advising and problem solving with students; serving as liaison between faculty, instructors, and students; and supporting program admissions, assessment, budgeting, and records management.
- The Curriculum Committee for DEOHS provides direction and evaluation for courses and program curriculum.
- Students pursue one of three interest areas within the major. Each interest area has at least one DEOHS faculty member who serves as the primary link for professional and career advising. These same faculty comprise an internal advisory committee which meets regularly to help steer the direction of the program. Additionally, a senior lecturer assumes primary responsibility for the undergraduate internship program.
- An Undergraduate Program Advisory Committee was established in 2005 in order to assist the undergraduate program in assuring a high-quality, relevant educational experience that will provide a strong foundation for careers in practice or further study of environmental health and its component disciplines. Committee members are drawn from environmental health professional roles in public, private, and nonprofit organizations. The committee reviews and provides feedback on the program's thrust and emphasis, content of curriculum, and organization of program requirements and options.

Undergraduate minor in Global Health

Building upon five existing and new Global Health courses and electives from multiple UW departments, the Department of Global Health created an undergraduate minor in Global Health. This popular option attracts over 150 students a year, many of whom also choose to apply to the undergraduate public health major. A detailed description of the minor can be found at <http://globalhealth.washington.edu/academics/undergraduate-minor/welcome>.

2.9.C. Identification of required and elective public health courses for the bachelors degree(s). Note: The school must demonstrate in Criterion 2.6.c that courses are connected to identified competencies (i.e., required and elective public health courses must be listed in the competency matrix in Criterion 2.6.d).

BA/BS in Public Health

Please see *Appendix 2.9.C.i* for BA/BS in Public Health program requirements and *Appendix 2.6.C.i* for the course mapping to identify undergraduate public health competencies. The course work provides a basic understanding of the five core areas with specific requirements for biostatistics, epidemiology, environmental health, health services administration, and social and behavioral sciences.

BS in Environmental Health

Please see *Appendix 2.9.C.ii* for BS in Environmental Health program requirements. While competencies and learning objectives do not directly reflect the organizational framework of the five core public health knowledge areas, the course work does provide a basic understanding public health with specific requirements developed around the criteria for EHAC accredited environmental health programs:

- Core areas: Epidemiology, Statistical Methods, Toxicology
- Related areas: Environmental Health Management, Risk Analysis
- Technical areas (each): Air Quality, Food Protection, Occupational Health and Safety, Water and Wastewater, Solid and Hazardous Materials and Waste Management, Disease Prevention
- Technical areas (choose four): Air Quality Control, All-hazard Preparedness, Built Environment, Disease Prevention, Environmental Health Planning, Food Protection, GIS, Global Environmental Health, Hydrogeology, Injury Prevention, Institutional Health, Occupational Health and Safety, Radiation Health, Recreational Environmental Health, Risk Analysis, Soils, Solid and Hazardous Material and Waste Management, Vector Control, Water and Wastewater
- Field experience and problem-based learning
- Background areas in basic sciences, communication, mathematics, humanities, and social sciences

2.9.D. A description of school policies and procedures regarding the capstone experience.

BA/BS in Public Health

Students are required to complete a capstone project at the end of their senior year. It is intended to be an integrative experience that brings together knowledge and skills acquired during their time in the major and at the University. There are two options for how this is completed. One is an independent study, and students work directly with a supervising faculty member. Students are required to identify and define a public health problem or issue, perform a literature review, integrate field work as appropriate, develop an approach and methods to address the topic, apply theoretical concepts from coursework, and report findings in writing and through presentations. The second option is a class capstone project where students work in groups of 4-6 with identified community programs on a service learning project. This option extends over two quarters and involves focused literature review and paper, service learning, and in-class reflective activities.

BS in Environmental Health

All students complete a 400-hour field internship. An opportunity to use knowledge and skills learned in the classroom in an actual work setting, the internship is both practical and educational. Students are assigned to a local, state, or federal public health or environmental protection agency; a nonprofit organization; or a private sector company; for supervised application of public health practices and/or environmental control techniques, supervised observation and experience in environmental health program planning, and training in the utilization of community resources. The practical training experience has often led to employment opportunities and directed entry into the environmental health community for graduates.

2.9.E. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH successfully transferred the undergraduate public health major from the College of Arts and Sciences to the SPH.
- The SPH has hired excellent new staff to manage and promote this program.
- The undergraduate Environmental Health Program continues to attract strong students.
- The new undergraduate minor in Global Health has attracted over 150 students in its first year.
- The Activity-Based Budgeting system for funding teaching at the UW is allowing our undergraduate programs to expand in order to meet the demand from undergraduates.

Weaknesses/Challenges

- Because of the large demand for undergraduate programs and courses in public health, SPH departments and faculty are eager to create new opportunities in their areas of specialization.
- It has been a challenge to ensure that the development of undergraduate degrees, minors, and courses offered by the SPH are well coordinated and that options for study are clearly communicated to students.

Plans

- SPH will continue to expand its undergraduate courses and programs.

This criterion is met.

2.10 OTHER BACHELOR'S DEGREES

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

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

BS in Health Informatics and Health Information Management

In addition to our two undergraduate public health degrees (Public Health and Environmental Health), the SPH offers a BS degree in Health Informatics and Health Information Management (HIHIM) through the Department of Health Services.

The HIHIM baccalaureate 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. Graduates work in health care organizations, consulting firms, government organizations, research, software/technology development and marketing, and health agencies.

Students enrolled in the program acquire an introduction to core public health concepts and a sound background in data needs and data use in public and private health systems, organizational theory, computer systems in health care, health information systems analysis, management theory and application, quality assurance theory and application, and finance and legal issues. Students take courses totaling 65 credits for the program. **Appendix 2.10.A** describes the curriculum for this BS degree.

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

Students enrolled in the program acquire an introduction to core public health concepts and a sound background in data needs and data use in public and private health systems, organizational theory, computer systems in health care, health information systems analysis, management theory and application, quality assurance theory and application, and finance and legal issues. Students take courses totaling 65 credits for the program, including:

- HIHIM 407 Foundations for Healthcare Vocabularies (3 cr.)
- HIHIM 408 Management Concepts with HIM Applications (3 cr.)
- HIHIM 409 Disease Concepts for Managers (4 cr.)
- HIHIM 410 Introduction to Healthcare Systems and Health Data Systems (5 cr.)
- HIHIM 412 Healthcare Coding (5 cr.)
- HIHIM 413 Revenue Cycle Management (3 cr.)
- HIHIM 420 Healthcare Computer Systems and Electronic Health Records (5 cr.)
- HIHIM 421 Health Information Systems Analysis (5 cr.)
- HIHIM 450 Organizational Theory in Health Facilities and Healthcare Delivery (3 cr.)
- HIHIM 454 Finance Concepts for Healthcare Managers (4 cr.)
- HIHIM 455 Professionalism and Leadership (4 cr.)
- HIHIM 456 Quality Assurance and Research in Healthcare (5 cr.)
- HIHIM 460 Management Project I (3 cr.)
- HIHIM 462 Management Project II (5 cr.)
- HIHIM 470 Legal Concepts for Health Fields
- HIHIM 480 Management, Problem-Solving, and Decision-Making (5 cr.)

2.10.C. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The Health Informatics and Health Information Management undergraduate program is a popular and nationally recognized program.

Weaknesses/Challenges

- None

Plans

- In 2013 the HIHIM program, in collaboration with our Master of Health Administration program faculty, will begin offering a new Masters in Health Informatics and Health Information Management to train leaders in this field.

This criterion is met.

2.11 ACADEMIC DEGREES

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

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

The SPH offers twelve MS and eleven PhD degrees. Degrees are administered through our five departments, including the Pathobiology PhD which, although technically an interdisciplinary program, is located in the Department of Global Health. The MS and PhD degrees in Nutritional Sciences and Public Health Genetics are administered by their respective programs, with oversight by the associate dean for Research and Programs. The PhD track in Statistical Genetics is a joint program between the Department of Biostatistics and the Department of Statistics in the College of Arts and Sciences. **Table 2.1.A** lists these degrees.

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

All students in our MS and PhD programs are required to take courses in public health areas outside of their home departments and are encouraged to acquire a broader public health perspective through additional electives.

Biostatistics MS and PhD students are required to take at least 9 credits from a list of courses in Epidemiology, Environmental Health, Health Services, and Biologic Science related to public health. Furthermore, all students in Biostatistics take a consulting course in which students in other SPH departments bring in problems for which they need statistical help, thus exposing Biostatistics students to problems in other public health disciplines.

Students in academic programs in the Department of **Environmental and Occupational Health Sciences** are required to take 12 credits of Biostatistics and Epidemiology. Higher-level courses in these areas are also encouraged. In addition, the list of suggested electives for these programs includes courses in management, policy, and public health-related biologic science.

Epidemiology students in MS and PhD programs are required to take 23 credits in Biostatistics and Epidemiology. In addition they must take two additional Epidemiology courses that focus on health problems and two other courses from a list of SPH courses "with significant public health content." The expressed aim of these requirements is to encourage students to broaden their studies to include coursework in the basic areas of public health.

Students in the new PhD program in **Global Health** specialize in one of two areas of emphasis: metrics or implementation science. Metrics is dedicated to providing students with advanced training in independent, rigorous, and timely scientific measurements to accelerate progress on global health by identifying the world's major health problems, assessing how well society addresses these problems, and guiding resource allocation to maximize health improvements. Implementation science focuses on the systematic application of scientific approaches to ask and answer questions regarding evidence of intervention efficacy to implementation. This science addresses how interventions can be scaled-up with greater speed, fidelity, efficiency, quality, and coverage. All 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 and 8-12 credits of Biostatistics. Furthermore, required courses in Health Services as well as electives cover a wide range of additional public health issues and perspective including health policy, social and behavioral science, and health economics.

The **Pathobiology** PhD (and MS) program is distinguished among basic science doctoral programs in that it brings together the fundamental concepts of biology, medicine, and public health, particularly as applied to global health issues. The program imparts a multidisciplinary perspective, as well as training in the latest research technologies, to the study of public health problems, such as viral, bacterial and parasitic diseases, as well as other conditions, such as cancer. Investigating the mechanisms underlying multifactorial diseases emphasizes the preventive as well as the curative, and a broader view of disease etiology. In this program, students must take four credits of epidemiology and four credits of Global Health. The required Pathobiology Seminar (2 credits x 4 quarters) and the Current Literature in Pathobiology course (2 credits) and the Pathobiology Mini-course (2 credits x 2 quarters) all address global health problems from multi-disciplinary perspectives, including Human Biology, Epidemiology, Microbiology, and Health Behavior.

MS and PhD students in **Nutritional Sciences** take at 4-8 credits of Biostatistics, a 4-credit course in Public Health Nutrition, as well as courses in Nutrition and Chronic Disease and Research Design. Seminars and electives also focus on biologic, health behavior, 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 8 or more credits of Epidemiology, 4-8 or more credits of Biostatistics, a three credit course in legal, ethical, and social issues in public health genetics, and (for PhD students) the introductory course in health services administration and policy (HSERV 511).

It should be emphasized that virtually all MS and PhD students write a thesis/dissertation that must address public health issues. The possible exception to this is Biostatistics, where students may write a heavily methodologically oriented dissertation. However, in Biostatistics, the qualifying exams include public health questions and the student is expected to be able to clearly relate his/her research to public health issues.

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

For the MS degree, the master's thesis is the culminating experience. For almost all programs, this is a research thesis; however, the MS in Environmental & Occupational Exposure Sciences has an option for master's portfolio. The MS thesis and portfolio option require the same number of credits. The MS thesis is oriented toward students interested in building their research skills and in applying advanced scientific tools available in their thesis 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. The MS Thesis (or Portfolio Option) requires a minimum of nine (quarter) credits.

For doctoral programs, the dissertation is the culminating experience. All students must meet the following Graduate School minimum requirements:

- Completion of a program of study and research as planned by the graduate program coordinator in the student's major department or college and the Supervisory Committee.
- Creditable passage of the General Examination. Registration as a graduate student is required the quarter the exam is taken and candidacy is conferred.

- Preparation of and acceptance by the dean of the Graduate School of a dissertation that is a significant contribution to knowledge and clearly indicates training in research.
- Credit for the dissertation ordinarily should be at least one-third of the total credit. 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.
- Creditable passage of a Final Examination, which is usually devoted to the defense of the dissertation and the field with which it is concerned.

Each department/program has different specifications for the qualifying/general exams and other prerequisites for the dissertation. Nevertheless, all departments/tracks have rigorous requirements/exams that must be satisfactorily completed before a student is permitted to pursue a dissertation. The UW Graduate School monitors all dissertations by requiring that a Graduate School Representative (GSR—a senior faculty member from a department outside of the student’s) be a member of the examining committee. Upon completion of the student’s dissertation defense, the GSR completes a report to the Graduate School and rates the fairness and rigor of the process. Review of these reports indicates that all SPH doctoral exams in the past have been judged to be fair and rigorous.

2.11.D. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH has strong, nationally competitive MS and PhD programs.
- Students in academic programs write a scholarly thesis or dissertation. The dissertation and general exam process for SPH students are consistently rated by the Graduate School Representative to be rigorous and fair.
- Exit surveys indicate that more than 82 percent of PhD students publish at least one paper in a peer-reviewed journal prior to graduation. Among graduating PhD students, the average number of papers published while in the program was 3.5.
- Students in academic programs have opportunities to take public health courses together with students in professional programs and to collaborate with public health practitioners in research, consultation, and service activities.

Weaknesses/Challenges

- Both to improve the experience of our doctoral students and to reduce redundancy, SPH needs to create mini-courses that bridge the departments, e.g., research survival skills, human subjects, and career development.
- Faculty vary in their skills for mentoring students.

Plans

- The SPH Office of Student Affairs is planning to develop a series of “SPH 101” short-courses to address practical topics in areas of cross-departmental importance and interest, such as grant writing, human subjects applications, and teaching skills, among others.
- Mentoring resources and workshops for faculty are being developed.

This criterion is met.

2.12 DOCTORAL DEGREES

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

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

The SPH offers twelve PhD degree options, including Biostatistics, Environmental and Occupational Health, Epidemiology, Global Health, Health Services, Nutrition, Pathobiology, and Public Health Genetics. A PhD with a concentration in social and behavioral sciences can be pursued as a track of the Health Services PhD. Thus, students may pursue doctoral training in each of the five core public health areas. Degrees are administered primarily through our five departments. The Pathobiology PhD, although considered an interdisciplinary degree under the Graduate School, is administered through the Department of Global Health. The PhD degrees in Nutritional Sciences and Public Health Genetics are administered by their respective programs, with oversight by the associate dean for Research and Programs. The PhD track in Statistical Genetics is a joint program between the Department of Biostatistics and the Department of Statistics in the College of Arts and Sciences. **Table 2.1.A** lists these degrees.

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

Traineeships and funding for doctoral students vary by department. While certain programs can guarantee support for students through departmental funding or training grant stipends, others work with students to identify and apply for funding opportunities. Types of funding include:

- Research Assistantships
- Teaching Assistantships
- Training grant stipends and tuition support through agencies such as: the National Institute for Occupational Safety and Health, the National Institutes of Health, and the Agency for Healthcare and Resource Quality

Funding opportunities for doctoral students have also been created through collaborations with outside agencies and organizations such as: the Center for AIDS and STDs, the International AIDS Research Training Fund, and the Medical Education Partnership Initiative and the Medical Scientist Training Program at the University of Washington.

2.12.C. Data on student progression through each of the school's doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program. See CEPH Template 2.10.1.

Table 2.12.C. Doctoral student data for year 2011-2012 (CEPH Data Template 2.10.1)

	Biostatistics	Environmental & Occupational Hygiene	Toxicology	Epidemiology	Global Health*	Health Services	Nutritional Sciences	Pathobiology	Public Health Genetics
Newly admitted	12	3	7	15		5	1	4	3
Currently enrolled (total)	68	13	20	87		28	4	36	15
Completed coursework	11	1	3	24		13	2	12	4
Advanced to candidacy (cumulative)	11	6	3	18		3	2	12	2
Graduated	7	0	2	19		8	1	2	0

* The Global Health PhD degree program commenced in Autumn 2012

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

The required and recommended course work for each of our doctoral programs is listed in **Appendix 2.12.D**. Common to all doctoral (PhD) degrees in the SPH are requirements for coursework in public health disciplines outside the student's department and for a rigorous research dissertation, which is formally defended as part of a student's General Exam.

2.12.E. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH offers doctoral degrees in the five core public health disciplines (a PhD in Health services can be in the Social and Behavioral Science track).
- In addition, SPH offers doctoral degrees or degree tracks in other public health specialty areas: Statistical Genetics track (joint with the Department of Statistics), Global Health (Metrics and Implementation Science tracks), Nutritional Sciences, Pathobiology, and Public Health Genetics.
- The new doctoral program in the Department of Global Health offers state-of-the-art training in Health Metrics and Implementation Science.
- According to data from the Association of Schools of Public Health, the doctoral programs at the SPH are among the most sought after and competitive public health doctoral programs in the nation.

