Council on Education for Public Health
Adopted on October 13, 2012

REVIEW FOR ACCREDITATION

OF THE

SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
February 27-29, 2012

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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 Texas Health Science Center at Houston (UTHSC-H). The report assesses the school's compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2005*. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation, and a visit in February 2012 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, faculty, students, alumni and community representatives, and to verify information in the self-study document by reviewing materials provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The UTHSC-H, created in 1972 by the University of Texas (UT) Board of Regents, comprises six schools: dentistry, biomedical sciences, medicine, public health, nursing, and biomedical informatics and is the most comprehensive academic health sciences center in the UT System. In fall 2010, UTHSC-H employed 1,585 faculty and 3,971 classified staff members. In 2010, the UTHSC-H student population included 4,485 students, 1,025 medical students, 473 dental students, 586 graduate students in biomedical sciences, 120 students in biomedical informatics, 886 students in the School of Nursing and 1,395 students in the School of Public Health. In 2010, UTHSC-H researchers submitted 1,663 research proposals and received approximately $240.7 million in sponsored research funding.

The school has six campuses across the state of Texas, serving a diverse array of communities. The school's regional campuses are located in Dallas, San Antonio, Austin, El Paso and Brownsville. The school's main (Houston) campus is located within the Texas Medical Center (TMC). The TMC is a large concentration of health institutions within a single location, including a number of hospitals, medical and nursing schools affiliated with other universities, the MD Anderson Cancer Center and a number of other research and clinical institutions.

Faculty and students at all six campuses operate through a single divisional structure, with divisions similar to academic departments, and while the majority of the school's administrative functions are centralized on the Houston campus, each regional campus has support services for students and faculty. Nearly all MPH classes and some doctoral classes use an ITV platform and enroll students from multiple campuses. Faculty generally teach at their home campus via ITV and travel to other campuses to meet with students in person once a semester or as appropriate.

The school has been accredited since 1969. The last accreditation review was in 2005 and resulted in an accreditation term of five years, with an option to extend the term by two years based on interim reporting. The Council accepted the interim report on graduation rates and student advising in 2007 and extended the accreditation term by an additional two years.

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 University of Texas School of Public Health (UTSPH). The school is a component of the University of Texas Health Science Center – Houston, which is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. Faculty have the same rights, privileges and status as other faculty members in the five other UTHSC-H schools. The school's faculty and students are trained in a variety of disciplines, so interdisciplinary collaboration occurs within the school as well as with numerous community partners that engage in collaborative public health research and service with the school's faculty and students. The school's strong ties to local health departments and community-based organizations throughout the state support the ongoing development of public health values. The school offers the MPH in the five core areas of public health knowledge and offers doctoral degrees in all knowledge areas as well. Despite significant funding challenges throughout the UT system, the school has managed to increase its resources in recent years, an increase concurrent

with a major initiative to increase the number of students enrolled in the school's master's and doctoral degree programs. Though the school's large size makes ongoing planning and evaluation a challenge, the school has implemented a comprehensive system to ensure wide participation in governance and decision making across students and faculty

1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

The school shall have a clearly formulated and publicly stated mission with supporting goals and objectives. The school shall foster the development of professional public health values, concepts and ethical practice.

This criterion is met. The school has a concise mission statement that encompasses aspects of teaching, research and service, including workforce training, and the impact of those activities locally and globally. The school is made up of multiple campuses and aims to unify the student, staff and faculty experience through the concept of the University of Texas School of Public Health as "One Campus."

The mission of the University of Texas School of Public Health is to improve and sustain the health of people by providing the highest quality graduate education, research and community service for Texas, the nation, and the world; to provide quality graduate education in the basic disciplines and practices of public health; to extend the evidence base within those disciplines; and to assist public health practitioners, locally, nationally, and internationally, in solving public health problems.

The school has multiple goal statements, followed by detailed objectives, for education and research. It has one major goal, with multiple objectives, for practice, service and workforce development. The goals and objectives are, in many cases, quite bold. For example, one educational goal is to increase enrollment, and concomitant objectives are to increase enrollment by 25% and to sustain enrollment at a level heretofore unseen. Importantly, the goals are not made for the purpose of simply increasing enrollment for school growth. Instead the enrollment goals are purportedly aligned with workforce needs. In similar fashion, the school aims to maintain quality of admitted students as determined by average GPA and GRE scores. Other goals are focused on maintaining quality while expanding offerings at multiple sites.

Research, service, practice and workforce goals are similarly focused on maintaining quality while expanding reach in a more iterative manner. For example, in several cases within the educational goals and objectives, the growth in number or impact was 25%, 30% or 50%. For the remaining categories, the figures were more sustainably set at 5%, 10%, etc. This relative asymmetric growth in enrollment and reach is in response to a major investment in the school by the legislature, so, while the growth is

ambitious, it is also planned and thoughtful. Particularly in light of the focus on workforce need, the growth appears responsive and appropriate.

Prior to the current dean's arrival in 2008, the mission, goals and objectives were last updated in 2005 and 2002. The current mission and goals were developed after the dean's arrival in what is described as participatory visioning process with administrators, faculty, students and other constituents. The mission, goals and objectives formed through this process are available on the school's website.

The values statement is broken into operational values related to the school's goals and objectives and ethical values for behavior and action to which the school adheres. Operational values related to the school surround creativity, discovery, transformation and the student body. The ethical values statement is familiar and appropriately focused on ethical and responsible action. The values are all operationalized in statements that accompany them. Though no specific activities related to dissemination of the values are offered, this is not a major concern.

1.2 Evaluation and Planning.

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

This criterion is met. The self-study, verified in meetings with the accreditation steering committee at UTSPH, outlines a systematic approach to analyzing progress toward the goals and objectives outlined in 1.1. The leadership, faculty, staff and student body is organized and energetic toward improving processes for this very sizable endeavor.

Planning and evaluation in the UTSPH is appropriate, thoughtful and geared toward monitoring the mission goals and objectives. The outcome indicators are in the arenas of education, research and service. Timing of the new dean's arrival appears to have been good for visioning toward this new accreditation cycle. Her approach to continuous strategic improvement and inclusive planning has led to ambitious goals that appear to have been created in collaboration with many different constituencies.

Though the responsible parties for each of the measures in the evaluation plan are not identified, nor are the rationale for scale of different objectives, the data are well organized and complete. One idea that the SPH may consider would be to add greater specificity to the outcomes with respect to competency attainment. For example, most of the educational goals relate to the student body characteristics such as size and qualification, and not whether they attain the competencies the curriculum purportedly delivers. It would be fairly easy to report on competency attainment in the aggregate.

The faculty have put many component pieces in place to validate the delivery of the public health training, such as the competency-based curricula, syllabi templates and tracking forms. However, the quantitative aspects of the outcomes for these quality improvement elements do not appear in the evaluation plan or in the curricular assessment.

1.3 Institutional Environment.

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

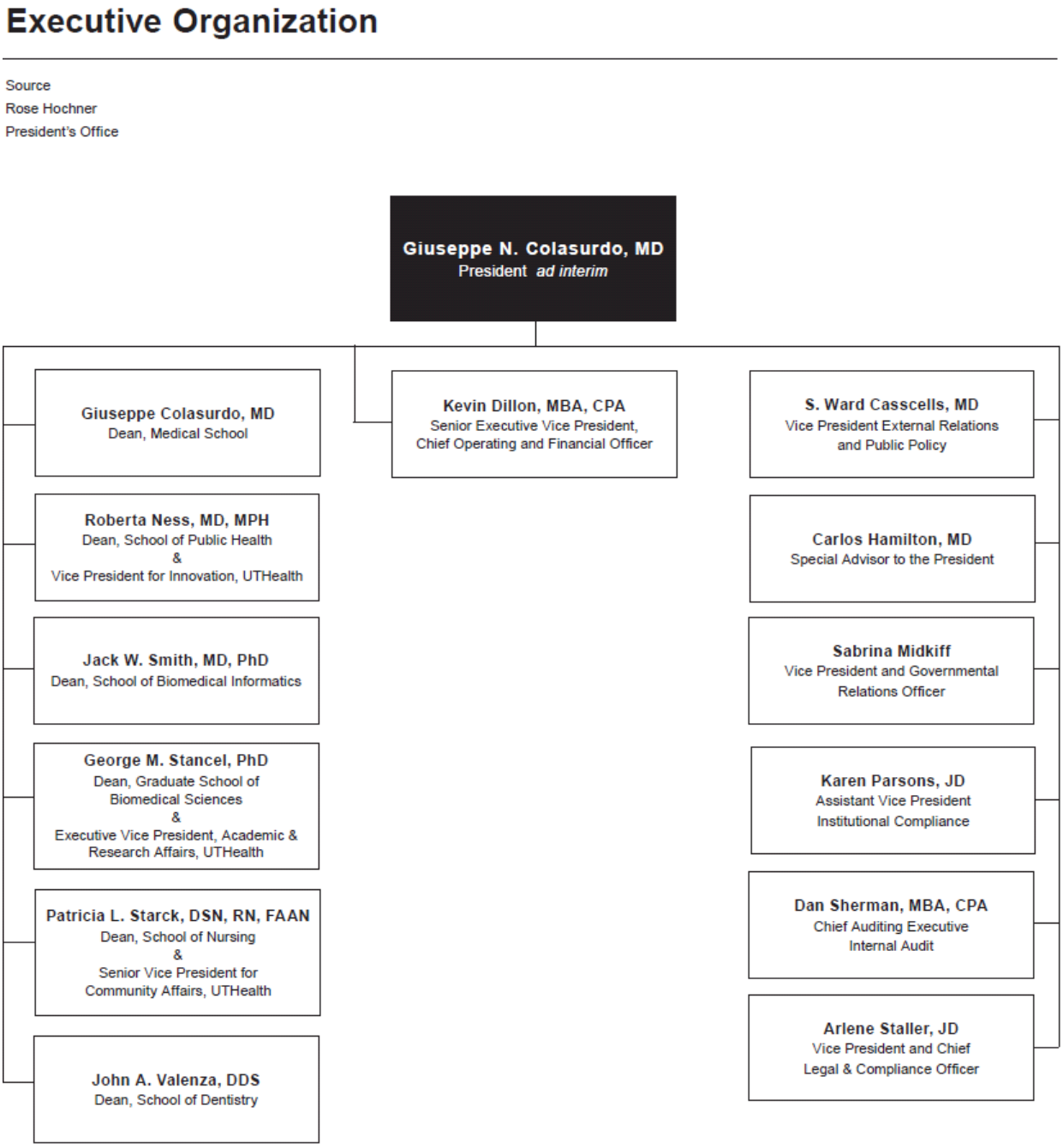
This criterion is met. The University of Texas School of Public Health (UTSPH) is a part of the University of Texas Health Science Center at Houston (UTHSC-H) located within the Texas Medical Center (TMC). The UTSPH has its primary campus in Houston and five regional campuses at Austin, Brownsville, Dallas, El Paso and San Antonio.

