REVIEW FOR ACCREDITATION

OF THE

SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
June 3-5, 2015

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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 North Texas Health Science Center. 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 June 2015 by 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 North Texas Health Science Center (UNTHSC) is one of three units of the University of North Texas System, which also includes the University of North Texas at Denton and the University of North Texas at Dallas. Each campus has an independent administration that reports to a common Board of Regents and chancellor. The Health Science Center was opened in 1970 and has a combined faculty of more than 400, a staff of more than 1,400, 750 part-time and adjunct faculty from other institutions and the community and 1,949 students. The UNTHSC is composed of five schools and colleges, which include the Texas College of Osteopathic Medicine, the Graduate School of Biomedical Sciences, the School of Health Professions, the UNT System College of Pharmacy and the School of Public Health.

In 1995, the Texas Higher Education Coordinating Board approved the institution's request to offer a Master's of Public Health Degree (MPH) in collaboration with the University of North Texas in Denton. In 1997 the collaboration was dissembled and the present-day SPH was formed. The school currently has 98 faculty members, 14 staff members and 444 students currently enrolled.

The predecessor of the school, the North Texas Master of Public Health program, was first accredited in 1999. In June 2008, the School of Public Health was accredited by CEPH for a seven-year term. The Council accepted interim reports in spring 2009.

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 school of public health at the University of North Texas Health Science Center. The school is a part of a regionally accredited institution. The dean, faculty members and students have the same rights, privileges and status as other schools and colleges at the health science center.

The school's goal statements emphasize the importance of instruction, research and service, and its organizational culture embraces core public health values and goals. The school plans, develops and evaluates 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 public health field.

The school functions as a collaboration of disciplines and addresses the health of populations and the community. The school uses an ecological approach to create a learning environment that promotes a

framework for intellectual learning and development of public health core values. The school is committed to teaching, research and service, as reflected in its goals and value statements.

The school's faculty are trained in a variety of disciplines, and faculty ensure that the environment supports interdisciplinary collaboration. The school has adequate resources to offer MPH and doctoral degrees.

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

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

This criterion is met. The school has a clear and concise mission statement with supporting goals and objectives. The mission, vision and goals of the school were derived from the recently developed (2013) statements of the University of North Texas Health Science Center. This was an iterative process consisting of meetings with faculty, staff, students and community members.

The school's mission is as follows:

> To create solutions for a healthier community by advancing public health knowledge through research, service and the education of public health professionals. The health science center values are: serve others first, integrity, respect, collaboration and be visionary. These are embraced by the school and provide a framework for expected behaviors which guide teaching, research and service.

Faculty and staff attend one or two annual retreats each year to review the current internal and external environment of the organization and to develop goals, tactical initiatives, performance measures and targets for the mission, goals and objectives. The provost and university-wide Office of Strategy and Organizational Excellence establish systems for providing and monitoring health center wide goals and targets. Employers, community boards, and community based research projects provide informal input which assists the school in establishing relevant goals and targets for planning purposes.

The school articulates four primary goals in the areas of administration, academic affairs, research and community engagement. From 2009 to 2013, the university followed a planning process that resulted in a strategic map each year that was focused around the goals. Each goal area has a range of eight to 15 measurable objectives and targets.

The school has adopted the five values that were developed by the HSC, which include the following: serve others first, integrity, respect, collaboration and be visionary. Information on the mission, vision, values, goals and objectives are available on the school's website and reinforced in promotional materials for recruitment and on bulletin boards in the school. The site team validated visible reinforcement and

demonstration of values in the school environment as well as familiarity of leadership, faculty and students with these concepts.

A new organizational model for the HSC will be implemented by fall 2015. The concept includes an "academy" model, with organizational units that focus on teaching and learning, while institutes serve as the sites for interdisciplinary research and knowledge generation. This concept is in early stages and will be the topic of the school's annual retreat in July 2015.

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. The school uses a variety of methods and processes in monitoring and evaluating its progress against its defined objectives. Data sources and evaluation tools include Office of Admissions and Academic Affairs reports, annual faculty performance reviews, research and grant funding reports, committee minutes and quality improvement reports from the HSC's Office of Strategy and Organizational Excellence, annual student satisfaction surveys, student course evaluations and budget reports from the provost.

The SPH Executive Council monitors the overall evaluation process and oversees data collection, analysis and interpretation. The strategic map is constructed each year and the data are monitored using TracDat software. The strategic map acts as a checklist and allows the school to determine whether each goal was completed and whether each target's performance measures were achieved. If a target is not achieved, an action plan is developed to specify how target objectives will be achieved in coming years. At a higher organizational level, the Executive Team (senior administrators, deans and vice presidents) of the HSC reviews specific metrics quarterly. These are consistent across all units of the HSC. The provost follows up with the deans as needed to monitor progress.

To ensure that students are engaged in the evaluation process, the dean's office hosts student focus groups to obtain in-depth information. Feedback is used to develop action plans for improvement. For example, students were not satisfied with existing opportunities to learn SAS, so the school increased the availability of courses and self-tutorial tools at no cost. In addition, student feedback resulted in actions to establish ten new mentored research experiences, hiring of a new practicum liaison and dismissal of an adjunct faculty member.

The school's strong and long-term working relationships with community partners allow for the school to gain input and advice from public health leaders and decision-makers. The Public Health and Prevention Council, now the Advisory Council, had more than 50 members who were able to provide feedback on teaching, learning and community engagement. For example, the council integrated its own committee work on healthy lifestyles with the school's committee for the annual North Texas Health Forum, and committee members and health leaders are involved as guest speakers in MPH and doctoral courses.

The accreditation self-study process provided another opportunity for cross sector input on how well the school is performing on its mission, vision, goals and values. The school established a CEPH Committee in summer 2013. Members included nine faculty/administrators, four alumna, five students, two community members and the associate dean for academic affairs served as the chair. The committee met twice monthly. A timeline was established for completing assignments. Faculty, staff, students, alumni and community members were involved as needed to collect and review information and comment on the self-study. The self-study was also reviewed by the provost. General familiarity with the report was validated on site.

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1.3 Institutional Environment.

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

This criterion is met. The University of North Texas Health Science Center is accredited by the Southern Association of Colleges and Schools Commission on Colleges. In addition to public health, the HSC responds to 15 specialized accreditors in areas such as nursing, medicine, forensics and pharmacy. The school enjoys the same level of autonomy and authority as all other schools at the HSC.

The University of North Texas is a system that has three independent institutions, one located in Denton, one in South Dallas and the Health Science Center (UNTHSC) in Fort Worth, where the School of Public Health is located. On the UNTHSC campus there are five colleges and schools, the Texas College of Osteopathic Medicine, the Graduate School of Biomedical Sciences, the School of Health Professions, the UNT System College of Pharmacy and the School of Public Health. The HSC also houses a medical practice (UNTHealth) with five sites in Fort Worth and Tarrant County.

The dean is responsible for the overall leadership of the school including administrative activities, development of the school's budget and resource allocation. The dean reports directly to the executive vice president for academic affairs/provost and is a member of the Executive Team, which is chaired by the president of the HSC.

The dean, in conjunction with the faculty and department chairs, oversees recruitment, selection and advancement of all faculty and staff.

All faculty members including the dean, set academic standards and policies with regard to student admission and the development and implementation of curriculum for all of the school's degree programs.

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 school provides an organizational setting conducive to public health learning, research and service. The school has two training centers to provide support for an expanded emphasis on preparedness and training in biostatistics. The HSC has nine research centers through which faculty members engage in interdisciplinary research with other faculty members and students across the campus.

The dean of the school is responsible for all administrative aspects of the school related to teaching, research and service. The associate dean for administration and student services serves as the financial officer for the school. The dean of academic affairs reviews and coordinates the curricula, and manages compliance with accreditation and other HSC directives and requirements.

The Office of Admission and Academic Services coordinates recruitment and admissions and supports students in their portfolio development, field placement and student service issues. The school is organized into five academic departments: behavioral and community health, biostatistics and epidemiology, environmental and occupational health sciences, health management and policy and public health education. Each department has a chairperson who reports to the dean of the school. The public health education department is unique in its additional responsibility for oversight of the PhD and DrPH Programs and the MPH-Professional Option Program. The faculty for these three programs (PhD, DrPH and MPH-PO) all have appointments in other departments.

Interdisciplinary activities are promoted for faculty and students in teaching, research and service functions. For faculty, interdisciplinary coordination, collaboration and cooperation occurs through the school's committees. For example, the masters, doctoral and practice committees bring together representatives from multiple departments. The school recently established a Program Directors Committee, which brings all masters and doctoral programs together to coordinate curricular changes.

For students, the required course PHED 5197 Professional and Academic Development facilitates interdisciplinary work for all MPH students. The course includes writing, presentation, resume and interview skills as well as an overview of MPH core competencies and inter-professionalism.

Research coordination is fostered by the research manager, Research Committee and through programs such as "Research Schmooze" and "Work In Progress." In these informal settings faculty and students can explore ideas/topics with other health center colleagues and promotes networking and collaboration. Faculty indicated high satisfaction with the organizational environment supporting interdisciplinary work. Integrated professional education is a high priority and value for the new HSC president.