Weaknesses/Challenges

- Under Activity-Base Budgeting (ABB) the amount of revenues allocated by the University to the SPH from tuition sources does not fully cover the costs of teaching and advising PhD students. Differences between costs and revenues must be made up from other sources (e.g., undergraduate teaching, provost's supplemental funds, etc.)

Plans

- SPH is exploring ways in which doctoral programs can require less subsidization from other revenue streams, e.g., by changing or creating new tuition categories, encouraging the UW administration to modify the allocation ABB formulae to recognize that educating PhD students may generate less ABB revenues than teaching undergraduates (who take mostly large lecture classes (which generate large revenues in the ABB system)).

This criterion is met.

2.13 JOINT DEGREES

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

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

The SPH has worked with other degree-granting units of the University to develop a large number of concurrent (joint) degree programs to meet the strong interest in public health among students in other professional and academic programs. The large number of concurrent degrees also illustrates the eagerness of the faculty in the SPH to be responsive to the needs of students in other UW departments and schools. We are assisted in creating these concurrent degrees by the policies of the Graduate School, which promote this kind of interdisciplinary collaboration. The purpose of the concurrent degree is to allow students to obtain two degrees in a timeframe that is less (usually by one year) than what would be required if they had to enroll in both degrees sequentially. This is accomplished by counting selected required courses for each degree as electives for the other degree.

The concurrent degree programs are identified in *Table 2.1.1* and descriptions of the programs are given below. These programs have all been developed in accordance with the guidelines specified by the UW Graduate School (Graduate School Memorandum No. 35, Concurrent Degree Programs, which is found in *Appendix 2.13.A*). Students in these joint programs must be admitted to each degree program individually and must fulfill the academic requirements for each program. Concurrent degrees are managed jointly by designated faculty in each participating program or school to ensure coordination of curriculum and adequate supervision and support of students. In general, each year only a few students enroll in a concurrent degree program. The MD/MPH and the MSW/MPH programs have the most students, approximately five to ten entering students per year in each program.

MPH concurrent degree programs

MD/MPH: Medical students may apply to the concurrent program during their first year in Medical School. Students complete all requirements of the MPH degree, which they usually do during an intense five-quarter period between their third and fourth year in medical school. The objective of the program is to supplement the training of medical students with a broad understanding of public health and community medicine. Students generally choose to pursue the MPH in the Department of Environmental and Occupational Health Sciences, Epidemiology Global Health, or the Department of Health Services. Recently there has been a significant growth in the interest of medical students in this opportunity.

MN (Master of Nursing)/MPH: This three-year program, offered jointly with the School of Nursing and the Department of Health Services, allows students to develop competence in community health or parent and child nursing, an understanding of the organization and function of the health care delivery system, and the basic analytic skills necessary to do research and to perform competently in a variety of health services careers. Students take the core public health courses and the core curriculum in either community health care systems or parent and child health nursing. The objective of the program is to prepare professionals to work at the interface of nursing and public health in practice, research, planning, administration, and policy development. MPH programs in Global Health and Health Services participate in this program.

MSW (Master of Social Work)/MPH: This three-year program, offered jointly with the School of Social Work and the Department of Health Services, leads to an MSW/MPH degree with interdisciplinary preparation in the fields of social work and public health. Students usually have backgrounds in social, behavioral, or biological sciences; or clinical health services. The objective of the program is to prepare professionals to work at the interface of social work and public health, in practice, research, planning, administration, and policy development. Various MPH tracks in the Department of Health Services

participate in this program.

MAIS (Master of Arts in International Studies)/MPH: This three-year program is offered jointly with the Henry M. Jackson School of International Studies. Students take the required courses for the international health track of the MPH and a core MAIS curriculum that addresses global, political, economic, social, and anthropological issues. The objective of the program is to train public health professionals, administrators, and policy analysts for careers focused on health issues in the developing world. The Departments of Epidemiology and Global Health participate in this program.

MPA (Master of Public Administration)/MPH: The purpose of the MPA/MPH degree is to create a master's level opportunity for future leaders in the public, private, and nonprofit sectors, to prepare for the breadth of issues facing management-level positions in public health management. The proposed educational programs create a curriculum designed to integrate knowledge and skills in organizational management, policy analysis, social and natural science, and public health management in ways suitable for professional development in the public, private, and nonprofit sectors; and to create a collaborative and interdisciplinary learning environment in which master's students with different backgrounds can contribute to the collective educational experience. This program is offered through the Departments of Environmental and Occupational Health Sciences, Epidemiology, Global Health, and Health Services.

MSD (Master of Science in Dentistry)/MPH: The purpose of the concurrent MSD/MPH degree is to train future leaders in pediatric dentistry for leadership roles in education, research, public health administration, advocacy, and public service for MCH populations, including children with special health care needs. This interdisciplinary program is aimed at educating pediatric dentists who can bring a public health orientation and rigor to their work with these populations at the community level or within health administration, academic, or policy arenas. The concurrent degree program creates a curriculum designed to integrate knowledge and skills in family-centered, culturally appropriate pediatric dentistry for underserved populations, including children with special health care needs, with knowledge of public health science and approaches to maternal and child health issues including epidemiology, biostatistics, principles of evidence-based care, program development, analysis, and evaluation. The program provides a collaborative and interdisciplinary learning environment in which master's students and faculty from SPH and Pediatric Dentistry can contribute to the collective educational experience and develop joint initiatives and activities. Students in this program may choose between the MCH Tracks in Epidemiology or Health Services.

JD (Juris Doctorate)/MPH: The overall goal of the concurrent degree and certificate programs is to train professionals who will be specially suited to advocate for and implement public health policy in both the national and international arenas. This concurrent degree program would offer students the opportunity to combine in-depth professional educational training in the two professions. Graduates with the JD/MPH concurrent degree would have the ability to move more directly into government, national and international public agencies, and public interest organizations focusing on public health and health care issues, services, and resources. Similarly, graduates will possess legal skills in addition to the public health knowledge they may bring to health departments and other public health agencies. For example, graduates will be attuned to the legal ramifications of the changing health care industry and public health arena. Graduates will be adept at interpreting laws and regulations, analyzing them, and determining what will be necessary for compliance. Graduates will also be prepared to serve effectively as change agents and advocates. Students may choose between MPH programs in the Department of Global Health, the Department of Health Services, or in the Public Health Genetics Program.

PhD (Anthropology)/MPH: This concurrent degree program offers an interdisciplinary curriculum in the fields of public health and anthropology leading to the Master of Public Health (MPH) and Anthropology (PhD) degrees. The concurrent degree program is designed to prepare professionals who will function in multidisciplinary health settings in the areas of teaching, research, administration, planning, and policy development and implementation. Students admitted into the concurrent degree program will be those

who have identified a strong commitment to devoting their careers to innovative approaches to solving the world's most pressing global health issues. The Departments of Epidemiology, Global Health, and Health Services participate in this program.

MHA concurrent degree programs

JD (Juris Doctorate)/MHA: The overall goal of this concurrent degree program is to train professionals who will be especially suited to roles in health administration in which both legal and administrative expertise would be advantageous. It offers students the opportunity to combine in-depth professional educational training in health administration and law so that they will be prepared to work in both venues or in positions requiring an understanding of both. Graduates with the joint degree will not be limited to the traditional career opportunities of legal work in a law firm. They will have the ability to move more directly into administrative positions in government agencies and health care entities such as hospitals, health plans, and health service organizations. Similarly, graduates will possess legal skills that they can bring to health care entities and government agency professional positions.

MBA (Master of Business Administration)/MHA: This three-year program was established to provide a broader exposure and more in-depth knowledge within both management and health services disciplines. The objective of the program is to train students who wish to pursue careers in the private sector of health care, through coursework in both the School of Business and the SPH.

MPA (Master of Public Affairs)/MHA: The purpose of the MPA/MHA degree is to create a master's level opportunity for future leaders in the public, private, and nonprofit sectors, to prepare for the breadth of issues facing management-level positions in public health management. The educational programs created a curriculum designed to: integrate knowledge and skills in organizational management, policy analysis, social and natural science, and public health management in ways suitable for professional development in the public, private, and nonprofit sectors. This program creates a collaborative and interdisciplinary learning environment in which master's students with different backgrounds can contribute to the collective educational experience.

MD/MHA: The concurrent MD/MHA is for students who want to combine education in health care management and policy with their clinical training. For medical students interested in playing a broader role than service provider in the system, clinical training is only a starting point. Students who plan a career in management or policy need both skills and contextual understanding in these areas. Students in this program can expect to use their concurrent degree either to broaden their perspective as clinicians/advocates/leaders or to take on broader roles such as manager of a clinical department within a health care organization, medical director of a public program (e.g., Medicaid), policy advisor, or consultant.

MPH/MHA: Within the SPH, students may pursue a concurrent MPH/MHA degree to 1) enhance their public health training with additional management and leadership training, or 2) enhance their training in management with additional public health training.

MS concurrent degree programs

MPA (Master of Public Affairs)/MS: The purpose of the MPA/MS degree is to create a master's level opportunity for future leaders in the public, private, and nonprofit sectors, and to prepare for the breadth of issues facing management-level positions in public health management. The proposed educational programs create a curriculum designed to: integrate knowledge and skills in organizational management, policy analysis, social and natural science, and public health management in ways suitable for professional development in the public, private, and nonprofit sectors; and create a collaborative and interdisciplinary learning environment in which master's students with different backgrounds can contribute to the collective educational experience. This program is offered through the Departments of Environmental and Occupational Health Sciences and Epidemiology.

PhD (Molecular and Cellular biology)/MS (Epidemiology): This concurrent degree program is designed to address the demand for basic scientists who are prepared to conduct interdisciplinary research that translates findings in the laboratory to the clinical and population-based settings, and vice-versa. The goal of this concurrent degree program is to train basic scientists in modern epidemiological research methods, providing them with skills and knowledge that will position them for translational science-oriented post-doctoral positions and eventually leadership roles at academic research institutions as well as in industry.

PhD concurrent degree programs

MD/PhD: Exceptional medical students may combine the MD program with a PhD program in Biostatistics, Environmental and Occupational Health Sciences, Epidemiology, Health Services, or Pathobiology. All requirements for the PhD must be met. The objective of the program is to train physician-scientists for academic and research careers.

In addition to the “formal” concurrent degrees, students are free to pursue “informal” concurrent degrees. The rules governing informal concurrent degrees are the same as for formal ones, the differences being a) they are not advertised, b) they are developed on an individualized, *ad hoc* basis, and c) the University does not create separate “codes” for these dual degrees in the UW Student Database. In this regard, the Graduate School allows concurrent programs combining professional degrees with an academic degree in another program. Several of our formal concurrent degrees began as informal concurrent degrees and were subsequently “formalized.”

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

The purpose of the concurrent degree is to allow students to obtain two degrees in a timeframe less (usually by one year) than if they had enrolled in both degrees sequentially. This is accomplished by counting selected required courses for each degree as electives for the other degree. Nevertheless, students pursuing these concurrent degrees must complete all requirements for both degrees. With very few exceptions, all concurrent students must satisfactorily complete the same courses required of nonconcurrent degree students. Students in concurrent degree programs are expected to attain the expected SPH core-, departmental- (and track-, if appropriate) related competencies.

The only exception to this is that some students from the Schools of Medicine, Public Affairs, and Social Work who are in concurrent MPH programs can—on a case by case basis—substitute the field experience assignments of their non-SPH program for their MPH practicum. The reason for this flexibility is that, in the case of these three schools, their fieldwork/internship requirements exceed those of the practicum. Therefore, we allow these other experiences to substitute for the practicum if the experience 1) is as substantive as the MPH practicum requirement, 2) requires at least as much time as the MPH practicum, 3) involves public health issues and skills, and 4) meets the explicit learning objectives of the MPH practicum. Detailed descriptions of the potentially substitutable field experiences in the Schools of Medicine, Public Affairs, and Social Work are provided in **Appendix 2.13.B**.

The culminating experience (thesis or capstone project) of concurrent degree students must be done in the SPH and meet the expectations for focus, rigor, quality, and effort of the dissertation/thesis/capstone project for their respective SPH degree programs.

2.13.C. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH offers a wide range of concurrent (joint) degrees.
- For each of these concurrent degrees, students must fulfill all requirements for their MPH, MS, PhD, or MHA degree in a manner equivalent to what would be required were they pursuing the degrees separately.
- The Graduate School formally recognizes these concurrent degrees and acknowledges them on the student's transcript.

Weaknesses/Challenges

- The small number of students in these concurrent degree programs, combined with the complexities involved with coordinating the requirements and schedules for two separate programs, makes the management and advising for these students more resource-intensive than for single-degree students.
- Concurrent students in COPHP deal with additional financial issues due to the fee-based program tuition structure of the COPHP program.

Plans

- The SPH will continue to be responsive to working with other degree-granting programs to create and enhance its concurrent degrees.

This criterion is met.

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 or degree and receives the academic credit.

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

The SPH offers two executive degree programs:

The MHA program offers an **Executive MHA program (EMHA)**, a part-time professional degree program that enables students to earn their master's degree in two years without leaving their current positions. This program is offered only in an on-site format. The EMHA program offers in-residence courses but on a modified, intensive schedule that meets the time demands of working professionals.

An executive MPH degree is offered through the **eMPH program**. This partial-distance program is a "blended" combination of distance learning and on-site weekend and summer sessions. The program can be completed in two years.

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

Executive MHA program

The EMHA program is described in **Criterion 2.8.A**. This program is offered as an executive program aimed at attracting mid-career working professionals. This program matriculates 40-50 students each year in two cohorts (vs. 25-30 students each year in the traditional in-residence MHA program). The executive format is attractive to working professionals, 75 percent of whom are clinically trained and do clinical work.

The MHA and EMHA programs have an approximately 90 percent course overlap (both content and instructor). Thus, the curriculum and instructional quality of the programs are virtually identical. All of the MHA instructors have academic appointments within the School of Public Health's Department of Health Services. Thus, the faculty evaluation and promotional standards are those of the Department of

Health Services. The program has dedicated administrative support, in addition to the support provided by the UW Professional and Continuing Education (PCE) division, which manages the financial aspects of both the in-residence and executive program. The evaluation of educational outcomes (including formats and methods) conform to the current accreditation standards of the Commission on Accreditation of Health Management Education (CAHME) and are monitored by program faculty, the Department of Health Services Curriculum Committee, and the SPH Curriculum and Educational Policy Committee in the same manner as the in-residence program. The MHA/EMHA curricula have been developed using the leadership competency model developed by the National Center for Healthcare Leadership (NCHL). Both the MHA and EMHA degree programs are taught by the MHA faculty of the Department of Health Services through PCE as fee-based or self-sustaining educational programs. The standards for all applicants for admission to these programs are determined and managed by the MHA/EMHA faculty and operationalized through PCE. The applications are identical, as are the application documentation requirements (with the exception of a requirement to submit standardized test scores (MHA [required] and EMHA [not required])). The faculty made this documentation requirement decision since they noted that 50 percent or more of the EMHA applicants were having the requirement waived because of completion of prior master or doctoral programs and because the faculty did not note any additional predictive benefit of the unequally applied test score requirement when compared to the predictive benefits of work experience and work performance as evaluated through “work-based recommendations.” Both MHA- and EMHA-enrolled students complete the SPH Competency Assessment, the results of which are reviewed by program faculty and leadership to correct deficiencies in curriculum and to ensure that self-assessed competency of the executive students match or exceed those of in-residence MHA students.

A detailed description of the curriculum and requirements for the EMHA can be found at <http://depts.washington.edu/mhap/emha> .

Executive MHP program

The Executive MPH program (eMPH) is offered in a hybrid format, with slightly less than half of the educational content delivered in a distance format. The eMPH program is designed for mid-career professionals in public, community, and environmental health. It helps develop skills to effectively manage today's population health and health care issues. The eMPH is a partial-distance program that requires some on-site attendance. The program can be completed in two years. Studies continue while off-site using the internet and email. The eMPH provides:

- Graduate education in core public health disciplines (Health Services, Epidemiology, Environmental Health, and Biostatistics)
- A focus on program management and evaluation, health promotion and education, and evidence-based research
- An introduction to research methods and, for those who work on a thesis, the opportunity to conduct a literature search, design a study, and collect and analyze data
- An opportunity to design an individualized course of study using elective courses, the thesis or capstone project, and practicum experience
- An opportunity for graduate-level education without quitting the workforce

All of the instructors in the eMPH program have academic appointments within the School of Public Health or, in a few cases, other schools at UW, and therefore meet the same requirements as in-residence teaching. The program has its own dedicated administrative support which is funded through program revenues. The quality of teaching and learning is monitored by program faculty, the Department of Health Services Curriculum Committee, and the SPH Curriculum and Educational Policy Committee in the same manner as in-residence MPH programs.

The on-site commitment involves eight on-site sessions per year, over a two-year period. Each session lasts between two to five days, depending on the quarter and subject matter. Most sessions are two to three days. A detailed description of the curriculum and requirements for the eMPH can be found at <http://depts.washington.edu/hsedp/degree>.