TMC is a large concentration of health science schools in a single location including six UTHSC-H schools: dentistry, biomedical sciences, medicine, public health, nursing and biomedical informatics. More than 4500 students are enrolled in the health science schools with more than 1500 faculty and about 4,000 classified staff. The TMC is a vast institution with many opportunities for collaboration with hospitals and healthcare facilities in addition to the healthcare educational institutions.

The UTHSC-H is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools, and the current accreditation is effective until 2020. Schools in the UTHSC-H are accredited by 12 accrediting bodies, detailed in the self-study. The organization of the university is shown in Figure 1. All UTHSC-H schools have equal status and similar accountability and reporting lines. As noted in Figure 1, the dean of the school reports to the university president.

The site visitors concluded that the school enjoys the same prerogatives as other schools and colleges in the UTHSC-H. It is free to manage its funds, space, and faculty promotion/tenure processes with the same latitude as other university academic units. In fact, university leaders express strong support for the SPH and the dean. It is clear they value the dean as a leader among the health science deans.

Figure 1. University of Texas Health Science Center at Houston Organizational Structure



1.4 Organization and Administration.

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

This criterion is met. The school structure includes four divisions, biostatistics; epidemiology, human genetics & environmental sciences; health promotion & behavioral sciences; and management, policy & community health, headed by division directors. Five associate deans, one assistant dean and a number of staff support the dean. There are five regional campuses included in the school: Austin, Brownsville, Dallas, El Paso and San Antonio, each directed by a regional dean. Regional campuses are viewed as integral and equal partners in the school, serving actively in teaching, research and service, and faculty at regional campuses have appointments in one of the four divisions. Figure 2 presents the school's organization.

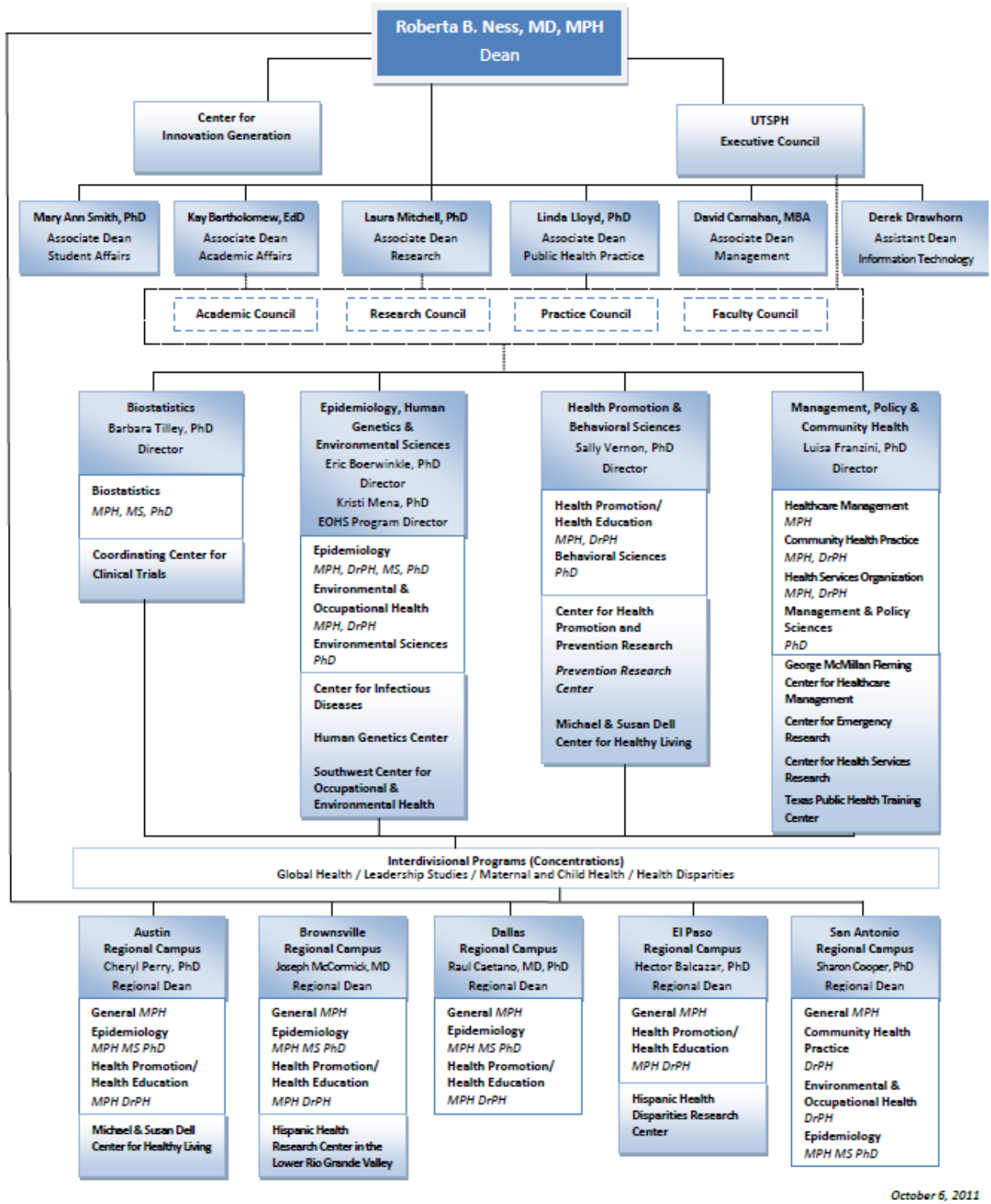
Centers in the school are based in divisions rather than functioning as school-wide centers, but centers typically include faculty members from across the divisions and regional campuses. All of the divisions and three of the regional campuses include centers. The school feels that this promotes interdisciplinary collaboration rather than reducing collaborations. This approach also places more administrative authority for centers with the primary school administrative leadership.

The school's organization enhances the potential for fulfillment of its stated mission and goals as outlined in the strategic plan. Further, the administrative structure and resources allow the school to carry out its teaching, research and service functions devoted to public health disciplines. The cadre of associate deans and assistant deans, regional deans and division directors is well structured to conduct all of the needed administrative functions of the school. With the broad geographic dispersion of the school, ITV technology is used extensively for meetings. However, it seems the regional deans spend a reasonable amount of time at the Houston campus.

The environment, as confirmed by meetings with school administrators, faculty, students and staff is characterized by a commitment to the integrity of the institution, including high ethical standards in the management of its affairs, fairness in its dealings with all constituents, support for the pursuit and dissemination of knowledge and accountability to its constituencies. Community representatives feel they have strong and meaningful involvement in the functions of the school.

A new dean was appointed about 3.5 years ago. She took on a major task of reforming the cadre of faculty in the school. While this was a stressful period for many faculty, the result has been a faculty that is overall more productive and focused on strengthening the SPH for the future.

Figure 2. UTHSC at Houston School of Public Health Organizational Structure



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's governance structure involves five standing councils and two standing committees: Executive Council, Academic Council, Faculty Council, Practice Council, Research Council, Admissions Committee and Scholarship and Traineeship Committee. All of these bodies include representatives from across the school's campuses and divisions.

The Executive Council serves as a channel for requests and ideas that faculty, staff and students generate at the unit level. Because its representatives include division chairs, deans and center directors, its responsibilities relate to policy and planning issues at the school level.

The Academic Council serves as the main academic advisory body in matters of academic program planning, teaching method evaluation, academic integrity, ethical issues, academic quality standards, CEPH accreditation criteria, and student grievance. Like all UTSPH councils, the Academic Council is co-chaired by an administrator and a faculty member.

The Faculty Council represents the UTSPH faculty and advocates for the faculty in fulfilling its teaching, research and service obligations. Faculty Council manages the tenure and promotion process, the peer review and the six-year review of UTSPH faculty. It represents the faculty on the UTHSC-H Interfaculty Council. The faculty chair is a voting member of the UTSPH Executive Committee, and the UTHSC-H tenure and promotion committee. A representative is elected for a two-year term from each division, and the current chair, past chair and chair elect of the faculty are elected by the faculty as a whole. The Council meets monthly. The Faculty Council also works with the dean on specific projects, such as developing a new faculty annual activity review and assessing the new faculty performance and compensation package.

Students serve on all of the major school councils and committees, except the Faculty Council, and serve on groups at divisional levels. The school has a large student association, the SPHSA. The association leadership includes 14 elected students from the Houston campus and representatives from the regional campuses. Members represent all degree programs. The purpose of the student association is threefold: to promote the mutually supportive, two-way communication within and between the student body, faculty, staff, and administration at the school and institutional levels; to improve the quality of student life through a variety of social activities; and to foster opportunities for student service The SPHSA has a role in administering and managing student scholarships, the student research symposium and social

functions. The association's president played a major part in validating the MPH competencies and the associated documentation process. Because there are a variety of "localized" student and alumni groups throughout the state, the dean and director of student affairs have worked with the SPHSA leadership to establish a coordinating council (COOL) that facilitates conversation between all student leaders.

The self-study notes that, given the pressures of limited funding and the need to maximize research productivity, there have been challenges in encouraging faculty participation in governance activities. Because of this, the dean has implemented a number of intentional supports: the dean's office guarantees staff support to all councils and committees and has increased the visibility and recognition for faculty service in governance roles.

1.6 Resources.

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

This criterion is met. The SPH dean is one of three deans on the UTHSC-H Executive Budget Committee where she can represent the interests of the school. Approximately 80% of tenured and untenured faculty salaries are paid from State funds. The legislature uses an enrollment driven formula for budgeting purposes, and the school receives a "small-class" supplement for full-time equivalent enrollments under 200 students. This supplement has been in effect for 12 years and has strong legislative support for its continuance.

Although UTHSC-H took a $15 million cut during the last fiscal year, the school's budget was not affected by the overall budget reductions. The school's budget has increased significantly between 2006 and 2011. The $52 million in grant funding represents the largest segment of the overall budget with an additional $23 million coming from tuition and State support. There has been a fairly constant $3 million savings of resources over expenditures over this same time period. The budget is constructed with a buffer for faculty salaries in order to provide some excess funding that can be applied toward new faculty startup funding or equipment purchases. The dean also allots 10% of funds generated through indirect costs to the responsible division to enhance research activities. Table 1 presents the school's budget.

