June 22, 2015

Eric W. Kaler, PhD, President
University of Minnesota
100 Church Street S.E.
202 Morrill Hall
Minneapolis, MN 55455

Dear President Kaler:

On behalf of the Council on Education for Public Health, I am pleased to advise you that the CEPH Board of Councilors acted at its June 11-13, 2015 meeting to accredit the School of Public Health at the University of Minnesota for a seven-year term, extending to July 1, 2022, with an interim report due in spring 2016. The interim report will address issues related to the following areas: practical skills, competencies, student assessment, other professional degrees and academic degrees.

We are enclosing a copy of the Council's final accreditation report. This differs from the team's report that you received prior to our meeting in several areas.

- The Council changed the finding for Criterion 1.1 (Mission) from met with commentary to met and adjusted language in this section. This change is based on the Council's review of information in the original team's report and on information in the school's response to the team's report.
- The Council changed the finding for Criterion 1.2 (Evaluation) from partially met to met with commentary and adjusted language in this section. This change is based on the Council's review of information in the original team's report and on information in the school's response to the team's report.
- The Council changed the finding for Criterion 1.3 (Institutional Environment) from met with commentary to met and adjusted language in this section. This change is based on the Council's review of information in the original team's report.
- The Council changed the finding for Criterion 2.4 (Practical Skills) from met with commentary to partially met and adjusted language in this section. This change is based on the Council's assessment of the severity of the issue raised in the original team's report.
- The Council adjusted language in Criterion 2.5 (Culminating Experience) to reflect information in the school's response to the team's report.
- The Council adjusted language in Criterion 2.7 (Assessment) to reflect information in the school's response to the team's report.
- The Council changed the finding for Criterion 2.12 (Doctoral Degrees) from met with commentary to met and adjusted language in this criterion. This change reflects the Council's assessment of information in the team's report.

We appreciated the many courtesies extended to the site visit team during its visit.

Sincerely,

Donna J. Petersen, MHS, ScD, CPH
President

Enclosure

cc: John R. Finnegan, Jr, PhD
        CEPH Councilors

REVIEW FOR ACCREDITATION

OF THE

SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF MINNESOTA

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
October 20-22, 2014

SITE VISIT TEAM:
Kathleen R. Miner, PhD, MPH, MCHES, Chair
James M. Raczynski, PhD, FAHA
Lindsay A. Tallon, MSPH

SITE VISIT COORDINATOR:
Brittney D. Lilly, MPH

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the School of Public Health at the University of Minnesota. The report assesses the school's compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2011*. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation and a visit in October 2014 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The University of Minnesota (UMN) is a five-campus, land-grant institution, with campuses in the cities of Crookston, Duluth, Morris, Rochester and the Twin Cities (Minneapolis-Saint Paul). As the institution's flagship campus, the University of Minnesota, Twin Cities (UMTC) is the state's premier research institution. Across its five campuses, UMN employs nearly 26,000 faculty and staff personnel, with over 23,000 employed at UMTC. Similarly, the institution enrolls over 69,000 students, and 75% are enrolled at UMTC.

As one of 18 colleges and schools at UMTC, the School of Public Health (SPH) enrolls over 1,000 students from 48 different countries. Over 430 primary, contract and adjunct faculty contribute to the school's research and educational enterprise, which consists of 21 master's programs, four doctoral programs and six graduate and undergraduate minors. Since its inception in 1944, the SPH has graduated more than 10,000 students. As a part of its global initiatives, the SPH has entered into memoranda of understanding with the following national and international institutions to offer degree programs: Arizona State University (Phoenix, AZ), Manipal Academy of Higher Education in India, One World and St. Johns Academy (Bangalore, India), Tata Institute of Social Sciences (Mumbai, India), Sri Devrag Urs University (Kolar, India), King Fahad Medical City in Saudi Arabia, Chiang Mai University in Thailand and the University of the West Indies (Kingston, Jamaica).

The SPH has held CEPH accreditation since 1966. The last review in 2007 resulted in a seven-year accreditation term.

Characteristics of a School of Public Health

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

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

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

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

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

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

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

These characteristics are evident in the SPH at UMN. The SPH is an integral component of UMN, which is regionally accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools. In 2005, the institution was granted a 10-year accreditation term, with the next accreditation review scheduled for 2015. The school and its faculty have the same rights, privileges and status as other professional schools that are components of UMN. The school's Public Health Institute, Midwest Center for Lifelong Learning in Public Health and Public Health Roundtables are examples of vehicles through which the school promotes and fosters interdisciplinary collaboration among faculty and students. The school seeks to advance population health through its service to and established ties with local organizations. One such organization, the Minnesota Pollution Control Agency, has been a partner with SPH faculty, who have provided expertise in pollution prevention and energy reduction practices since 1984.

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

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

This criterion is met. The SPH mission statement is expansive, capturing the school's core values as well as its impact in local, national and global spheres.

The school's mission statement is as follows: *Through excellence in education, research and community engagement, the University of Minnesota School of Public Health advances health—from scientific discovery to public impact—by enhancing population health and preventing disease in the state, nation, and world.*

In 2007, the SPH added the phrase "from scientific discovery to public impact" to the pre-existing mission statement and updated its theme, which is "Transforming Discovery to Impact: Public Health in the 21st Century."

Corresponding goals, objectives and values are also clearly articulated. In academic year (AY) 2012-2013, the school reviewed and reaffirmed its 2007 goal statements related to research, service and education. School leaders worked to engage faculty, staff, students, educational partners and community members in commenting on the mission, goals and objectives. Review and revision of goals and objectives began with the school's Executive Team, and the statements were later presented to faculty and community partners for comment. Feedback was also obtained from the Educational Policy Committee (EPC), the Student Senate and alumni. Feedback from all constituents was finally considered by the Executive Team in the development of the current mission statement and supporting goals and objectives. In fall 2013, a similar process was followed to derive a consensus on the school's core values, which are discovery and innovation, global engagement, integrity and diversity. Dissemination of the school's goals and objectives occurred via the school's website, its electronic newsletter, meetings with stakeholders and presentations to community groups. All constituents were invited to provide feedback.

1.2 Evaluation and Planning.

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

This criterion is met with commentary. The school has incorporated a year-round planning and evaluation process at several levels that uses centrally maintained data from multiple sources. Data sources include

SOPHAS for student data and UMTC's Academic Health Center (AHC) for staff performance review data. The SPH's Office of Admissions and Student Resources maintains grading, course evaluation and student survey systems to report on students' educational progress and experiences. The recently implemented Tableau software system provides business data to assist with strategic resource decisions. Site visitors were informed that the SPH and the university are implementing additional systems for data collection and maintenance in an effort to augment the current complement of systems. Strengthening current systems would enable ready access to measurable objectives, such as the annual number of faculty publications.

Other examples of the school's focus on developing data tracking systems for quality improvement include a pilot program called the Graduate Review and Improvement Process (GRIP), which could be an essential tool when the school begins to assume increased responsibility for graduate program review. GRIP is a collaboration between the College of Education and Human Development and the Graduate School aimed at identifying more effective processes for evaluating and improving graduate-level academic programs. The SPH's EPC will evaluate processes identified by the pilot program to determine if it is useful for the school.

A final example of the school's efforts to monitor and evaluate division-level success in its mission, goals and objectives is its assessment of its effectiveness in serving various constituencies. For planning and decision making purposes, the Division of Biostatistics recently conducted an external review of its educational and research programs. The school noted that the Division of Biostatistics' activities and outcomes can serve as a model for other divisions.

The self-study indicates that school leaders regularly and systematically share data with divisions, programs, the Student Senate, the Faculty Consultative Committee and the EPC. The school not only monitors and analyzes data from multiple levels but also communicates the results of its planning and evaluation activities to enhance the quality of its programs in a variety of ways, such as providing summarized course evaluation data to students.

The self-study process began in September 2012 when the dean appointed several teams to participate in the development of the self-study document, including the Executive Steering Committee, Executive Team, Constituent Engagement Team, Self-study Staff Team, assistant dean for education operations and program directors. The Executive Steering Committee was formed for the self-study with a project lead, the SPH dean, the senior associate dean for academic and student affairs and the assistant dean for education operations. The committee met at least monthly to review progress, provide guidance, approve milestones and help align faculty, staff and resources. The Executive Team incorporated key findings from collected data into the annual fall faculty meeting. The assistant dean for education

operations shared and discussed data results with the EPC, the Office of Admissions and Student Resources, program coordinators and the Student Senate. Program directors discussed and utilized program specific feedback with their faculty colleagues, program coordinators and students. The Self-Study Staff Team was also worked with the project leads and staff members in finance, data collection, student services, recruitment, information technology and communications. The Constituent Engagement Team, composed of the Self-Study Staff Team and members of the school's communications team, communicated with faculty members and other stakeholders regarding the self-study and processes by which relevant information would be gathered, analyzed and reviewed.

Following the appointment of these teams, the self-study was developed in four phases. Phase One (September 2012 – September 2013) involved collecting data and providing training for faculty and staff. Phase Two (September 2013 – March 2014) involved a review of the school and the draft self-study document, including stakeholder discussions. Phase Three (February – April 2014) focused on refining the preliminary self-study and collecting and developing materials for the electronic resource file. Phase Four (May – July 2014) involved the preliminary review of the self-study by CEPH to provide feedback for final revisions to the self-study and involved addressing the requests by CEPH reviewers and updating the final document to send to the site visitors.

The commentary relates to the articulation of specific plans to achieve targets of underperforming objectives and the involvement of faculty in the development of these action plans. While the self-study document provides an assessment of the school's strengths, weaknesses and plans, many faculty members who met with reviewers appeared to be unaware of the school's performance in relation to the objectives. It should be noted that many of the school's underperforming objectives relate to the recruitment of students from under-represented groups. Positively, in response to these performance outcomes, the school has appointed a director of diversity and inclusion, tasked to work with faculty, staff and students to increase the school's ethnic and gender diversity, as well as to promote an inclusive environment to aid in retention efforts.

1.3 Institutional Environment.

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

This criterion is met. The SPH has organizational status equal to that of other schools and colleges in the university. The school has the institutional support and financial oversight needed to deliver its mission.

UMN was founded in 1851 and has developed as a comprehensive university with a strong tradition of education and public service. The AHC is the organizational entity that comprises the institution's six health-related schools and colleges, which include the schools of public health, medicine, nursing, dentistry, pharmacy and veterinary medicine, in addition to allied health programs.

UMN is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools and was last reviewed in 2005. In addition to accreditation by CEPH, the SPH's Master in Healthcare Administration degree (MHA) was accredited by the Commission on Accreditation in Healthcare Management Education (CAHME) in April 2014. The school's industrial hygiene program was last accredited by the Board for Engineering and Technology in 2013, and the school's coordinated master's program in public health nutrition was accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) in 2010.