The University of Washington and the SPH require all distance education courses be reviewed in an intensive format by the curriculum committee of the respective department and the SPH Curriculum and Educational Policy Committee.

2.14.C. Description of the processes that the school uses to verify 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 or degree and receives the academic credit.

The EMHA program is taught on campus. Participation in classes, as well as attendance for exams, is monitored in the same fashion as for in-residence programs. The small class size allows faculty to monitor—and mentor—students on a personal basis.

Most courses for eMPH are offered in a hybrid format, so that students take their exams while on-site as opposed to at-a-distance. In some SPH distance courses offered through UW Professional and Continuing Education (PCE), students have the option of a proctored exam at PCE facilities in Seattle or Bellevue, WA, or through a process by which students at a distance may find and request a particular proctor in their local area. The individual must meet specific PCE criteria to be a proctor and must then be approved by PCE before exams are sent to the proctor. Most students use library proctor services, other universities, strict work-related proctors, or others who meet the guidelines.

2.14.D. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH offers and supports a part-time, partial distance MPH degree through the executive MPH program and a part-time, in-residence MHA degree through the Executive MHA program.
- These programs meet the needs of mid-professionals in the region and beyond.
- Each of these programs has carefully crafted learning objectives that are comparable to the learning objectives for the traditional MPH and MHA programs in the SPH.
- Each program practices extensive, continuous quality control and improvement efforts, including student, peer, and outside evaluation, as well as periodic curriculum review and revision.
- The executive MPH and Executive MHA programs are self-sustaining and generate adequate resources for educational and administrative support of the programs.

Weaknesses/Challenges

- The nontraditional nature of these programs requires a separate administrative structure and constant marketing efforts.

Plans

- The SPH will continue these two successful programs.

This criterion is met.

CRITERION 3.0: CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE

3.1 RESEARCH

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

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

The University of Washington is a Research I university. Since 1975, the University has ranked among the top five institutions in the United States in the receipt of federal research awards. For the past several years, the UW has ranked second overall in the nation and first or second among public institutions in receipt of federal funds. In 2011-12, the UW received \$1.5 billion in external (largely federal) research funds. The SPH is the second largest recipient of research awards at the UW, exceeded only by the School of Medicine.

A high level of research is crucial to fulfilling the SPH's mission of promoting better health, preventing illness and injury, ensuring more efficient and cost-effective health care services, and meeting the SPH's principal goals—particularly training public health researchers and practitioners. Excellence in research is one of the SPH's strategic goals and is essential for maintaining the SPH's national reputation, which in turn helps attract outstanding faculty and students. Many of the graduate programs in the SPH are research training programs, and the success and relevance of such training depends on faculty who are actively engaged in research. The SPH is among the top five schools at UW in attracting extramural funds for research. In 2011-2012, the SPH received \$185 million in grants and contracts.

SPH faculty believe that excellent graduate programs and excellent research programs are symbiotic; the strength of the SPH's educational program depends on the strength of its research. The availability of research assistantships is a key element in recruiting outstanding students. The ability to attract professional training grant support is enhanced by the research reputation of the faculty. In 2011-12, the SPH provided research assistantships, primarily from federally supported research and training grants, to 220 students.

Policies

All SPH faculty members in the professorial tracks are expected to make ongoing research contributions in their areas of expertise, seek and obtain external funding for research, and publish the results of their research in peer reviewed journals.

The SPH *Academic Affairs Handbook* (**Appendix 1.5.B**) delineates faculty expectations for research.

It is recognized that the research record commensurate with a given level of achievement varies from discipline to discipline within the SPH. Continued productivity in rank is considered at the time of evaluation. The successful candidate's research record should be of high quality, and his or her research should demonstrate substantial impact. Evidence of high quality and impact might include:

- Positive evaluation of research productivity, quality, and impact in letters from independent, recognized experts in the candidate's research area.
- Sustained productivity in publication, including substantial contributions as senior author, meeting the norms for the candidate's field.
- Scholarly reputation of the journals in which publications appear.

- Reputation of publishers of articles, books, and monographs.
- Citation of the research in other publications.
- Published evaluations of the research such as book reviews and responses in print.
- Awards received in recognition of outstanding research.
- Indications of research reputation among peers such as invitations to speak at or lead sessions at national or international scientific meetings; invited participation on advisory committees, peer review groups, and editorial boards; and leadership positions in professional societies.
- Serving as principal investigator (PI) on funded grants or contracts.
- Serving as a major scientific contributor on a funded research grant.

Senior authorships are considered according to the conventions of the field. Publications that bear the name of the faculty member's preceptee as senior author may be considered as a senior author publication of the faculty member if the candidate was a major contributor to the conceptual development and conduct of the research and to the preparation of the manuscript. This role should be described in documents accompanying the candidate's promotion packet. Important original contributions in books or monographs may also be considered when they are accompanied in the promotion packet by a description of their significance.

Some candidates will choose to emphasize academic public health practice as one venue for their scholarly contributions to public health. This is also described in the *SPH Academic Affairs Handbook*:

Academic PHP includes a wide array of activities. Regardless of the specific activities undertaken, the candidate's portfolio of academic PHP activities should be of high quality and demonstrate: (1) scientific rigor; (2) positive impact on the target community, population or organization; (3) effective dissemination; and (4) leadership. The quantity of documented academic PHP activities expected for promotion depends upon the anticipated weight being given to these activities in the candidate's review. A clear trajectory of increasing impact that includes plans for future years should be explained in the self assessment or highlighted in the SPH Curriculum Vitae (CV), because this will carry weight in the review for promotion.

It is recognized that this emphasis will generally result in fewer contributions in the area of research, although peer-reviewed contributions and a national or international scientific-professional reputation are expected for all candidates up for promotion.

Procedures and practices

Faculty develop research proposals for federal, state, and local agencies as well as private institutions. Proposals are submitted to the department chair, the dean's office, and the Office of Sponsored Programs for review and approval before being forwarded to the granting agency. The University's committees on Human Subjects (IRB) and Animal Care (IACUC) also review proposals when appropriate. The SPH associate dean for Research and Programs is a member of the University of Washington Human Subjects Policy Board to coordinate University-wide policy.

After awards are made, the grant or contract is managed and administered by the principal investigator together with the appropriate department administrator. All principal investigators are periodically required to attend a University-sponsored workshop on grant and contract management. A portion of indirect cost returns from grants and contracts are returned to the SPH by the University; these are distributed to the departments in proportion to the funds generated each year to provide research infrastructure support for departments and to support new initiatives and interdisciplinary programs. Of the total indirect costs the University receives to support the research infrastructure, one third to one half goes to SPH and almost all of that is returned to the departments in which the grant is administered. The SPH retains a small portion of these indirect cost returns to support school-wide research activities.

Research results are disseminated through peer-reviewed scholarly journals and presentations at professional meetings. These publications are listed in the Peer Reviewed Journals section of faculty CVs (*Appendix 4.1.A.ii*) and the publication output of the faculty is summarized in *Table 3.1.D*, which indicates that SPH assistant professors publish approximately three peer-reviewed articles a year, associate professors, four per year, and full professors, seven per year. These publications are widely cited as reflected by H-index scores.

Other methods of dissemination include final project reports, public testimony, public presentations, and various review publications. In addition, most faculty discuss current research findings and activities in class and seminar presentations.

Research at partner institutions

Much of the research of SPH faculty is conducted through our partner institutions (Fred Hutchinson Cancer Research Center, Seattle Children’s Hospital, Group Health Research Institute, etc.). Data on these grants/studies are not captured in UW data systems, but it is estimated that these grants account for at least 50 percent additional funding over those grant funds that come to UW directly.

SPH research centers and institutes

Although most research in the SPH is generated by investigator-initiated proposals, the SPH houses, or is a partner in, many research centers and institutes which serve as focal points—and homes—for much of the research activities of SPH faculty.

- [AIDS Research, University of Washington Center for \(CFAR\)](#)
King K. Holmes, Director
- [Biomedical Statistics, Center for](#)
Patrick Heagerty, Director
- [Cardiovascular Clinical Trials Center](#)
Susanne May, Director
- [Cardiovascular Health Research Unit \(CHRU\)](#)
Bruce Psaty, Co-Director; David Siscovick, Co-Director
- [Child Environmental Health Risks Research, Center for \(CHC\)](#)
Elaine Faustman, Director
- [Clean Air Research, UW Center for \(CCAR\)](#)
Sverre Vedal, Director
- [Clinical and Epidemiological Research, Center for](#)
Dedra Buchwald, Director
- [Collaborative Health Studies Coordinating Center \(CHSCC\)](#)
Richard Kronmal, Director
- [Comparative Effectiveness, Cost and Outcomes Research Center](#)
Jeffrey Jarvik, Director
- [Disability Policy and Research, Center for \(CDPR\)](#)
Donald Patrick, Director
- [Ecogenetics and Environmental Health, Center for \(CEEH\)](#)
David Eaton, Director
- [End of Life Care Research Program](#)
J. Randall Curtis, Co-Director; Donald L. Patrick, Co-Director
- [Genomics and Public Health, Center for \(CGPH\)](#)
Karen Edwards, Director
- [Global Center for Integrated Health of Women, Adolescents and Children \(Global WACH\)](#)
Grace John-Stewart, Director
- [Global Health Resource Center \(GHRC\)](#)
Daren Wade, Director
- [Harborview Injury Prevention and Research Center \(HIPRC\)](#)
Beth Ebel, Director

- [Health Promotion Research Center \(HPRC\)](#)
Jeffrey Harris, Director; Sheryl Schwartz, Deputy Director; Elizabeth Phelan, Associate Director
- [Institute for Health Metrics and Evaluation \(IHME\)](#)
Christopher J.L. Murray, Director
- [Institute for Public Health Genetics \(IPHG\)](#)
Karen Edwards, Director
- [Institute for Risk Analysis and Risk Communication \(IRARC\)](#)
Elaine Faustman, Director
- [International Clinical Research Center \(ICRC\)](#)
Connie Celum, Director
- [International Training and Education Center on HIV \(I-TECH\)](#)
Ann Downer, Director
- [Nanotoxicology Center, University of Washington](#)
Terrance J. Kavanagh, Director
- [National Alzheimer's Coordinating Center \(NACC\)](#)
Walter Kukull, Director
- [Northwest Center for Occupational Health and Safety](#)
Noah Sexias, Director; Joel Kaufman, Deputy Director
- [Northwest Center for Public Health Practice \(NWCPHP\)](#)
Susan Allan, Director
- [Obesity Research, University of Washington Center for \(UW-COR\)](#)
Adam Drewnowski, Director
- [Occupational Epidemiology and Health Outcomes Program](#)
Gary Franklin, Director
- [OSHA Training Institute Education Center](#)
Mike Willis, Director
- [Pacific Northwest Agricultural Safety and Health Center \(PNASH\)](#)
Richard Fenske, Director
- [Pacific Northwest Center for Human Health and Ocean Studies \(CH2O\)](#)
Elaine Faustman, Co-Director; Virginia Armbrust, Co-Director
- [Pharmaceutical Outcomes Research and Policy Program \(PORPP\)](#)
Sean Sullivan, Director; Beth Devine, Associate Director
- [Program in Health Economics and Outcomes Methodology \(PHEnOM\)](#)
Anirban Basu, Director
- [Public Health Nutrition, Center for \(CPHN\)](#)
Adam Drewnowski, Director
- [Resource Center for Health Policy \(RCHP\)](#)
Patricia Lichiello, Director
- [Seattle Quality of Life Research Group \(SEAQOL\)](#)
Donald Patrick, Director
- [Superfund Basic Research Program](#)
Harvey Checkoway, Director

Live links to information on these centers can be found on the SPH website:

<http://sph.washington.edu/research/centers.asp>

Strategic plan priority research growth areas: emerging public health challenges

Public health is a dynamic field, with constantly emerging and re-emerging health threats and challenges. The SPH's recently completed [Strategic Plan 2012-2020](#) identified six targeted areas for growth. The areas address pressing public health challenges and are based on strategic advantages such as existing strengths at the SPH, strength elsewhere at UW, and our potential to contribute to science and make a positive impact on the health of populations. Each topic has the potential to engage the entire SPH and build new bridges across departments and UW schools and colleges and affiliated community-based organizations. Growth in these areas will include each part of the SPH's mission: education—preparing outstanding, innovative, and diverse

public health leaders, research—advancing public health science and policies, and service—promoting the health and well-being of communities locally, nationally, and globally.

While no specific timelines are included in this Strategic Plan, addressing these emerging public health areas will require a phased approach, including fundraising. Successful implementation will be carried out through consultation and collaboration across the SPH, the UW campus, and with community partners. Over the next eight years, the SPH will be hiring new faculty to address the following six emerging challenges.

A. Global Environmental Change and Human Health

Accelerated changes in natural and built environments have unprecedented implications for human health and well-being on a global scale. Health can no longer be viewed solely through the lenses of medical care or public health. Long-term human security requires that gains in human health be accompanied by corresponding gains in the health and sustainability of ecosystems and built environments. There is a need for a systems approach that blends biomedical, social, and physical sciences, includes adaptive learning, and addresses decision-making in the face of uncertainty.

Our strengths in this area include a robust Department of Environmental and Occupational Health Sciences, methodological expertise in biostatistics and epidemiology necessary for methods development, and a global health orientation that corresponds to the scale of many environmental changes. There is extensive expertise in UW's colleges and schools of Environment, Built Environments, and Engineering. The "Climate Change and Global Health" initiative, launched by the Department of Global Health, has engaged faculty from 10 UW schools and colleges, focusing on food and water security under climate change. Moreover, there are strong funding prospects from private donors, foundations, and federal agencies. The UW has the opportunity to form a community of scholars across disciplines to become a leading academic center at the nexus of global environmental change and health.

B. Genomics and Public Health

Advances in genomics will increasingly help guide public health practice. Understanding genetic differences in disease susceptibility holds great promise in prevention research, as a full understanding of the etiology of multi-factorial diseases will be essential to identifying effective prevention strategies to reduce the burden of diseases. It is becoming the case that nearly every epidemiological study has a genomic component. Virtually every component of public health will be substantially impacted by changes in science and technology that relate directly to genomics. Genomic profiles may also determine how individuals respond to environmental exposures and so affect public health responses.

At the individual level, rapid advances in molecular technology have led to the new -omics fields of genomics, epigenomics, proteomics, metabolomics, transcriptomics, and lipidomics. At the population level, similarly vast arrays of detailed medical records allow the detection of subtle patterns to aid the formulation of mechanisms for the prevention and treatment of diseases that have previously been impossible with limited study populations. The enormous challenges to managing and interpreting these data are matched by equally enormous potential benefits for public health. There is a particularly pressing need for the development of new statistical methodologies. Research and training are needed to address problems of design and interpretation of studies of -omic and medical record data.

The UW is poised to be a national and global leader in this area. Within the SPH, faculty members in the Department of Biostatistics are leaders in developing and applying statistical methodologies for high-throughput -omic data in collaboration with researchers across UW and beyond. Existing strengths also include the Institute for Public Health Genetics, the Center for Genomics and Public Health—one of only two centers in the nation focused on integrating genomic advances into public health practice—and the Center for Ecogenetics and Environmental Health. The SPH houses coordinating centers for the multi-site GENEVA and GARNET whole-genome association study consortia. Additionally, there are relevant collaborations with UW Departments of Computer Science, Genome Sciences and Statistics, and the new Northwest Institute of Genetic Medicine and the Northwest Genomics Center in the School of Medicine.

C. Obesity, Food, Physical Activity, and Health

Obesity is a public health issue of growing importance. About two-thirds of U.S. adults are overweight or obese, with the disease burden falling disproportionately on disadvantaged minorities and groups. The consequences on morbidity and mortality as well as the associated medical, social, economic, and psychological costs demand speedy and effective solutions. Both food intake and physical activity play important roles. An understanding of food intake requires a multidisciplinary approach, ranging from dietetics and nutritional science to agricultural economics to the sociology and anthropology of food. An understanding of physical activity also requires a multidisciplinary approach, ranging from the design of buildings, neighborhoods, and cities, to the economic and social factors that determine health behaviors.

UW is well positioned to consolidate existing strengths and build selectively to become a leader in addressing this complex of issues. Strengths at the School of Public Health include the Center for Public Health Nutrition, the Health Promotion Research Center, the Center for Obesity Research, and the interdisciplinary graduate program in Nutritional Sciences. Methodological strength in biostatistics and epidemiology will help advance the multilevel analyses and complex models needed in this field. Colleagues in the UW College of Built Environments have strong interests in the intersection of their work with health, and colleagues in the College of the Environment are leading researchers in agriculture. There are strong collaborative links with both schools. SPH researchers also collaborate with partners at the Fred Hutchinson Cancer Research Center, Group Health Research Institute, and other partner institutions on investigations of obesity etiology and prevention, dietary and physical activity behavior change at worksites and in communities, and evaluation of health promotion programs and policies. In addition to such research activities, the SPH can assist with policy development and evaluation in the area of obesity prevention, healthy eating, and physical activity promotion by collaborating with local and state health agencies.

