REVIEW FOR ACCREDITATION
OF THE
COLLEGE FOR PUBLIC HEALTH AND SOCIAL JUSTICE
AT
SAINT LOUIS UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
September 16-18, 2015

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the College for Public Health and Social Justice (CPHSJ) at Saint Louis University (SLU). The report assesses the college’s compliance with the Accreditation Criteria for Schools of Public Health (SPH), amended June 2011 (Criteria 1.1-2.8 and 2.10-4.4) and the Accreditation Criteria for Standalone Baccalaureate Programs, amended June 2014 (Criterion 4.0, whose requirements appear in place of SPH Criterion 2.9). The college chose to use these criteria at the beginning of the review process. This accreditation review included the conduct of a self-study process by college constituents, the preparation of a document describing the college and its features in relation to the criteria for accreditation and a visit in September 2015 by a team of external peer reviewers. During the visit, the team had an opportunity to interview college and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the college and verify the self-study document.

Established in 1818, Saint Louis University is the oldest university west of the Mississippi and the second oldest Jesuit University in the United States. It enrolls more than 13,500 students and employs over 3,000 faculty members. The university offers nearly 100 undergraduate majors and close to 80 graduate programs. Four university-wide academic centers focus on advanced dental education, health care ethics, outcomes research and sustainability. SLU is organized into 12 colleges and schools in the following disciplines: arts and sciences, business, education and public service, engineering, aviation and technology, allied health sciences, law, medicine, nursing, philosophy and letters, professional studies, public health and social justice.

Beginning with a Master of Public Health (MPH) program in 1983, the School of Public Health was established in 1990. In July 2013, the SPH and the School of Social Work (SSW) combined to form the College for Public Health and Social Justice, a move consistent with the university’s Jesuit history and values. The college is home to five departments in the core areas of public health: behavioral science and health education, health management and policy, epidemiology, environmental and occupational health and biostatistics. The school of social work functions as a single unit in the college, with a director who reports to the dean. The Institute for Biosecurity, the Center for Cancer Prevention and Outreach, the Institute for Global Health and Wellbeing, the Center for Environmental Education and Training and the Heartland Centers also report to the CPHSJ.

Initially accredited by CEPH in 1983 as a community health/preventive medicine program, the CPHSJ was last reviewed in 2008 and was awarded an accreditation term of seven years. Since that review, the college has submitted interim reports related to its planning and evaluation procedures, faculty resources, diversity, competencies and assessment procedures. The Council accepted the interim reports as evidence of compliance with the relevant criteria. Since its last review, the college also submitted a number of
substantive change notices related to governance, organizational structure and the addition of new curricular offerings.
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 College for Public Health and Social Justice. The college is located in a regionally accredited university and has the same rights and privileges as other professional schools on campus. The college has a planning and evaluation process that is inclusive, timely and focused on public health research, teaching and service.

Faculty are trained in a variety of disciplines, and the college’s environment supports interdisciplinary collaboration. Faculty and student connections with public health practitioners and local community members ensure that the college fosters the development of professional public health concepts and values. The college has a clearly defined mission with supporting goals and objectives.

The college has adequate resources to offer the MPH degree in the five core areas of public health knowledge and doctoral degrees in at least three areas. The college offers additional master’s and doctoral degrees in areas such as biosecurity and disaster preparedness, global health and maternal and child
health. It also offers the MPH in a joint format with programs such as law, medicine, business, social work and psychology.

### 1.0 THE SCHOOL OF PUBLIC HEALTH.

#### 1.1 Mission.

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

This criterion is met. The college has a clearly formulated and publicly stated mission with supporting goals, objectives and values.

The college’s mission is based on its commitment to serving others: to “improve health and well-being locally, nationally and internationally through unique interdisciplinary approaches that inspire students, generate knowledge and engage individuals and communities.” The college’s vision statement complements and supports its mission: strive for excellence in scholarship through nationally and internationally recognized performance in teaching, research and service. The four key tenets of the college are collaboration, innovation, justice and practice. Nine overarching goals relate to instruction, research, service and diversity. Each goal is linked to one to six measurable objectives, the majority of which are defined by quantifiable targets. Many are aligned with multiple, more precise indicators. The mission, goals and objectives are posted on the CPHSJ website.

The strategic plan was developed through a collaborative process involving workgroups and committees of faculty, staff, administrators and alumni. Although student involvement was limited, college administrators identified student engagement as a priority. They also described strategic planning as a very unifying process, which solidified the merge between its public health and social work units. In spring 2015, the college published its final iteration of the strategic plan. One to four strategic areas are scheduled to be reviewed by the Leadership Committee every month to ensure relevance and appropriateness.

#### 1.2 Evaluation and Planning.

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

This criterion is met with commentary. The college has established protocols for monitoring and evaluating its progress toward achieving its mission and goals.

The self-study outlines the processes the college uses to measure its success, including data sources and responsible parties. The associate dean for academic affairs, for example, monitors student course
evaluation scores. The associate dean for research tracks the percentage of peer-reviewed publications. Data are reported to the Leadership Committee twice each year and corrective action is taken where needed.

The self-study presents measurement data for the last three academic years. Several objectives have been achieved or are close to being achieved. Timelines associated with these objectives extend through 2017.

The college engaged in an inclusive self-study process. The associate deans for academic affairs and research, along with support staff, led the effort. The planning team was also comprised of the director of student services, the MPH coordinator, a former business manager, the assistant dean for finance and administration, the associate dean for public health practice and several PhD and undergraduate program directors. Faculty and staff were involved in the data gathering and writing process. Alumni, students and community representatives were asked to review specific sections. The document was posted to the CPHSJ website, along with a public invitation to submit third-party comments.

The commentary relates to the implementation of the college’s evaluation procedures. Related assessments and monitoring activities have not occurred regularly or consistently. The Leadership Committee is committed to building a culture of evaluation in which the college regularly reviews and uses data for quality improvement and decision making. To this end, the academic and research associate deans are developing annual reports of their committees’ activities to present to the entire college. Many of the academic programs are beginning to develop annual reports and/or are providing updates on key indicators, such as admissions, average student GPAs, internship reports, etc. Lastly, the college is beginning to regularly report data it routinely collects and is broadening the groups with whom this data is shared so that more faculty and staff are aware of the indicators being tracked.

### 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. Saint Louis University has been accredited by the Higher Learning Commission in the North Central region and has maintained this accreditation since 1916; the most recent review for re-accreditation occurred in 2011 and resulted in a 10-year term. The university responds to more than 30 specialized accrediting agencies in fields such as engineering, psychology, social work, nursing and medicine.

The university is organized into 12 schools and colleges dedicated to the arts and sciences, business, education and public service, engineering, aviation and technology, allied health sciences, law, medicine, nursing, philosophy, professional studies, public health and social justice. Four academic centers focus on advanced dental education, healthcare ethics, outcomes research and sustainability. All deans report
The president and provost agreed that the college plays a critical role in the institution and expressed their staunch commitment to supporting interdisciplinary collaboration on campus and across all sectors.

1.4 Organization and Administration.

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

This criterion is met. The college maintains an organizational structure with clear lines of authority and responsibility.

The CPHSJ is the result of a recent merge between the schools of public health and social work. Constituents who met with site visitors were very positive about and supportive of the move, though it was clear that the transition did not come without its share of challenges—particularly those related to the physical distance between the two schools and the length of time it takes for policies to be vetted and approved. The college has made great progress in adjusting and adapting to this change, despite its challenges.

The college is home to five departments in the core areas of public health: behavioral science and health education, health management and policy, epidemiology, environmental and occupational health and biostatistics. The school of social work functions as a single unit in the college, with a director who reports to the dean. The Institute for Biosecurity, the Center for Cancer Prevention and Outreach, the Institute for Global Health and Wellbeing, the Center for Environmental Education and Training and the Heartland Centers are also associated with the CPHSJ. The department chairs and the SSW director report to the dean. Center directors report to the respective department chairs. Faculty are hired through a department and report to a department chair.
The interim dean serves as chief academic and administrative officer for the college. The college has hired a new dean to assume the permanent dean position in January 2016. The structure of associate and assistant deans is typical of what would be expected in a school of public health with associate deans for academic affairs, research, and public health practice and an assistant dean for finance and administration. Roles and responsibilities program directors for academic programs, institutes and centers are clearly identified and appear sufficient to meet the college’s needs.

The very nature of the college, a merge between public health and social work, is conducive to interdisciplinary learning, research and service. Faculty regularly invite external faculty members and community partners to serve as guest lecturers. Co-teaching occurs as desired by the faculty and is supported by the college. The newly revised PUBH 5010 Mission and Practice of Global Public Health was developed by five faculty with substantial public health and social work practice experience. The college also offers a wide variety of joint degree programs with other academic units at SLU. Faculty and staff sit on committees across the university. The CPHSJ has been a leader in the development of the North St. Louis Initiative, a project that brings together faculty from across the campus in an attempt to better coordinate service projects in the metropolitan area.

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 college exhibits a solid governance structure, with clearly defined roles and responsibilities, and allows for the involvement of faculty, staff, students, alumni and community partners in its daily operations.

Nearly 15 standing committees participate in policy development and decision-making, planning and evaluation, budget and resource allocation, student recruitment and admissions and/or curriculum development. The CPHSJ uses a collaborative model of governance, designed to give faculty ample opportunity for input while not burdening them with time consuming administrative commitments. Faculty, staff and community representatives verified that they were involved in governance activities and had the opportunity to provide input on decision-making and future planning. Students have participatory roles in the conduct of school and program evaluation procedures, policy setting and decision making, though several student positions were unassigned at the time of the site visit.

The Leadership Committee is the main policymaking body. Chaired by the dean, the committee proposes new strategies and initiatives, reviews and advises the dean on annual operating budgets and monitors
progress toward the achievement of the college’s goals and objectives. Membership includes several chairs and program directors, the faculty assembly president and a staff representative.

The Academic Affairs Committee reviews, approves and supports the development of all academic innovations. Membership includes the associate dean for academic affairs, a number of program directors and department chairs, the director of student services, three internship coordinators and a student.

The Promotion and Tenure Committees evaluate promotions and recommendations for tenure, conduct midterm faculty reviews and formulate related policies and procedures. Membership is limited to full-time tenured faculty members.

The Undergraduate Coordinating Committee develops, monitors, and modifies undergraduate policies and procedures and nurtures the relationship between undergraduate and graduate programs. The associate dean for academic affairs, three program directors, a senior staff advisor and two administrative assistants serve on the committee.

The Teaching Committee provides an environment for transformative learning that embodies the traditional strengths of Jesuit education while adapting the most current pedagogical concepts and technologies. Membership includes the associate dean for academic affairs and other faculty, staff and student representatives.

The Research Advisory Council supports faculty and student research, including translational and collaborative research efforts. Membership includes the associate dean for research, the director of research services and faculty representatives from each department.

The Diversity Committee provides individuals of all backgrounds with a culturally-relevant academic experience in a welcoming and inclusive culture. Faculty, staff, students and an alumnus/community representative serve on the committee.

The Faculty Assembly gives voice to faculty positions and concerns, promotes their interests and actively participates in policy formulation. All faculty are members of this committee. Similarly, the Staff Assembly advocates for staff interests, contributes to an effective workplace and supports community engagement, both internally and externally. All staff are voting members.

Department- and program-specific committees engage in admissions and curriculum development activities. Membership includes faculty, program directors and students. Faculty who met with site visitors
appreciated the spirit of shared governance and its “purposefully transparent” committee structure. Community representatives also stated that their feedback was welcomed and very well received.

Site visitors noted the limited involvement of external stakeholders in a formal capacity. At the time of the site visit, the Diversity Committee was the only standing committee on which a community representative served. In response to this deficit, the college is planning to establish a Community Advisory Board through the Office of Public Health Practice. In the meantime, the college receives considerable input from the community, though informal, at the degree program and faculty levels.