All AHC deans, including the dean of the SPH, report to the provost/vice president for academic affairs for academic matters and to the vice president for health sciences for clinical, interdisciplinary and administrative issues. Both vice presidents report directly the university's president who, in turn, reports to a Board of Regents. The SPH is responsible and accountable for managing its own budget, and its annual budgeting and resource requests are made through the "compact process," the university's resource allocation mechanism. Under this process, the school's requests are submitted to the provost and reviewed along with all other university requests for strategic investments. Once decisions are made, the dean along with the school's Executive Team administer the school's budget.

All AHC deans and directors meet twice monthly with the vice president for health sciences to discuss administrative, funding and policy issues. In addition, the SPH dean and vice president for health sciences meet monthly to discuss school-specific opportunities and concerns. The dean is also a member of the Twin Cities Deans' Council, which meets monthly with the president and other university officers on the Twin Cities campus to address issues or concerns. Additionally, the school's associate deans participate on several AHC and university-wide committees, providing leadership and operations oversight for inter-professional education and research. Faculty members and one academic professional staff member from the school also participate in the university's Faculty Senate.

The Medical School dean concurrently serves as the vice president for health sciences. Despite this reporting relationship, the SPH dean confirmed that the current arrangement works well since he reports to the provost on most matters. Other SPH faculty with whom the site visit team met reported feeling less comfortable with the school's reporting relationship than the SPH dean reported.

The site visit team noted the reporting relationship of the SPH dean to the vice president for health sciences who also serves as the dean of medicine, creating an appearance of a conflict of interest even if none functionally is occurring. The SPH dean reported during the site visit that, in practice, he reports to the provost on all substantive matters (fiscal management, faculty affairs and academic programs) and that, while the vice president for health sciences is present during the compact process meeting

(discussed further in criterion 1.6), the provost and others are also present. This would seem to mitigate any appearance of a conflict of interest for the vice president for health sciences. During the site team's meeting with the vice president, he expressed recognition of the concern about a conflict of interest, but also noted that combining the dean of medicine and vice president for health sciences positions was a decision made long before he assumed these roles eight months ago. The decision was made only after recommendations of an external advisory committee who noted pros and cons with both separate and combined configurations of his positions. Further, he noted that any decision to restructure these roles was a decision that would need to be made by the president. The vice president for health sciences expressed awareness that, while he believed the current arrangement with deans reporting to the provost on most matters does address the conflict of interest concerns, this arrangement is significantly dependent on his and the provost's current agreement and does not address the potential long-term problem of what might happen with reporting relationships if a new vice president for health sciences and/or provost were appointed. While the assessment of the site visit team is that the current reporting relationships seem to function well, the success of the current organizational structure appears to be related more to the commitment of individuals than to the organizational structure itself. The site visit team concluded that the current manner in which the vice president for health sciences and the provost have configured reporting responsibilities of the SPH dean significantly addresses any compliance issues with this criterion.

1.4 Organization and Administration.

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

This criterion is met. The SPH contains four academic divisions, with each division head reporting to the dean. Divisions include epidemiology and community health, biostatistics, environmental health sciences and health policy and management. Three associate deans report to the dean, along with two operations support staff members. Areas covered through the associate deans and operations support staff include academic affairs and research, education and global health, learning systems and student affairs and education operations. The school's organizational setting fosters public health learning, research and service with administrative oversight allocated to the aforementioned areas by assistant and associate deans. SPH constituents are marked by integrity to the school and a commitment to ensuring that its mission and vision are reflected in their endeavors. With the school's divisions and programs dispersed across nine locations, the SPH has managed to foster a culture that values mutual exchange, inclusion and interdisciplinary collaboration, though constituents express that a centralized location would be optimal.

Interdisciplinary collaboration in the SPH occurs through a variety of mechanisms. One such means is through the Clinical and Translational Science Institute (CTSI), which is led by the head of the Division of

Epidemiology and Community Health. The CTSI also allows the SPH to work directly with communities, creating opportunities to fulfill its service goal. The Center for Health Inter-professional Programs (CHIP) creates a venue for students throughout the AHC to network with each other in an effort to foster communication across disciplines. Further, the SPH's governance structure is a significant means by which interdisciplinary collaboration occurs. Nearly all SPH committees contain representatives from each of the four divisions. Committee participation has created a platform by which faculty from divisions share information, learn new methods and engage in continuous quality improvement, all with the aim of achieving the school's mission, vision and goals.

SPH students have the opportunity to engage in interdisciplinary collaboration, as they may enroll in elective courses in other academic units throughout the institution. During the site visit, students expressed the value gained by enrolling in non-public health courses to broaden the scope of their public health education.

1.5 Governance.

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

This criterion is met. Governance at the school occurs on the program, division and school levels. Programs retain a large degree of autonomy in the governance of its programmatic functions, while functions such as faculty promotion and tenure and implementation of new courses are vetted through division and school-level committees. The school's EPC provides the most demonstrable example of school-wide governance, as the committee actively oversees curricular content and academic practices across programs. Other school-wide committees demonstrate broad participation from faculty and staff across divisions and programs. A number of committees are interdisciplinary and provide opportunities for faculty and staff interactions, though there appears to be duplication in the responsibilities of some committees. Alumni also are involved in committees, but there is not broad student representation across committees. Student governance is primarily exhibited through the SPH's Student Senate. Meeting monthly, this active student-led group addresses students' interests within the SPH and provides opportunities for students to engage in public health activities beyond the classroom. The senate consists of a student representative from each division in the SPH. Students serving on the senate may also be invited to participate in program-level, school-level and university-level committees.

Mechanisms for engaging faculty, staff and students in decision making and policy formation are present at the division level and more expansively at the school level. Nine standing committees are in place to carry out governance functions at the school level, which include the Executive Team; Educational Policy Committee (EPC); Academic Appointment, Promotion and Tenure (APT) Committee; the Faculty

Consultative Committee (FCC); Global Coordinating Committee; Recognition, Awards, and Honors (RAH) Committee; Academic Professional and Administrative (P & A) Senate and the Staff Association.

The Executive Team, chaired by the SPH dean, functions to advise the dean in matters related to the school's mission, vision, goals, policies, organizational structure, strategic direction, planning and evaluation, funding strategies and resource allocation. Convening once per month, members of this team are the school's four division heads, associate/assistant deans and the chief financial officer (CFO). The dean and Executive Team solicit feedback on policies and standards from FCC or the EPC. The dean and the CFO make the budget and vet it through the Executive Team.

The EPC, meeting once per month, reviews existing curricula and proposals for new courses. The dean also refers to this committee for modifications to educational policies and standards. Voting members include program directors and one faculty member from the undergraduate public health minor. Ex-officio members include the associate dean for learning systems, the assistant dean for education operations, a program coordinator and the student senate president.

The APT Committee meets a minimum of four times per year to review faculty candidate credentials for appointment, promotion and tenure and offers its recommendation to voter-eligible faculty. This committee receives the candidate's file from the division-level search committee. The committee is also responsible for conducting post-tenure review of faculty and reviewing faculty leave request for professional development. The committee is comprised of two faculty from each division and an SPH staff member as voting members, while the senior associate dean for academic affairs serves in an ex-officio capacity. Members elected to the committee serve two years terms, with the possibility of serving a second two-year term.

The Global Coordinating Committee is responsible for expanding the school's global market and partnerships and making constituents aware of global opportunities. Convening monthly, this interdisciplinary committee consists of faculty and staff internal and external to the SPH. Members include the SPH's assistant dean for education operations, the CFO and a faculty member from each SPH division (except health management and policy), as well as representatives from veterinary medicine, nursing, family medicine/community health, the Office for Global Health and Social Responsibility, Global Programs and Strategic Alliances, Caribbean Public Health, the alumni association, career services and the health career center.

The RAH Committee meets twice per year to review nominations and distribute awards to its constituents and community members that have made significant contributions. The committee includes members from each SPH division, a previous award recipient and a staff member. The committee has three vacant positions for a student senate representative, an alumnus and a P & A Senate member.

The FCC is the committee that reviews faculty concerns and makes potential steps for mediation to the dean. This committee meets once per month and consists of at least one faculty from each division. The FCC will offer recommendations on academic policies and standards from the executive team. The P & A Senate consists of a representative from each SPH division and provides a forum for professional staff to express concerns.

The self-study reported a Staff Association existing to respond to employment issues and conduct staff development seminars for bargaining unit and civil service employees. The self-study reported that this committee consists of representatives from each SPH division and the university's central offices. During the site visit however, reviewers were informed that this committee is not active and that a human resources director oversees these functions.

1.6 Fiscal Resources.

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

This criterion is met. The university uses what is described as a "compact process" to allocate resources annually. In the SPH, this process begins by assessing the school's priorities with the Executive Team and the CFO. The dean identifies final budget priorities and may request additional funds to support new initiatives. The process then includes the preparation of a complete budget analysis, a brief statement of achievements during the past year, goals and objectives for the coming year, performance measures and related budget requests. The SPH's compact request is submitted to the provost and the vice president for health sciences, who discuss the compact with other central administrators, reviewing the level of new funding that may be forthcoming based on financial reports and other deliverables provided to the provost. The final compact is an agreement between the dean and the provost. This budget is then reviewed by the president and other key central administrators to make final budget allocations and approvals. The vice president for health sciences reported that he recuses himself from the Medical school's compact process meeting with the president and other key administrators to reduce the appearance of a conflict of interest based on his dual role as the dean of medicine.

The university operates under a responsibility-centered management system in which the school's financial resources are drawn mainly from tuition income, indirect cost recovery (ICR) and state funds. From the total funds in fiscal year (FY) 2014, the dean allocated 57.4% of the tuition generated by the SPH and 60% of the school's ICR to each division. State funds are kept at the school level to pay for a portion of university assessment fees. State special funds are allocated in accordance with the intent of the legislative appropriation. Unallocated funds are also retained by the dean to support targeted initiatives, new faculty hires, the Dean's Office, the Office of Admissions and Student Resources, the

Communications Team, the Office for E-Learning Services and other central functions, as well as to fund a reserve for fluctuations in sponsored research and tuition revenue.

Table 1 presents the school's funds and expenditures.

Table 1. Sources of Revenue and Expenditures by Major Category, Fiscal Years 2007-2013							
	2007/ 2008	2008/ 2009	2009/ 2010	2010/ 2011	2011/ 2012	2012/ 2013	2013/ 2014
Sources of Funds							
Tuition & Fees	11,471	12,235	13,905	16,816	17,913	18,773	18,574
State Appropriation	12,531	15,825	13,639	11,383	7,650	7,504	7,580
University Funds	3,956	2,773	2,468	2,324	1,910	2,730	2,663
Grants/ Contracts	96,519	74,286	65,073	81,850	85,073	86,069	92,181
Indirect Cost Recovery	13,596	13,130	13,363	16,642	16,253	14,989	14,032
Endowment	785	454	369	533	465	345	264
Gifts	1,924	3,399	2,919	1,942	1,795	2,001	1,505
Net Transfers	1,316	2,219	-493	3,602	2,575	2,700	2,301
Total Revenue	142,098	124,322	111,242	135,093	133,634	135,113	139,101
Expenditures							
Faculty Salaries & Benefits	21,100	23,009	23,246	23,299	22,194	22,423	22,930
Staff Salaries & Benefits	31,494	31,312	31,778	35,548	34,778	33,804	31,535
Operations	65,190	41,686	32,740	44,424	50,818	54,355	62,617
Travel	1,496	1,918	1,552	1,937	1,900	1,713	1,907
Student Support	6,379	7,173	7,487	8,031	7,888	8,244	8,556
University Tax	15,660	17,112	17,749	16,053	14,515	13,984	14,264
Total Expenditures	141,319	122,210	114,552	129,292	132,093	134,524	141,809

Note: All numbers in the table are in thousands.