D. Health Policy and Health Systems

The U.S. health care system is the most expensive in the world. Yet the health of the U.S. population overall is demonstrably worse than that of most wealthy countries. The structure and incentives in our system have engendered fiscal inefficiencies and an inequitable and unpredictable distribution of care. And as the health care system continues to consume an ever greater share of our country's economy, health inequities in the system also continue to grow. A major impediment to achieving good outcomes, fairness, and fiscal efficiency in our system is the failure to infuse policy discussions with evidence and sound analysis.

UW can offer a meaningful contribution to the health policy dialogue locally, nationally, and globally. The School of Public Health has a history of health policy research, analysis, and service. This foundation will be expanded by applying the many strengths offered across our departments, including outcomes of research and comparative effectiveness research (Health Services); population risk assessment (Biostatistics and Epidemiology); environmental toxicants and occupational health services and outcomes research (Environmental and Occupational Health Sciences); and global health metrics and evaluation (Global Health). The SPH will foster policy research, teaching, and service linkages across departments and research centers, such as the Centers for Comparative and Health System Effectiveness and the Institute for Health Metrics and Evaluation, and with other UW schools and colleges, such as the School of Law and the College of Built Environments. The SPH will leverage existing collaborative relationships in the community, for example, with public health and social services agencies, executive-branch leaders, health care providers and purchasers, and community organizations. Growth in the policy area will allow the SPH to bring evidence and sound analysis to policy discussions in an environment of rapidly evolving health care system changes. This contribution also will help position the SPH as a highly successful competitor for federal, state, and foundation support for both applied and translational research.

E. Public Health Implementation Science

Implementation science is the study of methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice to improve the quality and effectiveness of health services and care. Implementation science is an emerging field, both domestically and globally, and an essential component of translating effective public health programs from evidence to action.

Implementation Science uses rigorous methods in practical field settings to improve health and well-being locally, nationally, and globally.

Many public health professionals trained in the classical scientific disciplines of public health (e.g., biostatistics, epidemiology, environmental health, health services) will go on to lead interdisciplinary public health programs. Future public health scientists and leaders therefore must understand not only delivery of innovation, but also innovation of delivery. For example, several exciting developments, some led by UW faculty or graduates, will lead to new multicomponent HIV/AIDS prevention programs. Interdisciplinary training and field experience in public health program science will enable future public health leaders to understand and undertake such efforts, along a program science continuum from new evidence to monitoring impact.

In a city rich with global health organizations and health agencies and with a faculty deeply experienced in implementing health programs, the University of Washington is well positioned to be a global leader in implementation science. The PhD in Metrics and Implementation Science, scheduled for launch in 2012, will be the first program of its kind in the United States, and will pave the way for further innovation in research, teaching, and service at the SPH and the University.

F. Social Determinants of Health

Health is influenced by the circumstances in which people are born, grow up, live, and work, as well as the systems put in place to deal with illness. The social determinants of health are a major contributor to health inequities and the differences in health status seen within and between countries. The World Health Organization identifies health as a key contributor to a wide range of societal goals. Health inequities constitute a clear indicator of the failure of a society's policies across many domains including education, housing, justice, and security. In the words of *Lancet* editor Richard Horton, "Public health is the science of social justice, overcoming the forces that undermine the future security of families, communities, and peoples."

Research and education about the social determinants of health is occurring at the SPH in various centers and institutes including the Institute for Health Metrics and Evaluation, the Health Promotion Research Center, and the Center for Disability Policy and Research. There are methodological challenges to building the evidence base, requiring statistical and epidemiologic expertise. The emphasis is on creating synergies around current work and developing new ideas that will advance the field of social determinants. Within the University of Washington there are opportunities to partner with the schools and colleges.

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

In addition to research conducted within the UW research centers and institutes described above, SPH faculty engage in a large amount of inter-institutional sponsored and collaborative research with a wide range of local, national, and international agencies and community-based organizations. Funded community-based research and service projects are identified in ***Appendix 3.1.C*** (research) and ***Appendix 3.2.C.i*** (service).

Our major research partners include:

- Centers for Disease Control and Prevention
- Fred Hutchinson Cancer Research Center*
- Group Health Research Institute*
- Health Alliance International*
- Institute for Health Metrics and Evaluation*
- Institute for Systems Biology*
- PATH
- Public Health–Seattle & King County*
- Seattle Biomed*
- Seattle Children’s Hospital Research Institute
- VA Puget Sound Health Care System*
- Washington State Department of Health*
- Washington State Department of Social and Health Services
- Washington State Labor & Industry*

(*organizations and agencies with formal agreements)

Many of these partnerships focus on, or incorporate, research directed at improving public health practice or the health of the community, and many have specific community outreach components or otherwise work in collaboration with community groups.

Northwest Center for Public Health Practice

Since 2008, the faculty affiliated with the Northwest Center for Public Health Practice (NWCPHP) have developed a portfolio of research activities in partnership with state and local health departments and associated community organizations to conduct research on practical questions of mutual interest. These have included several research activities on various aspects of communications related to public health emergencies; how local health departments can use community-specific data about the projected health impacts of climate change; and how emergency call centers can work more effectively with callers whose English is limited. NWCPHP faculty and staff have also been active the Washington State Practice-Based Research Network which links nine local health departments, the state department of health, and several units within the University of Washington to conduct practice-based research. In the last five years, the NWCPHP has expanded a focus on research, including public health and climate change, emergency public health communications, and public health systems and services. (<http://www.nwcpHP.org/research>)

3.1.C. A list of current research activity of all primary faculty identified in Criterion 4.1.a., including amount and source of funds, for each of the last three years. See CEPH Data Template 3.1.1; only research funding should be reported here. Extramural funding for service or training/continuing education grants should be reported in Template 3.2.2 (funded service) or Template 3.3.1 (funded training/workforce development), respectively.

CEPH Data Template 3.1.1 is found in ***Appendix 3.1.C***. (Note that the data in ***Appendix 3.1.C*** do not include the funded research of faculty members of Department of Global Health whose *primary* appointments are in the School of Medicine, even though this research is primarily in areas of public health. This anomalous situation arises from the MOU that established the Department of Global Health as a joint venture between the School of Public Health and the School of Medicine (see ***Appendix 1.4.D***). This MOU specifies that a faculty member whose primary appointment is in the Department of Global Health can be primarily appointed in either Public Health or Medicine, not both. The data included in CEPH Data Templates 3.1.1, 3.2.2, and 3.3.1 are only for faculty with *primary* appointments in the SPH.)

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

The SPH has an extensive research portfolio, with grants averaging above \$1 million per primary faculty member. The faculty and students are successful in publishing their research, and the research of the faculty is widely cited as measured by the H-index.

Table 3.1.D. Indicators of success in research

Indicator	Target	2009-10	2010-11	2011-12
Direct research-related grant support to SPH (\$)	Increase by 5% per year	\$168,050,762	\$193,591,099* (up 15.2% from 2009-10)	\$184,721,159 (down 4.6% from 2010-11, up 9.9% from 2009-10)
Mean annual number of publications of faculty in peer-review journals	Assist. Prof. >2 Assoc. Prof. >4 Full Prof. >6	Assist. Prof. 2.6 Assoc. Prof. 4.7 Full Prof. 6.7	Assist. Prof. 3.5 Assoc. Prof. 4.2 Full Prof. 7.5	Assist. Prof. 3.5 Assoc. Prof. 4.8 Full Prof. 6.7
Median h-index**	Assist. Prof. >5 Assoc. Prof. >10 Full Prof. >25	na	na	Assist. Prof. 6.5 Assoc. Prof. 13.5 Full Prof. 50
Percent of master's and doctoral students (n) with UW research assistantships[^]	Master's >20% PhD >75%	Master's 15% (64) PhD 64% (159)	Master's 18% (78) PhD 67% (165)	Master's 15% (64) PhD 62% (156)
Percent of students who publish while in program	Master's 20% PhD 90%	Master's 20% PhD 79%	Master's 21% PhD 78%	Master's 21% PhD 82%

*jump due to one-time large awards

**H-index is a measure of article impact used by Scopus. The h-index was developed by J. E. Hirsch and published in *Proceedings of the National Academy of Sciences of the United States of America* 102 (46): 16569-16572 November 15 2005. Source: SCOPUS quantifies citations only after 1995.

[^]excludes MHA students

3.1.E. Description of student involvement in research.

Students are active participants in research. The thesis requirements for the MPH and MS programs and the dissertation requirement for the PhD programs ensure that students acquire the skills and knowledge necessary to pursue an independent research project and write the results in an acceptable form. It is common for students to publish in peer-reviewed journals while in the program or shortly after graduation.

Typically, both master's and PhD students complete an independent research project resulting in a manuscript published in a peer-reviewed journal. For the master's degree, student research work often results in at least one published paper. PhD students average three to four published papers. First authorship is expected for the MS, MPH, and PhD. On exit surveys, approximately 80 percent of SPH graduates reported that they have published or plan to publish their thesis or dissertation (see **Table 3.1.E**). In addition to their own research, almost all PhD students and many master's students serve as research assistants on funded projects as noted in **Appendix 3.1.C** or are employed on an hourly basis on projects.

Virtually all PhD students are supported by research assistantships—approximately two-thirds through UW research and training grants and the remainder by research and training grants at our partner institutions (e.g., Fred Hutchinson Cancer Research Center, Seattle VA, Seattle Biomed, etc). Only 15 to 18 percent of MS and MPH students are supported by UW-based research assistantships.

Table 3.1.E. Student involvement in research

	2009-10	2010-11	2011-12
Percent of master’s and doctoral students (n) with UW research assistantships*	Master’s 15% (64) PhD 64% (159)	Master’s 18% (78) PhD 67% (165)	Master’s 15% (64) PhD 62% (156)
Percent of master’s and doctoral students planning to publish thesis or dissertation	Master’s 76% PhD 100%	Master’s 75% PhD 100%	Master’s 77% PhD 100%

*excludes MHA students

3.1.F. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH is one of the top schools of public health in the nation in external funding for research. The SPH has strong and productive research programs in all departments as measured by grant funding, faculty and student peer reviewed publications, impact of faculty publications, and doctoral involvement in research.
- The SPH houses or participates in a broad array of interdisciplinary research institutes.
- The SPH and the UW maintain a tradition of promoting cross-school (as well as inter-institutional) interdisciplinary research.
- Faculty (and students) enjoy collegial ties and effective collaboration with faculty across SPH departments and in other UW Health Sciences schools, as well as with colleagues across the university and with researchers at neighboring institutions.

Weaknesses/Challenges

- Lack of on-campus space has caused geographical dispersal of faculty and research facilities.
- Support of master’s students by research grants and traineeships is lower than desired.
- Continuing the current level of funding for research activities will be especially challenging in light of decreasing federal funds for research.

Plans

- Continue to promote interdisciplinary research with colleagues within and outside the SPH, especially through the SPH Strategic Planning initiative to build/strengthen research programs in six emerging areas of public health.
- Pursue Strategic Plan hires of new faculty in areas of emerging public health importance.
- Protect student support from research and training grants to the greatest degree possible in the eventuality of reductions of federal funding.

This criterion is met.

3.2 SERVICE

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

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

The SPH and the University are strongly committed to their service roles. The *University Policy Directory* states that “the University encourages faculty participation in public service. Such professional and scholarly service to schools, business, industry, and local, state, national, and international organizations is an integral part of the University’s mission” (*Faculty Code*, Chapter 24, Section 24-32). Service is a key component of the SPH mission as articulated in the SPH Strategic Plan 2012-2020.

As the only accredited U.S. school of public health in the Northwest, the SPH carries a responsibility to provide expert assistance to government and community agencies, industry, and business in the solution of regional public health problems. The SPH’s service activities enable faculty to bring knowledge of current public health practice problems to the classroom and to research projects. In addition, a strong relationship with community agencies and businesses is needed for the field training of students. With the establishment of the Northwest Center for Public Health Practice, the SPH has strengthened its capacity for community involvement throughout the region. In addition to collaborating with state, local, tribal, and federal agencies and community-based organizations, SPH also has contracts with the MPH programs in the six northwestern states to assist in teaching activities. SPH also co-hosts an annual public health practice and environmental health conference with the new public health programs at Simon Fraser University and the University of British Columbia.

Policies, procedures, and practices

The SPH *Academic Affairs Handbook* clearly states that service is an expectation for all faculty (see *Criterion 3.2.B*, below.)

An important development in the policy of the SPH is a revision to the *Academic Affairs Handbook* that allows faculty to elect contribution to public health practice (PHP) as a criterion for promotion described as follows:

Academic Public Health Practice: To encourage the advancement of scholarship in academic public health practice (academic PHP), the School of Public Health has established guidelines to evaluate scholarly academic PHP activities of faculty being considered for promotion. Faculty may choose to have their suitability for promotion be evaluated based in part upon their documented contributions to advancing academic PHP. It is recognized that individual faculty will differ in their respective emphases on academic PHP. Some faculty may have little or no involvement in academic PHP, while others may have contributed significantly to advancing academic PHP. It is important that faculty who choose to become involved in academic PHP plan these activities as early as possible in the promotion cycle and establish clear, explicit objectives for these activities. The academic PHP plan should be discussed with the departmental chair at annual reviews and should be updated as needed to reflect changes in objectives.

This promotion criterion recognizes the importance to the SPH of faculty leadership and engagement in PHP.

Northwest Center for Public Health Practice

The Center’s mission is to improve the quality and effectiveness of public health practice in the Pacific Northwest by linking academia and the practice community. The NWCPHP focuses its efforts on six states: Alaska, Idaho, Montana, Oregon, Washington, and Wyoming.

The Center was formed in 1990. In 2000, it became both an Academic Center for Public Health Preparedness, through funding from the U.S. Centers for Disease Control and Prevention (CDC) and the Association of Schools of Public Health, and a Public Health Training Center, through funding from the U.S. Health Resources and Services Administration.

The NWCPHP provides service to the practice community in many ways, in addition to the extensive array of workforce training. Activities have included providing program evaluation or coaching on program evaluation at the request of state and local health departments, providing technical assistance to health departments on an array of communications activities (such as editing and improving the layout of Oregon's plan for enhancing public health preparedness systems and skills), and coaching health departments that are moving toward accreditation.

The Center works with state health agencies and tribal health organizations, primarily through the Northwest Regional Public Health Workforce Development Network, to develop and implement a long-term, integrated approach to workforce development. The network assists the Center in setting goals and priorities and also provides mutual resources and support for its members.

The Center's core activities focus on five areas:

- Developing educational content for practice-based continuing education.
- Conducting on-site and distance-learning training.
- Holding workforce and leadership training institutes.
- Providing technical assistance to state and local health departments.
- Coordinating special projects related to workforce and public health improvement.

Health Policy Center Initiative

The Health Policy Center Initiative in the Department of Health Services helps move health policy analysis and decision-making forward at the local, regional, and national level through objective, rigorous, and accessible policy-relevant research, dissemination, and facilitation. The Initiative offers a variety of services, such as health policy research and analysis, strategic planning consultation, meeting and event facilitation, and policy information dissemination through publications, forums, web-based communication, and presentations. Initiative faculty and staff participate on community advisory groups and boards, and on national academic research networks. The Initiative hosts the Safe Table Forums series, which brings together stakeholders in Washington State's health system for informed discussion on timely, controversial topics. Topics in 2012 include, "Health Care Access for Adult Immigrants in Washington State" and "Family Planning Coverage for Low-Income Women in 2014."

UW policy to promote outside consultation

The University of Washington recognizes that faculty, librarians, and academic staff are experts in their chosen fields and are often offered consulting and professional opportunities for compensation beyond their UW employment. Executive Order No. 57

(<http://www.washington.edu/admin/rules/policies/PO/EO57.html>) states:

The University recognizes that individuals, the University, and the state benefit from faculty and staff involvement in and support of outside organizations and industry. Such involvement provides individuals opportunities to disseminate expert information outside of the traditional university employment structure while simultaneously providing individuals additional experiences, augmenting their ability to carry out their University responsibilities. The University benefits in its ongoing relationships with the local, regional, national, and international communities it seeks to serve.

The UW permits faculty to use one day a week (or 13 days per quarter) for outside consulting. This policy encourages faculty to develop working relationships with public and community agencies, outside

research organizations, and industry working in public health areas. UW faculty members complete an annual “Summary of Outside Professional Services” form that reports all outside activities, paid and unpaid.

SPH awards for service

In 1995, the SPH initiated an annual Community Service Award for faculty that is equal in stature to the annual award in teaching. The SPH also established an annual Community Service Award for students. These awards are presented each year at a school-wide ceremony.

Formal contracts or agreements with external agencies

The SPH has more than 60 affiliation agreements or statements of understanding with agencies throughout the Pacific Northwest. Examples of these agreements may be seen in *Appendix 3.2.A*. Examples are given below:

State Health Departments in the Northwest

The Northwest Center for Public Health Practice has formal contracts or memorandums of agreement with state health departments in Alaska, Idaho, Montana, Oregon, Washington, and Wyoming, and the Northwest Portland Area Indian Health Board. Joint activities involve needs assessments, capacity assessments, preparedness training, informatics, and other training and consultative services as determined by the health departments.

