## Council on Education for Public Health Adopted on October 7, 2017

## **REVIEW FOR ACCREDITATION**

OF THE

ARNOLD SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF SOUTH CAROLINA

## COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES: March 29-31, 2017

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#### Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the University of South Carolina Arnold School of Public Health. The report assesses the school's compliance with the *Accreditation Criteria for Schools of Public Health, amended June 2011*. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation and a visit in March 2017 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The University of South Carolina (USC), a public university, was established in 1801 and offers programs of study on its main campus in Columbia and seven regional campuses. The university enrolls over 46,000 students and has over 2,100 full-time faculty members supporting bachelor's, master's and doctoral offerings in over 300 areas of study. The university, along with separately-accredited University of South Carolina branches in Aiken, Beaufort and Upstate and Palmetto College, make up the University of South Carolina System.

The university considers six of its schools, including the Arnold School, to be its health sciences schools: the schools of medicine in Columbia and Greenville and the colleges of nursing, pharmacy and social work. The health sciences schools collaborate on initiatives as appropriate, though there is no formal organizational structure or designation that binds them together. Other schools and colleges at USC include arts and sciences; business; engineering and computing; education; hospitality, retail and sport management; mass communication and information studies; law; and music.

The school offers bachelor's, master's and doctoral degrees in public health and other health-related disciplines, with approximately 60% of the school's full-time faculty associated with public health disciplines and the other 40% associated with disciplines including exercise science, physical therapy and communication sciences and disorders. The school's undergraduate programs, in particular, have experienced sharp growth. Of the over 2,700 students enrolled in the school in the most recent year, approximately 700 were public health undergraduates and approximately 1,300 were undergraduates in the other health sciences (exercise science and athletic training).

The school has been continuously accredited by CEPH since 1977, and the last review in 2010 resulted in an accreditation term of seven years. Since the last accreditation review, the school has submitted four notices of substantive change and four interim reports. The Council accepted all notices and interim reports.

## 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 Arnold School of Public Health at USC. The university is accredited by the Southern Association of Colleges and Schools Commission on Colleges, and the school and its faculty have the same rights and status as those associated with other USC schools. The school includes both public health and other health-related disciplines, and faculty training and experience spans a breadth of areas of focus and practice experiences. Active collaborations with the state health department, in particular, and a number of local and community-based agencies involved in public health, ensure interdisciplinary communication and fosters development of professional public health values.

The school has appropriate human, physical, financial and other resources to support its degree offerings, including multiple MPH, MSPH, PhD and DrPH concentrations. The school has a well-developed system for planning and evaluation and monitors its activities, offerings and operations to ensure continuing relevance to the world of public health practice.

#### 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. In the fall of 2015, the school established a workgroup as part of its strategic plan to review and revise the school's mission, vision and values statements. The workgroup reviewed the existing statements, comments from the school retreat and examples from other schools of public health. Through a brainstorming and modified Delphi process, the workgroup developed a draft of mission, goals, objectives and values and then interacted with the school's Administrative Council to derive a final draft version of these statements.

Faculty made up the membership of the Mission, Vision and Values Workgroup. During the site visit, students indicated that they had the opportunity to review and comment on the statements as they evolved. Once the initial draft was refined, the school's community partners and alumni were given the opportunity to review and comment on the statements.

The school's present mission is "to improve population health and wellbeing by fostering innovative education and research that promotes health and healthy environments and to use that knowledge to prevent and effectively respond to disease, disability, and environmental degradation in diverse communities."

Its vision is "to advance discovery and innovation, develop outstanding graduates, and promote health through collaboration, dissemination, and outreach in our local and global communities." Its values include community, diversity and inclusion, impact, integrity, learning, social justice and translation.

#### The school has four goals:

- to provide educational programs of excellence for public health professionals and scholars to gain recognition as one of the top ten schools of public health in public institutional of higher education
- to achieve and maintain research excellence as demonstrated by the creation of knowledge of high impact and importance to public health
- to support and enhance community engagement through professional, community, and academic service in order to address health issues facing South Carolina, the nation, and global communities.
- to provide the infrastructure and resources to meet the goals of education, research and professional service

The school's Administrative Council reviews the mission, goals and objectives at least annually as part of the university-wide Blueprint for Academic Excellence exercise, a combination of strategic planning and annual report of productivity.

The school has an acceptable set of measurable objectives with quantifiable indicators associated with the stated goals.

The school's mission, vision, goals and objectives are featured prominently on the school's "About" webpage. The school's annual Blueprint for Academic Excellence, which addresses the guiding statements, is shared with faculty and staff and available on the university website.

## 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. Each year the school develops a required Blueprint for Academic Excellence, a document that addresses strategic planning and includes a review of various performance measures. The self-study indicates that the Blueprint's objectives are a subset of the school's specific stated objectives. The 2016-17 document describes how the school contributes to the university's academic goals and key performance parameters. It outlines five-year goals, provides benchmarking information and outlines the school's strengths and important accomplishments. It also provides an honest assessment of issues the school needs to address, including support to retain qualified faculty and staff, student financial support and facilities, including access to classroom space.

The school has adequate infrastructure to collect the information necessary to assess the extent to which the goals, objectives and target outcomes are being met. For each of the goals specified in Criterion 1.1, the self-study defines a set of quantitative measurements and targets. Most of the targets for AY2015-16 were met or nearly met, and progress toward many of targets established for the future (eg, AY2020) were on track. Nevertheless, some targets have not been attained, or progress appears behind. For instance, the school may not attain the AY2019-20 goals for global health and MPH distance enrollment and for submission/funding of large program project-type grant proposals. At the site visit, the site visit team learned that the school's Evaluation Committee is charged to continue monitoring the performance measures and to intervene in areas where progress is lacking.

The self-study adequately describes the process by which the document was developed. While the Self-Study Steering Committee's membership included faculty and staff, and the writing was done centrally, reviewers learned that the Dean's Student Advisory Council provided review and input on the self-study as it developed, and faculty, students and staff were provided access to final drafts of the document and asked to provide comment. At the site visit, external partners indicated that they also had the opportunity to review and comment on final drafts.

#### 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. USC, a public university, was established in 1801 and offers programs of study on its main campus in Columbia and seven regional campuses. The university enrolls over 46,000 students and has over 2,100 full-time faculty members supporting bachelor's, master's and doctoral offerings in over 300 areas of study. The university, along with separately-accredited University of South Carolina branches in Aiken, Beaufort and Upstate and Palmetto College (which includes the four campuses granting associate's degrees and is included in USC's regional accreditation), make up the University of South Carolina System.

USC is accredited by the Southern Association of Colleges and Schools Commission on Colleges, and the university also responds to specialized and professional accreditors in more than 20 fields, including journalism, social work, teacher education, law, genetic counseling and art and design. Within the Arnold School, non-public health degree programs hold accreditations from the Commission on Accreditation for Healthcare Management Education, the Council on Academic Accreditation in Audiology and Speech-Language Pathology, the Commission on Education in Physical Therapy Education and the Commission on Accreditation of Athletic Training Education.

The Arnold School dean reports to the executive vice president and provost, as do the deans of the 14 other schools in the university. The university considers six of its schools, including the Arnold School, to be its health sciences schools: the schools of medicine in Columbia and Greenville and the colleges of nursing, pharmacy and social work. The health sciences schools collaborate on initiatives as appropriate, though there is no formal organizational structure or designation that binds them together. Other schools and colleges at USC include arts and sciences; business; engineering and computing; education; hospitality, retail and sport management; information and communications; law; and music.

The dean maintains primary responsibility and authority for the school's budget, though a significant portion of the budget request and initial allocation process is managed centrally, as the university receives allocations from the state legislature, which are distributed through the president to the provost and the colleges and schools. Although the university used a responsibility-centered budget model for several years, it currently uses a historically-based allocation model for state and university funds. The dean has nearly full discretion over school-generated funds, such as donated funds, school-specific fees and a share of tuition from distance-based degrees. The university's Board of Trustees exercises final authority over all of the university's activities.

Academic policies are within the school's discretion as long as they align with university policies. The school's faculty members, department chairs and dean are involved in various stages of review and approval. New academic programs or degrees require additional approval through the Faculty Senate (undergraduate programs), Graduate School (graduate programs), Provost's Office, Board of Trustees and the statewide Commission on Higher Education. The school may generally establish requirements for admissions, matriculation and graduation as long as they meet or exceed those established by the university's Faculty Senate or Graduate School (as applicable).

The faculty, department chair and dean are involved in hiring new faculty, with the dean as the authority, once recruitment for a position is approved through appropriate university channels, including the provost. The tenured faculty, following university policies, are responsible for tenure and promotion. The university's Board of Trustees has final authority on all hiring and tenure decisions.

The school's dean is a member of the Council of Academic Deans, which meets regularly and also includes the dean of undergraduate studies and the dean of the Graduate School. The dean has access to the university president as needed but primarily interfaces with the provost.

## 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 with commentary. The school's senior administrative structure includes the dean, six associate deans, six department chairs and a number of centers, housed at the school or departmental level. Two associate deans in the academic affairs area are responsible for 1) faculty affairs and curriculum and 2) undergraduate student affairs. Other associate deans are responsible for operations and accreditation; diversity, equity and inclusion; clinical public health (including managing the school's collaboration with the Greenville Medical Center); and research. The six school departments include environmental health science; epidemiology and biostatistics; health promotion, education and behavior; health services policy and management; exercise science; and communication sciences and disorders. The first three departments include only public health degrees including MPH, DrPH, PhD, MSPH and MS, the next two departments contain a mix of public health degrees and other degrees with disciplinary orientations and/or specialized accreditation outside of public health, and the final department includes only degrees in specialized fields other than public health.

Many of the schoolwide centers draw faculty from across multiple departments and may also collaborate with faculty outside the school. Most of the centers engage in research and training students from undergraduate through doctoral levels. One center, the Core for Applied Research and Evaluation,

employs mostly professional staff, rather than faculty members, and focuses largely on applied and contract work. Faculty from the school's centers provided numerous examples of collaboration among academic colleagues from different disciplines, and many provided examples of hiring or supervising students from the school's degree programs, including BS/BA students and from other parts of the university.

Site visitors met with a number of individuals associated with the school's community and academic partners. Faculty associated with the university's School of Earth, Ocean and Environment; Department of Biological Sciences; and Department of Obstetrics and Gynecology described active engagement around research, service and instructional projects that involve public health faculty and students. Staff from the state health department and from non-profit and community-based organizations also praised school faculty for their collaborations, noting the value that the school provides as a partner.

