University of Nebraska Medical Center
College of Public Health

2024-2025 CEPH Re-Accreditation
Preliminary Self-Study

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Abbreviation & Acronyms Key

AAC: Accreditation & Assessment Coordinator

ACS: Accessibility Services Center

ADAA: Assistant Dean of Academic Affairs

ADF: Assistant Dean of Finance

ADO: Assistant Dean of Operations

ADP: Assistant Dean of Public Health Practice

ADR: Associate Dean of Research

ADSA: Assistant Dean of Student Affairs

APM: Applied Practice Manager

APSS: Academic Program Support Specialist

BIOS: Biostatistics

BoR: Board of Regents

CGHAD: Center for Global Health and Development

COPH: College of Public Health

COPHSA: College of Public Health Student Association

CPERS: Center for Preparedness and Emergency Response Solutions

CRHD: Center for Reducing Health Disparities

CS-CASH: Central States Center for Agricultural Safety & Health

CSM: Culture & Sustainability Manager

DCS: Director, Career Services

DDP: Director of DrPH Program

DHHS: Deparment of Health and Human Services

DMP: Director of Master's Program

DTL: Director of Teaching & Learning

DPP: Director of Professional Programs

EC: Evaluation Committee

EPI: Epidemiology

GDS: Grants Development Specialist

GPC: Graduate Program Committee

HLC: Higher Learning Commission

HPRO: Health Promotion

HSRA: Health Sciences Research & Administration

JEDI: Justice, Equity, Diversity, & Inclusion

MPH: Master of Public Health

NRI: Nebraska Research Initiative

NU: University of Nebraska

OCS: Office of Career Services

OES: Office of Educational Services

OME: Office of Metrics and Evaluation

OPHP: Office of Public Health Practice

OTL: Office of Teaching & Learning

PI: Principal Investigators

POE: Programs of Excellence

POA: Panel of Advisors

RDS: Research Development Services

RQR: Research Quarterly Report

RSC: Research Support Coordinator

SAC: Student Affairs Coordinator

SLIDO: Student Life, Inclusion, & Diversity Office

SPA: Sponsored Programs Administration

SSC: Student Success Coordinator

UNMC: University of Nebraska Medical Center

UNO: University of Nebraska-Omaha

Introduction

1) Describe the institutional environment, which includes the following:

a. year institution was established and its type (e.g., private, public, land-grant, etc.)

Founded as a land-grant institution in 1869, the University of Nebraska has more than 49,000 students and 16,000 employees; the four universities included in the system are an R1 flagship land-grant university, the University of Nebraska-Lincoln; an academic medical center, the University of Nebraska Medical Center; a metropolitan university, the University of Nebraska at Omaha; and a regional undergraduate university, the University of Nebraska at Kearney. The University of Nebraska Medical Center (UNMC) houses the College of Public Health (COPH). UNMC was founded in 1880 as the Omaha Medical College and joined the University of Nebraska in 1902.

b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)

UNMC comprises six colleges: College of Public Health, College of Allied Health Professions, College of Dentistry, College of Medicine, College of Nursing, and College of Pharmacy.

UNMC College	**Bachelor's Degree**	**Master's**	**Doctoral**	**Certificate**
College of Public Health		8	8	5
College of Allied Health Professions	5	8	3	4
College of Dentistry	1		1	
College of Medicine			1	
College of Nursing	3	1	2	1
College of Pharmacy			2	1

c. number of university faculty, staff, and students

2023-2024	**University of Nebraska Medical Center**
Faculty	1936
Staff	4397
Students	4555

d. brief statement of distinguishing university facts and characteristics

The University of Nebraska Medical Center was founded in 1880 as the Omaha Medical College and joined the University of Nebraska in 1902. What began as the state's first medical college expanded and grew to incorporate a dental college, a pharmacy college, a nursing college, and many more areas of study. Today, UNMC works to educate and build a 21st-century healthcare workforce. Led by interim Chancellor H. Dele Davies, M.D.UNMC's six colleges and two institutes, in partnership with Nebraska Medicine, not only educate future healthcare providers but generate an annual economic impact of $5.9 billion for the state of Nebraska. UNMC serves more than 4,000 students in more than two dozen programs. Approximately half of Nebraska's physicians, dental professionals, pharmacists, bachelor-prepared nurses, and allied health professionals have graduated from UNMC.

As Nebraska's only public academic health science center, UNMC not only engages the people of Nebraska, but discovers cures and treatments for global diseases and provides world-class treatment for patients worldwide. UNMC is highly responsible for providing services for those in the global community. It has upheld this duty in multiple ways, such as combatting deadly Ebola outbreaks in West Africa or building a cutting-edge cancer research center to benefit the nation.

Simultaneously, UNMC works effortlessly to reach out to all Nebraskans. UNMC includes campuses throughout Nebraska, including Omaha, Lincoln, Kearney, Norfolk, and Scottsbluff. UNMC reaches out across Nebraska to eliminate healthcare disparities, including the shortage of healthcare providers and services available in rural areas. UNMC consistently upholds its mission of creating a healthier future for all people and communities through education, groundbreaking research, and exceptional patient care.

e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the institutional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds

UNMC is accredited through the Higher Learning Commission (HLC) and recognizes that the university maintains high standards for its graduates, either to gain admission to other institutions of higher learning or to achieve credentials for professional practice in a chosen field https://www.unmc.edu/academicaffairs/institutional/accreditation-assessment/accreditation.html

Institutional accreditation validates the quality of all UNMC academic programs and the institution, including student services, financial stability, governance, institutional integrity, and mission and strategic planning. UNMC will undergo its next comprehensive HLC evaluation site visit in 2026-2027. In addition to HLC, UNMC has 18 program and college-specific accreditors https://www.unmc.edu/academicaffairs/institutional/accreditation-assessment/program-accreditation.html.This information is also located in the ERF: ERF -> Intro -> Specialized Accreditations at UNMC

f. brief history and evolution of the school of public health (SPH) and related organizational elements, if applicable (e.g., date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.)

Until 2001, only 22 of the state's 93 counties had access to local health department services. Providing efficient public health services, education, and training is challenging in this geographically large, sparsely populated state.

Public health in Nebraska has made great strides in the last two decades. A Robert Wood Johnson Foundation grant enabled stakeholders to develop a strategic plan and secure the passage of state legislation that provided millions of dollars annually for public health services. This plan, "Turning Point: Nebraska's Plan to Strengthen and Transform Public Health," documented the need for formal workforce education and training and outlined a strategic plan for creating health departments. Tobacco Settlement funds provided incentives for establishing 16 new public health districts in 2002 that, together with the already established health departments, now cover all 93 counties in Nebraska. The creation of new district health departments greatly expanded the public health workforce and the need for formal training in public health.

In response to these changes, UNMC and UNO, with support from the Nebraska Minority Public Health Association, established a Master of Public Health (MPH) Program and secured accreditation by the Council on Education for Public Health (CEPH) in 2004. CEPH reaccredited the joint program in 2009. A

Memorandum of Understanding signed June 22, 2010, by the UNO and UNMC Chancellors, detailing the relationship between the two campuses and dissolving the joint status of the MPH Program, formalized the change to a stand-alone program in the College of Public Health at UNMC.

The success of the MPH Program and the recognition by UNMC and NU leadership of the importance of public health training and scholarship led the NU Board of Regents to establish the College. The MPH Program migrated as a professional program to the College with the approval of the Board of Regents in 2010.

UNMC COPH designs its educational programs for students who wish to pursue different levels and approaches to public health education, ranging from certificate to doctoral programs. We also offer dual degree programs with other colleges within and outside the University of Nebraska system. We tailor our programs' curricula to balance the critical areas of education, research, and practice to meet the professional development needs of our students. Graduates from our programs become leaders in their chosen fields in research, academia, or as public health practitioners across the public and private sectors.

The UNMC COPH offers professional and academic master's and doctoral degrees across five departments. The COPH offers master's certificates in Applied Biostatistics, Occupational Safety and Health, Public Health, Emergency Preparedness, and Maternal and Child Health. The COPH offers seven concentrations in Biostatistics, Emergency Preparedness, Environmental and Occupational Health, Epidemiology, Health Promotion, Maternal and Child Health, and Public Health Administration and Policy.

Our dual degree programs offer students the unique opportunity to integrate their training from another degree program with a population-based Master of Public Health degree. The primary goal is to prepare professionals to assess, understand, and address health concerns that impact the well-being of individuals, populations, and communities.

The Doctorate of Public Health degree includes three concentrations: Advocacy and Leadership, Emergency Preparedness, and Epidemiology. Finally, the COPH also administers the Master of Health Administration degree.

We design our academic degrees (MS and PhD) to prepare students for academic and research roles and settings. These programs emphasize students' understanding of theoretical issues and the application of disciplinary methods to studying public health. Academic degrees are offered and administered by each individual department and the University of Nebraska Graduate College. The academic degrees include a Master of Science in Biostatistics and a Doctor of Philosophy in Biostatistics, Environmental Occupational Health and Toxicology, Epidemiology, Health Promotion and Disease Prevention, and Health Services and Policy Research.

In addition to the five departments, the COPH includes a range of centers focusing on Emergency Preparedness, Research Design and Analysis, Global Health, Health Policy, Health Disparities, Environmental Health, and Agriculture Safety and Health. The COPH also has five offices: the Office of Educational Services, the Office of Career Services, the Office of Public Health Practice, the Office of Teaching and Learning, and the Office of Metrics and Evaluation.

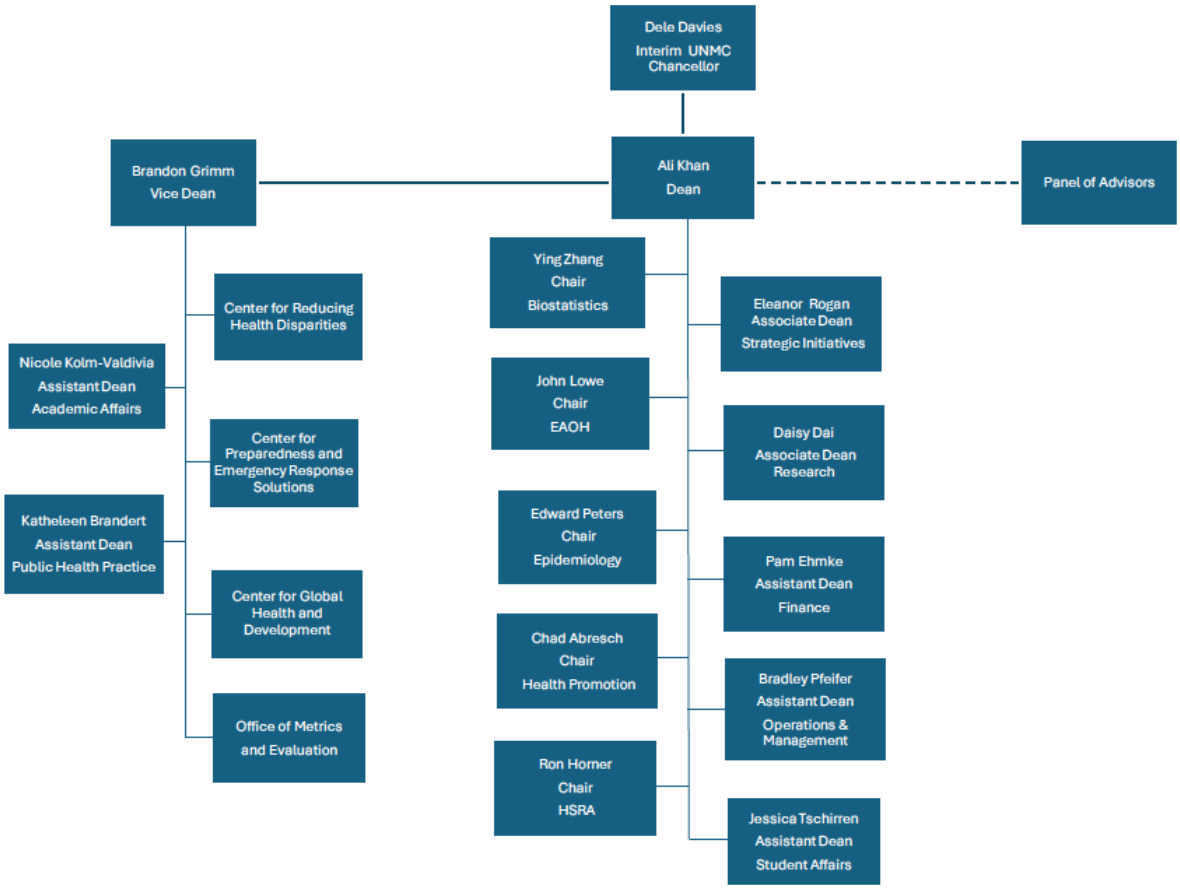
2) Organizational charts that clearly depict the following related to the school:

a. the school's internal organization, including the reporting lines to the dean

The UNMC COPH internal organizational chart (Figure 2a.1) can be found in ERF-> Intro-> COPH Organizational Chart.

The Internal Organizational Chart is presented below. This organizational chart illustrates that department chairs, associate/assistant deans, and center directors have a direct reporting line to the dean and vice dean.

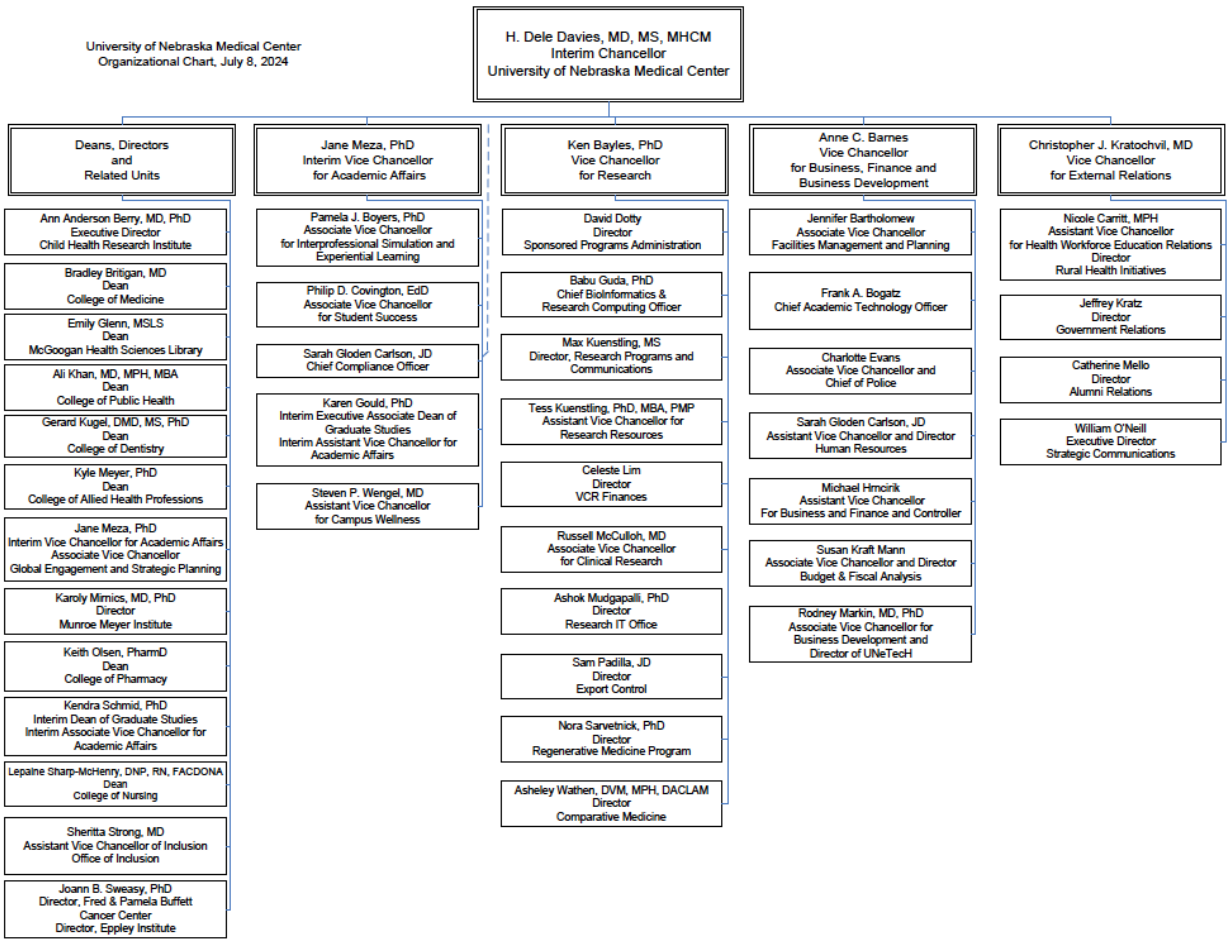
Figure 2a.1 UNMC COPH Internal Organizational Chart



b. the relationship between school and other academic units within the institution. Organizational charts may include committee structure organization and reporting lines

The UNMC Organizational Chart provided below illustrates the reporting lines and relationships the COPH has with the other colleges and chancellor's office. This can also be found in the ERF at ERF->Intro->UNMC Organizational Chart.

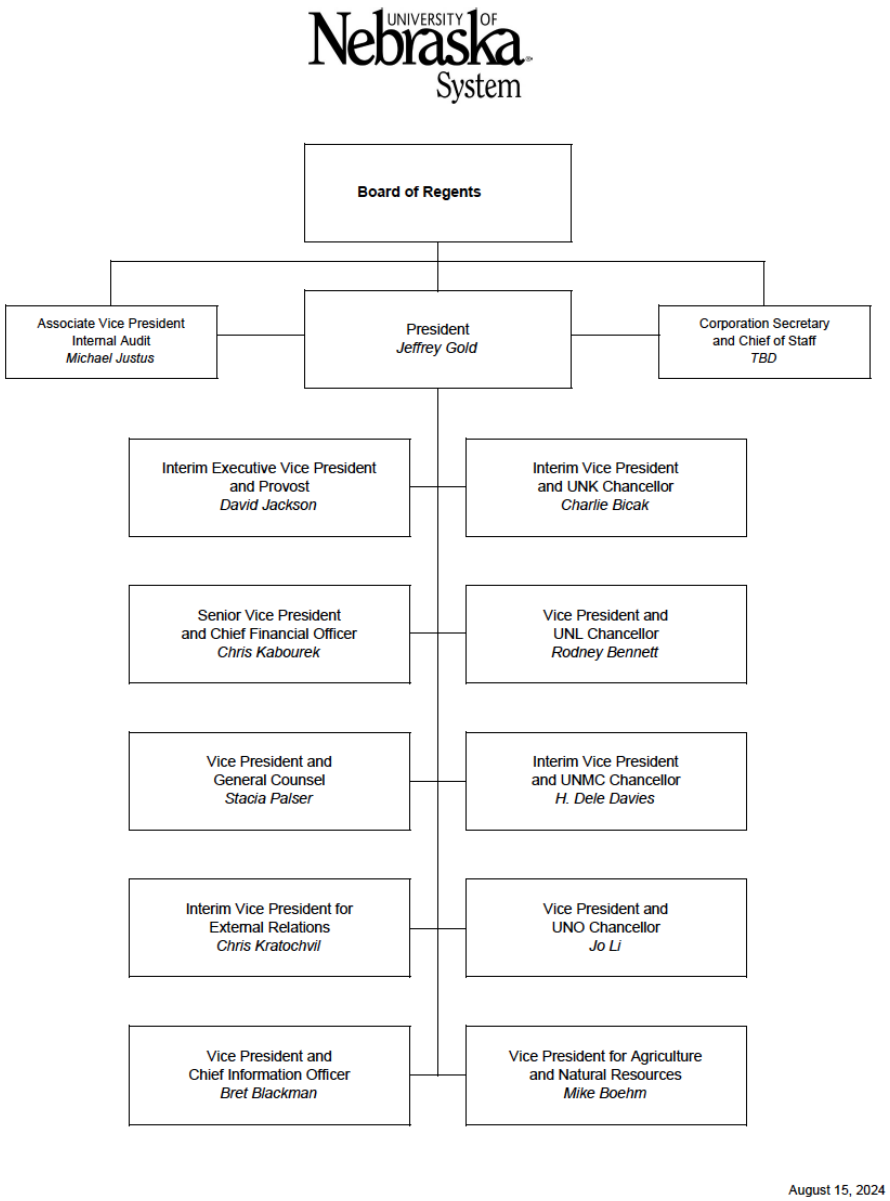
Figure 2a.2 UNMC Organizational Chart



c. the lines of authority from the school's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)

The system wide organizational chart illustrates the direct line the chancellor of UNMC has to the University of Nebraska President. A copy of this can also be found in the ERF at ERF-> Intro -> NU Organizational Chart

Figure 2a.3 University of Nebraska System Organizational Chart



d. for multi-partner schools and schools (as defined in Criterion A2), organizational charts must depict all participating institutions

Not Applicable

3) An instructional matrix presenting all of the school's degree schools and concentrations including bachelor's, master's and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

UNMC COPH offers master's and doctoral professional degrees, academic degrees, and dual degrees. The instructional matrix is presented below.