In addition to supporting the governance of the college, over 30 faculty members hold appointments on at least one university-level committee, through which they contribute to the activities of the institution at large. Over 30 university committees include public health faculty and over 15 committees include SSW representation.

Students serve as active members on several of the aforementioned standing committees, though some seats first opened up for students in fall 2015. Students also have the opportunity to participate in governance through a variety of formal student organizations, including the Student Association for Public Health (SAPH) and the Public Health Club (PHC). SAPH provides a forum for students to organize and pursue common goals and interests in the following areas: scholarship, service, professional development, program improvement and student life. PHC collaborates with other organizations to plan National Public Health Week (NPHW) activities and connect students to professional development resources. Other student groups with more specific interests host fundraisers, group exercises, guest lectures, panel discussions about relevant issues and other social events. Several students who met with the site visit team currently or previously served in one or more student organizations. They expressed satisfaction with their level of involvement and indicated that the college is receptive and responsive to their feedback and suggestions.

1.6 Fiscal Resources.

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

This criterion is met. The college currently has sufficient resources to fulfill its mission. The budget is based primarily based on tuition revenue, with relatively modest income from external funds, including grants and contracts, training and professional education and other designated revenue. The college’s funds and expenditures are shown in Table 1, below.

There was a major shift in sources of revenue since the last accreditation review—from primary reliance on grants and contracts (74%) to reliance on tuition (90% in FY2015). This was largely due to the loss of a core group of faculty with significant grant support. The college has created new educational programs at
both the graduate and baccalaureate levels that provide a solid basis for tuition revenue. The university supported the college as it added new degree programs, with resultant increases in faculty and staff positions and an increase in general expenses. In addition, the merging of the SPH and the SSW into the CPHSJ doubled the tuition revenues of the academic unit and increased its profit margin.

The university currently provides approximately 95% of full-time faculty salaries, compared to 63% at the time of the last site visit. The university also provides 100% support for staff, new faculty positions and salary increases for faculty and staff according to the university’s annual cost of living and merit pool.

The college receives a portion of the extramural revenue it generates to spend on operational expenses, though site visitors’ discussion with college leaders indicated there is no set formula for this determination. A budget is determined by the college based primarily on enrollment projections and other anticipated revenue income. The university centrally manages certain significant expenses, including undergraduate financial aid and instructional costs for courses taken outside of the college, as well as overhead costs. Although the operational surplus reflected in Table 1 seems to indicate disproportionate growth over the past few years, this is not a complete picture of the financial situation as the university’s budget model excludes two key direct expenses related to undergraduate education (undergraduate financial aid and courses taken by undergraduate students outside of the college). As illustrated in the self-study report, the university business and finance office adjusts for the impact of these expenses.

Measurable objectives for faculty salary recovery from extramural funds, total revenue from extramural funds, percent revenue from tuition, growth in full-time equivalent (FTE) students and percent growth in annual fund giving were provided as outcome measures. The self-study noted that there is a need for a plan that will shift proportions from tuition-based revenue to extramural funding, in order to meet the research- and program-specific targets. Some indication of the degree to which goals are met across faculty, rather than just a few faculty, would be beneficial, given that several junior faculty have been hired recently and some with more advanced careers in research have retired or left. A new faculty mentoring program is intended to foster the successful pursuit of extramural funding from foundations as well as traditional governmental sources. This program holds promise for building capacity in this important area.
**Table 1. Sources of Funds and Expenditures by Major Category, Fiscal Years 2008-2015**

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Tuition &amp; Fees</td>
<td>$4,307,985</td>
<td>$3,867,504</td>
<td>$4,961,072</td>
<td>$7,682,736</td>
<td>$10,612,685</td>
<td>$13,893,162</td>
<td>$28,298,818</td>
<td>$31,064,758</td>
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<tr>
<td>Grants &amp; Contracts (Direct)</td>
<td>$10,904,212</td>
<td>$6,952,784</td>
<td>$6,051,106</td>
<td>$6,191,831</td>
<td>$9,348,879</td>
<td>$4,376,586</td>
<td>$2,663,917</td>
<td>$1,873,521</td>
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<tr>
<td>Indirect Cost Recovery – Retained by the college, departments &amp; PIs</td>
<td>$270,099</td>
<td>$690,981</td>
<td>$162,410</td>
<td>$239,463</td>
<td>$280,859</td>
<td>$50,083</td>
<td>$127,086</td>
<td>$75,717</td>
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<tr>
<td>Indirect Cost Recovery – Retained by the university</td>
<td>$2,512,709</td>
<td>$454,783</td>
<td>$778,169</td>
<td>$708,899</td>
<td>$902,544</td>
<td>$2,663,917</td>
<td>$1,873,521</td>
<td>$293,724</td>
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<tr>
<td>Training &amp; Continuing Education Program Revenue</td>
<td>$349,930</td>
<td>$421,578</td>
<td>$392,601</td>
<td>$248,635</td>
<td>$273,998</td>
<td>$571,045</td>
<td>$544,211</td>
<td>$495,713</td>
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<td>Other Designated Revenue 1</td>
<td>$61,597</td>
<td>$64,368</td>
<td>$112,407</td>
<td>$104,907</td>
<td>$127,586</td>
<td>$131,351</td>
<td>$474,386</td>
<td>$495,713</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$18,406,532</strong></td>
<td><strong>$12,451,998</strong></td>
<td><strong>$12,457,765</strong></td>
<td><strong>$15,176,471</strong></td>
<td><strong>$21,546,551</strong></td>
<td><strong>$19,762,823</strong></td>
<td><strong>$32,457,617</strong></td>
<td><strong>$34,273,262</strong></td>
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</tr>
</thead>
<tbody>
<tr>
<td>Faculty Salaries &amp; Benefits</td>
<td>$2,637,401</td>
<td>$3,198,687</td>
<td>$3,722,857</td>
<td>$3,890,432</td>
<td>$5,714,275</td>
<td>$6,149,260</td>
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<td>Staff Salaries &amp; Benefits</td>
<td>$1,121,137</td>
<td>$984,332</td>
<td>$973,421</td>
<td>$1,650,663</td>
<td>$1,839,701</td>
<td>$2,268,334</td>
<td>$3,032,001</td>
<td>$3,144,387</td>
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<td>Graduate Assistants &amp; Student Workers</td>
<td>$17,565</td>
<td>$25,955</td>
<td>$46,815</td>
<td>$443,807</td>
<td>$528,848</td>
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<td>Graduate Financial Aid</td>
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<td>$707,822</td>
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<td>$1,708,250</td>
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<tr>
<td>Operations</td>
<td>$37,331</td>
<td>$103,269</td>
<td>$137,944</td>
<td>$364,955</td>
<td>$697,251</td>
<td>$509,437</td>
<td>$890,766</td>
<td>$782,451</td>
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<tr>
<td>Grants &amp; Contracts (Direct Expenses)</td>
<td>$10,975,155</td>
<td>$7,069,566</td>
<td>$6,051,106</td>
<td>$6,192,955</td>
<td>$9,349,879</td>
<td>$4,376,586</td>
<td>$2,663,686</td>
<td>$1,873,521</td>
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<tr>
<td>Training &amp; Continuing Education Program Expenses</td>
<td>$462,002</td>
<td>$425,071</td>
<td>$329,707</td>
<td>$310,937</td>
<td>$286,547</td>
<td>$465,751</td>
<td>$456,349</td>
<td>$490,513</td>
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<td>Other Designated Expenses 2</td>
<td>$913,733</td>
<td>$1,079,216</td>
<td>$889,545</td>
<td>$542,106</td>
<td>$16,446</td>
<td>$67,877</td>
<td>$137,382</td>
<td>$412,906</td>
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<tr>
<td><strong>Total</strong></td>
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<td><strong>$13,679,842</strong></td>
<td><strong>$13,062,162</strong></td>
<td><strong>$14,101,614</strong></td>
<td><strong>$19,140,769</strong></td>
<td><strong>$15,288,394</strong></td>
<td><strong>$19,908,821</strong></td>
<td><strong>$20,036,321</strong></td>
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</tbody>
</table>

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1 Other designated revenues include student organization fees and fundraising, development funds and internal research programs (e.g., Presidential Research Funding).

2 Other designated expenses come from indirect cost recovery from grants and contracts, start-up funding for new faculty, student organization operating expenses, the Dean’s fund, internal research program funds and development funds.
1.7 Faculty and Other Resources.

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

This criterion is met. The college has sufficient human resources and facilities to offer several bachelor’s degrees and a range of master’s and doctoral degrees in all five core knowledge areas.

The updated tables provided on site show a steady increase in the number of primary faculty over the last four years. At the time of the site visit, the college employed over 76 primary faculty and more than 67 secondary faculty. Each core knowledge area is supported by six to 17 full-time faculty members. Forty of these individuals also teach undergraduate courses. Two faculty members are solely dedicated to the undergraduate program. On-site discussion with program administrators indicated that two biostatistics faculty positions are in the process of being filled; interviews are underway. Graduate student-faculty ratios, based on total faculty FTE, range from 4.4:1 to 8.0:1. With the exception of the health management and policy department (11.6:1), student-faculty ratios based on primary faculty FTE do not exceed 10:1. When the support of designated graduate faculty is taken into account, undergraduate student-faculty ratios range from 17:1 to 30:1.

Student-faculty ratios adequately allow for meaningful faculty and student interactions at both the graduate and undergraduate levels. Students who met with the site visit team appreciated the accessibility and availability of their professors. Care is needed, however, to ensure that if growth continues, particularly in health management and policy programs, a sufficient number of faculty are available.

Faculty support is supplemented by more than 46 part-time and full-time staff members. Each department, office and division is assigned between one to six staff. The number of staff members to support the college is robust. In response to increases in student enrollment and tuition revenue, administrative staff support for many offices has increased over the last few years. Research support staff, however, has decreased significantly due to declining extramural funding.

The space available for the college includes two primary buildings: Tegeler Hall, which primarily serves the undergraduate and social work programs, and the Salus Center, which primarily serves the public health programs and houses faculty and administrative offices, classrooms, auditoriums, computer labs, conference rooms and student space. Classrooms, auditoriums, and conference rooms are equipped with fully integrated digital presentation systems and video conferencing technology to support collaboration, distance learning and lecture capture. The environmental and occupational health department shares one wet lab with the medical school. Discussions with the faculty and students indicate the need for additional space in Tegeler Hall for faculty to meet regularly with undergraduate students, as it is challenging for those students to commute to the Salus Center.
Computer facilities appear adequate to serve the college’s community of faculty, students and staff. Each faculty member has either a desktop or laptop computer and access to a printer. There are also computer labs in each of the two primary buildings for student use. The university houses a multimedia lab for printing large posters and graphic printouts, as well as a Geographic Information System Lab for analyzing spatial data. Students, staff and faculty have access to a computer network, and both internet and intranet access, with wireless connection across campus.

Library resources are adequate, with access to three SLU libraries, 24/7 access to electronic journals and online resources both on- and off-campus, as well as an integrated library system with access to over 14 million volumes and 42 million titles. Each building is served by a Liaison Librarian, and weekly on-site reference services are provided in the Salus Center.

1.8 Diversity.

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

This criterion is met. The college has made significant strides in cultivating diversity and cultural competence among its faculty, staff and students.

In alignment with the university’s strategic plan and the demographic profile of St. Louis, the college identifies African Americans, Latinos and international individuals as underrepresented among its faculty, staff and student populations. Special emphasis is placed on all three groups.

The following three goals are incorporated into the CPHSJ’s Three-Year Strategic Plan: 1) increase the diversity in the college’s faculty and student populations to be more representative of communities and populations served by its graduates, 2) create a welcoming culture that embraces and celebrates diversity and inclusion and 3) assure that all relevant policies contain elements (eg, support systems) necessary to attract and retain underrepresented faculty, staff and students. Developed by the Diversity Committee, these goals are linked to specific objectives and action items.