Public Health—Seattle & King County

The SPH and Public Health—Seattle & King County (PH-S&KC) were jointly awarded a grant in 2003 to develop an Academic Health Department. Although CDC funding for this project only lasted one year, projects continue, such as enhancement of practicum opportunities for SPH students in the many activities conducted by PH-S&KC.

Washington State Department of Labor and Industries

Since 1963, the Department of Environmental and Occupational Health Sciences (DEOHS) has had a Memorandum of Understanding with the State Department of Labor and Industries (L&I). DEOHS receives most of its state funding from L&I; in return DEOHS provides consultation, special field and laboratory investigations, and research on behalf of the industries and workers of the state. Staff members of the department’s Field Research and Consultation Group, consisting of industrial hygienists supervised by faculty in industrial hygiene and occupational medicine, carry out much of this work.

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

The SPH *Academic Affairs Handbook* explicitly describes the expectations for faculty service as follows:

Service requirement for promotion: The faculty in the SPH can be considered to be a community of scholars. They are members of the larger University community and also of the broader community outside the University. With these memberships come both benefits and responsibilities. Responsibility to the School includes the expectation that all faculty will serve the community at large in a professional capacity that enhances the standing of the School and the University as a whole and provides benefits to the broader society. In addition, faculty maintain operation of the School and contribute to its reputation through efforts to improve its programs and facilities. Responsibilities to the faculty member’s profession include the expectation that faculty will contribute to the maintenance and growth of their profession....Service to the University and the broader community, and involvement in professional service activities outside the University, will be considered in recommending a faculty member for promotion. Such activities cannot substitute for teaching or research activities in meeting the minimum

requirements for promotion, but they will be considered in evaluating a faculty member's overall suitability for promotion.

3.2.C. A list of the school's current service activities, including identification of the community, organization, agency or body for which the service was provided and the nature of the activity, over the last three years. See CEPH Data Template 3.2.1. Projects presented in Criterion 3.1 should not be replicated here without distinction. Funded service activities may be reported in a separate table; see CEPH Data Template 3.2.2. Extramural funding for research or training/continuing education grants should be reported in Templates 3.1.1 (research) and 3.3.1 (funded workforce development), respectively.

Faculty engage in a wide variety of service activities ranging from voluntary work in neighborhood organizations to paid consulting for public and private health organizations. (See **Appendix 3.2.C.i** for CEPH Data Template 3.2.1 and **Appendix 3.2.C.ii** for CEPH Data Template 3.2.2). Examples of the types of service activities conducted by the faculty are listed below. Further details on faculty service are found in the individual faculty CVs available in the **Appendix 4.1.A.ii**.

- Grant Reviewing Bodies
- Advisory Boards
- Public Speaking to Community and Worker Groups
- Editorial Boards
- Manuscript Reviews (not included in **Appendix 3.2.C.i**)
- Consultancies
- Expert Panels
- Technical Assistance

The faculty of the SPH participate in a wide range of collaborative service activities with partners in state and local public health agencies, advocacy/policy groups, and health care organizations, such as:

- Academic Alliance Foundation
- Accordia Global Health Foundation
- Center for Studying Health System Change
- Center on Budget and Policy Priorities
- Centers for Disease Control and Prevention (CDC)
- Community Pediatric Foundation of Washington
- de Beaumont Foundation, Inc.
- Directors of Health Promotion and Education (DHPE)
- Health Resources and Services Administration (HRSA)
- Healthy Housing Solutions, Inc.
- Kitsap County Health District
- Liverpool School of Tropical Medicine
- Management Sciences for Health (MSH)
- Montana Health Research and Education Foundation (MHREF)
- Montana State University, Bozeman
- Multnomah County Health Department
- National Institute for Occupational Safety and Health (NIOSH)
- North Central Public Health District
- Northrop Grumman Information Technology, Health Solutions and Services
- Northwest Indian College
- Oregon Health and Science University (OHSU)
- Public Health Foundation Enterprises (PHFE)
- Public Health–Seattle & King County (PHSKC)

- Snohomish Health District
- State of Montana
- Treeswing
- University of California, Los Angeles (UCLA)
- US Department of State
- Washington State Department of Health
- Washington State Department of Labor and Industries
- Washington State Department of Social and Health Services (DSHS)
- Washington State Parks and Recreation Commission
- Washington State University (WSU)

3.2.D. Identification of the measures by which the school may evaluate the success of its service efforts, along with data regarding the school’s performance against those measures for each of the last three years.

Table 3.2.D. Indicators of service activities

Indicator	Target	2010-12
Percent of core faculty engaged in local or regional service activities	33%	40%
Percent of core faculty engaged in national service activities	80%	77%
Percent of core faculty engaged in international service activities	33%	39%
Percent of core faculty engaged in any service activities	100%	97%

Virtually all SPH faculty are involved in local, regional, national, or international services activities (in addition to peer review of manuscripts); more than a third participate in international service (excluding research). The 3% of faculty who had no record of service on their CVs were primarily newly hired assistant professors or lecturers.

3.2.E. Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.

The SPH views service as an integral part of our mission. Students contribute a great deal to the field of public health through their engagement in service through both structured and unstructured opportunities with community agencies, government, industry, and others on a local, state, national, and international level.

Examples of off-campus student service activities in the past three years:

- In partnership with the Bill & Melinda Gates Foundation (BMGF), faculty of the SPH have created an innovative program, “Strategic Analysis, Research and Training” (START) that combines the training of future global and public health professionals with the provision of high-quality research support services to organizations working in global health. Under the START program model, teams of graduate students and faculty mentors in public health, global health, medicine, epidemiology, business administration, and public policy provide analysis and research support to global health program efforts. Since its inception almost 2 years ago, START has worked with a variety of program teams at the BMGF and successfully completed over 30

research and analysis projects. Enthusiastic feedback has led to growing interest in expanding the services of this program to additional domestic and international organizations, including PATH, Public Health–Seattle & King County, and others.

- Faculty and students have worked with environmentally focused nonprofit groups such as Washington Physicians for Social Responsibility, the Washington Toxics Coalition, the Duwamish River Cleanup Coalition and National Parks Service health programs.
- Students volunteer with a wide range of local nonprofits, such as Gay City Health Project, Lifelong AIDS Alliance, the Country Doctor Youth Clinic, Habitat for Humanity and SeaMar Community Health Center, Rainier Beach Urban Farm, Seattle Tilth, Cooking Matters, Food Lifeline, Marra Farms, the Hunger Intervention Program, and various food banks.
- Faculty and students have worked with food and nutrition centered agencies such as organic farms.
- Faculty serve as members of local city and county councils advocating for issues such as bicycle safety, removal of foods with trans fats from restaurants, youth literacy, and access to housing.
- Faculty and students are involved with programs providing public education on current public health issues such as “Paws on Science” at the Pacific Science Center, facilitating interactive activities to introduce young kids and their families to core concepts and issues in public health genetics.

Many of our students are involved in service on campus as well, e.g., in the following capacities:

- Our students developed and staffed an interactive table at Husky Days, where they engaged with kids and families to raise awareness about public health, gene-environment interactions, and the impact of healthy choices. Through active involvement on the organizing committee for the Western Regional International Health Conference. This event, which began as a student-inspired, student-run conference, now draws close to 1,000 students, faculty, staff, residents, and community members from the western half of the United States and Canada and cites the University of Washington as its home institution. Student organizers are committed to pursuit of a career in global health, including nursing, medicine, social work, law, business, public health, dentistry, and pharmacy.
- Students are active members of the “Health Equity Circle,” an interdisciplinary organization of University of Washington students and community members focused on creating health equity. Main areas of focus include access to healthcare, food security, rural and immigrant health, and disparities. This group regularly plans and publicizes opportunities for students to engage in service, and hosts an annual service-learning “kickoff” event to connect students across our health sciences schools.
- Students are peer tutors, doing outreach and public health education for local high school and nonprofit groups.

Because of its practice focus, the Community-Oriented Public Health Practice (COPHP) program requires a substantial service-learning component. This component uses extensive fieldwork with organizations, agencies, and communities to help students integrate course work with real-world experiences. During the first year, students work in a local health department or at other community-based field placements to help them acquire practical skills, often beyond the expectations for the practicum. In the second year, students select a community-based agency or organization with which to work on a year-long capstone project. (See *Appendix 3.2.E* for a description of these projects.) Additionally, much of the COPHP coursework involves working directly with community agencies to contribute to the solving of real-time public health issues.

3.2.F. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The school has a strong record of community and professional service.
- Faculty provide consultation to communities, government, biotechnology, and health care organizations, as well as to policy makers.
- Service activities of faculty are varied and compatible with the mission and goals of the SPH.
- Service and contributions to public health practice are explicit criteria for faculty promotion.
- SPH recognizes academic public health practice as a pathway for promotion.
- The Northwest Center for Public Health Practice and the Northwest Center for Occupational Health and Safety provide extensive outreach, training, and service in the region.
- Student practicum and capstone projects engage virtually all MPH and MHA students in local, regional, and international service activities.
- SPH undergraduate degree programs encourage service learning

Weaknesses/Challenges

- Extensive infrastructure and resources are required to maximize the benefit of student experiential/service learning (including the MPH Practicum).
- Although all faculty participate in service activities, and service is an explicit criterion for promotion, service is considered to be less important for promotion than are teaching and research.

Plans

- Continue to allow faculty to elect to have the option of using contribution to public health practice as a criterion for promotion.
- Continue to recognize service as a necessary requirement for promotion.
- Continue to provide annual faculty awards for exemplary service.
- Work with the Gates Foundation and Public Health–Seattle & King County to expand the very successful START program to address local and domestic public health challenges.
- The undergraduate Public Health major program has partnered with the Carlson Leadership and Public Service Center, within the UW in the Center for Experiential Learning, to identify service-learning options through which undergraduate Public Health majors can complete their capstone requirement. The Carlson Center has extensive community connections, as well as a sophisticated infrastructure to help manage the student placements. Through this program, groups of four to five students will complete 50 hours of service learning to get exposure to people and public health issues. We anticipate we will offer three sections to serve 75 students in the next academic year. In order to enrich the learning experience of our students and to generate a sense of community across the school and affect meaningful change, two school-wide service days are scheduled annually, in September and April, to provide direct experience and an opportunity for meaningful engagement with the populations with whom we work. The first of which is focused on incoming students and is a required component of new student orientation.
- Institute monthly volunteer opportunities with the Undergraduate Student Public Health Association.
- Publicize new volunteer opportunities on a “volunteer opportunities” page on our website.

This criterion is met.

3.3 WORKFORCE DEVELOPMENT

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

3.3.A. Description of the ways in which the school periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.

The Department of Environmental and Occupational Health Sciences assesses needs for its continuing professional education and workforce training programs in several ways:

- Periodic alumni surveys
- Evaluation forms for continuing education courses that include a section for participants to describe their needs for additional training
- An email survey for participants in Occupational Medicine Grand Rounds after sessions, soliciting evaluation feedback and suggestions for topics for future grand rounds
- Informal mechanisms: discussions with faculty and participants at conferences, workshops, and courses

Northwest Center for Public Health Practice (NWCPHP) uses several methods to ensure that its activities are responsive to the needs of the practice community. Training-related activities are planned with the involvement of a long-standing advisory group, the Regional Network Steering Committee (RNSC), which includes representatives of official state, local, and tribal public health organizations for all six states. The RNSC convenes formally twice a year to review and update plans and activities. Throughout the year, RNSC members also provide comments and reviews of proposals and serve as a channel to NWCPHP to identify emerging training needs or opportunities to serve the public health agencies and organization in other ways.

The projects of the Department of Global Health's International Training and Education Center for Health (I-TECH) are collaborative undertakings with ministries of health and education. Together with national working groups in each country, I-TECH engages in the planning and implementation of educational programs that are responsive to the specific needs and resources of the country. I-TECH also leads faculty development training to help the host countries become partners in education and eventually self-reliant.

3.3.B. A list of the continuing education programs, other than certificate programs, offered by the school, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified. Funded training/continuing education activities may be reported in a separate table.

Table 3.3.B.i summarizes the continuing education activities of the SPH over the past three years.

Table 3.3.B.i. Numbers of students participating in continuing education programs offered by the SPH over the previous three years.

Continuing education opportunities	July 1, 2009 - June 30, 2010	July 1, 2010 - June 30, 2011	July 1, 2011 - June 30, 2012
Northwest Center for Public Health Practice	4944 (28 courses)	5605 (30 courses)	5887 (34 courses)
Northwest Center for Occupational Health and Safety	1245 (35 courses)	895 (36 courses)	807 (48 courses)
Other programs of the Department of Environmental and Occupational Health Sciences (Pacific Northwest OSHA Education Center)	1538 (69 courses)	1597 (108 courses)	1248 (107 courses)
Department of Global Health Distance Learning	Not offered	Not offered	920 (3 courses)
International Training and Education Center for Health	24,188 (1,193 courses)	22,797 (1,100 courses)	23,249 (1,019 courses)
Department of Biostatistics Summer Institute in Statistical Genetics	346 (22 courses)	346 (22 courses)	311 (22 courses)
Summer Institute in Statistics and Modeling for Infectious Diseases	110 (11 courses)	159 (14 courses)	125 (14 courses)
Summer Institute in Biostatistics	Not offered	Not offered	41 (6 courses)
Center for Public Health Nutrition	613 (multiple courses)	221 (multiple courses)	377 (multiple courses)

A line listing of externally-funded work-force development and training support (CEPH Data Template 3.3.1) can be found in *Appendix 3.3.B*.

3.3.C. Description of certificate programs or other non-degree offerings of the school, including enrollment data for each of the last three years.

SPH offers certificates through three mechanisms:

Graduate certificates offered through the Graduate School

The SPH offers 12 Graduate Certificate Programs, which are generally taken by matriculated students in the SPH—or in graduate programs in other units of the UW—during their graduate studies. These Graduate Certificates provide a credential on the transcript documenting that the student successfully completed an organized, 15-credit program in one of the specialty areas in the following table. Only six credits taken for a student’s primary degree can count toward a Graduate Certificate.

Table 3.3.B.ii. SPH Graduate Certificate Programs

Certificate	Certificate Objectives
Advanced Clinical Research	To provide introductory training in epidemiologic methods, biostatistics, general research design principals, and design of clinical trials.
Basic Clinical Research	To provide advanced training in epidemiologic methods, biostatistics, general research design principals, and design of clinical trials.
Emergency Preparedness/ Response	To provide students with the knowledge and skills necessary to (1) recognize indications of a terrorist event or other public health emergency; (2) meet the acute care needs of patients and victims including pediatric and vulnerable populations in a safe and appropriate manner; (3) rapidly and effectively alert the public health system of such an event at the community, state, and national level; and (4) participate in a coordinated, multidisciplinary response.
Global Health	To provide a unique perspective and an in-depth understanding of the interrelationship between social and economic development and health status of populations, utilization patterns and evaluation of health systems, health care financing mechanisms and their evaluation, current issues in health systems delivery and disease control programs, and research methods appropriate for developing country settings. To help students develop and assess responses that strengthen the capacity of health systems and communities to improve their own health outcomes, through instruments of cooperation, diplomacy, and solidarity that involve multi-disciplinary and intersectoral approaches.
Global Health of Women, Adolescents, and Children	To introduce students to major health issues and methods of prevention related to achieving healthy women, adolescents, and children as well as issues that are faced by those in developing countries.
Global Injury and Violence Prevention	To devise approaches for better prevention and treatment of injuries and violence; to explain how improvements in care of injured persons (trauma care) can be approached systematically as part of overall health system strengthening activities, at all points along the spectrum of pre-hospital care, hospital based care, and rehabilitation.
Health Behavior	To give enrollees the basic core competencies in health promotion and health behavior science, as well as the competencies to pass national certification exam in health education (Certified Health Education Specialist).
Health Management	To give graduates the basic core competencies in management, personal leadership, and health care financial management.
Health Policy	To give students the core competencies in health policy, policy development, politics, law, economics.
HIV & STIs	To examine the HIV and STIs at both domestic and international levels; to equip future professionals in health, policy, and social science disciplines to address the complex interplay of biomedical, social, economic, gender, political, and geographic factors that impact the spread and disease course of HIV & STIs.
Maternal & Child Health	To give graduates an overview of the historical, political, and legislative basis for health and social services for mothers and children in the United States, and to introduce students to the etiology and prevention of maternal mortality and major health problems, and the etiology and prevention of child mortality and morbidities associated with biomedical or psychosocial risk.
Public Health Genetics	To provide training in three primary areas of public health genetics: <ol style="list-style-type: none"> 1) Genetic epidemiology 2) Pharmacogenomics 3) Ethical, legal, and social issues connected with genetics

Certificates offered through UW Professional and Continuing Education

The MHA program, in collaboration with UW Educational Outreach, also offers a **certificate program in Medical Management** for mid-career physicians and other clinical practitioners seeking advanced preparation for executive positions in health care organizations. This four-course evening program allows clinically oriented professionals to gain knowledge and skills in planning, organizing, and implementing programs designed to address needs and improve the quality of patient care within the changing health care environment. This program does not confer UW academic credit.