The commentary relates to opportunities for greater collaboration within the school, among individuals from different departments. Although students, particularly bachelor's in public health and MPH students, take classes from other departments and interact with their fellow students and faculty collaborate on research across departments, the school's strong departmental structure has resulted in limited crossdepartmental interactions around curriculum and instruction, in particular. One faculty member who served on the Self-Study Committee noted that the process of developing the document had illuminated efforts and practices in other departments of which she was not previously aware. During several site visit meetings, it was apparent to site visitors that faculty from different departments were sharing observations or practices from their own departments that others had not been familiar with. Additionally, students from multiple departments spoke to duplication in curricular offerings across departments—they indicated that there was potential for greater depth of coursework in topic areas such as quantitative sciences. They suggested that, if the departments examined their elective, intermediate and upper-division offerings to complement one another rather than standing on their own, greater depth and breadth might be possible. Although the program directors do meet as a council, as discussed in Criterion 1.5, the school does not appear to have sufficiently realized the potential that its own departments have for internal collaboration and coordination.

### 1.5 Governance.

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

This criterion is met. The school maintains six schoolwide committees, several of which were quite new at the time of the site visit; three special councils; and several standing committees that convene annually to select recipients of the school's awards for faculty, students and alumni. The school convenes ad hoc committees for new faculty hiring, the self-study and other topics as needed

The Administrative Council, which includes the dean, associate deans and department chairs, is the primary policy and decision-making body. The Administrative Council serves as a liaison between school administrators and faculty and staff in departments. When making policy decisions, the council asks department chairs to solicit feedback from faculty and staff, and faculty and staff throughout the school provide feedback to Administrative Council members on a regular basis. The dean, along with professional staff such as the school's administrative manager and the departments' business managers, are responsible for budget and resource allocation issues, and these issues are informed by discussions with the departments and by schoolwide policy and strategy, as defined by the Administrative Council. The Administrative Council also bears responsibility for most of the school's planning efforts, though planning efforts are informed by feedback from a variety of school stakeholders and will be informed by the Evaluation Committee.

The Evaluation Committee was relatively newly established at the time of the site visit and had not yet begun to meet regularly. The need for this committee was identified through the self-study process. It includes at least one faculty member per department, a student member and at least one community member, drawn from the school's alumni and partners. The associate dean for operations and accreditation and the director of evaluation and academic assessment co-chair the committee and serve as ex officio members. This committee works to maintain a collaborative school-wide approach to evaluation and planning activities, working to streamline data collection. During the self-study process, faculty and staff observed that the school has abundant data, but data collection and compilation methods are disparate, making the data more challenging to use in schoolwide decision making. The Evaluation Committee plans to improve efficiency and create a data system that produces actionable data and ensures its availability to the parties who need it for decision making.

The Diversity and Inclusion Committee, another relatively new committee, includes one faculty member from each department, one student and the associate dean for diversity, equity and inclusion. During the site visit, reviewers learned that, as with the Evaluation Committee, the self-study process reinforced the need for this committee to take a more active role. This committee bears responsibility for developing, maintaining and monitoring the school's progress in implementing its strategic and tactical diversity plan. As part of this role, the committee will make recommendations on faculty, staff and student policies and procedures to the departments and Administrative Committee.

The school also maintains an Academic Programs Committee, with one faculty representative per department, as well as the associate dean of faculty affairs and curriculum and the associate dean for undergraduate student affairs. This committee oversees the process for creating new curricula or making

changes to existing curricula, and the committee's work is conducted via email, using the university's Academic Programs Proposal System.

The Council of Program Directors, which includes directors of all of the school's degree programs, addresses issues relating to student services and support, including recruitment, admissions and retention. It occasionally convenes working groups on undergraduate or graduate affairs or other issues. The council acts in an advisory role to the dean and the administrators and staff in the school's Division of Academic Affairs.

The Scholastic Standards and Petitions Committee meets as needed to act on student appeals and grievances. This committee includes at least one faculty member per department, one undergraduate student and one graduate student.

The Research Advisory Council serves as a link between the school's Office of Research and the faculty and staff in the school's departments. The council reviews new research policies and procedures and makes recommendations on ways to increase the school's research productivity. It includes one faculty member from each department and the associate dean for research.

The school maintains a Tenure and Promotion Committee to conduct third-year reviews of untenured faculty, evaluate candidates for promotion and tenure, conduct post-tenure reviews and develop and approve tenure and promotion guidelines.

The Dean's Student Advisory Council (DSAC) is the liaison between the student body and the dean's office. The council plans professional development and social events for students, assists with student orientation and coordinates service activities. This group includes graduate and undergraduate student representatives from each department. In addition to this council and to student service on schoolwide committees mentioned above, students serve as non-voting members of faculty search committees. Site visitors met with DSAC members, who were enthusiastic about their level of engagement. They indicated that school leaders are eager to hear their feedback and are extremely responsive, often initiating responses within days or weeks when possible. DSAC members engage their fellow students in their home departments and believe that they have accurate information on student opinions and concerns. Students who met with site visitors indicated that a recent professional development session was standing-room-only, with great student interest. Faculty and administrators who met with site visitors throughout the site visit referenced DSAC as a valuable resource to departmental faculty as well as the school's central administrators.

Many faculty are active on committees at the university level, including the Faculty Senate and its committees and the Graduate Council.

## 1.6 Fiscal Resources.

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

This criterion is met. The school currently has adequate resources to carry out its mission. Table 1 presents the school's budget. The school's annual budget is determined by the Office of the Provost, which has relied on a historical annual budget allocation model. The school's operating revenue comes from three sources: 1) student tuition and fees, 2) university-allocated state appropriations and 3) other university funds. The proportion of non-fee tuition funds from fall and spring semesters that are transferred to the school are determined by the USC provost, and there is no standard formula or model. However, all tuition (minus Board-mandated fees) generated from the school's summer courses are transferred directly to the school. Since FY 2010-11, the school has received one-time and recurring allocations each year for inter-college agreements and new faculty hires. The school is permitted to carry forward unspent funds from previous years.

	FY2010-	FY2011-	FY2012-	FY2013-	FY2014-	FY2015-
	2011	2012	2013	2014	2015	2016
Source of Funds						
Recurring university funds <sup>1</sup>	11,057,785	11,998,768	13,078,865	14,172,430	14,676,282	15,509,860
Non-recurring university funds <sup>2</sup>	5,066,504	5,829,342	5,842,377	6,578,640	5,953,767	7,571,576
Tuition (summer only) & all student fees <sup>3</sup>	5,010,536	4,784,688	6,030,252	6,160,098	7,095,272	7,063,281
Grants & contracts <sup>4</sup>	18,864,023	18,870,536	19,762,604	21,618,994	25,669,370	24,619,616
Indirect cost recovery	1,758,777	1,798,954	1,739,846	1,496,063	1,633,075	1,825,028
Endowment <sup>5</sup>	376,107	319,710	287,722	268,596	268,596	317,989
Gifts <sup>6</sup>	381,293	258,030	534,038	3,813,323	332,109	1,368,495
Continuing education <sup>7</sup>	19,337	19,312	10,656	5,025	4,480	3,576
Revenue <sup>8</sup>	4,007,467	4,990,037	4,825,995	4,777,939	5,730,604	4,681,263
Total Funding	46,541,829	48,869,377	52,112,355	58,891,108	61,363,555	62,960,684
Expenditures						
Faculty salaries & benefits	12,335,213	14,187,782	16,767,109	18,403,416	18,897,688	20,018,598
Staff salaries & benefits	2,459,125	2,881,429	2,997,602	2,891,333	2,897,987	3,098,283
Operations	6,785,471	8,168,134	8,393,634	11,468,415	14,187,120	12,939,166
Travel	687,417	771,221	911,504	896,547	880,590	947,265
Student support9	4,431,951	4,448,028	4,768,352	5,165,840	5,341,398	4,724,968
Temporary staff <sup>10</sup>	8,009,997	8,637,324	9,281,336	9,170,159	9,403,932	9,450,275
Total Expenditures	34,709,174	39,093,918	43,119,537	47,995,710	51,608,715	51,178,555

- <sup>1</sup> Blend of state appropriations allocated to the school by the university and revenue from spring and fall tuition from all Arnold School courses (minus fees).
- Non-recurring university funds include inter-collegiate agreements and startup costs for new faculty hires, including SmartState chairs. Unspent funds from the previous year (carry forward) and some one-time transfers are also part of non-recurring funds.
- <sup>3</sup> Student fees include health professions and other program fees for Arnold School students for all terms. Summer tuition includes revenue from tuition from all students taking Arnold School summer courses.
- <sup>4</sup> Direct expenditures.
- <sup>5</sup> Spendable allocation from the Arnold Endowment only.
- <sup>6</sup> All gifts, including gifts to endowments.
- Revenue from continuing education programs in communication sciences and disorders.
- <sup>8</sup> Transfers into the school over and above IDC, but majority of funds are from carry forward balance.
- <sup>9</sup> Graduate assistant salaries, tuition supplements, scholarships and fellowships.
- <sup>10</sup> Salary and benefits for temporary, non-student staff plus honoraria for guest speakers, etc.

The school's operating budget has grown 43% from FY 2010-11 to FY 2015-16. Most of this budget increase can be accounted for by growth in the number of faculty positions as well as by a growth in research expenditures. In addition, the school has been successful in carrying a substantial amount of funds forward from year to year. School revenue from the USC central administration has grown by only 1% each year since FY 2010-11.

The school has an established indirect cost recovery (IDC) formula for sponsored research. The school receives 37.5% of the IDC from grants and contracts. From this amount, 10% is distributed to the faculty principal investigator (PI). The remaining balance is distributed to the dean's office and the PI's department. If a center within the school is supporting post-award research activity of the grant or contract, that unit also receives a portion of the IDC. When a grant or contract involves more than one USC school or college, the IDC allocations follow the direct costs. School IDC funds have been used for a variety of purposes including the following: building construction, faculty start-up packages, seed-grant and incentive programs and required in-kind contributions required by some funding agencies.

Gifts to the school have fluctuated each year since FY 2010-11. In FY 2013-14, gifts reached a high of \$3,813,323. This was due to the Rehabilitation and SmartState deposits that were deposited in two parts of over \$1 million each. In contrast, the school received gifts totaling \$332,109 in FY 2014-15. Recently, the Arnold family made an additional, significant donation to the school.