As seen in Table 1, total funds have remained relatively stable from FY08 until FY14 alongside declines in state funding by over 50% and university funding by 33%. Expenditures during this period of time have also remained essentially stable across all budget categories. Both the SPH dean and the vice president for health sciences noted during the site visit that a new legislative initiative to increase research funding (based on a recent study demonstrating a high return on investment in research) is anticipated to be the first increase in funding that the university has had for research in many years. Allocation of this new research funding will be based on proposals prepared by school deans, reviewed and prioritized by the provost and vice chancellor and ultimately considered at the university level.

The school's measurable fiscal objectives reflect increases in faculty salaries above target levels for all faculty ranks. Institutional expenditures per student FTE have increased by 41% over the three-year reporting period, and annual scholarships and other student subsidies awarded have also risen significantly by 82% over the three-year reporting period. Despite these positive trends, however, SPH administrators, faculty and the vice president for health sciences noted that funding for students remains

well below comparisons with other schools and universities. Despite this low level of student support, which may lead to the school not being able to make competitive offers to some students, the school has adequate financial resources to fulfill its stated mission and goals and its instructional, research and service objectives.

1.7 Faculty and Other Resources.

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

This criterion is met. The SPH has maintained a stable primary faculty complement within each of the core public health areas over the past three academic years. In AY 2013-14, the school had a total of 129 primary faculty contributing approximately 125 FTEs. In addition to primary faculty, the school employs a number of adjunct and contract faculty who contribute to instructional, advising and research operations. While there are slight variations in the headcounts and FTE of non-primary faculty within each division, overall the school has remained stable in its FTEs as a whole and within its individual academic units. Student/faculty ratios are well within the acceptable levels for advising and instruction.

The SPH employs over 200 professional and administrative staff personnel and an additional 134 part-time temporary employees. Although these part-time employees are concentrated in the Division of Epidemiology and Community Health, they provide support throughout the school. In addition, the Division of Epidemiology and Community Health hires a number of students. Overall, there are nearly 300 students, research assistants, teaching assistants and administrative fellows employed at the SPH.

The SPH has 184,116 square feet of space for its administrative, instructional, research (laboratory and clinical) and computer facilities. The school's allotted physical space is dispersed over nine locations on and off the main campus. Some of this space is owned by the university and some is rented. The school's administration is centralized in the Mayo Memorial Building on the University's Minneapolis East Bank Campus. As the site team learned during conversations with the vice president for health sciences, there are plans for the SPH to consolidate some of its faculty and programs in space nearer to the main campus in the summer of 2015. He acknowledged that this additional space, in the Phillips-Wangensteen Building, would not resolve the space needs of the SPH, but it would be an important step in the right direction.

The university and the school provide computing services for faculty, staff and students. The university's Academic and Distributed Computing Services (ADCS) provides support services for leaning about information technology, its applications, capabilities and anticipated needs in the future. The university's Academic Technology Support Services provides assistance in the use of learning technologies and assists faculty in developing multimedia learning products. The university provides technology personnel who can assist with technology breakdowns in a classroom or during events.

The school ensures that computing and technology services are available for students via computing labs and for instruction via wireless classrooms. In 2012, the school transformed a traditional classroom into a redesigned facility that includes large tables for discussion and teamwork, a wireless large-screen HD projector and videoconferencing capabilities. The school's Office of E-Learning Services provides faculty assistance in instructional design and course management and other e-learning strategies, such as hosting live broadcasts, video webcasting, video storage, video and audio editing and database management.

The university has a central library with six million print volumes and 37,000 current serial subscriptions including books and journals. The Health Science Libraries (Bio-Medical Library, Wangensteen Historical Library of Biology and Medicine and Veterinary Medical Library) have an assigned librarian serving as a liaison to each school to deliver specialized instruction to faculty, staff and students, perform literature reviews and collect materials in public health. Libraries possess adequate personnel to respond to requests from faculty, staff and students.

1.8 Diversity.

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

This criterion is met with commentary. The school defines males, African Americans, Native Americans, Hispanics and Pacific Islanders as its under-represented populations. The school is working to implement initiatives to increase diversity among faculty, staff and students. Efforts include the recent hiring of a director for diversity and inclusion, promoting student outreach efforts, providing educational programs and working with admissions committees to actively recruit and admit diverse students. Student outreach efforts include development of the public health minor, which attracts a number of minority students, and targeted outreach at other UMN campuses and schools that have higher minority enrollment rates. The Diversity Initiatives Summary includes plans for improving and supporting student diversity but does not include school specific plans for recruiting minority faculty and staff. However, the school does follow and utilize guidance from the university's Office for Equity and Diversity. The school also leverages its strong connections in the community (particularly in areas of the state with large rural, underserved and minority populations) to involve diverse individuals in instruction as adjunct faculty.

On-site discussions reinforce the documentation in demonstrating that the school is working to recruit and support minority students. Students were enthusiastic about the resources they have received from the Office of Diversity and Inclusion. Further, discussions revealed that the school is attempting to increase the number of minority faculty members by recruiting and retaining promising PhD students that can eventually become faculty members at the school.

According to AY 2013-14 data provided in the self-study, approximately 67% of students, 15% of faculty and 16% of staff represent the school's under-represented populations (includes male students of any ethnicity). Extracted data on the enrollment of racial minorities were not provided. Regarding measurable objectives, the school lists the percentages of under-represented groups (includes males) by degree program, and notes that it is still far from meeting its 25% target for each degree program. The school's overall percentage of under-represented students (includes males) has remained relatively stable over the past three years, ranging from 54% to 70%.

The commentary relates to the fact that, although current efforts are strong, continued investment in active diversity initiatives is needed. A more robust and further developed diversity plan that is fully integrated into policies and procedures should be considered. Helpful additions may include plans to address minority or gender representation in faculty and staff, particularly in leadership positions, as well as different definitions of diversity other than ethnicity and gender, such as disability, sexual orientation and socioeconomic status.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. The University of Minnesota SPH offers a wide assortment of degree programs. Of its national and global educational partners, the SPH has begun enrolling students in its hybrid master's programs hosted by Arizona State University, King Fahad Medical City in Saudi Arabia and Chiang Mai University in Thailand. Students enrolled in these hybrid programs complete on-site courses at the host institution and may take online courses offered by the SPH. Credit hour requirements for these hybrid programs meet CEPH's 42 credit hour graduation requirement.

The MPH degree is offered in 10 concentrations, with five concentrations in the core areas of public health. MPH curricular content demonstrates depth of training in each of the five core areas and ensures broad mastery of the discipline. A variety of formats are available including traditional on-campus, hybrid and completely online options. The MS degree is offered in five concentrations, all available through a traditional on-campus format. The MHA degree is offered in three formats: the traditional on-campus format, a hybrid executive format and a hybrid format based in Saudi Arabia. Five academic PhDs are offered in four core areas of public health knowledge.

The MPH is offered with eight other degrees (joint degrees offered by the SPH) with some degrees being available in more than one concentration. The SPH also has a partnership with Arizona State University

to offer the MPH in public health administration and policy and public health nutrition. With its academic degrees, the school offers three dual degrees. The MHA degree is offered with two other degree programs.

Student handbooks exist for each MPH concentration. They are sufficiently descriptive and include course descriptions, academic policies and expectations, program overviews, curriculum/course outlines, affiliated student organizations, opportunities for financial assistance, faculty and staff in the division and contact information.

Table 2 presents the school's degree offerings.

Table 2. Instructional Matrix – Degrees & Specializations			
Specialization/Concentration/Focus Area	Format	Academic	Professional
Master's Degrees			
Biostatistics	On-campus	MS	MPH
Clinical Research	On-campus	MS	
Community Health Promotion	On-campus		MPH
Environmental Health	On-campus	MS	MPH
Environmental Health – Industrial Hygiene	On-campus	MS	MPH
Epidemiology	On-campus		MPH
Health Services Research, Policy and Administration	On-campus	MS	
Healthcare Administration – Executive Program	Hybrid		MHA
Healthcare Administration – Full-time Program	On-campus		MHA
Healthcare Administration – Saudi Arabia Program	Hybrid		MHA
Maternal and Child Health	On-campus		MPH
Maternal and Child Health – Online program	Online		MPH
Public Health Administration and Policy	On-campus		MPH
Public Health Administration and Policy – hosted by Arizona State University	Hybrid		MPH
Public Health Administration and Policy – Executive PHAP program	Hybrid		MPH
Public Health Informatics	On-campus		MPH
Public Health Nutrition	On-campus		MPH
Public Health Nutrition – hosted by Arizona State University	Hybrid		MPH
Public Health Nutrition – Coordinated Master's Program	On-campus		MPH
Public Health Practice- Executive Program	Hybrid		MPH
Public Health Practice – Global One Health hosted by Chiang Mai University in Thailand	Hybrid		MPH
Doctoral Degrees			
Biostatistics	On-campus	PhD	
Environmental Health	On-campus	PhD	
Environmental Health – Industrial Hygiene	On-campus	PhD	
Epidemiology	On-campus	PhD	

Table 2. Instructional Matrix – Degrees & Specializations			
Specialization/Concentration/Focus Area	Format	Academic	Professional
Health Services Research, Policy and Administration	On-campus	PhD	
Joint Degrees			
Business Administration/Healthcare Administration – Full-time program	On-campus		MBA/MPH
Dentistry/Public Health Practice – Public Health Dentistry	Hybrid		DDS/MPH
Law/Community Health Promotion	On-campus		JD/MPH
Law/Environmental Health	On-campus	JD/MS	JD/MPH
Law/Environmental Health	On-campus	JD/PhD	
Law/Epidemiology	On-campus		JD/MPH
Law/Health Services Research, Policy and Administration	On-campus	JD/MS	
Law/Health Services Research, Policy and Administration	On-campus	JD/PhD	
Law/Healthcare Administration – Full-time program	On-campus		JD/MHA
Law/Maternal and Child Health	On-campus		JD/MPH
Law/Public Health Administration and Policy	On-campus		JD/MPH
Law/Public Health Practice – Public Health Law	Hybrid		JD/MPH
Medicine/Epidemiology	On-campus	MD/PhD	
Medicine/Health Services Research, Policy and Administration	On-campus	MD/PhD	
Medicine/Public Health Practice – Public Health Medicine	Hybrid		MD/MPH
Pharmacy/Public Health Practice – Public Health Pharmacy	Hybrid		PharmD/MPH
Public Policy/Public Health Practice – Public Health Public Policy	Hybrid		MPP/MPH
Social Work/Community Health Promotion	On-campus		MSW/MPH
Social Work/Maternal and Child Health	On-campus		MSW/MPH
Urban and Regional Planning/Public Health Practice – Public Health Urban and Regional Planning	Hybrid		MURP/MPH
Veterinary Medicine/Public Health Practice – Veterinary Public Health	Hybrid		VPH/MPH

2.2 Program Length.

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

This criterion is met. The MPH program requires a minimum of 42 semester-credit hours for completion, though a number of programs' credit hour requirements exceed 42 hours. Per university policy, one semester-credit hour is equivalent to 50 minutes of class time per 15 weeks. Credit hour requirements vary by degree with the minimum being 42 credit hours and the maximum requiring 64 credit hours.