Service coordination is fostered through The Center for Community Health's Advisory Board, which provides input on community intervention projects. Of particular note regarding the future efforts to enhance interdisciplinary collaboration is a proposed restructuring of the Health Science Center into institutes and academies. The institutes, by their very definition, are interdisciplinary in research and practice.

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. The school has clearly defined rights and responsibilities concerning school governance and academic policies. The school has ten standing and two ad hoc committees that contribute to school governance. Faculty, staff, students, alumni and community partners are involved in the school's operations.

School policies are formulated by all committees and are approved by the Executive Council. All proposed changes are reviewed by faculty members before the Executive Council makes the final approval. Minor changes in procedure may be approved by the Executive Council without approval by the faculty. Members of the Executive Council include the dean, all associate deans and all chairs.

The Executive Council oversees the overall planning and evaluation of the school. Planning and evaluation also occur at a departmental level and are initially developed through the Office of Strategy and Organizational Excellence. The deans forward planning and evaluation information to the department chairs and evaluation is discussed and objectives are assessed at faculty retreats each year. The progress of obtaining goals and future plans are then forwarded to the provost and inputted into the evaluation dataset TracDat.

The dean in conjunction with the department chairs is responsible for budget and resource allocation. Based on the HSC's budget, the provost distributes the proposed budget for each school to the deans. The associate dean for administration and student services is responsible for the monitoring and management of the budget.

The Office of Admission and Academic Services conducts student recruitment; the associate dean of administration and student services is responsible for all aspects of student recruitment. Admissions decisions are delegated to the Master's Committee, the PhD Committee and the DrPH Committee. Members of each program committee include representatives from each department/concentration and the associate dean for academic affairs. The Office of Admission and Academic Services also oversees the process for awarding degrees and the Office of the Registrar is final authority in awarding degrees.

Each department chair in conjunction with department faculty are responsible for faculty recruitment. A Search Committee is created, which may include external members. The Search Committee makes recommendations to the chair based on reviews, the chair then forwards the recommendation to the dean and the dean then forwards the potential hire to the provost who makes the final decision. Department chairs are also responsible for faculty retention; the dean reviews and approves the firing of a faculty member. The Tenure and Promotion Committee oversees tenure and promotion and makes recommendations to the dean. The dean then makes a recommendation to the provost. The president of the HSC approves promotions and the University of North Texas System Regents approves tenure. Members of the Promotion and Tenure Committee include a tenured associate or full professor from each department.

The dean in conjunction with faculty makes final approval of academic standards and policies and curriculum changes. Development of new policies or changes in standards, policies and curricula are brought to the Executive Council for review. If approved, they are brought to the faculty for approval. The provost and the Texas Higher Education Coordinating Board must approve any new degree programs.

The current Public Health Prevention Council consists of professionals who are actively engaged in public health work and is the primary source of feedback from community partners and public health professionals outside of school faculty. The Public Health Prevention Council will be redesigned by fall 2015 as an MPH and DrPH Advisory Council in light of the new directions towards the academy model. The Advisory Council will consist of 24 community members, and they will focus on educational issues. This group is smaller and more focused than the prior council, which had more than 50 members and multiple functions. The new advisory group will have five representatives with DrPH degrees, seven with MPH degrees, three physicians, and nurses and other professionals representing a broad range of local, state, federal, non-profit and healthcare organizations.

Faculty members hold leadership positions and are members of 21 university committees including the Leadership Team, the QEP Executive Committee, the Faculty Bylaws Committee, the Values Blueprint Committee and the Communications Committee.

Students have input into the school's governance through participation on committees and in the Public Health Student Government Association. Students are represented on the following school and university committees: PhD Program Committee, DrPH Committee, Practice Committee, Program Directors Committee, Inter-Professional Executive Committee, Research Committee and the CEPH Committee.

1.6 Fiscal Resources.

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

This criterion is met. The school has sufficient resources to fulfill its mission. The HSC has a clear budget process that provides the school with adequate state and local resources to fund the majority of its budget.

The school's budget is based on five primary sources: 1) state allocations based on a formula that includes the number of FTE students and is taxed by the institution at approximately 40%, 2) investment returns from tobacco settlement dollars that were allocated to the HSC and are held in an endowment, 3) institution allocation to the school of "local funds," which can be used for most purposes without restriction, 4) external funds from grants and contracts that recover salary for individual faculty members and staff and 5) fees from sources such as admissions, technology and graduation that can be used for specific purposes by the school.

The school also receives 5% of the total indirect recovery on a grant or contract. However, university research administration and non-academic operating costs are removed before the indirect cost returns are distributed to the PI, school, departments or the institutes. The dean allocates funds for faculty and staff salaries and other non-personnel costs; each department receives funds for non-personnel expenditures. Salaries are managed centrally through the dean's office. The school's funds and expenditures are shown in Table 1.

As noted in the self-study, state cutbacks in funding of higher education have resulted in budgetary constraints for the school. During the site visit the school shared that although it had experienced fairly significant budget cuts several years ago (approximately 10%), it is now back to previous levels of funding. There has been a small increase (from approximately $4.5 million to $5.0 million between 2009 and 2014) in revenue from institution funds. Research grants and contracts also more than doubled from $2.2 million to $5.4 million over the past three years.

The school identifies three outcome measures through which it assesses the adequacy of its fiscal resources. These measures include percent salary recovery on all faculty salaries, annual increase in FTE credit hours and annual increase in overall school income, excluding grants and contract. Although there was a decrease from 16.8% to 6.7% in annual FTE credit hours, the school is still above the 5%

target it has set. The annual increase in overall school income, excluding grants and contracts, has risen from 5.0% to 8.5% (the target is 5%). Although the percent salary recovery on all faculty salaries has increased from 20.5% to 22.8% it is still below the target of 30%. During the site visit faculty described how the Office of Research Services is providing pre-grant award services to help facilitate the submission of grant applications by faculty.

Table 1. Sources of Funds and Expenditures by Major Category, 2009-2014					
	Year 1 2009 - 2010	Year 2 2010 - 2011	Year 3 2011 - 2012	Year 4 2012 - 2013	Year 5 2013 - 2014
Source of Funds					
University Funds	$4,568,441	$4,368,254	$4,530,757	$4,652,482	$5,005,506
Grants/Contracts	$2,288,243	$3,204,128	$7,037,933	$6,349,778	$5,468,712
Course Fees	$62,571	$119,275	$135,980	$152,230	$157,614
Registration/Application/Conference /Graduation/Miscellaneous Fees	$38,183	$39,961	$31,430	$123,359	$185,724
Gifts	$2,000	$11,000	$5,000	$450	$100
Total	**$6,959,438**	**$7,742,618**	**$11,741,100**	**$11,278,299**	**$10,817,656**
Expenditures					
Faculty Salaries	$3,495,600	$3,688,347	$3,531,315	$3,571,504	$3,695,968
Staff Salaries	$1,398,638	$1,255,861	$1,470,452	$1,801,464	$1,802,057
Student Wages	$361,144	$582,686	$541,647	$637,202	$644,928
Overtime/Longevity/Lump Sum/Allowances/One-Time Merit	$79,892	$93,170	$216,364	$127,278	$67,896
Fringe Benefits	$351,257	$444,867	$509,409	$503,381	$479,908
Grant and Contract Expenditures (non-Maintenance & Operations/travel)	$467,536	$508,089	$1,071,108	$2,850,165	$2,795,525
Maintenance & Operations (M&O)	$535,417	$543,558	$1,107,027	$1,918,864	$1,665,587
Travel	$126,937	$105,163	$156,269	$175,295	$195,108
Student Scholarships	$37,250	$30,550	$31,250	$61,930	$68,697
Total	**$6,853,670**	**$7,252,292**	**$8,634,841**	**$11,647,083**	**$11,415,675**

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. As of May 2015, the school has a total of 34 primary faculty members and 67 other faculty members. The school offers doctoral programs in each core area and has an adequate faculty complement for each. The social and behavioral sciences area has 11 primary faculty members, biostatistics has five, environmental and occupational health has five, epidemiology has six and health management and policy has eight; all primary faculty members contribute some of their time to the interdepartmental areas, which include the DrPH, public health education, professional MPH and online programs.

Student faculty ratios for all departments were under 10:1, except in epidemiology (13.3:1) and public health education (14.1:1). There are a total of 114 master-level students and one doctoral student in the epidemiology department. Although the SFRs are slightly above the required 10:1, the faculty and staff headcount appear to be sufficient for the daily operations of the educational, research and service efforts in epidemiology. The public health education department houses cross-disciplinary degrees, and faculty members allocated to other core areas participate in the functioning of this department so the true SFR is not as high as the school estimated for the purposes of the self-study.

Faculty members stated that although they have adequate resources, additional faculty and staff allocation would increase their capacity. Faculty members also stated that though there is a relatively small faculty complement, administrative duties are not a burden and committee meetings are held based on the necessity of the meeting. One committee began hosting meetings online so that it would be more convenient for faculty members to participate. Students stated that professors had an open-door policy and were available. One student stated that she liked that her program had small class sizes.