Template Intro-1: Instructional Matrix – Degrees and Concentrations

Master's Degrees	Academic	Professional	Categorized as public health	Place-Based	Distance-Based
Biostatistics		MPH	X	X	X
Emergency Preparedness		MPH	X	X	X
Environmental and Occupational Health		MPH	X	X	X
Epidemiology		MPH	X	X	X
Health Promotion		MPH	X	X	X
Maternal and Child Health		MPH	X	X	X
Public Health Administration and Policy		MPH	X	X	X
Biostatistics	MS		X	X	X
Health Administration		MHA			X
Doctoral Degrees	**Academic**	**Professional**	**Categorized as public health**	**Place-Based**	**Distance-Based**
Biostatistics	PhD		X	X	
Environmental and Occupational Health	PhD		X	X	
Epidemiology	PhD		X	X	
Health Promotion & Disease Prevention Research	PhD		X	X	
Health Services & Policy Research	PhD		X	X	
Toxicology	PhD		X	X	
Advocacy and Leadership		DrPH	X		X
Emergency Preparedness		DrPH	X		X
Epidemiology		DrPH	X		X

Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)		Academic	Professional	Categorized as public health	Place-Based	Distance-Based
2nd Degree Area	**Public Health Concentration**					
DO	All Concentrations		MPH	X		X
MBA	Biostatistics; Epidemiology; Emergency Preparedness; Public Health Administration & Policy		MPH	X	X	X
MCRP	All Concentrations		MPH	X	X	X
MD	All Concentrations		MPH	X	X	

MSW	Public Health Administration & Policy		MPH	X	X	X
PharmD	All Concentrations		MPH	X	X	

4) Enrollment data for all of the school's degree schools, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2. Schools that house "other" degrees and concentrations (as defined in Criterion D18) should separate those degrees and concentrations from the public health degrees for reporting student enrollments.

INSERT TEMPLATE INTRO-2 HERE – This will be inserted for the final self-study to provide most up to date information. .

A1. Organization and Administrative Processes

The school demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The school establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The school ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional school (e.g., participating in instructional workshops, engaging in school-specific curriculum development and oversight).

Additionally, the school makes efforts to include diverse voices and perspectives in decision-making structures.

1) List the school's standing and significant ad hoc committees. For each, indicate the formula for membership (e.g., two appointed faculty members from each concentration) and list the current members.

UNMC COPH's administrative processes presented are detailed in the college's Bylaws (ERF->A->A1->COPH Bylaws) and the college's policies and procedures (ERF->A->A1->COPH Policies and Procedures).

UNMC COPH Governing Faculty

The Governing Faculty shall be the major body charged with fulfilling the mission of the College of Public Health. Voting members of the Governing Faculty are those COPH faculty with at least a 50% FTE or more appointment at the University of Nebraska. Non-Voting Governing Faculty are those COPH faculty who do not hold at least a 50% FTE appointment at the University of Nebraska. The duties and responsibilities of the Governing Faculty include:

- Propose and promote programs and activities of the College of Public Health.
- Study and/or refer to the Leadership Council issues and problems affecting academic and professional policies.
- Consider and provide advice and recommendations on academic and professional policies as presented by the Dean.
- Receive reports from Standing Committees and Non-Standing Committees.
- Promote good relationships with state agencies, with the health professions of the state, and with the citizens of the State of Nebraska.
- Promote good relationships with federal agencies, national professional agencies, and international and global health agencies to support the mission of the College of Public Health and the public health profession.

Table A1.1 Governing Faculty Membership	
Voting Members	
David Brett-Major	Professor
Ward Chambers	Professor
Hongying Dai	Professor
David Dzewaltowski	Professor
Brandon Grimm	Professor
Gleb Haynatzki	Professor
Ronnie Horner	Professor
Ali Khan	Professor

Deborah Levy	Professor
John-Martin Lowe	Professor
Jane Meza	Professor
Matthew Nonnenmann	Professor
Edward Peters	Professor
Risto Rautiainen	Professor
Eleanor Rogan	Professor
Kendra Schmid	Professor
Shinobu Watanabe-Galloway	Professor
Todd Wyatt	Professor
Fang Yu	Professor
Ying Zhang	Professor
Chad Abresch	Associate Professor
Jesse Bell	Associate Professor
Cheryl Beseler	Associate Professor
Eric Carnes	Associate Professor
Su Chen	Associate Professor
Regina Idoate	Associate Professor
Keyonna King	Associate Professor
Kristina Kintziger	Associate Professor
Abigail Lowe	Associate Professor
Sharon Meaker-Medcalf	Associate Professor
David Palm	Associate Professor
Hilary Raikes	Associate Professor
Shireen Rajaram	Associate Professor
Athena Ramos	Associate Professor
Ariane Rung	Associate Professor
Lauren Sauer	Associate Professor
Brian Sims	Associate Professor
Lynette Smith	Associate Professor
Dejun Su	Associate Professor
Melissa Tibbits	Associate Professor
Hongmei Wang	Associate Professor
Siobhan Wescott	Associate Professor
Christopher Wichman	Associate Professor
Aaron Yoder	Associate Professor
Cheng Zheng	Associate Professor
Kevin Bagley	Assistant Professor
Erin Biggs	Assistant Professor
Kathleen Brandert	Assistant Professor
Melanie Cozad	Assistant Professor

Kaitlyn Crosby	Assistant Professor
Shaun Cross	Assistant Professor
Ran Dai	Assistant Professor
Michael Demman	Assistant Professor
Brittney Dickey	Assistant Professor
Jianghu Dong	Assistant Professor
Wael ElRayes	Assistant Professor
Joseph Fauver	Assistant Professor
Carol Gilbert	Assistant Professor
Yeongjin Gwon	Assistant Professor
Jocelyn Herstein	Assistant Professor
Yunju Im	Assistant Professor
Madhav KC	Assistant Professor
Jungyoon Kim	Assistant Professor
Nicole Kolm Valdivia	Assistant Professor
Emily Kraus	Assistant Professor
Rachel Lookadoo	Assistant Professor
Patrick Maloney	Assistant Professor
Shannon Maloney	Assistant Professor
Abraham Mengist	Assistant Professor
Tzeyu Michaud	Assistant Professor
Erin Obermeier Schneider	Assistant Professor
Julie Ann Pierson	Assistant Professor
Gwenndolyn Porter	Assistant Professor
Kendra Ratnapradipa	Assistant Professor
Ann Rogers	Assistant Professor
Aislinn Rookwood	Assistant Professor
Marisa Rosen	Assistant Professor
Mystera Samuelson	Assistant Professor
Michelle Strong	Assistant Professor
Hyo Jung Tak	Assistant Professor
Dana Verhoeven	Assistant Professor
Patrina White	Assistant Professor
Ellen Duysen	Research Assistant Professor
Babak Jalalzadeh-Fard	Research Assistant Professor
Marcus Waldman	Research Assistant Professor
Muhammad Zahid	Research Assistant Professor
Keith Hansen	Instructor
Elizabeth Lyden	Instructor
Stephen Peters	Instructor
Leslie Scofield	Instructor

Laura Vinson	Instructor
Paul Weishapl	Instructor

Committees of Governance
There are two types of Committees of Governance: Standing Committees and Non-Standing Committees.

Standing Committees
The three Standing Committees are Curriculum, Faculty Promotion and Tenure, and Research and Development.

All Chairs of Standing Committees shall be Full Time Governing Faculty in the College of Public Health and shall be nominated and elected by the Voting Governing Faculty of the College of Public Health. Only a Full-Time tenured professor in the College of Public Health will qualify for the Promotion and Tenure Committee Chair position. All Chairs will serve three-year terms. All Chairs report to the Governing Faculty and the Dean quarterly.

Committee members are chosen from the Voting Governing Faculty and appointed by the Chair of the respective Standing Committee in consultation with the Department Chairs and/or Dean. Each Standing Committee shall have no fewer than five members, including the Chair, generally with at least one member from each department. Appointments to the Promotion and Tenure Committee should include at least three tenured Professors from the Voting Governing Faculty. Two Promotion and Tenure Committee members may be chosen from the Voting Governing Faculty tenured Associate Professors. A faculty member under consideration for promotion may not simultaneously serve on the Promotion & Tenure Committee. All committees, except the Promotion and Tenure Committee, may include student members following each committee's guidelines.

Membership is for a term of three years. A member may be appointed for a second three-year term, after which at least one year must elapse before a member is eligible to be a member of the Committee. The Dean or Associate/Assistant Deans may serve as ex-officio non-voting members.

Curriculum Committee

The Curriculum Committee has formal bylaws (ERF->A->A1->COPH Curriculum Committee Bylaws) and meets monthly. The charge of the committee includes:

- Recommend to the College of Public Health Faculty policies and plans regarding student curriculum, in consultation with the appropriate department(s).
- Develop and implement a system for curriculum evaluation.
- Recommend curriculum changes.
- Develop and recommend policies relating to the continuing education programs of the College of Public Health.
- Provide guidance to students requesting evaluation and approval of their remediation plans in order to regain good academic standing.
- Evaluation and judgment of student related academic issues, to include, but not be limited to transferring credit, exceptions to policy, dismissals, etc.
- Dutifully accomplish any additional responsibilities as outlined in the College of Public Health Student Handbook
- Review and approve all newly-developed courses and any newly- developed areas of specialization at the masters and doctoral level

Table A1.2 Curriculum Committee Membership	
Voting Members	**Names**
Health Promotion Faculty (Chair)	Michelle "Shelley" Strong

Epidemiology Faculty	Sharon Medcalf
Environmental, Agricultural, and Occupational Health Faculty	JoEllyn McMillan
Biostatistics Faculty	Yeongjin Gwon
Health Services Research and Administration Faculty	Steve Peters
Professional (MPH, MHA, DrPH) Student	Uzo Chukwuma
Graduate (MS, PhD) Student representative	Ikenna Orji
Non-Voting Members	
Asst Dean, Academic Affairs	Nicole Kolm-Valdivia
Asst Dean, Student Affairs	Jessica Tschirren
Director, DrPH Program	Anthony Blake
Director, Master's Program	Laura Vinson
Coordinator, Accreditation & Assessment	Lacey Merica
Director, Educational Design & Development	Analisa McMillan
Coordinator, Office of Educational Services	Hillary Peshek
Pathways Program Coordinator	Ron Glenn
Manager, Culture and Sustainability	Stacey Coleman

Promotion and Tenure Committee

The Faculty Promotion and Tenure Committee meets annually to review policies and guidelines and evaluate recommendations for promotion and/or tenure of internal candidates. Additionally, the Committee communicates throughout the year and meets on special occasions as needed, for example, to conduct an expedited review of an external candidate and new hires. The duties and responsibilities of the promotion and tenure committee include:

- Recommend to the Governing Faculty policies and guidelines pertaining to College faculty promotion and/or tenure.
- Receive recommendations for promotion and/or tenure of College faculty members.
- Evaluate and submit to the Dean recommendations on promotion and/or tenure of specific College faculty members.

Table A1.3 Promotion and Tenue Committee Membership		
Members	**Department**	**Names**
Tenured Professor	Health Promotion (Committee Chair)	Dejun Su
Tenured Professor	Environmental, Agricultural, and Occupational Health	Matthew Nonnenmann
Tenured Professor	Epidemiology	Shinobu Watanabe-Galloway
Associate Professor	Health Services Research and Administration	David Palm
Associate Professor	Biostatistics	Lynette Smith

Research and Development Committee

The Research and Development Committee meets monthly, and the duties and responsibilities Include:

- Assist the Dean and the Associate Dean for Research in developing a strategic plan to promote the growth and productivity of research in the College.
- Assist the Dean and the Associate Dean for Research in special initiatives to develop new College research and development programs, including joint programs with other NU colleges.
- Monitor the initiatives within the College to recruit and support student participation in ongoing research activities.

- Provide opportunities for students within the College to develop and present research to peers and colleagues.

Table A1.4 Research and Development Committee Membership	
Voting Members	**Names**
Epidemiology Faculty (Committee Chair)	Joseph Fauver
Biostatistics Faculty	Su Chen
Environmental, Agricultural, and Occupational Health Faculty	Jesse Bell
Health Promotion Faculty	Shannon Maloney
Health Services Research and Administration Faculty	Melanie Cozad
MPH Student	Nicole Sletten
PhD Student	TBD (will be elected fall 2024)
Non-Voting Members	
Associate Dean for Research	Daisy Dai
Research and Grants Development Specialist	Wendi Chiarbos Jensen

Non standing and Advisory Committees

Deans and Chairs

The deans and chairs meet by-monthly. The purpose of the deans and chair meeting is:

- Discuss the policies and procedures of the COPH.
- Discuss new and potential programs, funding, and strategic directions of the college.
- Provide a dialogue between the departments and the dean's office.
- Discuss the annual budget and funding allocations to the departments.
- Address any concerns and recommendations of the departments.

Table A1.5 Deans & Chairs Membership	
Role	**Name**
Dean	Ali S. Khan
Vice Dean	Brandon Grimm
Associate Dean for Research	Daisy Dai
Associate Dean for Strategic Initiatives	Elli Rogan
Assistant Dean, Academic Affairs	Nicole Kolm Valdivia
Assistant Dean, Student Affairs	Jessica Tschirren
Assistant Dean, Public Health Practice	Katie Brandert
Assistant Dean, Operations and Management	Bradley Pfeifer
Assistant Dean, Finance	Pam Ehmke
Chair, Biostatistics	Ying Zhang
Chair, Health Services Research and Administration,	Ronnie Horner
Chair, Health Promotion	Chad Abresch
Chair, Environmental, Agricultural, and Occupational Health	John Lowe
Chair, Epidemiology	Ed Peters

UNMC COPH Leadership Council

Members consist of the Dean, Vice Dean, Associate and/or Assistant Deans, the Directors of the Masters and Doctoral programs, the Chair of the Governing Faculty, Department Chairs, and Directors of all offices, centers, and dean's office programs within the College of Public Health. The Leadership Council meets no fewer than six times per year. Special meetings may be called by the Dean. The duties and responsibilities of the Leadership Council shall include:

- Consider any matters pertaining to governance or administration brought before it by the Governing Faculty, the Dean, a Standing or Non-Standing Committee, or by one of the members of the Leadership Council.
- Recommend to the Dean administrative policies and procedures and coordinate their implementation.
- Recommend to the Dean administrative and management long-range plans and objectives for the College of Public Health, especially regarding organization, programs, and facilities.
- Advise the Dean as to the establishment of institutional policies and procedures for the management of departmental budgets.
- Coordinate and implement institutional policies recommended by the Governing Faculty and approved by the Dean.

Table A1.6 Leadership Council Membership	
Role	**Name**
Dean	Ali S. Khan
Vice Dean	Brandon Grimm
Associate Dean for Research	Daisy Dai
Associate Dean for Strategic Initiatives	Elli Rogan
Assistant Dean, Academic Affairs	Nicole Kolm Valdivia
Assistant Dean, Student Affairs	Jessica Tschirren
Assistant Dean, Public Health Practice	Katie Brandert
Assistant Dean, Operations and Management	Bradley Pfeifer
Assistant Dean, Finance	Pam Ehmke
Chair, Biostatistics	Ying Zhang
Chair, Department of Health Services Research and Administration	Ronnie Horner
Chair, Department of Health Promotion	Chad Abresch
Chair, Department of Environmental, Agricultural, and Occupational Health	John Lowe
Chair, Department of Epidemiology	Ed Peters
Chair, Governing Faculty	Aaron Yoder
Director, Doctoral Programs	Anthony Blake
Director, Master's Programs	Laura Vinson
Director, Master of Health Administration	Wael ElRayes
Director, CityMatCH	Denise Pecha
Director, Center for Preparedness and Emergency Response Solutions	Keith Hansen & Rachel Lookadoo
Director, Center for Collaboration on Research Design and Analysis	Fang Yu
Director, Office of Metrics and Evaluation	Brian Sims
Director, Center for Global Health, and Development	Abbie Raikes
Director, Center for Health Policy	Dave Palm
Director, Center for Reducing Health Disparities	Elli Rogan (Interim)
Director, Teaching and Learning	Analisa McMillan
Director, Career Services	Brenda Nickol
Director, Information Systems	Justin Obermeier
Manager, Culture and Sustainability Manager	Stacey Coleman
Marketing and Communications Specialist	Melissa Gaj
Director, Center for Environmental Health and Toxicology	TBD

UNMC COPH Panel of Advisors

The Panel of Advisors serves as an advisory body to the Dean of the College of Public Health. The Panel provides broad information, ideas, and insights to the leadership of the College that will help achieve its mission and guide its successful growth and development as a leading school of public health in the region, the nation, and the world. Membership of the panel of advisors is invited by the dean and the chair of the

panel. The panel chair is determined by the membership and serves a term of three years. The membership represents diverse sectors of the community. In addition to the community and practice members, the deans and chairs of the COPH are Ex-Officio members of the panel.

The Panel of Advisors meets at least twice a year, and meetings are hosted by the Dean. An agenda is developed by the Chair with input from Panel members in consultation with the Dean. The meetings are focused on receiving input and guidance from the Panel of Advisors to improve the success of the College and its impact on our communities.

Table A1.7 UNMC COPH Panel of Advisors	
Members	**Names**
Director of Major Gifts, The Nature Conservancy of Nebraska	Sarah McClure, MPA (Chair)
Executive Director, Building Bright Futures	John Cavanaugh, JD
Founding Executive Director, Omaha Creative Institute (retired); Omaha Community Leader	Susan Thomas (Past Chair)
President, Weitz Family Foundation	Katie Weitz, PhD
Health Director, Douglas County Health Department	Lindsay Huse, DNP
Managing Partner, Clairrant Partners	Laura Schabloske
Douglas County Board of Commissioners; Director of Community and Government Relations at Creighton University.	Chris Rodgers, MPA, MBA
Senator, Nebraska District 8; Small Business Owner Shop Five Nine and Ceremony	Meghan Hunt
Associate Vice Provost, Health Sciences, Creighton University	Sade Kosoko-Lasaki, MD, MSPH, MBA
Associate Dean, School of Health and Kinesiology	Jason Coleman, PhD
Associate Professor, School of Health and Kinesiology; Co-Director, Midlands Sexual Health Research Collaboration	Sofia Jawed-Wessel, PhD, MPH
Ex-Officio:	
Dean	Ali Khan
Vice Dean	Brandon Grimm
Associate Dean for Research	Daisy Dai
Associate Dean for Strategic Initiatives	Elli Rogan
Assistant Dean, Academic Affairs	Nicole Kolm Valdivia
Assistant Dean, Student Affairs	Jessica Tschirren
Assistant Dean, Public Health Practice	Katie Brandert
Assistant Dean, Operations and Management	Bradley Pfeifer
Assistant Dean, Finance	Pam Ehmke
Chair, Biostatistics	Ying Zhang
Chair, Department of Health Services Research and Administration,	Ronnie Horner
Chair, Department of Health Promotion	Chad Abresch
Chair, Department of Environmental, Agricultural, and Occupational Health	John Lowe
Chair, Department of Epidemiology	Ed Peters

Justice, Equity, Diversity, and Inclusion (JEDI) Council

The purpose of the JEDI Council (open to all COPH faculty, staff, and students) is to cultivate structures, processes, and resources throughout all facets of the College, centered in unity, so that all faculty, staff, and students are welcomed, listened to, included, and valued, allowing us to thrive individually and collectively. As of August 2024, there are around 25 members from the College's faculty, staff, students

and alumni. Each member is asked to participate for at least one year but may extend their participation past that time if they desire to do so.

Table A1.8 JEDI Council Membership	
Members	**Names**
Culture and Sustainability Manager	Stacey Coleman
Associate Dean, Strategic Initiatives	Elli Rogan
Assistant Dean, Academic Affairs	Nicole Kolm Valdivia
Associate Dean, Research	Daisy Dai
Assistant Dean, Student Affairs	Jessica Tschirren
Chair, Environmental, Agricultural, and Occupational Health	John Lowe
Environmental, Agricultural, and Occupational Health Faculty	Mystera Samuelson
Environmental, Agricultural, and Occupational Health Staff	Haiyue “Arianna” Li
Environmental, Agricultural, and Occupational Health Faculty	Matthew Nonnemann
Health Services Research and Administration Faculty	Ward Chambers
Health Services Research and Administration Faculty	Trina White
Health Services Research and Administration Faculty	Steve Peters
Director, Office of Teaching and Learning	Analisa McMillan
MPH Student - Health Promotion	Kristin Westmore
Project Coordinator, CityMatCH	Lauren Garcia
Epidemiology Project Coordinator	Sierra Garth
Statistician	Kaeli Samson
Assistant Director, Recruitment & Admissions	Eric Brabb
Office of Public Health Practice Project Coordinator	Jessica Chavez-Thompson
Student Representative	Julia Quigley
Director, Masters Programs	Laura Vinson
Accreditation and Assessment Coordinator	Lacey Merica
PhD Student – Health Promotion	Naveta Bhatti

Evaluation Committee

The Evaluation Committee designs and administers the assessments needed for the CEPH Self-Study, annual reports, and strategic planning. Members are appointed to include faculty, staff, and students. The Evaluation Committee works with the College’s standing committees and administrators to collect data, assess outcomes, and communicate results to stakeholders. The Evaluation Committee meets monthly during the fall and spring semesters and as needed during the summer session.