The following programs require 42 credit hours: biostatistics, environmental health, epidemiology, online maternal and child health program, executive public health administration and policy program, executive

public health practice (PHP) program and the PHP global one health program. The following programs hosted by Arizona State University require 44 credit hours: public health administration and policy and public health nutrition. The public health informatics, community health promotion (CHP) and on-campus maternal and child health program require 48 credit hours. The environmental health (industrial hygiene) program requires 51 credit hours and the public health nutrition (coordinated master program) requires 64 credit hours.

2.3 Public Health Core Knowledge.

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

This criterion is met. The school requires all MPH students to take courses in the five core content areas (biostatistics, epidemiology, social and behavioral sciences, environmental health and health services administration). Each division has selected the particular core course to be taken by its students to fulfill each core knowledge requirement. A review of syllabi by the site visit team reveals that core courses contain appropriate depth and breadth across the five core disciplines. Students must demonstrate mastery of each content area by receiving grades of B- or higher in each core course.

Table 3 presents the options for completion of required core courses for MPH students.

Table 3. Required Courses Addressing Public Health Core Knowledge Areas for MPH Degree		
Core Knowledge Area	**Course Number & Title**	**Credits**
Biostatistics	PUBH 6414 Biostatistical Methods I (renamed and revised in fall 2014 to Biostatistical Literacy)	3
	PUBH 6450 Biostatistics I	4
	PUBH 6451 Biostatistics II	4
Epidemiology	PUBH 6320 Fundamentals of Epidemiology	3
	PUBH 6341 Epidemiologic Methods I	3
Environmental Health	PUBH 6101 Environmental Health	2
	PUBH 6102 Issues in Environmental and Occupational Health	2
	PUBH 6103 Exposure to Environmental Hazards (EH students only)	2
Social & Behavioral Sciences	PUBH 6020 Fundamentals of Social and Behavioral Science	3
	PUBH 6050 Community Health Theory and Practice I (CHP students only)	3
	PUBH 6914 Community Nutrition Intervention (Nutrition students only)	3
Health Services Administration	PUBH 6751 Principles of Management in Health Services Organizations	2

In addition to the five core courses, the school requires students to take a one credit course in public health ethics in either professional practice and policy or research and policy. Students may petition to waive a required core course if they can document (via syllabi and official transcripts) that they have had sufficient prior exposure to the content. With these documents and the approval of the specific content

area by faculty, students are able to substitute other courses for MPH core courses. Alternatively, students can take equivalency exams to meet the requirements for specific core courses. The results of the equivalency exams are documented on transcripts.

2.4 Practical Skills.

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

This criterion is partially met. All MPH students are required to complete a formal supervised field-based experience. Each program of study defines specific requirements for the practice experience with a minimum of 90 hours and a maximum of 180 hours across programs. The MPH in epidemiology and biostatistics require 90 contact hours. Public health nutrition MPH students must complete between 90 and 120 contact hours. The MPH in maternal and child health, CHP, public health administration and policy and environmental health require 120 contact hours. In the last three years, only one MPH student was allowed a waiver of the practice experience based on prior work experience.

The school has partnerships with a variety of local, regional and national public health organizations where field experiences can take place. Some agencies are also international in location and/or scope, and the school's Career Services Center helps to maintain a list of opportunities and advises students on preparation. Students initiate the field experience process by completing a learning agreement that specifies the objectives, activities, timeline and expected outcomes. The learning agreement is submitted to a community preceptor for domestic experiences and the global health program coordinator for international experiences. The agreement is then approved by the faculty advisor for the student's field experience. The school has an online system for managing these contracts where students, preceptors and faculty may all log in to view the contract, and the system automatically updates advisors at each step of the contract's execution. The online centralized process facilitates the submission of documentation associated with the experience. In addition to ensuring that all students complete a standard contract that outlines responsibilities, expectations and learning objectives, the online process ensures that students and preceptors complete standard evaluations. In the weaknesses section of the self-study document, the school indicated the need for the development of a systematic orientation for field preceptors and building more international partnerships to develop more field experiences available in other countries.

Students and their faculty advisors work together in developing the scope of work and educational objectives for the practicum. A project agreement between the student and the site preceptor is created based on standard forms developed by each department. The preceptors, who are experienced public health professionals approved by the school based on their education and experience, are responsible for supervising, mentoring and providing feedback on student performance that is maintained in the school's

field experience database. Students and alumni who met with site visitors spoke highly of their practicum experience, including some who were hired by the agency where they did their practicum. Community partners reported dedication and hard work from students who worked in their agencies.

The concern relates to the contact hour requirement for the field experience. While the practicum is well-planned, site visitors conclude that the 90 hours completed by some students may not always be sufficient to provide an appropriate depth of practical experience and a meaningful deliverable. Reviewers learned on site that there is some discrepancy across programs in the number of contact hours completed for the number of credits that the student pays for and receives. For example, in the PHP concentration (typically taken by joint degree students) students earn one credit hour per 45 contact hours on site, and in the CHP concentration students earn one credit hour per 60 contact hours on site. Site visitors also learned that most students far exceed 90 contact hours (some have completed over 200 hours), as students typically spend the entire summer at the practicum site. Nonetheless, the school must be able to document the exceptional planning and preparation required in order for a 90-hour experience to be appropriately meaningful, since some students may opt for the minimum number of hours.

<div align="center">**2.5 Culminating Experience**.</div>

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

This criterion is met with commentary. The school requires that all master's-level students complete a culminating experience. While the structure and format of the culminating experience varies across divisions and within programs, the common element across the school is the expectation that students integrate coursework (both theory and knowledge) into applications for professional practice. The appraisal of the culminating experience requires three examiners: two from the school who assess the written and oral components of the student's work and a third examiner from academia or from the community who is able to assess the quality of the professional and scientific application of the student's product. The final grade of the culminating experience is a pass or fail.

MPH students complete one of the following six options for the culminating experience: 1) a literature review, 2) a grant proposal/application, 3) a consultative report, 4) a research project/thesis 5) the CPH exam coupled with an integrative oral presentation on the student's field experience topic (this options is limited only to executive and joint degree students) and 6) an interdisciplinary practicum (community participatory practicum) in which the student produces a written report and a useful product related to the public health needs of a community organization or research group. Each degree program prescribes the culminating experience options that can be selected by its students. For example, biostatistics MPH students must complete a research project/thesis, while CHP MPH students can choose between a research project/thesis and an interdisciplinary practicum. Prior to beginning the culminating experience,

students complete the MPH Culminating Experience Proposal Form, in which students indicate their culminating experience option, describe the public health relevance of their project and list their objectives for the project.

The commentary relates to the culminating experience committees' assessment of students' ability to integrate knowledge acquired across the curriculum and to demonstrate proficiency in required competencies. While the program-specific student handbooks clearly indicate that students should demonstrate integration of knowledge across the curriculum through the culminating experience, implementation of this requirement could not be verified by the site visit team. A standard assessment tool utilized by culminating experience committees across degree programs may be a useful mechanism to provide consistency in evaluation and ensure that faculty are evaluating students on their ability to integrate and apply concepts learned throughout the program.

2.6 Required Competencies.

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

This criterion is partially met. The school has adopted ASPPH's 48 discipline-specific competencies as its core competency set. All degree programs in the SPH have a set of concentration-specific competencies. The school displays each of its competencies verbatim in a matrix linking competencies to required courses. The matrix indicates if the course serves as the primary means of teaching the competency or if the competency is reinforced through the course. A group of MPH faculty and administrators drafted the competency matrix, which went through several iterative steps with faculty to assure that competencies were correctly aligned with courses. The EPC is responsible for the ongoing oversight of competency coverage through required courses.

The first concern is that some MPH concentration-specific competencies are identical to the core ASPPH competencies. The ASPPH core competencies were written to describe the knowledge and skills expected of all MPH students, and a higher degree of knowledge and skills must be associated with students who choose to specialize in a given area. Other concentration-specific competencies, while not identical to the core competencies, correlate more to the basic knowledge expected in core courses than to the depth of knowledge associated with a concentration area. For example, one epidemiology MPH concentration competency is to "calculate sample size" while another is to "calculate measures of prevalence, incidence, morbidity, and mortality." While these skills may certainly be reinforced in concentration-specific courses, the simplicity of these competencies do not adequately portray the depth of knowledge that students actually receive through concentration courses. Likewise, for the MPH environmental health concentration, since the eight ASPPH core competencies are used as concentration

competencies, they may not be an adequate representation of the complexity and depth of knowledge that students are gaining through concentration courses.

The second concern relates to the uneven incorporation of the identified competencies within program handbooks and syllabi. A review of program handbooks and course syllabi reveal that the lists of competencies provided in the self-study do not uniformly appear in these documents, and site visitors could not locate the competencies on the school's website. Most syllabi do not cite competencies or link them to the learning objectives. A closer review of the learning objectives listed on many syllabi reveal that many competencies can be inferred, but syllabi do not make the linkages clear. The absence of competencies on published material may indicate that the competencies are not foundational elements of curricula. Further, because the competency sets are not published, students and faculty may not be privy to the specific set of knowledge, skills and abilities expected of students upon graduation, as defined through the competencies.

Students appeared largely unfamiliar with the core and program-specific competencies during on-site discussions with reviewers, though some indicated that they had heard of the term "competency" and had seen a list of competencies. During the site visit, some faculty members expressed difficulty with measuring attainment of competencies due to the large amount of competencies (for example, there are 82 total competencies that should be attained by MPH epidemiology students). Faculty also mentioned that competencies were not listed on syllabi to avoid redundancy since certain competencies are linked to multiple courses. This suggests to site visitors that competencies may not be consistently mapped to corresponding courses or that the competencies are overly simplified and are inadvertently taught in many courses. As expressed by the assistant dean for education operations, the school is exploring the implementation of a subset of ASPPH cross-cutting competencies into its core competency set and plans to assessment their attainment through student portfolios.