The school has 13.55 FTE staff members. The staff includes a communications manager who is responsible for dissemination of academic, research or service accomplishments by faculty and students to local, state and national media. Staff also include career services and student support personnel. Discussion with students and faculty members indicated that they perceive that the amount of staff support is adequate for the current operations of the school.

The SPH is housed in the Everett Education and Administration building. All faculty members have individual offices. The school has a 20-person conference room with projection capacity and two other conference rooms, one with projection capacity. Faculty and staff also have access to a fully equipped break room.

The school has sufficient classroom space for all courses in the Everett Education and Administration building. Three classrooms seat a range of 48 to 36 students and are equipped with projection and computer equipment that allows access to the internet. The school has access to other classrooms at the HSC, if needed. There is also a common area designated for students and research space for faculty projects is also available.

All faculty members are provided with computers and printers and have access to a copier. Beginning in the fall of 2013, all students are required to have a laptop computer for classroom use. Students have access to campus-wide WiFi and printers in the common area and the Lewis Library. The school also has a web and IT support specialist who provides support for computer hardware and software installation and web site development and implementation. The library houses three networked computer labs, with MAC and Windows computers.

The Gibson D. Lewis Health Science Library is the primary library used by the faculty members and students for research purposes. The library's media resources center houses an audio-visual collection of over 5,800 titles, including 340 computer software programs and some 124 anatomical models and 16 viewing rooms equipped with video and slide-tape projectors.

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 of public health has developed goals related to diversity and cultural competence that are consistent with the institution's mission, vision and values. According to 2013-2014 data provided in the self-study approximately 43% of students, 39% of faculty and 42% of staff are from racial and ethnic minority backgrounds.

The school follows institutional policies that support a climate free of harassment and discrimination and support a climate for working and learning in a diverse setting. The self-study discusses how diversity and cultural competence are incorporated into classes and the steps the school takes to recruit, develop, promote and retain a diverse faculty, staff and student body.

During the site visit faculty confirmed that all students receive content related to cultural competence and health disparities through required coursework, specifically through the course BACH 5300 Theoretical Foundations of Individual and Community Health. Faculty also provided examples of community-based participatory research that involves vulnerable populations, including homeless populations. During meetings with students, one of the strengths mentioned was the diversity of the student population, including minority and international students.

The school's efforts to recruit minority faculty include specifying in all recruitment advertising that UNTHSC is an equal opportunity/affirmative action employer; advertising through websites and publications that are targeted to culturally diverse applicants; participating in national, regional and state-wide meetings at which faculty, especially entry-level faculty, may be presenting posters or presentations; communicating with existing faculty who may be aware of candidates with diverse racial or ethnic backgrounds; and recruiting from schools and programs in south Texas where Hispanic students or faculty more frequently enroll or work.

Plans to recruit a diverse student body include distributing recruitment materials and going on campus visits with current students and faculty, so that prospective students become aware of the cultural diversity of the school; conducting recruitment activities directly with several traditionally black colleges and universities in the south; conducting recruitment at schools in south Texas at which Hispanic enrollment is highest, including campus or regional career fairs; providing a scholarship by the Hispanic Wellness Coalition of Tarrant County; and maintaining contact with programs at Tarrant County Community College.

The SPH defines diversity primarily by using the Dallas-Fort Worth, Texas and US populations as a reference. The school has identified African American/Black, Hispanic and Asian students and African American/Black and Hispanic faculty members as its underrepresented populations. In regard to faculty, the target is that 10% of faculty are African American or Hispanic; for staff the target is 30% are African American or Hispanic, and the targets for students are 15% African American, 10% Asian and 10% Hispanic. The school has met its targets for students and staff. However the percentage of faculty who are African American or Hispanic has been lower than the target for the past two fiscal years.

The commentary relates to how the school assesses that it promotes a culture of diversity and inclusion, as mentioned in one of the goal statements. During the site visit it was confirmed that questions on diversity and inclusion are not included in student surveys. The new administration of the UNTHSC is in the process of creating a values-based culture to include an institution-wide diversity committee. The SPH is represented on this newly-formed committee that will engage faculty, staff and students in dialogue about diversity and inclusion. Over the next year, it is anticipated that an assessment will occur across the institution to assess perceptions and practices. The SPH will then have more information to plan and implement appropriate strategies to foster a diverse and inclusive culture among students, faculty and staff.

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. As illustrated in Table 2, the school offers an MPH in biostatistics, epidemiology, health management and policy, community health, environmental and occupational health sciences, maternal and child health, a professional MPH, an MHA degree, a PhD in behavioral and community health, biostatistics, environmental health sciences, epidemiology, health services and policy, a DrPH and three joint degree programs. Site visitors' reviews of MPH syllabi from the concentration areas show appropriate breadth and depth of content.

Table 2. Instructional Matrix		
	Academic	Professional
Master's Degrees		
Community Health		MPH
Biostatistics		MPH
Environmental & Occupational Health Sciences		MPH
Epidemiology		MPH
Health Management and Policy		MPH
Maternal and Child Health		MPH
Professional Option (on campus and online)		MPH
Health Administration		MHA
Doctoral Degrees		
Behavioral and Community Health	PhD	
Biostatistics	PhD	
Environmental Health Sciences	PhD	
Epidemiology	PhD	
Health Services and Policy	PhD	
Public Health		DrPH
Joint Concentrations		
Biostatistics and Epidemiology		MPH
Environmental and Occupational Health Sciences & Epidemiology		MPH
Dual Degree		
Medicine		DO/MPH
Community Health: Applied Anthropology		MPH/MS
Health Management and Policy: Nursing[1]		MPH/MSN

[1]The MPH/MSN is being phased out and no students were admitted in the 2014-2015 academic year. No changes will be made to the existing curriculum and students that are currently enrolled will continue to be advised and move toward degree completion under the same degree plans implemented at the time of matriculation. The program will continue to be active until all enrolled students graduate.

In addition to coursework in the five core public health knowledge areas, concentration-specific required coursework include topics in public health law, environmental & occupational toxicology, applied data analysis, survival analysis, community assessment and program planning and human sexuality and health. Students complete the degree with advisor-approved electives, a practicum and a culminating experience.

2.2 Program Length.

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

This criterion is met. All MPH degrees offered by the school require a minimum of 42 semester credit hours, which includes one hour of practicum preparation seminar and one hour of practicum. The professional MPH program requires 48 semester credit hours.

Fifteen contact hours equals one semester credit for didactic courses. Laboratory-based courses require 30 contact hours for one semester credit. Three semester credit hour courses should contain 15 weeks of instruction and 45 to 48 contact hours.

No MPH degrees have been awarded for fewer than 42 semester credit hours in the past three years.

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. All graduate professional degree programs require that students take at least one course in each of the five core areas of public health as displayed in Table 3. The learning objectives for these required courses stem from the MPH core competencies and provide students with a strong foundation of public health core knowledge.

Students are allowed to waive core courses if they have taken core courses at another accredited program of public health and the department chair or program director assesses all syllabi from the student's previous MPH program for content equivalency. For courses that were not taken at a CEPH-accredited school or program, the department chair conducts a more detailed review. Site visitors' review of MPH course syllabi from the core and concentration areas show appropriate breadth and depth of content.

Table 3. Required Courses Addressing Public Health Core Knowledge Areas for the Professional MPH Degrees

Core Area of Knowledge	Course Number and Title	Credits
Social & Behavioral Sciences	BACH 5300 Theoretical Foundations of Individual & Community Health	3
Biostatistics	BIOS 5300 Principles of Biostatistics or BIOS 5301 Foundations of Biostatistics (for Biostatistics concentration students)	3
Epidemiology	EPID 5300 Principles of Epidemiology	3
Environmental Health Sciences	EOHS 5300 Environmental Determinants of Health I	3
Health Services Administration	HMAP 5300 Introduction to Health Management & Policy	3

Students are allowed to waive core courses if they have taken core courses at another accredited program of public health and the department chair or program director assesses all syllabi from the student's previous MPH program for content equivalency. For courses that were not taken at a CEPH-accredited school or program, the department chair conducts a more detailed review. Site visitors' review of MPH course syllabi from the core and concentration areas show appropriate breadth and depth of content.

2.4 Practical Skills.

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

This criterion is met. The MPH and DrPH require a practice experience that provides opportunities to apply public health concepts relevant to an area or areas of specialization.

The MPH practice experience occurs after students have completed 21 semester credits, including the MPH core and a professional and academic development course. The practice experience requires a minimum of 200 hours, and students are required to complete a final project, which includes an oral presentation and poster.

MPH practicum sites must be able to place a student with a project that aligns with core and concentration competencies. Site selection involves the student, practice experience liaison (a staff position) and the academic advisor (concentration-specific faculty), who review a list of potential projects and sites to determine the best fit. The academic advisor works with the student to develop the project agreement and any IRB approvals.

MPH site supervisors are approved through a formal process. They are required to have an advanced degree in public health or related field and/or a minimum of five years of related experience in the department where the intern is assigned. Site supervisors receive an orientation packet defining their role and the role of the student, practice experience liaison and the academic advisor, a timeline and a list of expectations for the student. The assistant director for student and academic services, who oversees student conduct and performance on site, contacts the site supervisor at least four times to obtain feedback.