Table 1. UTSPH Budget						
Source of Funds	**FY 2006**	**FY 2007**	**FY 2008**	**FY 2009**	**FY 2010**	**FY 2011**
Tuition & Fees	$1,517,491	$2,024,328	$2,259,304	$2,826,493	$3,295,185	$4,857,493
University/State Funds	$14,272,281	$14,633,300	$14,619,423	$14,928,242	$19,465,540	$19,474,287
Grants/Contracts	$37,385,731	$33,194,397	$32,474,468	$34,847,945	$44,203,831	$52,076,090
Indirect Cost Recovery	$9,277,472	$7,743,144	$7,681,664	$8,340,009	$9,838,231	$10,545,777
Expendable Gifts	$82,893	$112,221	$61,162	$88,222	$98,525	$27,578
Investment Revenue	$189,074	$186,020	$195,207	$82,340	$181,377	$248,010
Continuing Education	$76,954	$106,090	$153,675	$86,004	$137,979	$82,113
Other Unrestricted Revenue	$1,042,294	$1,108,120	$1,481,181	$1,454,024	$1,423,049	$707,634
Other Restricted Revenue	$743,626	$732,736	$1,010,362	$2,541,551	$2,702,694	$2,547,697
Less: University Taxes	($4,349,819)	($4,360,254)	($4,772,796)	($5,140,060)	($4,897,572)	($6,464,014)
Total Revenues	**$60,237,997**	**$55,480,102**	**$55,163,650**	**$60,054,770**	**$76,448,839**	**$84,102,665**
Expenditures						
Faculty Salaries	$15,145,615	$16,058,083	$16,417,827	$17,156,400	$20,345,472	$20,597,010
Admin & Professional Salaries	$1,254,676	$1,267,237	$1,272,645	$1,092,949	$1,258,002	$1,446,186
Staff Salaries	$11,290,094	$11,040,375	$11,559,555	$12,170,647	$13,606,190	$14,592,779
Other Wages	$435,033	$583,040	$543,362	$461,924	$557,849	$657,826
Fringe Benefits	$3,371,455	$3,313,770	$3,438,981	$3,824,269	$5,207,105	$6,418,393
Operations	$9,011,632	$8,800,584	$8,075,174	$9,343,916	$11,947,132	$11,315,170
Travel	$1,304,176	$1,315,571	$1,267,521	$1,230,760	$1,379,720	$1,430,567
Student Support	$4,039,340	$3,977,189	$3,854,970	$4,047,963	$4,947,812	$6,784,082
Capital Expenditures	$492,310	$1,672,474	$1,301,042	$1,396,959	$1,243,928	$1,070,653
Research Subcontracts	$10,951,755	$8,484,893	$8,058,386	$8,709,305	$12,677,654	$17,633,498
Total Expenditures	$57,296,086	$56,513,216	$55,789,463	$59,435,092	$73,170,864	$81,946,164

In fall 2011, the school employed 129 core faculty and 22 part-time/adjunct faculty. Forty-three of the core faculty are located at the regional campuses. Student-faculty ratios in the divisions range from approximately 5:1 (epidemiology, biostatistics, environmental health, social and behavioral sciences) to 11:1 (health services). Faculty numbers are adequate and generally far exceed minimum expectations defined in the accreditation criteria, although there has been a slight decline in the number of faculty at the Houston campus, and the number of biostatistics faculty available at one of the regional campuses has decreased from four to one over several years. A number of faculty searches are now under way to replace lost faculty.

The number of staff at the school is more than adequate to manage a large academic and research program. There are 433 administrative management and support positions at the school; approximately 100 of these individuals are paid from state funding to directly support students and faculty and the others are funded by and associated with grant and contract activity.

The space allotments at the main and regional campuses appear to be adequate. Students at the main and regional campuses have access to both library and computer services. An extensive, modern network of library and computer services is maintained at the university. The school also maintains a sophisticated interactive television network with 50 video-enabled classrooms across the six campuses. The school also has access to community resources for educational activities with students and faculty heavily involved in regional health issues. The division directors expressed some concern about ensuring that there will be an appropriate and concomitant growth in space to match the recent growth in the academic and research programs. At the present time 80% of the Houston faculty is housed in the main school building, with the behavioral science faculty lodged on three floors of another campus building.

The ability of the school to maintain the recent growth in the future is related to the overall health of the Texas economy and the degree to which state support will be maintained in the future. Despite the overall economic problems in the country over the past three years, the Texas economy has remained fairly robust. The school has been spared any cuts to higher education in the State and in fact has been the recipient of a number of special funding programs. The school is also well-positioned to take advantage of funding opportunities recently created by the Texas State Legislature. These programs include the Texas Health Care Transformation and Quality Improvement Program (1115 Waiver) which is designed to enhance health promotion and disease prevention programs with an emphasis on selected chronic conditions; provide increased improvements in prenatal and birth care access; and strengthen rural health. The school of public health is well-positioned to take full advantage of this multi-billion dollar program.

Another significant opportunity for the school is the recently-implemented $30 billion cancer research program. The Cancer Prevention Research Institute of Texas is designed to create and expedite innovation in cancer research, attract, create or expand research capabilities, and continue to develop and implement the Texas Cancer Plan. The school's co-location and long-term collaborations with the MD Anderson Cancer Center should help to facilitate cross-disciplinary research projects with the cancer center which can successfully draw external funding from this state-initiated program.

Finally, the school is well-positioned for increasing development. The dean has been very proactive in making local, regional and state donors and potential donors aware of the school and its impact on the population and in developing strategic partnerships.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Master of Public Health Degree.

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

This criterion is met. The school offers the MPH in the five core areas of public health knowledge, as well as a generalist MPH. The school also offers doctoral degrees in all five core areas of public health knowledge. Table 2 presents the school's degree offerings.

Degree programs are well defined and consistent. The general MPH requires students to select courses beyond the core MPH courses that map to a set of individually-designed competencies.

Table 2. Degrees Offered

	Academic	Professional
Masters Degrees		
Biostatistics	MS	MPH
Community Health Practice		MPH
Health Services Organization		MPH
Healthcare Management		MPH
Epidemiology and Disease Control	MS	MPH
General*		MPH
MPH, Health Promotion and Health Education		MPH
MPH, Occupational and Environmental Health		MPH
Doctoral Degrees		
Community Health Practice		DrPH
Health Services Organization		DrPH
Epidemiology and Disease Control	PhD	DrPH
Health Promotion and Health Education		DrPH
Occupational and Environmental Health		DrPH
Behavioral Sciences	PhD	

Table 2. Degrees Offered		
Biostatistics	PhD	
Environmental Sciences	PhD	
Management & Policy Sciences (Health Policy & Law)	PhD	
Management & Policy Sciences (Health Economics / Health Services Research)	PhD	
Management and Policy Sciences (Health Management)	PhD	
Dual Degrees within UTHSC-H		
Medicine		MD/MPH
Nursing		MSN/MPH
Health Information Sciences		MS/MPH, PhD/MPH
Dual Degrees with Other Universities		
University of Houston, Law Center		JD/MPH
UT Brownsville, School of Business		MBA/MPH
UT San Antonio, School of Business		MBA/MPH
Baylor College of Medicine		MD/MPH
UTHSC – San Antonio Medical School		MD/MPH
Texas Tech University, Paul L. Foster School of Medicine		MD/MPH
UT Austin, LBJ School of Public Affairs		Master of Global Policy Sciences/ MPH
UT Austin, LBJ School of Public Affairs		MPA/MPH
University of Houston, School of Social Work		MSW/MPH
UT Austin, School of Social Work		MSSW/MPH
UT Arlington, School of Social Work		MSSW/MPH

*Available only for dual degree students and students enrolled at regional campuses.

2.2 Program Length.

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

This criterion is met. The MPH degree requires 45 semester credits. The university defines one semester credit as 15 hours of classroom time.

2.3 Public Health Core Knowledge.

All professional degree students must demonstrate an understanding of the public health core knowledge.

This criterion is met. MPH core requirements of one course in each discipline (16-17 credit hours) assure broad understanding of and skills in the five public health disciplines and in the cross-cutting skills necessary for professional performance in public health. Core courses generally consist of a combination of lectures, discussion periods, directed reading, and individual study and inquiry. Core course competencies and learning objectives are delineated in the course syllabi. Core coursework is outlined in Table 3.

UTSPH reexamined its MPH curriculum following the Association of Schools of Public Health (ASPH) competency project. Each division reviewed and adapted the ASPH competencies for the public health core courses. Site visitors reviewed the syllabi and verified that the courses cover appropriate topics.

All divisions have a limited number of courses that meet the core requirement. However, the Management, Policy and Community Health Division had previously offered six course options to cover the core area of health services administration. In 2011, this division planned a new core course for the MPH and implemented it for the first time in fall 2011, so now UTSPH has only one course available to cover the area of health services administration for MPH students.

Table 3. Core Public Health Knowledge Requirements

Area	Course	Credit hours
Biostatistics	PH 1690: Introduction to Biostatistics	4
	PH 1700: Intermediate Biostatistics I[a]	4
Epidemiology	PHM 2610: Fundamentals of Epidemiology	3
	PHM 2612: Epidemiology I[b]	3
Environmental Health Sciences	PHM 2100: Foundations of Environmental & Occupational Health Sciences[c]	4
	PHM 2110: Overview of Environmental Health[c]	3
	PHWM 2120: Man's Impact on the Environment[c]	3
Health Services Administration	PHM 3715: Introduction to Management and Policy Sciences	3
Social and Behavioral Sciences	PHM 1110: Social and Behavioral Aspects of Community Health	3
	PHM 1111: Health Promotion Theory and Methods I[d]	3
	PHM 1112: Health Promotion Theory and Methods II[d]	3

a PH 1700 is for students who have already completed introductory biostatistics courses.

b Identical competencies covered in PHM 2611 and PHM 2612 are covered in greater depth in PHM 2612 (required for epidemiology majors).

c Identical competencies covered in PHM 2100, PHM 2110 and PHWM 2120 are covered in greater depth in PHM 2100. PHM 2612 is required for majors in environmental and occupational health. Non-majors complete either PHM 2110 or PHWM 2120

d The 2-course sequence PHM 1111 and PHM 1112 is required for majors in health promotion because it covers the PHM 1110 competencies but in greater depth.

UTSPH policy states that students must have completed an MPH degree or equivalent coursework in the five public health disciplines prior to beginning studies for the DrPH. Students with a master's degree other than an MPH may be admitted contingent upon successful completion of core courses in the five core public health courses. The master's level core courses completed as a part of the conditional admission for these students do not count toward the doctoral degree. This policy was clarified and catalog language changed in August 2011.

DrPH students select a major, minor and breadth area from the five public health disciplines. They complete a nine credit minor in a public health discipline other than the major discipline. Students also

have the option to select one of the Management, Policy and Community Health tracks (health economics, policy and management) for the minor requirement.

2.4 Practical Skills.

All professional 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 the students' areas of specialization.

This criterion is met with commentary. A field-based practicum experience is required as part of the MPH and DrPH programs. The practicum is a planned, supervised and evaluated real-world experience that allows students to apply the knowledge and skills acquired in the classroom to address a public health issue or problem related to their professional goals and interests. Students select practica based on their academic and professional goals and interests.