2.7 Assessment Procedures.

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

This criterion is partially met. MPH faculty expect the practicum and culminating experience to be evidence for the mastery of competencies. Further, since courses include assignments intended to serve as competency assessment mechanisms, students earning a grade of B- or higher in a course are considered to be competent in the course's associated competencies. As a mechanism for assessing overall competency attainment, faculty encourage MPH students to complete the Field Experience Assessment Tool (FEAT) at the end of their first year, which guides students through a self-assessment process to determine their mastery of competencies and provides a career development assessment. During the site visit, students who completed the FEAT described it as an insightful exercise. FEAT data

are available only in terms of the singular responses from each student. The site team notes that it may be useful to aggregate these responses in ongoing program evaluation.

The first concern relates to the adequacy of the mechanisms utilized to assess MPH students' attainment of competencies. There are three mechanisms in place that are intended to assess MPH competencies – the practicum, culminating experience and the FEAT. Reviewers conclude that these mechanisms are presently not adequate to assess student attainment of all required competencies. Regarding the practicum and culminating experiences, although students are expected to integrate knowledge acquired across the curriculum, the culminating experience has no assessment tool, and the practicum's student and preceptor evaluation forms do not directly assess student demonstration of the competencies listed in the self-study. The FEAT assessment completed by students does contain all core and concentration competencies, rather only a selected number of competencies are featured on the FEAT. For example, only four of the eight environmental health concentration-specific competencies are assessed through the FEAT. Further, FEAT outcomes are not utilized by program faculty to monitor student performance and to determine if coursework or other learning experiences should be modified to enhance competency attainment. FEAT outcomes are primarily intended to inform the student of his/her strengths and weaknesses and to utilize this data to determine the competencies that should be addressed in the practicum to strengthen the student's skills. In summary, there is no overall assessment of students' performance on the school's stated competencies.

For the MHA program, demonstration of competencies is evidenced through the successful completion of residency programs. Faculty assess the progress of students pursuing academic degrees (MS and doctoral) based upon the achievement of required milestones associated with their agreed upon timeline for degree completion. In addition, each semester the school reviews the GPA of all professional and academic students to ensure that they are making satisfactory academic progress. Students with academic problems are referred to the associate dean for learning systems and students affairs.

The SPH uses informal mechanisms to collect feedback on graduates' ability to perform competencies in an employment setting such as informal feedback from alumni and employers, the school's mentoring program (provides informal opportunities to discuss student performance) and annual alumni panels (during which the current public health practice needs and the performance of graduates are discussed). Although the SPH has not yet identified a formal method for gathering feedback from employers that has proven successful, the most recent survey occurred in 2011 when the Career Services Center surveyed approximately 30 employers of MPH graduates. The school indicated that it received only six responses, despite a concerted effort to gain meaningful feedback. The SPH indicated that the low response rates made the data insignificant and that sharing the data would risk violating student privacy. During AY

2014-15, the school plans to conduct visits to employer work sites in order to gather information on the organization's culture, hiring needs and competencies desired in future employees.

As implemented by the university, the maximum time allowed to graduate from a master's degree program was reduced from seven years to five years. For joint degree students in the SPH, the five year period begins with the first term of enrollment after admission to the program. A review of data for the last three MPH cohorts that have reached the maximum allowable time to graduate, reveal that graduation rates have fallen consistently below CEPH's 70% graduation threshold for master's degrees. Positively, the majority of students complete the program after their second or third year. The MPH cohort that began in AY 2009-10 reached its maximum allowable time to graduate in AY 2013-14. This cohort began with 213 students, and by the end of year five it had a 68% graduation rate (144 students) and 22% withdrawal rate (46 students). The preceding cohort entering in AY 2008-09 began with 182 students, and by the end of year five had a 67% graduation rate (122 students) and a 25% withdrawal rate (45 students). The cohort that entered in AY 2007-08 began with 234 students, and by the end of year five had a 62% graduation rate (146 students) and a 30% withdrawal rate (63 students). Across the same three years, only one MS cohort reached the 70% CEPH graduation threshold. The MHA program on the other hand has exceeded the CEPH threshold across the same three year period.

The second concern relates to MPH program graduation rates. In light of the university's new five year graduation threshold, the school has had a 66%, 67% and 62% graduation rate for the last three cohorts reaching the five year threshold, falling below CEPH's 70% graduation threshold for master's programs. Even using the previous seven-year standard in place at the time, graduation rates fall just short of this criterion's standard at 69% for 2013-2014.

The school's public health PhD programs have in most cases experienced higher graduation rates and lower withdrawal rates than MPH programs. PhD students have a maximum of five years to complete the degree after passing the preliminary oral examination. Students are given up to three years after initial matriculation to complete the preliminary oral examination. Thus, in total, students are given eight years to graduate. A review of data for the last three PhD cohorts that have reached the maximum allowable time to graduate, reveal that graduation rates in most cases have exceeded CEPH's 60% graduation threshold for doctoral degrees. The PhD cohort that began in AY 2006-07 reached its maximum allowable time to graduate in AY 2013-14. This cohort began with 35 students, and by the end of year eight it had a 23% withdrawal rate (eight students) and a 71% graduation rate (25 students). The preceding cohort entering in AY 2005-06 began with 28 students, and by the end of year eight had a 14% withdrawal rate (four students) and a 75% graduation rate (21 students). The cohort that entered in AY 2004-05 began with 26 students, and by the end of year eight had a 23% withdrawal rate (six students) and a 58% graduation rate (15 students), which falls below the CEPH threshold.

The Career Services Center within the school maintains an online site to collect job placement information, and data are analyzed annually from July 1 to June 30. In addition, some degree programs utilize their own tracking systems, such as those within the Division of Biostatistics. Data indicate that the number of employed MPH alumni has steadily increased over the last three years. In AY 2011-12, the school reported that 59% of its MPH alumni were employed full-time. By AY 2012-13, 75% were employed full-time and by AY 2013-14, 85% were employed full-time. These figures do not include graduates who are continuing their education.

Even though only a small number of students took national exams, pass rates were high. Over the last three years, a total of eight students took and passed CPH exam. Twenty students have taken the national nutrition exam over the last three years, and 19 have passed.

2.8 Other Graduate Professional Degrees.

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

This criterion is partially met. The SPH's single graduate professional degree is the CAHME-accredited MHA degree. Offered in full-time and executive formats, the MHA program is another demonstration of the school's growth in international spheres, as the program recently partnered with King Fahad Medical City in Saudi Arabia to offer an executive program. Admission in the full-time MHA program is competitive with nearly 2,000 applicants competing for 30 spots each admissions cycle. To gain admission into the executive MHA program, applicants must have at least three years of management or clinical leadership experience in a healthcare organization.

As a graduate professional degree in the school of public health, CEPH requires that students obtain an introduction to the core areas of public health and an understanding of how their discipline relates to public health goals. The broad introduction to public health must be equivalent to three credit hours of coursework. Based on the MHA curricular requirements, students are not required to attain an introduction to each of the five core areas of public health.

The concern relates to the lack of a broad introduction to public health in the MHA curricula. By virtue of the nature of the content specific to healthcare administration, students do gain an introduction to the health services and administration core area. Further, the program requires a Statistics for Health Management Decision Making course, which site visitors conclude does provide an introduction to the biostatistics core area. The site team however, could not verify coverage of the remaining three core areas of public health (social and behavioral sciences, epidemiology and environmental health sciences). Students and faculty confirmed on-site that these areas are not directly addressed through courses required of MHA students.

2.9 Bachelor's Degrees in Public Health.

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

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

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

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

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

This criterion is not applicable.

2.10 Other Bachelor's Degrees.

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

This criterion is not applicable.

2.11 Academic Degrees.

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

This criterion is partially met. The SPH offers both the MS and PhD degree in five concentrations. The MS degree is offered in biostatistics, clinical research, environmental health, environmental health/industrial hygiene and health services research, policy and administration. The PhD is offered in biostatistics, environmental health, environmental health/industrial hygiene, epidemiology and health services research, policy and administration.

Curricula for academic degree programs are supported by a contingent of expert faculty, and in many concentrations the diversity in professional experiences and training of the faculty create programs rich in interdisciplinary learning. Curricula also reflect depth in discipline-specific content

CEPH criteria requires that all academic degree students complete at least the equivalent of three credit hours of instruction in epidemiology and at least the equivalent of three credit hours of instruction that introduces students to the breadth of public health. While programmatic requirements call for all academic degree students to complete at least three credit hours of coursework in epidemiology, the site visit team found no evidence that students complete the equivalent of three credit hours providing an introduction to public health.

The concern relates to the absence of a requirement for academic degree students to obtain an introduction to public health equivalent to three credit hours. Many academic students are required to complete a public health course in either research and policy or practice and policy, intended to offer an introduction to public health. These courses are one credit hour, falling two credit hours short of the required minimum, which may reflect a need for broader coverage of the core areas of public health. It should be noted that in addition to the epidemiology requirement, many academic programs require a course in biostatistics as well, ensuring coverage of at least two of the five core public health areas. Further, in some PhD programs, such as the PhD in epidemiology, a number of students matriculate from the MPH program, in which they have previously completed courses in the public health core.

2.12 Doctoral Degrees.

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

This criterion is met. The school offers more than the requisite minimum of three doctoral programs. The school has considerable faculty expertise, advanced-level courses and active research sufficient to support its doctoral programs. The school offers on-campus PhD degrees in the following five areas: biostatistics, environmental health, environmental health/industrial hygiene, epidemiology and health services research, policy and administration. The school also plans to offer a PhD program in molecular and systems toxicology, with students enrolling in fall 2015.

The number of newly enrolled PhD students from AY 2013-14 to AY 2014-15 has remained stable (with 30 and 29 students admitted respectively). The PhD programs have graduated between one and ten students in each of the past two years. Currently, there are 148 students enrolled in PhD programs at the SPH.

Review of course syllabi, with confirmation from program directors during the site visit, reveals that the doctoral programs have sufficient courses that are specifically developed for, and have learning objectives targeted toward doctoral students. Doctoral students have access to the following opportunities for financial support: graduate assistantships, teaching assistantships, a non-resident waiver of tuition for out of state students and partial health insurance coverage. However, the school reports in the self-study

document that overall funding for doctoral education has been greatly affected by reductions in federal research and training grants, which has a negative impact on how the school is able to support doctoral students.

The site visit team learned from the PhD program directors that they afford students many opportunities to engage with communities and practitioners. Site visitors also learned that a potential DrPH program has been a topic of discussion among faculty for several years, but some faculty stated that they do not perceive the need for a practice-based doctoral degree because the school's current PhD degrees offer practice-oriented training opportunities. Several alumni expressed to the site visit team their interest in developing a DrPH program, which would allow students to pursue part-time doctoral training since current PhD programs only allow full-time students. Students also expressed that a DrPH program might be better tailored to the needs of advanced public health practice than the current PhD programs.

2.13 Joint Degrees.

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

This criterion is met. With joint degrees in nearly 20 concentrations, the SPH has capitalized on its relationship with other professional schools in the institution. The MPH degree is offered jointly with the JD (law), DDS (dentistry), MD (medicine), PharmD (pharmacy), MPP (public policy), MSW (social work), MURP (urban and regional planning) and DVM (veterinary medicine). Four of the school's public health PhD programs can be combined with a JD and/or MD.