The DrPH residency provides applied experience in a health service organization and allows for students to develop leadership skills through interaction and collaboration with senior public health practitioners in pre-approved sites. The residency (PHED 6397) consists of a minimum of 720 contact hours, to be completed within 18-36 calendar weeks. The practicum is based on a learning contract between the student, site supervisor, faculty mentor and the DrPH program director.

For the DrPH residency, the student, program director and faculty mentor are involved in selecting an appropriate match. The student and the site supervisor complete a Residency Learning Contract and agree on a major project. This is approved by the program director and the DrPH Committee.

Site supervisors are preferred to have a DrPH degree, but the DrPH Committee may consider other factors (academic training, years of field experience and expertise of the candidate) when considering site supervisor. The program director is responsible for providing orientation to the site supervisor and is usually conducted as an onsite visit and follow up communications as needed.

There are five major components of the residency: supervision by a senior-level executive; organizational orientation and rotation; leadership and management responsibilities; a major project (to be presented at residency defense); and sufficient exposure to internal and external environment of the organization. After the residency, the student prepares a residency binder and presents his or her work to the DrPH Committee. Final evaluation is based on a learning contract, work log, major project report, site supervisor evaluation, reflection and self-evaluation, residency defense performance and binder quality.

A review of the DrPH Integrated Competency Evaluation (final program cumulative document) and individual MPH practicum binders, as well as discussions with students and preceptors, verified the strength of the school's process for practice experience and confirmed the substantive nature of the experiences and appropriate competency mapping.

The school does not accept or permit waivers, alterations or reductions to the practice experience for either the MPH practice experience or the DrPH residency.

Based on conversations with students, the site visit team noted that there is a high level of commitment by the faculty, staff and community partners to make the practice experience relevant for the students and ensuring that the experience provides an opportunity to develop and demonstrate competency in core technical and professional skills.

2.5 Culminating Experience.

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

This criterion is met. All students seeking a graduate professional degree are required to complete a culminating experience that is designed to demonstrate the ability to synthesize and integrate knowledge obtained through course work and the practicum.

The culminating experience for the MPH degree has two components: 1) passing the Certified in Public Health Examination (CPH) and 2) passing a concentration-specific comprehensive examination. Students in all MPH concentration areas are required to take and pass the CPH. The concentration specific comprehensive exam is required for all concentrations except the MPH professional option which has a capstone course requirement.

The school uses the CPH as a direct assessment of competency mastery in the core area of public health and related core competencies. Students in each concentration are encouraged to sit for the examination approximately mid-way through their degree program and after they have taken all five core courses. MPH students are allowed to retake the CPH exam multiple times until they pass within the maximum allowable time to graduate (six years). If a student does not pass the exam within the maximum allowable time they are dismissed from the MPH degree program.

The comprehensive examination and capstone addresses the competencies and learning outcomes specific to each concentration. Although departments have the flexibility to choose the format of the exam, all questions must map back to identified concentration competencies. In all concentrations, exams are created and graded by faculty. During the site visit, faculty provided several examples of how they have reviewed student learning outcomes after the completion of the comprehensive exam and made changes to the exam structure and content covered as a result. In the self-study it was noted that in certain circumstances, students opt for a thesis option in lieu of the comprehensive examination. During the site visit faculty shared that the thesis option is mostly chosen by students interested in pursuing a doctoral degree. Students are expected to demonstrate skills and the integration of knowledge as part of their thesis.

The culminating experience for the DrPH students has three components: 1) passing the CPH, 2) passing the Integrated Competency Evaluation (ICE) examination and 3) the doctoral residency, which includes the major project. If a DrPH student has not received the CPH certification upon admission to the program he/she must take and pass the CPH, which is used as a direct assessment of competency mastery in the core area of public health and related core competencies. To be advanced to candidacy, the DrPH student must pass the ICE comprehensive exam. The ICE is a self-assessment that requires a portfolio of the student's work based on mastery of each of the 54 competencies defined under seven domains. The student defends their ICE written work in an oral presentation before the DrPH Committee.

The DrPH residency, discussed in Criterion 2.4, provides students with leadership experience in public health practice through directed work in practice settings. Site visitors reviewed several ICE exams and doctoral residency project examples that showed academic rigor, creativity, professionalism and integration of field experience with classroom knowledge.

The culminating experience for the MHA program is the completion of HMAP 5302, the MHA Capstone course. As a part of the course, students complete a capstone project, which requires them to identify a new service product or innovative process to integrate into the current healthcare environment. Students working in teams of two to three are then asked to create a business plan to implement their product. Students are evaluated on the development of their project plan and their business plan, which includes interim reports and presentations as well as the final written business plan and presentation. The capstone course allows the MHA program to assess students' application and integration of key knowledge, skills and competencies gained throughout the program, including the MHA internship.

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 met. The school has identified competencies that guide the development of each degree program. The school has developed five core MPH competencies, seven DrPH competencies, 18 MHA competencies, six PhD core competencies and competencies specific to each concentration and program. The MPH core competencies were established based on source materials from the ASPPH MPH Core Competency Project. The school reviewed the ASPPH DrPH Core Competency Model to determine the appropriate competencies for the DrPH program.

The school has developed competency matrices for each set of core and concentration competencies and implemented a competency alignment process, which assesses competency achievement through

course activities. This process requires all departments to develop measurable learning outcomes for competencies in each program and to use a five point scale as a way of measuring competency achievement across all programs. Each matrix identifies the relationship between courses, competencies and learning outcomes and identifies primary assessment methods used in each course. The MPH concentrations each have a range of one to six competencies, and each set of competencies have a range of two to five learning objectives. The DrPH has a range of six to nine learning objectives for each competency. The PhD concentrations have a range of three to six competencies; each set of competencies have a range of one to four learning objectives. The MHA has a range of three to seven learning objectives for each competency.

During a meeting with faculty, one faculty member praised the level of engagement of the school's faculty in competency mapping and assessment, noting the widespread commitment to a competency-based curriculum.

All faculty members and external constituents were involved in the development of all competencies. The department chairs oversee and are responsible for the development of the MPH and the PhD concentration competencies. The DrPH Program Committee, which includes faculty members from each department, is responsible for the development and management of the competencies for the DrPH degree. The Program Directors Committee (formerly the Curriculum Committee) is responsible for ensuring that all competencies are integrated in their respective courses and that the curriculum effectively reflects the integration.

Concentration-specific competency reviews occur annually. The feedback that is obtained from all constituents on each student's mastery of the competencies is discussed in departmental faculty meetings and during retreats. Examples of school-wide changes that have resulted revision of the competencies include the development of the Professional and Academic Development course for all programs, implementation of MPH competency self-assessments and addition of an introductory seminar on MPH core and concentration competencies.

Competencies for all degree programs are posted on the SPH website and are outlined in the "Program Profile" documents that are utilized in the SPHAAR orientation sessions and by Academic Advisors in their counseling and advising sessions. In addition, the course syllabi list all relevant competencies. The school has developed a standard syllabus template that includes a section in which faculty are required to display competencies, learning outcomes and assessment methods.

After careful review of syllabi and the competency matrix, site visitors found that both core and concentration competencies were effectively mapped to learning objectives for each course and were integrated throughout the practicum and culminating experience.

During a meeting with students, some students observed that the competencies were not emphasized and they were not efficiently mapped to the courses until recently (within the last year and a half). Students noted that the competencies are now on each of the course syllabi, faculty members make it a point to explain how competencies are mapped to each course and students are now required to complete self-assessments. Students stated that this is beneficial because they are able to track the development of their skill set and their preparedness as they progress through the program. One DrPH student stated that the competency self-assessment highlighted the areas that she needed to improve in.

2.7 Assessment Procedures.

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

This criterion is met. The school has established procedures beyond course grades to assess students' mastery of competencies for each degree program and concentration. The school has also identified outcome measures to evaluate student achievement in each program.

The school uses the TracDat system to collect student performance data on the CPH exam, comprehensive exams in each department for each program, preceptor evaluations, the professional and academic development (PAD) course and the graduating student survey, along with each student's successful completion of coursework to assess mastery of the competencies. Both masters and doctoral students are required to complete a PAD course. During this course, students in the MPH program take pre- and post-competency assessments that help establish a foundation for the core courses. Doctoral students do not take an actual course, but undergo a variety of research and practice experiences that faculty use to monitor their progress in mastering the competencies and their preparedness for the field.

The school uses Canvas, the learning management system adopted by the institution, to link course assessments to the learning outcomes and competencies and to track competency attainment across students.

Upon completion of the five cores courses, MPH students are required to take the CPH exam. The school uses the CPH as a direct assessment of competency mastery in the core area of public health and the related core competencies. Students are also required to take the concentration-specific comprehensive exam to assess student mastery in the concentration competencies.

Students in the DrPH program are assessed through the preliminary exam that they take after completion of the first year. The exam helps to determine the competency areas that students need to reinforce in preparation for the Integrated Competency Evaluation (ICE) and the doctoral residency. During residency, students' mastery of the competencies are assessed by the site supervisor. If there are areas of competency deficiency, the DrPH director, with input from the DrPH Committee, works with the student to develop an action plan to improve their weak areas.