A **Certificate in Public Health Practice** is a for-credit program offered by the eMPH program to provide graduate-level educational opportunities to current practitioners in the field of public health who may not be able to make a long-term commitment to a full MPH program, or already have several master's or doctoral degrees, but want a better understanding of public health. This certificate program has been designed so that students complete the same introductory and core public health courses taken by all first-year eMPH students. The work necessary to earn the certificate is conducted through a combination of on-site courses and partial distance-learning courses over three quarters.

The Department of Biostatistics offers a three-course distance-learning **Applied Biostatistics Certificate** based on its in-residence introductory biostatistics sequence (BIOSTAT 511, 512, and 513). This certificate program can be taken for UW academic credit or for continuing education credits. The Department is currently implementing a second certificate in **Advanced Applied Biostatistics**.

The Department of Global Health and the Institute for Health Metrics and Evaluation offer a not-for-credit **Certificate in Global Health Metrics and Evaluation**, funded by the Centers for Disease Control and targeted at residents in the Field Epidemiology Training Program and the Epidemiology and Laboratory Training Program.

The Department of Health Services, with the School of Pharmacy, offers a **Certificate in Health Economics and Outcomes Research**. Students in this program are introduced to the principles of health economics; improve decision-making in a complex health care environment; understand health care markets and systems throughout the world; evaluate the effectiveness of medical treatments, interventions and technologies through outcomes research; identify the value behind health care practices and policies; and gain experience with decision modeling, micro-simulation and assessment of uncertainty, and principles and practices of Health Technology Assessment (HTA).

The Department of Health Services offers a post-baccalaureate **Certificate in Health Informatics and Health Information Management** which confers eligibility to sit for a national certifying exam to become a Registered Health Information Administrator (RHIA).

Certificates offered through individual programs

The Northwest Center for Public Health Practice, Pacific Northwest OSHA Education Center, and the International Training and Education Center for Health (described below) provide their own certificates for completion of some of their training programs. These certificates do not confer any University of Washington academic credit or credential.

3.3.D. Description of the school's practices, policies, procedures and evaluation that support continuing education and workforce development strategies.

The SPH provides workforce development programs primarily through all of its departments. The largest efforts are in:

- the Department of Health Services through the Northwest Center for Public Health Practice
- the Department of Environmental Health Sciences through several on-going programs
- the Department of Global Health, primarily through their International Training and Education Center for Health

These three programs are described briefly below.

Training the public health workforce is one of the core functions of the **Northwest Center for Public Health Practice (NWCPHP)** funded by CDC and the U.S. Health Research and Services Administration (HRSA). The center develops, in collaboration with partners in the six Pacific Northwest states, a variety of public health practice-oriented training programs each year, including its annual Summer Institute for Public Health Practice. Some of these are conducted locally, while others are developed for region-wide audiences. NWCPHP is making increased use of the Internet for public health workforce training.

The Department of Environmental and Occupational Health Sciences conducts the following workforce development programs:

- The **Northwest Center for Occupational Health and Safety Continuing Education** program supports professional, employer, and worker education in industrial hygiene and safety, ergonomics, occupational medicine, and occupational health nursing.
- The **Pacific Northwest OSHA Education Center** offers open enrollment courses, which are tailored to individual employers, and Safety and Health Specialist Certificate programs, and meeting standards set by the Occupational Safety and Health Administration (OSHA).

The **Northwest Center for Occupational Health and Safety (NWCOHS)** offers continuing education courses for workers in safety and health, occupational medicine, and environmental health. It is funded by contracts from NIOSH to DEOHS, and is nationally recognized for the quality and variety of its continuing education programs. Department faculty participate actively in program planning and lecturing, along with speakers from government agencies, other universities, medical facilities, private industry, unions, law firms, and consulting firms. The **OSHA Education Center** offers high quality, standards-based training for workers, management, and health and safety professionals in the private and public sectors. An experienced team of OSHA-authorized instructors presents information on federal and state safety and health regulations.

The **International Training and Education Center for Health (I-TECH)** is a center in the University of Washington's Department of Global Health and has 10 offices and some 600 worldwide staff in Africa, Asia, the Caribbean, and the United States who work with partner organizations to support the development of health work forces and health delivery systems. I-TECH is housed in the UW Department of Global Health, which employs over 300 faculty, fellows, and research scientists in global health research and training and focuses on identification and evaluation of health problems and health inequities in underserved populations, and on the development and implementation of innovative interventions that can dramatically reduce disease burden. I-TECH is a global network that supports the development of a skilled health work force and well-organized national health delivery systems, in order to provide effective prevention, care, and treatment of infectious disease in the developing world.

In addition, departments and programs in the SPH offer a small number of well-attended continuing and professional education programs throughout the year. For example,

- Biostatistics and Epidemiology conduct summer institutes. In 2013 there will be three

institutes/conferences in Seattle: Summer Institute in Statistics and Modeling for Infectious Diseases, July 8-24, 2013; the Summer Institute in Statistical Genetics, August, 12-16 2013; and the SOG Conference: “Impact of Large-Scale Genomic Data on Statistical and Quantitative Genetics November 24-26, 2013: <http://www.biostat.washington.edu/suminst/sisg/general/>.

- Since 2004, the Master of Health Administration (MHA) program has sponsored a best practice workshop series for health care executives and governing board members. Typically, there are four seminars during the academic year.
- The Institute for Health Metrics and Evaluation (IHME) co-sponsors an annual Global Health Metrics & Evaluation Conference (GHME), as well as numerous workshops throughout the year.

All of the programs listed above operate with steering committees that include UW faculty and external members of the profession. They produce annual reports for their respective steering committee and funders, which are also reviewed by the chairs of the department in which they are housed.

Until recently, there has not been a central, school-wide oversight and planning body for these programs. Most operate using different distance learning technology. There has been little synergy among these centers, programs, and activities. Some programs operate independently and some utilize the UW Professional and Continuing Education Office to support their programs. The newly formed Distance Learning and Learning Technology Committee, chaired by the associate dean for Academic Affairs, has been charged with helping these programs work together and share their experiences in order to develop the SPH’s distance learning capacity with the best technology and pedagogy.

3.3.E. A list of other educational institutions or public health practice organizations, if any, with which the school collaborates to offer continuing education.

The UW Northwest Center for Public Health Practice closely collaborates in offering short public health practice institutes with other state universities in the region, including the University of Alaska–Anchorage, Portland State University, Montana State University, and the University of Wyoming. Its steering committee includes representatives from the state health departments of Alaska, Idaho, Montana, Oregon, Washington, and Wyoming, the Washington State Association of Local Public Health Officials, the Washington Public Health Association, and the Northwest Portland Area Indian Health Board (NPAIHB), which represents all 43 federally recognized tribes in Washington, Oregon, and Idaho.

The Northwest Center for Occupational Health and Safety is one of 18 Education and Research Centers (ERCs) funded by the National Institute for Occupational Safety and Health (NIOSH). The Pacific Northwest OSHA Education Center is the only OSHA-authorized training facility in the Pacific Northwest. DEOHS is also a participant in the five-university Western Regional Universities Consortium, a National Institute of Environmental Health Sciences (NIEHS) funded effort to provide training for superfund site workers, emergency response personnel, and hazardous waste transporters and workers. This funding support helps us collaborate with community-based and tribal organizations to provide training for underrepresented minorities.

I-TECH partners with ministries of health and universities in over 16 low-income countries in Africa, Asia, and South America, as described on its website <http://www.go2itech.org/where-we-work>.

3.3.F. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH houses workforce development programs that serve the region and the world.
- The Northwest Center for Public Health Practice has a 22-year history of working with the practice community on workforce training, and service activities such as program evaluation and technical assistance.

- The Department of Environmental and Occupational Health Sciences has extensive continuing- and worksite-educational programs in the region.
- The International Training and Education Center for Health is an internationally recognized leader in public health training.
- SPH offers a large number of certificate programs in a variety of areas of public health.
- Departments and programs in the SPH conduct regular courses and programs for professional development of researchers and practitioners.
- The UW and the SPH have a wide range of expertise and technology to assist in enhancing and expanding our distance learning and workforce development programs.

Weaknesses/Challenges

- The SPH recognizes a large need for continuing education, work-force development, and assistance in developing capacity for public health education in low-income countries.
- The extensive activities in workforce development and distance learning have not been well coordinated or consistently “branded.”

Plans

- The Dean has established a Distance Learning and Learning Technology Committee to coordinate, promote, and advance the effectiveness of these activities.

This criterion is met.

CRITERION 4.0: FACULTY, STAFF, AND STUDENTS

4.1 FACULTY QUALIFICATIONS

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

4.1.A. A table showing primary faculty who support the degree programs offered by the school. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification*, g) graduate degrees earned, h) discipline in which degrees were earned, i) institutions from which degrees were earned, j) current instructional areas and k) current research interests. See CEPH Data Template 4.1.1.

The SPH has 151 primary faculty who support the teaching, research, and service mission of the school. Ninety percent are full-time or nearly so. Approximately one-third have tenure (which in the SPH is almost always 50 percent) or are tenure-track assistant professors. These faculty come from a wide range of academic backgrounds including biostatistics, epidemiology, health economics, anthropology, medicine, microbiology. A detailed listing (CEPH Data Template 4.1.1) describing these faculty members is found in **Appendix 4.1.A.i**. Curriculum Vitae for the primary faculty are found in **Appendix 4.1.A.ii**, organized by home department.

4.1.B. If the school uses other faculty (adjunct, part-time, secondary appointments, etc.), summary data on their qualifications should be provided in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to the school, e) gender, f) race, g) highest degree earned (optional: schools may also list all graduate degrees earned to more accurately reflect faculty expertise), h) disciplines in which listed degrees were earned and i) contributions to the school. See CEPH Data Template 4.1.2.

In addition to the 151 primary faculty, 105 additional faculty members participate in teaching, research, and service in the SPH. In addition to collaborating in research, these individuals devote anywhere from 5 to 50 percent of their time to the SPH, often teaching courses, chairing thesis and dissertation committees, advising students, and participating in department service and governance activities. Although all of these faculty have full faculty appointments in the School of Public Health, they are not considered to be primary SPH faculty because 1) they have a joint appointment in the SPH but their primary academic appointment is in another UW department or 2) they receive their salary from one of our three affiliate institutions (Fred Hutchinson Cancer Research Center, Veterans Administration Puget Sound Health Care System, or Seattle Children's Hospital). A detailed listing of these faculty members is found in **Appendix 4.1.B**. (Note that the chair and vice chair of the Department of Global Health, who have joint appointments—with full voting privileges—in both the Schools of Public Health and Medicine, are *not* listed in this table because their *primary* appointment is in the School of Medicine. This anomalous situation arises from the MOU that established the Department of Global Health as a joint venture between the School of Public Health and the School of Medicine [see **Appendix 1.4.D**]. This MOU specifies that a faculty member whose primary appointment is in the Department of Global Health can be primarily appointed in either Public Health *or* Medicine, not both. Because CEPH Data Template 4.1.1 is only for faculty with primary appointments in the SPH, faculty members in the Department of Global Health whose appointments are *primarily* in the School of Medicine are not listed in **Appendix 4.1.B**, CEPH Data Template 4.1.2, regardless of their teaching, research, and governance responsibilities.)

4.1.C. Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the school. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

Many members of the core SPH faculty have worked in public health agencies or practice prior to their appointment in the SPH:

Centers of Disease Control: Howard Frumkin, Mark Oberle, Bud Nicola, Jeff Harris, Robert Martin, Ali Mokdad

Food and Drug Administration: Larry Kessler

State and Local Health Departments: Jack Thompson, Susan Allan, Karen Hartfield

Epidemic Intelligence Service: Fred Connell, Mark Oberle, Jeff Harris;

Health Care Management and Policy: Will Welton, Bill Dowling, Andy Stergachis, Mary Alice Hankin, Gretchen Murphy, Kathleen Peterson

These individuals are critical members of the faculty; their experiences and expertise inform and enhance the teaching in the school.

Recognizing the importance of having faculty members engaged in practice participate in the educational and research activities of the university, the UW promotes the inclusion of faculty from outside of our school, by the use of three faculty titles for individuals who are employed outside the University.

Clinical appointments: A clinical appointment in the appropriate rank or title is usually made to a person who holds a primary appointment with an outside agency in a non-academic unit of the University, or who is in private practice. Clinical faculty make substantial contributions to University programs through their expertise, interest, and motivation to work with the faculty in preparing and assisting with the instruction of students in practicum settings.

Affiliate appointments: An affiliate appointment requires qualifications comparable to those required for appointment to the corresponding rank or title. It recognizes the professional contribution of an individual whose principal employment responsibilities lie outside the colleges or schools of the University.

“PDR” (paid direct) appointments: A PDR appointment is similar to an affiliate appointment but is limited to persons a) who are employed by one of three closely affiliated institutions (Fred Hutchinson Cancer Research Center, Seattle Children’s Hospital, or Veterans Administration Puget Sound Health Care System) and b) who were hired based on a joint search with a SPH Department.

Over 400 faculty members with expertise in public health practice, policy, and science are appointed to the SPH using one of three of these titles, and all SPH departments benefit from the participation of these faculty who contribute to teaching, mentoring, and other activities of the SPH. **Table 4.1.C** lists some of these practice-based agencies and organizations.

Table 4.1.C. Home agencies and organizations of clinical and affiliate faculty

Agency/Organizations	No. of faculty
Public Health—Seattle & King County	52
Other local health departments	10
Washington State Department of Health	8
Bill and Melinda Gates Foundation	7
PATH	7
Centers for Disease Control and Prevention	7

4.1.D. Identification of measurable objectives by which the school assesses the qualifications of its faculty complement, along with data regarding the performance of the school against those measures for each of the last three years.

Table 4.1.D: Qualifications of Faculty

Indicator*	Target	2009-10	2010-11	2011-12
Assistant, associate, and full Professors have a doctoral degree	100%	100%	100%	100%
Student rating of academic standards on exit surveys	Masters: 4.2 PhD: 4.5 on a scale of 1 to 5, where 5 is highest	Masters: 4.3 PhD: 4.5	Masters: 4.1 PhD: 4.5	Masters: 4.3 PhD: 4.6
Student rating of classroom teaching	>4.0 on a scale of 1 to 5, where 5 is highest	4.0	4.0	4.2
Student rating of “satisfaction with supervision and/or guidance” on exit survey	>4.0 on a scale of 1 to 5, where 5 is highest	4.1%	4.0%	4.1%
Mean annual number of publications of faculty in peer-review journals	Assist. Prof. >2 Assoc. Prof. >4 Full Prof. >6	Assist. Prof. 2.6 Assoc. Prof. 4.7 Full Prof. 6.7	Assist. Prof. 3.5 Assoc. Prof. 4.2 Full Prof. 7.5	Assist. Prof. 3.5 Assoc. Prof. 4.8 Full Prof. 6.7
Median h-Index**	Assist. Prof. >5 Assoc. Prof. >10 Full Prof. >25	na	na	Assist. Prof. 6.5 Assoc. Prof. 13.5 Full Prof. 50

*These indicators are based on primary faculty as listed in CEPH Data Template 4.1.1 (*Appendix 4.1.A.i*)

**The h-index is a measure of article impact used by SCOPUS. The h-index was developed by J. E. Hirsch and published in *Proceedings of the National Academy of Sciences of the United States of America* 102 (46):16569-16572 November 15 2005. Source: SCOPUS quantifies citations only after 1995.

***national committees, including national grant review committees, editorial boards, local committees (as chair), etc.

4.1.E. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH has an accomplished, productive, and internationally regarded faculty representing a very wide range of disciplines.
- The faculty includes more than 400 clinical and affiliate faculty whose skills and expertise in research and practice make them valued colleagues, teachers, advisors, and mentors.
- Student evaluations of teaching and academic standards are high.

Weaknesses/Challenges

- The large number, geographic dispersion (see *Criterion 1.7*), and multidisciplinary character of the faculty make all-school events challenging to plan and orchestrate.
- This geographic dispersion of faculty hinders student access to off-campus faculty.

Plans

- SPH is actively seeking funding for a Public Health Building to bring more of the faculty together.
- Targeted faculty recruitment in areas of emerging public health importance is being undertaken as part of the SPH 2012-2020 Strategic Plan.

This criterion is met.

4.2 FACULTY POLICIES AND PROCEDURES

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

4.2.A. A faculty handbook or other written document that outlines faculty rules and regulations.

The rules and regulations governing faculty are documented in the *University of Washington Policy Directory*, available online at: <http://www.washington.edu/admin/rules/policies/>. The portions of the *Faculty Code* from the *UW Policy Directory* that include specific information on rules and regulations for faculty appointment, promotion, and tenure may be found online at: <http://www.washington.edu/admin/rules/policies/FCG/FCCH24.html>.

In addition, the *SPH Academic Affairs Handbook* provides detailed, school-specific information on appointment, promotion, and tenure, and is found in **Appendix 1.5.B**. The *Academic Affairs Handbook* is also available on the SPH website at: <http://sph.washington.edu/gateway/handbook/>.