Joint degree programs in the SPH are managed effectively and curricula are thoughtfully structured, ensuring the integrity of public health competencies and values. Each joint degree program has, at minimum, one assigned administrator overseeing coordinated functions and serving as the primary point of contact. In general, information on joint degree requirements, allowable course substitutions and sample study plans are readily available on the SPH website. In the case of joint degree programs offered with the JD, the Law School maintains a Joint Degree Programs Office and website, which is a comprehensive resource for joint law programs. Because this website is not linked to the SPH website, prospective students perusing the SPH website will be unable to easily access program information. Similarly, the SPH website contained no curricular information for the MSW/MPH joint degree. Additionally, the School of Social Work's website and the MSW student handbook contained minimal information on the joint program, but information was found on the number of credits allowed to be shared between programs, in which the MSW student handbook provided conflicting quantities, stating in different sections of the handbook that 12, 18 and 21 credit hours could be double counted.

Joint degrees are offered in either a hybrid or on-campus format. Degrees are awarded distinctly by each school, but courses are allowed to count toward curricular requirements for each degree. Across the joint degree programs, a maximum 12 to 14 credit hours from programs external to the SPH may be counted toward public health degrees. External course substitutions vary by program and may replace public health core, concentration or elective courses. While the amount and type of course substitutions vary by program, a central feature across joint programs is the oversight of external course substitutions to ensure that the public health degree is not compromised. Joint degree program coordinators review external courses to assure alignment with the curricular standards and equivalence to the substituted public health course. A meticulous cross-checking by site visitors of curricular requirements and course substitutions within joint degree programs reveals that the quality of the public health curricula and competency expectations are maintained across the school's joint degrees.

Utilizing the standalone MPH in the PHP concentration and the DDS/MPH in PHP as an example for comparison, reviewers found that the two programs were fundamentally equivalent in regards to public health content and expectations. The standalone MPH degree in the PHP concentration requires one course in each of the five core areas of public health, a one credit hour ethics course, a one credit hour public health collaboration course, a two to four credit hour practicum and a four credit hour culminating experience that may be satisfied by conducting a traditional capstone project or by taking the Certified in Public Health (CPH) exam coupled with an integrative oral presentation on the student's field experience topic. After the prescribed curricular requirements are met, students must take 19 to 21 credit hours of elective coursework to reach the 42 credit hour graduation requirement. While students have the freedom to select courses tailored to their career interests, students must at minimum take one course that relates to each of the following PHP goal areas: 1) public policy development using a systems framework, 2) interventions based on the dimensions of community and culture, 3) assessment and application of basic public health sciences and 4) program management and communications principles. In the DDS/MPH in PHP, students complete all of the required PHP courses, and elective courses must address the four PHP goal areas. Four DDS courses, each with a public health focus, may be counted toward the MPH degree. The culminating experience must align with public health dentistry, and the DDS program's Outreach Experience I and II fulfills the MPH practicum.

The PharmD/MPH and JD/MPH in PHP have identical curricular structures as the DDS/MPH, ensuring that they are likewise equivalent to the standalone MPH program in PHP. In the MD/MPH in PHP, students complete all of the required PHP courses, and like the standalone PHP concentration, MD/MPH students may take the CPH exam coupled with an integrative oral presentation on the student's field experience topic to fulfill the culminating experience. Students must do a three or four credit hour practicum in a public health medicine setting, or by SPH advisor approval only, their clinical rotations may fulfill the requirement (published degree requirements do not state if this option is limited only to residents

in preventive medicine, occupational medicine, aerospace medicine and public health and general preventive medicine). Like standalone PHP students, MD/MPH students may take the CPH exam coupled with an integrative oral presentation on the student's field experience topic to fulfill the culminating experience requirement. In addition to the required PHP courses, MD/MPH students must also complete a public health medicine seminar and a Biostatistical Methods II course. Students must also choose two of the following three public health courses: Program Evaluation in Health and Mental Health Settings, The Health Care System and Public Health or Cost-Effectiveness Analysis in Health Care. For elective coursework, the school has developed key public health learning objectives that should be attained through electives. To ensure that these learning objectives are achieved, students must complete one course in each of the following four areas: 1) public policy evaluation and implementation, 2) primary prevention interventions, 3) epidemiologic analysis of specific health problems and 4) management of health care organizations.

In the DVM/MPH in PHP, students take the same required courses as standalone PHP students, and for the practicum, students must combine aspects of veterinary medicine and public health. Like standalone PHP students, DVM/MPH students may take the CPH exam coupled with an integrative oral presentation on the student's field experience topic to fulfill the culminating experience, and elective coursework must address the four PHP goal areas. In addition, students must take one elective course to fulfill each of the following veterinary public health competencies: biostatistics, surveillance, infectious disease epidemiology, zoonoses and environmental health.

In the MPP/MPH in PHP, students take five of the seven required PHP courses. The biostatistics and health services administration core courses may be substituted by MPP courses – a four credit hour Empirical Analysis course replaces biostatistics, and a three credit hour Public Management and Leadership course replaces the health services administration core course. Students complete a four credit hour culminating experience and a four credit hour practicum that must incorporate public policy and public health. Students take 14 credit hours of public health elective courses, and four courses must address the four PHP goal areas. The MURP/MPH in PHP shares an identical program structure to the MPP/MPH in PHP, with one exception – MURP/MPH students take six of the seven required PHP courses (the biostatistics core course may be substituted for a four credit hour Empirical Analysis course in the MURP program).

Two joint degrees are offered with the MPH in CHP – MSW/MPH and JD/MPH. Similar to joint degrees in the PHP concentration, CHP joint degrees are also comparable to the standalone MPH in CHP, which requires one course in each of the five core areas of public health (with the exclusion of social and behavioral sciences which is covered through concentration-specific coursework). Other standalone CHP requirements include three assessment methods courses, a one credit hour ethics course, eight credit

hours of health behavior and policy intervention courses, six credit hours of community health theory and practice courses, a two credit hour practicum and a two credit hour culminating experience. Elective courses may be taken from any department in the university. A comparison of curricula reveals that the JD/MPH and MSW/MPH in CHP have identical requirements as the standalone degree, with one exception – MSW/MPH students take one less assessment methods course through the SPH. As a replacement, students take a research methods course in the School of Social Work.

The SPH's environmental health concentration is offered with the JD/MPH and JD/PhD. Like standalone environmental health students, joint degree students must complete the five core public health courses and remaining credit hours are used to take courses in an environmental health sub-specialization such as environmental health policy, global environmental health or industrial hygiene. JD/MPH students must also complete a coordinated capstone project, a practicum and a final examination. JD/PhD students complete a 24 credit hour thesis.

The standalone PhD in health services research, policy and administration requires that students take 30-35 credits of general core courses, 12 credit hours in an emphasis area such as health economics, health decision science or clinical outcomes research and a 24 credit hour thesis. Joint JD/PhD students in this concentration must complete the same requirements, but the thesis may be coordinated with the law program. Based on the health services research, policy and administration guidebook for AY 2013-14, joint MD/PhD students in this concentration must complete the same requirements as standalone PhD students. The website link in the guidebook for this joint degree concentration suggests that it is a part of the Medical Scientist Training Program (MSTP) in the Medical School. However, the Medical School's website does not list this PhD concentration as an option for the MSTP program, and no curricular information on this joint degree was located on the Medical School's website.

For JD/MPH students in the epidemiology concentration, the same courses are required as those in the standalone MPH in epidemiology program. JD/MPH students must complete a coordinated culminating experience and a practicum, and elective courses may be selected from a list of preapproved law courses. The JD/PhD in epidemiology likewise equates to the standalone PhD in epidemiology but with the following three exceptions for joint degree students: 1) there is no requirement to serve as a teaching assistant, 2) only two credit hours in specialty courses are required, rather than the four credit hour requirement for standalone students and 3) only five credits are required in sub-specialty courses, rather than 12 credit hours for standalone students.

Students in the JD/MPH in maternal and child health (MCH) complete the same required courses as students in the standalone program. Likewise, students in the MSW/MPH in MCH have a comparable curriculum to the standalone program, with one distinction being that joint degree students take one less

MCH course related to management and communication skills. The second distinction is that a social work course can be substituted for an MCH course in the topic area of methodological and analytical skills and in the topic area management, policy and advocacy.

The curriculum for the JD/MPH in public health administration and policy (PHAP) maintains the same course requirements as the standalone program. Joint degree students must take MPH core courses, PHAP concentration-specific courses (with the exception of the one-credit hour Public Health Leadership course) and required courses related to management, analysis and policy.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is met. The SPH has embraced innovative methods of instructional delivery through its 14 hybrid offerings and one completely online degree. The school's hybrid offerings are the MHA degree (executive program and Saudi Arabia program), MPH in public health administration and policy, MPH in public health nutrition (hosted by Arizona State University), MPH in PHP (global one health program with Chiang Mai University of Thailand), as well as each of the joint degree programs offered with the MPH PHP concentration. The school's one fully online degree is the MPH in maternal and child health.

The school has embraced distance learning methods in an effort to expand its educational offerings to working professionals, out-of-state residents and other adult learners. Offering hybrid programs in collaboration with Arizona State University, Chiang Mai University of Thailand and King Fahad Medical City in Saudi Arabia are examples of how the school is impacting national and global markets in alignment with its mission to enhance population health and prevent disease in the state, nation and world. Synchronous and asynchronous modalities are utilized in online learning at the SPH, and faculty seek to maximize the functionality of the Moodle platform. Providing technical assistance and course design and develop are just two ways the university's Office of E-Learning Services ensures effectiveness in online instructional delivery. Faculty have found the office to be a helpful resource in navigating the Moodle platform and for developing alternatives to system limitations.

The Office of E-Learning Services secondarily functions to ensure adherence to standards of the Quality Matters system. Quality Matters processes and policies have been adopted by the institution to ensure the quality of online courses. As such, each online course undergoes review through the Quality Matters system. In the SPH, syllabi for online courses correlate directly to those offered on-campus, therefore, online programs are subject to identical quality control processes as on-campus programs. New courses must still be vetted and approved at the program, division and school levels. Online students are held to the same standards of learning outcomes, while still considering the needs and characteristics of adult learners. Students spoke highly of their online learning experience and thought that it incorporated innovate approaches and proved to be a valuable component of their public health education.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The school has extensive research programs, which are not only based in the school but also extend through collaborations across the university and on a global level. The school contains 27 interdisciplinary centers, which are supported by federal and in some cases international funding. These centers facilitate faculty and student collaboration. Research programs are based on very high-caliber faculty who are known for the quality of their research and their publications in peer-reviewed journals. Thus, the school pursues an active research program, consistent with its mission, through which faculty and students contribute to the knowledge base of public health disciplines, including research directed at improving the practice of public health.

Among its many research programs are practice-based and community-based research. The school defines community-based research activities as those that include engagement through partnerships with community-based organizations that include community members in research planning and implementation. The school has strong ties with governmental public health agencies, such as the Minnesota State Department of Health and Human Services and community-based organizations to support research initiatives. Several key leaders of these organizations are alumni of the school as was evident from the meeting that site visitors had with a large group of very accomplished and supportive alumni.