Table A1.9 Evaluation Committee Membership	
Members	**Names**
Co-Chair, Health Promotion Faculty	Marisa Rosen
Co-Chair; Accreditation & Assessment Coordinator	Lacey Merica
Assistant Dean for Academic Affairs	Nicole Kolm Valdivia
Director, Office of Teaching & Learning	Analisa McMillan
Biostatistics	Harlan Sayles
Environmental, Agricultural, and Occupational Health	Mystera Samuelson
Epidemiology	Dana Verhoeven
Health Promotion	Brian Sims
Health Services Research & Administration	Ward Chambers
Office of Educational Services Representative	Hillary Peshek
Doctoral Student	Charles Gregory

Masters Student	Robbin Thomas

Scholarship Committee

The purpose of the COPH Scholarship Committee is to:

- Annually determine the process of awarding student scholarships.
- Make selections and requirements of student scholarship awards.

Table A1.10 Scholarship Committee	
Voting Members	**Names**
Assistant Dean, Student Affairs	Jessica Tschirren
Biostatistics Faculty	Gleb Haynatzki
Epidemiology Faculty	Sharon Medcalf
Environmental, Agricultural and Occupational Health Faculty	Jocelyn Herstein
Health Promotion Faculty	Erin O. Schneider
Health Services Research and Administration Faculty	Melanie Cozad

Professional Programs Admissions Committee

The purpose of the professional programs admissions committee is to:

- Develop, implement, and review admissions practices and procedures for the professional programs.
- Recommend admissions policies for professional programs to the College.

Table A1.11 Professional Programs Admissions Committee	
Voting Members	**Names**
Assistant Dean, Student Affairs	Jessica Tschirren
Assistant Director, Recruitment & Admissions	Eric Brabb
Biostatistics Faculty	Chris Wichman
Environmental, Agricultural, and Occupational Health Faculty	JoEllyn McMillan
Epidemiology Faculty	Sharon Medcalf
Epidemiology Faculty	Ariane Rung
Health Promotion Faculty	Shelley Strong
Health Services Research and Administration Faculty	JY Kim

Graduate Program Directors

The Graduate Program Directors oversee the PhD program for their department. They guide the curricular process, promote the quality and currency of the curriculum, develop and lead the program assessment procedures, oversee admissions review and acceptance, coordinate advisement of students, and coordinate and oversee program policies, procedures, and guidelines.

Table A1.12 Graduate Program Directors	
Members	**Names**
Biostatistics Faculty	Chris Wichman
Environmental, Agricultural, and Occupational Health Faculty	JoEllyn McMillan
Epidemiology Faculty	Ariane Rung
Health Promotion Faculty	Tzeyu Michaud
Health Services Research and Administration Faculty	Hongmei Wang

2) Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

a. degree requirements

Each department identifies proposed degree requirements for existing and new degree programs and submits them to the Curriculum Committee. Through the Curriculum Committee, governing faculty, UNMC Graduate Council, the University of Nebraska Board of Regents, and the Nebraska Coordinating Commission for Postsecondary Education the faculty have set standards for coursework, assuring that it represents rigorous, graduate-level work and set the minimum GPA. The Curriculum Committee has full authority over the degree requirements for the MPH, MHA and DrPH degrees, referred to as the professional degrees. For the academic degrees (MS and PhD), the COPH Curriculum Committee and UNMC Graduate Council have full authority over the degree requirements. The Graduate School confers the MS and PhD degrees.

The deans for academic and student affairs monitor students' progress, including maintenance of a 3.0 GPA, probationary procedures, and continuing enrollment. For the MS and PhD programs, the Graduate School monitors progress, in addition to the deans for academic and student affairs in COPH. For any new degree, the COPH must submit a proposal that includes degree requirements for approval by the COPH Curriculum Committee (professional degrees) and the UNMC Graduate Council (academic degrees). Approval is also needed by the Vice Chancellor for Academic Affairs. After internal approval is granted, the proposed program will then go through the University of Nebraska System's approval timeline and process that ultimately ends with approval by the University President, Board of Regents, and the Nebraska Coordinating Commission for Postsecondary Education.

b. curriculum design

The Curriculum Committee and the Office of Teaching and Learning are responsible for developing academic standards and policies, as well as the overall design, implementation, evaluation, and ongoing development of the COPH curriculum. The proposed new curriculum and curriculum changes originate in the department and are reviewed and approved by the Curriculum Committee. The Curriculum Committee is also charged with assuring that any new curriculum or changes go through the correct University System Approval process described in section A1.2a . For the MS and PhD programs, COPH Graduate Program Directors, in partnership with the Graduate School, perform the curriculum review.

c. student assessment policies and processes

The faculty and departments, through the Curriculum Committee and Evaluation Committee, have final authority over academic standards, policies, and processes

d. admissions policies and/or decisions

Policies and requirements for admission are determined by faculty in each department in consultation with the Assistant Dean of Student Affairs. Each department chair appoints an applicant review committee for each concentration to review applicants for program admittance.

e. faculty recruitment and promotion

Faculty recruitment, retention, promotion, and tenure are subject to UNMC and the University of Nebraska policies and procedures. The College adheres to UNMC policy No. 1004, 5.1, regarding equal employment opportunity and is committed to creating a diverse and inclusive work and learning environment free from discrimination and harassment. The policy states that "UNMC does not discriminate on the basis of race, ethnicity, color, national origin, sex (including pregnancy), religion, age, disability, sexual orientation, gender identity, genetic information, veteran status, marital status, and/or political affiliation in its educational programs, activities, and employment."

The department chair is responsible for hiring any new faculty member in their department. In consultation with departmental faculty, the chair is responsible for determining the need for a new faculty member. The Chair is responsible for authorizing a search committee and appointing its members. Search committees are all provided resources and training through the UNMC Office of Faculty Development. The search committee will make a recommendation to the chair. Initial recommendation for appointment, promotion, or award of tenure of faculty members rests with department chairs and the dean. All hiring decisions that include tenure, regardless of rank, require the approval of the department chair and dean. Newly hired faculty members are assigned mentors or are mentored by the chair to help them stay on course for future promotion. The promotion and tenure chair provides a yearly Promotion 101 seminar for faculty at all levels and tracks.

The promotion and tenure committee determines promotions. The UNMC COPH Promotion and Tenure Guidelines include the process, promotion, and tenure review criteria (ERF->A->A1->COPH Promotion and Tenure Guidelines). The COPH includes three appointment types: 1) Health Professions (tenured leading), 2) Special Appointment (nontenure leading), and 3) Continuous (Tenured). Each faculty considering promotion and or tenure must first receive approval from their department chair; next, the departmental promotion and tenure committee reviews the applicants' materials (if available, based on the appropriate number of senior faculty).

Each Department will establish a Promotion and Tenure Committee when a critical mass of departmental senior faculty exists. The Committee, appointed by the Department Chair, must consist of three or more departmental faculty at or preferably above the candidate's present academic rank. Having tenured faculty serve on the Department Promotion and Tenure Committee is also preferred. The Department Chair may not serve on the Department Promotion and Tenure Committee

The Department Promotion and Tenure Committee (or Department Chair in the absence of a committee) will review a complete file of materials required by the COPH Promotion and Tenure Committee. It is the responsibility of the Chair of the Promotion and Tenure Committee to inform each candidate for promotion and/or tenure that the candidate is responsible for providing the necessary information for assembling a complete portfolio. The Department Promotion and Tenure Committee will set a deadline for receiving the candidate's materials, allowing sufficient time to complete its review and provide the Department Chair's letter of recommendation before the COPH Promotion and Tenure Committee's deadline. The Department Promotion and Tenure Committee will meet to review the candidates' finalized materials and recommend them to the Department Chair in time for the Department Chair to meet the deadline for their nomination letter.

As stated in UNMC Guidelines for Submitting Promotion and Tenure Recommendations, "A negative decision at the department level may be appealed within the college/institute. An individual wishing to appeal a department-level decision must present his/her arguments in writing to the Dean within 15 days after receiving written notification of the department chairperson's decision."

After the department review, the complete application is sent to the College Promotion and Tenure Committee for full consideration and review. The COPH Promotion and Tenure Committee is a standing committee (see UNMC COPH Bylaws, Section 1.D.1). The Committee reviews the application materials for each candidate. It makes a recommendation to the Dean regarding promotion and/or tenure. The COPH Committee also communicates its recommendation to the candidate's Department Chair. The Dean decides on each candidate's application for promotion and tenure and provides a written notification to the candidate and their chair of the recommendation. The dean then forwards this recommendation to the Chancellor for final review

In the event of a negative decision by the College Committee, the Department Chair or the candidate can request a reconsideration of a College Promotion and Tenure Committee recommendation. A written request for reconsideration must be submitted to the Dean within 15 days after written notification of the recommendation by the College Promotion and Tenure Committee. The Dean will act on the appeal within 30 days of the request for reconsideration or

before the deadline for submission to the Chancellor, whichever is earlier. Decisions by the Dean to deny promotion and/or tenure will normally be considered final for that year, with the exception that an individual who alleges that the decision of denial of promotion and/or tenure was prejudiced or capricious may submit a written appeal to the Chancellor within 15 days after receiving written notification of the Dean's decision.

f. research and service activities

The College of Public Health requires that research and service are expectations for maintaining and being promoted as a faculty member (assistant professor and above) in all tracks. Through the development and approval of the College's Promotion and Tenure Guidelines, the faculty set the standards for performance in these areas. The College has clearly defined research, service, and other scholarly activities.

- Definition of research and other scholarly activities. Research and other scholarly activities are the process of investigation or inquiry that leads to the acquisition of new knowledge and the synthesis of new ideas.
- Definition of academic public health practice activities. Academic public health practice is the applied interdisciplinary pursuit of scholarship in the field of public health—specifically, developing and applying new knowledge to improve population-specific public health through practice in public health agencies and community, medical, and other public health organizations.
- Definition of practice-based research: Practice-based research is the systematic inquiry into the systems, methods, policies, and programmatic applications of public health practice. Ernest Boyer's four dimensions of scholarship conceptualize Practice-based research within (1) The scholarship of discovery describes the generation of new knowledge for enhancing public health practice. (2) The scholarship of teaching includes the transmission of knowledge. (3) The scholarship of integration describes research efforts that draw upon the methods, insights, perspectives, and results from multiple disciplines to address problems of practice. (4) The scholarship of application emphasizes the two-way communication between researcher and practitioner through the implementation of results in the field; that is, within an interactive relationship of research and practice, each one informs, invigorates, and improves the other.
- Team-based research and scholarly activities: The College acknowledges the value of team-based research and other scholarly activity that focuses on interdisciplinary approaches, either across or within department areas, to facilitate and support the overall research mission of the COPH and the University of Nebraska. Candidates engaged in team-based research are strongly encouraged to identify team members in their narrative, highlight their unique skill sets and contributions, and document collaborative publications in which authorship is not first/senior. The evaluation process will highly regard team-based science contributions.
- Community-engaged research: Community-engaged research is the process of working collaboratively with groups of people affiliated by geographic proximity, special interests, or similar situations with respect to the investigation and resolution of issues affecting their well-being. It is a powerful vehicle for bringing about environmental and behavioral changes to improve the community's and its members' health. It often involves partnerships and coalitions that help mobilize resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programs, and practices.
- Definition of service and administrative activities. Service for higher education institutions is the act of faculty providing their time or resources to the university, student body, local community, or an external organization. When faculty participate in academic service, they are going beyond their teaching and scholarship requirements. Through service, educators can help improve the institution and offer their expertise to other communities that can benefit from it.

3) Briefly describe how the school makes efforts to include diverse voices in decision-making.

UNMC COPH includes faculty, staff, students, and community members in many internal decision-making committees. The diversity of the internal team and community members provides diverse voices and inputs for important decisions. In addition, the College's strategic planning process included faculty, staff, students, and community input to assist the leadership in setting the college's five-year strategic directions. The College holds meetings simultaneously with in-person and online attendees to allow for more participation in the decision-making process, as well.

4) A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty, and students in governance of the school.

A bylaws revision committee is currently proposing revision to our bylaws. For the current version please see ERF->A->A1->COPH Bylaws.

5) Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

UNMC COPH faculty contribute to decision-making through membership and leadership on institutional committees at the University of Nebraska Medical Center. One extremely important way is through the UNMC Faculty Senate. The UNMC Faculty Senate is a group of faculty elected from each major academic unit with responsibilities defined by the Bylaws of the Board of Regents of the University of Nebraska (ERF->A->A1->NU Board of Regents Bylaws). The Senate serves as the governing body empowered to represent the UNMC faculty.

Table A1.13 UNMC Faculty Senate, COPH Representatives

Position	Names	COPH Affiliation
Faculty Senator and Executive Committee Member	Sharon Medcalf	Epidemiology, Associate Professor
Faculty Senator and Honorary Degrees and Awards Committee	Rachel Lookadoo	Environmental, Agricultural, and Occupational Health, Assistant Professor
Faculty Senator and Information and Technology Committee	Aaron Yoder	Environmental, Agricultural, and Occupational Health, Associate Professor

A sample of additional leadership and committee membership service to the institution are listed in Table A1.14.

Table A1.14 Sample of Leadership and Committee Membership Service to UNMC and University of Nebraska

Group Committee	Position	Names	COPH Affiliation
UNMC Chancellor's Council	Council Member	Ali Khan	COPH Dean
UNMC Dean's and Director's Committee	Committee Member	Ali Khan	COPH Dean
UNMC Department Administrative Roundtable Committee	Committee Members	Pam Ehmke Brad Pfeifer	Assistant Deans, Finance & Operations
UNMC Education Council	Council Member	Nicole Kolm Valdivia	Assistant Dean, Academic Affairs
UNMC Interprofessional Education Curriculum Committee	Committee Member	Nicole Kolm Valdivia	Assistant Dean, Academic Affairs

UNMC Graduate Council	Council Member	Nicole Kolm Valdivia	Assistant Dean, Academic Affairs
UNMC Policy Committee	Committee Member	Jessica Tschirren	Assistant Dean, Student Affairs
UNMC Student Affairs Committee	Committee Member	Jessica Tschirren	Assistant Dean, Student Affairs
UNMC Assessment Committee	Committee Member	Lacey Merica	Accreditation and Assessment Coordinator
UNMC e-Learning Committee	Committee Member	Analisa McMillian	Director, Office of Teaching and Learning
University of Nebraska Council of Online Learning Excellence	Committee Member	Analisa McMillian	Director, Office of Teaching and Learning
Health, Equity, Diversity, and Inclusion Council	Committee Member	Stacey Coleman	Culture and Sustainability Manager

6) Describe how full-time and part-time faculty regularly interact with their colleagues, and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

UNMC COPH utilizes shared governance between faculty and leadership. As noted above, our bylaws outline the role of the standing and non-standing faculty committees. In addition to the committees, faculty department meetings are integral to the College's governance, processes, and faculty interactions within the College. Department meetings are open to all full-time, part-time, adjunct, and courtesy faculty. For documentation of recent meetings of the Governing Faculty and the corresponding subcommittees, agendas, attendee lists, and minutes, see ERF->A->A1->Fac interaction.

In addition to committee meetings, faculty also interact with several college-wide activities. The College has two "all hands" meetings each year. "All hands" meetings are held in August and February. The August "all-hands" event is open to all faculty, staff, and students and includes food, activities, and a celebration to kick off the school year. The February all-hands meeting wraps up the calendar year with updates from the dean and a celebration. In addition, all faculty, staff, students, and family members are invited to fall activities to build culture. Past events have included an evening event at a local pumpkin patch with dinner and activities. In 2024, over 200 faculty, staff, students, and families attended the event, fully supported by the College.

Dean Khan also sends a monthly electronic "Random Musings," highlighting events, celebrating faculty, staff, and student achievements, recognizing new hires, and providing college and university-wide updates.

Another opportunity for interaction is through the college wellness council. The wellness council organizes events like a book club, ice cream socials, produce exchanges, and other events to highlight wellness.

Other interaction opportunities include the Public Health Innovation and Research Expo (PHIRE). PHIRE is a day-long event that allows faculty, students, and stakeholders to meet collaborators and community and clinical partners, showcase their research, hear updates from UNMC College of Public Health Innovation Fund investigators, and brainstorm innovative ideas for federal funding.

The Nebraska Public Health Conference is another excellent opportunity for faculty to interact and learn about practice initiatives. The College supports any faculty who would like to attend the annual conference.

Finally, faculty can interact through the College's research, practice, and community engagement offices and centers. In 2023, several Centers were moved from departments to the dean's office to foster more interdepartmental collaboration. An example is the Center for Global Health and Development (CGHAD). CGHAD includes faculty members from three departments. In a recent student experience trip to Rwanda, there were students from all five departments and faculty from three departments.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths

   - Our Bylaws provide a framework and process for governance, administration, and decision-making.
   - We have great interdepartmental faculty, staff, and students on internal work groups and decision-making committees.
   - We have great representation on university-wide decision-making committees.

   Weaknesses

   - None Identified.

   Plans for Improvement
   - We are in the process of updating our by-laws, policies, and procedures.
   - We will continue to review our decision-making committees to ensure we are inclusive of all faculty, staff, and students.

A2. Multi-Partner Schools (applicable ONLY if functioning as a "collaborative unit" as defined in CEPH procedures)

Not Applicable

A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the school, and the school engages students as members on decision-making bodies whenever appropriate. The school makes efforts to include diverse voices and perspectives in these decision-making structures.

1) Describe student participation in policy making and decision making at the school level, including identification of all student members of school committees over the last three years, and student organizations involved in school governance. Schools should focus this discussion on students in public health degree programs.

The UNMC COPH intentionally and actively encourages students to be engaged participants in the Colleges policy and decision-making process to ensure their needs, experiences and perspectives have influence. A document identifying student members of school committees is available in the ERF at ERF->A->A3->COPH Student Committee Members

Student Senate
The UNMC Student Senate is composed of elected members from each of the academic units and is charged by the BoR bylaws with developing regulations for student self-government. The President of the Student Senate also serves as a non-voting member of the Board of Regents. The UNMC Student Senate operates under a Constitution which lays out the responsibilities of the senate to formulate recommendations and resolutions regarding issues that affect UNMC students and serve as a liaison between students and administrators and governing bodies. The public meetings of the Student Senate are held twice a month, and agendas and minutes are posted publicly. The COPH has senators that represent the COPH professional programs and the COPH PhD and MS students are represented by the Graduate Studies senators.

COPH Student Association
The College of Public Health Student Association (COPHSA) maintains its own bylaws (ERF A3.1) and represents the COPH student body to the college leadership and external entities in its efforts to secure a more significant and meaningful voice in the essence of COPH students' respective disciplines and programs. The membership of the COPHSA is all doctoral, masters and certificate students enrolled in a graduate or professional program of the COPH. The COPH Assistant Dean for Student Affairs serves as the advisor for the COPHSA and meets at a minimum once a month with the full executive committee to give updates and receive feedback.

Representation on COPH Decision-making Committees
The COPH has student representation on the College's decision-making committees which include the Curriculum Committee, Research Committee, Evaluation Committee and Justice, Equity, Diversity, and Inclusion Committee. Students are either elected or nominated to their respective committees by self or peer nomination. Students are considered voting members on each of these committees. At the department levels students serve as members of curriculum and admissions committees.

Town Hall Meetings
The COPHSA hosts a town hall meeting at least once per academic year but generally in both the fall and spring semesters. Additional town hall meetings can be scheduled on an ADHOC basis if topics or issues arise for which a town hall would benefit the student body.

Dean's Forum
In the fall and spring terms of every academic year, the COPHSA host the Dean's Forum in collaboration with the COPH Dean. The Dean's forum and the topics covered are planned by the COPHSA executive board and include a feedback and discussion portion in each forum. These forums are offered both in-person and virtually to be inclusive and accessible to all students.

Strategic Planning
COPH students were involved in and played an essential part in the developing and execution of the College's strategic plan. Students were invited to the two-day strategic planning retreat and served as members of the initiative implementation teams.

Student Surveys and Course Evaluations
Students engage through the formal mechanisms like course evaluations, college, and campus student experience surveys. These evaluations and surveys provide valuable feedback that allow the College to make the changes needed to improve the student experience, the curriculum and the services provided.

Additional Student Engagement
The COPH offers student interest groups (SIGS) on topics like healthcare leadership and Global health for students to engage with each other and faculty. COPH students may also engage and hold formal positions in broad array of interprofessional student organizations sponsored by the UNMC Student Life Inclusion and Diversity Office.

2) Briefly describe how the school makes efforts to include diverse voices and perspectives. Include examples as appropriate.

The COPH provides numerous opportunities for students to sharing their voice and perspectives with elected, volunteer and feedback opportunities. The large number of students in the COPH that are enrolled in online programs and/or have work and life demands that limit their ability to travel to campus lead the COPH to ensure that virtual options are available to engage in formal meetings or in student feedback sessions. An ASL interpreter is invited as needed. The COPHSA also includes online and first year student representatives, elected each year by their peers, on the executive board membership to bring forward concerns and challenges of those populations.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: There are several strengths for this criterion including formal inclusion of students in governance within the COPH and at the campus level that includes curriculum, research, evaluation, policies, and services. Students are also involved in the COPH strategic planning process, self-study and in ADHOC opportunities. The offering of virtual options for students to engage and join the governance opportunities provides the opportunity for students regardless of location be active participants.