Students in the PhD programs are assessed in a similar way. Each course is mapped to competencies and learning objectives. Each PhD student is required to perform a minimum number of activities associated with PAD. Each student's performance on the dissertation proposal and defense and the comprehensive examine is evaluated by the advisor/mentor, department chair and PhD Committee. The department chair prepares a progress report which evaluates the level of performance using each evaluation tool. The student and department chair develops a remediation plan if his or her progress is deemed to be unsatisfactory.

All masters-level students have a maximum allowable time of six years to graduate. PhD and DrPH students have seven years. The graduation rate for the 2008-2009 cohort in the MPH programs is 73.4%. For the most recent academic year (2013-2014) there are a total of 153 continuing students in the MPH programs, four students withdrew, one student transferred to the MHA program and one student has graduated. With very low attrition rates and a large cohort the school is poised to continue to meet the required 70% graduation rate. The 2008-2009 cohort in the MHA program has achieved a graduation rate of 90%. For the most recent academic year (2013-2014) there are a total of 13 continuing students and one student transferred from the MPH program. With low attrition rates students in this cohort are expected to reach the required minimum of 70% for graduation rates.

The PhD program began in the fall of 2011, with a total of 22 students entering the program. Six students have graduated, creating a graduation rate of 27.3%. A total of four students withdrew from the program. With 12 students continuing through the program, this cohort is expected to reach the required graduation rate of 60%.

DrPH students in the 2007-2008 cohort achieved a graduation rate of 38.5%. Although the following cohort reached the minimum required graduation rate of 60% for doctoral programs, the 2007-2008 cohort will not, due to the high attrition rate. In fall 2009, the SPH made the decision to shift the program from concentration-specific areas to a focus in public health practice. The first DrPH in public health practice student graduated in academic year 2011-2012; a total of 22 students have graduated to date. Although there are five students continuing through the program, the school has recently suspended admission to the DrPH program.

The school collects job placement data for all programs through graduation surveys and is also supplemented by information gathered by the Office of Admission and Academic Services through contact with alumni within 12 months of graduation. There were a total of 96 MPH students who graduated in the academic year 2013-2014; 91% were employed; 8% were continuing education; and 1% was not seeking employment. MHA students who graduated during this same academic year had a 100% employment rate. The PhD and DrPH students had 100% employment rates.

The school conducts assessments of its graduates' ability to perform competencies through an employer survey. In fall 2014, the SPH interviewed and surveyed 20 employers and asked them to provide feedback on the ability of graduates to perform competencies on the job. A total of seven employers responded. Employers stated that students were well prepared to work after graduation and recommended that the school strengthen the program planning, management and evaluation and epidemiology curriculum. The school has taken steps to improve employer responses by developing a database of employer contact information that can be used to solicit feedback on a regular basis. Employer information will also be collected using the graduating student survey.

A total of 35 alumni from all MPH concentrations responded to the alumni survey. Overall MPH alumni felt that all concentration competencies were adequately addressed in coursework in their respective concentrations, and they were able to perform them at their jobs. A few students did not feel that the health management and policy competencies were adequately addressed nor could they perform them at their jobs. Out of the 35 alumni that responded 31 felt that the competencies prepared them for their jobs. Only six DrPH students responded to the alumni survey and only one student responded to the question about preparedness and indicated that the competencies did prepare him/her for the workforce.

During a meeting with employers and community stakeholders, employers stated that graduates from the school tend to be creative thinkers, problem solvers, innovative and proactive. They are always bringing different ideas to the table. Employers also stated that graduates from the SPH have a broader skill set and do not require as much training as some other employees.

2.8 Other Graduate Professional Degrees.

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

This criterion is met with commentary. The school offers a master's of health administration degree. It is a 60-credit residential program that requires an internship and a final integrative experience. The MHA program has a set of competencies specific to the field of health care administration.

The commentary relates to the depth of the introduction to public health provided to MHA students. The criterion states that students should receive a broad introduction to the core public health knowledge areas in a manner that is equivalent to at least three semester credit hours. Faculty members stated that they have made it a point to briefly introduce the idea of public health in relation to health administration to the students in an introductory seminar, and students are required to take epidemiology and biostatistics courses and several courses with social and behavioral science content (HMAP5350 Health Economics, HMAP 5320 Health Services Management and HMAP 6224 Healthcare Management and Quality). While students receive sufficient content in core public health areas for social and behavioral sciences, biostatistics and epidemiology, after reviewing syllabi, site visitors determined that there was limited if any evidence of content relating to environmental health sufficient to meeting this criterion.

For the current academic year, with the limited time available to make formal curricular changes, the MHA program has worked with the chair of EOHS to add a session on environmental health concepts to HMAP 5050: Professional and Academic Development (PAD), a course that is required for all MHA students. The PAD course is designed to enhance the professional development skills and opportunities of MHA students through workshops, expert lectures, academic sessions, and co-curricular activities. The PAD schedule provides the MHA program with the flexibility to add required content to supplement concepts addressed in the MHA curriculum. Dedicating a full session to the discussion of environmental health concepts directed by faculty in the EOHS Department, has proved to be the most functional way to provide additional environmental health content in the immediate future.

As the MHA program prepares for a re-accreditation site visit in fall 2016, meetings with the Department of Environmental and Occupational Health (EOHS) are being scheduled to discuss curricular changes aimed at enhancing environmental health content in the 2016-2017 academic year.

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 met. The school offers one academic degree, the PhD in public health sciences, with concentrations in the five areas (1) epidemiology, (2) biostatistics, (3) behavioral and community health, (4) environmental health sciences and (5) health services and policy. PhD candidates complete a minimum of 90 semester hours. The credit hours are divided between public health core courses (33 SCH), the dissertation (12) and (45 SCH) concentration courses.

All PhD students obtain a public health orientation through required courses in the five core knowledge areas and in other required courses in research methods, ethics and pedagogy. For example, PhD students participate in a required professional and academic course that includes journal club, engagement in public health research, community service, professional development and teaching. There are numerous opportunities to learn more about public health through seminars with national, regional and local speakers discussing prevention-oriented topics. Students may participate in the annual North Texas Health Forum and Conference on Disparities. The monthly "works in progress" series of the school's Research Committee is another forum for interdisciplinary dialog on public health issues.

The culminating experience for PhD has three components: (1) PhD comprehensive examination (2) submission of a written dissertation proposal and oral defense and (3) a final dissertation defense. There are minor variations in the examination methods used to assess comprehensive knowledge in each of the concentration areas which were reviewed on site and assessed as appropriate for the discipline.

The PhD offerings of the school demonstrate sufficient exposure to core public health concepts, depth of experience in concentration areas and a variety of opportunities for students to learn about application of research to practice in public health and the unique contributions made by each core area to population health.

2.12 Doctoral Degrees.

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

This criterion is met. The school offers a DrPH in public health practice and PhD in public health sciences with five concentrations. Each program is supported by faculty qualified in the appropriate disciplines. Site visitors determined that the coursework available to doctoral students is at an appropriate level of depth and rigor.

The DrPH in public health practice emphasizes application of public health sciences to practice and is focused on leadership skills. This degree was offered since 2012 and replaced prior offerings that permitted concentrations in the public health sciences. Prior to starting a DrPH, students must complete pre-requisites or equivalents for the five core public health sciences if they do not have an MPH.

At the time of the site visit, there were 18 enrolled DrPH students and 25 students in the PhD in public health sciences program. One student is completing the DrPH concentration specific curriculum requirements. The other 17 are completing the current DrPH in public health practice, focused on leadership. One student in the PhD program completed coursework, two students advanced to candidacy, and two students have graduated in the past three years.

For the DrPH, students are required to complete 48 semester credits of concentration-specific course work and 12 semester credits of electives. The DrPH offers limited electives and advanced classes. Because the DrPH program focuses on leadership and management, many required courses are from the MHA program and are not advanced doctoral level courses. The school has decided to close admissions to the DrPH program until fiscal year 2017 or later. This will allow the school to determine faculty and program needs required to recruit high quality doctoral-level students. Faculty members also stated with the temporary closing of the program, they will be able to focus on the students currently enrolled.

The PhD program requires students to complete a minimum of 90-semester credit hours, which includes 33 credits of required public health coursework, the dissertation (12 credits) and concentration area courses (45 credits). Students in the PhD in biostatistics program are required to complete 33 concentration-specific semester credits and 12 semester credits of electives. Students in the behavioral and community health concentration are required to complete 24 concentration-specific credits and 21

credits of electives. Students in the environmental health sciences concentration are required to complete 21 concentration specific credits and 24 credits of electives. Students in the epidemiology concentration are required to complete 39 concentration specific credits and six semester credits of elective courses. Students in the health services and policy concentration are required to complete 27 concentration-specific credits and 18 credits of electives.

2.13 Joint Degrees.

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

This criterion is met. The school offers three joint degree programs, an MPH/MS in anthropology, an MPH/MSN and an MPH/DO. Each joint degree has a detailed program of study that indicates when courses are taken and how credits are shared. Site visitors reviewed the syllabi for shared coursework and determined that the learning objectives are appropriate for the MPH competencies that are to be addressed.