The school identifies four outcome measures by which it assesses the adequacy of its fiscal resources. These measures include total operating funds per fiscal year, total budget per fiscal year, total extramural funding per year and total expenditures for grants and contracts per fiscal year. The corresponding targets for these outcomes were 5% increases in funds per year. The school met seven of the 12 target measures reported in the self-study. As noted in the self-study, the school's research enterprise has grown substantially in recent years, but so has its undergraduate student enrollment, without a proportionate redirection of resources to the undergraduate programs. If it continues, this dynamic may

place some restraints on the opportunities the school may pursue in expanding its academic, research and service efforts.

## 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. Since 2009, the size of the faculty has steadily grown. At this time, the school has 128 primary faculty members and 20 secondary faculty members. The latter group includes research faculty (14), part-time faculty (six) and those with primary appointments in other schools on campus (two). Among the school's 128 primary faculty members, 73 (or 57%) are in public health disciplines. The remaining primary faculty support the school's offerings in areas other than public health. For example, degree programs in communication sciences and disorders employ 22 of the school's primary faculty, and degree programs in exercise science employ 33 of the school's primary faculty.

Among the public health disciplines, the largest number of faculty are in social and behavioral sciences (23), followed by epidemiology (13), health services administration (13), environmental health sciences (11), biostatistics (10) and general public health (three).

In fall 2016, the student-faculty ratios (SFRs) by total faculty FTE for each graduate-level public health program were relatively low, ranging from 1.08 (biostatistics) to 5.09 (social and behavioral sciences). The SFRs for previous years were in similar ranges. However, most of the school's faculty also work with undergraduate students. In fall 2016, the school enrolled 702 undergraduate students in public health and 1,325 undergraduate students in exercise science. Thus, any further enrollment growth, regardless of degree program, may require additional faculty to back-fill and/or continue to address the needs of the large number of undergraduate students.

The self-study identifies the number of permanent staff in the school as somewhat low (FTE = 51.3), given the size of the student population, faculty complement and research endeavor. The school hired two new, full-time, professional academic advisors in 2016 to address undergraduate student needs. The school also intends to fill three additional staff advisor positions in the near future.

Currently, the school's programs are located in four campus buildings and in two rented off-site facilities. Communication sciences and disorders, physical therapy, athletic training and several school centers are located one to five miles from the school's core campus buildings. The self-study notes that administrative contact and oversight are weakened by the distance between the school's programs. The provost and dean acknowledged that there is a need to expand the school's on-campus facilities, but indicated that other campus units have competing resource needs. A capital campaign has been planned to identify funds for building an additional facility for the school so that all programs are co-located within one block.

Space pressures will also be relieved, in part, by the planned move of the law school, which will eventually lead to greater access to classrooms.

The school has eight labs in environmental health science, 10 labs in communication sciences and disorders and 12 labs in exercise science. In addition, school researchers have access to resources for cancer research, brain imaging and coastal environmental and biomolecular research in other nearby university and NOAA-run laboratories. Students appear to be extensively involved in laboratory research conducted by faculty.

The school's computer facilities and resources appear to be adequate for students, faculty and staff. The Columbia campus is covered by wireless service. The school also seems to be well-served by the university's main library. The school's faculty and students also have access to the USC School of Medicine Library.

The school has benefitted from South Carolina's *SmartState Program*, particularly compared to other colleges and schools on campus. The program has funded centers of economic excellence and endowed chairs. The school has five *SmartState* endowed chairs.

The school has identified three outcome measures through which it assesses the adequacy of its personnel and other resources. These measures include number of primary tenure-track/tenured faculty, status of faculty searches and student/advisor ratios. Although some of the identified targets have not been met yet, site visitors determined that the targets are both ambitious and appropriate, and they provide direction to the school moving forward.

#### 1.8 Diversity.

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

This criterion is met with commentary. The school demonstrates a commitment to student, faculty and staff diversity. To reflect the population of the State of South Carolina, the school has identified Black/African-Americans and Hispanics as priority groups for inclusion. The school's measurable objectives for achieving diversity track the proportions of undergraduates, graduate students, faculty and staff who are Black/African-American and/or Hispanic. According to the targets established by the school, there is room for improvement in recruiting Hispanic graduate students and faculty. As of fall 2016, about 6% of the faculty and 25% of the staff are African-American or Hispanic. The school's proportion of African-American and Hispanic students has remained constant at approximately 14% to 15% over the past three years. The school relies on university policies and procedures for supporting a climate free of harassment and discrimination, and for working and learning in a diverse setting.

The school has made a commitment to diversity and inclusion. In 2015, the school named an associate dean for diversity, equity and inclusion, who also chairs the university's Diversity Committee. In the associate dean role, he oversees lecture series and consults with school constituents on a wide range of diversity and inclusion matters. Additionally, the self-study documents numerous courses that focus on issues related to diversity, supporting the assertion that the school's curriculum adequately addresses and builds competency in diversity and cultural considerations. However, the school has not yet adopted and implemented explicit policies and plans to ensure the continued integration of issues related to diversity and cultural competency in the curricula.

The school has developed a draft diversity plan. The draft can be traced to a 2014 faculty strategic planning retreat. In 2015, a full draft plan was prepared, but it has yet to be finalized and implemented. It contains five goals that have been adapted from the university's diversity plan.

Additionally, thus far, the school's efforts to recruit and develop diverse faculty, staff and students have largely been driven by university-level plans, initiatives and resources. The school's associate deans and the Diversity and Inclusion Committee identified opportunities to improve and expand data collection and evaluation on diversity in the self-study and during on-site discussions.

The commentary relates to the lack of progress the school has made in implementing its diversity plan. Within the school, there appears to be a strong base of support and commitment from leaders, faculty and staff to improve diversity and to create an inclusive, welcoming environment for underrepresented groups. Although the school has taken, and continues to take, actions to advance its commitment to diversity, progress in formalizing and documenting a more comprehensive approach has been slow. Although a diversity plan can be traced to 2014, it has not been finalized or implemented. Faculty attributed the lack of progress to competing demands on their time.

#### 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. Table 2 presents the school's degree offerings. The school offers two public health bachelor's degrees: a BS in public health, which requires significant coursework in math and in sciences such as chemistry and biology, and a BA in public health, which requires significant coursework in social sciences, including psychology, sociology and anthropology, as well as economics. Both bachelor's degree programs require an identical 30-credit set of public health courses in the school. The school offers the MPH in the five core public heath areas, in general public health and in public health and

physical activity. The school offers doctoral degrees in all five core public health knowledge areas, with DrPH and PhD degrees in some disciplines, although the DrPH degrees in several disciplines are on hold and/or not accepting new students presently while the school considers their future. The school offers academic master's degrees (MS or MSPH) in four of the five core public health knowledge areas, and the school offers combined MPH degree programs with medicine, pharmacy, social work and public administration.

Review of the curricula for each of the programs of study indicates an appropriate depth of coursework to distinguish each concentration in the public health degrees.

In addition to the public health offerings described above, the school operates very large and long-standing allied health degree programs: a Master of Health Administration, exercise science degrees at bachelor's, master's and doctoral levels; communication sciences and disorders at the master's and doctoral level; and the Doctor of Physical Therapy. The school recently added bachelor's and master's-level athletic training degrees that had been housed in USC's College of Education, but the bachelor's in athletic training is in teach-out mode, as the athletic training field moves toward a future of graduate-level education only by 2022.

Table 2. Degrees Offered		
	Academic	Professional
Bachelor's		
Public Health	BS, BA	
Exercise Science	BS <sup>1</sup>	
Athletic Training	BS <sup>1,2</sup>	
Master's		
Biostatistics (BIOS)	MSPH	MPH
Environmental Health Sciences (ENHS)	MS	MPH
Epidemiology (EPID)	MSPH	MPH
Health Promotion, Education and Behavior (HPEB)	MSPH	MPH <sup>3</sup>
Health Services Policy and Management (HSPM)		MPH <sup>3</sup> , MHA <sup>1</sup>
General Public Health (PUBH)		MPH
Physical Activity and Public Health (EXSC)		MPH
Advanced Athletic Training		MS <sup>1</sup>
Communication Sciences and Disorders		MSP <sup>1</sup> , MCD <sup>1,4</sup>
Exercise Science – Applied Physiology	MS <sup>1</sup>	
Exercise Science – Health Aspects of Physical Activity	MS <sup>1</sup>	
Exercise Science – Rehabilitation Science	MS <sup>1</sup>	
Doctoral Degrees		
Biostatistics (BIOS)	PhD	DrPH
Environmental Health Sciences (ENHS)	PhD	
Epidemiology (EPID)	PhD	
Health Promotion, Education and Behavior (HPEB)	PhD	DrPH
Health Services Policy and Management (HSPM)	PhD	DrPH
Communication Sciences and Disorders	PhD <sup>1</sup>	

Table 2. Degrees Offered		
	Academic	Professional
Exercise Science – Applied Physiology	PhD <sup>1</sup>	
Exercise Science – Health Aspects of Physical Activity	PhD <sup>1</sup>	
Exercise Science – Rehabilitation Science	PhD <sup>1</sup>	
Physical Therapy		DPT <sup>1</sup>
Combined Degrees		
Medicine & General MPH		MD-MPH
Pharmacy & General MPH		PharmD-MPH
Social Work & HPEB MPH		MSW-MPH
Social Work & HSPM MPH		MSW-MPH
Political Science MPA & HSPM MPH		MPA-MPH
Law & MHA		JD-MHA <sup>1</sup>
1 New public health degree		

<sup>&</sup>lt;sup>1</sup> Non-public health degree

#### 2.2 Program Length.

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

This criterion is met. All of the school's MPH degrees require at least 42 semester-credit hours for completion. The university defines a semester-credit as 14 hours of instruction. No students have completed the degree for fewer than 42 semester-credit hours.

## 2.3 Public Health Core Knowledge.

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

This criterion is partially met. MPH students are required to successfully complete five, three-credit courses covering the core public health disciplines, as shown in Table 3. MPH students in the biostatistics and epidemiology concentrations are required to take alternative courses in these core areas that address the same competencies at a higher level. Site visitors' review of syllabi indicate that these courses adequately cover the core public health knowledge areas.

Table 3. Required Courses Addressing Public Health Knowledge Areas for MPH Degree		
Core Knowledge Area	Course Number & Title	
Biostatistics	BIOS 700: Introduction to Biostatistics or	
	BIOS 701: Concepts and Methods of Biostatistics	
Epidemiology	EPID 700: Introduction to Epidemiology or	
	EPID 701: Concepts and Methods of Epidemiology	
Environmental Health Sciences	ENHS 660: Concepts of Environmental Health Sciences	
Social & Behavioral Sciences	HPEB 700: Concepts and Methods in Health Promotion	
Health Services Administration	HSPM 700: Approaches and Concepts of Health Administration	

<sup>&</sup>lt;sup>2</sup> Program in teach-out mode, no new students admitted after 2016

<sup>&</sup>lt;sup>3</sup> Offered in place-based and distance-based modes

<sup>&</sup>lt;sup>4</sup> Offered in distance-based format only

The school has DrPH programs in health promotion, education and behavior; biostatistics; and health services policy and management, although the latter two are not presently accepting students while a comprehensive review of the programs is underway. At the site visit, reviewers learned that faculty and school leaders had not yet made decisions regarding future directions (or discontinuation) for two DrPH programs presently on hold.