Challenges: The COPH has a large online and full-time working student cohort that resides across many time zones. Finding ways and timing to engage this segment of the student population can be challenging. The COPH leadership continues to encourage student and committee leaders to consider the needs and constraints experienced by these populations when scheduling meetings and events.

A4. Autonomy for Schools of Public Health

A school of public health operates at the highest level of organizational status and independence available within the university context. If there are other professional schools in the same university (e.g., medicine, nursing, law, etc.), the school of public health shall have the same degree of independence accorded to those professional schools. Independence and status are viewed within the context of institutional policies, procedures, and practices.

1) Briefly describe the school's reporting lines up to the institution's chief executive officer. The response may refer to the organizational chart provided in the introduction.

As seen in the organizational charts, the dean of UNMC COPH (Ali Khan, MD, MPH, MBA) reports to the Interim UNMC Chancellor. The Interim UNMC Chancellor reports to the President of the University System. As highlighted in Table A1.14, Dr. Khan is a member of the UNMC Chancellor's Council and the UNMC Dean's and Director's Committee. The Chancellor's Council and Dean's and Director's Committee are responsible for setting strategy and providing input to the Chancellor on significant decisions at the University.

2) Describe the reporting lines and levels of autonomy of other professional schools located in the same institution and identify any differences between the school of public health's reporting lines/level of autonomy and those of other units.

UNMC is comprised of six colleges: Allied Health Professionals, Dentistry, Medicine, Nursing, Pharmacy, and Public Health. All Colleges have the same degree of autonomy and responsibility for decision-making, and all report to the UNMC Senior Vice Chancellor.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The UNMC reporting structure gives the Dean direct access to the Senior Vice Chancellor for Academic Affairs. Additionally, the COPH Dean has direct access to the UNMC Chancellor through individual meetings and the Chancellor's Council. The access for the COPH Dean is comparable to that for the deans of other colleges.

Weaknesses: None noted.

Plans for Improvement: None noted.

A5. Degree Offerings in Schools of Public Health

A school of public health offers a professional public health master's degree (e.g., MPH) in at least three concentrations representing at least three distinct sub-disciplinary areas in public health and public health doctoral degree programs (academic or professional) in at least two concentrations representing at least two distinct sub-disciplinary areas in public health. A school may offer more degrees or concentrations at either degree level.

1) Affirm that the school offers professional public health master's degree concentrations in at least three areas and public health doctoral degree programs of study in at least two areas. Template Intro-1 may be referenced for this purpose.

UNMC COPH offers Master of Public Health (MPH) degrees in seven concentrations and nine dual-degree concentrations. UNMC COPH also offers Doctor of Public Health degrees in three concentration areas. The College offers a Master of Science degree and a Master of Health Administration. The College also offers a Doctor of Philosophy degree in six areas. A list of all UNMC COPH degrees is available in the Instructional Matrix table in the Introduction.

2) An official catalog or bulletin that lists the degrees offered by the school.

Our degrees and programs are listed on our website: https://catalog.unmc.edu/public-health/

B1. Guiding Statements

The school defines a *vision* that describes how the community/world will be different if the school achieves its aims.

The school defines a *mission statement* that identifies what the school will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the school's setting or community and priority population(s).

The school defines *goals* that describe strategies to accomplish the defined mission.

The school defines a statement of *values* that describes its core principles, beliefs, and priorities.

The guiding statements may derive from the purposes of the parent institution but also reflect the school's own aspirations and respond to the needs of the communities the school intends to serve.

Together, the school's guiding statements must address the unit's approaches and aspirations for each of the following:

- **advancing the field of public health through instruction, scholarship, and service**
- **promoting student success through instruction, scholarship, and service**
- **preparing students to work with diverse populations and communities**

The guiding statements are sufficiently specific to allow the school to rationally allocate resources and to guide evaluation of outcomes.

1) The school's vision, mission, goals, and values.

Vision: Healthiest people & places worldwide.
Mission: Collaboratively and relentlessly seek new and creative solutions to the most challenging problems in public health while working to prevent them from happening in the first place.
Values:
Health Equity: We believe everyone should have a fair and just opportunity to attain their highest level of health.
Diversity: We believe embracing the diversity of people and ideas is the healthiest and best way to achieve common goals.
Knowledge: We believe high-quality education, research, and partnerships are key to discovering public health solutions that work.
Collaboration: We believe working together with communities in Nebraska, across the country, and around the world is powerful.
Innovation: We believe that constantly seeking new and creative approaches raises the bar for public health and best practices.

Goals:

1) Provide an innovative graduate-level public health education program that empowers students to become leaders who excel in diverse fields

2) Foster a collaborative research environment that generates impactful discoveries to fully understand and address public health challenges.

3) Cultivate and sustain a culture of excellence and equity within the College

4) Leverage expertise and resources to engage with local and global communities through service and practice

2) A brief narrative explanation of how the guiding statements address each of the following:
    a) advancing the field of public health through instruction, scholarship, and service
    b) promoting student success through instruction, scholarship, and service
    c) preparing students to work with diverse populations and communities

The guiding statements address the advancement of public health through instruction, scholarship, and service, and promote student success by identifying goals that focus on education, research, service, and practice. These guiding statements demonstrate the College's commitment to developing students' technical and professional skills needed to excel in their chosen fields. By identifying goals with these focus areas, we guide our students to practice the tenets of public health that lead to student success in the field. Also, our values address knowledge and innovation, which are key components of promoting success in instruction and scholarship. As our values also include diversity and collaboration, we prioritize preparing our students to work with diverse populations and communities throughout the world.

3) If applicable, a school-specific strategic plan or other comparable document.

This document can be found in the ERF at ERF->B->B1

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The COPH engaged in an inclusive process to revise the vision, mission, values, and goals, as well as develop a strategic plan. A consultant was hired to facilitate the strategic planning process, and a consulting firm was hired to facilitate the development of the mission, vision, and values. Both processes included multiple opportunities for faculty, staff, and students to provide feedback, and the Panel of Advisors were consulted, gave feedback and approved the guiding statements. This led to a stronger overall strategic plan and more engagement and buy in to the creation of these guiding statements. This also resulted in the final products of the mission, vision, values, and goals truly representing the COPH. In addition, once strategic plan goals were identified, COPH leadership allocated significant monetary resources to meet the goals identified. Resources have been used to carry out the goals including providing all staff training and development opportunities, a consulting contract for creation of new language for the COPH website and recruitment materials, and the hiring of an additional instructional designer for the OTL.

Weaknesses and Plan for Improvement: Although the purpose of this strategic plan was to develop the mission, vision, values, and goals of the College, there were likely missed opportunities to further involve external partners. As we implement the strategic plan, we are being mindful of improving our efforts to include external partners and other stakeholders. We also are working on a process to regularly evaluate our progress toward meeting the goals outlined in the strategic plan.

B2. Evaluation and Quality Improvement

The school defines and consistently implements an evaluation plan that fulfills the following functions:

- **includes all measures listed in Appendix 1 in these Accreditation Criteria**
- **provides information that allows the school to determine its effectiveness in advancing its mission and goals (as defined in Criterion B1)**
    - **Measures must capture all aspects of the unit's mission and goals. In most cases, this will require supplementing the measures captured in Appendix 1 with additional measures that address the unit's unique context.**
- **defines a process to engage in regular, substantive review of evaluation findings, as well as strategic discussions about their implications**
- **allows the school to make data-driven quality improvements e.g., in curriculum; preparing students to work with diverse populations; student services; advising; faculty functions; research and extramural service; and operations, as appropriate**

1) Present an evaluation plan in the format of Template B2-1 that lists the following for each required element in Appendix 1:
    a. the specific data source(s) for each listed element (e.g., alumni survey, student database)
    b. a brief summary of the method of compiling or extracting information from the data source
    c. the entity or entities (generally a committee or group) responsible for reviewing and discussing each element and recommending needed improvements, when applicable
    d. the timeline for review (e.g., monthly, at each semester's end, annually in September)

Template B2-1

Measures	**Criteria or *Template***	**Data source & method of analysis**	**Who has review & decision-making responsibility?**	**Does it measure Goal 1?**	**Does it measure Goal 2?**	**Does it measure Goal 3?**	**Does it measure Goal 4?**
Student enrollment	*Intro-2*	Student enrollment data is maintained by the Office of the Registrar in a student database (PeopleSoft). This information is tracked and monitored by OES and the AAC. Trend information is analyzed by department chairs and program directors each semester.	ADSA ADAA SAC Department Chairs Program Directors	**X**		**X**	
Unit-defined measure 1: Participation in professional development related to instruction	*B2-1*	Faculty are asked to report their participation in professional development related to instruction and pedagogical techniques on our annual college Faculty Survey. The College's Office of Teaching and Learning also provides	Deans & Chairs Committee ADAA DTL	X		X	

		professional development opportunities to faculty and tracks the faculty members who participate in training. UNMC also has a robust Faculty Development team that offers professional development for faculty and staff. Participation in these opportunities is also tracked.					
Unit-defined measure 2: Practice partner engagement in curricular development	B2-1	The ADAA and DTL facilitate curricular revisions for academic programs. These revisions typically strive to include a comprehensive group of faculty, current students, alumni, and practice partners. Starting in fall 2024, it will be reported as part of the new or revised course or program proposals that are submitted to Curriculum Committee.	ADAA DTL ADP DDP DMP DCS	X		X	X
Unit-defined measure 3: Number of students who participate in faculty-sponsored research	*B2-1*	This information is collected annually as part of our COPH Student Survey. The information is analyzed by the AAC and Evaluation Committee.	Dean ADAA ADR Department Chairs Program Directors	X	X	X	
Unit-defined measure 4: Number of students who receive travel awards to present their research at conferences	*B2-1*	The College frequently provides travel awards to students to present their work at regional or national conferences, such as the American Public Health Association conference and the Midwest Public Health Innovation and Research Expo. This information is reviewed annually by the ADSA and ADR.	ADSA ADR	X	X	X	
Unit-defined measure 5: Number of strategic practice partnerships to support	*B2-1*	This information is compiled by the APM, DPP, and DMP by monitoring established affiliation agreements on an ongoing basis. It is analyzed by these individuals and the ADP	ADP APM DMP DDP ADAA	X		X	X

student experiences		and ADAA on a regular basis to identify new potential partners.					
Unit defined measure 6: Number and percentage of students who present their work or scholarship	*B2-2*	This information will be collected annually starting in the 2024-2025 AY as part of our COPH Student Survey. The information is analyzed annually by the AAC and Evaluation Committee.	ADAA ADR		X		
Unit defined measure 7: Number and percentage of students who publish their work or scholarship	*B2-2*	This information will be collected annually starting in the 2024-2025 AY as part of our COPH Student Survey. The information is analyzed annually by the AAC and Evaluation Committee.	ADAA ADR		X		
Unit defined measure 8: Number of students who are currently employed in public health who receive scholarships	*B2-2*	This information is managed and reviewed annually by the ADSA. COPH continually seeks funding for scholarships for students or prospective students already working in public health settings.	ADSA	X			X
At least three specific examples of improvements undertaken in the last three years based on the evaluation plan. At least one of the changes must relate to an area other than the curriculum (e.g., research, community engagement). Additional examples may relate to	*B2-2*						

any component of the evaluation plan							
Graduation rates (Approach 1)	*B3-1*	Student enrollment data is maintained by the Office of the Registrar in a student database (MyRecords). Students are also required to fill out a graduation application during their final semester. OES maintains a list of students planning to graduate based on these applications and updates it at the end of each semester. The graduation rate information is then tracked by the OES and AAC each semester. The graduation rate information is analyzed by the College leadership annually.	Dean ADAA ADSA Department Chairs Program Directors AAC	X		X	
Graduation rates (Approach 2)	*B3-2 (if applicable)*						
Graduation rates (Approach 3)	B3-3 (if applicable)						
Post-graduation outcomes (e.g., employment, enrollment in further education)	*B4-1*	Information is gathered from exit surveys, recent graduate surveys and individual follow-up, which includes emails, LinkedIn, and using social media. The information is tracked by AAC & DCS and analyzed for trends.	DCS AAC ADAA Program Directors	X		X	
Actionable data (quantitative and/or qualitative) from recent alumni on their self-	B5	Information is collected from recent alumni surveys and individual alumni follow-ups and focus groups. This information is analyzed by the ADAA, ADP, and DCS to identify potential program	DCS ADAA ADP COPH Alumni Council UNMC	X		X	X

assessed preparation for post-graduation destinations		updates/changes. The information is also shared with the COPH & UNMC Alumni groups.	Alumni Association				
Budget table	*C1-1*						
Student perceptions of faculty availability	C2	This information is collected annually as part of our COPH Student Survey. The information is analyzed by the AAC and Evaluation Committee.	ADAA OTL Department Chairs Evaluation Committee	X		X	
Student perceptions of class size & relationship to learning	C2	This information is collected annually as part of our COPH Student Survey. The information is analyzed by the AAC and Evaluation Committee.	ADAA Department Chairs Evaluation Committee	X		X	
List of all faculty, which concentrations they support & their FTE allocation to the unit as a whole	*C2-1, E1-1, E1-2*						
Ratios for student academic advising (all degree levels)	*C2-2*	This information comes from our My Records and Seguidor. The ratios are tracked by the AAC and analyzed by the ADAA, Department Chairs, and Program Directors and reviewed annually.	ADAA Department Chairs Program Directors	X		X	
Ratios for supervision of MPH ILE	*C2-2*	This information is pulled from Canvas, our learning management system. The ratios are tracked by the AAC and analyzed by the ADAA, Department Chairs, and Program Directors and reviewed annually.	ADAA Department Chairs Program Directors	X		X	
Ratios for supervision of bachelor's cumulative/experiential activity	*C2-2*						

Ratios for DrPH ILE advising	*C2-2*	This information is pulled from Canvas. The ratios are tracked by the AAC and analyzed by the ADAA, Department Chairs, and Program Directors and reviewed on an ongoing basis.	ADAA Department Chairs Program Directors	X		X	
Ratios for PhD dissertation advising	*C2-2*	This information is pulled from Seguidor. The ratios are tracked by the AAC and analyzed by the Department Chairs and Program Directors and reviewed on an ongoing basis.	Department Chairs Program Directors	X	X	X	
Ratios for MS final project advising	*C2-2*	This information is pulled from MyRecords. The ratios are tracked by the AAC and analyzed by the Department Chair and Program Director.	Department Chair Program Director	X		X	
Count, FTE (if applicable), and type/categories of staff resources	*C3-1*						
Faculty participation in activities/resources designed to improve instructional effectiveness (maintain ongoing list of exemplars)	E3	Faculty are asked to report their participation in professional development related to instruction on our annual college Faculty Survey. The College's Office of Teaching and Learning also provides professional development opportunities to faculty and tracks the faculty members who participate in training. UNMC also has a robust Faculty Development team that offers professional development for faculty and staff. Participation in these opportunities is also tracked.	Deans & Chairs Committee ADAA OTL	X		X	
Peer/Internal Review of syllabi/curricula for currency of readings, topics,	E3	This is accomplished through our COPH Course Review Process. Members of the Evaluation and Curriculum Committees participate in this process, which is organized through the OTL. OTL and ADAA	OTL ADAA Department Chairs	X		X	

methods, etc.		analyze the results of the course reviews quarterly.					
Student Satisfaction with Instructional Quality	E3	This information is gathered through the Course & Instructor Evaluations that students are asked to complete each semester. At the end of each academic year, the quantitative results from each semester are combined to form a yearly score. The information is analyzed by the AAC and Evaluation Committee after each semester concludes.	Dean ADAA OTL Department Chairs Evaluation Committee	X		X	
Implementation of Grading Rubrics	E3	The implementation of grading rubrics is tracked and analyzed by the OTL and Curriculum Committee on an ongoing basis.	OTL ADAA Department Chairs Curriculum Committee	X		X	
Faculty research/scholarly activities with connections to instruction (maintain ongoing list of exemplars)	E4	Faculty are asked annually to submit information on how they bring their research and service activities into their classroom instruction. This data is then analyzed and tracked through the OR and OTL.	ADR ADAA	X	X	X	
Number of articles published in peer-reviewed journals	*E4-1*	This number is tracked and analyzed by the OR and ADR. Information on the number of articles being published is distributed through monthly College newsletters.	ADR Dean Vice Dean		X		
Total Research Funding	*E4-1*	Research funding is tracked and analyzed by the ADF and ADR annually.	ADR Deans & Chairs Dean Vice Dean ADF		X		
Number of Grant submissions	*E4-1*	Grant submissions are tracked and analyzed by the OR and ADF. New awards are shared in the monthly College newsletter.	ADF ADR Department Chairs Dean Vice Dean		X		

Faculty extramural service activities with connections to instruction (maintain ongoing list of exemplars)	E5	This information is collected annually via the COPH Faculty Survey. The data is analyzed by the AAC and Evaluation Committee. The OPHP also maintains this information.	OPHP Department Chairs				X
Percent of Faculty participating in extramural service	E5	This information is collected annually via the COPH Faculty Survey. The data is analyzed by the AAC and Evaluation Committee.	Department Chairs				X
Number of Community-based Service projects	E5	This information is collected annually via the COPH Faculty Survey. The data is analyzed by the AAC and Evaluation Committee. Information is also tracked within each department.	Department Chairs				X
Public/private or cross-sector partnerships for engagement and service	E5	Information on these types of partnerships is tracked and analyzed by the OR, OPHP, and SPA.	ADP Department Chairs				X
Actionable data (quantitative and/or qualitative) from employers on graduates' preparation for post-graduation destinations	F1	This feedback is obtained through focus groups held with employers of UNMC COPH Alumni. These focus groups are organized by the DCS. The data is analyzed by the DCS and ADAA.	DCS ADAA ADP Department Chairs Program Director	X		X	
Feedback from external partners on changing practice & research needs that might impact unit priorities and/or curricula	F1	The APM collects feedback from practice partners who serve as preceptors for internship and practicum. The AAB, POA, and DCS also receive and share feedback and information with the COPH. The OPHP also receives feedback through informal mechanisms. This	ADAA ADP APM DCS Program Directors Deans & Chairs	X	X	X	X

		feedback is analyzed by the ADAA and ADP.					
Feedback from external partners on guiding statements and ongoing self-evaluation data	F1	Feedback on guiding statements and evaluation data is solicited from the AAB and POA. This feedback is analyzed by the COPH Dean and Vice Dean.	Dean Vice Dean	X	X	X	X
Professional AND community service activities that students participate in (maintain ongoing list of exemplars)	F2	This information is collected via the Annual Student Survey. The COPH Student Association also maintains a list of their yearly activities. UNMC SLIDO also maintains a list of students who participate in campus wide professional and community service activities. The information is analyzed by the AAC & ADSA.	OPHP OES	X		X	X
Current educational and professional development needs of self-defined communities of public health workers (individuals not currently enrolled in unit's degree programs)	F3	Information about these needs is tracked and analyzed by the OPHP, CS-CASH, CPERS and CRHD, as they are all engaged in providing training activities to the public health workforce. Information is gathered via feedback at training sessions, surveys, and at information booths at community/professional events. Additionally, OPHP assesses and/or analyses data from workforce competency assessments completed by state, local, and tribal public health departments.	OPHP CS-CASH CRHD CPERS				X

Continuing education events presented for the external community, with number of non-student, non-faculty attendees per event (maintain ongoing list)	*F3-1*	Information about these events and their attendance is tracked by the OPHP, CS-CASH, CPERS, and CRHD, as they are all engaged in providing training activities to the public health workforce. The information is analyzed by the respective groups following their events.	OPHP CS-CASH CRHD CPERS Vice Dean				X
Evidence of the unit's approaches, successes, and/or challenges in advancing diversity & cultural humility	G1	This information is gathered, tracked, and analyzed by the AAC, COPH JEDI Council, and CSM.	Dean Leadership Council CSM JEDI Council	X	X	X	X
Student AND faculty (staff, if applicable) perceptions of unit's climate regarding diversity & cultural humility	G1	This information is tracked through the annual Student Survey and annual Faculty Survey. An annual staff survey is currently under development. The campus does conduct a campus climate survey, but the response rate is extremely low. The survey responses are analyzed by the AAC and ADAA to provide to other members of College leadership.	Dean CSM JEDI Council Leadership Council Deans & Chairs			X	
Student satisfaction with academic advising	H1	This information is collected annually as part of our COPH Student Survey. The information is analyzed by the AAC and Evaluation Committee.	ADAA Department Chairs	X		X	
Student satisfaction with career advising	H2	This information is collected annually as part of our COPH Student Survey. The information is analyzed by the AAC and Evaluation Committee.	ADAA DCS	X		X	
Events or services provided to assist with	H2	A list of events and services is maintained and analyzed by the DCS and OPHP.	DCS OPHP	X		X	

career readiness, job search, enrollment in additional education, etc. for students and alumni (maintain ongoing list of exemplars)							
Number of student complaints filed (and info on disposition or progress)	H3	This information is tracked by the ADSA. Complaints are reviewed per policy discussed in Criteria H3 as they are received. Trends are analyzed by the ADSA and shared with other members of College leadership.	Dean Vice Dean ADSA ADAA	X		X	
Quantitative Score (GPA) for newly matriculating students	H4	This information is tracked by OES and the admissions team. It is analyzed at the end of each admissions cycle.	Dean OES Deans & Chairs	x		x	

2) Provide evidence of implementation of the plan described in Template B2-1. Evidence may include reports or data summaries prepared for review, notes from meetings at which results were discussed, etc.