The committee oversees the implementation of identified strategies and monitors the college’s progress toward each goal. Results from the 2014 climate survey confirm that faculty, staff and students are satisfied with CPHSJ’s commitment to diversity. Faculty (56%), staff (40%) and student (5%) response rates vary. Average ratings for most of the college’s efforts exceeded three on a five-point (1= strongly disagree to 5= strongly agree) scale. Students of all backgrounds feel welcomed and encouraged to express their ideas and opinions. Student focus groups and dialogue meetings on related topics are also conducted each year. Anti-Defamation League workshops were organized in response to complaints about the insensitivity of some faculty and students to the needs of minority students.
Three percent to 10% of students in each degree program are African American, less than 5% are Hispanic and 2%-23% are international. Recruitment strategies involve marketing to academic institutions that predominantly serve minority students and increasing scholarship and graduate assistantship dollars for such students. Webinars and video presentations are specifically designed to attract international students and a separate orientation, tailored to their needs, is provided. In fall 2015, the college instituted a new peer mentoring program, in which returning student volunteers are paired with incoming students who express an interest in a peer mentor relationship. Ongoing partnerships and research collaborations in China, Congo and Honduras are expected to help expand the international student population and indirectly contribute to increased ethnic, religious and cultural diversity at the CPHSJ. The college is in the process of enhancing resources for international students, including transitioning space in Salus Center to a residence for such students, to help them acclimate to living and studying in the US.

Seven percent and 6% of faculty and staff, respectively, identify themselves as African American. Staff representation from this underrepresented group has declined within the last year. Recruitment strategies involve advertising to professional organizations that attract underrepresented professionals. Current faculty are also trained to network with these individuals. Prospective faculty and staff are granted the opportunity to meet with others from similar backgrounds. A new peer mentoring program supports the promotion and tenure of minority faculty and aims to improve job satisfaction across minority faculty and staff. Staff retention has been focused on administering the climate survey and responding to suggestions, creating a multi-faith calendar and placing it on the website. During their interview with site visitors, the president and the provost affirmed the university’s commitment to achieving faculty diversity. The university is making a concerted effort to follow best practices in the hiring of new faculty appointments and intends to hold its colleges, including the CPHSJ, accountable for making real progress in this area. The newly appointed special assistant to the president for diversity and community empowerment will guide the university in creating a more diverse and welcoming environment for all.

The college recognizes, adheres to and actively supports university policies that prohibit discrimination and harassment and promote equal employment opportunity and affirmative action. The Office of Human Resources drafted a recruitment and hiring policy that outlines and commits to recruiting, supporting and valuing a diverse workforce. This policy is still a work in progress but is anticipated to be vetted through the appropriate channels this coming academic year. Related violations and complaints are directed to the Office of Institutional Equity and Diversity. Information about these policies is published on the SLU website. At the time of the site visit, the Diversity Committee was in the process of developing new college-specific policies, which will be vetted through the Faculty Assembly and submitted to the Leadership Committee for final approval in the 2015-2016 academic year.
A few MPH, BSPH and PhD competencies address diversity and ensure that students exercise cultural competence, ethical reasoning and social justice when working with communities. The college also offers a number of undergraduate and graduate courses in diversity, global health and multiculturalism. The practice experience further exposes students to diverse communities and workplace environments.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. As shown in Table 2, the college offers master’s and doctoral degrees in the five core areas of public health, as well as various other concentrations and tracks. Joint degree options include medicine, law, nutrition and dietetics, social work and clinical psychology. The curricula are designed to prepare students to serve as practitioners and researchers in local, state, national and international settings.

<table>
<thead>
<tr>
<th>Table 2. Instructional Matrix</th>
<th>Academic</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bachelor's Degrees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Health</td>
<td>BS</td>
<td></td>
</tr>
<tr>
<td>Biostatistics</td>
<td>BS³</td>
<td></td>
</tr>
<tr>
<td>Criminology and Criminal Justice</td>
<td>BA³</td>
<td></td>
</tr>
<tr>
<td>Emergency Management</td>
<td>BS³</td>
<td></td>
</tr>
<tr>
<td>Health Management</td>
<td>BS³</td>
<td></td>
</tr>
<tr>
<td>Social Work</td>
<td>BS³</td>
<td></td>
</tr>
<tr>
<td><strong>Master's Degrees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applied Behavior Analysis</td>
<td>MS</td>
<td></td>
</tr>
<tr>
<td>Behavioral Science &amp; Health Education</td>
<td>MSPH</td>
<td>MPH</td>
</tr>
<tr>
<td>Behavioral Science &amp; Health Education and Epidemiology</td>
<td></td>
<td>MPH</td>
</tr>
<tr>
<td>Biosecurity &amp; Disaster Preparedness</td>
<td>MPH</td>
<td></td>
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<tr>
<td>Biosecurity &amp; Disaster Preparedness and Epidemiology</td>
<td>MPH</td>
<td></td>
</tr>
<tr>
<td>Biosecurity &amp; Disaster Preparedness/Infection Prevention</td>
<td>MS³,⁴</td>
<td></td>
</tr>
<tr>
<td>Biosecurity &amp; Disaster Preparedness/Management &amp; Response</td>
<td>MS³,⁴</td>
<td></td>
</tr>
<tr>
<td>Biosecurity &amp; Disaster Preparedness/Medical &amp; Public Health</td>
<td>MS³,⁴</td>
<td></td>
</tr>
<tr>
<td>Intelligence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biostatistics</td>
<td>MPH</td>
<td></td>
</tr>
<tr>
<td>Biostatistics and Epidemiology</td>
<td>MPH</td>
<td></td>
</tr>
<tr>
<td>Criminology &amp; Professional Practice/Administration of Justice</td>
<td>MS³</td>
<td></td>
</tr>
<tr>
<td>Criminology &amp; Professional Practice/Emergency Management</td>
<td>MS³</td>
<td></td>
</tr>
<tr>
<td>Criminology &amp; Professional Practice/Treatment &amp; Rehabilitation</td>
<td>MS³</td>
<td></td>
</tr>
<tr>
<td>Emergency Management &amp; Crisis Leadership</td>
<td>MPH⁵</td>
<td></td>
</tr>
<tr>
<td>Environmental &amp; Occupational Health</td>
<td>MPH</td>
<td></td>
</tr>
</tbody>
</table>

³ Non-public health degree
⁴ Distance-based
<table>
<thead>
<tr>
<th>Table 2. Instructional Matrix</th>
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<tbody>
<tr>
<td><strong>Academic</strong></td>
</tr>
<tr>
<td>Environmental &amp; Occupational Health and Biosecurity &amp; Disaster Preparedness</td>
</tr>
<tr>
<td>Environmental &amp; Occupational Health and Epidemiology</td>
</tr>
<tr>
<td>Epidemiology</td>
</tr>
<tr>
<td>Global Health</td>
</tr>
<tr>
<td>Global Health and Environmental &amp; Occupational Health</td>
</tr>
<tr>
<td>Global Health and Epidemiology</td>
</tr>
<tr>
<td>Global Health and Maternal &amp; Child Health</td>
</tr>
<tr>
<td>Health Administration</td>
</tr>
<tr>
<td>Health Administration/Health Care Finance</td>
</tr>
<tr>
<td>Health Administration/Health Care Operations</td>
</tr>
<tr>
<td>Health Management &amp; Policy</td>
</tr>
<tr>
<td>Health Management &amp; Policy and Epidemiology</td>
</tr>
<tr>
<td>Maternal &amp; Child Health</td>
</tr>
<tr>
<td>Maternal &amp; Child Health and Epidemiology</td>
</tr>
<tr>
<td>Public Health Practice</td>
</tr>
<tr>
<td>Social Work/Applied Behavior Analysis</td>
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<tr>
<td>Social Work/Clinical</td>
</tr>
<tr>
<td>Social Work/Community &amp; Organization</td>
</tr>
<tr>
<td>Social Work/Family</td>
</tr>
<tr>
<td>Social Work/Health &amp; Mental Health</td>
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</tbody>
</table>

**Doctoral Degrees**

| Public Health Studies/Behavioral Science & Health Education | PhD |
| Public Health Studies/Biosecurity & Disaster Preparedness | PhD |
| Public Health Studies/Biostatistics | PhD |
| Public Health Studies/Environmental & Occupational Health | PhD |
| Public Health Studies/Epidemiology | PhD |
| Public Health Studies/Health Management & Policy | PhD |
| Public Health Studies/Health Services Research | PhD |
| Social Work | PhD |

**Joint Degrees**

| Bachelor of Science in Public Health | BSPH/MPH |
| Doctor of Medicine | MD/MPH |
| Juris Doctor | JD/MHA |
| Juris Doctor | JD/MPH |
| Juris Doctor | JD/MSW |
| Master of Arts in Deaconess Studies | MDeac/MSW |
| Master of Arts in Theology | MATH/MSW |
| Master of Business Administration | MBA/MHA |
| Master of Divinity | MDiv/MSW |
| Master of Pastoral Studies | MAPS/MSW |
| Master of Public Administration | MPA/MSW |
| Master of Science in Nutrition & Dietetics | MSND/MPH |
| Master of Social Work | MSW/MPH |
| PhD in Clinical Psychology | MSPH/PhD |

3 Non-public health degree
4 Distance-based
5 Discontinued or suspended
The MSN/MPH program has been suspended since 2009; no students are currently enrolled in the program. As of 2013-2104, the MPH program in emergency management and crisis leadership has been discontinued and is no longer accepting applications. Four students remain in the program, however, one of whom is expected to graduate in fall 2015. It is unclear when the others will graduate as they are progressing on a part-time schedule. The MSW programs in family and health and mental health have also been discontinued. Nine and 15 students still remain in the programs, however, and several are expected to graduate by the end of the 2015-2016 academic year. The Department of Environmental and Occupational Health plans to introduce a new MSPH program in environmental health in summer 2016. The curriculum has already been approved by the university, but the competencies were still in development at the time of the site visit; the college plans to submit a substantive change notice before the program is opened for enrollment.

Site visitors reviewed the corresponding plans of study and agreed that the curricula, overall, appear appropriate and reflective of undergraduate- and graduate-level public health training, respectively.

### 2.2 Program Length.

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

This criterion is met. MPH students are expected to complete a minimum of 42 to 54 semester credits, depending on the concentration. One semester credit is defined as 12.5 hours of classroom instruction. In addition to 18 credits of core coursework, students complete 21 to 36 credits of concentration-specific coursework, including up to 12 credits of advisor-approved electives, depending on the chosen program of study. Students are also required to take an Ethical Issues in Public Health course. The college has not awarded an MPH degree to a student with fewer than 42 credits.

### 2.3 Public Health Core Knowledge.

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

This criterion is met with commentary. All MPH students are required to take several courses, as shown in Table 3, that provide a broad orientation to the five core areas of public health.