Learning objectives for the MPH practicum are as follows: 1. Develop an understanding of the practice of public health. 2. Formulate an idea from conception to completion of project. 3. Understand the health goals of the community and organization. 4. Develop skills to work effectively as a member of a team. 5. Work with diverse groups and cultures. 6. Develop problem-solving skills. 7. Develop leadership skills. 8. Navigate the work environment to accomplish the objectives.

UTSPH developed new guidelines for the DrPH practicum in 2011 in response to the release of the Association of Schools of Public Health (ASPH) DrPH competencies in the fall of 2010.

The revised DrPH practicum guidelines became effective and implemented during the fall 2011 semester. These guidelines were included in the self-study and reviewers found them to be thorough and comprehensive.

Learning objectives for the DrPH practicum include one universal objective: actively participate and engage in team activities related to the translation and application of evidence from academia to public health practice (through meetings, conferences, grand rounds, drafting of white paper or policy brief, etc.). Each DrPH student selects two additional learning objectives from the following: 2. Apply professional communication skills; prepare and deliver written and oral materials for a variety of audiences, including public health professionals, the public and/or policy makers. 3. Identify and follow a policy, program or action recently implemented by or through the community organization; examine its progress throughout the practicum experience and outline recommended next steps based on an analysis of the selected process. 4. Apply research tools to public health practice (ie, survey design and completion, evaluation, data analysis, policy analysis) to complete a project identified by the organization. 5. Conduct at least one skill-building workshop for one unit of the organization OR teach a course or workshop for undergraduate or graduate students.

The practicum is an academic requirement for MPH and DrPH students. Students may register for one to nine credit hours of practicum per semester, but can only receive credit for up to three. Three credit hours are strongly recommended. Each credit hour equates to 60 hours in the field, thus the typical practicum results in 180 hours in the field plus approximately 20 hours dedicated to the online practicum seminar, for a total of 200 hours.

Fewer credit hours may be approved by the academic advisor and associate dean of public health practice, based on a student's prior experiences. This requirement may be met over multiple semesters. In the 2007-2011 academic years, 100% of MPH and DrPH students had three or more semester credits hours of practica. In raw numbers, this meant that in the 2010–2011 academic year, 328 UTSPH students completed practica. Waivers for students with prior public health experience were given to 18 MPH and seven DrPH students during the 2007-2011 reporting period, and site visitors verified that there is a robust process to verify that waivers of practicum hours are based on well-documented experience that relates to competencies and learning objectives.

Practicum sites are identified by each student with assistance from their faculty sponsor and an online database of practicum opportunities. The faculty sponsor and the associate dean of public health practice assess and approve the site. This approval is formalized by their signatures on an individualized learning contract and release of the approval code for registration.

A selected site must engage a community preceptor that allows the student to meet the MPH or DrPH competencies for the practicum experience. To assure that the community preceptor is prepared to work with the student to meet these competencies, the preceptor is sent a copy of the student evaluation form that he/she will need to complete at the end of the experience. That form entails attesting to the degree to which the student completed the competencies. A wide variety of public and private opportunities at local, national and international organizations is available to students.

These sites provide valuable practice experience for students by allowing the student to apply skills and knowledge learned in the classroom to a public health experience; introducing regular contact with public health practitioners; and providing a community preceptor who is willing to be a mentor and provide guidance and support.

Although this criterion is met, it was noted at the time of the self-study there were a shortage of sites at regional campuses. During the visit, the team learned that a number of actions have been taken to address this concern. Within the past six months, the school has "cleaned up" the practicum database, verifying that all listed sites have current contact information and current opportunities for students. In

order to expand the number of sites at regional campuses, the regional deans and their practice-affiliated faculty and staff agreed to identify five additional practicum sites each during the last academic year; all campuses met or exceeded the target.

UTSPH students and alumni interviewed indicate being pleased with practica experiences. Likewise, community constituents who have hosted students indicated being pleased with the quality and knowledge base of the students placed in their organizations.

2.5 Culminating Experience.

All 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. The school has a set of highly standardized rules and procedures regarding the culminating experience for the MPH degree. A specific set of public health competencies have been assigned to the culminating experience. Students can elect to write a culminating paper, which can take a variety of forms including a review of the literature; a traditional research project involving the use of primary or secondary data; policy analysis; or a professional practice project. Students may also elect to complete a three-credit capstone course, which involves individual and group work on public health case studies. The work involves synthesis, integration and problem solving. A clear set of evaluation metrics has been developed for this capstone course. The faculty is currently working to make this course even more rigorous than the current offering. The capstone includes four intensive writing exercises and several presentation exercises during the course.

School leaders and faculty have implemented a number of measures aimed at building students' written communication skills in the semesters before reaching the culminating experience, since a number of the challenges that students have had in completing the culminating experience in a timely fashion have often related to written communication skills. All incoming students take a writing assessment when they enter the school, and the school provides specific resources from the first day of enrollment to students who perform poorly on the writing assessment. The dean has identified resources and special assistance for international students who struggle with writing, and the school also has begun offering regular proposal writing seminars, open to all students.

Doctor of Public Health degree students are expected to complete a dissertation of publishable quality. A specific set of guidelines have been developed which serve to guide the student and the faculty committee through the dissertation process. The titles of some recent DrPH dissertations clearly show that the program aligns with the distinct competencies identified for this rigorous, practice-based degree.

School faculty and administrators are currently developing a plan to provide more rigorous approaches to evaluating the extent to which the current culminating experience and dissertations lead to the attainment of the expected public health competencies. The faculty is working to further strengthen the connections between the various aspects of the capstone course with the competencies associated with the culminating experience.

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 educational programs.

This criterion is met with commentary. The MPH degree has approximately 65 core and cross-cutting competencies, and the concentrations each have eight to 20 competencies that relate to the required concentration-specific coursework.

Competency development and refinement has been largely decentralized, with divisions organizing the process. Faculty who met with site visitors described an iterative process that involves faculty and students and that includes review of existing competency sets as well as discussion of the school's particular mission and goals. Review occurs at the school level, however, primarily through the Academic Council, the associate dean for academic affairs and, to a more limited extent, the Curriculum Committee.

Learning objectives that map to competencies are listed on all syllabi, and students who met with site visitors were readily familiar with competencies and with the concept of tracking their own progress in competency attainment.

The first comment relates to the fact that school leaders and faculty are aware of the need to further develop the competency-based curriculum. In addition to continuing to develop and refine competency sets, school leaders also identified a need to map competencies and learning objectives at the next level of sophistication: course-level activities.

The second comment relates to the fact that the school has a process in place to allow students to select generalist/individual MPH competencies and work with an advisor to map the individual set of competencies to a set of courses, but the process is newly implemented and still largely untested. All generalist degree plans, with competencies and coursework, are reviewed by the associate dean for academic affairs, and this review process will "flag" inappropriate competency choices or inadequate mapping; ongoing implementation and continuous iteration of this process will allow the school to better define this process for both faculty and students.

2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each student has demonstrated competence in the required areas of performance.

This criterion is partially met. Students are assessed using exams, papers and projects in most coursework. They also self-assess competency attainment at least twice a year. Students meet with their advisory committees (a group of faculty advisors) once each semester to assess competency attainment by reviewing grades, the self-assessment and other appropriate documents. The school uses a standard competency rubric on which the student logs the grade and class associated with each competency.

The school has transitioned from a completely pass/fail environment a decade ago to one where a combination of letter grades and pass/fail is used in roughly equal measure. There are relatively few low grades where letter grades are used, though this number is increasing in total if not as a proportion. The authors of the self-study indicate that this may be an indicator of grade inflation, but that determination cannot be supported with existing data.

Each student's advisory committee consists of one to three faculty members and plays a major role in each student's advising and progress. This process is labor-intensive, but students and faculty who met with site visitors explained that the centralized scheduling system for appointments works well, and all school stakeholders know that they are expected to be in town and available during the week designated for meetings each semester. Of course, the sustainability of this dynamic for a sustained, expected student body of 1200 per year may be a challenge, but faculty and students clearly value the process. Site visitors also noted that, while this does not appear to happen in practice, the written policy allows the potential for an advisory "committee" to consist of only one person; this should be addressed to avoid any confusion.

The school identified the formerly-required master's thesis as a potential barrier to graduation. The potential barriers included the potential to get "stuck" or for students that have trouble with writing to have trouble completing the proposal and thesis. In 2010, the school adopted a new competency-based capstone course, which in its first reported outcome appears to have had a promising impact on graduation rate. This is part of the second phase of a two-phase approach to addressing graduation rates. The first phase focused on defining meaningful categories for different cohorts of students that might affect graduation rates; this analysis allowed the school to create a formal means for tracking students who wanted to take classes but never intended to complete a degree. The second phase is focused on progression and planning.

Other than the optional thesis and use of the new capstone course, a few additional initiatives are offered that may impact graduation rates: training in proposal development, centralized advising and revised

qualifying exam procedures for doctoral students. The school is using a new competency- based grading rubric in the capstone course for the first time in spring 2012.

The concern relates to the need to improve response rates and otherwise gather more meaningful, actionable data from alumni and employers. Identification of competence at the class level is not a completely satisfactory evaluation tool even when done perfectly. The true assessment of quality of graduate training in public health has to involve input from alumni and employers. Regrettably, alumni and employers do not always feel compelled to respond to public health faculty administrators, and the school suffers from poor response rates in those two areas. Alumni job placement data is based on about 8-12% of the student body in any given year. A plan is needed to increase survey response rates. From the data that is provided, trends are hard to discern other than the fact that about a third go to work for hospitals and about 10-12% go into faculty or staff positions. The school does not separate these data by campus.

In interviews at the site visit, the team learned that alumni surveys had historically been completed at the university-system level and that a new plan was in place to make this happen at the school level. This will be a welcome change, as school administrators feel confident that they can improve response rates by using more tailored approaches.

As with most major initiatives at UTSPH, a continuing challenge will be to take process improvement measures, assess their worth and value and implement changes on a large scale to include students at all regional campuses.

2.8 Other Professional Degrees.

If the school offers curricula for 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 not applicable.

2.9 Academic Degrees.

If the school also offers curricula for 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 with commentary. The school offers two MS degrees, one in biostatistics and the other in epidemiology and disease control, and seven PhD degrees. The school administers all of the academic programs, as there is no graduate school structure in the UTHSC-H organization. The MS in biostatistics is only available at the Houston campus and the MS in epidemiology is available at Austin, Brownsville, Dallas, San Antonio and Houston. All PhD programs are available at Houston, and the PhD in epidemiology is also available at Austin, Brownsville, Dallas and San Antonio.

All MS and PhD students are required to take at least one course in epidemiology. MS students are required to minor in another public health discipline. PhD students must have course experience in at least three public health disciplines and attend required interdisciplinary seminars to ensure that they have an understanding of public health as a field and a sense of how their specific field of study relates to public health as a whole.