Evidence of implementation can be found in the ERF at ERF->B->B2.

3) Provide at least three specific examples of improvements undertaken in the last three years based on the evaluation plan in the format of Template B2-2. At least one of the changes must relate to an area other than the curriculum (e.g., research, community engagement). Additional examples may relate to any component of the evaluation plan.

	Measure (copied from column 1 of Template B2-1) that informed the change	**Data that indicated improvement was needed**	**Improvement undertaken***
Example 1	Student satisfaction with academic advising (non-curriculum)	Data from the annual student survey, as well as anecdotal feedback from students, indicated that students were not receiving the attention they needed related to course planning and academic advising.	In November 2021, COPH hired a position dedicated to course planning and academic advising for MPH and certificate students. Student survey data since implementation of this new position indicates students are very satisfied with the academic advising services they receive.

Example 2	Student satisfaction with instructional quality	Data from course evaluations administered after each semester and from the annual student survey indicated the need for improvement in instructional quality, particularly for online courses.	The Director of Teaching and Learning developed a course titled *Teaching Online* for faculty. The course is recommended for all faculty, but required for new faculty or faculty who receive course evaluations below 3.5 on a 5.0 scale. Course evaluations have improved significantly since implementation of this course, and scores for online courses are now often higher than on campus courses.
Example 3	Number of grant submissions	The College continually strives to increase the number of grant submissions from faculty and this is a metric shared annually at the Dean's State of the College presentation.	The College hired staff whose responsibility is to support faculty and students in grant submissions. This support has led to steady annual increase in the number of grant submissions and the number of grants successfully funded.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The Evaluation Committee of the College is an inclusive committee with representatives from every department, Academic Affairs, and Student Affairs, and is responsible for monitoring the evaluation plan. In addition, the College is preparing to launch an Office of Evaluation and Metrics, which will provide additional support.

Weakness: Through the self-study process, we identified areas of our work that we are not measuring routinely, such as external partner involvement in curricular development, the number of students who publish their work, and the number of students who present their work.

Plan for Improvement: We've added evaluation measures based on areas of work we've identified, as shown above. The College continues to build mechanisms for consistent reporting, such as adding questions to faculty and student surveys to ensure all needed information is collected regularly. We will also utilize the university-sponsored evaluation system to monitor and track all evaluation measures.

B3. Graduation Rates

The school collects and analyzes graduation rate data for each public health degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The school demonstrates compliance with this criterion through one of three approaches (defined in the criteria document). Units may use different approaches for different degrees (e.g., approach 1 for MPH and approach 3 for DrPH) when there are multiple degrees in the unit of accreditation.

Schools must use approach 1 if possible, then must attempt to demonstrate compliance via approach 2; approach 3 is available when compliance with the other approaches is not possible.

Schools calculate all graduation rates based on the maximum time to graduation.

Schools calculate bachelor's degree graduation rates only for students who have declared the major and completed at least 75 semester-credits or equivalent, unless the school can consistently comply with approach 1 based on tracking students from entry and prefer to do so.

1) Graduation rate data for each public health degree in unit of accreditation. See Template B3-1 (Approach 1).

Students in MPH Degree, by Cohorts Entering Between 2017-18 and 2023-24								
***Maximum Time to Graduate: 7 years (2017-18 cohort only); 5 years (2018-19 cohort forward)**								
	Cohort of Students	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
2017-18	# Students entered	65						
	# Students withdrew, dropped, etc.	0						
	# Students graduated	1						
	Cumulative graduation rate	2%						
2018-19	# Students continuing at beginning of this school year (or # entering for newest cohort)	64	60					
	# Students withdrew, dropped, etc.	3	4					

	# Students graduated	19	2					
	Cumulative graduation rate	31%	3%					
2019-20	# Students continuing at beginning of this school year (or # entering for newest cohort)	42	54	56				
	# Students withdrew, dropped, etc.	3	2	0				
	# Students graduated	17	27	1				
	Cumulative graduation rate	57%	48%	2%				
2020-21	# Students continuing at beginning of this school year (or # entering for newest cohort)	22	25	55	189			
	# Students withdrew, dropped, etc.	6	4	3	4			
	# Students graduated	8	11	23	1			
	Cumulative graduation rate	69%	67%	43%	1%			

2021-22	# Students continuing at beginning of this school year (or # entering for newest cohort)	8	10	29	184	90		
	# Students withdrew, dropped, etc.	0	1	2	10	4		
	# Students graduated	5	4	16	37	0		
	Cumulative graduation rate	77%	73%	71%	20%	0%		
2022-23	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	5	11	137	86	97	
	# Students withdrew, dropped, etc.	1	3	1	18	6	3	
	# Students graduated	0	2	7	47	23	1	
	Cumulative graduation rate	77%	77%	84%	45%	26%	1%	

2023-24	# Students continuing at beginning of this school year (or # entering for newest cohort)	2		3	72	57	93	101
	# Students withdrew, dropped, etc.	1		0	0	0	1	3
	# Students graduated	1		3	24	27	27	2
	Cumulative graduation rate	78%		89%	58%	56%	29%	2%

Students in MS Degree, by Cohorts Entering Between 2021-22 and 2023-24				
***Maximum Time to Graduate: 5 years**				
	Cohort of Students	2021-22	2022-23	2023-24
2021-22	# Students entered	6		
	# Students withdrew, dropped, etc.	0		
	# Students graduated	1		
	Cumulative graduation rate	17%		
2022-23	# Students continuing at beginning of this school year (or # entering for newest cohort)	5	5	
	# Students withdrew, dropped, etc.	0	1	
	# Students graduated	2	1	

	Cumulative graduation rate	50%	20%	
2023-24	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	3	10
	# Students withdrew, dropped, etc.	0	0	0
	# Students graduated	1	2	1
	Cumulative graduation rate	67%	60%	10%

Note: There is one public health MS degree program in the SPH (the MS in Biostatistics). This program enrolled their first cohort in Fall 2021. Therefore, no cohort has yet reached their maximum time to graduate.

Students in PhD Degree, by Cohorts Entering Between 2017-18 and 2023-24								
***Maximum Time to Graduate: 7 years**								
	Cohort of Students	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24
2017-18	# Students entered	14						
	# Students withdrew, dropped, etc.	0						
	# Students graduated	0						
	Cumulative graduation rate	0%						
2018-19	# Students continuing at beginning of this school year (or # entering for newest cohort)	14	11					
	# Students withdrew, dropped, etc.	1	0					
	# Students graduated	0	0					
	Cumulative graduation rate	0%	0%					

2019-20	# Students continuing at beginning of this school year (or # entering for newest cohort)	13	11	14				
	# Students withdrew, dropped, etc.	1	0	1				
	# Students graduated	0	0	0				
	Cumulative graduation rate	0%	0%	0%				
2020-21	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	11	13	12			
	# Students withdrew, dropped, etc.	0	0	0	0			
	# Students graduated	1	0	0	0			
	Cumulative graduation rate	7%	0%	0%	0%			
2021-22	# Students continuing at beginning of this school year (or # entering for newest cohort)	11	11	13	12	18		
	# Students withdrew, dropped, etc.	0	0	1	1	0		
	# Students graduated	4	0	1	0	0		
	Cumulative graduation rate	36%	0%	7%	0%	0%		

2022-23	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	11	11	11	18	3	
	# Students withdrew, dropped, etc.	0	0	0	2	0	0	
	# Students graduated	7	6	2	1	0	0	
	Cumulative graduation rate	86%	55%	21%	8%	0%	0%	
2023-24	# Students continuing at beginning of this school year (or # entering for newest cohort)	0	5	9	8	18	3	18
	# Students withdrew, dropped, etc.	0	0	0	1	0	0	0
	# Students graduated	0	0	4	1	0	0	0
	Cumulative graduation rate	86%	55%	50%	17%	0%	0%	0%

Students in DrPH Degree, by Cohorts Entering Between 2020-21 and 2023-24					
***Maximum Time to Graduate: 7 years**					
	Cohort of Students	2020-21	2021-22	2022-23	2023-24
2021-21	# Students entered	6			
	# Students withdrew, dropped, etc.	0			
	# Students graduated	0			
	Cumulative graduation rate	0%			

2021-22	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	11		
	# Students withdrew, dropped, etc.	0	0		
	# Students graduated	0	0		
	Cumulative graduation rate	0%	0%		
2022-23	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	11	17	
	# Students withdrew, dropped, etc.	0	0	1	
	# Students graduated	0	0	0	
	Cumulative graduation rate	0%	0%	0%	
2023-24	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	11	16	14
	# Students withdrew, dropped, etc.	0	0	1	0
	# Students graduated	2	2	0	0
	Cumulative graduation rate	33%	18%	0%	0%
Note: The DrPH program enrolled their first cohort in Fall 2020. Therefore, no cohort has yet reached their maximum time to graduate.					

2) *Not applicable if documentation request 1 demonstrates compliance:* Graduation rates for the three most recent cohorts that have reached the maximum time to graduation and a calculation of the average rate across these three years in the format of Template B3-2 (Approach 2).

   Not Applicable

3) *Not applicable if documentation request 1 or 2 demonstrates compliance:* Graduation rates for students in at least two comparable degree programs in the same institution in the format of Template B3-3 (Approach 3). This template should also include a succinct narrative explanation for why these degree programs are comparable and how these degree programs calculate their graduation rates.

   Not Applicable

4) *Not applicable if documentation request 1 or 2 demonstrates compliance*: A hyperlink demonstrating that the unit discloses its current graduation rates within one click of the unit's homepage.

Not Applicable

5) *Not applicable if documentation request 1 or 2 demonstrates compliance:* A succinct narrative summary of the unit's approach to ensuring that recruitment and admissions processes accurately present the program of study, including time, effort, and other commitments necessary for success.

   Not Applicable

6) *Not applicable if documentation request 1 or 2 demonstrates compliance:* Evidence of the unit's approach to ensuring that recruitment and admissions processes accurately present the program of study, including time, effort, and other commitments necessary for success (e.g., communications with prospective students).

   Not Applicable

7) *Not applicable if documentation request 1 or 2 demonstrates compliance:* A succinct narrative description of the means through which the unit provides proactive advising and support for student completion.

   Not Applicable

8) *Not applicable if documentation request 1 or 2 demonstrates compliance:* A summary of the unit's analysis of factors that depress graduation rates, including specific reasons for students' non-completion.

   Not Applicable

9) *Not applicable if documentation request 1 or 2 demonstrates compliance:* A summary of the unit's interventions designed to address the factors and reasons noted in documentation request 9.

   Not Applicable

10) *Not applicable if documentation request 1 or 2 demonstrates compliance:* A succinct analysis of the effectiveness of the interventions described in documentation request 10.

Not Applicable

11) *Not applicable if documentation request 1 or 2 demonstrates compliance:* Documentation and evidence of the unit's analysis of factors contributing to graduation rates, the development of interventions to address these factors, and the effectiveness of those interventions. Documentation may include data, reports, notes documenting faculty discussions or meetings, etc.

    Not Applicable

12) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Students in all programs are meeting expected completion rates.

Weaknesses: There were no identified weaknesses.

B4. Post-Graduation Outcomes

The school collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each public health degree offered (e.g., BS, MPH, MS, PhD, DrPH).

The school achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B4-1.

Master of Public Health Degree Post-Graduation Outcomes	**2020-21 Number and percentage**	**2021-22 Number and percentage**	**2022-23 Number and percentage**
Employed	47 (94%)	55 (86%)	53 (66%)
Continuing education/training (not employed)	1 (2%)	4 (6.2%)	7 (9%)
Not seeking employment or not seeking additional education by choice	0	1 (1.6%)	0
Actively seeking employment or enrollment in further education	0	0	1 (1%)
Unknown	2 (4%)	4 (6.2%)	19 (24%)
Total graduates (known + unknown)	50	64	80

Master of Science Degree Post-Graduation Outcomes	**2020-21 Number and %**	**2021-22 Number and %**	**2022-23 Number and %**
Employed	1 (100%)	1 (100%)	2 (67%)
Continuing education/training (not employed)	0	0	0
Not seeking employment or not seeking additional education by choice	0	0	0
Actively seeking employment or enrollment in further education	0	0	0
Unknown	0	0	1 (33%)
Total graduates (known + unknown)	1	1	3

PhD Degrees Post-Graduation Outcomes	**2020-21 Number and %**	**2021-22 Number and %**	**2022-23 Number and %**
Employed	11 (92%)	6 (100%)	7 (39%)
Continuing education/training (not employed)	0	0	8 (44%)
Not seeking employment or not seeking additional education by choice	1 (8%)	0	1 (5%)
Actively seeking employment or enrollment in further education	0	0	0
Unknown	0	0	2 (11%)
Total graduates (known + unknown)	12	6	18

The DrPH degree had its first graduates during the 2023-2024 academic year, so the graduates have not yet had one full year since graduation to report their employment information.

2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

The College has been quite successful in collecting data on post-graduation outcomes. There are very few graduates for whom we do not have outcome data. In addition, employment rates are incredibly high, indicating that graduates are effectively gaining employment.

Near the end of each semester, the COPH Director of Career Services sends an email to students who have applied for graduation that semester. The email provides students with information about their continued access to COPH career services after graduation and includes a link to a survey where we ask if they are continuing employment in their same position, have obtained a new position they will start after graduation, are continuing their education, are actively seeking new employment, or aren't sure of their plans yet. For students who indicate they are staying at their same position or have accepted a new position, we ask them the name of their employer, their job title, and employment sector information. If students indicate they are continuing their education we ask them what field they will be studying. If students respond they are job searching or are unsure, we follow up with them, through their personal email, for three additional semesters, or until they indicate they have found employment. We also follow up with non-respondents for three additional semesters or until they indicate they have found employment.

If a graduate does not respond to these surveys, we utilize other techniques. This includes asking their faculty advisor/mentor if they know the alum's status and/or if they can reach out to follow up, and examining the alum's LinkedIn and social media profiles for updates and information. We will also use online search engines like Google, if other tools do not find the needed information. In past years we have been able to follow up with some alums by searching their name, UNMC, and information about their field of expertise.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths*:* The Director of Career Services has a positive relationship with students and that has helped facilitate the collection of these data. She has been very successful in building lasting relationships with graduating students. She serves alumni by frequently sharing job tips and postings. In addition, the Office of Public Health Practice provides opportunities for professional development with alumni, which has helped increase engagement and may improve employment outcomes. These are discussed in Criterion F.
Weaknesses: There were no identified weaknesses.

B5. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the school collects information on alumni perceptions of their preparation for the workforce (or for further education, if applicable). Data collection must elicit information on the following:

- **what skills are most useful and applicable in post-graduation destinations**
- **areas in which graduates feel well prepared**
- **areas in which graduates would have benefitted from more training or preparation**
- **perceptions of their preparation to work in diverse environments and/or with diverse populations**

The school defines qualitative and/or quantitative methods designed to provide useful information on the issues outlined above. "Useful information" refers to information that provides the unit with a reasonable basis for making curricular and related improvements. Qualitative methods may include focus groups, key informant interviews, etc.

The school documents and regularly examines its methodology, making revisions as necessary, to ensure useful data.

1) Summarize the findings of alumni self-assessment of their preparation for post-graduation destinations.

The College gathered quantitative and qualitative data from alumni with the purpose of improving curricular effectiveness. Overall, alumni perception of their preparation for the field of public health were positive. Alumni were asked to rate their preparation on specific public health competencies. Survey questions varied based on degree program.

MPH Program (n=20)	
Competency	**Abilities increased a moderate or great amount (%)**
Ability to apply epidemiological methods to different public health settings and situations	67%
Ability to analyze quantitative and qualitative data	72%
Ability to compare the organization, structure, and function of health care and public health systems	67%
Ability to discuss challenges to health equity, like structural bias and social inequities	72%
Ability to assess a population's needs, assets, and capacities	67%
Ability to explain principles and tools of budget and resource management	28%
Ability to select evaluation methods for public health programs	55%
Ability to identify strategies and build coalitions to influence public health outcomes	33%
Ability to evaluate policies and their impact on public health	55%
Ability to apply systems thinking tools	55%

Alumni were surveyed on whether their education at COPH prepared them to work with diverse populations. Overall, 85% somewhat or strongly agreed that it did. In addition, 83% of respondents perceived the climate of COPH to be moderately or very inclusive.

Alumni responding to the survey provided qualitative feedback into content they wish would have been part of their curriculum. The themes that emerged include:

Course Content

- Advanced epidemiology courses with hands-on experience
- Cultural awareness
- Legal basis of public health measures
- More integration of social sciences and population health concepts
- Budgeting and grant writing

Technical Skills and Tools

R programming and Python for data analysis

- Using AI for data interpretation and communication
- High-throughput modeling and big-data analysis
- Less focus on coding from scratch, more on data interpretation

Practical Skills and Professional Preparation

- Stronger quantitative and analytical skills
- Communication skills
- Understanding public health workforce structure
- Emotional coping mechanisms for public health professionals

Regarding content outside of the curriculum that alumni respondents wish would have been part of their educational experience, these themes emerged:

Career Preparation and Job Searching

Job searching advice specific to public health

- Professional development advising
- Preparing students for the job market or academia
- Networking how-to and professional communication practices

Practical Experience and Real-World Exposure

Opportunities for real-world public health work

- Job shadowing in various public health settings
- Field studies and hands-on data collection and analysis
- More practical experience with advocacy

Global Health and Broader Perspectives

Limited opportunities in Global Health, including local-global perspectives

Mentorship and Support Systems

- Dedicated mentorship and support
- Addressing faculty turnover and its impact on students
- Learning communities/safe spaces for students from disadvantaged backgrounds
- Implementing the "hidden curriculum" to clarify expectations for all students

2) Provide full documentation of the methodology and findings from quantitative and/or qualitative data collection.

This documentation can be found in the ERF at ERF->B->B5

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The alumni survey was historically sent out every two to three years but was paused in 2020 due to the increased burden on the public health workforce of COVID-19. The College decided not to

distribute to the survey, which may add to the burden of our alumni working who were actively engaged in COVID response. The survey was not sent out again until spring 2024, which led to a larger than normal gap. Moving forward, the alumni survey will be sent out every other year.

Weaknesses and Plans for Improvement: The response rate for the alumni survey was low. The Evaluation Committee will engage with the Director of Career Services and Office of Public Health Practice to brainstorm ways to increase the response rate, including engagement of the alumni council, to ensure results are representative of the views of the alumni. In the meantime, the ADAA and Evaluation Committee will review the information received through the student survey and identify opportunities to make curricular changes and improvements to better prepare graduates for their careers.

C1. Fiscal Resources

The school has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

1) Describe the school's budget processes, including all sources of funding. This description addresses the following, as applicable:

The college maintains an annual balanced budget to ensure sufficient resources to fulfill our mission and goals. We use a responsibility center management budget model. Funds are currently received for budgetary support through tuition and fees and state appropriations (tax dollars), the Nebraska Research Initiative (NRI), and Programs of Excellence (POE). In addition to these funds, the college relies on extramural funding from grants and contracts, indirect cost return from extramural awards, auxiliary funding, and Nebraska University Foundation funds.

The Assistant Dean of Finance is responsible for the overall management of the college budget. This individual and the financial administrator team work with the department chairs and center directors to ensure appropriate use of funding. Annual budget guidance is provided by the university's Budget & Fiscal Analysis Office. The university operates on a fiscal year basis starting July 1 and ending June 30. The budget is discussed at Deans and Chairs meetings and decisions are passed along at the Leadership Council meetings and in the Dean's Random Musings newsletter. The Dean also updates the college at "all hands" meetings held at the beginning of the fall and spring semesters.

a) Briefly describe how the school pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples.

Faculty salary support comes from several sources: tuition and fees, state appropriations, NRI, POE, extramural funding from grants and contracts, indirect cost return from extramural awards, auxiliary funding, and Nebraska University Foundation funds. Faculty salaries are negotiated at the time of hire based on available funding, their credentials, experience, comparison to peers, and equity within the department. The breakdown of individual faculty salary coverage is determined by their time dedicated to research activities, teaching administrative duties, and service. Faculty salaries constitute the most significant portion of the overall operating budget.

b) Briefly describe how the school requests and/or obtains additional faculty or staff (additional = not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.