The concern relates to the course requirements for the DrPH degrees. The self-study indicates that, while the majority of students enter DrPH programs with an MPH or related master's degree or extensive public health experience, students can technically enroll without documented competence in the core public health disciplines. For instance, the active health promotion, education and behavior DrPH program does not explicitly require any coursework in environmental health, epidemiology or biostatistics, even if there is no evidence of previous attainment of competencies in these areas. Although faculty mentioned that they would likely require a student entering without the requisite coursework to take the introductory public health course, PUBH 700, this course does not provide sufficient depth in core public health knowledge for the DrPH.

#### 2.4 Practical Skills.

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

This criterion is met. The school has an appropriate infrastructure to support the practical skills requirement for MPH and DrPH students. All MPH and DrPH students are required to complete the practicum: the self-study reports that no practicum waivers were awarded in the past three years. The administrative structure of the practica for MPH and DrPH students is largely the same (site applications and memoranda of agreements for sites and preceptors, practicum proposals and final reports required, etc.), although the qualifications for MPH and DrPH preceptors differ appropriately, and the level of experience and deliverables for the two degrees are expected to be different. There are greater expectations for the DrPH practicum; for instance, the Practicum Guide indicates that as part of the DrPH practicum learning objectives for the DrPH in health promotion, education and behavior, the student will "demonstrate the ability to lead the process of creating an organization's vision, mission and goal-setting for the organization, guide decision making, influence and advise others in a way that benefits the organization and build capacity to successfully carry out the mission of the organization."

The school sees the practicum as a "three-way partnership" among student, faculty advisor and preceptor. The Practicum Guide outlines criteria for selection and approval of sites and preceptors. Sites must complete a practicum site application, be approved and agree to a memorandum of agreement. Preceptors at approved sites must have appropriate training (for an MPH practicum: at least a bachelor's degree and two years of experience; for a DrPH practicum: a graduate degree and five years of senior-

level experience). At the site visit, school representatives clarified that an individual with a PhD could be a preceptor for either degree level, so long as s/he was a practitioner with appropriate experience. All first-time preceptors must take an online preceptor/supervisor evaluation. Preceptors without a public health degree are required to take the online Introduction to Public Health.

The self-study details over 80 different agencies/locations and preceptors used for practica over the last two years. Locations include state and local health agencies, school districts, public health-oriented non-profits and hospitals. At the end of the practicum, the experience is evaluated by the student, preceptor and faculty advisor. New practicum sites/preceptors continue to be added, and the reviews of student experiences have led to dropping some sites/preceptors from the program.

The MPH practicum consists of 250 contact hours (six credit hours accrued) over one to two semesters. The DrPH practicum consists of 300 contact hours (six credit hours accrued) over one to three semesters. Students in dual degree (MSW/MPH, MD/MPH, PharmD/MPH) programs may earn up to three practicum credit hours from appropriate external rotations/field placements, as discussed in Criterion 2.13. The self-study provided details of the rotations completed by two preventive medicine residents that completed MPH general public health degrees in the past three years.

The self-study acknowledges the challenge of maintaining rigor and integration of core public health concepts over a wide range of sites/preceptors and proposals. Reviewers learned at the site visit that the requirements recently put in place defining the scope of practicum proposal and final report appear to have resulted in early evidence of improved documentation of achieving practicum objectives and demonstrating program competencies.

#### 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. The procedures used to assess student skills and knowledge integration include elements designed to assess both elements (knowledge and skills). The culminating experience includes oral and written elements.

The culminating experience for most MPH students includes two major components: a paper that arises from the practicum experience and a comprehensive exam. All students complete the practicum project near the end of their programs. Practicum requirements include application of appropriate competencies and integration of knowledge across the public health curriculum. In particular, the purpose of the final report and oral presentation is to allow assessment of the student's learning experience and application of competencies and knowledge. The requirements for the final report are designed to demonstrate the

student's ability to synthesize and integrate knowledge acquired in academic graduate training, including the core competencies, and to apply theory and principles in an experience that represents some aspect of professional practice.

MPH students must also pass a written or oral comprehensive examination. These examinations are administered and evaluated by individual departments for their students. The MPH programs in BIOS, EPID, HPEB, and EXSC require a written comprehensive exam that focuses on required coursework. The MPH programs in EHNS and HSPM conduct an oral comprehensive examination after the paper presentation that addresses knowledge learned by the student from coursework.

DrPH students must satisfactorily complete a comprehensive exam with both written and oral components and conduct research to complete a dissertation as the culminating experience. In HPEB and HSPM, the written portion of the comprehensive exam is satisfied by the written dissertation proposal. BIOS DrPH students take a separate written comprehensive exam. In all cases, the oral exam is conducted at the end of the proposal defense.

#### 2.6 Required Competencies.

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

This criterion is met with commentary. The school has well-organized competency mapping for all of its degree programs and concentrations. At the baccalaureate level, both BA and BS programs share the same set of nine core competencies. In the concentration competencies, the BA program places more emphasis on social and behavioral sciences, whereas the BS program places more emphasis on natural sciences. The school's MPH and DrPH programs each share a set of five core competencies across all concentrations. All MPH and DrPH programs have additional competencies that address concentration-specific requirements.

There is no single set of school-wide MS or PhD competencies. The school's four MS programs have distinct sets of competencies that differ in number: MSPH in biostatistics (n=8), MS in environmental health sciences (n=4), MSPH in epidemiology (n=11) and MSPH in health promotion, education and behavior (n=5). The school's five PhD programs also have distinct sets of competencies that differ in number: biostatistics (n=5), environmental health sciences (n=5), epidemiology (n=6), health promotion, education and behavior (n=4), and health services policy and management (n=4).

Core competencies for the BA and BS programs were developed by a school-wide committee and the associate dean for undergraduate student affairs. In AY 2010-11, core competencies for the MPH and

DrPH programs were developed by the directors of these programs and the senior associate dean for academic affairs. Since that time, revisions to program-specific competencies have been made at the department level. The school uses competencies in course development, identification of course learning outcomes and requirements, examinations, culminating experiences and in academic program assessment.

In the past two years, some competencies were revised during the annual academic program assessment process, which takes place at the department level. Competency revisions were made in health services policy and management, epidemiology, biostatistics, environmental health sciences and other programs.

The school relies on a variety of formal and informal processes and practices to monitor, evaluate and revise competencies on an ongoing basis to ensure that programs of study meet the needs of the public health community. Departmental curriculum committees are responsible for monitoring and revising competencies as disciplines and students' needs change over time. These committees rely on formal and informal communication with practice experience supervisors, alumni, students (via satisfaction surveys) and employers. Committee recommendations for competency revision must be approved by department faculty. The school's director of workforce development may be involved in this process. Major curricular changes must be reviewed and approved by the University Graduate Council (graduate curricula) or by the Faculty Senate (undergraduate curricula).

The school plans to be in compliance with the foundational competencies identified in the new CEPH accreditation criteria by January 2018.

The commentary relates to the extent to which the faculty, including the program directors, are familiar with competency use. Although the competencies are diligently mapped to school courses in the self-study, faculty and program directors were not able to articulate how they relate to curriculum development and revision and how they guide instructional activity. Most faculty could describe the school's assessment plan, which identifies a curricular assessment activity for each competency, but this appeared to be the only example that most faculty could provide of how competencies relate to curricula.

#### 2.7 Assessment Procedures.

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

This criterion is met. The school has a well-defined system for tracking student competency attainment at both the undergraduate and graduate levels. The school identifies course-level activities, grades, exams, practice experiences and final projects for each program and degree level.

Evaluations of student performance in elements such as the MPH practice experience and comprehensive examination are tailored to ensure assessment in terms of the school's identified competencies. As noted in Criterion 2.6, not all faculty who met with site visitors seemed similarly engaged with and familiar with competencies, and some faculty who teach and/or advise MPH students could not describe any methods of assessing student competency other than noting that all syllabi are mapped to competencies (a process that some did not participate in directly and could not describe) and could not explain how the practice and culminating experiences assess competencies. However, site visitors also met with faculty who are more directly involved in setting up and assessing student practice experiences and oral or written comprehensive exams, and these individuals explained the ways in which the online system for practice experiences make competency assessment explicit and transparent for faculty, students and preceptors. Other faculty explained how written or oral comprehensive exams for MPH students are designed with specific competency integration in mind.

The school also tracks aggregate measures of student success, including graduation rates, post-graduation outcomes (securing employment or enrolling in additional education within one year of graduation), GPA and percentage of undergraduate students earning a degree with highest honors. The school meets or exceeds all of its aggregate measures. Eighty-nine percent to 92% of bachelor's students graduate within two years of entering into senior status in the major, and, for the most recent year of data, only 9% of bachelor's degree graduates were still seeking employment one year after graduation. In 2015-16, the school achieved its target of 5% of bachelor's students graduating summa cum laude. The school plans to continue to refine its methods for collecting valid information on post-graduation outcomes for bachelor's degree students. The school has already begun supplementing the university-level survey with school-collected data, but the overall response rate (62%)—defined as the number of graduates with known outcomes—is much lower than the school's response rates for other degree levels.

Master's and doctoral students' GPA at graduation exceed the school's target of 3.8, and only 2% of alumni of the school's graduate degrees are still seeking employment one year after graduation. Overall graduation rates for each degree level exceed the school's target. Over the last three years, 87-92% of master's students have graduated within six years of matriculation, and 79-90% of doctoral students have graduated within eight years of matriculation. Broken down by degree, the MPH has a 93% graduation rate for the most recent cohort, and the MS/MSPH has an 81% graduation rate. The public health PhD programs have an 89% graduation rate.

The DrPH degree's graduation rate stands at 33% for the most recent cohort to reach the maximum time to graduation. This data point is the result of a small cohort (six students). Over the full period reported in the self-study document, DrPH graduation rates vary, with consistently small cohort sizes. The cohort that

entered in 2009, which has not yet reached the maximum time to graduation, has already met this criterion's 60% graduation rate, with an additional student still enrolled and progressing toward graduation, suggesting that this cohort will surpass this criterion's threshold. In the following cohort, the DrPH program admitted only one new student, and that student has already graduated, for a 100% rate. The school undertook a substantial revision of its DrPH degree programs in 2010-11, and some withdrawals in past cohorts, including the cohort that most recently reached the maximum time to graduation, relate to a short-lived (now discontinued) DrPH program for international students. Because of small entering classes, each withdrawal stands to impact the rate heavily, so the school must maintain vigilance, from its recruitment and admissions policies through its ongoing advising of DrPH students.