The comment relates to the fact that, at the time of the site visit, site visitors could not verify that all MS students received broad public health exposure to attain competencies in behavioral, environmental and management and policy sciences in particular. Many biostatistics MS students choose epidemiology as their required minor area, and vice versa. Consequently, school leaders formed a committee to design a required course that will provide a broad introduction to public health for all MS students. All MS students entering in spring 2013 or later will be required to participate in two modules of the capstone course originally developed for the MPH to meet both core and cross-cutting competencies.

2.10 Doctoral Degrees.

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

This criterion is met with commentary. The school offers the DrPH and the PhD at the Houston campus in all areas listed in Table 2. All regional campuses offer the PhD in epidemiology and disease control. The DrPH degrees in community health practice and occupational and environmental health sciences are also offered at the San Antonio regional campus, and the DrPH degree in health promotion is also offered at the Austin, Brownsville, Dallas and El Paso campuses.

The school has consciously increased enrollment of doctoral students by large percentages in the two most recent years, though the school now has reached its intended steady state. The rapid growth of the doctoral program (354 current doctoral students are currently enrolled) raises questions about growth in faculty numbers to match the growth in the doctoral enrollments. The school is currently conducting 18 faculty searches in several disciplines to ensure the ability to maintain the current level of external funding and to have sufficient numbers of faculty available to mentor doctoral students. These new hires should add significantly to the school's ability to manage the large growth in doctoral students over the past few years. The growth in the doctoral programs has, conversely, been a powerful tool for recruiting top-level faculty. School leaders note that attracting high-caliber faculty, both in Houston and at the regional campuses, has been enhanced by the school's ability to offer doctoral students with whom they may work. In addition to hiring additional faculty to mentor doctoral students, the school now requires all grants to include graduate student support. The school has also obtained a large doctoral-level training grant,

and the dean has provided an additional number of graduate assistantships to match the growth in the doctoral programs.

A standardized set of procedures for the doctoral culminating experiences have been developed. The school has developed a set of competencies for each doctoral program in each specific discipline. The DrPH degree program has focused on having students develop management and leadership skills and a strong familiarity with applied research methods. The school has also been expanding the practicum program to ensure that the DrPH students receive a higher level of experiential learning than the MPH students. Discussions with the students confirmed that the DrPH practica have provided them with opportunities to gain management, leadership and research experiences.

The school has developed a new qualifying examination, which is given after the student completes 18 credits of course work. This new approach is designed to help move the students through the coursework and helps with early identification of students who are unlikely to be successful in the remainder of the program. The school administration also now requires a minimum of two meetings each year between the each doctoral student and the student's dissertation committee.

The commentary relates to the management of such a large number of doctoral students across six campuses. The school's leadership is clearly aware of the need to develop a doctoral tracking program which provides high levels of mentoring for these students to ensure timely movement through the program. They have developed a doctoral student tracking form and hope to build a robust tracking system tied to the university's purchase of "Campus Solutions" from People Soft. The adoption of the new People Soft system will help to enhance the tracking system for each student's progress through the program. At the present time, the tracking systems seem to be split between division and central control, and it is not entirely clear how the new system will accommodate this division of responsibility.

2.11 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 the following joint and dual degrees: MD/MPH, MSN/MPH, MPA/MPH, MSSW/MPH, MS/MPH, PhD/MPH, JD/MPH and MBA/MPH, though not all of these programs currently enroll students. The school has recently adopted changes in the joint and dual degrees that correspond with the adoption of new policies and procedures for the generalist MPH. Students pursuing joint and dual degrees develop a plan at orientation that defines individual competencies and identifies coursework from both degrees that maps to core and individual competencies. School faculty have begun the process of identifying courses that can consistently offer shared credits between the two degrees. In all cases in which credits from the non-SPH degree are deemed appropriate to substitute for public health

courses, a committee of divisional faculty from the school with expertise in the subject area have reviewed the outside syllabus to verify alignment with public health competencies.

Advising is a key component of joint degrees, and the school must continue to monitor advising for these degree programs, providing more structured support and direction to advising where it is needed.

2.12 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 teaching and learning methodologies and to systematically use this information to stimulate program improvements.

This criterion is not applicable.

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 is a nationally and internationally recognized leader in public health research. Total external research funding for 2010 was $69 million with $57 million coming from federal sources. Although the bulk of the external funding was secured by faculty members at the Houston Campus, faculty members at the regional campuses have also made excellent contributions relative to the number of faculty members at each regional campus. The most successful areas for external funding have been epidemiology, human genetics, behavioral sciences and environmental sciences. The Human Genetics Center brought in over $29 million in external funding in 2010. The center's work involves a number of important research areas including sleep apnea, retinitis pigmentosa, atherosclerotic complications of hypertension and spina bifida. The center has also been developing new statistical approaches to genetic studies. The school also operates other centers involving health promotion and prevention, clinical trial coordination, infectious diseases, healthy living, Hispanic health and health services research.

The school receives 55% of the total indirect costs received by the university. The University Grants and Contracts Office provides significant amounts of pre- and post-award support to the school faculty. A new post-award management system has been developed within the school. The school also provides grant support to faculty and has three pre- and post- award units to assist faculty in preparing and managing grants and contracts. This support is extended to the regional campuses. Support services also cover compliance and human subjects' issues, laboratory animal medicine and care, clinical trials resources and access to core laboratory services.

The school operates four internal programs designed to provide reasonable sized amounts of money to assist faculty in developing various research areas. The school also provides workshops on grant writing for both junior and senior faculty members and seminars that cover topics such as translational research and clinical trials. The school also has a system of startup and bridge funding and faculty financial awards for excellence in research. Money is also available for faculty members to obtain external scientific reviews of grant applications prior to submission to the sponsor.

The school is known for research in reproductive health, obesity, cancer screening, human genetics, family violence and alcoholism and chronic diseases in Latinos. The school has an excellent record in developing and scientifically testing various population-based interventions and is now moving toward research projects designed to test various approaches to dissemination of proven prevention methods in the general community. In order to advance research in intervention dissemination, faculty members are extending collaborations with media and marketing and informatics experts. The network of regional campuses provides an excellent system for moving the school's research in this direction. The school, through its epidemiology, disease prevention and genetics research program sees a movement toward more involvement in clinical epidemiology, translational research and comparative effectiveness and outcomes research. The epidemiology group is in the process of expanding the environmental epidemiology research program with five new hires and three ongoing faculty searches. The epidemiology group has also purchased the former ENRON Company's large server to handle the large volume of data generated by the epidemiology and genetics research programs. The epidemiology and genetics group is also working closely with the campus' informatics and computer science group to develop new approaches to mining the rich data sets that exist within the school.

Faculty members offer many opportunities for students to participate in research projects. The school also runs a local EIS program for students, which mimics the CDC model. The students have worked with faculty and local health authorities on a number of public health problems such as hurricane recovery, West Nile outbreaks, etc.

The school's approach to tenure looks for a balanced portfolio of research, teaching and service. Faculty members feel very strongly that their robust research program helps to inform and enrich the school's teaching program. The dean has encouraged faculty to explore a wide variety of funding sources to support research including Medicaid funding, small business grants and corporate funding opportunities. The development of a broader portfolio of research funding and the development of public/private collaborations fits nicely with the university's move toward entrepreneurial thinking and the development of incubator programs and intellectual property.

3.2 Service.

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

This criterion is met. Service at UTSPH is considered an essential component of the faculty efforts and is encouraged among UTSPH faculty, staff and students. The school incorporates service into its goals and objectives as well as its expectations for individual faculty members. At UTSPH service is considered an academic and professional responsibility along with research and teaching. In addition, service by the students is encouraged through extracurricular programs and various national and international opportunities that are promoted and made available to students throughout the academic year.

The UTSPH faculty service aspiration is to provide service to local, state, national and international health agencies that is consistent with the school's instructional and research commitments. UTSPH develops public policy, contributes to the activities of these agencies and enhances the well-being of the public.

The school reports faculty professional and public service activity in an Annual Activity Report. The Annual Activity Report informs the annual faculty review conducted by division directors, regional deans and the UTSPH dean. Community and service activities are covered in the Faculty Performance and Compensation Plan. UTSPH also encourages service by including it in consideration as part of the Academic and Research Incentive Plans implemented in 2011. Research and instruction comprise 65% of the annual performance incentive plan and service comprises 35%.

UTSPH faculty are members of various professional and community associations; they sponsor, present and disseminate public health information at seminars, workshops and symposia; and they consult with and offer technical expertise to federal, state and local health agencies, community-based and other health-related organizations. UTSPH faculty, across all divisions and campuses, initiate the development of formal agreements to collaborate with health agencies and community partners. The agreements, such as memoranda of understanding or contracts, are developed to provide field placements, field studies, community-based programs, consultation and training. The UTSPH also has contracts and agreements

with local, state and national agencies, including the Centers for Disease Control and Prevention, hospitals, local school districts and local health districts.

UTSPH reports faculty participate in reviewing grants for federal public health grant programs including the Substance Abuse and Mental Health Services Administration, Department of Health and Human Services, the National Academies of Science, the Institute of Medicine, the World Health Organization, the National Institutes of Health Center for Scientific Review and the National Institute on Alcohol Abuse and Alcoholism. Faculty also serve on grant review panels for foundations including the Robert Wood Johnson Foundation, Kellogg Foundation, US Epilepsy Foundation, and March of Dimes Foundation.

During the past three years, UTSPH faculty have served on a number of national and international advisory boards and executive committees including the National Institute for Occupational Safety and Health, Board of Scientific Counselors of the Department of Health and Human Services, the American Public Health Association's executive board, the National Board of Public Health Examiners; *American Journal of Public Health* editorial board, National Institute of Child Health and Development, *Public Health Reports*, the American Heart Association, Society for Prevention Research, National Eye Institute, *European Review of Applied Psychology*, and the British Diabetic Association.

UTSPH faculty members serve as editor and associate editor, and on editorial boards as well as peer reviewers for journals including *Annals of Family Medicine*, *Journal of General Internal Medicine*, *Journal of Physical Activity and Health*, *Journal of Occupational and Environmental Hygiene*, *Helicobacter*, *Annals of Epidemiology*, *American Journal of Epidemiology*, *American Journal of Public Health*, and *Journal of Infectious Diseases*. The school also sponsors and co-sponsors a number of community health conferences and events.

Locally, UTSPH faculty are active members of community associations, addressing such issues as maternal and child health, mental health, obesity, health literacy, oral health, HIV prevention, lead poisoning, disaster preparedness and substance abuse. They lead or participate in projects sponsored by the state and local health departments, and by community-based organizations, including the Texas Obesity Research Academic Advisory Council, Texas Cancer Registry, American Cancer Society, American Heart Association and the March of Dimes.

During the site visit junior faculty reported they are mentored by more senior faculty on appropriate forms and venues of service which will contribute to professional growth. Their involvement in service related activities is also included in their three-year review and during their formal six-year review. Service is considered in the promotion and tenure decision making process.