4.2.B. Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

Faculty development is recognized as a vital role of the SPH leadership and senior faculty. Numerous policies and efforts are devoted to enhancing the effectiveness, productivity, and satisfaction of the faculty. Opportunities for faculty development include:

SPH faculty orientation: In addition to the orientation advice that the UW offers for new faculty, the SPH holds a half-day Faculty Orientation, during which faculty are introduced to the research, instructional, library, and computer resources of the SPH and University. In addition, the associate dean for Research and Programs, the associate dean for Academic Affairs, and the chair of the Faculty Council address the new faculty on the “faculty life cycle,” covering issues including research, service, teaching expectations, promotion and tenure procedures and policies, and other concerns, such as the grant development process, human subjects procedures, and academic and student ethics.

Annual reviews: All departments hold formal annual reviews of junior faculty, during which senior faculty collectively review the record of each assistant or associate professor and lecturers. These deliberations, which in some departments extend over two days, provide a forum for thoughtful and constructive evaluation of the teaching, research, and service records of each faculty member. The outcomes of these reviews provide specific suggestions for improvement and/or additional opportunities for the individual faculty member; they are also likely to include recommendations to other faculty who could assist the individual through collaboration or additional mentoring. Based on these reviews, the chair of each department meets individually with each faculty member to review past performance and future plans. A formal letter from the chair to the faculty member is written after each of these meetings summarizing the discussion.

Mentoring: Departments assign senior faculty members to advise and guide junior faculty members. In some departments, the chair assumes this role. In addition to direct mentoring, the chair formally meets with junior faculty following the annual reviews to convey recommendations on improving, prioritizing, or redirecting their research, teaching, and service activities. The Department of Health Services has created a Professional Development Group to provide mentorship and encouragement on a group level for assistant professors.

The UW Center for Teaching and Learning (CTL) (<http://www.washington.edu/teaching/>) This is a university-wide instructional resource for faculty and teaching assistants, and it promotes excellence in teaching and learning at the University of Washington through its work with individual faculty and TAs,

departments, campus-wide initiatives, and University leaders. CTL staff collaborate on the design, implementation, and assessment of ways to advance learning for all students in the diverse UW community.

The Center for Curriculum Transformation (<http://depts.washington.edu/ctcenter>) promotes and supports curriculum development aimed at teaching and learning to critically think about cultural diversity.

The **Faculty Fellows Program** is offered annually by the University's administration to work with new faculty on topics such as:

- Techniques for engaging students in lectures
- Using technology in the classroom
- Teaching evaluation and assessment
- Finding a balance between teaching and research.

The **UW Health Sciences Research Funding Service** and the **UW Grants and Funding Information Service** provide extensive web-based and consultative resources to SPH faculty.

Paid professional leave (sabbatical): This may be granted to tenured faculty after seven years of service to increase their scholarship and professional development. Sabbatical leave may be granted for one, two, three, or four quarters.

Other faculty resources:

- Departments may use their resources to fund faculty to attend conferences and professional meetings.
- A tuition exemption policy allows faculty to register for up to six credits per quarter for a minimal charge.

4.2.C. Description of formal procedures for evaluating faculty competence and performance.

In addition to student evaluation of classroom teaching, described in **Criterion 4.2.D** below, all faculty undergo periodic peer review of their teaching. The departments have varying procedures for peer review, but it generally involves review of the syllabus and instructional materials, observation in the classroom, and preparation of a written instructor evaluation. For lectures and assistant professors, approximately one course each year must be reviewed by their peers. These evaluations are reviewed by each department's curriculum committee and by senior faculty at the time of faculty reviews. They are a mandatory component of promotion and tenure packets. Recommendations based on these reviews are transmitted to the faculty member to assist in improving teaching effectiveness. The SPH Curriculum and Education Policy Committee is currently reviewing departmental peer review practices, with the aim of improving the efficiency, quality, and usefulness of these reviews.

Faculty performance is evaluated annually (except for professors who are evaluated every three years), as described above. In addition, when the Washington Legislature allocates funding for faculty salary merit increases, another review of faculty performance may be required, usually during spring quarter, to allocate merit raises. In most departments, faculty use both narrative comments and a numeric rating scale to assess performance. Student and peer evaluations of teaching, research, academic public health practice productivity, and service are all considered in the annual evaluations.

In compliance with University regulations, department chairs hold annual conferences with assistant professors to discuss results of the annual reviews. In the SPH, chairs are encouraged to hold these conferences with all faculty. The chair discusses strengths and weaknesses of the faculty member's record as it relates to advancement, explains the department's emphases on teaching, research or academic public health practice and service, discusses the "goodness of fit" of the faculty member's work and the direction

and needs of the department, and makes suggestions to improve the faculty member's record. The chair then provides the faculty member with a written summary of the conference, and a copy of this summary is given to the dean's office. It is the chair's responsibility to determine, together with the faculty member's mentor and others as appropriate, a plan to assist faculty members who are having difficulty, either in teaching or research.

All promotion and tenure decisions require letters from at least four outside referees which are inherently evaluative; outside referees are asked to review/evaluate the candidate's CV, a sample of articles, and the candidate's summary of his/her accomplishments.

4.2.D. Description of the processes used for student course evaluation and evaluation of instructional effectiveness.

All SPH courses are evaluated by students each time they are taught. Most faculty use standard UW evaluation forms provided by the Office of Educational Assessment, which include both quantitative scales and anonymous narrative sections. These evaluations are reviewed by the chairs and are included in the annual review materials for each faculty member. Aggregated statistics from these evaluations are used by the departments and the SPH to evaluate its teaching effectiveness.

Additionally, all departments have developed formal processes of faculty (peer) review for teaching effectiveness. These processes include a review of syllabi and other written course materials, as well as in-class peer observation; review of student evaluations, tests, assignments and grade distribution; and evaluations of teaching assistants. These assessments are shared with the instructor soon after they are conducted to support continual quality improvement of their teaching efforts. This material is included in the review packets for annual faculty reviews and promotions.

The SPH rewards excellence in teaching. Each year, students and faculty are invited to nominate faculty who are outstanding teachers. The Student Public Health Association reviews the nominations and selects a recipient for the SPH's Outstanding Teaching Award. A plaque and award check are presented annually at the SPH's graduation ceremony.

4.2.E. Assessment of the extent to which this criterion is met and an analysis of the SPH's strengths, weaknesses and plans relating to this criterion.

Strengths

- The SPH has well-documented policies to recruit, appoint, and promote qualified faculty.
- The SPH evaluates faculty effectiveness continually through reviews by peers and students.
- The SPH and University provide substantial resources for faculty development.
- The SPH confers an Outstanding Teaching Award to one faculty member and an Outstanding Teaching Assistant Award each year to emphasize the importance of excellence in teaching.

Weaknesses/Challenges

- Recruitment, retention, and growth of faculty may be limited by the uncertainty surrounding the future of tenure funds.
- The faculty of the SPH is largely supported by grants and contracts, and the majority of regular senior faculty do not have tenure. Furthermore, even when tenure is conferred, it has become the practice in the SPH to provide tenure at only 50 percent FTE.
- The aging of the current SPH leadership will lead to a large number of retirements and vacancies over the next 5 to 10 years.

Plans

- The SPH will continue to identify/develop better opportunities for leadership training and development for its junior and mid-level faculty.
- Departments are developing succession plans and have successfully recruited a number of outstanding junior faculty in recent years.

This criterion is met.

4.3 STUDENT RECRUITMENT AND ADMISSIONS

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

4.3.A. Description of the school's recruitment policies and procedures. If these differ by degree (e.g., bachelors vs. graduate degrees), a description should be provided for each.

The SPH seeks students who are strong academically, highly motivated, and committed to public health. Students are recruited via informational tabling at local, regional, and national fairs; meetings and conferences; presentations to high school, community college, and current University of Washington students; presentations at national, state, and local public health meetings; departmental web pages; advertising in relevant publications, on various websites, and through social media outlets; electronic recruitment mailings; direct contact with prospective students; and recommendations from alumni and college advisors. (*Appendix 4.3.A* contains examples of informational/recruitment materials.) International students are recruited through collaborative activities with institutions worldwide.

The SPH also recruits students at the annual American Public Health Association and the Washington State Public Health Association meetings and participates in Association of Schools of Public Health outreach and recruitment efforts. The SPH is also present at Health Sciences graduate school fairs and Idealist graduate school fairs in our region. Additionally, the SPH is committed to recruiting a diverse student population, and therefore works with on-campus resources and attends conferences such as SACNAS (devoted to advancing Hispanics, Chicanos, and Native Americans in Science) and ABRCMS (Annual Biomedical Research Conference for Minority Students). Additionally, departments hold regular information sessions and, once accepted, the SPH holds an admitted student visiting day, where prospective students can meet with current students, faculty, and staff.

Recently, the Office of Student Affairs has begun to centralize recruitment efforts and outreach, while individual programs and departments continue to conduct more targeted recruitment activities. The SPH Office of Student Affairs recently hired a 50 percent FTE to focus specifically on recruitment and prospective student outreach, with an emphasis on diversity. This position, in partnership with staff and faculty within the SPH, as well as offices across campus, is in the process of developing a comprehensive plan to recruit and retain a diverse student population. Current efforts focus on the following:

- Assessing recruitment efforts that are currently underway within the school
- Networking with established University of Washington offices to include the SPH in diversity-related recruitment efforts locally, regionally, and nationally
- Developing a school-specific outreach plan, with an emphasis on underrepresented minorities
- Updating existing and creating new marketing materials
- Establishing pipelines with community colleges and high schools in the area

4.3.B. Statement of admissions policies and procedures. If these differ by degree (eg, bachelors vs. graduate degrees), a description should be provided for each.

Prospective students who are undecided as to which of the SPH's programs best fits their educational and career goals are encouraged to contact the SPH Office of Student Affairs (OSA) for guidance. Whenever possible, the student will have an in-person meeting with an advisor. Once the prospective student has selected a program, student services staff in the departments and programs coordinate their own admissions procedures to ensure that advising and other important student relationships are established and maintained.

Applicants to the undergraduate Public Health major (Bachelor of Arts or Bachelor of Science) must complete the following by the application deadline to be considered for admission:

- Minimum of 45 credits
- Minimum cumulative GPA of 2.5
- A minimum grade of 2.0 in one of the following: ENV H 111, HSERV 100, G H 101, or one 5-credit course from: Anthropology (ANTH only), Political Science, Psychology, or Sociology (200-level recommended)
- Minimum grade of 2.0 in one introductory science from the following list: BIOL 118, BIOL 180, CHEM 120, CHEM 142, CHEM 145, or PHYS 114 with lab (PHYS 117)

The following factors determine the competitiveness of an applicant beyond the minimum requirements and are the criteria used when determining admission to the major:

- Overall academic record
- Grades in coursework relevant to the major
- The personal statement including writing ability and individual perspectives that would contribute to the program and field of public health
- Ability to make satisfactory progress towards the degree

Application Requirements:

1. Completion of the application: <http://sph.washington.edu/uph/application.pdf>
2. Submission of a personal statement

Note: **Transfer students** must also apply for general admission to the University and abide by the Office of Admissions' deadlines: Feb. 15th for autumn and Sept. 1st for winter.

The Environmental Health undergraduate major offers both a rigorous introduction to the physical sciences as well as the specific professional skills needed to thrive in the environmental health field. Most full-time students who want to complete the program within four years will need to begin chemistry courses in their freshman year and make significant progress on the upper division admission prerequisites by the end of their sophomore year.

For early admission: Minimum grade of 2.0 in each course, minimum cumulative GPA of 3.0, and at least 30 college credits, including: Chemistry Series (CHEM 142, 152, 162, or equivalents), Calculus (MATH 124 or equivalent), English Composition (ENGL 131 or equivalent)

For upper division admission: Minimum grade of 2.0 in each course, minimum cumulative GPA of 2.5, including: Chemistry Series, Organic Chemistry Series (CHEM 237, 238, 239, or CHEM 223, 224, or equivalents), Biology Series (BIOL 180, 200, 220, or equivalents), Calculus, English Composition

The application process for graduate students involves completion of both the University of Washington Graduate School application and the departmental program application. The University currently charges an application fee of \$75 that may be waived based on financial need for qualifying U.S. citizens and permanent residents. All applicants for graduate programs are screened by the UW Graduate School to ensure that the University's minimum requirements are met.

Graduate programs in the SPH require:

- A program application
- A minimum 3.0 GPA as an undergraduate
- College transcripts
- Narrative statement of professional goals and objectives
- Three personal recommendations
- Specific prerequisite coursework for some departments

- GRE scores that are typically above the 50th percentile. Exemption from the GRE is provided for:
 - eMPH students may substitute the GMAT, LSAT, or MCAT
 - MPH and MHA applicants who possess a doctorate or medical degree from an accredited university in the United States
 - MHA applicants, who may substitute the GMAT for the GRE
- TOEFL scores for international applicants

Each department supports an admissions committee that reviews applications. Applicants are not evaluated on a single criterion but on the basis of the entire application. All programs seek strong students who are highly motivated. Relevant work and/or research experience is weighted heavily by most programs.

4.3.C. Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading and the academic offerings of the school. If a school does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the school. In addition, references to website addresses may be included.

The SPH and its departments list recruitment materials and information on the SPH website and the various program websites included below:

Undergraduate Programs	http://sph.washington.edu/prospective/ug_programs.asp
Public Health undergraduate major	http://sph.washington.edu/uph/
Environmental Health major	http://deohs.washington.edu/academics/undergraduate
Health Information and Information Management	http://depts.washington.edu/hihim/
Global Health minor	http://globalhealth.washington.edu/academics/undergraduate-minor/welcome
Graduate Programs	http://sph.washington.edu/prospective/graduate.asp
Biostatistics	http://www.biostat.washington.edu/pro
Environmental and Occupational Health Sciences	http://deohs.washington.edu/prospective-students/graduate-program
Epidemiology	http://depts.washington.edu/epidem/adm/
Global Health	http://globalhealth.washington.edu/students-alumni/prospective-students
Health Services	http://depts.washington.edu/hserv/prospective
Health Administration	http://depts.washington.edu/mhap/
Maternal and Child Health	http://depts.washington.edu/mchprog/about
Nutritional Sciences	http://depts.washington.edu/nutr/prospective.html
Pathobiology	http://globalhealth.washington.edu/pabio
Public Health Genetics	http://depts.washington.edu/phgen/index.shtml

The SPH Academic Program Brochure is shown in *Appendix 2.1.B* and online at: <http://sph.washington.edu/prospective/catalog.asp>.

4.3.D. Quantitative information on the number of applicants, acceptances and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format. See CEPH Data Template 4.3.1.

The number of applicants to all degree programs has risen in the past two years. Generally, approximately 55 to 60 percent of applicants to the undergraduate programs are accepted; of those accepted, about 50 percent of undergraduates choose to enroll. Approximately 50 to 65 percent of applicants to MHA programs are offered admission, compared to about 35 percent for the MPH and MS programs, and 25 percent for the PhD degrees. For graduate programs the matriculation rate is between 50 and 70 percent. In general, there has been an increase in applications; however the acceptance rates have remained consistent. There appears to be a declining trend in matriculation rates for our MHA, MS, and PhD programs. These data broken down by concentration can be found in *Appendix 4.3.D*.

Table 4.3.D. Applicants, acceptances and enrollments (CEPH Data Template 4.3.1)

Undergraduate Programs		2009-10	2010-11	2011-12
	Applied	na	329	279
	Accepted	na	160 (49%)	243 (87%)
	Enrolled	na	153 (96%)	222 (91%)
MHA		2009-10	2001-11	2011-12
	Applied	213	243	244
	Accepted	105 (49%)	114 (47%)	140 (57%)
	Enrolled	78 (74%)	74 (65%)	83 (59%)
MPH		2009-10	2001-11	2011-12
	Applied	780	793	719
	Accepted	270 (35%)	302 (38%)	303 (42%)
	Enrolled	158 (59%)	146 (54%)	173 (50%)
MS		2009-10	2001-11	2011-12
	Applied	269	269	270
	Accepted	91 (34%)	91 (34%)	81 (30%)
	Enrolled	52 (57%)	49 (54%)	50 (62%)
PhD		2009-10	2001-11	2011-12
	Applied	439	474	530
	Accepted	109 (25%)	112 (24%)	146 (28%)
	Enrolled	53 (49%)	50 (45%)	56 (38%)

4.3.E. Quantitative information on the number of students enrolled in each specialty area identified in the instructional matrix, including headcounts of full- and part-time students and a full-time-equivalent conversion, by concentration, for each degree, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format. See CEPH Data Template 4.3.2.

Table 4.3.E tabulates the numbers of students and FTEs in each of the SPH degree programs for the past three years. In general the numbers have been fairly consistent, with the following exceptions. The BA/BS in Public Health is a new program in the SPH (formerly it was in the College of Arts and Sciences). The PhD program in Global Health was started in 2012. Several MPH tracks in the Department of Health Services were discontinued/consolidated during this time period. Comparison of head-counts with FTEs suggests that most students are full-time.