The school collects additional data on student outcomes through compiling data from alumni and employers of graduates. The school surveys both populations, and a recent employer survey produced 33 results (a 57% response rate). The employer survey asked both Likert scale and open-ended questions, and most respondents agreed that students were very well prepared or well prepared for job requirements. Employers made suggestions on areas for possible strategies to prepare students for employment; suggestions included practice writing grants and increasing students' experience with analyzing publicly available datasets. Alumni surveys indicate increasing levels of self-assessed satisfaction with the school's preparation in specific topic areas.

#### 2.8 Other Graduate Professional Degrees.

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

This criterion is met. The school offers four graduate professional degrees in allied health professions: Master of Health Administration (MHA), Master of Communication Disorders (MCD), Master of Speech Pathology (MSP) and Doctor of Physical Therapy (DPT). In addition, the MS in advanced athletic training was transferred from the College of Education to the Arnold School of Public Health in July 2016.

Students in the MHA, MCD, MSP, and DPT programs are required to take PUBH 700, Perspectives in Public Health. This three-credit online course provides an orientation to the history, mission and core services and disciplines of public health to develop understanding of current public health practice and how many health-related disciplines contribute to achieving public health goals. Site visitors reviewed the syllabus and verified the course's provision of basic public health knowledge.

When the MS in advanced athletic training was transferred into the school, it did not require any coursework related to public health orientation, but a curricular change had already been approved, implemented and documented at the time of the site visit. Students matriculating into this program in fall 2017 or later are required to take PUBH 700.

## 2.9 Bachelor's Degrees in Public Health.

The overall undergraduate curriculum (eg, 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 (ie, 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 (eg, 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 school's BA and BS degree programs require 120 credits, including 30 hours of required public health major courses for both degrees.

Both bachelor's degrees include appropriate foundational and general knowledge in biological and life sciences, basic statistics, social sciences and humanities.

The 30 credits of major-specific curriculum include courses in epidemiology, health promotion, health economics, health management, community health problems, environmental pollution and health and physical activity and health. The self-study documents appropriate coverage of eight of the nine public health domains.

Site visitors initially encountered difficulty verifying appropriate depth of coverage for the second domain, which relates to the role and importance of data in public health. The self-study cites the required courses in epidemiology and physical activity and health as the primary means for covering this domain, with facets (concepts and methods of data collection) also covered in the introduction to public health course. While the required curriculum clearly addresses some aspects of this domain, such as the role of evidence in public health, the syllabi for the courses did not allow reviewers to verify coverage of other facets, specifically data collection tools, usage and analysis. During the site visit, reviewers met with bachelor's degree students and faculty involved in these courses, and they were able to provide numerous specific examples from the health and physical activity course, in particular, in which students practice collecting measures such as weight/BMI, blood pressure, etc. in a way that would be appropriate for use in a scientific study. A student currently enrolled in the epidemiology class said that he was

currently preparing for an examination that covered study design and related concepts of data usage and analysis. Other students and alumni and a graduate student who had served as a teaching assistant for the undergraduate epidemiology course suggested that coverage of some facets of this domain may not always be covered consistently in different offerings of the undergraduate epidemiology class, but they agreed that the health and physical activity course addressed the concepts.

The self-study provides clear documentation of methods through which the school assesses students' competencies on communication and synthesis of public health information. The required courses involve in-class oral presentations and community-based oral presentations, and students complete a wide range of written assignments, including reflection papers, research papers and annotated bibliographies. Students also complete a YouTube video in one class and infographics, newsletters and other media. Many of these same requirements allow the school to assess students' information literacy.

The school also assesses student performance and provides cumulative and experiential activities through the senior capstone seminar. In the course, students reflect, in discussion and papers, on their coursework and competencies as well as strengths, areas for growth and post-graduation goals. They develop individualized project plans and complete a minimum of 50 hours of project work outside the classroom. The out-of-class projects relate to students' future goals and have included activities such as volunteering at a non-profit organization, providing medical translation at a community clinic and training medical office staff in a new electronic record system. Students prepare a final reflection paper, oral presentation and electronic portfolio.

Finally, the self-study documents a wide array of opportunities through which the school provides students with exposure to cross-cutting domains such as community dynamics, ethical decision making, professionalism and systems thinking. Many of the cross-cutting domains are addressed in required coursework, ensuring that all students receive the exposure. The school supplements the required curriculum with elements such as the monthly undergraduate professional development seminars, coordinated by the Office of Undergraduate Student Services.

Students and alumni who met with site visitors were extremely satisfied with their preparation. One student had already been accepted into medical school, and he remarked how pleased he was to have skills that he would not have received with a more conventional undergraduate preparation in biology or biochemistry. Other students and alumni planned to, or were already, pursuing additional study or careers in public health and felt well-prepared for their endeavors.

#### 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 school offers a BS in exercise science and a BS in athletic training. Students in the BS in exercise science must complete both PUBH 102: Introduction to Public Health and EPID 410: Principles of Epidemiology. Site visitors reviewed the syllabi and verified that they provide an appropriate grounding in basic public health knowledge.

The BS in athletic training was moved into the school from the College of Education in July 2016. Because the BS in athletic training was moved into the school in July 2016 and is now in teach-out mode (ie, no new students have been enrolled or will be allowed to enroll in the future), the school is unable to add a requirement for students to acquire a public health orientation. The reason that this degree is in phase-out mode is that beginning in 2022, the athletic training accrediting body will no longer recognize the BS in athletic training as an entry degree into athletic training, shifting accreditation to master's-level degree programs. The final students in the baccalaureate program should graduate by 2020. Since students matriculated in their degree programs prior to the degree's move to the school, the university is bound to follow the degree requirements in place when students matriculated. There is no scenario in which the school will continue to offer the degree program to newly enrolling students in the future, so this degree program's noncompliance with this criterion is moot.

#### 2.11 Academic Degrees.

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

This criterion is met. The school offers academic degrees at the master's and doctoral levels, including in exercise science and communication sciences and disorders. All students in the academic degree programs are required to take Perspectives in Public Health (PUBH 700). This course is designed to provide a broad understanding of public health and how each health-related discipline contributes to public health. In addition, all students in these academic programs are required to complete one of two introductory courses in epidemiology to ensure a foundation in the basic principles and applications of epidemiology.

Faculty indicated that the MS and MSPH programs were the preferred preparation for PhD programs in public health. Faculty in environmental health shared this general view, but they noted that some MPH graduates have been successful in their PhD program, and they were thus reluctant to rule them out as candidates for doctoral study.

With one exception, students in academic programs at the master's and doctoral levels are required to complete a comprehensive examination and a thesis/dissertation. In the MS program in exercise science,

students have the option of completing an applied project in lieu of a thesis. Faculty noted that PhD dissertations must be based on original research that address an important problem in the discipline.

## 2.12 Doctoral Degrees.

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

This criterion is met. The school exceeds this criterion's requirement to offer at least three doctoral degree programs relevant to core public health knowledge areas, with seven PhD and three DrPH degree programs. As previously noted, two of the DrPH programs of study have been put on hold for admitting new students until a review is completed. The review will focus, in large measure, on the viability of aligning these programs of study with requirements in the 2016 accreditation criteria.

The school offers an appropriate depth of doctoral-level coursework in each discipline in which such degrees are offered. The school also provides appropriate doctoral-level support services, including opportunities to engage in advanced practice and research appropriate to the degree goal.

## 2.13 Joint Degrees.

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

This criterion is met with commentary. The school offers four degrees that combine the MPH with a degree program outside the school. Students may combine the MPH in health services policy and management or the MPH in health promotion, education and behavior with the university's Master of Social Work. Students may combine the general MPH with the university's MD program or with the MD program at the Medical University of South Carolina, though the option at the latter location is phasing out. Students may also combine the general MPH with the PharmD at the university's pharmacy school. Finally, students may combine the MPH in health services policy and management with the university's Master of Public Administration, housed in the political science department.

For each combined degree program, the school has identified mechanisms for sharing credits between the two degrees. For the combined degrees with the MSW, nine MPH credits count toward requirements for the social work degree, and nine to 12 credits from the MSW count toward the MPH degree. Faculty reviewed the syllabi for the social work classes to determine either equivalency to the MPH degree (eg, the social work research methods class substitutes for the public health research methods class) or alignment with MPH competencies (eg, a course in social work practice with organizations groups, which focuses on topics such as building coalitions and understanding communities, counts as an MPH elective).

For the combined degree with pharmacy, students apply six credits of pharmacy coursework to the six required elective credits for the MPH. Faculty have reviewed syllabi for the pharmacy classes to validate alignment with public health competencies and approved a list of seven pharmacy classes, including outcomes design and assessment and pharmacy political advocacy. The faculty approved the pharmacy courses for varying levels of transfer credit-for example, a given pharmacy course might only count as one or two credits, and the credit decisions are based on the number of credits awarded by the pharmacy school. This restriction does appear to serve as a safeguard, since site visitors' review of syllabi from pharmacy courses suggest that not all have sufficient depth in concepts that align with public health competencies to warrant award of three credits toward the public health degree. For example, the Introduction to Pharmacy Practice course may count as two elective MPH credits. This course has seven sessions that focus on health behavior, including sessions dedicated to the health belief model and the transtheoretical model, as well as sessions focusing on psychosocial theories in the context of medication adherence. Some sessions of this pharmacy course focus on health disparities and on effectiveness research, all topics that lend themselves to alignment with public health competencies. Other sessions, however, focus on the history of pharmacy and on pharmacy as a profession, topics that are less likely to align with public health competencies, so substituting a full three credits of public health coursework for this course would not be appropriate.

For the combined public administration degree, students count six public health credits toward the MPA degree and six public administration credits toward the MPH degree. Site visitors reviewed the syllabi, and they address topics that appear to align well with public health competencies in terms of skill and general public sector orientation: financial administration and budgeting, research methods, etc.