The MPH/MS in anthropology program is offered in collaboration with the Department of Anthropology at the University of North Texas-Denton and prepares students for careers in research, public health and public policy planning relating to health and health care in the US or in an international setting. Students are required to take 36 credit hours in public health and 27 credit hours in applied anthropology. Within the 27 credit hours, 18 hours are shared by the school and the department of applied anthropology. A total of 12 of these credit hours from four specific courses in applied anthropology are transferred to the students' MPH degree program. With the exception of BACH 5314 Quantitative Research Methods and BACH 6310 Qualitative Methods, students complete all required coursework in the MPH-Community Health concentration including all MPH core courses. Students are required to pass the CPH as part of their culminating experience. Students complete BACH 5297 Public Health Practice Experience and ANTH 5950 Applied Thesis concurrently. The applied thesis includes a field experience that focuses on some aspect of public health. The courses transferred from anthropology (anthropology in public health, medical anthropology, ethnographic and qualitative methods and quantitative methods) to the MPH all include appropriate public health-related content.

The MPH/MSN is a 57 credit hour degree program offered in collaboration with the School of Nursing at the University of Texas-Arlington. The school is not currently accepting applications for the MPH/MSN degree program due to the restructuring of the MSN program. Currently enrolled students are completing the plan of study that was in place upon their admission. As of May 2015, there were only two MPH/MSN students enrolled in the program. The courses transferred to the MPH (N5327 health policy, financial management, management of nursing operations) all include appropriate public health-related content.

The MPH/DO program provides clinical professionals with specialized public health training to develop, integrate and apply culturally competent social, psychological and biomedical approaches to the promotion and preservation of health. Students complete the 42 credit hour professional option program which consists of 30 credits from public health and 12 credits from four courses (Fundamentals of Rural Medicine Practice I, Applied Principles of Rural Medicine I, Fundamentals of Rural Medicine Practice II and Applied Principles of Rural Medicine II) that are transferred from the DO rural medicine program as elective credit. Students complete PHED 5297 Public Health Practice Experience and PHED 5302 MPH-PO (professional option). Capstone to meet culminating experience requirements. During the site visit it was determined that the school reviewed DO courses to determine which ones contained content appropriate to meet the MPH core competencies and would be approved for elective credit. A review of the syllabi for the four courses transferred from the DO program confirmed all contained appropriate public health related content.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is met. The school offers the MPH Professional Option (MPH PO) in an online distance learning format. The MPH PO requires 42 credit hours and can be completed in two years. The first cohort was admitted in AY 2010-11. To date, 15 students have graduated.

All online format courses were converted from original classroom versions. The online courses are offered in an eight-week format, which is different from the typical sixteen week semester format. The eight-week format allows students to focus on one course at a time. There are five offerings per academic year in the fall, spring and summer. The first full online offering was in fall 2012. The entire curriculum was available on line as of spring 2014.

The school uses Canvas as the learning management system to deliver courses in a variety of ways, including recorded lectures with Power Point using Camtasia Relay software and screen capture technology, required readings, case study evaluations and discussion groups. Faculty can record live

lectures and meetings and upload them to Canvas. This allows students to access course content at their leisure. Each class requires three to four hours of asynchronous lectures per week. Students are expected to participate in an additional six hours per week of discussions. There are required readings, group or individual projects and submitted written or recorded work.

The development of online courses was a result of feedback on the annual Student Satisfaction Survey to provide more options than classroom-based learning and is also convenient for working professionals who are unable to attend classes on campus. Students in the campus-based MPH program have the option of taking online courses also.

The Center for Innovative Learning, formerly the Center for Online Education, provides support services for faculty and students which includes training on technology applications, assistance on course development and tutoring for students to get acclimated with online courses.

The MPH online program director serves as the faculty advisor to all students who are in the MPH professional program and the certificate programs. Students who take online courses associated with other programs all have designated advisors.

Distance learning classes use the same course learning outcomes, competencies and evaluation methods as campus classes. The course syllabi are the same, however the online course syllabi includes additional information on etiquette and standardized week start/stop times. Students evaluate the courses through the IDEA System, which is the same for campus classes. The quality of teaching evaluation metrics are the same for online and campus courses. All student papers are submitted to Turn-It-In, a service which evaluates materials for potential plagiarism.

The school uses the Quality Matters Program to assist with continuous improvement and quality assurance for online courses. One of the courses (BIOS 5300) was certified by Quality Matters in January 2014. Plans are underway to for all online classes to be certified by the program.

Course evaluations and assessment of student competencies did not indicate that there are any significant differences between the two modalities in achieving intended program outcomes. However, samples for true comparisons are small, and there is a perception of faculty members that some qualities and intrinsic values of onsite/face to face vs. online cannot be measured or compared.

To ensure academic integrity, all incoming students sign an "Academic Integrity Agreement" at orientation. Each student signs an "Honor Statement for Examinations" for each exam that they take, which states that no unauthorized assistance was given or received on the exam. After a recent

successful pilot test of a tool called ProctorTrack in the fall 2014, the school will implement this for all online courses effective in the spring of 2015.

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 developed a research program consistent with its mission and directed at improving the practice of public health.

In 2013-2014 the school received $6.7 million in extramural funding, which is significantly higher than the $3.5 million target set by the school in conjunction with the provost. In FY 2011-2014, 36.5% of research involved community-based projects, and 45.3% of research projects involved students.

The school has established partnerships with faculty throughout the institution and with community partners. The institution-level Health Institutes of Texas (HIT) includes nine centers and institutes. Although faculty may work with any of the nine HIT centers and institutes, school faculty are primarily engaged with the Texas Prevention Institute (TPI) and the Texas Center for Health Disparities. Faculty have been involved in research in areas such as pulmonary disease, prevention of substance abuse, cancer prevention and economic evaluation. Research projects include: Safe Sleep, which aims to reduce African American infant mortality in Tarrant County; Reaching Teens, which is web-based resiliency training that is evaluated for the Mental Health Connection of Tarrant County; MAPIT, a web-based intervention targeting substance abuse treatment in the criminal justice system; Telehealth-Monitoring System for chronically-ill Medicaid patients; and Asthma 411, a pilot implementation of an evidence-based school-focused approach for the management of asthma.

In AY2013 the school's Research Committee, with input from the faculty as a whole, developed and began implementation of a research strategic plan. Included in the plan was creation of the Office of Research Services (ORS), which supports the TPI and school. The ORS includes a research manager who oversees staff trained in the areas of pre-award, post-award and compliance administration. Faculty discussed the Works in Progress seminars (WIPS), which provide a venue for faculty and specifically junior faculty, to share works in progress with others in the school, across the institution and external constituents. It also provides a venue for networking and meeting potential collaborators.

There are policies to support faculty development in research as well as financial incentives. The F&A Costs Recovery and Distribution Policy reallocates F&A recovered monthly on grant accounts to an

institutional "local F&A recovery account" of which 10% of recovered funds are allocated to the PI. Additionally, the institution's faculty compensation plan establishes guidelines for compensating faculty for achieving consistent research-funded salary support at a 30% level or higher.

As confirmed by both students and faculty, student involvement in research is actively promoted through faculty research projects, course-based research activity and student research posters and presentations. Although students work with individual faculty on research, the BEST (Biostatistics and Evaluation Services and Training) program is a competitive mechanism through which students apply to participate in funded research experiences. The school has also developed a website through which faculty can post research opportunities and students can apply for them. During the site visit, faculty also stressed the school and department's commitment to funding students to present their research at local, state and national meetings.

3.2 Service.

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

This criterion is met. The school formally supports service involvement through its policies, procedures and practices, which include promotion and tenure guidelines that emphasize service, an annual "Service Award" to recognize the faculty member who contributed most to service and recognition in faculty workload expectations by both the HSC and the school that faculty members will spend a percentage of their time in service activities.

Promotion and tenure guidelines emphasize service to the institution, the profession and the community. There are nine categories of service that can be documented for promotion from assistant to associate professor and an additional five categories for associate to full professor promotion. The institution recognizes that a percentage of faculty time will be spent on service.

During academic years 2012-2014, faculty participated in over 200 CEPH-qualifying service activities. Faculty are affiliated with 84 professional organizations and provide professional consulting and or training for 46 organizations. They provide service to 69 journals and more than 50 community-based organizations. Categories of service reported by the faculty include; editorial and review activities for journals and agencies (77%), professional consulting and training (30%), participation in professional organizations (97%) and participation in community service activities (67%).

OrgSync, an institution-wide program managed by the HSC, matches students based on skills, interests and time to a variety of service activities. The Public Health Student Government Association volunteer subgroup and the health sciences student chapter of the Medicine/Public Health Initiative are involved in the Hispanic Wellness Fair, other community health fairs with local public health departments and public

health week. They also serve as science mentors for middle school students. Students are also involved in a surveillance team for West Nile in Fort Worth, by transporting the elderly and working at dispensing stations for vaccinations.