Students participate in service activities as part of their curricular requirements. In addition, the school's student associations participate in service. Students also participate in volunteer service activities through peer networking, their workplaces, and their professional or community organizations. Such opportunities are readily available through UTSPH campus locations in Austin, Brownsville, Dallas, El Paso, San Antonio and in the Texas Medical Center in Houston.

Students also contribute to UTSPH's service program through the volunteer activities of student organizations such as the UTSPH Student Association, The Board: A Leadership and Management Student Organization, the Regional Campus Student Associations, the Student Epidemic Intelligence Society, the Student Society for Global Health, International Association of Emergency Managers–Student Chapter, and the Biostatistics Student Association.

The Student Epidemic Intelligence Society, founded in 2002 in collaboration with the CDC, supports the Center for Emergency Research to providing service to UTSPH and local health departments in response to emerging infectious diseases and bioterrorism. The Society hosts training sessions for students and provides hands-on experience in outbreak and disaster preparedness, as well as providing training in support of state and local health departments. Students who complete the Public Health Research Training Program are eligible to participate in community needs assessments and epidemiological data collection (eg, for West Nile cohorts). Along with UTSPH faculty, students in the Student Epidemic Intelligence Society have published papers in the *Texas Public Health Journal.*

3.3 Workforce Development.

The school shall engage in activities that support the professional development of the public health workforce.

This criterion is met. The self-study estimates that 85% of the Texas public health workforce has not had formal training in public health. UTSPH contributes to the region public health workforce in a number of ways. UTSPH provides numerous non-degree opportunities, and non-matriculated students are allowed to take up to 16 credit hours of UTSPH courses, unless the student is associated with a formally recognized educational collaboration, dual degree or certificate program. For academic years 2008-2011, there were 697 continuing education activities with 40,000 participants.

UTSPH offers four certificate programs: Public Health, Public Health Informatics, Health Disparities, and Maternal and Child Health programs. The total certificate program enrollment for the academic years 2008-2011 was 1661. Certificate students complete a structured program which meets the individual's needs. Successfully completed courses as either a general non-degree student or a certificate student may be counted toward a degree if the student applies to and matriculates into a degree program within five years of completing the courses.

UTSPH also provides graduate-level academic training and continuing education for professionals in government, business and the general community through its training centers and programs. Continuing education courses and professional training opportunities are available in public health practice, occupational & environmental health and biosecurity, emergency preparedness and health promotion through the following centers and programs, which are all housed in the school: Texas Public Health Training Center (TPHTC), Southwest Center for Occupational and Environmental Health (SWCOEH), Center for Emergency Research and the Continuing Education in Health Promotion Program.

The SWCOEH CE Program offers continuing education units at all training events. Most events include additional accreditation or approval for credit from external organizations. These include continuing medical education units from the American Association of Family Practitioners, maintenance of certification units from the American Board of Preventive Medicine and maintenance certification points from the American Board of Industrial Hygiene. In the last three years, the SWCOEH CE Program held 91 courses and trained 4,840 people.

In addition, the SWCOEH CE Program offers a non-academic certificate in industrial hygiene technician skills. This certificate program requires the completion of four CE courses: Fundamentals of Industrial Hygiene (20-hour core course), Industrial Hygiene Sampling (20-hour core course) and two elective courses. This program began in 2007 and requires formal application and admission. As of 2011, 19 people have entered the program and four have successfully completed the requirements and earned the certificate.

Two needs assessments were conducted by the TPHTC during the spring of 2011. The purpose was to assess public health practitioner training needs and preferences regarding course delivery methods. The first needs assessment included a survey that was widely disseminated to public health employers in HHS region six. This regional needs assessment was an on-line survey and allowed the identification of core public health knowledge needs as well as emerging areas identified by employers, eg, ergonomics and nanotechnology. TPHTC gets frequent e-mails and phone calls from the region six public health workforce and tracks all such requests. When a sufficient number of individual requests on a given topic have been received, the center makes efforts to provide training in the topical area of interest.

In addition to the survey, a number of focus groups were held at regional health departments. The focus groups indicated a need for workforce training in communication skills (written and oral), management and leadership, quality assurance and epidemiology.

Courses developed by PHTC network were shared with state and local health department employees at the Texas Public Health Educational conference. Management, leadership and communication courses, available through the Public Health Training Center network, are available online. Topics include program evaluation, Public Health 101, epidemiology, health literacy, environmental public health, Cultural Competency and Diversity 101, communication and health disparities. Monthly grand rounds, sponsored by the school and held at the Houston Health and Human Service Department, address emerging public health issues identified by public health practitioners.

Every continuing education program offering is evaluated via questionnaire, and the individual program or center providers use the data to improve their courses. These data are maintained by the individual program or center. When possible, impact surveys are completed three to six months after training.

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, research and teaching competence, and practice experience, is able to fully support the school's mission, goals and objectives.

This criterion is met. The full-time faculty, together with the adjunct, part-time and secondary appointment faculty, has extensive training and expertise in diverse disciplines and is eminently qualified to support the school's academic and professional programs and its research and service activities.

The self-study documents 151 tenured and tenure-track faculty primarily responsible for supporting the degree programs during the years covered in the self-study, with a FTE of 138.11. Tenured and tenure-track faculty are expected to contribute to the teaching, research and service activities of the school, whereas contract faculty serve under annual or multi-year contracts and may focus their efforts in a single area, eg, research or teaching. Ninety percent of the primary faculty are full-time, and 10% are part-time (.50 FTE or less). Upon hiring, UTSPH appoints faculty as tenure or non-tenure track. Of the 151 faculty, 70% are tenure track and 30% are non-tenure track; 42% have tenure.

Faculty are assigned to one of UTSPH's four divisions and six campuses located throughout the state of Texas. Division assignments are based on the faculty's area of expertise. UTHSC-H designates titles for its faculty positions that conform to those provided by the University of Texas System Board of Regents.

Full-time faculty are typically tenured or tenure-track and have an expected course workload of approximately one three-credit course per semester. Faculty are required to teach a minimum of 150 student credit hours per year, adjusted downward based on salary offset (usually based on research but also including administrative functions). A student credit hour is a combination of course credit hours

multiplied by the number of students in a class multiplied by the instructor's percent responsibility for the class. Part-time faculty and non-tenure track faculty members negotiate teaching loads with their division directors and regional deans. In the 2011 academic year, UTSPH had 267 adjunct, 27 cross-appointed and 10 emeritus faculty who are collectively designated "Without-Salary Appointments." The UTSPH director of academic affairs manages these appointments, and the UTHSC-H Office of Academic and Research Affairs oversees the faculty appointments at the institutional level.

Discussions with division directors and regional deans verified that they feel they have a highly qualified and dedicated faculty in the school. Faculty are hired based on qualifications and how well they are likely to enhance the ability of the school to meet current goals, but also with a focus on how they can promote greater prominence of the school in the future. Faculty are encouraged to be innovative in thinking about all aspects of their activities in teaching, research and service. Faculty who were interviewed felt very satisfied with the qualifications of those they worked with. The school is in the process of hiring several new faculty to build expertise in several areas and at the regional campuses. In the past it seems to have been difficult to attract faculty to the regional campuses because some did not have doctoral students, but now it seems to be an attractive option for many faculty, especially since a PhD in epidemiology is available at four regional campuses.

The school lists five outcome measures by which it evaluates the qualifications of its faculty and the integration of practice. These are: proportion of faculty who have at least three published books, book chapters or articles in peer-reviewed journals per year; percentage of faculty members with terminal degrees (eg, PhD, DrPH, MD) from an accredited university in the area of instruction for which the faculty member was hired; percentage of faculty members with past employment and/or practical experience in public health (non-academic jobs); percentage of faculty members who have provided service to the public health profession; and percentage of faculty members with graduate degrees from CEPH-accredited schools Progress toward meeting these outcome measures is very high, being close to the targets for each. Two of the outcome measures (proportion of faculty who have at least three published books, book chapters or articles in peer-reviewed journals per year and percentage of faculty members who have provided service to the public health profession) have targets of 100%. The team asked how realistic these targets were and was told they were considered realistic and attainable.

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. UTHSC-H has policies that outline faculty rules and regulations, including those that direct the faculty appointment, promotion and tenure process, review and assessment procedures and requirements for faculty leave procedures. In addition to the university policies, UTSPH developed Rules

for Faculty Governance, also referred to as Faculty Bylaws, in 2005 when the previous dean reorganized the former matrix system into the current divisional structure. More recently, the Faculty Council published a list of answers to “Frequently Asked Questions” about research, service and teaching. UTSPH provides a supportive environment for faculty and offers opportunities for professional development, including seed money for research, faculty mentoring, in-service and consultation for instructional development and teaching, and faculty development leave.

The success of a school's educational, research and service programs depends upon the quality of the faculty it is able to recruit and retain and upon opportunities for continued faculty development. It is the role and the responsibility of the dean to ensure efforts in these areas are successful. To achieve excellence, UTSPH believes that faculty should be fairly and periodically evaluated and rewarded for outstanding achievement based on performance expectations. The dean clearly supports the service mission of the school.

Faculty participate in an annual review with the division chair and an annual peer review process. Three- and six-year review processes are conducted with tenure-track faculty as a part of the tenure clock, which may be up to eight or nine years. Faculty feel satisfied with the tenure process; they feel well informed and supported in the process.

The UTSPH provides an incentive plan that awards a salary supplement to faculty based on research, teaching and service performance. Division directors, regional deans and faculty interviewed felt the incentive plan was fair and beneficial to promoting faculty development.

Students evaluate courses each semester and indicate whether the course helped them meet the learning objectives and competencies. Faculty members receive the course evaluations and can see the scores for their course compared with averages for other courses. Faculty report that the course evaluations are somewhat helpful.

Service is valued in the evaluation of faculty productivity and the school expects 100% of the faculty to engage in service. However, service is very broadly defined and can include combinations of professional and community service. It is clear that the administrators promote service activities and they, as well as the faculty, feel it is a significant factor in assessing faculty productivity. Community representatives were very positive about service provided by the school. It is clear that the scope of the school, with its regional campuses, provides significant service to much of the state.

4.3 Faculty and Staff Diversity.

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

This criterion is met with commentary. The school has developed a number of standardized approaches to attract and retain a diverse faculty and staff. They have developed a handbook, "*Recruiting a Diverse Workforce,*" which provides search committees with a set of best practices for conducting successful faculty and staff searches. The handbook provides guidance on current legal standards, federal standards and community concerns. The school follows the university's strict non-discrimination policies where violators can be given disciplinary sanctions including dismissal. The school also holds workshops and seminars designed to familiarize faculty, staff and school administrators with standards of practice with regard to creating a diverse workforce.

The faculty at the school is relatively diverse with 17 Latino and three African American faculty members. The gender distribution for assistant and associate professors shows a preponderance of female faculty members. Although the gender distribution at the rank of full professor shows a deficit of women, this appears to be a cohort phenomenon which should change over the next few years, as the current large number of female associate professors reach a stage in their careers where they are eligible for promotion to the rank of full professor.