Table 4.3.E. Students (head-counts and FTEs) in degree programs (CEPH Data Template 4.3.2)

DEGREE	2010		2011		2012	
	HC	FTE	HC	FTE	HC	FTE
BACHELOR OF ARTS/BACHELOR OF SCIENCE (BA/BS)						
BA, PUBLIC HEALTH	0	0	0	0	31	30.56
BS, PUBLIC HEALTH	0	0	0	0	104	101.33
BACHELOR OF SCIENCE (BS)						
BS, ENVIRONMENTAL HEALTH	28	26.22	28	26.56	45	44.11
BS, HEALTH INFORMATICS & HEALTH INFORMATION MANAGEMENT	54	52.78	46	44.44	44	42.89
MASTER OF HEALTH ADMINISTRATION (MHA)						
MHA, HEALTH SERVICES: IN-RESIDENCE	55	54.17	52	51.56	58	55.72
MHA, HEALTH SERVICES: EXECUTIVE (EMHA)	77	69.78	87	78.06	87	77.44
MASTER OF PUBLIC HEALTH (MPH)						
MPH, BIostatISTICS	1	1.00	2	1.72	1	0.78
MPH, ENVIRONMENTAL & OCCUPATIONAL HEALTH	6	6.00	6	6.00	6	6.00
MPH, OCCUPATIONAL & ENVIRONMENTAL MEDICINE	9	7.44	9	9.00	5	4.78
MPH, EPIDEMIOLOGY: GENERAL TRACK	54	45.67	37	33.22	37	33.39
MPH, EPIDEMIOLOGY: GLOBAL HEALTH TRACK	6	5.56	7	7.00	6	6.00
MPH, EPIDEMIOLOGY: MCH TRACK	4	4.00	8	8.00	5	4.89
MPH, GLOBAL HEALTH: GENERAL TRACK	14	12.89	20	20.00	32	27.89
MPH, GLOBAL HEALTH: HEALTH METRICS & EVAL TRACK	14	9.11	15	10.11	19	12.78
MPH, GLOBAL HEALTH: LEADERSHIP, POLICY, & MGMT	13	12.44	7	6.22	4	4
MPH, GLOBAL HEALTH: PEACE CORPS MASTERS TRACK	3	3.00	5	4.56	4	4
MPH, HEALTH SERVICES: GENERAL TRACK	17	17.00	35	33.11	37	34.33
MPH, HEALTH SERVICES: COMMUNITY ORIENTED PUBLIC HEALTH PRACTICE (COPHP)	30	29.83	29	28.67	32	31.56
MPH, HEALTH SERVICES: HEALTH POL ANLYS & PROC	13	12.22	10	8.89	3	1.89
MPH, HEALTH SERVICES: MCH TRACK	13	12.44	11	11.00	11	11.00
MPH, HEALTH SERVICES: SOCIAL & BEHAVIOR SCIENCE	14	10.89	12	11.22	14	12.67
MPH, HEALTH SYSTEMS & POLICY (discontinued in 2012)	0	0	0	0	6	5.17
MPH, HEALTH SERVICES: EXECUTIVE MPH (eMPH)	55	31.56	62	49.00	61	47.56
MPH, HEALTH SERVICES: HEALTH CARE & POP HEALTH RES (discontinued in 2012)	6	6	0	0	0	0
MPH, HEALTH SERVICES: HEALTH & POLICY RESEARCH (discontinued in 2012)	1	0.89	1	1.00	0	0
MPH, PUBLIC HEALTH GENETICS	13	11.22	10	8.78	13	10.44
MPH, NUTRITIONAL SCIENCES	25	24.11	26	23.11	21	18.56
MASTER OF SCIENCE (MS)						
MS, BIostatISTICS	13	10.78	15	13.22	20	19.00
MS, ENVIRONMENTAL HEALTH	7	7.00	6	6.00	8	7.67
MS, ENVIRONMENTAL HEALTH: OCCUP & ENVIR EXPOSURE SCIENCE	18	17.89	17	14.00	16	14.00
MS, ENVIRONMENTAL HEALTH: ENVIR TOXICOLOGY	7	7.00	5	4.22	5	4.22
MS, EPIDEMIOLOGY: GENERAL TRACK	42	37.50	23	19.44	20	14.83
MS, EPIDEMIOLOGY: CLINICAL RESEARCH	6	5.33	13	12.00	7	5.67
MS, GENETIC EPIDEMIOLOGY	4	4.00	5	5.00	7	6.22
MS, NUTRITIONAL SCIENCES	17	15.78	20	16.78	23	20.67

MS, HEALTH SERVICES	3	2.56	2	1.89	4	3.33
MS, PUBLIC HEALTH GENETICS	1	0.56	0	0	0	0
DOCTOR OF PHILOSOPHY (PhD)						
PhD, BIostatISTICS	66	63.22	64	61.55	66	60.88
PhD, ENVIRONMENTAL HEALTH: ENVIR & OCCUPATIONAL HYGIENE	13	12.33	21	19.83	24	23.78
PhD, ENVIRONMENTAL HEALTH: ENVIR TOXICOLOGY	10	9.20	12	12.00	13	12.83
PhD, EPIDEMIOLOGY	79	72.78	79	72.33	81	74.22
PhD, GLOBAL HEALTH	0	0	0	0	3	3
PhD, HEALTH SERVICES	25	22.37	25	22.00	25	22.22
PhD, NUTRITIONAL SCIENCES	4	3.22	2	2.00	5	4.50
PhD, PATHOBIOLOGY	33	34.11	35	35.00	33	33.00
PhD, PUBLIC HEALTH GENETICS	12	11.20	14	12.55	17	17.00

4.3.F. Identification of measurable objectives by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures for each of the last three years.

Table 4.3.F: Indicators of success in enrolling qualified students

Indicator	Target	2009-10	2010-11	2011-12
Attract Applicants	Steady or increasing number of applicants	BA/BS – na MPH - 780 MHA – 213 PhD - 439	BA/BS - 329 MPH - 793 MHA - 243 PhD - 474	BA/BS - 279 MPH - 719 MHA - 244 PhD - 530
Selectivity (% of Applicants Selected)	BA/BS (na) MPH (<35%) MHA (<50%) PhD (<25%)	BA/BS – na MPH – 35% MHA – 49% PhD – 25%	BA/BS – 49% MPH – 38% MHA – 47% PhD – 24%	BA/BS – 87% MPH – 42% MHA – 57% PhD – 28%
Matriculation Rate	BA/BS (na) MPH (>50%) MHA (>65%) PhD (>50%)	BA/BS – na MPH – 59% MHA – 74% PhD – 49%	BA/BS – 96% MPH – 54% MHA – 65% PhD – 45%	BA/BS – 91% MPH – 50% MHA – 59% PhD – 38%
Attract students from under-represented groups	Matriculation rate for under-represented applicants > or = non-under-represented applicants	MPH - 80% MHA – 63% PhD – 50%	MPH – 71% MHA – 64% PhD - 0%	MPH – 67% MHA – 67% PhD – 50%
High academic admissions standards (Quantitative GRE among new enrollees)	Steady or increasing	MPH - 667 MHA - 607 PhD - 707	MPH - 665 MHA - 646 PhD - 719	MPH - 639 MHA - 627 PhD - 718
High academic admissions standards (Verbal GRE among new enrollees)	Steady or increasing	MPH - 574 MHA - 500 PhD - 541	MPH - 586 MHA - 580 PhD - 606	MPH - 550 MHA - 521 PhD - 597

The MHA and PhD programs have witnessed an increase in applications, while the MPH programs in our School have experienced a 9% decline in applications. Our graduate programs continue to be selective, and quality of newly enrolled students, as measured by GRE scores, has generally remained high for all degrees with no clear trend. Underrepresented applicants are as likely to choose SPH as other students, with the exception of applicants to PhD programs. This may be a function of our ability to guarantee financial aid to all students.

4.3.G. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Strengths

- The coordination and centralization of recruitment activities through the Office of Student Affairs is producing a more comprehensive/consistent school-wide effort to recruit and admit students.
- The departments have a well-defined admissions process in addition to criteria that serve to admit a qualified and diverse student population.
- We continue to attract highly qualified students.

Weaknesses/Challenges

- The indicators related to volume of applications, admission selectivity, and matriculation of accepted students have declined in recent years.
- While increased effort to coordinate is underway, it will take time to assess needs and develop a comprehensive recruitment plan.
- The wide variety of department-specific admissions criteria pose a challenge when advising prospective students centrally.
- The need for funding specifically designated for underrepresented students poses an overall recruitment challenge.

Plans

- Conduct a thorough outreach and recruitment needs assessment across the SPH.
- Network and collaborate with established University of Washington entities to provide an opportunity to reach more diverse students.
- Create new, targeted, school-wide recruitment and marketing materials.
- Establish concrete metrics for evaluating the impact of specific recruitment efforts.
- Increase knowledge of departmental admissions criteria, centrally and on the SPH website, to provide comprehensive advising to prospective students.

This criterion is met.

4.4 ADVISING AND CAREER COUNSELING

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

4.4.A. Description of the school's advising services for students in all degree programs, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.

Throughout the school, graduate students are assigned faculty academic advisors when they enroll. 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. Typically, during the admissions process, students are matched with faculty with whom they would like to work or whose interests are most compatible with those of the student. When a student begins a thesis or dissertation, the faculty member with whom he or she is doing research usually becomes the advisor and chair of the supervisory committee. A thesis chair advises and assists students in defining the scope of a project as well as identifying an appropriate second faculty member for the thesis committee, if assistance is necessary. Advising also is provided by graduate program coordinators (faculty) and graduate program advisors (staff) who are knowledgeable about the rules and infrastructure of the University, SPH, and individual departments.

Doctoral students work extremely closely with the chair of their committee but rely on other members frequently for substantive, methodological, or general academic advice. For the past three years, graduating doctoral students rate their satisfaction with supervision/guidance at 4.3 on a scale of 1 to 5, with 5 being highest.

Faculty advisors are oriented to their role in many different ways. Individual departments have web resources addressing frequently asked questions specific to advising in addition to referring faculty to the University of Washington Graduate School's resources, such as the Mentor Memos series (<http://www.grad.washington.edu/mentoring/memos/>).

Mentorship is a key element to student success in our programs. Faculty members in the SPH are committed to developing strong mentoring relationships with all students for the purpose of enhancing educational experiences and supporting student retention. Each student is assigned to an advisor from the time of acceptance into the SPH, and faculty serve in mentorship roles through membership on dissertation committees. Many departments offer structured mentoring opportunities through workshops and intentional relationship building between incoming and current students, in addition to website resources.

For undergraduate students, the SPH uses a "team" advising approach. Professional staff in the undergraduate programs serve as advisors, helping students navigate course planning and progress towards degree. Faculty serve in a mentorship role, providing guidance regarding career paths, professionalism, and access to professional networks.

4.4.B. Description of the school's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to specific needs in the school's student population.

The SPH has created a career development website (<http://sph.washington.edu/careers/>) for students. This website contains links to guidance for developing resumes, job searching, and job interviewing. It has an up-to-date job listing on which employers can easily post job opportunities (<http://sph.washington.edu/careers/jobs.asp>) as well as a listing of local and national job sites (<http://sph.washington.edu/careers/links.asp>).

The MHA program employs a full-time career advisor, who connects students with opportunities, networks with employers, and organizes workshops for the MHA students.

Professional development for graduate students is supported in numerous other ways across the school. The SPH Office of Student Affairs sends out regular job postings via e-mail and maintains the job postings web page and updates resources on the website about resume and cover letter writing and general job search skills. The Office of Student Affairs also implemented a public health specific career development workshop focusing on various aspects of the career search process. Additionally, the director and assistant director of Student Affairs will meet with students one-on-one to review materials and offer individualized feedback. The MHA program also employs a full-time career services specialist. Departments refer students to University-wide resources and also offer their own discipline-specific workshops, events, and seminars focused on job search skills and staff members skilled in career advising.

For example, both the Institute for Public Health Genetics, Public Health Nutrition and the Community-Oriented Public Health Practice Program hold career panels once a year as part of required coursework, and invite alumni to present stories and career paths and share advice. Additionally, the Global Health Resource Center organizes an annual Global Health week that is open to all Public Health students as well as the University community. Events include resume workshops, a career fair, information on global health certificate options, a career pathways workshop, lectures, film screenings, interview strategies, and networking tips.

The MHA program in the Department of Health Services has a well-established (and well-subscribed) program that matches students one-on-one with health care professionals throughout the community. These leaders volunteer their time and offer students the opportunity not only to expand their thinking about applying their skills in the “real world,” but to ask questions and seek guidance in a more relaxed context outside of classroom demands. It also extends the reach of the program into the professional community by reminding mentors of the program’s value in shaping future leaders.

The SPH new student orientation also includes a popular alumni panel. This panel provides an opportunity for students to engage with alumni from across disciplines and explore the many career paths of our SPH graduates. With the panel as a vehicle, students are encouraged to seek out internships and practicum opportunities that lend themselves to potential careers and to network with community members and alumni throughout their tenure at the SPH.

4.4.C. Information about student satisfaction with advising and career counseling services.

Each year, the UW Graduate School conducts an Exit Survey of graduating students, in which they ask about the satisfaction with career mentoring. Data for the past three years are summarized below.

Table 4.4.C. Satisfaction with career mentoring (scale of 1 to 5, 5 being highest)

Satisfaction with career mentoring	Target	2009-10	2010-11	2011-12
Master’s students	4.0	3.6	3.5	3.3
PhD students	4.0	3.9	4.0	3.9

It is recognized that, while generally acceptable and comparable to other schools/colleges at the University for PhD students, satisfaction among our master’s students is not adequate and is, in fact declining (see *Table 4.4.C*, above). This was identified as an important issue for our SPH and, to address this, the new school-wide position of director of Student Affairs was created. One of the mandates for this position is to improve the quantity, quality, and professionalism in the SPH’s approach to career counseling, and we have already seen improvements in the last year.

4.4.D. Description of the procedures by which students may communicate their concerns to school officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.

Student concerns may be voiced through multiple avenues including: departmental staff and faculty, including graduate program directors and/or the graduate program advisor, student advisors (academic advisor or thesis/dissertation advisor), and office of the dean staff. Additionally, each department has an appointed student representative that serves as a Graduate and Professional Student Senator to whom they can communicate concerns. The Student Public Health Association (SPHA), with an executive board comprised of students from across the school, is advised by the director of Student Affairs and is also available and serves as the “voice” of the students. A representative from the SPHA is a member of the SPH Executive Council as well, and meets with the dean regularly. Also, the dean, in partnership with the SPHA, hosts monthly events attended by large numbers of students, in which students are able to submit anonymous questions; the events are geared towards SPH leadership hearing and responding to student feedback and concerns.

Departments communicate the mechanisms for grievances to their students via new student orientation, e-mail, and internal portals. In general, when a student is dissatisfied with the conditions of his RA or TA appointment or is frustrated or unhappy in general with their student experience, he/she is encouraged to speak to their preceptor or supervisory committee members. If this discussion is not fruitful or if the student feels uncomfortable doing so, they should approach their program director, the graduate program coordinator, graduate program staff, or the chair. If the situation cannot be addressed satisfactorily at the department level, the problem is referred to the associate dean for Academic Affairs. The ultimate arbitrator of student complaints is the graduate school. See [Graduate School Memorandum 33](http://www.grad.washington.edu/policies/memoranda/memo33.shtml) (<http://www.grad.washington.edu/policies/memoranda/memo33.shtml>) for grievance procedures (*Appendix 4.4.D.i*).

Most grievances are minor and are handled satisfactorily at the departmental level without documentation. An informal survey of the graduate program staff in the departments suggests that these occur zero to twice a year in each department. The associate dean for Academic Affairs is asked to step in when a departmental solution cannot be reached. In the past three years, four situations have come to the associate dean for resolution: two involved disputes over the fairness of grades (one undergraduate and one graduate student); one doctoral student appealed her termination from her PhD program after failing the qualifying exam twice; and one graduate student appealed her termination from her PhD program because she did not complete the requirements communicated to her by her committee on numerous occasions.

The University, with input from the SPH, has recently re-written the grievance procedures for post-doctoral fellows. This procedure is found in *Appendix 4.4.D.ii*.

4.4.E. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Strengths

- There is a strong system of student advising and counseling at the school, department, and program levels.
- Thesis, dissertation, and project advising involve close supervision and mentoring by faculty.
- The SPH has developed a comprehensive career services website to assist students and alumni in finding jobs in their chosen fields.
- The new director of Student Affairs considers developing stronger career services to be a priority.

Challenges

- Some master’s students, especially MPH students, need more career services.
- There is a need to develop a school-wide system for disseminating career development and job

posting information for students.

- Some of the faculty are less skilled at or dedicated to student mentoring.

Plans

- Building on the student mentoring resources recently developed by the Graduate School, new mentoring workshops are being developed.
- New faculty orientation and annual reviews will place greater emphasis on faculty mentoring skills and performance.
- The SPH has dedicated funds to provide training for the student services staff in career counseling.
- The director of Student Affairs is 1) improving our online resources for career development and job hunting 2) developing programs to provide hands-on career counseling throughout the SPH, and 3) meeting with students one-on-one to assist with career search needs.

This criterion is met.