The commentary relates to the combined MD-MPH, which has a less standardized or formulaic approach to credit sharing and requires more vigilance to ensure the integrity of the MPH curriculum. This is particularly important since some school faculty indicated an interest in publicizing this degree program more widely in future years. In this degree program, each student's advisor approves up to nine hours of medical school credits to apply toward the general MPH degree. Since the plan is customized, site visitors could not review syllabi, and the current director of the program has newly assumed the role and was less familiar with the specifics of credit sharing. A previous school administrator had performed a rigorous review of the medical school coursework several years ago, but curricula can evolve over time. At up to nine credits, this combined degree option has a significant amount of credit sharing toward the MPH degree, and it is important that faculty approving the shared credits remain attentive to the specific syllabus for each medical school course that is to count for MPH credit to ensure that these students do not receive a degree that is less rigorous in its coverage and reinforcement of public health competencies.

## 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 with commentary. The school offers distance education MPH degrees in two fields of study and also offers a distance education version of the Master of Speech Pathology (MSP) program.

The degree requirements are the same for the distance education versions as compared with the oncampus versions. The MPH in HPEB courses were adapted by an outside vendor, who is also responsible for marketing the degree program. Data from the self-study indicated a steady and substantial increase in enrollment in the MPH in HPEB but a sharp decline of new students into the distance-based offering in HSPM.

The first area of commentary relates to sharp enrollment fluctuations in the online MPH programs of study. School leaders speculated that enrollment fluctuation may be related to a lack of consistent marketing by the contracted vendor and noted that the vendor has made a commitment to increase marketing. The school noted that the university has another six years under contract with the external vendor. School leaders also cited gaps in curricular offerings for the distance-based HSPM degree. In order to complete the full range of curricular offerings, many students in this degree program must generally travel to campus for at least some components of the curriculum, and faculty cite this as a potentially discouraging factor for practicing health professionals who may have competing work or clinic schedules.

Additional commentary relates to the fact that the school has had too few students in the MPH distance programs to be able to fully assess the comparability of competency development and knowledge with students from the school's place-based MPH programs. The school has relied on interim measures, including course-level assessments, course evaluations and student progression and expects to be able to complete more robust evaluation within the next few years.

The distance-based degree offerings all have measures in place to validate student identity, including unique logins and passwords.

#### 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.

The criterion is met. One of the school's primary goals is to "achieve and maintain research excellence as demonstrated by the creation of knowledge of high impact and importance to public health." All tenure-track and research faculty are expected to conduct research and other scholarly activities. The self-study reports that research dollars in FY 2016 per full-time, tenure-track faculty member were about \$307,000, the highest per capita funding in the university.

Dollars in extramural research funding requests, extramural funding awarded and peer-reviewed publications have all substantially increased since the last accreditation review. The school's total dollar amount of extramural research funding has increased from \$18.7 million in FY 2012-13 to \$27.4 million in FY 2015-16. There has also been an increase in NIH funding over the same period (\$10.6 million to \$13.8 million). Included in this funding are several major awards from NIH, NSF and the CDC. The number of peer-reviewed publications has increased substantially over the same period (339 to 536), as has the number of publications that include multiple Arnold School authors, a measure of collaboration.

The school conducts research over a wide range of public health issues, much of this research conducted through centers. Some programs of note include the Cancer Prevention and Control Program, the Center for Research in Nutrition and Health Disparities, the Alzheimer's Disease registry, the USC Prevention Research Center and the South Carolina Rural Health Research Center. The Prevention Research Center is one of 26 funded by the CDC; the Rural Health Research Center is one of eight funded by HRSA.

In another significant development since the last accreditation review, site visitors note that the school has five SmartState endowed chairs in five SmartState Centers. The SmartState program was established in 2002, and there are now 55 centers throughout all of South Carolina's research universities. The school-based centers are in environmental nanoscience and risk; health quality; effectiveness research in orthopedics; seniors' health; and health technology. At the site visit, reviewers heard from two SmartState chairs how important the funds had been in advancing their research agendas.

The school faculty has successfully competed for university breakthrough awards. Breakthrough Leadership in Research awards (two in 2016; one in 2017) go to senior faculty involved in research-oriented activities, including mentoring under-represented minorities, collaborating with colleagues across disciplines and reaching out to the community. Breakthrough Stars awards (one in 2015; two in 2106; two in 2017) recognize early-career faculty who show great success in research and other scholarly activity. At the site visit, reviewers heard of the importance of these breakthrough awards in bringing recognition and visibility of Arnold School research to the university community.

The university and the school provide considerable infrastructure support for research activities, including the following:

- University Office of Sponsored Awards Management: the administration office for sponsored awards (research and non-research)
- University Office of Research Compliance: responsibility for human research subject policies and procedures (IRB, conflicts of interest, regulatory compliance, etc.)
- University Office of Research and Grant Development: external funding resources and guidance (information on funding opportunities, limited submissions, campus resources, collaborative partners)
- School Office of Research and Research Support Core: provides pre- and post-award services, conducts grant funding workshops, provides pre-submission application peer review
- School academic department and centers: provide pre- and post-award grant support

At the site visit, reviewers learned that departments provide basic pre- and post-award services. Under the Office of Research, the staff in the Research Support Core provide proposal budget development and editing services as requested, review all proposal budgets and sign off for the school on all internal university approval forms prior to submission; and the university-level officers assure that institution-wide standards are met, submit proposals to sponsors and, in consultation with principal investigators and sponsors, negotiate budgets and set up accounts for funded proposals.

Students participate in the school's research as research assistants and/or through conduct of their own research. Research assistantships have been available with an extremely diverse group of external organizations and agencies. The self-study indicates that students are involved in 76% of the research listed in the self-study document. Of note, five doctoral students have secured extramural funding for their own research, and a number of doctoral students have secured university-sponsored research funding. When meeting with students, the site visit team heard about many opportunities students had to participate in research and their very positive experiences.

#### 3.2 Service.

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

This criterion is met. Service is one of the primary missions of the university and school. In the school, service to the community is wide-ranging. A large number of faculty, staff and students are involved in numerous activities that support public health organizations, particularly in the State of South Carolina. In the last three years, 89 faculty members (or 69.5% of the school's primary faculty) have participated in non-funded service activities. The school recognizes one faculty member each year with the Faculty Service Award. Tenure-track faculty are evaluated each year on their contributions to service in three categories: service to the university, service to their disciplines and service to the community. Research and clinical faculty also demonstrate a high degree of involvement in community service. School professional staff in the Consortium for Latino Immigration Studies, Core for Applied Research and Evaluation and Office for the Study of Aging, among others, also make significant contributions to community service. The self-study documents an extensive list of recent community service projects.

The school has five outcome measures and FY 2019-20 targets for community engagement and service. The targets are set relatively high. At this time, the school either meets the targets or is close to meeting the targets. For example, one outcome measure is "percentage of funded service projects with community engagement" with a FY 2019-20 target of 75%. In In FY 2015-16, the school had surpassed the target with 78% of funded service projects having had community engagement.

Faculty indicated that students have ample opportunities for involvement in community-based activities, and many students participate. In FY 2015-16, 71% of the school's funded service projects involved students. Examples include Latino community outreach and teen pregnancy prevention programs.

According to community stakeholders, faculty are accessible, responsive to practicum preceptors and other community partners and willing to make presentations in the community. However, there was interest among community stakeholders to identify more ways for the school to interact with the community. Community stakeholders supported the creation of a community advisory board and the introduction of an electronic newsletter to facilitate communication. A USC faculty member from biological sciences suggested that the school should consider investing in public health genomics as a way to form a bridge with the community and future advances in personalized medicine.

State contracts and grants support much of the school's funded service activity. A substantial amount of the funded community service activity now focuses on building capacity for quality improvement in state and local public health agencies. In the area of nutrition, capacity building also focuses on advocacy and policy development. In aging, faculty activity tends to focus on training and workshops for caregivers. The school is well recognized for its pregnancy prevention projects.

The faculty indicated that the university's Grants and Contracts Office, IRB and legal counsel were supportive of their community-based service and other work.

The school recognizes several challenges related to this criterion. First, there is no single system in place for tracking and reporting the school's service activities. Second, the school has no clear and consistent approach for communicating and promoting its involvement in community service. School leaders hope to address these issues in the near future.

## 3.3 Workforce Development.

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

This criterion is met. The school has appropriate practices, policies, procedures and evaluation plans related to its workforce development activities. The Arnold School assesses the needs of the state and local public health workforces formally and informally, typically in collaboration with the state's Department of Health and Environmental Control (SC DHEC). A full assessment of workforce needs and preferences for continuing education was conducted in 2012, following up on a similar activity conducted in 2003. Reviewers learned at the site visit that a follow-up re-assessment is presently ongoing in conjunction with the DHEC's PHAB accreditation review.

As a result of existing assessment data, the school has made changes to its workforce development offerings, including updating content and moving material from facilitator-led synchronous delivery via distance education to completely online, self-paced delivery. At the site visit, reviewers learned that the evaluations of the fully online courses have been better than those associated with the prior course format.

Faculty have sought and received extramural funding for training and continuing education activities. Workforce development activities include a Continuing Education Certificate in Public Health Practice, consisting of five courses (evidence-based public health; data skills for public health; community engagement; financial management; and public health policy and advocacy). This continuing education certificate is not a university degree. The school also offers a Certificate of Graduate Study in Public Health. At the site visit, it was clarified that university rules preclude students from applying credits to both the graduate certificate and toward an MPH. Graduate certificate students who decide to get an MPH degree cannot complete the certificate program, or their courses will not transfer.

The Arnold School also offers a Certificate of Graduate Study in Health Communications. The school collaborates on certificate programs in gerontology (offered by the College of Social Work) and in drug and addiction studies (also with the College of Social Work), although these certificate programs are directed primarily to university students rather than the workforce.

In addition to the coursework available through the certificate programs, the Arnold School has developed and maintains 68 very popular QuickLearn modules, shorter sections of certificate program courses that can be taken individually as "how to" refreshers (eg, case-control studies; community assessment minitutorials; evaluating evidence). As a result of a South Carolina Institute of Medicine and Public Health 2015 Report on improving long-term care, the Arnold School Office for Aging led the development of 10 online courses for the state's Medicare-Medicaid plan care coordinators.

The school's Core for Applied Research and Evaluation (CORE) program collaborates with community partners and, in the process, provides workforce development. With up to 30 projects per year, about \$1 million in funding and little financial support required from the school, this is a valuable self-supporting resource to the community.

## 4.0 FACULTY, STAFF AND STUDENTS.

## 4.1 Faculty Qualifications.

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

This criterion is met. The 128 full-time university faculty with 100% appointments in the school are considered primary faculty. Teaching and mentoring students is a fundamental component of primary faculty's expectations. Among the primary faculty, 47 (37%) are tenured (including 26 full professors), 38 (30%) are tenure track and 43 (34%) are non-tenure track clinical and instructional faculty. There are 20 secondary faculty and 55 part-time instructors who teach on a regular basis. The secondary faculty includes two tenured faculty with appointments in other schools, five part-time faculty, and 13 full-time research faculty.