Service learning is a component of several classes. For example, the community health program evaluation class requires 15 service hours with a non-profit partner. Because of limited funding in the non-profit sector, the school encourages pro bono assistance with evaluation efforts in the community. The commitment to service in the community is evident in conversations with all leadership, faculty, staff and students.

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, in conjunction with many other local, state and national organizations, has provided training through continuing education and certificate programs to the public health workforce in areas of need as defined by the public health community.

The school has contributed most effectively over the past three years to fostering local public health department accreditation through annual accreditation workshops with other organizations and funders.

The school provides continuing education through partnerships with the HRSA-funded Texas Public Health Training Center, Texas A&M University School of Public Health and the University of North Texas School of Public Health. In addition, CDC funded the school's Training Collaborative as a Preparedness and Emergency Response Learning Center. Currently, the collaborative is able to support UNTHC as a site to train the medical reserve corps for the Denton County health department. The Biostatistics and Evaluation Service and Training Center (BEST) provides technical training in biostatistics and epidemiology to community members and HSC staff. This group sponsored the North Texas Health Forum, providing data to the community on local public health concerns.

The school has not conducted a formal needs assessment but relies on feedback about needs of the workforce from three community advisory groups: the Center for Community Health Community Advisory Board; the Public Health and Prevention Council and the MHA Advisory Council. The dean and faculty are actively involved in formal efforts such as the Mobilizing for Action through Planning and Partnerships (MAPP) process sponsored by Tarrant County Public Health. Historically, with the exception of the BEST center, workforce development programs have resulted from external funding from CDC or HRSA or as part of state funds.

The most successful continuing education offerings have been accreditation workshops, which have included 60-80 participants; the North Texas Health Forums, with more than 250 participants; and health literacy symposium with 151 attendants.

The institution provides the services of its Professional Development and Continuing Education Office in the HSC. This center provides a breadth of services to launch and sustain certificate programs and workforce development efforts.

The school has established several certificate programs: public health practice, geographic information systems, biostatistics for clinicians and health professionals, food security and public health and global health. Courses are available on campus or online. More than 70 people per year pursue the practice certificate. The other certificate programs are still in the early stages and have only one to two enrollees.

The active involvement of the community stakeholders during the site visit suggested that commitment, innovation and creative problem solving are a strength for the school in dealing with challenges from diminished federal funding for workforce development efforts.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The school has a qualified faculty complement to carry out its teaching, research and service mission. Faculty members are individually well-qualified and collectively offer a wealth of experience in relevant sub-disciplines of the field. These qualifications are augmented by a wide array of peer-reviewed publications, presentations and professional and community service activities.

The school has a total of 34 primary faculty members. This includes seven full professors, nine associate professors, 16 assistant professors and two instructors; 12 faculty members are tenured, 14 are on the tenure-track, and eight are non-tenured. The majority of the faculty are trained at the doctoral level in a discipline relevant to their assigned field. Of the 34 individuals listed as primary faculty associated with the MPH, 31 are listed with a doctoral or terminal professional degree. The training of faculty reflects the school's stated broad interpretation of public health, including public policy, economics, exercise physiology and nutrition, sociology, tropical medicine, statistics, child development, communication and psychology.

The school has 67 adjunct faculty members who contribute time to the school and its programs. All joint, cross, or adjunct faculty are appointed to the department most aligned with their expertise, which allows them to interact with faculty on research, teaching and service projects. Most adjunct faculty members (55) have terminal degrees in areas including medicine, atmospheric sciences, health economics, law and refugee health.

Faculty members are involved with many community-based projects that include the public and private sectors. Information from these projects is used by faculty members to provide current examples of public health practice for the classroom and cases for student analysis and discussion. Practitioners also have adjunct appointments in the school and integrate their real world experience in their courses. In addition, the SPH has a number of academic professionals who do not hold faculty appointments but have expertise in specific areas of public health and contribute significantly to the mission of the SPH. These individuals serve in key administrative positions; play significant roles in research and community service programs; and contribute to the instruction of students by leading courses, providing guest lectures and supporting internships through their network of community partners.

The school has identified three performance objective measures to assess faculty qualifications, which are as follow: 90% of faculty should have doctoral degrees, 80% of faculty should have funded research and 80% of students should be satisfied with the quality of teaching. For the most recent academic year (2013-2014), the school has exceed its first target, did not meet the second target and met the third target for all programs except for the DrPH program; only 60% of faculty members had funded research and 50% of students were satisfied with the quality of teaching in the DrPH program. Faculty were aware of the cause for low student satisfaction in the DrPH program, primarily the lack of doctoral-level courses, which led to the temporary suspension of the program.

Both students and alumni stated that faculty members are the greatest resource at the school because of their experience and their commitment to and passion for teaching and mentoring students. Students also stated that faculty members provide a different perspective in the classroom about certain topics.

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 school follows well-defined policies for faculty appointment, evaluation, reappointment and promotion and tenure in institutional faculty bylaws. The school also has a workload expectation document that identifies annual expectations of faculty in the areas of teaching, research and service.

The school measures faculty performance through an annual performance review process. Evaluation areas include teaching, research, service and administration (where applicable). Faculty goals are based on the school's faculty workload expectations, promotion and tenure requirements, school and department strategic plans and individual faculty goals. Faculty members evaluate their attainment of goals set for the previous year. This information is then reviewed by the department chair, who assigns a rating of exceeds expectations, meets expectations, not meeting expectations or unsatisfactory. The annual performance review includes a face-to-face meeting between the faculty member and department chair. The Promotion and Tenure Committee review the tenure track, non-tenured faculty every third and sixth academic year. Tenured faculty who are not considered to be administrators are required to undergo post-tenure reviews at a minimum of every six years. The process is similar to that of the tenure track three-year reviews.

Non-tenure eligible faculty requirements for appointment to rank are identical to those for tenure eligible, except for their responsibilities in one to two of the three evaluated areas (research/scholarship, teaching, service). Non-tenure eligible faculty appointments and promotions follow the same review process as for tenure-track faculty. During the site visit, junior faculty reported that guidelines for promotion and tenure are clearly communicated, as are workload expectations.

Faculty development occurs both formally and informally. The institution provides some centralized activities including support for teaching through the Center for Innovative Learning which offers a range of services and workshops for faculty. The institution's Division of Research and Innovation offers support of research activities and the school's Office of Research Services (ORS) provides pre-award, post-award and compliance assistance. Mentoring of junior faculty is performed through the department chair and Research Committee. Department chairs identify potential collaborators and mentors and include these activities as part of annual reviews. The Research Committee sponsors activities to enhance knowledge of and contact with other research in the school and across the institution.

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 has student recruitment and admissions policies and procedures designed to locate and select qualified students with the appropriate academic background and experience needed for successful completion of its degree programs.

Recruitment activities are coordinated through the Office of Admission and Academic Services. The school's website is structured with a single-page portal that simplifies access to information on admission

requirements and procedures, student life and faculty research. Prospective students can also register to visit campus, attend a prospective student event or participate in the Schools of Public Health Application Service (SOPHAS) Virtual Fair.

Recruitment processes and materials include a recruitment plan that the school revises annually; the School of Public Health Academic Advising and Registration (SPHAAR) sessions, which bring admitted applicants to the campus for orientation and registration prior to the beginning of the semester of their matriculation; admissions representatives, faculty, and current students attending select graduate fairs, classroom presentations, student organizational meetings and professional conferences across the nation to help recruit students; and scholarships that are available to help recruit student such as teaching assistantships and graduate research assistantships.

The school participates in SOPHAS and the Healthcare Administration, Management & Policy Centralized Application Service (HAMPCAS), which serve as both a recruitment tool and an admissions portal. The school does not require a supplemental application. MPH, DrPH and PhD prospective students apply through SOPHAS. MHA students may apply either through SOPHAS or HAMPCAS.

For the master's degrees, the Office of Admission & Academic Services (OAAS) compiles all application materials and prepares them for the Masters Admission Committee, which reviews MPH and MHA applications. Students are required to submit official transcripts, a statement of purpose, three letters of recommendation, a resume and official scores from one of several graduate admissions examinations. The examination is waived for applicants possessing a professional doctoral degree with a license to practice in the United States. During academic year 2014-2015 the MPH program had a total of 443 applicants; 354 applicants were accepted and 140 enrolled.

DrPH applicants must hold an MPH or related master's degree, submit official transcripts, three letters of recommendation, a statement of purpose, a resume and official scores from one of several graduate admissions examinations. Applicants must meet a 3.2 minimum graduate GPA requirement, and three years of public health or other appropriate work experience is strongly recommended. OAAS compiles all application materials and prepares them for the DrPH Admission Committee. During academic year 2014-2015 the DrPH program had a total of 14 applicants; six applicants were accepted and three enrolled.

PhD applicants must hold a minimum of a bachelor's degree, although completion of a master's degree is preferred. Requirements and expectations are identical to those associated with the DrPH, and the PhD Admission Committee reviews all applications. During academic year 2014-2015 the PhD program had a total of 58 applicants with the majority of students applying to the epidemiology and health policy and services concentrations. A total of 14 applicants were accepted and six enrolled.