The staff is extremely diverse with large numbers of women, Latinos and African Americans. The school also has an excellent faculty retention program which is tied to a performance bonus program for outstanding teaching and research.

The comment relates to the school's relatively recent adoption of new policies and procedures, other than those covering non-discrimination, that support a diverse faculty complement. These efforts were not yet implemented at the time of the site visit, but the school's response to the site visit team's report documented their implementation. School faculty and administrators recently developed and implemented a comprehensive strategy to ensure a diverse faculty complement; the school has successfully implemented new faculty search policies and practices, and the school has successfully recruited two new African American faculty members in the months between the site visit and the Council's review. . Also, the committee is looking into people with disabilities as a new segment of the population that needs to be considered in achieving diversity among the faculty and staff. The faculty agreed that they still have more work to do in strengthening their recruitment and retention programs aimed at increasing diversity, but the school has documented significant progress.

4.4 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. UTSPH is committed to recruiting a diverse and academically qualified student body. With six campuses throughout Texas, the school is able to target applicants in a range of geographic areas, including the Texas-Mexico border. The Office of Student Affairs coordinates student recruitment efforts and engages and trains faculty, students and staff in the recruitment process. Examples of Office of Student Affairs- sponsored activities include the following: an open house three times each year for prospective students, applicants and newly admitted students; campus visits for individuals and groups including meetings with faculty and students in the applicant's or new student's academic interest area; visits to undergraduate classes or UTHSC-H–based students groups in which faculty and student volunteers meet with student groups who wish to learn more about public health careers and UTSPH educational opportunities; follow up with prospective students with whom the Office of Student Affairs or UTSPH faculty and staff have interacted during recruiting events or at other venues; campus-specific participation in regional and statewide graduate school or career fair activities; networking events with colleges and universities located near or around each of the UTSPH campuses; and presentation of the dual degree (MD/MPH) to prospective incoming medical students during their medical school interviews. UTSPH recruitment efforts include the use of social media. The UTSPH launched a Facebook page, and some of the regional campuses have also launched campus-specific Facebook pages.

Total applications to UTSPH increased by 121% between academic years 2007 to 2010. In that same period, acceptances increased by 111%, and new enrollments increased by 102%. The percent of enrollments/acceptances were 55%, 54%, 52%, and 53% for 2007, 2008, 2009 and 2010, respectively. The yield, in terms of enrollments/acceptances did not vary significantly from 2007 to 2010, in spite of the increase in applications and acceptances over the reporting period. Total enrollment grew significantly with the fall 2011 term, when enrollment of degree-seeking students reached an all-time high (n=1226 total headcount full-time & part-time). This represented a 46.8% increase in enrollment from the fall 2008 term. The enrollment increase was observed across all programs, degrees, and campuses.

UTSPH has also deployed a new website geared toward student recruitment and academic support. Site visitors reviewed the new website and found it to be comprehensive and informative. Current students interviewed during the site visit were complimentary and stated the new webpage allows for easy access to program requirements, student information and access to program/school information.

UTSPH uses the centralized resources of the UTHSC-H Office of the Registrar's student information system to maintain demographic and admissions data. The UTSPH Office of Student Affairs receives and processes all applications ensuring applicants submit all documentation and meet minimum requirements.

Application processes are the same for part-time and full-time students. Admissions criteria for the UTSPH graduate programs include the following:

- A baccalaureate or advanced degree in an appropriate field (eg, MD, DDS, DO, PharmD, DVM) from a regionally accredited university or school.
- A minimum preferred GPA of 3.0 on a 4.0 scale.
- Completion of the Schools of Public Health Application Service application process (including corresponding fee) and, until this year, a UTHSC-H supplemental application.
- An essay or goal statement that describes the applicant's educational and career goals, health-related, research, community service and leadership experiences and interest in public health.
- Proficiency in basic mathematical or other quantitative skills documented in the applicant's transcripts or a statement that documents how this proficiency was achieved or will be achieved prior to enrollment.
- Two letters of recommendation from officials or faculty members of institutions previously attended who can attest to the applicant's academic or professional performance, ability, motivation, and character.
- Satisfactory results from the Graduate Record Examination (GRE) completed no more than five years prior to the application date. If the applicant has a doctoral degree in the health or social sciences area from an accredited U.S. or Canadian university, the GRE may be waived, following an assessment of the individual academic record.

Applicants from countries where English is not the parent language are required to score at least 565 (paper test), 225 (computer-based test), or 86 (Internet-based test) on the Test of English as Foreign Language. Further, applicants who hold degrees from institutions outside of the United States must submit their transcripts for an educational credential evaluation and determination of U.S. equivalency. Applicants may include published papers, reports, or other materials that may provide further information on the applicant's capability and performance. Candidates seeking admission to the UTSPH doctoral programs in health promotion and behavioral sciences must also submit a writing sample. Applicants to dual-degree programs apply to the UTSPH independently and are reviewed independently of the other degree. Dual degree program applicants use the online application form available through UTHSC-H Registrar's Office website. Their application review is the same as for applicants to other programs.

Admissions review at UTSPH evaluates applicant portfolios including quantitative metrics, such as GRE scores and GPAs, goal statement, letters of recommendation and prior life experiences. The qualitative elements carry a greater weight for those applicants who requested a waiver of the GRE requirement for having a doctorate from a US university or its equivalent (eg, eligible for licensure in medicine or dentistry).

Only complete applications, including official test score reports, letters of recommendation, and official transcripts, receive further consideration for admission. The admissions coordinator in the Office of Student Affairs receives and processes applications using the centralized Schools of Public Health Application Service application. The coordinator also uses a separate application from the UTHSC-H Office of the Registrar, but this process will soon convert to the Schools of Public Health Application Service solely.

The admissions coordinator forwards completed applications to the appropriate academic programs and campuses for review by program faculty. Depending on the program/campus, each application and supporting documentation is submitted to a triage committee (three to five faculty) or to a full faculty review. The faculty representative from each division and regional campus forwards the review recommendations to the UTSPH admissions committee, comprising one faculty representative from each division and regional campus. The faculty admissions representative serves a dual role in admissions and recruiting. After reviewing the recommendations, the committee may concur with the division/regional campus recommendation or may override it. The associate dean for student affairs, serving as a non-voting chair and as the dean's proxy, has final approval for all admissions decisions and signs and sends all official admissions decision letters.

The quantitative outcome measures for admitted and enrolled master's degree students were maintained in the face of the observed enrollment increase in 2011. The outcome measures for admitted and enrolled doctoral students increased by 9.4% and 10.7%, respectively, for verbal and quantitative GRE scores when comparing 2011 to 2008. These data demonstrate that the standards for admissions have been maintained, even with the increased volume of applications reviewed by the faculty and the admissions committee.

4.5 Student Diversity.

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

This criterion is met with commentary. The school has traditionally had a very diverse student population in terms of gender and underrepresented minority students. The percentage of underrepresented minority students has ranged from 20 to 49% between academic years 2008 and 2011. The school reached its target for this metric in three of these four years. International students have represented 19 to 31% of total student enrollment between academic years 2008 and 2011. The school also reached its target for this metric in three of these four years. Women made up 56% of the student body in 2010-2011. The school's associate dean for student affairs has been leading a committee charged with developing a school-wide student diversity plan. The group has already developed a number of operating principles for

the school that involve inclusivity, openness to and sharing of beliefs and the need to ensure diversity across the six campus locations.

The commentary relates to the fact that in 2011, the percentage of students from underrepresented minority groups has dropped to 20%. While this figure is still respectable, there is concern that this could represent the beginning of a serious downward trend. The school staff and faculty recognize the problem and feel that some of the problem is due to growing competition from the other regional schools, a reduction in student funding and a declining economy that has disproportionally affected underrepresented minority communities. The school is developing a strategy to take advantage of their regional campus network, where several campuses are located near these target communities.

4.6 Advising and Career Counseling.

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

This criterion is met. Student satisfaction data is detailed in a recent exit survey to which 175 students responded. Most students (≥88.4%) stated their advisors were readily accessible, provided appropriate guidance (≥93.3%) and understood their career goals (≥87.8%). Occasional criticism in these surveys related to specificity and consistency of advising. Since the survey, however, the school has implemented a number of changes and improvements in the advising structure intended to address student concerns.

Beginning in 2010, the school has used a centralized advising process at the division or regional campus level for entering master's degree students. Both DrPH and PhD students are assigned to an advisor prior to arrival on campus, but will identify additional advisors during or immediately after the qualifying exam. This change has been made in response to student progression and graduation rate concerns, and doctoral students report that this is a welcome change.

In interviews on site, students report satisfaction with the required semiannual committee advising meetings. This appears to be a good approach that adds a level of personalized plan of study for students at all levels.

The school offers career counseling services in various appropriate forms and has a career and alumni services coordinator in the Office of Student Affairs who provides guidance for students in their job search. The school also offers job skill and placement workshops. Alumni and current students are extremely appreciative of this service. The challenge, which the school has been attentive to meeting, is to continue offering similar quality and quantity of student services in all campuses.

The school has a number of channels that allow students to communicate grievances or concerns. The student handbook and campus website delineate the processes and responsible entities for registering concern related to matters from grades to problems with administrative processes, to abuse and discrimination. All of the bodies responsible for handling such concerns keep minutes. Since 2009, 44 individual requests have been received and attended; most addressed relatively minor issues.