MPH students are also required to take a course in ethics and social justice, a strong focus of the college and the university. Except where students transfer in or receive credit for prior coursework, all MPH students are required to complete this core coursework. Corresponding syllabi list the specific competencies associated with each course and reflect an appropriate level of breadth and depth to expose students to the five core knowledge areas.
Table 3. Required Courses Addressing Public Health Core Knowledge Areas for MPH Degrees

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>BST5000 Principles of Biostatistics</td>
<td>3</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>EPI5000 Principles of Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>EOH5000 Environmental and Occupational Health</td>
<td>3</td>
</tr>
<tr>
<td>Social &amp; Behavioral Sciences</td>
<td>BSH5000 Behavioral Science and Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Health Services Administration</td>
<td>PUBH5010 Mission and Practice of Global Public Health (not health management and policy (HMP) students)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>PUBH5110 Managerial Aspects of Public Health Practice (HMP5300 Management of Health Care Organizations (HMP students only)</td>
<td>3</td>
</tr>
</tbody>
</table>

The commentary is tied to the verbal accounts of several students who were dissatisfied with the quality and delivery of two of the health services administration courses. The self-study indicates that PUBH5010 Mission and Practice of Global Public Health and PUBH5110 Managerial Aspects of Public Health Practice have historically been rated less positively by students than other core courses. Follow-up conversations with faculty revealed that the PUBH5010 course, in particular, is very new and has already gone through several major transformations—from presentations and expert panel discussions to traditional lectures by a team of faculty. The course is a work in progress; faculty are continuously making adjustments to meet the needs of students from multiple programs. While the site visit team agreed that the course adequately covers core public health concepts, the current delivery of the course is problematic. Corresponding course evaluations, though some are positive, are among the lowest in the college. A review of comments made on the evaluation forms revealed a substantial degree of variability. Students expressed dissatisfaction with testing and evaluation methods, the textbook, lack of course organization and lack of communication among faculty. Non-public health students tended to report more issues. Others expressed how beneficial and worthwhile the grant writing experience was.

2.4 Practical Skills.

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

This criterion is met. MPH students complete a minimum of 320 to 520 hours of fieldwork, depending on their chosen concentration. The internship is designed to provide students with practical experience and an opportunity to apply their knowledge and skills in a professional setting. Waivers are not permitted.

Students select placement sites in consultation with the practice experience coordinator, the practice experience advisor and other faculty advisors. Over the last two years, students conducted internships at approximately 140 community-based organizations, including local health departments, federal agencies, healthcare organizations, for-profit businesses and academic medical center offices. Preferred preceptor
qualifications include an undergraduate or graduate degree and at least five years of experience in the field. CPHSJ faculty may serve as co-preceptors to complement and supplement specific preceptor skillsets.

The practice experience coordinator and advisors take part in a midterm review of the practice experience with the student and the preceptor, which may be by telephone or site visit. In addition to regular communication via email or phone, the coordinator and advisors are available to meet with students and preceptors throughout the practice experience process as needed or desired. Students consult their preceptors and advisors in developing a learning agreement that identifies the activities and competencies upon which the internship will be framed. Preceptors provide on-site supervision and real-time evaluation of students.

Deliverables expected of most MPH students include a written description of the practice experience, pre- and post- self-assessments of competence, six progress reports and a final poster presentation. The post-assessment also provides an opportunity for students to rate their satisfaction with the preceptor and placement site and the extent to which they met their learning objectives. Preceptors fill out a similar form to evaluate students’ overall performance, professionalism and demonstration of the MPH competencies. Preceptors who met with the site visit team were generally pleased with students’ level and scope of knowledge—particularly in program evaluation and other research-oriented skills. Students appreciated how organized the planning and implementation process is and they consider the experience to be one of the hallmarks of the curriculum.

2.5 Culminating Experience.

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

This criterion is met. MPH students complete an oral comprehensive exam, as well as a capstone course, at the conclusion of their coursework.

The comprehensive exam is designed for students to demonstrate knowledge and application of core public health concepts and principles and display an in-depth understanding and application of their concentration area. With the exception of those in the HMP program, most students complete a two-part exam. Health management and policy students are not required to take Part I of the exam, which consists of a separate set of questions related to each of the five core areas of public health. Questions are based on content taught in each of the core public health courses. The second half of the exam, which all students take, involves the presentation of a case study specific to the student’s concentration area. HMP students are given additional instructions to prepare an oral policy brief that analyzes and integrates the five core areas of public health with specific health management and policy domains. All students, regardless of concentration, are given 24 hours to prepare an oral presentation, which they deliver to a committee of
faculty reviewers before responding to any questions faculty may have. Students must pass the exam in order to graduate. Those who fail may be granted a second opportunity to take the exam; those who do not pass the retake exam are not awarded an MPH degree.

The self-study indicates that global health students have the option to choose between the oral examination, a policy analysis or a journal article to fulfill the culminating experience requirement. Site visitors learned that this option only applies to those students who were admitted in 2014-2015. Since no members of this cohort had approached graduation and completed any of the alternative formats at the time of the site visit, the team was unable to assess the implementation of the new global health culminating experience options. Policies pertaining to global health students, however, were modified just prior to the site visit. Effective fall 2015, all newly admitted students are required to sit for the same comprehensive exam described above.

With the exception of those in the global health concentration, all MPH students are also required to successfully complete a capstone course in their area of concentration. The capstone is designed to assess students’ ability to integrate and synthesize the knowledge and skills they acquired throughout the curriculum. Site visitors reviewed the corresponding syllabus for each degree program and were able to identify clear links to a selection of core and concentration-specific competencies. Depending on the concentration, specific activities may include the development of a manuscript, an evidence-based white paper, a publication-grade analytic essay, a journal article or a project proposal and in-class presentation. Project proposals, for example, incorporate a literature review, a logic model and data analysis, among other components.

The sample of syllabi, exams and slide presentations reviewed by site visitors provided evidence that both forms of the culminating experience are integrative and provide an adequate level of rigor to evaluate students’ overall knowledge and skills.

2.6 Required Competencies.

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

This criterion is partially met. The MPH program is framed around nine core competencies, and the BSPH program is framed around four broad learning outcomes. The MSPH and PhD programs subscribe to five and seven core competencies, respectively. The number of concentration-specific competencies for each public health degree program ranges from one to seven. The competency set assigned to each multidisciplinary concentration is derived from a combination of the competencies that define each individual track.
The current sets of competencies were developed over the last two years; final iterations were published in 2013-2014 and 2014-2015. Faculty solicited the input and approval of alumni, preceptors, employers and other community partners. A limited number of discussions involved students. Core competencies were derived from those recommended by the Association of Schools and Programs of Public Health and other organizations. Discipline-specific competencies are based on current theory and practice. Steering committees for each degree program were only recently charged with reviewing the competencies every five years to ensure that they align with the changing needs of the profession. Regular reviews had not been scheduled or conducted prior to the self-study process. Each academic program will be responsible for developing a protocol for updating competencies and learning outcomes by the 2016-2017 academic year.

Competencies are integrated into the fabric of the curricula. Each core and concentration-specific competency is strategically mapped to several required courses that either emphasize or reinforce the competency. Although some concentration-specific competencies are not linked to concentration-specific courses, documentation provided to site visitors mapped those competencies to core coursework. Faculty explained that one epidemiology-specific competency, for example, is more thoroughly addressed in the core EPI5000 course. Syllabi demonstrate the link between the competencies and course-specific learning objectives. Competencies are also published on the CPHSJ website. Students who met with the site visit team were fully aware of the competency-based nature of the curricula.

As the doctoral program continues to revise its curriculum to match the skills and competencies graduates should have, it has revised the existing PhD competencies and added competencies where needed in the concentration areas. Similarly, the competencies for the MSPH in behavioral science and health education and epidemiology have been revised by the respective departments, resulting in a unique set of competencies for each of the MSPH concentrations that focus on research methods specific to the discipline. Subsequent to issues noted during the site visit, the college has clarified its hierarchy of higher-level competencies for more advanced degrees and refined distinctions between MPH and MSPH competencies.

The concern relates to the need for stronger linkages between MPH competencies and the concentrations offered. The college has begun the process by establishing clearer competencies that better articulate the differences between the MPH and MSPH degrees.
2.7 Assessment Procedures.

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

This criterion is partially met. The college uses a number of direct and indirect measures to assess student competency in each degree program. Such measures include graded course assignments, practica, comprehensive exams, capstone projects, dissertations and self-assessment surveys. Other mechanisms through which the college evaluates student success include the tracking of graduation rates, job placement data and feedback from alumni.

Performance of most MPH students during fieldwork is assessed by pre- and post- self-assessments of competence and preceptor evaluations of students’ demonstration of the competencies. Beginning in fall 2015, all MPH students will also be expected to complete a self-assessment of competency attainment at the beginning and end of each academic year. Through comprehensive exams and capstone projects, MPH students are expected to demonstrate their ability to integrate and apply the knowledge and skills acquired during their pursuit of the degree. BSPH students are required to complete a similar capstone course. BSPH students also complete a graduation exit survey that serves as a process and impact evaluation; program learning outcomes are assessed indirectly by items that require students to indicate the degree to which they feel they achieved each outcome. MSPH students are required to write and present a publishable-quality paper that demonstrates research competency within the context of a public health problem. Doctoral students sit for three written comprehensive exams and are evaluated on the quality of their dissertations.

Undergraduate students are allowed up to six years to graduate after entering major-specific coursework, and master’s and doctoral students generally have five and eight years, respectively. All of the BSPH students who entered in 2009 have since graduated. The 2009 and 2010 MPH cohorts achieved cumulative graduation rates of 83% and 91%, respectively, and the MSPH students that entered within the same time frame have all graduated. Seventy-three percent of PhD students in public health who entered in 2007 have graduated. Graduation rates pertaining to non-public health degrees at the undergraduate and master’s levels exceed 83%. PhD students in social work have yet to reach the maximum allowable time to graduation; the first cohort was admitted in fall 2014.

Job placement information is collected through exit surveys, post-graduation surveys, email contacts, social media platforms and internet searches. For each degree program, more than 90% of respondents reported that they were employed and/or pursuing additional education. Data for students who graduated in 2014-2015 were provided, but the 12-month post-graduation period is not yet complete. Total response rates for each degree program range from 38% to 100%.
Alumni surveys assess the extent to which graduates felt prepared to enter the workforce. The most recent MPH survey only received a 19% response rate, but the instrument assessed a large pool of graduates dating back to 1973; a total of 176 individuals responded. The competencies that respondents found of greatest importance to their jobs were those associated with systems and critical thinking, communication, informatics, ethics and professionalism. Going forward, MPH alumni surveys will be sent every other year to graduates of the two prior years only. The next survey will be sent to 2014 and 2015 graduates in the fall of 2015. Assessments of PhD students received a 39% response rate. Students were generally satisfied with the doctoral program and how it prepared them for their first job: 46% reported being very prepared and 54% reported being somewhat prepared. The next survey will be in 2018 for students who graduated between 2014 and 2018. The first BSPH alumni survey was instituted in 2014. Fifteen alumni who graduated in spring 2014 completed the follow-up survey, which was disseminated in spring 2015. All were comfortable assessing population needs, demonstrating foundational knowledge of public health and communicating information about public health issues with consideration for social justice; 86.5% were comfortable identifying ways to implement evidence-based approaches to public health issues. Alumni who met with the site visit team confirmed their satisfaction with the competence and skills they developed as students and agreed that they were fully prepared for the workforce. Individual suggestions for improvement included increased student exposure to qualitative analysis.

A recent revision to the preceptor evaluation for the MPH in health management and policy now includes an assessment of the MPH programmatic competencies so that the MPH preceptor evaluation is consistent across all concentrations. This allows for a complete assessment of students’ concentration-specific competencies.

The concern relates to the lack of data on employer perceptions of graduates’ abilities to perform competencies in the workplace. A 17-member nominal group of employers and preceptors was held during the competency development process to determine the skills they believed all MPH students should have upon graduation. Practice experience coordinators hold informal meetings with preceptors and employers to obtain feedback about the college’s degree programs, student training and ways to strengthen the curriculum to prepare students for the workforce. The dean holds informal meetings with preceptors and employers, as requested. Two preceptors, for example, met with the previous dean to discuss their experience with recent graduates. One of them found that students were lacking knowledge about the Affordable Care Act. To collect more in-depth data specific to alumni performance, the college is taking several new approaches to systematically assess employers’ perceptions of students’ competencies. A two-pronged approach will consist of 1) surveying employers and 2) assembling advisory boards (made up of employers, preceptors and community members) to help inform the college about what graduates can and should be able to do in the workforce. The employer survey will follow the same timeline as the alumni
survey (ie, every two years for the MPH and every five years for the undergraduate and PhD). The college is in the process of hiring an associate dean for community engagement who will be responsible for supporting these new advisory groups. On-site discussions with employers reflected a high level of satisfaction with the level of knowledge and skill with which CPHSJ graduates enter the workforce.