The school has identified several measures to reflect the recruitment and enrollment of a qualified student body, which include the following: 1) average academic index of new enrollees of >400 MHA and MPH, >450 DrPH and PhD; 2) number of enrolled students headcount and FTE (for 2013-14 the target was 425 HC and 310 FTE); 3) actively recruit a strong minority (African American, Asian & Hispanic) student body (30% of new enrollment); and 4) actively recruit a strong international student body (15% of new enrollment). Data presented in the self-study indicate the school has exceeded its targets for all measures.

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4.4 Advising and Career Counseling.

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

This criterion is met with commentary. All students are assigned an academic advisor. At the master's level, the majority of advising is provided by the director of the MPH program for the specific concentration. MHA students are advised by the MHA program director. At the doctoral level, DrPH students are advised by the director of the DrPH program and PhD students are advised by their major professor. Students can choose to change advisors.

The Office of Admission and Academic Services (OAAS) provides centralized basic advising services related to course sequencing, course registration, degree completion, professional development and academic policies, procedures and deadlines. Faculty advising is associated with the selection of electives, planning of coursework, career mentoring, preparation for and conduct of internship/research projects.

Students have access to campus-wide resources for career advising, including the Career Services Office, which provides information on professional development, and the Center for Academic Performance, which provides workshops in writing, presentations and learning styles. Career counseling services available within the school include: 1) OAAS, which provides networking opportunities, convenes alumni panels and publishes a weekly newsletter listing of available public health positions; 2) the Professional and Academic Development course taken by MPH and DrPH students, which covers a range of skills such as resume and cover letter written and mock interview workshops; and 3) individual faculty who assist students with academic guidance and networking.

The institution has a clear set of procedures that govern student grievances. These procedures are available on the school's website and include possible resolution at the informal level, formal level or appeal level. The school also has a specific policy related to grade appeals that is available online. Since the fall of 2011, fourteen complaints were filed with the Division of Students Affairs regarding issues related to academics, facilities and instructional curriculum.

Student satisfaction with advising and career counseling is primarily assessed through online student satisfaction surveys conducted by the institution as well as focus groups conducted by the dean that are program specific. The response rate to the student satisfaction survey is lower among some groups of students; the response rate by MPH students was especially low (36%). The school also conducts a graduating student survey. The response rate on this exit survey is 100%, as students are required to complete the survey in order to graduate.

The commentary relates to student satisfaction with advising and career counseling. The student satisfaction survey results indicate that, although most students were generally satisfied with the availability and quality of career counseling, the school's 80% target has not been met across years and groups of students, and scores declined over the reporting period for several indicators. Student satisfaction has decreased in regards to the quality and availability of courses (33%), administrative support (73%), and communication of academic deadlines and regulations (75%). The graduating student survey also indicates that the target of 80% of graduating students indicating satisfaction with advisor support for professional employment and continuing education and the overall quality of support and guidance provided by their advisor is not consistently being met and was lower in 2013-2014 than the previous years. During meetings with students the site visit team determined that although some departments require students to meet with their advisor, this expectation is not uniform across the school. Additionally, students who met with site visitors expressed some concentration-specific concerns. In epidemiology it was noted the student faculty ratio is very high, which makes it difficult for the program director to meet with all the students face-to-face. Students did note that the program director was responsive to e-mail and provided valuable input.

The SPH recognizes that increasing student satisfaction must be addressed from multiple perspectives. For the current academic year, a number of changes have been implemented to further address students concerns and create an environment where academic and career counseling is at the forefront. These changes include the following:

- To increase the response rate on the Student Satisfaction Survey which will be sent out in spring 2016, the SPH is planning to select a number of required courses in each program where students will be given the time to complete the survey as part of a class session. In addition, the SPH is requesting the Public Health Student Government Association (PHSGA) appoint program representatives to help further encourage students to complete the survey. It is anticipated that by adding additional ways to capture the student body, response rates will increase, providing more accurate information.

- The MPH Professional and Academic Development (PAD) course (PHED 5197) is required for all MPH students and provides them with an introduction to basic public health concepts while enhancing the professional skills required for the field through workshops, sessions, and co-curricular activities. In this academic year (2015-2016), MPH Program Directors will be invited to participate in class activities and work with students to develop career plans leading up to the practice experience and to future employment. The SPH anticipates that this change will supplement the advising process and create a more uniform approach across concentrations. The inclusion of the Program Directors will further create an environment where the student satisfaction survey can be distributed and results addressed.

- The site visit team noted some concentration-specific advising concerns in Maternal and Child Health (MACH) and Epidemiology (EPID). Specifically in EPID, it was noted that the student-faculty ratio is very high. For the 2015-2016 academic year, in addition to the one- on-one advising sessions, the Department of Biostatistics and Epidemiology is developing a plan for block-advising where faculty will advise multiple students at one time. This will provide an opportunity for students to get general questions answered, allowing faculty to spend the one-on-one advising times focusing on individual student academic and career advising. To address advising concerns in MACH, the Program Director has increased communication to help students understand the advising process and to provide them with ongoing developments within the concentration. This communication has included a clear outline of MACH faculty available to students for mentorship and career advising.

Agenda

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

**University of North Texas Health Science Center
School of Public Health**

June 3-5, 2015

Wednesday, June 3, 2015

9:00 am — Request for Additional Documents
Catherine Sembajwe-Reeves

9:20 am — Break

9:30 am — Meeting with the CEPH Accreditation Committee
Christine A. Moranetz
Richard S. Kurz
Witold Migala
Liam O'Neill
David Sterling
Dennis Thombs
Liz Medders
Catherine Sembajwe-Reeves
Dr. Misty Smethers
Ginny Hickman
Libby Watson
Martin Ostensen

10:45 am — Break

11:00 am — Meeting with the Core Leadership Team
Richard S. Kurz
Christine A. Moranetz
Matt Nolan Adrignola
Sharon Homan
Thaddeus Miller
David Sterling
Dennis Thombs

12:15 pm — Break

12:30 pm — Meeting with Master's Degree Program Committee, MPH Practice Committee and Interprofessional Education Committee
Matt Adrignola
Katherine Fogelberg
Doug Livingston
Kristine Lykens
Witold Migala
Melissa Oden
Liam O'Neill
Candace Robledo
Emily Spence-Almaguer
Sumihiro Suzuki
Hyo Jung Tak
Subhash Aryal
Brad Cannell
Steve Jacob
Catherine Sembajwe-Reeves
Misty Smethers

1:45 pm — Break

2:00 pm	Meeting with Research Committee and Faculty and Staff related to Workforce Development and Service
	Brad Cannell
	Erin Carlson
	Sharon Homan
	Heather Kitzman-Ulrich
	Youcheng Liu
	Rajesh Nandy
	Liam O'Neill
	Marcy Paul
	Raheem Paxton
	Candace Robledo
	Emily Spence-Almaguer
	Menghua Tao
	Changshuai Wei
	Robyn Remotigue
3:15 pm	Break
3:30 pm	Executive Session
4:00 pm	Adjourn

Thursday, June 4, 2015

8:10 am	Review of Electronic Resource and Onsite Files
8:30 am	Meeting with DrPH Program Committee and Key Faculty
	Dennis Thombs
	Erin Carlson
	Witold Migala
	Christine A. Moranetz
	Marcy Paul
	David Sterling
	Neda Moayad
	Richard Kurz
	Misty Smethers
9:45 am	Break
10:00 am	Meeting with PhD Program Committee and Key Faculty
	David Sterling
	Hsueh-Fen Chen
	Christine Moranetz
	Raheem Paxton
	Sumihiro Suzuki
	Scott Walters
	Catherine Sembajwe-Reeves
	Chelsea Derry
11:15 am	Break
11:30 am	Lunch with Students
	Shlesma Chhetri
	Amy Board
	Becky Garner
	Omobola Mudasiru
	Yara William
	Alita Andrews
	Donald Blackwood
	Katie Cantu
	Ikponmwosa "IK" Enofe
	Opeyemi Jegede
	Martin Ostensen
1:00 pm	Break
1:15 pm	Meeting with Institutional Leadership
	Michael R. Williams
	Thomas Yorio

2:00 pm	<u>Break</u>

2:15 pm	<u>Meeting with Faculty Related to Advising, Career Counseling and Faculty Issues</u>
	Harvey Brenner
	Brad Cannell
	Erin Carlson
	Shande Chen
	Witold Migala
	David Sterling
	Scott Walters
	Sumihiro Suzuki
	Liz Medders
	Chelsea Derry

3:30 pm	<u>Break</u>

3:45 pm	<u>Meeting with Community Stakeholders & Alumni</u>
	Saritha Bangara
	Kenny Halloran
	Anita Kurian
	Matt Richardson
	Taylor Sexton
	Sofie Tai
	Loretta Burns
	Bing Burton
	James L. Dickens
	Reverend Ralph W. Emerson, Jr.
	Susan Garnett
	Paulette Golden
	Ginny Hickman
	Gloria Martinez
	Tony Shuman
	Veerinder "Vinny" Taneja
	Brad Walsh
	Libby Watson

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

Friday, June 5, 2015

8:45 am	<u>Executive Session and Report Preparation</u>

12:00 pm	<u>Exit Interview</u>