New faculty or staff positions are typically identified and discussed with the appropriate Chair, Center Director, or Dean. Financial administrators for the department review all requests to identify and confirm appropriate funding sources are available. The request for a new hire is done through the completion of a New Hire Form, which identifies key information to start the process. The hiring supervisor then creates a position description to reflect the appropriate duties and responsibilities. Once the position description is finalized, a formal position requisition is made to the University's HR Compensation Department for staff positions or UNMC Academic Services for faculty positions. HR Compensation reviews the position description and provides a recommendation as it relates to title and compensation. If the hiring supervisor agrees with the recommendation, the position is sent to the Chancellor for approval. UNMC Academic Services reviews faculty position requisitions and approvals are obtained from the Chancellor's office. Once the faculty or staff positions are approved, they are posted to the following websites:

- **UNMC's Applicant Portal**

- **Careerlink** (scrapes from UNMC jobs page)
- **HERC** (scrapes from UNMC jobs page)
- **NE Works** (scrapes from UNMC jobs page)
- **Indeed** (scrapes from UNMC jobs page)
- **LinkedIn** (scrapes from Careerlink)
- **Facebook** (full site scrapes from Careerlink)
- **Glassdoor** (scrapes from Indeed)
- **National Labor Exchange (NXL)** (scrapes from UNMC jobs page)
- **Google Jobs** (scrapes from UNMC jobs page and other sources)

If additional advertising is requested, Greystone Advertising is contacted to place additional advertising per an approved budget. Applications are reviewed by the hiring manager and the selection committee (if applicable) to determine which candidates will advance to the interviewing process. Faculty, Chairs, and Deans positions typically make college-wide presentations for broader evaluation by the college. Surveys are used by the selection committee and college to gather input regarding the candidates. Once a candidate is selected, an offer of employment is made.

c) Describe how the school funds the following:
   a. operational costs (schools define "operational" in their own contexts; definition must be included in response)

Operational costs are made up of non-personnel costs, such as materials, supplies, consulting services, equipment, travel, and student expenses which are funded by annual operating revenues from state funding, tuition and fees, grants and contracts, and indirect cost return from extramural awards.

   b. student support, including scholarships, support for student conference travel, support for student activities, etc.

Scholarships offered by the college are provided by the University of Nebraska Foundation's fundraising efforts, federal grant funds (Health Resources Services Administration), and a variety of private donors. Most awards are made based on merit or financial need. The college has a scholarship committee to make recipient selections. Applications are done on an annual basis. Eligibility is determined each year based on the student's prior year academic performance, leadership skills, and donor-specific criteria.

Student support is offered as hourly student worker positions and graduate assistantships at all student levels. Students can work up to 20 hours per week and are selected based on their education, knowledge, and skills to meet departmental and program research and teaching objectives. Graduate assistant positions are offered tuition remission (up to 12 credit hours per semester), coverage of some of their student fees, and provided a stipend. The renewal of the graduate assistantship position is based on the availability of funds, their work and academic performance, and adherence to the Student Code of Conduct.

The college provides the COPH Student Association with funding of $2,000 each fiscal year for their various activities to support the college, community, and profession. The student association provides numerous social and networking opportunities for students.

Students are encouraged to work with their mentors regarding conference travel and other support.

Each year, the COPH is awarded 5 student slots to support participation in experiential learning in a public health setting. Through this program, students are awarded a $3,500 stipend to participate in 175-300 hours of public health practice work in support of their degree program. Eligible students must be engaging in partnerships with an entity that prioritizes underserved and/or rural populations in the state of Nebraska. In the summer of 2023, MPHTC partnered with an outside entity, the Frameworks Institute, to provide an additional 2 funded spots around a specific public health topic. Over the last three years, the COPH has been able to support 16 students through this program.

For more than three years, the college has supported COPH students to attend the Nebraska Public Health Conference through registration stipends. The conference offers keynotes and breakout sessions highlighting nationwide public health modernization efforts, as well as local examples of public health in action. Additionally, the conference includes networking events for students and professionals. In 2022, the conference began offering virtual attendance options, which has allowed online COPH students to also attend this conference at a reduced cost. The student fee for the last three years has been $175 and the college has paid $150 of this cost for up to 40 students through the Office of Public Health Practice.

For more than three years, CPERS has offered free admission to students at the annual Preparedness Symposia Series. A few students have participated each year; the feedback from students on the value of the experience has been overwhelmingly positive.

For more than three years, the COPH has funded awards to students that have an accepted abstract for the American Public Health Association Conference. The Dean's office is committed to funding a select number of awards at $1000 minimum each for students selected to do an Oral Presentation, and a select number of awards at $500 minimum each for students selected to do a Poster or Round Table Presentation. Students apply for these competitive awards each year. Awards are available for any student from any COPH program, and both on-campus and online students are eligible.

c. faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples

All faculty receive development funds in the form of startup funds, indirect cost return funds, and/or awards, which are to be used to advance career/educational goals and must be used for professional purposes related to their position. Items that may be purchased using these funds include: books or journal subscriptions related to their area of research or position; professional memberships related to their area of research or position; training costs for business-related purposes; equipment purchases with approval of the COPH's information systems team; and travel and associated expenses to professional meetings relates to their area of research or position, or which may be of benefit to the College. The amount of funding varies based on need and availability of funds. Faculty are encouraged to use their own professional development funds before asking the Chair and/or Dean's Office for funding.

d) In general terms, describe how the school requests and/or obtains additional funds for operational costs, student support and faculty development expenses.

The university system president authorizes the campus' annual salary increase or decrease pool of funding. The salary pool is to be used at the discretion of the Chancellor for the purpose of providing competitive compensation to recruit and retain top talent. When employees offset their salaries with extramural grant and contract funding this allows for additional funds to be used towards operational costs, student support, and faculty development. Another way the college obtains additional funds is by increasing student enrollment and the indirect return cost return from extramural funding. The Dean can also work directly with the Chancellor to negotiate additional support.

e) Explain how tuition and fees paid by students are returned to the school. If the school receives a share rather than the full amount, explain, in general terms, how the share returned is

determined. If the school's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

The College receives tuition from the Chancellor's office based upon a funding formula established when the College was founded. Each year, the College's base tuition funding is determined by comparing it to the prior year. Whether an increase or decrease, the funding is passed along to the College and distributed among the Dean's Office and five Departments based on various methods approved by the Deans and Chairs.

The College receives fees paid by students the month the fees are paid.

f) Explain how indirect costs associated with grants and contracts are returned to the school and/or individual faculty members. If the school and its faculty do not receive funding through this mechanism, explain.

UNMC's Financial Compliance and Cost Analysis unit within Business & Finance negotiates the campus' indirect rate annually. Monthly, the campus distributes to the College 21% of the indirects generated the previous month from sponsored projects. The portion kept by the campus is used for sponsored projects' infrastructure. The Dean's Office within the college keeps 25% of the 21% received and distributes the rest to the various units based on the principal investigator(s) of the sponsored project. Chairs and Directors determine how the indirect funds are distributed to the principal investigators on a project-by-project basis. Indirect funds may be spent on any university-approved business expense which supports and furthers research and education.

If the school is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall school budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by the school of public health faculty appointed at any institution.

Not Applicable

2) A clearly formulated school budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Source of Funds	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23
Tuition & Fees	2,068,530	2,754,574	3,303,928	4,349,323	4,656,209
State Appropriation	3,010,220	2,908,751	1,908,372	1,843,458	2,205,538
University Funds	7,839,582	8,959,144	9,785,304	10,790,112	11,095,727
Grants/Contracts (Direct Only)	11,270,410	12,726,654	14,592,030	14,159,220	17,422,945
Indirect Cost Recovery	2,200,721	2,719,580	2,686,941	3,163,154	3,411,200
Gifts	1,935,357	2,553,773	4,757,100	7,024,451	8,332,172
Other	5,471,556	6,520,492	7,927,566	10,421,493	12,305,082
TOTAL REVENUE	**33,796,375**	**39,142,968**	**44,961,241**	**51,751,211**	**59,428,873**
Expenditures	**FY 18-19**	**FY 19-20**	**FY 20-21**	**FY 21-22**	**FY 22-23**
Faculty Salaries & Benefits	12,418,346	13,784,485	12,949,390	14,050,475	15,788,278
Staff Salaries & Benefits	5,788,643	6,391,851	6,163,470	6,424,096	7,867,921
Operations	5,092,835	5,721,714	7,623,309	8,323,660	10,057,062
Travel	567,129	416,413	37,926	271,401	567,224
Student Support	1,752,090	2,062,086	2,424,268	2,495,644	2,641,087
University Tax	1,710,390	2,105,957	2,089,440	2,477,496	2,694,848
TOTAL EXPENDITURES	**27,329,433**	**30,482,507**	**31,287,804**	**34,042,772**	**39,616,420**
BALANCE	**6,466,941**	**8,660,461**	**13,673,437**	**17,708,439**	**19,812,452**

If the school is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall school budget.

Not Applicable

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The college continues to grow at a fast rate, in both student enrollment, extramural funding, and charitable contributions which allows us to not only meet our budget but to increase recruitment, offer competitive compensation packages, and support our faculty, staff, and students in their various activities and programs. This could not be done without the continued financial support from the Chancellor, NU President, and the State of Nebraska.

Weaknesses & Plans for Improvement: During the COVID-19 pandemic, the college had an increase in student enrollment. We must continue to find innovative ways to keep the visibility of public health in the forefront of prospective students' minds to not only maintain the current level of enrollment but to increase it.

There is an ongoing need to sustain extramural grant and contract funding. Assistant Professors are required to support 31% of their salary while Associate Professors and Professors are required to support 50%.

The college will develop additional programs to increase student enrollment.

The college will continue to seek out additional development and alumni activities to support our mission and goals. One such goal is to have an endowed chair and two professorships for each department.

C2. Faculty Resources

The school has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

1) A table demonstrating the adequacy of the school's instructional faculty resources in the format of Template C2-1.

	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	THIRD DEGREE LEVEL	ADDITIONAL FACULTY+
CONCENTRATION	**PIF 1***	**PIF 2***	**FACULTY 3^**	**PIF 4***	**PIF 5***	
Advocacy & Leadership DrPH	Katie Brandert 1.0	Nicole Kolm Valdivia 1.0	Ariane Rung 1.0	NA	NA	PIF: 1 Non-PIF: 4
Biostatistics MPH MS PhD	Chris Wichman 1.0	Gleb Haynatzki 1.0	Fang Yu 1.0	Jianghu "James" Dong 1.0	NA	PIF: 8 Non-PIF: 3
Emergency Preparedness MPH DrPH	Leslie Scofield 1.0	Rachel Lookadoo 1.0	Julie Casani .55	Sharon Medcalf 1.0	NA	PIF: 1 Non-PIF: 1
Environmental & Occupational Health MPH PhD	Matthew Nonnenmann 1.0	Eric Carnes 1.0	JoEllyn McMillan .35	Risto Rautiainen 1.0	NA	PIF: 3 Non-PIF: 8
Epidemiology					NA	

MPH PhD DrPH	Ed Peters 1.0	Kendra Ratnapradipa 1.0	Shinobu Watanabe-Galloway 1.0	Abraham Mengist 1.0		PIF: 5 Non-PIF: 4
Health Promotion MPH	Shelley Strong 1.0	Marisa Rosen 1.0	Dejun Su 1.0	NA	NA	PIF: 4 Non-PIF: 0
Health Promotion & Disease Prevention Research PhD	Keyonna King 1.0	David Dzewaltowski 1.0	Tzeyu Michaud 1.0	NA	NA	PIF: 1 Non-PIF: 2
Health Services & Policy Research PhD	Hongmei Wang 1.0	Jungyoon "JY" Kim 1.0	Hyo Jung Tak 1.0	NA	NA	PIF: 0 Non-PIF: 2
Maternal & Child Health MPH	Shannon Maloney 1.0	Erin Schnieder 1.0	Melissa Tibbits 1.0	NA	NA	PIF: 1 Non-PIF: 0
Public Health Administration & Policy MPH	Trina White 1.0	Dave Palm 1.0	Wael ElRayes 1.0	NA	NA	PIF: 3 Non-PIF: 0
Toxicology PhD	Matthew Nonnenmann 1.0	Risto Rautiainen 1.0	JoEllyn McMillan .35	NA	NA	PIF: 0 Non-PIF: 3

TOTALS:		
	Named PIF	32
	Total PIF	59
	Non-PIF	29

2) All primary instructional faculty, by definition, are allocated 1.0 FTE. Schools must explain the method for calculating FTE for any non-primary instructional faculty presented in C2-1.

The method for calculating FTE for non-primary instructional faculty is based on the College of Public Health FTE Policy as identified in the following chart:

Courses (online and in-person)	

Lecture course:	4% per credit hour (multiple sections taught by the same faculty, in the same series (1,2,3 OR 80, 81,82) receive 2% per credit hour for additional section)
Course cap:	40 students
Other educational methods:	2% per course (i.e., Seminar, Directed Readings, Independent Study). Course must be approved by Department Chair, FTE not negotiable.
New course development:	additional 10% per course (new catalog number). New course must be approved by Department Chair.
Major course redesign:	additional 5% per course (course review required by COPH and GPC curriculum committees). Major redesign must be approved by Department Chair.
Course transition:	additional 5% per course (max 1 time per course, moving course from in-person to online or vice versa). Must be approved by Department Chair.
TA assignment:	All MPH core courses. All other TA requests must be approved by Department Chair.

Advising:	
Capstone Chair (MPH and MHA):	2% per term (max 2 terms – based on CPH 529 or CPH 586 registration) per student.
Supervisory Committee Chair (DrPH):	2% per term (based on based on formal appointment of Supervisory Committee Chair)
Thesis Chair (MS):	2% per term (max 2 terms – based on [DEPT] 899 registration) per student.
Supervisory Committee Chair (PhD):	2% per term (based on formal appointment of Supervisory Committee Chair in Seguidor)

FTE allocation for teaching and advising scenarios not described above need to be discussed with the Department Chair**.**

3) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

   All primary faculty in the College of Public Health are employed full-time and have primary appointments in the college. Non primary faculty fall into one of two categories:

   1) Faculty with a primary appointment in the college that do not have any teaching responsibilities.
   2) Faculty with a primary appointment in another UNMC college or at another University of Nebraska Campus.

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

Template C2-2. Faculty regularly involved in advising, mentoring and the integrative experience, 2023-2024

General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Master's (Academic Program Support Specialist)	159	159	159
Master's (Faculty)	4.23	1	14
- PIF Faculty	4.81	1	14
- Non-PIF Faculty	2.2	1	5
Doctoral (DrPH)	3.75	1	11
- PIF Faculty	3.82	1	11
- Non-PIF Faculty	3	3	3
Doctoral (PhD)	1.67	1	6
- PIF Faculty	1.68	1	6
- Non-PIF Faculty	1.63	1	3

Advising in MPH integrative experience (Capstone)		
Average	**Min**	**Max**
Non-PIF: 1	1	1
PIF: 1.6	1	11

Mentoring/primary advising on thesis, dissertation or DrPH integrative project			
Degree	**Average**	**Min**	**Max**
DrPH	1	1	1
PhD	1	1	1
Master's other than MPH (MS BIOS Only)	1	1	1

5) Quantitative data on student perceptions of the following for the most recent year. Schools should only present data on public health degrees and concentrations.

   a. Class size and its relation to quality of learning (e.g., The class size was conducive to my learning)

This information is collected via our annual student survey which is distributed electronically via email and the College's LMS. A copy of this survey and its results are available in the ERF at ERF->C->C2. All students are asked 'Please indicate your level of agreement with the following statement: The class sizes in COPH are conducive to my learning experience,' with answer options: Strongly Disagree (1), Disagree (5), Agree (3), Strongly Agree (4).

The following presents results from the last four most recent academic years.

- 2023-24 (53% response rate): 95% said agree/strongly agree (mean 3.35)
- 2022-23 (72% response rate): 94% said agree/strongly agree (mean 3.24)
- 2021-22 (33% response rate): 86% said agree/strongly agree (mean 3.13)
- 2020-21 (29% response rate): 96% said agree/strongly agree (mean 3.40)

b. Availability of faculty (i.e., Likert scale of 1-5, with 5 as very satisfied)

This information is collected via our annual student survey which is distributed electronically via email and the College's LMS. All students are asked 'As a student of COPH, please indicate how satisfied you are with: Availability of faculty,' with answer options: Very Dissatisfied (1), Somewhat Dissatisfied (2), Somewhat Satisfied (3), Very Satisfied (4).

The following presents results from the last four most recent academic years.

- 2023-24 (53% response rate): 94% said agree/strongly agree (mean 3.57)
- 2022-23 (72% response rate): 93% said agree/strongly agree (mean 3.48)
- 2021-22 (33% response rate): 88% said agree/strongly agree (mean 3.33)
- 2020-21 (29% response rate): 93% said agree/strongly agree (mean 3.40)

6) Qualitative data on student perceptions of class size and availability of faculty. Only present data on public health degrees and concentrations.

This information is collected via our annual student survey which is distributed electronically via email and the College's LMS. A copy of the survey and results are available in the ERF at ERF->C->C2. All students are provided the opportunity to give open-ended feedback regarding class size and availability of faculty. Themes identified in the survey are summarized below for the last four academic years.

<u>2023-24 (53% response rate):</u>

Online students tended to state they don't feel class size affects the online student experience. There was a trend of students stating some online classes, specifically the MPH core classes, felt too big and that it tends to take longer to get grades back in these classes. Some on-campus students felt that upper-level classes with 4-5 students are a good size, but some said it was too small.

<u>2022-23 (72% response rate):</u>

The most frequent comment we received was that class size does not seem to be an issue for students in online programs. On-campus students felt classes overall were a good size. Some students felt online classes could be smaller, especially the core classes. They said that grading and feedback takes longer in bigger online classes.

<u>2021-22 (33% response rate):</u>

Students tended to say one of three things: that class size doesn't matter in online classes, that classes were currently a good size, or that classes were too big. There were several comments that larger online classes seem to affect professors more than students, related to turnaround times for feedback and grading.

<u>2020-21 (29% response rate):</u>

Many students said that because they are only taking online classes, they don't feel as impacted by class size. On-campus students mentioned a variety of optimal class sizes, such as more than five, 10, and less than 25. Students also mentioned a desire to have cohorts for larger classes.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Because of changes made to how the student survey is distributed, we have experienced a high rate of participation over the past two years. When the survey results are analyzed, the population of students who participates in the survey is statistically similar to the full student body. Based on the data from these surveys, students are generally satisfied with class sizes and availability of faculty. We attribute these to changes made over the last few years, including encouraging faculty members to host virtual office hours, and the implementation of Bookings, a Microsoft tool that gives students the opportunity to schedule appointments based on faculty calendars.

Weaknesses and Plans for Improvement: We receive very limited qualitative input from students regarding faculty availability. We speculate this may be due to the wording of the question and it being included with the qualitative question regarding class size. Going forward, we plan to split this question into two questions to draw out more student responses. As our online degree programs have grown, we have seen an increase in the number of students stating they perceive their online core classes to be too big. To address this, faculty have been trained in and are encouraged to use our LMS tools to create sections within their larger courses, giving students a smaller class feel despite being enrolled in a large course.

C3. Staff and Other Personnel Resources

The school has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

1) A table defining the number of the school's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation. Individuals whose workload is primarily as a faculty member should not be listed.

Role/function	FTE
Academic Affairs	1
Accreditation/Evaluation	1
Admissions	1
Alumni Relations	0.5 (shared)
Career Services	1
Development	0.45 (shared)
Diversity & Inclusion	1
Financial & Administration	5 (unshared) 0.53 (shared)
Human Resources	1 (unshared) 0.2 (shared)
Institutional Research & Effectiveness	15.6
Information Technology	3
Marketing/Communications	3
Other Non-Instructional Staff	22.69 (unshared) 0.05 (shared)
Public Health Practice & Training	10.75
Research - Pre-Award	2
Research - Support	24.5
Student Affairs	3

2) Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel.

As of August 26, 2024, other personnel within the college include xxx PhD Graduate Assistants, PhD Research Assistants, PhD Teaching Assistants, MPH & MS Research Assistants, and Student Workers.

Student employees contribute through focused research activities (PhD Research Assistants), teaching and tutoring activities (PhD Teaching Assistants and MPH & MS Research Assistants), or a mix of teaching and research activities and other administrative tasks (PhD Graduate Assistants). Additionally, student workers are utilized to contribute to specific research or teaching activities, and to provide administrative support to offices within the college.

3) Provide narrative and/or data that support the assertion that the school's staff and other personnel support is sufficient or not sufficient.

The college is sufficiently staffed to provide a full range of support services to faculty, students, and alumni. Faculty and students are supported by staff in all areas of the College. UNMC and the University of Nebraska system provides support to all members of the school community in areas of leadership, operations, and academic/research support towards achieving the mission and goals of the college and of UNMC.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The college is flexible and adaptable to the changing needs of faculty, staff, students, and alumni. In summer 2024, the Academic Affairs team re-organized by separating the Director of Professional Programs to include specific leadership and management of the DrPH and MPH programs. We have added additional staff in several areas to support our growth as a College.

Weaknesses and Plans for Improvement: No weaknesses identified.

C4. Physical Resources

The school has physical resources adequate to fulfill its stated mission and goals and to support instructional schools. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the school's narrative.)