The school's research objectives reveal modest increases over the past three years, however, given the high starting level for these objectives, the research accomplishments of faculty are successful. For instance, extramural research funding per full-time faculty member has increased only a modest 5% in

the three-year period from FY12 to FY14. Nonetheless, the amount of extramural funding per full-time faculty member in FY14 is reported in the self-study to be almost $715,000 per faculty member. In addition, the percentage of assistant professors who receive extramural funding within two years of being hired increased by 15% from AY 2012-13 to AY 2013-14.

Students are also actively engaged in research. Students have numerous opportunities to be involved in many aspects of faculty research as well as Minnesota Health Department research projects and projects through other community collaborators, as confirmed by alumni during the site visit. Often student research builds on the research efforts of faculty advisors as confirmed by students and faculty during the site visit, especially in the academic programs. Students also work on extramurally funded research with a total number of almost 300 current students involved in funded research positions.

3.2 Service.

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

This criterion is met. Service is a component in the school's mission statement and included in its goals. The SPH supports the service activities of faculty and students. Faculty service is outlined in the self-study document with an emphasis on professional service activities including journal and grant reviews, serving as speakers and committee members and work in professional organizations.

Service is an important criterion used for faculty promotion and tenure. Measurable objectives include the percentage of faculty members serving in leadership roles in professional organizations (actual 34%, target 25%) and the percentage of faculty serving as members of professional associations, community-based organizations or community advisory boards (actual 76%, target 90%). The self-study document contains a list of faculty service commitments and information on how students find service opportunities.

Faculty have created partnerships with public health agencies and have worked to address specific local public health concerns. Integral to the service infrastructure of the school are the service initiatives hosted by the school, which include technical assistance in data collection and needs assessment; monitoring and evaluation of state policy initiatives; multidisciplinary public health programs; dissemination of public health promotion materials and community-based participatory research. The initiatives include the Minnesota Technical Assistance Program; involvement in the implementation of the Affordable Care Act in the state; the Center for Infectious Disease Research and Policy and the State Health Access Data Assistance Center.

The SPH has established awards to recognize student and faculty service activities. Through the Student Senate, students have been involved in community service activities such as holiday meal delivery and fundraising for non-profit organizations. Students have also served at the Phillips Neighborhood Clinic,

which provides interdisciplinary healthcare to underserved residents of Minneapolis. A provision that supports student engagement in community service is the zero credit hour Community Engagement course, which provides students with liability coverage when conducting service activities and allows service activities to be listed on official transcripts. The school also provides international travel scholarships for students involved in service activities in India and Uganda.

3.3 Workforce Development.

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

This criterion is met. The school's workforce development initiatives include a list of continuing education programs further strengthened by the establishment of the Centers for Public Education and Outreach (CPHEO) in 2000 that includes six different grant-funded training centers. The school has ongoing formal needs assessments, feedback from focus groups, discussions with community partners and informal surveys of community partners. The school has used this feedback to develop high quality educational experiences delivered in various formats and modalities designed to accommodate the special needs of working professionals.

The school administers a number of different training centers that address workforce needs, including the Public Health Institute (which has operated for 13 years), the newly funded Upper Midwest Agricultural Safety and Health Center and the Midwest Center for Lifelong Learning (which partners with health departments in Minnesota and North Dakota to train public health practitioners in core public health competencies). The school also houses a Preparedness and Emergency Response Learning Center (PERLC) and a Preparedness and Emergency Response Research Center (PERRC), both funded by the Centers for Disease Control and Prevention. These centers provide public preparedness trainings to front-line public health practitioners, and the PERRC has a priority of "enhancing the usefulness of trainings". Additionally, the school serves as the administrative home for continuing education programs led by the Midwest Center for Occupational Health and Safety.

The school offers ten post-baccalaureate certificate programs and one licensure program, all approved by the Board of Regents and targeted at working public health professionals. Certificates are available through distance learning and summer intensive programs, and credits are transferrable to applicable programs if a degree is pursued.

The school has established an extensive array of academic and community partnerships to foster workforce development and delivery of continuing education. Partners have included the University of Iowa, the Minnesota and North Dakota health departments, the Great Lakes Inter Tribal Council and the UN Food and Agriculture Organization. Industry partners have included the Rockefeller Foundation and 3M, among many others.

The school serves professionals in 48 states and in 68 countries. Weaknesses noted in the self-study are outreach to rural participants who prefer face-to-face courses, the costs of programs for professionals from departments with dwindling training budgets and the reliance on grant-funded centers, which may make long-term stability vulnerable.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The SPH has a combined total of over 420 faculty to support the instructional, practice and research missions of the school. The school has 129 primary faculty. Of these, 120 are 1.0 FTE and nine are less than 1.0 FTE (five in the Division of Epidemiology and Community Health, two in the Division of Environmental Health Sciences, one in the Division of Biostatistics and one in the PHP concentration). Primary faculty are supported by 303 contract and/or adjunct faculty, most of whom hold doctoral degrees. The secondary faculty complement also includes 42 master's-prepared individuals. Thirty-six secondary faculty were listed without an indication of the degrees earned.

Among contract and/or adjunct faculty, there are numerous individuals (over 50) who represent senior practitioners within fields directly associated with the degrees offered by the SPH. It is evident that the school has access to many qualified core faculty and ancillary public health professionals from local, regional and international agencies who provide a robust educational environment.

Performance data on the school's faculty qualification objectives for the last three years indicate that the school is succeeding in promoting assistant professors to the associate level but is having a little more difficulty with the promotion process with associate to full professor and with faculty recruitment from under-represented groups. The school is reaching its targets in compensation, sponsored funding, publications and professional service activities. In addition, the school engages community partners in a number of ways throughout the year via the Public Health Institute, the annual Community Partners Event, the Star Awards and the student mentoring program.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The university provides web-based materials that outline faculty rules and regulations associated with the following topics: reporting of external professional activities; request for

outside consulting; responsible conduct of research; Health Insurance Portability and Accounting Act online training; appointment, promotion and tenure policies and school education policies. The university requires all new faculty to attend a three-day orientation that describes policies and procedures associated with teaching, research and service. In addition, division heads meet with new faculty to orient them the policies, procedures and expectations related to topics such as: academic freedom and responsibility; academic misconduct; outside consulting activities; tenure regulations and research and service opportunities. The school offers briefings to new and returning faculty from the Dean's Office, the Office of E-learning Services, the Office of Admissions and Student Resources and the Office of Human Resources on topics that include organizational changes, policies and teaching resources. The school communicates to faculty using the SPHere newsletter. The Provost's Office provides updates on tenure and promotion policies.

The school requires that division heads conduct an annual review of tenure-track and contract faculty to assess their goals, needed support, professional development, recommendations for career advancement and opportunities to utilize university resources, such as workshops, seminars, mentoring programs and specialized/targeted funds for leave opportunities. Division heads conduct annual performance reviews with all tenured and non-tenured faculty to ascertain merit pay increases and set goals for the next year. Division heads use the following criteria in their assessments for merit increases for tenure-track faculty: publications, grants, student evaluations, a summary of service activities and other accomplishments. Division heads use the specific expectations spelled out in employment contracts as the criteria to determine merit increases for contract faculty. Division heads assess the performance and the compensation for adjunct faculty based on specific assignments, expectations and employment contracts.

The school has clearly outlined procedures and criteria for tenure and promotion in their Appointment, Promotion, and Tenure Policy document. The document is available online, and it clearly outlines the processes and requirements for appointments, required documentation, review processes and candidate rights for each faculty level. The document describes the processes of post-tenure review under two circumstances: (1) review of a faculty member for underperformance and (2) review of each faculty member every five years after receiving tenure. As reviewers learned on site, the school has modified the post-tenure review from a five year schedule to an annual review for all faculty. All faculty (tenured and non-tenured) are now required to complete an annual accounting of their research, teaching and service accomplishments. In the event that a tenured faculty member consistently falls short of expected productivity, the division head and school administrators will take corrective steps.

The school uses an electronic course evaluation system that reveals students' grades more quickly than the university, if students enter their course evaluation data. This early grade receipt increased the quality

of the information provided on course evaluations. The EPC reviews course evaluations with the expectation that instructors should receive average scores of 4.0 on a 6.0 scale. Division heads can use these benchmarks as guideposts when assessing faculty annual merit performances and for tenure and promotion. In the event of core course evaluations falling below acceptable standards, the EPC chair alerts school leadership to take corrective action. Conversely, when core course evaluations are consistently positive, the EPC notifies school leadership to provide letters of commendation.

4.3 Student Recruitment and Admissions.

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

This criterion is met. The school is committed to recruiting academically prepared and diverse students. The Office of Admissions and Student Resources oversees recruitment through a wide range of strategies including student ambassadors, recruitment fairs, marketing material, preview days and online recruitment sites and chats. The school holds specific recruiting events throughout the year at national conferences such as those hosted by the American Public Health Association and a variety of universities across the country. The school also participates in university-wide recruiting and marketing events. Inquiries are recorded and tracked through the Student Information Database and Inquiry Central systems. However, it is noted that a contact management system would be useful to track prospective students.

Regarding admissions requirements, previous education and professional experience are primary considerations in the selection process. The Office of Admissions and Student Resources receives applications from SOPHAS and coordinates the application process and forwards all completed applications for review to program-level admissions committees. All applicants must provide a personal essay regarding public health interests and letters of recommendation. A baccalaureate degree from an accredited institution is required, and students must have acceptable test scores from the GRE. Some programs permit GMAT, DAT, MCAT or LSAT scores. The following may replace standardized test scores: a previously earned doctorate, foreign medical graduate certificate or successful academic performance in the public health core concepts certificate. Evidence of fluency in English is required of international students. Students may submit a TOEFL or IELTS score or another form of evidence for written and oral fluency.

Each MPH program and academic graduate program has an admissions committee composed of a minimum of three faculty, at least two of whom must hold primary appointments in the school or be university graduate faculty. Admissions committees evaluate each completed application and forward their recommendations to the division chair and dean for review and a final decision. Decisions can be to admit, not admit or admit conditionally. The conditionally admit option is not currently utilized, but it was

previously used for students with strong potential in public health who may have had weaker academic credentials.

Current efforts around recruitment include implementation of the Strategic Student Enrollment Committee to analyze and plan for student recruitment. Diversity is also integrated into recruitment. Efforts to increase diversity among incoming students include the Diversity of Values and Experience (DOVE) program and the summer biostatistics institute.

4.4 Advising and Career Counseling.

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

This criterion is met. SPH students are provided with a new student orientation at the start of their first academic year. In this setting, students meet with representatives from their respective concentration for an orientation to their specialty area of study. A student handbook is available to describe information about the program and operational details about policies, curriculum requirements and processes. The school has a number of websites and electronic materials that provide information on curriculum, faculty, field experiences, volunteer and job placement opportunities and other relevant public health information.