2.8 Other Graduate Professional Degrees.

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

This criterion is met. The college offers the following professional graduate degrees in disciplines other than public health: MHA, MSW, criminology and professional practice (MSCPP), applied behavior analysis (MSABA) and biosecurity and disaster preparedness (MSBSDP).

The latter two degrees relate closely to public health fields, but the college positions them as specialist degrees. The MSBSDP curriculum addresses terrorism response capabilities and fundamentals of infectious diseases as they relate to preparedness concerns, emergency response planning and crisis communication. The MSABA has a long history in the School of Social Work and originated as a specialist field under the social work umbrella. The degree focuses on training “behavior analysts” who use empirical research to change behaviors in fields such as smoking cessation, language development and vocational skill acquisition. MSCPP students are prepared to be advanced practitioners in a variety of community and organizational settings.

A broad introduction to public health practice is provided to students in each of these programs. With the exception of the MSBSDP program, all other graduate professional programs require students to take a three-credit introductory course, PUBH5010 Mission and Practice of Global Public Health. Examination of the course syllabus indicates that it provides a sufficient overview of the five core areas of public health. MSBSDP students take five public health courses: BSDP5102 Introduction to Biostatistics and Decision Analysis, BSDP5100 Public Health and Disasters, BSDP5204 Epidemiological Methods and Infectious Disease Surveillance, BSDP5205 Behavioral and Cultural Implications of Disasters and BSDP5207 Legal and Ethical Implications of Disasters. BSDP5100 provides a broad overview of all core public health areas, while the other courses provide additional depth in specific core areas. This was confirmed by examination of the course syllabi and conversations with the program director.

On-site discussions revealed that non-public degree programs have incorporated public health content into the curriculum with relative ease. As mentioned in Criterion 2.3, the delivery of PUBH5010 needs to be addressed, but it is clear that efforts continue to improve the meaningfulness and relevance of the course to students in the other graduate programs.
2.9 Bachelor’s Degrees in Public Health.

The overall undergraduate curriculum (e.g., general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.

- the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease
- the foundations of social and behavioral sciences
- basic statistics
- the humanities/fine arts

The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (i.e., the program may identify multiple learning experiences that address a domain—the domains listed below do not each require a single designated course).

- the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society
- the basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice
- the concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations
- the underlying science of human health and disease including opportunities for promoting and protecting health across the life course
- the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities
- the fundamental concepts and features of project implementation, including planning, assessment and evaluation
- the fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries
- basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government
- basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology

If the program intends to prepare students for a specific credential, then the curriculum must also address the areas of instruction required for credential eligibility (e.g., CHES).

Students must demonstrate the following skills:

- the ability to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences
- the ability to locate, use, evaluate and synthesize public health information

Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior
seminars, portfolio projects, research papers or honors theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following:

- advocacy for protection and promotion of the public's health at all levels of society
- community dynamics
- critical thinking and creativity
- cultural contexts in which public health professionals work
- ethical decision making as related to self and society
- independent work and a personal work ethic
- networking
- organizational dynamics
- professionalism
- research methods
- systems thinking
- teamwork and leadership

This criterion is met. The college offers a BS degree in public health, defined by a robust and academically challenging curriculum. Students in this program are required to complete a minimum of 120 credits, including 50 credits of core courses, 36 credits of public health coursework and 34 credits of general electives.

The curriculum addresses the defined learning outcomes and provides adequate coverage of the areas of science, social and behavioral sciences, math/quantitative reasoning and humanities/fine arts. Each domain is addressed by broad university requirements; the math/quantitative reasoning and social and behavioral sciences areas are further addressed by the major. Reviewers were able to identify at least minimal compliance by reviewing corresponding syllabi and a list of courses from which students are required to select electives. This list includes courses on topics such as political science and psychology, which more clearly meet the requirement for social and behavioral sciences. Given the complete reliance on general education courses to expose students to science and the humanities/fine arts, it will be particularly important for the college to remain vigilant to this cluster of courses in order to ensure that all students receive consistent depth of instruction in these fundamental areas.

The matrix provided in the self-study documents a thorough approach to ensuring coverage of core public health domains. Faculty who met with site visitors described an iterative process of developing specific undergraduate courses (e.g., EPI 4000 Introduction to Epidemiology and BST 3100 Applied Biostatistics I) to ensure appropriate depth, eliminate overlap and respond to student concerns. Although these courses will not be offered until fall 2016, all newly admitted students, effective fall 2014, are required to take them to graduate.
The college provides strong documentation of its ability to assess students’ performance of public health communication and information literacy skills. Minimum expectations ensure that all students are required to demonstrate that they can 1) communicate with diverse audiences, in both oral and written forms and through a variety of media and 2) locate, evaluate, synthesize and apply public health information. Methods of assessment include assignments in which students produce deliverables such as press releases, policy briefs, advocacy presentations, written reports and reflection papers.

Cross-disciplinary and professional topics relevant to public health are addressed through a variety of curricular and co-curricular experiences. Most concepts, such as advocacy and critical thinking and creativity, are addressed in coursework. The self-study presents a robust list that draws on co-curricular activities, such as immersion trips and professional development workshops, to ensure that students are exposed to concepts such as community dynamics, networking and cultural contexts in which public health professionals work.

To satisfy the requirement that all students engage in cumulative and experiential activities, students complete a capstone course and 45 hours of service learning across three required courses: PUBH 2100 Introduction to Global Health, PUBH 2300 Contemporary Issues in Global Health and PUBH 3100 Public Health and Social Justice. The capstone course includes three components: a portfolio, a group project and professional development activities. In particular, the group project involves a literature review, the presentation of findings, a critical analysis and the development of recommendations. As validated by on-site discussions and site visitors’ review of corresponding syllabi, these courses address a variety of topics and are designed to require synthesis, integration and application of knowledge. Site visitors were unable to fully assess the implementation of the capstone, however, as students had not yet completed the requirement in its current format. The course will be offered for the first time in spring 2017 and all newly admitted students, effective fall 2014, are required to complete the capstone to graduate.

BSPH students who met with site visitors were poised, well-spoken and enthusiastic about their undergraduate studies and extracurricular activities. One student, in particular, expressed how impressed he was with the caliber of education he is receiving. Several spoke highly of the quality, availability and supportive nature of their professors. Others articulated specific ways in which their training in the BSPH program contributed to their professional development. Employers were particularly impressed with the caliber of students that graduate from the program, including their mastery of a variety of unique skillsets that match or exceed graduate-level expectations.
2.10 Other Bachelor’s Degrees.

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

This criterion is met. The college offers five undergraduate degrees in fields other than public health: criminology and criminal justice (BACCJ), social work (BSSW), emergency management (BSEM), health management (BSHM) and biostatistics (BSBST).

The latter three degrees are closely related to public health fields, but they are not designed to be interdisciplinary baccalaureate public health degrees like the BS in public health. Instead, each focuses on more narrow disciplinary interpretations of the topic areas. Biostatistics students, for example, take a math-based approach that focuses on principles of mathematics and computer programming and aims to prepare students to “manage, analyze and interpret biological and health science data.” Similar to their MHA counterparts, health management students’ program is designed to focus on the business side of public health and health care. According to the CPHSJ website, the emergency management degree focuses on multiple sectors, including “communication, firefighting, emergency management, public health and medical, search and rescue, hazardous materials, law enforcement, the military, social services and business continuity.”

Each degree requires a minimum of 120 credits for graduation; the curricula include 30 to 39 credits of CPHSJ (major-specific) coursework, depending on the program of study. All students are required to take PUBH2100 Introduction to Global Health, a three-credit course that fosters a general understanding of public health as it occurs in a global context. Based on a review of the syllabus and discussions on site, this course provides sufficient exposure to the five core areas of public health.

2.11 Academic Degrees.

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

This criterion is partially met. The CPHSJ offers two MSPH degrees, a PhD in social work and several other PhD degrees in public health studies. Students in most of these programs are required to take courses that address the five core areas of public health, thus providing a grounding in the breadth of public health and epidemiology.

All MPSH students are expected to take PUBH5010 Mission and Practice of Global Public Health, a three-credit orientation, as well as EPI5000 Principles of Epidemiology, another three-credit course. The same expectations apply to PhD students in social work. Depending on the degree and concentration, additional courses in biostatistics and epidemiology may also be required.
Most students admitted to the PhD program in public health studies (65%) enter with a master’s degree in public health or a related field. Those who are granted an exception in the admissions process are required to sit for courses that serve as prerequisites for certain methods and concentration courses. As part of the core curriculum, all public health studies students must complete the following core courses: BST5100 Introduction to General Linear Modeling, PHS6010 Design and Analysis in Public Health, PHS6050 Science, Theory and Public Health, PHS6060 Applied Research Skills and PHS6900 Professional Development. Each course is assigned three credits. PHS6050, in particular, addresses key concepts in social and behavioral sciences, health research and policy. BST5100 focuses on biostatistics and related epidemiological principles.

At the time of the site visit, reviewers observed deficiencies in consistent coverage of epidemiology and environmental health across all public health PhD concentrations. Site visitors made these determinations after examining the syllabi and participating in follow-up discussions with the program directors and noted that individuals admitted without an MPH are at a particular disadvantage. The college’s response to the site visit team’s report documents the addition of required epidemiology coursework for all public health doctoral students, addressing this component of site visitors’ concern. The response also describes a plan to ensure that students receive instruction about environmental factors, including biological, physical and chemical factors that affect the health of a community, but the response does not document formal implementation of this curricular requirement.

The concern is that not all public health PhD students receive the introduction to environmental health sciences factors necessary to ensure a broad introduction to public health.

2.12 Doctoral Degrees.

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

This criterion is met with commentary. The college offers the PhD in seven public health tracks: behavioral science and health education, biosecurity and disaster preparedness, biostatistics, environmental and occupational health, epidemiology, health management and policy, and health services research. A PhD in social work is also offered.

The PhD in public health is designed to prepare students for public health research, education and practice in academic, private and public research, and consulting organizations. Students gain skills in research design, methods and dissemination, as well as a solid understanding of public health science. All degree programs are competency-based and include a core curriculum (15 credit hours) in research methodology and professional development. The concentration curriculum (45 credits) provides students with in-depth
knowledge and expert skills and abilities in their chosen concentration. All students are expected to complete 12 dissertation credits. The college identified substantial variability in the quality of students’ oral exams, which serve as a proposal for the dissertation. Clarified instructions are expected to increase the likelihood of successful completion.

PhD students are only admitted if a mentor relationship has been established. Twelve graduate research assistantships pay for up to 21 credits of tuition, a monthly stipend for 11 months and health insurance, if required. Small grants allow students to conduct research related to their dissertation. Other resources include manuscript and grant writing support, travel awards, networking opportunities and doctoral research symposia. For a college of this magnitude, matriculation, degree progression and graduation rates are impressive.

The commentary relates to the availability of doctoral-level coursework. The college has a very limited number of advanced courses with which students can fulfill their methods requirements. Faculty and students who met with site visitors identified the need for more courses in qualitative research and other advanced methods. The college’s response to the site visit team’s report indicates that it has or is in the process of implementing new course offerings in Geospatial Analyses, Bayesian Statistics and Causal Inference. Furthermore, Introduction to Qualitative Methods and Intermediate Qualitative Methods courses will be rolled out for doctoral students; there is a planned rollout in 2017-18 of Advanced Modeling/Structural Equation Modeling and Advanced Health Behavior Theory courses; and a partnership has been leveraged whereby the health outcomes research concentration will offer a Measurement and Applied Research Skills course, which covers survey development.