- Faculty office space

The College has established guidelines for the allocation of space for faculty, staff, and students. Full-time faculty at the rank of Instructor and above are allocated a single office. Adjustments to this are based on the frequency with which the faculty is physically present during a normal business week. Faculty presenting to the office less than three days per week may be required to share an office with another faculty. Drop-in space is made available to faculty who do not have an office assignment. All faculty have access to locked/secured space for their research and required storage needs and requirements.

- Staff office space

The College has established guidelines for the allocation of space for faculty, staff, and students. Full-time administrative staff who are Directors or student-facing are allocated a single office. All other staff are required to share an office with another staff member. Staff presenting to the office less than three days per week must share an office with another staff member. All staff have access to locked/secured space based on their needs and requirements.

Carrels are made available to all students who are PhD Graduate Assistants, MPH & MS Research Assistants, and Student Workers.

Administrative Assistants are assigned a cubicle in the main area of departments for which they serve.

- Classrooms

Classroom space has been equipped with the latest technology and are consistent with that of the rest of campus. A computer lab with 30 computers is available for student or classroom needs. There is one main auditorium for large lectures/events and seven additional classrooms of various sizes based on enrollment.

Due to high enrollment for our online programs, the college offers a specific space dedicated to the development and production of our online curriculum. Faculty can record lectures in this space and other areas on campus.

- Shared student space

In addition to the carrels available for employed students, the college offers three private rooms for studying as well as several commons throughout the building. Students have access to a break room, which includes a microwave, coffee pot, vending machines, and an area in which they can eat. Additional student space is made available in various other colleges and buildings on campus.

- Laboratories, if applicable to public health degree school offerings

The college maintains several laboratories located in other buildings on campus. The college has one dry lab for students specific to a particular faculty program.

2) Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient.

Feedback from faculty and students indicate that our physical space is sufficient. On our 2023-24 Faculty Survey (74.4% response rate), 100% of respondents indicated satisfaction with the quality of the classrooms in which they teach. As part of our annual Student Survey (53%), students enrolled in on-campus programs are asked about their satisfaction with several areas of our building:

- Satisfaction with quality of classrooms: 98.1%
- Satisfaction with availability of study rooms: 85.7%
- Overall satisfaction with physical learning space: 96.2%

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: One of our greatest strengths is that our building is relatively new and is equipped with the latest technology. We also have several conference rooms of various sizes that are available for faculty and staff use. We are able to adapt our space to the college's needs. For example, in 2021, spaces were remodeled to add a gender-neutral restroom and a lactation room. Bottle refilling stations have also been added per the request of faculty, staff, and students. A faculty/staff lounge has been renovated to make it a more useful and friendly environment.

Weaknesses and Plans for Improvement: Our enrollment growth has resulted in the need for additional faculty and staff, requiring us to revisit how space is allocated. Because of this, the College is evaluating how to better use our existing space, including the future revision of a locker room area to be remodeled for Student Affairs offices, making accessing student services more convenient for students. Shared office space, particularly with staff, has presented challenges, especially related to conducting and participating in virtual meetings. We are continually evaluating our guidelines for the allocations of office space based on our faculty and staff growth. We currently have limited dry lab space for faculty. However, the College is being considered for additional community space and dry labs, located in a new shared building that will be adjacent to COPH.

C5. Information and Technology Resources

The school has information and technology resources adequate to fulfill its stated mission and goals and to support instructional schools. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional schools), faculty access to hardware and software (including access to specific software required for the instructional schools offered) and technical assistance for students and faculty.

1) Briefly describe, with data if applicable, the following:

- library resources and support available for students and faculty

Providing state-of-the-art resources for teaching and learning is critical to UNMC's mission to provide premier educational experiences. Significant investments have been made to ensure students and teachers have access to cutting-edge technology.
The UNMC campus is home to the McGoogan Health Science Library. The Library was recently renovated, focusing on infrastructure improvement based on student feedback. Notable changes included:

- 50 new individual and group study rooms
- The removal of two concrete exterior panels, significantly increasing natural light
- Expanded E-Learning Lab
- Expanded Writing Center
- Conference and classrooms with distance education technology

A dedicated Faculty Commons space was also added to the library, to serve as a designated hub for collaborative faculty offices and activities, including:

- Office of Faculty Development
- Interprofessional Academy of Educators
- Education Technology workspace
- Meeting spaces
- Faculty hoteling space

The renovated library offers access to over 16,000 e-journals, 13,000 e-books, 80,000 print books, 110,000 print serials, 580 media resources (audiovisual and anatomical models), and more than 38,000 items in its special collections.

- student access to hardware and software (including access to specific software or other technology required for instructional schools)

Students enrolled in college academic programs have access to Microsoft 365. Several courses that require SAS utilize SAS On Demand for Academics. A computer lab on campus is pre-loaded with SPSS and other statistical and survey software. Additionally, students are able to purchase various software packages at a discounted price through other University of Nebraska campuses, including MATLAB, SAS, SPSS, and Adobe Professional.

- faculty access to hardware and software (including access to specific software or other technology required for instructional schools)

Faculty are also provided with free access to Microsoft 365. The University provides a wide range of Microsoft, VMware, IBM, and Oracle software products for faculty use at little to no cost. If faculty need to purchase additional hardware or software, they are able to work with our internal College IT team for procurement. Faculty are also able to purchase software packages at a discounted rate through the other University of Nebraska campuses.

- technical assistance available for students and faculty

UNMC provides an Information Technology (IT) group that designs and deploys innovative technology solutions for the campus and provides comprehensive infrastructure services. They staff an ITS Helpdesk that can be reached via phone or email.

In addition to the core IT on UNMC's campus, the college offers additional support by two employed staff. This support includes collaboration with core IT to assist faculty and students with software and hardware requests/purchasing, along with robust desktop and conference room support.

The college's growth in online enrollment has required several additions to staff related to instructional design. In addition, the newly created Office of Teaching and Learning provides support and training related to curriculum, instruction and the tools used to deliver online education, including Canvas, Yuja, Tidy-up, and many other add-ins available in Canvas.

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

On our most recent AY23-24 faculty survey (72% response rate), 92.3% of faculty indicated satisfaction with technology in the classroom. 98.2% were satisfied with online technology and support. When asked for qualitative feedback regarding technology in the college, 67% responded they were happy and had no concerns. The technology concerns that were expressed were issues specific to individual classrooms.

As part of our annual student survey, students are asked numerous questions related to information and technology resources. A summary of the 2023-24 survey follows and is included in the ERF (ERF->C->C2):

- Satisfaction with availability of public health related reference material through UNMC's library (texts, journals, etc.): 94.3%
- Satisfaction with availability of and access to software for course specific requirements: 89.6%
- Satisfaction with availability of technical/computer support: 96.0%
- Satisfaction with Canvas (COPH's LMS): 96.6%
- Satisfaction with the overall use of technology: 96.2%

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: A major strength in this area is the support and resources available through the McGoogan Library. The Library provides the College with a dedicated liaison to help students, faculty, and staff fully access the library's resources. This liaison frequently holds office hours in the COPH building to meet with students, faculty, and staff and is available virtually for online students and faculty. Additionally, the McGoogan Library works cooperatively with the other University of Nebraska system libraries to strategically purchase and provide access to e-journals and other resources. Students, faculty, and staff are able to take advantage of inter-library-loans to obtain materials from other campuses without leaving UNMC or their homes. Another strength is the instructional design services and support provided by our new OTL. Also, having IT support available within our college is a significant strength for our students, faculty, and staff.

Weaknesses and Plans for Improvement: Our weakness in this area is the time and process for new hardware and software to be reviewed and approved. As we are part of a medical center campus, this process runs through the Core IT, which can cause significant delays. To help remedy this, we are working with faculty and staff to plan and anticipate their technological needs in advance. We are also collaborating with the newly created position of UNMC Chief Academic Technology Officer.

D1. MPH & DrPH Foundational Public Health Knowledge

The school ensures that all MPH and DrPH graduates are grounded in foundational public health knowledge.

The school validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

1) Provide a matrix, in the format of Template D1-1, that indicates how all MPH and DrPH students are grounded in each of the foundational public health learning objectives listed above (1-12). The matrix must identify all options for MPH and DrPH students used by the school.

Content Coverage for MPH (and DrPH degrees, if applicable) (SPH and PHP)	
Content	**Course number(s) & name(s) or other educational requirements**
1. Explain public health history, philosophy, and values	CPH 500/HPRO 830 - Foundations of Public Health
2. Identify the core functions of public health and the 10 Essential Services*	CPH 500/HPRO 830 - Foundations of Public Health
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	CPH 500/HPRO 830 - Foundations of Public Health
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program, with attention to disparities among populations, e.g., socioeconomic, ethnic, gender, racial, etc.	CPH 500/HPRO 830 - Foundations of Public Health
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	CPH 500/HPRO 830 - Foundations of Public Health
6. Explain the critical importance of evidence in advancing public health knowledge	CPH 500/HPRO 830 - Foundations of Public Health
7. Explain effects of environmental factors on a population's health	CPH 500/HPRO 830 - Foundations of Public Health
8. Explain biological and genetic factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health
9. Explain behavioral and psychological factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health
10. Explain the cultural, social, political, and economic determinants of health and how the determinants relate to population health and health inequities	CPH 500/HPRO 830 - Foundations of Public Health
11. Explain how globalization affects global burdens of disease	CPH 500/HPRO 830 - Foundations of Public Health
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)	CPH 500/HPRO 830 - Foundations of Public Health

2) Provide supporting documentation that clearly identifies how the school ensures grounding in each area. Documentation may include detailed course schedules or outlines to selected modules from

the learning management system that identify the relevant assigned readings, lecture topics, class activities, etc. For non-course-based methods, include web links or handbook excerpts that describe admissions prerequisites.

Documentation can be found in the ERF at ERF->D->D1->CPH 500 Syllabus

3) If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: CPH 500 Foundations of Public Health was designed to ground students in foundational public health knowledge. The course was developed by a multi-disciplinary team and is assessed regularly to update content, as appropriate. The course was “blueprinted” in 2023, which means that the content and assessments remain the same, no matter which faculty teaches the course and no matter if it’s taught online or on-campus. This ensures the high quality of the course and content cannot be changed at will by faculty. Students are not allowed to waive the course based on public health practice experience.

Weaknesses: None identified

D2. MPH Foundational Competencies

The school documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (e.g., teaching assistants or other similar individuals without official faculty roles working under a faculty member's supervision) validate the student's ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the school must assess *all* MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (e.g., joint, dual, concurrent degrees).

Since the unit must demonstrate that all students perform all competencies, units must define methods to assess individual students' competency attainment in group projects Also, assessment should occur in a setting other than an internship, which is tailored to individual student needs and designed to allow students to practice skills previously learned in a classroom. Additionally, assessment must occur outside of the integrative learning experience (see Criterion D7), which is designed to integrate previously attained skills in new ways.

These competencies are informed by the traditional public health core knowledge areas, (biostatistics, epidemiology, social and behavioral sciences, health services administration and environmental health sciences), as well as cross-cutting and emerging public health areas.

1) List the coursework and other learning experiences required for the school's MPH degrees, including the required curriculum for each concentration. Information may be provided in the format of Template D2-1 (single- and multi-concentration formats available) or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

Part A: Foundational requirements for MPH degree		
Course number	**Course name**	**Credits (if applicable)**
Foundational courses for all MPH students regardless of concentration		
CPH 500	**Foundations of Public Health**	**3**
CPH 504	**Epidemiology in Public Health**	**3**
CPH 506	**Biostatistics I**	**3**
CPH 514	**Planning and Evaluation**	**3**
CPH 539	**Leadership and Advocacy**	**3**
	TOTAL FOUNDATIONAL CREDITS	**15**

Part B: Concentration requirements for MPH degree in Biostatistics		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3

CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Biostatistics concentration		
CPH 517	**Design of Medical Studies**	**3**
CPH 651	**Introduction to SAS Programming**	**3**
CPH 652	**Biostatistical Linear Models: Methods and Application**	**3**
CPH 653	**Categorical Data Analysis**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**9**
	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Emergency Preparedness		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Emergency Preparedness concentration		
CPH 550	**Emergency Preparedness: Prevention**	**3**
CPH 533	**Emergency Preparedness: Response**	**3**
CPH 554	**Emergency Preparedness: Respond and Recovery**	**3**
CPH 631	**Emergency Preparedness: Protection**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**9**
	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Environmental & Occupational Health		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Environmental & Occupational Health concentration		
CPH 503	**Public Health, Environment and Society**	**3**
CPH 590	**Elements of Industrial Safety**	**3**
CPH 594	**Environmental Exposure Assessment**	**3**
CPH 597	**Principles of Toxicology**	**3**
CPH 598	**Fundamentals of Industrial Hygiene**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**6**

	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Epidemiology		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Epidemiology concentration		
CPH 621	**Applied Epidemiology**	**3**
CPH 628	**Epidemiologic Methods**	**3**
CPH 650	**Biostatistics II**	**3**
CPH 651	**Introduction to SAS Programming**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**9**
	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Health Promotion		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Health Promotion concentration		
CPH 501	**Health Behavior**	**3**
CPH 505	**Applied Research in Public Health**	**3**
CPH 534	**Interventions in Health Promotion**	**3**
CPH 545	**Health Disparities and Health Equity**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**9**
	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Maternal and Child Health		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Maternal and Child Health concentration		

CPH 505	**Applied Research in Public Health**	**3**
CPH 546	**Introduction to Maternal and Child Health**	**3**
CPH 547	**Maternal and Child Health Theories & Interventions**	**3**
CPH 548	**Life Course Health**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**9**
	TOTAL CONCENTRATION CREDITS	**27**

Part B: Concentration requirements for MPH degree in Public Health Administration & Policy		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 528	**Applied Practiced Experience for MPH Students**	3
CPH 529	**MPH Capstone Experience**	**3**
Concentration courses for Public Health Administration & Policy concentration		
CPH 502	**Health Services Administration**	**3**
CPH 562	**Human Resources Management in Health Organizations**	**3**
CPH 565	**Health Care Finance**	**3**
CPH 566	**Health Policy**	**3**
CPH 580	**Health Care Organizational Theory & Behavior**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**6**
	TOTAL CONCENTRATION CREDITS	**27**

2) List the required curriculum for each combined degree option in the same format as above, clearly indicating (using italics or shading) any requirements that differ from MPH students who are not completing a combined degree.

COPH offers six combined dual-degree options for the MPH program: DO/MPH; MBA/MPH; MSW/MPH; MD/MPH; PharmD/MPH; MCRP/MPH. In all of these combined degree programs, students must complete the core curriculum of the MPH, the applied practice experience, and the capstone/integrative learning experience.

The Doctor of Osteopathic Medicine (DO)/MPH combined degree is open to any concentration of the MPH. As of this writing, the COPH has memorandum of understanding agreements in place to offer this combined degree with osteopathic medical programs at Kansas City University (Kansas City, MO), Marian University (Indianapolis), and Noorda College of Osteopathic Medicine (Provo, UT). Students must complete the Certificate in Public Health (15 credit hours) before applying to the MPH. Students complete all concentration courses of the MPH. The elective course credit hours (six or nine, depending on concentration) transfer from the DO program toward the MPH. Students are encouraged to choose a capstone/ILE that integrates both degree programs.

The Master of Business Administration (MBA)/MPH combined degree is in partnership with the University of Nebraska Omaha and is open to four of the MPH concentrations: Public Health Administration and Policy, Emergency Preparedness, Biostatistics, and Epidemiology. Students complete all concentration

courses. The elective course credit hours (six or nine, depending on concentration) transfer from the MBA program toward the MPH. Students are encouraged to choose a capstone/ILE that integrates both degree programs.

The Master of Social Work (MSW)/MPH combined degree program is in partnership with the University of Nebraska Omaha and is available for one MPH concentration, Public Health Administration and Policy. Students complete four of the five concentration courses. The course CPH 566 Healthcare Policy is waived as part of the MPH concentration curriculum as the MSW course SOWK 8650 Health/Mental Health Policies for Social Work transfers toward the MPH. In addition, students do not register for Applied Practice Experience (APEx) or Capstone/Integrative Learning Experience courses (CPH 528 and CPH 529.) However, they must still complete the requirements, which they integrate into their Social Work Practicum I and II experiences.

The Medical Degree (M.D.)/MPH program is offered with the UNMC College of Medicine and available for all concentration options. The current format of the program is structured so that students complete three years of medical school, then complete the MPH program in one year (fall, spring, summer), then finish the fourth year of medical school. Students complete all concentration courses. The elective course credit hours (six or nine, depending on concentration) transfer from the MD program toward the MPH. Students are encouraged to choose a capstone/ILE that integrates both degree programs.

The Doctor of Pharmacy (Pharm.D.)/MPH program is offered in collaboration with the UNMC College of Pharmacy and is available for all concentration options. Students complete all concentration courses. The elective course credit hours (six or nine, depending on concentration) transfer from the PharmD program toward the MPH. Students are encouraged to choose a capstone/ILE that integrates both degree programs.

The Master of Community and Regional Planning (MCRP)/MPH combined degree is in partnership with the University of Nebraska Lincoln and open to all seven concentration options. Students complete all concentration courses. The elective course credit hours (six or nine, depending on concentration) transfer from the MCRP program toward the MPH. Students do not register for CPH 529 Capstone/ILE in the MPH program. Three credit hours transfer to the MPH from the MCRP to fulfill the requirement for CPH 529 Capstone Experience. However, students must still meet all capstone prerequisites and requirements. The Capstone project must integrate public health with community and regional planning and must receive joint approval from both programs.

3) Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies listed above (1-22). If the school addresses all of the listed foundational competencies in a single, common core curriculum, the school need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the school must present a separate matrix for each combined degree. If the school relies on concentration-specific courses to assess some of the foundational competencies listed above, the school must present a separate matrix for each concentration.

Assessment of Competencies for MPH (all concentrations)		
Competency	**Course number(s) and name(s)***	**Describe specific assessment opportunity[n]**
Evidence-based Approaches to Public Health		

1. Apply epidemiological methods to settings and situations in public health practice.	CPH 504/EPI 820 - Epidemiology in Public Health	CPH 504: Case Study Discussions and Write-Ups: Five case studies based on real-life outbreaks and public health problems will be completed throughout the course to teach and reinforce epidemiologic principles and practices. Students will answer questions based on the practices and principles applied to the topic under consideration.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context.	CPH 506/BIO 806 - Biostatistics I	CPH 506: Each student will work in a group to find, review, and discuss an article, formulating a hypothesis and determining appropriate design, study population, data collection methods, variables, analysis methods, and appropriate figures and tables.
	CPH 504/EPI 820 - Epidemiology in Public Health	CPH 504: Descriptive Epidemiology Project: Each student will select a public health issue, find appropriate data from existing data sources, look for trends, and then write the descriptive epidemiology information in a power-point format.
	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 3: Qualitative Analysis: Students will use a focus group transcript to practice coding and identifying themes and categories. They will then write a summary sharing how they obtained their themes and other major findings.
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.	CPH 506/BIO 806 - Biostatistics I	CPH 506: Weekly Assignments: Each week students will individually answer questions in multiple formats over data analysis and statistical reasoning.
	CPH 504/EPI 820 - Epidemiology in Public Health	CPH 504: Quizzes 1-5: Students will individually take quizzes over specific areas of quantitative and qualitative data analysis.
	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 3: Qualitative Analysis: Students will use a focus group transcript to practice coding and identifying themes and categories. They will then write a summary sharing how they obtained their themes and other major findings.
4. Interpret results of data analysis for public health research, policy or practice.	CPH 506/BIO 806 - Biostatistics I	CPH 506: Weekly Assignments: Each week students will individually answer questions in multiple formats over data analysis and statistical reasoning.
	CPH 504/EPI 820 - Epidemiology in Public Health	CPH 504: Case Study Discussions and Write-Ups: Five case studies based on real-life outbreaks and public health problems will be completed throughout the course to teach and reinforce epidemiologic principles and practices. Students will answer questions based on the

		practices and principles applied to the topic under consideration.
Public Health & Health Care Systems		
5. Compare the organization, structure, and function of health care, public health, and regulatory systems across national and international settings.	CPH 500/HPRO 830 - Foundations in Public Health	CPH 500: Discussion Boards: Following class lectures on the structure and function of health care, public health and regulatory systems, each student will read the "Mirror, Mirror 2017: International Comparison" paper, pick one performance indicator, and compare the US with one other country discussed in the article. They will also address how the US can improve its performance on that indicator.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and systemic levels.	CPH 500/HPRO 830 - Foundations in Public Health	CPH 500: Implicit Association Assessment and Reflection**:** Each student will complete at least three of Implicit Association Assessments. After completion, each student will complete a reflection on their results and how the issues of bias, inequities, and racism have negative impacts on health and health equity.
Planning & Management to Promote Health		
7. Assess population needs, assets, and capacities that affect communities' health.	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 1: CHNA Infographic: Students develop a one-page infographic on a chosen public health topic and population that highlights the magnitude, seriousness, and economic impact of the selected public health issues. They will include potential questions that would need to be answered to address the public health issue.
8. Apply awareness of cultural values and practices to the design, implementation, or critique of public health policies or programs .	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Final Project - Mini Poster: Students will use their prior course assignments to create a mini posting describing their project plan, intervention, and evaluations methods. They will present the information in a way that is appropriate and accessible for all stakeholders**.**
9. Design a population-based policy, program, project, or intervention.	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 2: Planning Model: Students will use an established public health planning model to develop a plan to address their topic of interest and population. They will describe the steps or phases of the model specific to their topic.
10. Explain basic principles and tools of budget and resource management.	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 7: Developing a Budget: Students will use a template to create a budget for their proposed intervention reflective of the proposed activities and inputs. It will include a narrative justification.