At the start of the program, each student is assigned a three-member advising team that includes a faculty advisor, program coordinator and the program director. The type of student advising provided includes academic advising, field experience and culminating experience advising, doctoral student advising and professional and personal advising. Students can also access other resources online or on campus such as a LinkedIn and other social media groups, the Career Services Center and special programs like employer recruitment events and job workshops. Resources at the Career Services Center include a website where job opportunities are posted, one-on-one career counseling and professional mentoring opportunities. During the site visit, students commented that they felt strongly supported by faculty, staff and the Career Services Center. They also commented on the ease and accessibility of communicating with their advisors and other faculty. Alumni highlighted the student mentoring program and how they enjoyed working with the students.

The major source of information on student satisfaction with academic and career advising is the annual student survey. Response rates to this survey averaged 44%. AY 2013-14 data show that the majority of respondents indicated satisfaction (80% with faculty advising, 94% with program academic advising and 94% with career advising services).

The school has a defined process for students to submit grievances and complaints. There have not been any complaints submitted in the last three years.

**COUNCIL ON EDUCATION FOR PUBLIC HEALTH
ACCREDITATION SITE VISIT**

**University of Minnesota
School of Public Health**

October 20-22, 2014

Monday, October 20, 2014

8:30 am	<u>Site Visit Team Request for Additional Documents</u> Mary Ellen Nerney, Assistant Dean, Education Operations and Lead on CEPH Accreditation Project Gail Brinkmeier, CEPH Self-Study Project Manager
8:45 am	<u>Site Visit Team Resource File Review/Executive Session</u>
9:30 am	<u>Meeting with Core Leadership Team</u> John Finnegan, Jr., Dean, School of Public Health Kristin Anderson; Associate Dean for Learning Systems and Student Affairs Debra Olson, Associate Dean for Global Health Beth Virnig, Senior Associate Dean for Academic Affairs and Research Joe Weisenburger, Chief Financial and Administrative Officer Tara Anderson, Director of Alumni Relations & Annual Giving Susan Rafferty, Director of Human Resources Mary Ellen Nerney, Assistant Dean for Education Operations and Lead on Accreditation Ira Moscovice, Division Head, Health Policy & Management Bradley Carlin, Division Head, Division of Biostatistics Bernard Harlow, Division Head, Division of Epidemiology & Community Health Bruce Alexander, Division Head, Division of Environmental Health Sciences
10:45 am	<u>Break</u>
11:00 am	<u>Meeting with School Leadership Team and Faculty Advisory Committee</u> Kristin Anderson, Associate Dean for Learning Systems Debra Olson, Associate Dean for Global Health Beth Virnig, Senior Associate Dean for Academic Affairs and Research Saonli Basu, Associate Professor, Biostatistics Craig Hedberg, Professor, Environmental Health Sciences Katherine Waters, Assistant Professor, Public Health Practice Elizabeth Wattenburg, Associate Professor, Environmental Health and Chair, Education Policy Committee Joe Weisenburger, Chief Financial and Administrative Officer Guy Piotrowski, Applications and Admissions Coordinator Richard Archer, Student Data Coordinator Sherlonda Clarke, Director of Diversity and Inclusion Mary Ellen Nerney, Assistant Dean for Education Operations and Lead on Accreditation Gail Brinkmeier, CEPH Self-Study Project Manager James Pankow, Professor, Epidemiology
11:45 pm	<u>Break</u>
12:00 pm	<u>Lunch with Students</u> Lindsey Boyke, Nutrition MPH student Cesar Dominguez, Environmental Health MPH student Michelle Gin, Maternal and Child Health MPH student Elizabeth Madison, Master of Healthcare Administration student Lauren O'Brien, Community Health Promotion MPH student Love Oluwafunto Odetola, Maternal and Child Health MPH student Monica Palese Public Health Administration and Policy MPH student Mariah Quick, Epidemiology MPH student Bette Dougherty, Public Health Administration and Policy MPH student Bushra Hossain, Public Health Administration and Policy MPH student Marcus Howard, Public Health Administration and Policy MPH student Jamie Kenealy, Community Health Promotion MPH student Yang Liu, Environmental Health Sciences PhD student Jane Anderson, Nutrition MPH student

Charlotte Bolch, Biostatistics MS student
Mike Bancks, Epidemiology PhD student
Deirdre Green, Environmental Health Sciences PhD student
Tyler Boese, Health Services Research, Policy and Administration MS student

1:30 pm	<u>Break</u>

1:45 pm	<u>Meeting with Instructional Programs for MPH</u>

Craig Hedberg, Professor, Program Director, Public Health Practice MPH program & representing Environmental Health Sciences MPH

Keith Horvath, Associate Professor, Program Director, Community Health Promotion MPH

James Pankow, Professor, representing Epidemiology MPH program

Donna McAlpine, Associate Professor, Program Director, Public Health Administration and Practice MPH

Ruby Nguyen, Assistant Professor, Program Director, Undergraduate minor and representing Maternal and Child Health MPH program

Mark Pereira, Associate Professor, Program Director, Nutrition MPH program

Cavan Reilly, Associate Professor, Program Director, Biostatics MPH program

Doug Wholey, Professor, Program Director, Public Health Informatics MPH

Rebecca Wurtz, Associate Professor, Program Director, Executive Program in Public Health Administration and Policy

Katherine Waters, Assistant Professor, Program Director Executive Program in Public Health Practice

Matt Simcik, Professor, Environmental Health Sciences

3:00 pm	<u>Break</u>

3:15 pm	<u>Team Executive Session and Resource File Review</u>

5:00 pm	<u>Adjourn</u>

Tuesday, October 21, 2014

9:00 am	<u>Meeting with Leadership of University</u>

Dr. Jay Brooks Jackson, MBA, MD, Medical School Dean and Vice President for Health Sciences

9:45 am	<u>Break & Resource File Review</u>

10:00 am	<u>Meeting with Faculty Related to Research, Service, Workforce Development</u>

Debra Olson, Associate Dean for Global

Beth Virnig, Senior Associate Dean for Academic Affairs and Research

Rhonda Jones-Webb, Professor, Epidemiology & Community Health

Kathleen Thiede Call Professor and Director, Graduate Programs in Health Services Research, Policy and Administration,

Ira Moscovice, Division Head, Health Policy & Management

Craig Hedberg, Professor, Environmental Health Sciences

Lynn Blewett, Professor, Health Policy & Management, Director of State Health Access Data Assistance Center (SHADAC)

Susan Gerberich, Professor, Environmental Health Sciences

Kyle Rudser, Assistant Professor, Biostatistics and Clinical and Translational Science Institute (CTSI)

Sarah Gollust, Assistant Professor, Health Policy & Management

Pamela Lutsey, Assistant Professor, Epidemiology & Community Health

Matteo Convertino, Assistant Professor, Environmental Health Sciences

Louise Stenberg, Associate Director, Centers for Public Health Education and Outreach

Christine Carlstrom, Director, Public Health Institute

Joe Weisenburger, Chief Financial and Administrative Officer

11:15 am	<u>Break and Resource File Review</u>

11:45 am	<u>Lunch with Alumni and Community Stakeholders</u>

Donna Anderson, Retired Director - Dakota County Public Health Department, MPH alumna

Janny Brust, Minnesota Council of Health Plans, MPH alumna

Jeffrey Budd, Beckman Coulter, Inc., MS and PhD alumnus

John Frobenius, Retired – University of Minnesota Board of Regents, MHA alumnus

Kari Guida, Minnesota Department of Health, MPH and MHI alumna

Geoff Kaufmann, Red Cross

Amy LaFrance, Minnesota Community Measurement, MPH alumna

Aggie Leitheiser, Minnesota Department of Health, MPH alumna

Gretchen Musicant, Minneapolis Department of Health, MPH alumna

Andy Nelson, HealthPartners, MPH alumnus

Brian Osberg, Larson Allen, MPH alumnus

Cheryl Peterson-Kroeber, Minnesota Department of Health, PH certificate graduate
Kim Radel, Allina, MHA alumna
Tracy Bergemann, Medtronic
Dan Brady, Target (Security & Emergency Preparedness), MPH alumnus
Kristen Godfrey Walters, Hennepin County Medical Center, MPH alumna
Liesl Hargens, Medtronic, MPH alumna
Sarah Midler, Arundel Stree Consulting, MPH alumna
Jim Rice, USAID- Leadership, Management and Governance Project, MHA and PhD alumnus

1:30 pm   Meeting with Instructional Programs - MS, PhD and MHA Directors
Saonli Basu, Associate Professor, Program Director, Biostatistics MS and PhD program
Kathleen Thiede Call, Professor, representing Health Services, Research, Policy and Administration, MS & PhD
     programs
Kamakshi Lakshiminarayan, Assistant Professor, Program Director, Clinical Research MS program
DeAnn Lazovich, Associate Professor, Program Director, Epidemiology PhD program
Lisa Peterson, Professor, representing Environmental Health Sciences, MS & PhD program
Thomas Gilliam, Administrative Director, Masters Healthcare Administration and Executive Studies program

2:45 pm   Break & Resource File Review

3:00 pm   Meeting with Faculty and Key Staff Related to Faculty Issues, Student Recruitment and Advising
Maggie Aftahi, Director of Admissions & Student Leadership
Sherlonda Clarke, Director of Diversity and Inclusion
Susan Rafferty, Director of Human Resources
Alan Lifson, Professsor, Epidemiology & Community Health
Joseph Koopmeiners, Assistant Professor, Biostatistics, Masonic Cancer Center
Pinar Karaca-Mandic, Associate Professor, Health Policy and Management
Mary Ellen Nerney, Assistant Dean for Education Operations and Lead on Accreditation
Andrea Kish, Senior Program Coordinator, Epidemiology & Community Health
Victor Massaglia, Director of Career Services

4:00 pm   Break

4:15 pm   Executive Session and Resource File Review

5:30 pm   Adjourn

Wednesday, October 22, 2014

9:00 am   Executive Session and Report Preparation

12:00 pm   Working Lunch, Executive Session and Report Preparation

1:00 pm   Exit Interview with Core Leadership Team
John Finnegan, Jr., Dean, School of Public Health
Kristin Anderson, Associate Dean for Learning Systems and Student Affairs
Debra Olson, Associate Dean for Global
Beth Virnig, Senior Associate Dean for Academic Affairs and Research
Elizabeth Wattenberg, Associate Professor, Environmental Health and Chair, Education Policy Committee
Ira Moscovice, Division Head, Health Policy & Management
Bradley Carlin, Division Head, Division of Biostatistics
Bernard Harlow, Division Head, Division of Epidemiology & Community Health
Bruce Alexander, Division Head, Division of Environmental Health Sciences
Joe Weisenburger, Chief Financial and Administrative Officer
Tara Anderson, Director of Alumni Relations & Annual Giving
Susan Rafferty, Director of Human Resources
Martha Coventry, Director of Communications
Ann Freeman, Senior Public Relations Consultant
Mary Ellen Nerney, Assistant Dean for Education Operations and Lead on Accreditation
Gail Brinkmeier, CEPH Self-Study Project Manager

2:30 pm   Team Departs