2.13 Joint Degrees.

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

This criterion is met. A number of joint degree programs, as shown in Table 2, promote students’ cross-disciplinary understanding of public health. The MD/MPH, MSND/MPH and MSW/MPH degree programs are offered in combination with the MPH in public health practice. The JD/MPH is offered with the health management and policy concentration.

The college provides a framework for BSPH students to get a head start on their MPH degree by completing core MPH coursework, along with one to two concentration-specific courses, in their senior year. A similar program is offered for BS students at Augustana University. Approved credits may fulfill certain bachelor’s degree requirements, but no substitution of MPH credit is involved. This accelerated format applies to all MPH degree programs, except those in global health and public health practice.
Efficiency for all other joint degree programs is achieved with the substitution of six to nine credits of approved elective and/or concentration courses for credit toward the MPH component of the degree. Instead of completing the traditional MPH practice experience, for example, MPH/MSW students complete the following three courses: SWRK 5820 Concentration Integrated Practice Seminar, SWRK 5842 Clinical Practicum II and SWRK 5843 Clinical Practicum III. This multidimensional practice experience must integrate concepts in social work and public health. Similarly, MPH/MSND students complete DIET 5450 Public Health Nutrition Practicum—which provides coverage in community health and nutrition program planning, development and evaluation through hands-on application—instead of the traditional practice experience. All shared practice experiences are planned, supervised and evaluated.

In lieu of a public health elective course, MPH/MSND students also complete DIET 5300 Community Nutrition. MPH/JD students take LAW 8000 Health Care Law, instead of HMP 5510 Health Policy and Law. Although MPH/JD students have the option to substitute six additional credits of LAW coursework for public health electives, such students still obtain 42 credits of public health coursework—since the standalone MPH program exceeds 50 credits. There is minimal overlap within the MD/MPH program: up to six credits of medical coursework may be substituted for PUBH elective credits, but this is rare and when it does occur, the integration of concepts in population health must be apparent.

Students are expected to complete most required courses, including the comprehensive exam and capstone course, within their respective MPH programs. Course sharing or substitution is approved by the department, program and academic affairs. Faculty review the content of external coursework and corresponding syllabi for comparability before deeming such coursework acceptable for MPH credit.

Site visitors noted concerns about the integrity of the MPH curriculum. Site visitors reviewed the syllabi of substitute courses and were unable to validate that equivalent or comparable content is always addressed. In lieu of HMP 5500 Health Policy, for example, MPH/MSND students complete DIET 5400 Nutrition Education. Although the DIET 5400 course is related to public health, the associated competencies do not align with those upon which HMP 5500, a required concentration course in the standalone MPH program, is framed. As a result, such students may not receive the same level of exposure to health management and policy as their MPH counterparts. Furthermore, despite the thorough evaluation of the shared MPH/MSW practice experience, the corresponding learning agreements and evaluation forms are more clinically oriented and do not include specific instructions or guidance to link the practicum to the MPH or comparable competencies and ensure that students are assessed on their mastery of these skills. The experiences and observations of one employer, in particular, corroborate these findings; she noted consistent variances between the skills of joint degree and standalone MPH graduates. Those who graduated from joint degree programs, for example, may have fewer qualitative data analysis skills.
The college’s response to the site visit team’s report documents a series of curricular changes that have been implemented in order to ensure curricular consistency. HMP-5500 is being added to the dual MPH/MS in nutrition and dietetics, in order that all three concentrations (medicine, social work and nutrition) now require the same courses as part of the MPH. The MPH competencies are being added in the dual MPH/MSW practice experience learning plan as well as the evaluation. Preceptors now evaluate students on both the MSW and MPH competencies, in order that all MPH preceptor evaluations are in alignment.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is met. The MS degree in biosecurity and disaster preparedness is offered completely online. The Executive MHA program is offered in a hybrid format. Both are consistent with the college’s mission to meet the demand for trained professionals and fulfill the educational needs of professionals already in the workplace.

Students are evaluated through online testing, interactive activities, paper assignments and participation in discussion groups. Distance-based and hybrid courses are vetted through department, program and academic affairs committees and approved through the same processes as traditional courses. Program directors or department chairs review the structure of online courses and the scholarly nature of teaching and content, required competencies, learning/evaluation activities, opportunities for faculty-student interaction and evaluation, and activities to promote student-to-student interaction and discourse.

EHMA students participate in annual competency-based self-assessments and executive board analyses. MS students are evaluated by the oral comprehensive examination, practice experience evaluations, self-assessments of competencies, successful completion of the capstone course and alumni surveys.

Distance and executive programs take into account the professional nature of students. A program coordinator is available to assist each student when problems do exist and IT staff are also at their disposal.
Students must complete an academic integrity module and sign a pledge stating that they will adhere to the online policy. They are also assigned a unique password and username. The college is currently exploring visual recognition software to eliminate uncertainty.

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 with commentary. The college supports research and scholarship through investments in research infrastructure, encouragement of faculty and student participation and prioritization of research and scholarship in hiring decisions, annual performance reviews and promotion and tenure decisions.

Over the last three years, the college has generated more than $30 million in external support. The behavioral science and epidemiology departments tend to make the largest contributions. Nearly half are community-based. There has, however, been a notable decline in extramural research funding over the last few years, from more than $3.7 million in FY2013 to less than $1.7 million in FY2015. Funding from grants and contracts also fell from a high of $9.3 million in FY2012 to $1.9 million in FY2015. As stated in the self-study and confirmed in on-site discussions, the drastic reduction in research and funding is due, in large part, to a number of productive research faculty who transitioned out of the institution several years ago. As a result, the fraction of primary public health faculty who received funding for their research over the last three years declined from 43% to 29%. Steps are being taken to build capacity, rebalance the college’s portfolio and recapture research dollars.

The college has established policies and practices that support research endeavors. The associate dean for research is primarily responsible for directing the research office and providing oversight of the college’s research activities. Other responsibilities include mentoring individual faculty, evaluating funding opportunities, fostering collaborations and monitoring new research areas. Oversight is also provided by the Research Advisory Council. Faculty are supported by the college’s business office, the SLU Office of Research Development Services and the Office of Sponsored Programs. Seed monies are available to college faculty for small research projects that are tied to the strategic plan and generate pilot data for grant submissions. Preference is given to junior faculty. Three proposals have been funded over the last two years. Other initiatives include a new mentoring program, a speaker series, publication support services and a voluntary internal study section with the assistance of senior faculty who have a track record of grant support. The success of these efforts will be determined by continued monitoring. Faculty and administrators described recent improvements in the college’s research services infrastructure and its impact on their ability to pursue and generate research funding.
A database of faculty research interests is available on the research office website to facilitate collaboration, and weekly emails are sent to all faculty informing them of funding opportunities. As an incentive, a portion of indirect funds received by SLU from external grants is provided back to the principal investigator and the department, but this depends on annual policies set at the university level and is subject to change. On-site discussions confirmed this contingency arrangement and clarified that a certain threshold of revenue ($7 million) must be met by the university before this policy takes effect.

Faculty are encouraged to collaborate with graduate research assistants on funded research projects. When funding opportunities allow for full indirect costs, the college provides tuition remission to supplement the stipend included for graduate research assistants in grant budgets. In FY2014, the college supported 51 students as graduate assistants in the MPH, MHA and PhD programs. Student participation occurs in more than half of faculty-led research projects. Site visitors noticed a general decline, however, in the number of publications and presentations of PhD students over the last three years. Conversations with students suggested that numerous opportunities to participate in research exist—especially for those who take initiative to get involved.

The self-study identified several outcome measures related to research. Applications for external funding have declined and are currently less than 1.0 per capita (52 in FY2015), with awards following a similar trend. Financial support for internal pilot grants has increased slightly, from $10,000 to $13,000, over the last two years. Targets for the percentage of students who receive dissertation fellowships (2% to 4%) or are employed on grants (45% to 69%) are ambitious, but the college’s performance on these measures has steadily declined over the last three years. Serious efforts and investments will need to be made to reach the defined targets. In contrast, scholarly activity meets or exceeds the target levels set for all but one measure (published or accepted manuscripts by faculty with student co-authorship, 58%).

The commentary relates to the decline in revenue from external funding and productivity resulting from the loss of more experienced faculty. This deficiency reflects the need to build broader-based capacity across more faculty. While new efforts and plans are in place to strengthen research capacity, it may take time for the college to recover and demonstrate success in this area. The college is actively working to increase grant submissions and improving the quality of grant submissions; has included in its new workload policy as well as Promotion and Tenure guidelines that faculty research and grant submissions are clear expectations; and the new college dean has allocated $50,000 for additional pilot grants this upcoming fiscal year. Continued support from the university and commitment by the college are needed to ensure sustainability and productivity. This was clearly identified by the president and the provost as a priority for a new capital campaign.
3.2 Service.

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

This criterion is met. The university recognizes the need for community service and actively encourages both public health students and faculty to seek out mechanisms to support the college’s service initiatives. Faculty and students participate in service activities consistent with the Jesuit tradition and with the college’s mission of service.

As a Catholic, Jesuit institution, the university is committed to providing service. SLU has been nationally recognized for its community service efforts. In 2014, the university was named on the President’s Higher Education Community Service Honor Roll for the seventh consecutive year. In 2015, the university was honored by the Carnegie Foundation Elective Community Engagement Classification. Following recent events in Ferguson, Missouri and peaceful responses on campus, the president reestablished SLU’s desire to work with and in the community. This tradition of service is also woven into the fabric and culture of the CPHSJ. The college demonstrates a longstanding history of community service, providing expertise and support to dozens of community-based agencies, public health departments and healthcare organizations. With the public health challenges in the surrounding metropolitan area, there is no shortage of community service opportunities. The Center for Service and Community Engagement is a valuable resource for faculty, staff and students to learn about community needs, projects and events in which they can participate. One faculty member referred to practice and service as integral components of the college’s “DNA.”

Faculty are expected to devote 20% of their time to service, a key element of the promotion and tenure process. The type of activities and projects in which faculty participate range from article and manuscript reviews and pro bono consultations to working with targeted groups and serving as members of professional workgroups. Over 60% work with local organizations, while 22% and 9% work at the national and international level, respectively. The Institute for Global Health and Wellbeing was formed to increase and coordinate partnerships with international communities. Seventeen percent hold leadership positions in professional organizations, and the same fraction consult or provide technical assistance to community organizations. Most faculty engage in at least five service activities per year. Faculty and students have been instrumental in developing the North St. Louis Initiative, which supports community-based organizations devoted to enhancing the health and well-being of residents in north St. Louis city and county.

Community representatives commended CPHSJ faculty for their service as “true collaborators and partners—not just out of convenience.” Faculty go above and beyond their regular duties, even in the absence of funding. Other community representatives remarked on their family-like relationship with the
college. According to other comments, faculty are approachable and very engaged in both formal and informal interactions with the community; they do not hesitate to “roll up their sleeves” and support challenging grassroots efforts.

Students are encouraged to participate in community service activities organized by the university and public health student organizations, which are very service-centric. According to the most recent Center for Service and Community Engagement survey, more than 80% of student respondents participated in service during the 2012-2013 academic year. Students serve on boards and committees of local and regional nonprofit organizations, and others participate in SLU and community events such as the Susan G. Komen Race for the Cure and Relay for Life. Students are also active in faith communities and volunteer with local, national and international programs to bring health services to communities in need. The Student Association for Public Health introduced a focused service partnership with Almost Home, an area organization that provides housing, education and support services for teenage mothers and their children. Students who met with site visitors participate in fairs during National Public Health Week.

The self-study identifies the need to develop a system to better collect staff and student service data. The college plans to implement a new tracking tool by spring 2016.

3.3 Workforce Development.

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

This criterion is met. The college coordinates several methods to respond to and obtain information regarding the professional development needs of the workforce. Such efforts will become more and more important as the demands on public health professionals continue to grow and the need for highly skilled professions continues to expand.