Faculty members integrate practice perspectives into all major activities of the school (teaching, research and service), and public health practitioners serve as instructors, lecturers, research collaborators and student preceptors. Teaching modalities by which students are acquainted with the realities of public health practice include guest lectures, case studies, off-campus site visits, special projects for public health organizations and independent studies on selected aspects of public health practice. Many research projects are directly related to practice, and many are collaborations with public health organizations. The importance of practical research is recognized in tenure and promotion decisions by according equal weight to applied scholarly works and theoretical works. Students are involved in many of the school's research and service projects.

Qualifications of full-time faculty are very high and reflect a successful process of recruiting and retaining faculty. The self-study and on-site discussions noted that retention of highly recognized faculty has

sometimes been an issue. However, with help from the provost, most have recently been retained. In general, faculty who met with the site visit team were very positive about their experience in the school and the degree of involvement and ability to have their views considered.

For almost all of the school's self-defined indicators of quality of faculty, the targets were met or very close to being met. On the measure of percentage of faculty receiving satisfactory or above ratings on peer reviews of teaching, the targeted measure was met.

## 4.2 Faculty Policies and Procedures.

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

This criterion is met. The USC Faculty Manual identifies rules and regulations for faculty employment, including those that pertain to tenure and promotion and affirmative action policy. The USC Policies and Procedures Manual describes faculty policies for recruitment and hiring, equal opportunity, affirmative action, complaint processing, sexual harassment, discriminatory harassment and non-discrimination. The school's specific procedures for applying these university policies are located at the faculty affairs webpage. Each year, the school orients new faculty members to its policies and procedures and to resource support for research. Faculty who met with site visitors indicated that the new faculty orientation was helpful.

The school provides third-year evaluation reviews to all tenure-track faculty. Faculty who met with site visitors perceived these reviews to be a very important step in preparing them for subsequent evaluation for promotion and tenure. Post-tenure review has existed in the school since 1999.

The school has developed review procedures for research and clinical faculty in the non-tenure track. These policies and procedures address multi-year appointments, voting rights and authority to direct student research and practice.

At the school level, faculty development opportunities include new faculty orientation, a mentorship program for tenure-track faculty and funding for attending professional conferences. At the university level, other resources are available for faculty development including the Center for Teaching Excellence, the New Faculty Academy (faculty orientation and mentoring), a leadership development program for faculty, a research mentoring program and other faculty opportunities. Faculty who met with site visitors indicated that they hold the Center for Teaching Excellence in high regard.

All faculty members in the school receive an annual evaluation. The evaluation is based on a review of documents submitted by the faculty member, who summarizes the past year's accomplishments in

teaching, research and service. Department chairs review these documents and evaluate faculty performance based on the track and rank of the faculty member. Department chairs discuss strengths, weaknesses and goals with each faculty member. Chair evaluations are used in decisions about faculty retention and merit raises. The school's Tenure and Promotion Committee also reviews faculty annual evaluations for tenured and tenure-track faculty below the rank of full professor. These reviews are summarized in letters sent to the faculty member. In addition, the school's Promotion and Tenure Committee conducts third-year reviews for tenure-track faculty and six-year reviews for tenured faculty. The annual evaluations of non-tenure-track faculty are used by department chairs to make decisions about their appointments.

The tenure and promotion unit is the school, which has a single set of criteria for evaluating a faculty member's suitability for tenure and promotion. Non-tenured assistant professors have a seven-year probationary period. Non-tenured associate professors have a six-year probationary period. There are provisions for a faculty member to apply for tenure early and for requesting an extension of the probationary period. Faculty members who wish to be considered for tenure and/or promotion submit a file of materials documenting their accomplishments in teaching, research and service. These files include letters from five external reviewers. School criteria require that tenure at or promotion to associate professor requires that the faculty candidate be rated excellent in scholarship and at least good in teaching and service. Tenure at or promotion to full professor requires that the candidate be excellent in scholarship and teaching and good or excellent in service. All eligible members of the school's Tenure and Promotion Committee vote and provide a written justification for their votes. These written documents are forwarded to the dean, who submits his own letter of evaluation to the candidate's file. The entire candidate file is then submitted to the USC provost. The candidate's file is then reviewed by the 24member USC Committee on Tenure and Promotion and the university president. The president may then make a recommendation for approval of tenure to the USC Board of Trustees. The faculty candidate may appeal the school or president's decision.

To assess the instructional effectiveness of faculty, the school relies on student self-report questionnaires as well as peer review of classroom teaching. The school's student survey has 31 Likert-type items, other questions and five questions allowing for open-ended responses. A total of 13 questions are required by university policy. These self-report questionnaires are administered online. Students are repeatedly prompted by email to respond to the surveys but are ultimately not required to do so. The data are used by departments to improve the quality of their courses. The faculty report that the results of the student surveys are taken seriously and play an important role in promotion and tenure decisions.

Tenure-track faculty have their classroom teaching evaluated by a peer at least once a year. Tenured faculty members are reviewed in the classroom every two to three years. Non-tenure-track faculty

members are reviewed periodically or at the request of a department chair. Peer reviewers are assigned by the Dean's Office. Faculty indicated that the peer reviews of teaching have been extremely useful. In the promotion and tenure process, there also is a review of the teaching materials used by faculty members.

#### 4.3 Student Recruitment and Admissions.

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

This criterion is met. The university's Office of Admissions oversees student recruitment and matriculation at the undergraduate level. School faculty and advisors participate in campus activities for both prospective and current students and respond to individual requests for information or presentations. Recruitment activities for most of the graduate programs within the school are coordinated through the Office of Graduate Student Services. Graduate recruitment takes place on international, national, regional and state levels through a variety of ongoing activities, including regular recruitment at scientific and professional meetings, college graduate school/career fairs, email, chat-room, Skype correspondence and via school web and social media outlets. Faculty and staff said on site that recruitment activities were substantial and effective, resulting in a strong pool of potential students.

The proportion of acceptances and admissions vary considerably across the degree programs, with some MPH and DrPH programs having lower-than-desired yields of students who matriculate after receiving offers of admissions. Some of the degree programs have relatively low enrollments. Faculty who met with site visitors noted that some DrPH and MPH students switch to academic degrees (PhD and MSPH) because of the perception that academic degrees are more valued and because some academic degrees have lower course hour requirements.

Most of the school's self-defined outcome measures for enrolling a qualified student body are met or very close to being met. SAT scores for undergraduate students and GRE averages are slightly below the target levels, but the school continues to refine its recruitment and admissions efforts to improve performance.

## 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. Orientation for undergraduate students is coordinated by the university's Office of Admissions, but school faculty and staff members participate in sessions focusing on programs and specific academic procedures within the school. The school is moving to a hybrid model of undergraduate academic advising, which includes full-time professional advising staff and faculty advisors working in

tandem. Staff selected for undergraduate advising responsibilities hold master's or doctoral-level degrees in higher education, public health or related fields. All newly hired undergraduate advisors (faculty and professional advising staff) spend a minimum of one month observing experienced advisors and learning the curriculum. In addition, USC's University Advising Center requires that all undergraduate advisors complete online modules developed around national best practices. The center also offers an annual conference and monthly forums on selected advising topics. New advisors are being added to address the large increase in the number of undergraduate students.

School-wide orientation for all new graduate students is held in August each year, prior to the beginning of the fall semester. This is an all-day event consisting of two parts. The morning program is coordinated by the Office of Graduate Student Services with assistance from the Dean's Student Advisory Council. This session begins with a welcome message from the dean and an overview of expectations of new graduate students, including guidelines for academic integrity, respect for diversity and student safety. The remainder of the session familiarizes students with the university and school (eg, parking, ID cards, library resources, fitness and wellness programs, student organizations, registration instructions, important dates, etc.) and gives them the opportunity to ask general questions. Afternoon breakout sessions are conducted by chairs and graduate directors and include an introduction of the faculty and staff, an overview of departmental policies and procedures and assistance completing advisement forms for students to register for the first semester of courses.

The graduate directors in each department or program of study provide oversight to the advising process and make information available to faculty to ensure that graduate students receive timely, quality advisement. They are assisted by departmental staff mostly for non-academic programming issues or problems students may have with university policies and procedures. Advising methods used vary by department, but all include faculty meetings and training for new faculty. Each graduate student is assigned a faculty academic advisor with whom he or she typically works for the entire program of study. Efforts are made to assign students, especially doctoral students, to a faculty advisor with similar interests, although there is no requirement that students work with their academic advisors for their practicum or research project. Students meet with their academic advisors at least once each semester to plan their program of study and coursework for the following semester. Students are advised concerning appropriate courses, sequencing of courses, independent study topics, thesis or project/practicum topics, graduate assistantships and any additional work appropriate for preparing the student to meet career objectives. Staff coordinate the process of registration for courses, ensuring any prerequisites are met and any permissions obtained.

Satisfaction with academic advising is high for both undergraduate and graduate students. Each semester, undergraduate public health majors are asked to complete an online undergraduate advising

satisfaction survey immediately following their advising appointment. The survey contains seven Likert-type questions and three open-ended questions. On average, students have consistently rated their advisors and advising experience highly across all seven questions. The mean response to the item "To what degree are you satisfied with your overall advising experience in public health?" has ranged from 4.3-4.7 out of 5.0. Qualitative results from the survey often highlight advisors' strengths and identify areas for improvement. In the qualitative report, students often complement the knowledge of the advisors regarding graduate school, extracurricular activities and career options.

The undergraduate exit survey asks students the extent to which they agree with the statement "Advisement was adequately provided throughout my program" and "My advisor has been supportive of me during my program." In AY 2015-16, the average response to each question was 3.4 out of 4.0, which is consistent with the responses to the undergraduate advising satisfaction survey.

The graduate exit survey asks students the extent to which they agree with the statement "Advisement was adequately provided throughout my program." In AY 2015-16, the average response for all students was 3.2 out of 4.0 (3.13 for master's students; 3.40 for doctoral students). Responses to these questions and comments from students suggest some variability in the quality of advisement across programs, with special challenges in the dual degree programs, where some students were somewhat confused about practicum requirements. These issues appear to have been resolved. The self-study indicated a desire to improve the assessment of satisfaction with advising and career counseling in the future.