Agenda

Council on Education for Public Health
Accreditation Site Visit

University of Texas Health Science Center at Houston
School of Public Health

February 27 to 29, 2012

Monday, February 27, 2012

8:20 am — Breakfast at UTSPH and Resource File Review

8:45 am — Site Visit Team Request for Agenda Revisions or Additional Documents

9:00 am — Meeting with School Leadership
Dean Roberta B. Ness, MD, MPH, M. David Low Chair in Public Health

Associate Deans:
L. Kay Bartholomew, EdD, MPH, Associate Professor, Division of Health Promotion & Behavioral Sciences, Associate Dean of Academic Affairs, and Co-Chair, Academic Council
David Carnahan, MBA, Associate Dean of Management
Linda E. Lloyd, PhD, Associate Professor, Division of Management, Policy and Community Health, Associate Dean of Public Health Practice, and Co-Chair, Practice Council
Laura Mitchell, PhD, Professor, Division of Epidemiology, Human Genetics & Environmental Sciences and Associate Dean for Research
Mary Ann Smith, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences and Associate Dean of Student Affairs

Regional Deans:
Cheryl Perry, PhD, Regional Dean, Austin Regional Campus, Professor, Division of Health Promotion and Behavioral Sciences, Rockwell Distinguished Chair
Joseph B. McCormick, MD, Regional Dean, Brownsville Regional Campus, and James H. Steele Professor, Division of Epidemiology, Human Genetics and Environmental Sciences
Raul Caetano, MD, MPH, PhD, Regional Dean, Dallas Regional Campus and Professor, Division of Epidemiology, Human Genetics and Environmental Sciences
Hector Balcazar, PhD, Regional Dean, El Paso Regional Campus and Professor, Epidemiology, Human Genetics and Environmental Sciences
Sharon P. Cooper, PhD, Regional Dean, San Antonio Regional Campus and Professor, Epidemiology, Human Genetics and Environmental Sciences

Division Directors:
Barbara Tilley, PhD, Lorne Bain Professor and Director, Division of Biostatistics
Eric Boerwinkle PhD, Professor and Director, Division of Epidemiology, Human Genetics and Environmental Science, Kozmetsky Family Chair in Human Genetics
Kristina Mena, PhD, Associate Professor, Division of Epidemiology, Human Genetics and Environmental Sciences and Program Manager, Environmental Health Sciences
Sally W. Vernon, PhD, Blair Justice Professor in Mind Body Medicine and Public Health, and Director, Division of Health Promotion and Behavioral Sciences
Luisa Franzini, PhD, Professor and Director, Division of Management, Policy and Community Health

10:15 am — Break

10:30 am — Meeting with Core Strategic Planning Group and Leadership of Strategic Initiatives
Roberta B. Ness, MD, MPH, Dean, M. David Lowe Chair in Public Health
L. Kay Bartholomew, EdD, MPH, Associate Professor, Division of Health Promotion & Behavioral Sciences, Associate Dean of Academic Affairs, and Co-Chair, Academic Council
David Carnahan, MBA, Associate Dean of Management
Linda E. Lloyd, PhD, MBA, Associate Professor, Division of Management, Policy and Community Health, Associate Dean of Public Health Practice, and Co-Chair, Practice Council
Patricia Dolan Mullen, DrPH, Professor, Division of Health Promotion and Behavioral Sciences; Chair of Faculty Council
Cheryl Perry, PhD, Regional Dean, Austin Regional Campus, Professor, Division of Health Promotion and Behavioral Sciences, Rockwell Distinguished Chair
Mary Ann Smith, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences and Associate Dean of Student Affairs
Barbara Tilley, PhD, Lorne Bain Professor and Director, Division of Biostatistics

11:30 am Break

12:00 pm Lunch with Academics and Curriculum Representatives: Instructional Programs – Master's Degrees
L. Kay Bartholomew, EdD, MPH, Associate Professor, Health Promotion & Behavioral Sciences, Associate Dean of Academic Affairs, and Co-Chair, Academic Council
Liz Gammon, PhD, Associate Professor, Division of Management, Policy and Community Health and Chair, School-wide Curriculum Committee
Linda E. Lloyd, PhD, Associate Professor, Division of Management, Policy and Community Health, Associate Dean of Public Health Practice, and Co-Chair, Practice Council
Robert Morgan, PhD, Professor Division of Management, Policy and Community Health; Co-Chair, Academic Council
Jennifer Salinas, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences
Elaine Symanski, PhD, Associate Professor, Division of Epidemiology, Human Genetics & Environmental Sciences; and Director, Southwest Center for Occupational and Environmental Health
Lawrence W. Whitehead, PhD, Associate Professor, Division of Epidemiology, Human Genetics & Environmental Sciences; Member of Academic Council

1:15 pm Break

1:30 pm Meeting with Faculty: Instructional Programs – Doctoral Degrees
L. Kay Bartholomew, EdD, MPH, Associate Professor, Health Promotion & Behavioral Sciences, Associate Dean of Academic Affairs, and Co-Chair, Academic Council
Linda E. Lloyd, PhD, Associate Professor, Division of Management, Policy and Community Health, Associate Dean of Public Health Practice, and Co-Chair, Practice Council
Robert Morgan, PhD, Professor Division of Management, Policy and Community Health; Co-Chair, Academic Council
Patricia Dolan Mullen, DrPH, Professor, Division of Health Promotion and Behavioral Sciences; Chair of Faculty Council
Melissa Stigler, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences Austin Regional Campus
Barbara Tilley, PhD, Lorne Bain Professor and Director, Division of Biostatistics
Lawrence W. Whitehead, PhD, Associate Professor, Division of Epidemiology, Human Genetics & Environmental Sciences; Member of Academic Council

2:30 pm Break

3:00 pm Meeting with Students
Ryan Arnold, MPH Candidate, Division of Management, Policy and Community Health and Executive Director, UT School of Public Health Student Association
Natarsha Horton, MPH Candidate, Division of Epidemiology, Human Genetics & Environmental Sciences
Angela Lloyd, MSPH, MEd, DrPh Candidate, Division of Management, Policy and Community Health
Edwin M. Machine, MPH, DrPH Candidate, Division of Management, Policy and Community Health
Carmen Elisa Ochoa- Paniagua, MPH Candidate, Maternal and Child Health Fellowship, Dallas Regional Campus
Tim Read, MS, PhD Candidate, Division of Epidemiology, Human Genetics & Environmental Sciences

4:15 pm Review of Resource File

5:30 pm Adjourn to Dinner and Executive Session

Tuesday, February 28, 2012

8:00 am Breakfast with Leadership of the University
Giuseppe Colasurdo, MD, Interim President, The University of Texas Health Science Center at Houston, and Dean, The University of Texas Medical School at Houston
Kevin Dillon, Senior Vice President and Chief Operating Officer, The University of Texas Health Science Center at Houston
George M. Stancel, PhD., Dean, Graduate School of Biomedical Sciences and
Executive Vice President for Academic and Research Affairs, The University of Texas Health Science Center at Houston
Roberta B. Ness, MD, MPH, Dean, The University of Texas School of Public Health
David Carnahan, MBA, Associate Dean of Management

8:45 am Break

9:00 am Meeting with Faculty: Research, Service and Workforce Development
Laura Mitchell, PhD, Professor of Epidemiology, Human Genetics & Environmental Sciences and Associate Dean for Research

Eric Boerwinkle PhD, Professor and Director, Division of Epidemiology, Human Genetics and Environmental Science, Kozmetsky Family Chair in Human Genetics
Raul Caetano, MD, MPH, PhD, Regional Dean, Dallas Regional Campus and Professor, Division of Epidemiology, Human Genetics and Environmental Sciences
Susan R. Tortolero, PhD, Associate Professor, Division of Health Promotion and Behavioral Sciences, and Director, Center for Health Promotion and Prevention Research

10:15 am — Break

10: 30 am — Meeting with Faculty and Staff: Research, Service and Workforce Development
Margaret O. Caughy, ScD, Associate Professor, Division of Health Promotion and Behavioral Sciences, and Faculty Coordinator, Maternal and Child Health Certificate Program
Robert Emery, DrPH Associate Professor of Occupational Health, Division of Epidemiology, Human Genetics & Environmental Sciences, and Vice President Safety, Health, Environment and Risk Management, UTHSC-H
Patricia Dolan Mullen, DrPH, Professor, Division of Health Promotion and Behavioral Sciences; Chair of Faculty Council
Belinda Reininger, DrPH, Associate Professor, Division of Health Promotion and Behavioral Sciences; Co-Chair of Practice Council
Janelle Rios, PhD, Division of Epidemiology, Human Genetics & Environmental Sciences, Director of Continuing Education & Outreach Specialist
Elaine Symanski, PhD, Associate Professor, Division of Epidemiology, Human Genetics & Environmental Sciences; and Director, Southwest Center for Occupational and Environmental Health

11:30 am — Break

12:00 pm — Lunch with Alumni
Catherine Cooksley, DrPH, Senior Biostatistician, The University of Texas Medical Branch at Galveston
Rick Danko, DrPH, Director of Academic Linkages, Texas Department of State Health Services
Larissa Estes, DrPH, UTSPH Alumni
Dennis Li, MPH, UTSPH Alumni
Jane Montealegre, MSPH, PhD, Division of Epidemiology and Disease Control
Monica Rasmus, DrPH, Texas Southern University, and President, UTSPH Alumni Association

12:45 pm — Break

1:00 pm — Meeting with Junior Faculty from Across the School
Jami DelliFraine, PhD, Assistant Professor, Houston Campus, Division of Management, Policy and Community Health
David Douphrate, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences, San Antonio Regional Campus
Jennifer Nettleton, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences, Houston Campus
Andrew E. Springer, DrPH, Assistant Professor, Division of Health Promotion and Behavioral Sciences, Austin Regional Campus
Michael Swartz, PhD, Assistant Professor, Division of Biostatistics, Houston Campus
Chu-Lin Tsai, MD, ScD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences, Houston Campus

2:00 pm — Break

2:15 pm — Meeting with Leadership related to Faculty and Staff
Benjamin C. Amick, PhD, Professor, Division of Health Promotion & Behavioral Sciences, and Past Chair 2009-2010, Faculty Council
Rebecca Shon Bower, Communications, Office of the Dean
David Carnahan, MBA, Associate Dean for Management, UTSPH
Ebbin Dotson, PhD, Assistant Professor, Division of Management, Policy and Community Health and Member, Faculty Diversity Committee
Patricia Dolan Mullen, DrPH, Professor, Division of Health Promotion and Behavioral Sciences; Chair of Faculty Council and Chair of the Faculty Diversity Committee
Tracie Pape, Executive Services Administrator, Office of the Dean

2:45 pm — Break

3:00 pm — Meeting with Leadership related to Admissions, Diversity, Student Affairs, & Career Services
Mary Ann Smith, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences and Associate Dean of Student Affairs
Anne Baronitis,MEd, Director of Student Affairs
Maria E. Fernandez, PhD, Associate Professor Division of Health Promotion & Behavioral Sciences, and Director of Diversity Programs

Kelley Gabriel, PhD, Assistant Professor, Division of Epidemiology, Human Genetics & Environmental Sciences and Member, Admissions Committee/Austin Regional Campus
Wendell Taylor, PhD, Associate Professor, Division of Health Promotion & Behavioral Sciences and Member, Admissions Committee
Tiaresa Carter, Coordinator of Admissions, Office of Student Affairs

4:15 pm Break

4:30 pm Meeting with Community Partners
Meryl Cohen, MEd, LCSW, Vice President for Education, Planned Parenthood
Rick Danko, DrPH, Director of Academic Linkages, Texas Department of State Health Services
Linda Forys, EdM, CHES, Director, Health Education and Promotion Division, Harris County Public Health and Environmental Services
Adela N. Gonzalez, PhD, MPA, Executive Director, Center for South TX Programs and South TX AHEC, The University of Texas Health Science Center at San Antonio
Kimberly Kay Lopez, DrPH, Director, Connect to Protect, Partnerships for Youth Prevention Interventions Department of Pediatrics-Retrovirology Baylor International Pediatric AIDS Initiative
Stephen Williams, MEd, MPA, Director, Houston Department of Health and Human Services

5:30 pm Adjourn to Dinner and Executive Session

Wednesday, February 29, 2012

9:45 am Executive Session

12:00 pm Working Lunch in Executive Session

1:30 pm Exit Interview