Primary needs assessments have occurred through the Heartland Centers for Public Health and Community Capacity Development (HCPHCC). In 2013, the HCPHCC conducted focus groups with state and local public health administrators, the Missouri Institute of Community Health and the director of the Missouri Local Health Administrators to prioritize continuing education training priorities. The following priorities were identified: quality improvement plan development, community health improvement planning, community health assessment and data mining and collaborative leadership. While the funding as a Public Health Training Center (PHTC) ended in 2014, the HCPHCC has been successful in securing grants through partnerships with the University of Iowa, Nebraska and Kansas.

Between 2010 and 2013, the CPHSJ conducted a series of workshops for public health practitioners: Sharing Responsibility, Improving Community Health. Advisory groups of community members and leaders
and faculty were formed to guide the development of the series. Needs assessments of practitioners who had participated in similar events were used, along with the advisory board input, to choose topics and speakers that would best meet the community's needs. Areas of interest included networking, dialogue about local strategies and solutions, identifying resources and sharing best practices.

From FY2012 to FY2015, the CPHSJ received nearly $3.5 million in funding to provide continuing education programs for the public health workforce. Such grants and contracts make continuing education financially viable. The college offered over 470 continuing education presentations and workshops that served a total of 4,000 individuals. In addition to in-person training sessions, the HCPHCC offered approximately 630 online tutorials to nearly 8,000 public health professionals. Over 40% of faculty-led workforce development projects conducted over the last three years involved students and 60% were community-based. A total of 500 certificate programs or course series were completed during the same time frame. The college offers a Post-Baccalaureate Certificate in Biosecurity and Disaster Preparedness and a Post-Master's Certificate in Applied Behavior Analysis. Although enrollment in these programs is quite low, they serve as pipelines to the master's degree programs.

The Center for Environmental Education and Training (CEET) and the Midwest OSHA Education Center (MOEC) train professionals in environmental health and safety. Students are primarily working professionals who need specific training in order to acquire and maintain the licenses or certifications required for their business practices. Courses are largely taught by contract instructors with backgrounds in business, industry, health care, regulatory agencies, military, research and academics. CEET conducts evaluations of the quality of the programs its offers, while HCPHCC conducts pre- and post-tests of knowledge gained. Participants have rated these courses favorably.

Community representatives who met with site visitors appreciate the college’s attention to their needs. One individual described her partnership with the college to offer CME credits to physicians. Others noted that more online options would be helpful and attract more professionals that work during the day.

To date, most of the efforts to assess the needs of the community have been decentralized and performed on an ad hoc basis, based on grant opportunities and national training objectives. In support of the development of more strategic efforts, the college invested in creating the Office of Public Health Practice (OPHP) and recruited the associate dean for public health practice to oversee and coordinate workforce development activities. A workforce development coordinator and an external relations specialist have also been charged with developing strategies to develop, deliver and evaluate the impact of the college’s continuing education programs. A comprehensive strategic plan will be completed by the end of the 2015-2016 academic year.
4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. Full-time faculty, together with adjunct, part-time and secondary faculty, have training and expertise in diverse disciplines and are qualified to support the college’s academic and professional programs and its research and service activities.

The overwhelming majority of the college’s primary faculty members hold doctoral degrees or terminal degrees (e.g., PhD, DrPH, MD) in public health or relevant disciplines. There is considerable diversity in the faculty members’ research interests. Several have direct experience in the fields of public health and social work, with some working in state or county health departments or the Department of Health and Human Services. A majority have worked in community-based or healthcare organizations, and almost two-thirds have obtained professional degrees. Half of the adjunct faculty teach courses and others provide guest lectures, help with service learning, serve as preceptors for practice experiences or partner with other faculty on research and service projects.

Among primary public health faculty, 41% are assistants, 33% are associates, 26% are full professors and 43% are tenured. The percentage of senior faculty has increased from 19% to 26%, though there is also an increase in the number of junior faculty and faculty without public health backgrounds. The college is increasing its reliance on adjunct faculty as undergraduate programs expand and new MPH concentrations are added.

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. Faculty manuals at the university and college define policies and procedures related to faculty hiring, appointment and promotion. Measures are in place to evaluate teaching competence and performance, primarily through student course evaluations.

Recruitment for new faculty positions is led by department chairs. A search committee typically consists of four to six members, including faculty from the designated department and others appointed by the dean. Faculty are expected to maintain a balance across research, teaching and service obligations. Annual activity reports are evaluated by the department chair each year. Department chairs follow up with faculty in performance planning meetings. Faculty are ranked according to productivity and merit raises are allocated based on a uniform scale of authorships and publications, teaching scores and community and
professional service hours. Faculty appeared familiar with most expectations for promotion and tenure, though on-site discussions revealed that related documents had not been updated since 2004.

Faculty development needs are monitored by the associate dean for academic affairs and the associate dean for research. Results of a recent faculty survey identified barriers to increased faculty research: lack of mentoring, inability to find colleagues with shared interests and time constraints. The survey also indicated that faculty would benefit from additional support in linking competencies to learning objectives and course content and in leveraging the benefits of online and Jesuit pedagogy. Informal training of faculty is provided, but there is a need for more formal training in teaching tools.

Services provided by the university include a comprehensive teaching center for teaching consultations and classroom observations. The CPHSJ developed a Teaching Effectiveness Series and partnered with the Center for Transformative Teaching and Learning to provide two to three yearly seminars for faculty. Presentations on research activities of faculty from SLU and other institutions are offered to identify new partners for research collaborations. Teaching workshops are provided each semester, but as noted in on-site discussions, scheduling conflicts make it challenging for adjunct faculty and other working professionals to attend. Online instructors are provided with a half-day orientation by the digital technology team. The new mentoring program, instituted in fall 2015, provides additional support and is designed to cultivate successful scholars, in teaching and research. Designated “master” teachers serve as mentors for new faculty hires. Junior faculty also enjoy reduced teaching loads and release time that allows them to further develop their research portfolios. A growing amount of dollars support pilot research and preliminary studies.

Course evaluations are conducted using the IDEA Student Ratings of Instruction System. Department chairs and program directors review results with faculty and make recommendations to enhance teaching effectiveness and scores. Faculty are also encouraged to conduct mid-course evaluations. The Center for Transformative Teaching and Learning offers opportunities for staff to observe teaching and conduct group assessments of teaching with students. The self-study indicates that 18% of public health courses are rated below the desired threshold on course evaluation instruments. Faculty discussions confirmed that quality instruction and student learning are a priority. Some of the faculty who received consistently low course evaluation scores were adjuncts, and they were not asked to return to teach. An orientation for adjunct faculty will be offered in 2015-2016 to address this concern and better prepare them for the classroom.

Plans to improve outcomes appear to be worthy, particularly in the areas of mentoring, teaching effectiveness and external research funding. Most of these efforts, however, are relatively new, and time and tracking are needed to determine if such plans are successful.
4.3 Student Recruitment and Admissions.

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

This criterion is met with commentary. The college employs a variety of methods to identify and attract promising applicants.

The director of graduate admissions and the associate dean for academic affairs are responsible for developing recruitment policies. One undergraduate program coordinator is responsible for collaborating with SLU admissions staff on recruitment and marketing activities for undergraduate programs, in particular. Recruitment strategies involve promotional materials, social media, phone and email communications, college visit days and participation in a variety of graduate fairs and events. The college takes advantage of other recruitment events—including counselor lunches, preview day, admitted student lunches and transfer open houses—hosted by the university. Materials are disseminated to students, families, high school counselors and minority populations, as identified in Criterion 1.8. BSPH recruitment activities target the current SLU student population—particularly undecided majors. In turn, the BSPH program serves as a pipeline into the MPH program.

At least one faculty member from each degree program is responsible for working with admissions staff to coordinate the review of all applications. Eligibility requirements for each degree program are documented on the CPHSJ website and published in the catalog. Prospective students are expected to submit official transcripts, standardized test scores, a personal statement, a resume or curriculum vitae and three letters of recommendation. Undergraduate degree requirements include a minimum GPA of 2.5. General master’s degree requirements include a bachelor’s degree and a minimum GPA of 3.0. Doctoral degree requirements include a master’s degree and a minimum GPA of 3.0.

All applications are reviewed by one or more faculty members. Admissions decisions are made from a holistic perspective and take into consideration all of the required components of the application. Individuals seeking to pursue the accelerated BSPH/MPH program, for example, are vetted through a highly selective review and approval process. Regardless of an applicant’s score, however, admission to the PhD in public health studies is contingent on the availability of an appropriate faculty mentor. Following each program’s review process, application recommendations are forwarded to the associate dean for academic affairs for final approval.

Over 65% of those who applied to the college in fall 2015 qualified for admission. The enrollment to applications ratio across all degree programs is around 40%. Seventy-five percent of prospective BSPH students were accepted into the program and nearly a third of those who qualified declared the major. Over
75% of those who applied to one or more of the master's degree programs qualified for admission; about 40% of those who were accepted followed through with enrollment. Only 20% of doctoral applicants qualified for admission, and roughly half of those who were accepted enrolled.

At the time of the site visit, the student headcount per undergraduate program ranged from 12 to 166. Undergraduate enrollment continues to increase, especially in the BSPH and BSHM programs. With the exception of the MSPH and the MSBSDP programs, graduate enrollment also continues to increase. Headcounts for each active master's degree program range from one to 106; three standalone programs and four joint degree programs lack student participation. Headcounts for each doctoral degree do not exceed ten. Enrollment at the doctoral level is intentionally limited and preference is given to those pursuing full-time study. The total student headcount across the college is 1,100.

The commentary relates to recent and dramatic declines in the college's applicant pool—particularly those who are well-qualified. MPH applications, in particular, have decreased over the last three years. The self-study identifies nine outcome measures by which the college evaluates its success in enrolling a qualified student body. These measures include average admissions formula scores. Only one target was met at the time of the site visit, though nearly all targets had been achieved at some point within the last three years. In the last two years, admissions formula scores decreased in several MPH concentrations. The college attributes this deficit to the ever shrinking applicant pool, increased competition with larger schools and limited scholarship opportunities. The college's response to the site visit team's report, however, notes that MPH and PhD applications are up 14% and 11%, respectively, over this time frame one year earlier. Faculty who met with site visitors described the college's strategies to redirect and revamp recruitment activities—from streamlining department-specific systems and sharing best practices to defining a succession plan and exploring alternatives to merit-based scholarships. A copy of this plan was provided on site. Despite these efforts, site visitors questioned the impact of low application rates on the quality of students admitted. The associate dean for academic affairs stated that the cut-off admissions formula score for most programs is 375. Documentation of admissions criteria, however, indicate that some departments have not established a minimum score.

4.4 Advising and Career Counseling.

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

This criterion is met. Academic advising and career counseling services are available to students from the time of enrollment to graduation.

Two full-time academic advisors are dedicated to advising undergraduate students. After declaring their major, students are assigned to one of these two advisors. They are also assigned a separate faculty mentor. Similarly, master's degree students are supported by the graduate student staff advisor and
assigned a faculty mentor in their concentration area. PhD students are matched with a faculty mentor during the admissions process. The graduate student orientation provides students with the opportunity to meet with both their faculty and staff advisors. For the most part, students remain with their assigned advisor(s) for the duration of their studies—unless their interests change, faculty leave, etc. Depending on their degree program, students are required to meet with their academic advisor and/or faculty mentor at least once per semester. Academic advisors are typically responsible for curriculum planning and ensuring that students meet established graduation requirements. Faculty mentors may provide similar guidance, but also discuss professional development opportunities and preparation for life after graduation.

In fall 2015, the college introduced a new peer mentoring program. Returning student volunteers are paired with incoming students who express an interest in a peer mentor relationship.