School alumni were asked about advising and career services provided by the school. Satisfaction with "advising and student services" and "assistance by faculty in pursuing your career" were all rated as 3.0 or higher out of 4.0 by both master's and doctoral alumni. This level of satisfaction is generally higher among doctoral than master's students. The lowest ratings were for satisfaction with "assistance in finding employment." Master's graduates had substantially lower ratings than doctoral graduates (2.6 vs. 3.4) on the item related to assistance in finding employment.

The school has a comprehensive system of methods to address student complaints. The Dean's Student Advisory Council is charged as a liaison between students and the dean. The associate dean of faculty affairs and curriculum meets with this group several times per year, and other associate deans meet with the group as needed. A standing agenda item is discussion of any student concerns. Issues raised in this setting are typically those that impact a larger number of students; some are departmental or school issues, but many extend to the entire university. Examples include the following: parking, building improvements/student lounge space, access to buildings after hours, pedestrian safety, computer lab access on weekends, software and printing options in the computer lab and academic policy changes. Students interviewed at the site visit were very complimentary of the advisory council. Students

interviewed expressed high levels of satisfaction with being listened to and having concerns dealt with in a timely and effective manner, often within days.

The school follows the policies of the university regarding student grievances, appeals and petitions. Only one formal appeal has been logged in the school in the past three academic years, and it was resolved according to policy.

## Agenda

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

## **University of South Carolina** Arnold School of Public Health

#### Day 1: Wednesday, March 29, 2017

8:30 am Site Visit Team Request for Additional Documents Delores Pluto, PhD, Director of Evaluation and Academic Assessment 8:45 am Executive Session of the Site Visit Team 9:15 am Meet with Administrative Council Tom Chandler, MSc, PhD, Dean Lee Pearson, MS, DrPH, Associate Dean for operations Sara Corwin, PhD, Associate Dean for Undergraduate & accreditation Student Affairs David Simmons, PhD, Associate Dean for Diversity, Alan Decho, MS, PhD, Associate Dean for Research Equity, & Inclusion James Hardin, PhD, Associate Dean for Faculty Affairs James Carson, PhD, FACSM, Chair EXSC & Curriculum Daniela Friedman, PhD, Chair HPEB James Hussey, PhD, Chair EPID/BIOS Ronnie Horner, PhD, Associate Dean for Clinical Public Mahmud Khan, PhD, Chair HSPM Health Geoffrev Scott, PhD. Chair ENHS 10:30 am Break

Meet with Self-Study Steering Committee 10:45 am Tom Chandler, MSc, PhD, Dean

Alan Decho, MS, PhD, Associate Dean for Research Ronnie Horner, PhD, Associate Dean for Clinical Public Health (representing HSPM)

Lee Pearson, MS, DrPH, Associate Dean for Operations & Accreditation

David Simmons, PhD, Associate Dean for Diversity,

Equity, & Inclusion

James Carson, PhD, FACSM, Chair EXSC Geoffrey Scott, PhD, Chair ENHS

Linda Hazlett, PhD, MT (ASCP), Graduate Director, EPID (representing EPID/BIOS)

Christine Palmer, MPH, CHES (undergraduate student affairs)

Ken Watkins, PhD, Graduate Director, HPEB Dorothy Byrden, Administrative Manager

Janet Place, MPH, Director of Workforce Development Christy Smith, Director, Office of Graduate Student Services

Delores Pluto, PhD, Director of Evaluation & Academic

Assessment, Committee Chair

11:30 am **Break** 

Lunch with Students 12:00 pm

Dana Alhasan, EPID PhD Maggie Carson, HPEB MPH Diptadip Dattaroy, ENHD PhD Bryn Davis, EPID MSPH Dom Francis, HSPM MPH Taylor Harding, HPEB MPH Jaleel Jefferson, PUBH BS Jenna Koster, EXSC BS

Steph-Yves Louis, BIOS MSPH Nick Major, PUBH BS Brittany Pope, EXSC MS Leanna Ross, EXSC PhD Ellen Stowe, HPEB PhD Sarah Sullivan, HSPM PhD

1:30 pm Break

1:45 pm Meet with Instructional Programs Group 1

Lucy Annang Ingram, PhD (representing HPEB

Online MPH)

Kelli Kenison, PhD, Grad. Director for HSPM MPH Mahmud Khan, PhD, Grad. Director for HSPM DrPH

Robert Moran, PhD, Grad, Director for BIOS

(representing EPID/BIOS)

Christine Palmer, MPH, CHES (representing undergraduate student affairs)

Dwayne Porter, PhD, Grad. Director for ENHS Ken Watkins, PhD, Grad. Director for HPEB Xavery Hopkins, MPH, MBA, CHES, Practice &

Placement Coordinator

Christy Smith, Director, Office of Graduate Student Services

3:00 pm Break

3:15 pm Meet with Faculty & Key Staff Related to Research (& key staff)

Mohammed Baalousha, MSc. PhD. Asst. Professor. Xiaoming Li. PhD. Professor, HPEB, SmartState

Michael Beets, PhD, Assoc. Professor, EXSC Nansi Boghossian, PhD, MPH, Asst. Professor,

EPID/BIOS

Saurabh Chatterjee, MS, PhD, Assoc. Professor,

**ENHS** 

Alan Decho, MS, PhD, Professor, ENHS; Associate

Dean for Research

Dan Fogerty, PhD, Asst. Professor, COMD Julius Fridriksson, PhD, Professor, COMD,

SmartState Endowed Chair

4:00 pm Team Executive Session and Resource File Review

5:00 pm Adjourn **Endowed Chair** 

Alyssa Robillard, PhD, Assoc. Professor, HPEB Brie Turner-McGrievy, PhD, RD, Asst. Professor, HPEB Kellee White, PhD, Assoc. Professor, EPID/BIOS Sudha Xirasagar, MBBS, PhD, Professor, HSPM Jiajia Zhang, PhD, Assoc. Professor, EPID/BIOS

Susan Cate, MA, MPH, Director, Research Support

Core

#### Day 2: Thursday, March 30, 2017

9:00 am Meet with University Leadership

Joan T.A. Gabel, JD

Executive Vice President for Academic Affairs and Provost

9:30 am Break

Meet with Instructional Programs Group 2 9:45 am

Christine Blake, PhD, RD (representing HPEB

Barbara Cuevas, MPH, Undergrad. Director for EXSC

Stacy Fritz, PhD, Grad. Director for DPT program

(also representing EXSC PhD)

Linda Hazlett, PhD, MT(ASCP), Grad. Director for

**EPID** 

Mahmud Khan, PhD, Grad, Director for HSPM DrPH

& PhD

Hiram McDade, PhD, Grad. Director for COMD Robert Moran, PhD, Grad, Director for BIOS

Jennifer O'Neill, MPH, PhD, Grad, Director for EXSC

Geoffrey Scott, PhD, Chair ENHS

Jim Thrasher, MA, MS, PhD (representing HPEB

PhD)

Toni Torres-McGehee, PhD, SCAT, ATC, Grad. Director for Advanced Athletic Training

Tim Durden, MHA, CHFP, Academic Program

Manager, HSPM MHA

Rebecca Salter, Office of Graduate Student Services

11:00 am Break & Resource File Review

Lunch with Alumni and Community Stakeholders 12:00 pm

Frank Berger, PhD, Director of USC Center for Colon Cancer Research Judy Burgis, MD, FACOG, Chair of USC Ob/Gyn, USC School of Medicine

Andrew Chandler, MPH, Program Coordinator, SC Office of Rural Health (alumnus)

Lisa Davis, MBA, RN, Chief of Staff, Health Services, SC Dept. of Health & Environmental Control Tiffany Fishburne, MPH, CHES, Client Outreach Coordinator, New Morning Foundation (alumna)

Gwendelyn Geidel, PhD, JD, Research Professor & Undergraduate Director, USC School of the Earth, Ocean, & Environment

Rozalynn Goodwin, FACHE, Vice President for Engagement, SC Hospital Association

Khosrow Heidari, MA, MS, Senior Epidemiologist, Bureau of Drug Control, SC Dept. of Health & Environmental

Beth Montgomery, MSP, CCC-SLP, NBCT, Lead Speech Language Pathologist, Lexington School District Two

Nathaniel J. Patterson, DrPH, MHA, Director, SC Institute of Medicine & Public Health (alumnus)

Myra Reece, MPH, Director of Environmental Affairs, SC Dept. of Health & Environmental Control (alumna)

Beth Sulkowski, VP, Communications & Advocacy, Alzheimer's Association, SC Chapter

Doug Taylor, MPH, Chief Program Officer, SC Campaign to Prevent Teen Pregnancy (alumnus)

1:30 pm Break 1:45 pm Meet with Faculty & Key Staff Related to Service & Workforce Development

Ibrahim Demir, PhD, Research Asst. Professor,

**HSPM** 

Sonya Jones, PhD, Assoc. Professor, HPEB Mark Macauda, PhD, Research Asst. Professor,

HPEB

Edena Meetze, DrPH, MPH, CHES, Clinical Asst.

Professor, HPEB

Dwayne Porter, PhD, Professor, ENHS Jan Probst, PhD, Professor, HSPM

Ana Teixeira, PhD, Research Asst. Professor,

EPID/BIOS

Myriam Torres, PhD, MSPH, Clinical Asst. Professor,

EPID/BIOS

2:30 pm Break

2:45 pm Meet with Faculty Related to Faculty Issues, Student Recruitment, Advising

Brian Chen, JD, PhD, Asst. Professor, HSPM Dirk den Ouden, PhD, Assoc. Professor, COMD Stacy Fritz, PhD, Assoc. Professor, EXSC Angela Liese, PhD, Professor, EPID/BIOS

Jihong Liu, ScD, Professor, EPID/BIOS Suzanne McDermott, PhD, Professor, EPID/BIOS

3:30 pm <u>Executive Session & Resource File Review</u>

5:00 pm Adjourn

Day 3: Friday, March 31, 2017

9:00 am <u>Executive Session and Report Preparation</u>

12:30 pm Exit Briefing

Danielle Varnedoe, MA, Senior Instructor, COMD Glenn Weaver, PhD, Asst. Professor, EXSC Lauren Workman, PhD, Research Asst. Professor, HSPM

Staff:

Pam Gillam, MPA, Director, Core for Applied Research

& Evaluation

Janet Place, MPH, Director, Workforce Development

ruitment, Advising Angela McLeod, PhD, Clinical Assoc. Professor, COMD

Anwar Merchant, ScD, MPH, DMD, Professor,

EPID/BIOS

Sean Norman, MSc, PhD, Assoc. Professor, ENHS Zaina Qureshi, PhD, Asst. Professor, HSPM Toni Torres-McGehee, PhD, SCAT, AT, Assoc.

Professor, EXSC