The SLU Student Success Center connects undergraduate and graduate students with six career development specialists. Offerings include career assessments and interpretations, assistance in writing effective resumes and cover letters, job search guidance, salary negotiation tips and mock interviews. In addition to maintaining an online job and internship database and connecting students with current and potential employers, the center provides a plethora of online resources and hosts a number of career fairs and networking events. Three career development specialists are assigned to the college. In addition to regularly advertising and delivering presentations on career services, they hold satellite walk-in hours, conduct related workshops and introduce new students to career services during orientation. Career development specialists also meet with faculty and students to discuss their specific needs and brainstorm strategies to tailor services. The college continues to improve its career counseling services by strengthening its partnership with University Career Services.

Within the college, one Office of Public Health Practice staff member has been assigned to career services and is expected to collaborate with the Student Success Center to optimize results. For MPH students, in particular, the Public Health Rounds (PUBH5900) course incorporates sessions devoted to career services and professional development. In addition to alumni and preceptor panels, individual consultations and resume and cover letter reviews are offered throughout the course. Topics of discussion include networking, professionalism and interview preparation. Similarly, undergraduate and doctoral students have the opportunity to enroll in professional development courses. The Professional Development Series, for example, includes a series of lectures, events and workshops geared specifically toward undergraduate majors. Examples of activities include panel discussions, speed networking, resume writing and workshops on job search techniques. Career Spotlight, the signature event in the series, connects students to annual panel of local professionals in health management, public health and emergency management fields. A weekly undergraduate e-newsletter advertises listings for jobs, internships and fellowships.
Student satisfaction with academic advising and career counseling is reflected through the new student survey and the SLU career services survey. Students across degree programs highly rate their level of satisfaction with academic advising. Over 60% of graduate students report that meetings with their advisors are “extremely helpful.” Approximately 80% of undergraduate students report satisfaction with academic advising. In 2013-2014, SLU career services surveyed each CPHSJ student who met with a career development specialist for career counseling. More than 90% reported a “positive” feeling (eg, “confident,” “prepared” or “optimistic”) upon leaving the appointment. Current students were enthusiastic about their satisfaction with the accessibility of their faculty advisors and the guidance they receive. One student, in particular, said that he was “blown away” with how helpful the career services staff person was.

Grievance procedures are articulated on the university website and published in the student handbook. All students have the opportunity to voice complaints to college administrators, faculty and staff. Academic issues may be brought to the attention of the student’s faculty advisor. Student organizations also serve as a medium for student concerns. Most students discuss issues with the director of student services, who shares anonymous concerns with the associate dean for academic affairs. Ultimately, the associate dean determines what action, if any, needs to occur. Over the last three years, the college has received a total of nine student complaints and grievances. Most pertain to student dismissals; the remaining three pertain to affirmative action. All were processed through appropriate channels and, with the exception of one appeal that is still in process, all open cases have been addressed and closed.
Agenda
COUNCIL ON EDUCATION FOR PUBLIC HEALTH
ACCREDITATION SITE VISIT
Saint Louis University
College for Public Health and Social Justice
September 16-18, 2015

Wednesday, September 16, 2015

8:30 am  Site Visit Team Request for Additional Documents
Ann Stuart, MA, MPH Program Coordinator

8:45 am  Executive Session

9:30 am  Meeting with Core Leadership Team
Donald Linhorst, PhD, Interim Dean and Director of the School of Social Work
Darcell Scharff, PhD, Associate Dean for Academic Affairs
Mario Schootman, PhD, Associate Dean for Research
Alex Garza, MD, MPH, Associate Dean for Public Health Practice and Environmental and Occupational Health
Interim Department Chair
Elizabeth Baker, PhD, Behavioral Science and Health Education Department Chair
John Fu, MD, PhD, Department of Biostatistics Department Chair
Min Qian, MD, PhD, Epidemiology Department Chair
Keith Elder, PhD, MPH, MPA, Health Management and Policy Department Chair
Lisa Wagner, Financial Coordinator
Jen Jen Chang, PhD, MPH, Faculty Assembly President
Chris Casey, MPH, Staff Assembly
Lauren Allen, MPA, Assistant to the Dean

10:45 am  Break

11:00 am  Meeting with Self-study Committee
Darcell Scharff, PhD, ADAA
Mario Schootman, PhD, ADR
Alex Garza, MD, MPH, ADPHP
Carole Baskin, DVM, MSc, MPH Program Director
Lauren Arnold, PhD, MPH, Public Health Undergraduate Programs Director
Ann Stuart, MA, MPH Program Coordinator
Nancy Culbert, MA, Director of Student Services
Tara Dhiman, 2nd year MHA student worker

11:45 am  Break

12:00 pm  Lunch with Students
Asabe Garba, 1st year MPH-EPI
Olivia Schormheuser, 2nd year MPH-BSHE and EPI
Megan Copsey, BSPH (’15 alumna), 2nd year accelerated MPH EPI
Sam Biver, 2nd year MPH BSHE
Casandra Brocksmith, 1st year MPH MCH/EPI
Joshua Allen, 1st year MPH EPI/BST
Theresa Condon, 2nd year MPH HMP/2nd year Law
Jason Maddox, BSPH, Senior
Lisa Stringer, MPH/MSW (’12 alumna), 3rd year PhD
Beth Tobo, MPH (’15 alumna), 1st year PhD PHS
Tyler Glassford, 1st year PhD SW
Mike Degnan, BSHM, Junior
Nick Moliterno, 2nd year MHA

1:30 pm  Break

1:45 pm  Meeting with Instructional Programs: Group 1
Public Health Degree Programs:
Carole Baskin, DVM, MSc, MPH Program Director
Ann Stuart, MA, MPH Program Coordinator
Lauren Arnold, PhD, MPH, Undergraduate Public Health Program (BSPH) Director
Enbal Shacham, PhD, Med, MPE, PhD PHS Program Co-Director
Kristin Wilson, PhD, MHA, MPH-HMP Program Director
Catherine Nolan, MPH, Practice Experience Coordinator, MPH Students
Maxine Lax, Internship Coordinator, MPH-HMP (and MHA) Students
Dual Degree Representatives:
Stephen McMillin, PhD, MSW, MSW Program Director
Lauren Landfried, RD, LD, Nutrition and Dietetics Faculty Member
Stuart Stavin, MD, MEd, Associate Dean for Curricular Affairs, School of Medicine
Amy Sanders, JD, Center for Health Law Studies Assistant Director

3:00 pm  Break
3:15 pm  Executive Session
5:00 pm  Adjourn

Thursday, September 17, 2015

8:30 am  Meeting with Faculty Related to Research, Service and Workforce Development
Research:
Alexis Bruce-Staudt, MSW, Director of Research Services, CPHSJ
Hong Xian, PhD, Professor, Biostatistics
Ricardo Wray, PhD, Associate Professor, Behavioral Science and Health Education
Enbal Shacham, PhD, MSPH, MPE, Associate Professor, Behavioral Science and Health Education
Katie Stamatakis, PhD, MPH, Associate Professor, Epidemiology
Min Qian, MD, PhD, Professor and Chair, Epidemiology
Kristin Wilson, PhD, MHA, Associate Professor, Health Management and Policy
Service:
Ricardo Wray, PhD, MS, Associate Professor, Behavioral Science and Health Education
Fernando Serrano, PhD, Assistant Professor, Environmental and Occupational Health
Steven Howard, PhD, Assistant Professor, Health Management and Policy
Ellen Barnidge, PhD, MPH, Assistant Professor, Behavioral Science and Health Education
Workforce Development:
Alex Garza, MD, MPH, Associate Professor, Epidemiology, ADPHP
Wendy LaBenne, MS, MA, Workforce Development Coordinator
Kate Wright, EdD, MPH, Associate Professor, Health Management and Policy, Director of Heartland Centers for Public Health and Community Capacity Development
Christopher King, PhD, Environmental and Occupational Health, Director of Center for Environmental Education and Training

9:45 am  Break
10:00 am  Meeting with Instructional Programs: Group 2
Other Undergraduate Degrees:
Lauren Arnold, PhD, MPH, BSEM (emergency management), BSHM (health management), BSBST (biostatistics) Program Director
Noelle Fearn, PhD, BACCJ (criminology and criminal justice) Program Director
Sandra Naeger, MSW, BSSW (social work) Program Director
Other Master’s Degrees:
Terri Rebmann, PhD, BSN, MSBSDP (biosecurity and disaster preparedness) Program Director
Jason Turner, PhD, MHA Program Director
Mark Gaynor, PhD, Professor and faculty in EMHA Program
Stephen McMillin, PhD, MSW, MSW Program Director
Alyssa Wilson, PhD, MSABA (applied behavioral analysis) Director
Other PhD:
Michael Vaughn, PhD, MSW, PhD in Social Work Program Director

11:15 am  Executive Session
12:00 pm  Lunch with Alumni and Community Stakeholders
Debbie Kiel, PhD, RN (community partner, ’08 alumna) Associate Professor
Director, Graduate Nursing Programs
School of Nursing and Allied Health Sciences
Lindenwood University

Melinda Ohlemiller, MA (community partner, employer and preceptor)
Executive Director
Nurses for Newborns

Mark Bagby (community partner, employer and preceptor)
Director of Emergency Management
Washington University in St. Louis

Brandye Mazdra, MPH (community partner, ‘00 alumna, preceptor and employer)
Director of Projects and Operations
Transtria, LLC

Josh Goldman, MSW (community partner)
Senior Education Project Manager
Urban Strategies

Jeanine Arrighi, MS, MPPA (community partner, preceptor and employer)
Health Services Manager, Environmental Health
St. Louis Department of Health

Eleanor Berquist, MSPH (community partner and preceptor)
Epidemiologist
St. Louis County Health Department

Beth Rotter, PhD, MPH (community partner, ‘06 [MPH] and ‘14 [PhD] alumna)
Manager, Planning, Analysis, and Evaluation – Raising St. Louis
BJC HealthCare

Katherine Mathews, MD, MPH (preceptor)
Director of Research OB/GYN
Saint Louis University

Sen. Robin Wright Jones, (ret.; community partner and preceptor)
Executive Director
Empowerment Network

Allison Williams, BSSW (’94 alumna)
Senior Vice-President
Wyman Center

Katie Castree, MHA (’12 alumna)
Senior Performance Improvement Specialist
Hospital Sisters Health System, HSHS Medical Group

Tyrone McCall, MHA (’12 alumnus)
Administrative Office, Primary Care Services
Veterans Administration, St. Louis

John Heafner, BSPH (‘13 alumnus), MPH (‘14 alumnus)
Medical Student – 2nd year
Saint Louis University

1:30 pm  Break

2:30 pm  Meeting with University Leadership
Fred Pestello, PhD, President of Saint Louis University
Nancy Brickhouse, PhD; Provost of Saint Louis University

3:00 pm  Break

3:15 pm  Meeting with Faculty Related to Faculty Issues, Student Recruitment and Advising
Jen Jen Chang, PhD, MPH, President of Faculty Assembly
Nancy Weaver, PhD, MPH, Past President of Faculty Assembly
Steven Rigdon, PhD, Chair, Promotion and Tenure, Public Health Faculty
Ricardo Wray, PhD, Promotion and Tenure Committee Member, Public Health Faculty
Bernie Backer, Director of Graduate Admissions, Public Health Programs
Kristi Richter, MSW, Director of Graduate Admissions, Social Work Programs
Jackie Bernstein, MPH, Undergraduate Public Health Outreach and Recruitment
Maggie Callon, MSW, Undergraduate Public Health Program Coordinator
Nancy Culbert, MA, Staff Advisor, Public Health Graduate Students
Natalie Floeh, MA, Senior Undergraduate Student Advisor for the College
Catherine Nolan, MPH, Practice Experience Coordinator, MPH Students
Maxine Lax, Internship Coordinator, MPH-HMP (and MHA) Students
Chandra Johnson, MS, Career Development Specialist, Career Services

4:15 pm  Executive Session
5:30 pm  Adjourn

Friday, September 18, 2015

9:00 am  Executive Session and Report Preparation
12:30 pm  Exit Interview