11. Select methods to evaluate public health programs.	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 6: Evaluation Plan: Students will write evaluation questions and create an evaluation plan using a template, describing their chosen intervention's formative, process, outcome and impact evaluation components.
Policy in Public Health		
12. Discuss the policy-making process, including the roles of ethics and evidence .	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Dimension of Policy Making on Local/State/Federal/International Level**:** Students will locate a legislative bill being proposed, debated, or implemented and write a summary of it, including how the bill was developed and introduced, what evidence and data was used, where the bill is in process, and how the bill/policy would impact public health. They will also write a letter to an elected official with their viewpoints and testimony on the bill.
13. Propose strategies to identify relevant communities and individuals and build coalitions and partnerships for influencing public health outcomes.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Stakeholder Analysis Assessment: After learning about the importance and methods of stakeholder analysis, students will complete stakeholder analysis template looking at the impact, influence, and contributions/detriments of a potential stakeholder, as well as strategies for engaging stakeholders.
14. Advocate for political, social, or economic policies and programs that will improve health in diverse populations.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Local/State/Federal/International Level: Students will locate a legislative bill being proposed, debated, or implemented and write a summary of it, including how the bill was developed and introduced, what evidence and data was used, where the bill is in process, and how the bill/policy would impact public health. They will also write a letter to an elected official with their viewpoints and testimony on the bill.
15. Evaluate policies for their impact on public health and health equity.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Infographic and Policy Brief: Project teams will select a bill or legislation and produce a 2-page policy brief of the caliber expected from a public health organization. Students will also create a one-page infographic on the same bill, but geared towards a different audience.
Leadership		

16. Apply leadership and/or management principles to address a relevant issue.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Personal Values and Mission: Students will reflect on their core values, identifying their top five non-negotiable values and how these values guide their ethics and decision making. They will then use these values to construct their personal mission statement.
17. Apply negotiation and mediation skills to address organizational or community challenges.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Conflict Style Reflection Paper: Following Thomas-Kilmann Instrument (TKI) workshop, students will write a reflection on their conflict style, how they can use that information in various situations, and where they need to improve skills.
Communication		
18. Select communication strategies for different audiences and sectors.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Group Project: Each team of students will select a bill or legislation and develop a high-caliber 2-page policy brief and a one-page infographic geared towards a different audience. Each team will provide information to explain how their infographic is usable across cultures. They will also develop and produce a professional caliber oral presentation.
	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Final Project - Mini Poster: Students will use their prior course assignments to create a mini posting describing their project plan, intervention, and evaluation methods. They will present the information in a way that is appropriate and accessible for all stakeholders.

19. Communicate audience-appropriate public health content, both in writing and through oral presentation to a non-academic, non-peer audience with attention to factors such as literacy and health literacy.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Group Project: Each team of students will select a bill or legislation and develop a high-caliber 2-page policy brief and a one-page infographic, each geared towards a different audience. Each team will provide information to explain how their infographic is usable across cultures. They will also develop and produce a professional caliber oral presentation.
	CPH 514/HPRO 814 - Planning and Evaluation	CPH 514: Assignment 1: CHNA Infographic: Students develop a one-page infographic on a chosen public health topic and population that highlights the magnitude, seriousness, and economic impact of the selected public health issues. They will include potential questions that would need to be answered to address the public health issue.
20. Describe the importance of cultural humility in communicating public health content.	CPH 539/HPRO 895 - Leadership and Advocacy	CPH 539: Group Project: Each team of students will select a bill or legislation and develop a high-caliber 2-page policy brief and a one-page infographic, each geared towards a different audience. Each team will provide information to explain how their infographic is usable across cultures. They will also develop and produce a professional caliber oral presentation.
Interprofessional Practice		

21. Integrate perspectives from other sectors and/or professions to promote and advance population health.	Required University Interprofessional Education (IPE) Activities	IPE Days: Each student is required to attend an institution wide IPE Day. They first learn about the importance of interprofessional teamwork from a team of healthcare professionals representing multiple fields who discuss an actual adverse outcome that resulted because of communication breakdowns. Students then work in small groups representing multiple fields on case studies focused on group communication, teamwork, and interprofessional practice while being evaluated by health care professionals. Students meet again the next semester to discuss assumptions about health care professions, interview professionals, and develop a code of ethics regarding professional behavior. More information is available at https://www.unmc.edu/academicaffairs/educational/ipe/ipe-days.html.
Systems Thinking		
22. Apply a systems thinking tool to visually represent a public health issue in a format other than standard narrative.	CPH 514/HPRO 814 - Planning and Evaluation	• Discussion Board: Systems Thinking Concept Map: Students will each develop original posts where they are tasked with developing a systems thinking concept map. Additionally, students must respond to at least two of their peers' original posts.

4) Provide supporting documentation for each assessment activity listed in Template D2-2. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

These materials can be found in the ERF at ERF->D->D2.

5) Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus.

These materials can be found in the ERF at ERF->D->D2.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: COPH maps competencies to learning objectives and assessments in each course syllabus so they are easy to identify. The course assessments are designed with the framework of public health practice as much as possible. Each course includes multiple assessments designed for adult learners.
Weaknesses: The current structure of IPE excludes online students since it is based on campus. COPH students struggle with understanding the purpose of their involvement with the IPE days.
Plans for Improvement: To address the challenges with IPE, COPH has been collaborating with Tulane University (New Orleans, LA) and University of Texas Medical Branch (Galveston, TX) since 2021 to develop inter-professional education e-learning modules that will be required of all COPH MPH students in the 2025-2026 academic year. These modules are based on the Interprofessional Education Collaborative core competencies, 1) values and ethics; 2) roles and responsibilities; 3) communication; 4)

teams and teamwork. These modules are to educate students on how to meaningfully engage in interprofessional teams and understand the role of public health on the teams. Students must complete the modules as part of a zero-credit hour curriculum through Canvas. The modules are approximately 10 minutes each with opportunities to reflect on the content. A pilot of the modules will occur in fall 2024, with full implementation in the 2025-2026 academic year. After completing the modules, students must participate in an inter-professional team and provide documentation and reflection of the experience. Participation and progress of students will be monitored by the Academic Program Support Specialist.

D3. DrPH Foundational Competencies (if applicable)

The school documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals validate the student's ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the school must assess *all* DrPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc.

1) List the coursework and other learning experiences required for the school's DrPH degrees. Information may be provided in the format of Template D3-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each DrPH degree.

Part A: Foundational requirements for DrPH degree - Students entering prior to 2024-25		
Course number	**Course name**	**Credits (if applicable)**
Foundational courses for all DrPH students regardless of concentration		
CPH 545	**Health Disparities and Health Equity**	**3**
HPRO 916	**Implementation Science Models and Methods**	**3**
CPH 563	**Strategic Planning and Management**	**3**
CPH 718	**Leadership Theory and Practice**	**3**
CPH 705	**Public Health Teaching and Training**	**3**
CPH 628	**Epidemiologic Methods**	**3**
	TOTAL FOUNDATIONAL CREDITS	**18**

Part A: Foundational requirements for DrPH degree - Students entering 2024-25 and forward		
Course number	**Course name**	**Credits (if applicable)**
Foundational courses for all DrPH students regardless of concentration		
CPH 700	**Health Equity and Community Engagement**	**3**
CPH 704	**Advocacy and Policy Engagement**	**3**
CPH 705	**Public Health Teaching and Training**	**3**
CPH 707	**Advanced Public Health Leadership & Management**	**3**
CPH 711	**Communication for Public Health Leaders**	**3**
CPH 712	**System and Strategic Thinking**	**3**
	TOTAL FOUNDATIONAL CREDITS	**18**

Part B: Concentration requirements for DrPH degree in Advocacy and Leadership

Course number	Course name	Credits (if applicable)
APE & ILE courses (as applicable)		
CPH 798	**DRPH Practicum**	**6**
CPH 799	**DRPH Integrative Learning Experience**	**6**
Concentration courses for Advocacy and Leadership concentration		
CPH 718	**Leadership Theory and Practice**	**3**
CPH 730	**Advanced Evaluation and Quality Improvement**	**3**
CPH 731	**Community Organizing and Advocacy**	**3**
CPH 757	**Survey Research Methods**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**12**
Requirements for degree completion not associated with a course (if applicable) ^		
	Digital Portfolio	
	TOTAL CONCENTRATION CREDITS	**30**

Part B: Concentration requirements for DrPH degree in Emergency Preparedness		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 798	**DRPH Practicum**	**6**
CPH 799	**DRPH Integrative Learning Experience**	**6**
Concentration courses for Emergency Preparedness concentration		
CPH 746	**Epidemiology in Public Health Practice**	**3**
CPH 726	**Exercise Design**	**3**
CPH 727	**Managing Complex Disasters**	**3**
HPRO 903	**Mixed Methods Research**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**12**
Requirements for degree completion not associated with a course (if applicable) ^		
	Digital Portfolio	
	TOTAL CONCENTRATION CREDITS	**30**

Part B: Concentration requirements for DrPH degree in Epidemiology		
Course number	**Course name**	**Credits (if applicable)**
APE & ILE courses (as applicable)		
CPH 798	**DRPH Practicum**	**6**
CPH 799	**DRPH Integrative Learning Experience**	**6**
Concentration courses for Epidemiology concentration		

CPH 621	**Applied Epidemiology**	**3**
CPH 626	**Health Information and Surveillance for Public Health Practice**	**3**
CPH 746	**Epidemiology in Public Health Practice**	**3**
CPH 757	**Survey Research Methods**	**3**
Electives (as applicable)		
Electives	*Insert total number of credits in the last column*	**12**
Requirements for degree completion not associated with a course (if applicable) ^		
	Digital Portfolio	
	TOTAL CONCENTRATION CREDITS	**30**

2) Provide a matrix, in the format of Template D3-2, that indicates the assessment activity for each of the foundational competencies. If the school addresses all of the listed foundational competencies in a single, common core curriculum, the school need only present a single matrix. If the school relies on concentration-specific courses to assess some of the foundational competencies listed above, the school must present a separate matrix for each concentration.

Assessment of Competencies for DrPH (all concentrations) - Students Entering Program Prior to 2024-2025 Academic Year		
Competency	**Course number(s) and name(s)***	**Describe specific assessment opportunity[n]**
Data & Analysis		
1. Explain qualitative, quantitative, mixed methods, and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community, and population) levels	CPH 628/EPI 845 - Epidemiologic Methods	CPH 628: Paper critique and presentation: Students will be responsible for completing five epidemiology paper critiques. The written critique is limited to three pages. Students are welcome to discuss their articles, but the work must be their own. The fifth epidemiology paper critique will be selected by the student and submitted as a PowerPoint presentation, similar to a Journal Club format.
2. Design a qualitative, quantitative, mixed methods, policy analysis, or evaluation project to address a public health issue	HPRO 916- Implementation Science Models and Methods	HRPO 916 – Implementation Science Project Part D: DrPH Students will develop a topic approval request that will include a background, aims, the context of the problem, methods, stakeholder engagement, a description of the program, intervention, or policy that will be implemented, and the application of 4 foundational and 3 concentration-specific competencies.
3. Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring, and evaluating policies and programs and to address a population's health	CPH 545/HPRO 809 - Health Equity and Leadership	CPH 545: Reflections: Students will write reflection papers on the epidemiological profile of racial and ethnic groups and the theories of racial and ethnic differences in health. The reflection papers should be no more than 500 words.

Leadership, Management & Governance		
4. Propose strategies for health improvement and elimination of health inequities by organizing partners, including researchers, practitioners, community leaders, and others	CPH 545/HPRO 809 - Health Equity and Leadership	CPH 545: Documentary and Peer Review: Students will create a video documentary and post it online during the last week of class. The documentary should convey an original idea, thesis or perspective and include original footage or data (such as interviews or filming events/footage). Students will also provide a peer review of four peers' documentaries.
5. Communicate public health science to diverse audiences, including individuals at all levels of health literacy, for purposes of influencing behavior and policies	HPRO 916- Implementation Science Models and Methods	HPRO 916: Implementation Science Project Part D: PhD Students will begin to develop a National Institutes of Health R01 grant application that will include only specific aims and research plan sections. The research plan will include developing the significance and scientific merit, innovation, and approach sections of an R01 application.
6. Integrate knowledge, approaches, methods, values, and potential contributions from multiple professions, sectors, and systems in addressing public health problems	HPRO 916- Implementation Science Models and Methods	HPRO 916: Implementation Science Project Part D: PhD Students will begin to develop a National Institutes of Health R01 grant application that will include only specific aims and research plan sections. The research plan will include developing the significance and scientific merit, innovation, and approach sections of an R01 application.
7. Create a strategic plan	CPH 563/HSRA 853 - Strategic Planning and Management	CPH 563: Group Assignment 2: Students will prepare a list of the internal strengths and weaknesses of a healthcare system, write mission and vision statements and three value statements, and propose a list of potential strategic actions to ensure the future success of the organization.
8. Facilitate shared decision making through negotiation and consensus-building methods	CPH 718 - Leadership Theory and Practice	CPH 718: Reflection paper on negotiation/influencing: Students will practice influencing/negotiation skills in real-life and write a two to three page reflection paper about the situation, which specific skills were practiced, how it felt, outcomes, and a reflection of what worked and what didn't.
9. Create organizational change strategies	CPH 718 - Leadership Theory and Practice	CPH 718: Reflection paper on change management: Students will write a two to three page reflection paper using a change (program, process, organization, or system) from their work using change management theories and concepts learned in the course.

10. Propose strategies to promote inclusion within public health programs, policies, and systems	CPH 545/HPRO 809- Health Equity and Leadership	CPH 545: Documentary and Peer Review: Students will create a video documentary and post it online during the last week of class. The documentary should convey an original idea, thesis or perspective and include original footage or data (such as interviews or filming events/footage). Students will also provide a peer review of four peers' documentaries.
11. Assess one's own strengths and weaknesses in leadership capacities, including cultural proficiency	CPH 718 - Leadership Theory and Practice	CPH 718: Leadership philosophy paper: Students will write their leadership philosophy as if they were interviewing for a position utilizing their leadership skillset. It includes information about their vision for leadership, styles and preferences, values they aspire to, and areas they are developing.
12. Propose human, fiscal, and other resources to achieve a strategic goal	CPH 563/HSRA 853- Strategic Planning and Management	CPH 563: Group Assignment 3- Students will use identified methods to monitor the progress of the three strategies/goals selected in group assignment 2, including performance measures and targets to determine if the goals are successful.
13. Cultivate new resources and revenue streams to achieve a strategic goal[2]	CPH 563/HSRA 853- Strategic Planning and Management	CPH 563: Group Assignment 3- Students will use identified methods to monitor the progress of the three strategies/goals selected in group assignment 2, including performance measures and targets to determine if the goals are successful.
Policy & Programs		
14. Design a system-level intervention to address a public health issue	HPRO 916- Implementation Science Models and Methods	HPRO 916: Implementation Science Project Parts A & D: Students will determine a public health issue that they would like to address throughout the course. Once an issue has been identified, students will write a one-page paper that incorporates definitions, theories, stakeholders, and settings that would be involved in addressing the identified public health issue. Additionally, students will They will review existing repositories of evidence-based interventions as well as gather systematic reviews that document efficacious approaches. Students will identify 2-3 candidate interventions and complete a RE-AIM review on each gathering information on intervention reach and representativeness and efficacy at the individual level while also assessing the adoptability, likelihood of implementation, and potential for sustainability at the organizational or setting level.

15. Integrate community-informed knowledge such as cultural values and practices in the design of public health policies and programs	CPH 545/HPRO 809- Health Equity and Leadership	CPH 545: Documentary and Peer Review: Students will create a video documentary and post it online during the last week of class. The documentary should convey an original idea, thesis or perspective and include original footage or data (such as interviews or filming events/footage). Students will also provide a peer review of four peers' documentaries.
16. Integrate scientific information, legal and regulatory approaches, ethical frameworks, and varied parties' interests in policy development and analysis	HPRO 916- Implementation Science Models and Methods	HPRO 916: Implementation Science Project Part C: Students will use the findings from parts A & B as the basis for this assignment. They will identify the underlying theoretical approach for the identified evidence-based intervention and propose underlying principles that led to the intervention's effectiveness. Students will also identify an appropriate implementation science explanatory model that will be used as the basis for any implementation strategies that will be tested to speed the movement of the evidence-based intervention into practice.
17. Propose interprofessional and/or intersectoral team approaches to improving public health	CPH 718 - Leadership Theory and Practice	CPH 718: Reflection paper on team dynamics and leadership: Students will write a two-to-three-page paper on a team they've been a member of reflecting on the five characteristics of highly effective teams and the roles of the team leadership.
Education & Workforce Development		
18. Assess an audience's knowledge and learning needs	CPH 705 - Public Health Teaching and Training	CPH 705: Needs assessment: Students will conduct a needs assessment for the proposed public health training project outlined in the module plan using the four phases: planning, collecting data, analyzing data, and participants.
19. Deliver training or educational experiences that promote learning in academic, organizational, or community settings	CPH 705 - Public Health Teaching and Training	CPH 705: Teaching/training project: Students will use the overarching public health teaching/training module designed in week 4 to complete a needs assessment, an evaluation plan, three teaching/training modules, and build content (assessment, presentation, & activity) in addition to an evaluation assessment of their modules. They will design and submit a PowerPoint, session outline, student/trainee handout, assessment, and session evaluation.

20. Use best practice modalities in pedagogical practices	CPH 705 - Public Health Teaching and Training	CPH 705: Teaching/training project: Students will use the overarching public health teaching/training module designed in week 4 to complete a needs assessment, an evaluation plan, three teaching/training modules, and build content (assessment, presentation, & activity) in addition to an evaluation assessment of their modules. They will design and submit a PowerPoint, session outline, student/trainee handout, assessment, and session evaluation.

Assessment of Competencies for DrPH (all concentrations) - Students Entering 2024-2025 Academic Year and Forward		
Competency	**Course number(s) and name(s)***	**Describe specific assessment opportunity[n]**
Data & Analysis		
1. Explain qualitative, quantitative, mixed methods, and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community, and population) levels	CPH 711/ENV 911: Communication for Public Health Leaders	CPH 711: Communication case analysis: Students will select a 'good' and 'bad' public health communication example. They will complete a case analysis of each example, identifying the public health message, how the public responded to the message, and an after-action review.
	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Group Case Studies: Students will participate in three group discussion boards and discuss case studies, including challenges and barriers to implementation planning, utilizing CHNA data for planning, and systems thinking/data-driven decision-making.
2. Design a qualitative, quantitative, mixed methods, policy analysis, or evaluation project to address a public health issue	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Project Part 1: Identify and Survey Stakeholders: Students will identify the organization and key stakeholders to include characteristics, evaluate accessible data (external/internal), survey the key stakeholders, and write a 3-page report.
3. Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring, and evaluating policies and programs and to address a population's health	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Group Case Studies: Students will participate in three group discussion boards and discuss case studies, including challenges and barriers to implementation planning, utilizing CHNA data for planning, and systems thinking/data-driven decision-making.
Leadership, Management & Governance		

4. Propose strategies for health improvement and elimination of health inequities by organizing partners, including researchers, practitioners, community leaders, and others	CPH 700/HPRO 900: Health Equity and Community Engagement	CPH 700: Project Part 4: Community Organization Paper: Students will choose a specific health topic and population and create a concept map demonstrating how these concepts interact, influence one another, and contribute to health outcomes within the chosen population. The map should consider direct and indirect relationships, multilevel factors, and align with the conceptualized community organization.
5. Communicate public health science to diverse audiences, including individuals at all levels of health literacy, for purposes of influencing behavior and policies	CPH 711/ENV 911: Communication for Public Health Leaders	CPH 711: Written communications for the public: Students will create a public health memo or press release on a public health topic that could be deemed controversial that must convey clear and credible messaging with at least two actionable items for the public using transparent communication strategies.
6. Integrate knowledge, approaches, methods, values, and potential contributions from multiple professions, sectors, and systems in addressing public health problems	CPH 704/HPRO 904: Advocacy and Policy Engagement	CPH 704: Policy Assessment Project Part 1: Policy Analysis: Students will identify a policy and provide a 2–3-page analysis that includes a description of the policy, the problem the policy is trying to address, stakeholder identification, policy context, goals and objectives, implementation, and impact.
	CPH 707/HPRO 907: Advanced Public Health Leadership & Management	CPH 707: Implementing Organizational Change Paper: Students will write a 12–15-page paper on implementing organizational change in a public health organization. The paper will discuss the importance of change management in public health organizations and offer insights into the potential benefits achieved through successful change implementation.
7. Create a strategic plan	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Project Part 3: Create a strategic plan with at least three goals: Students will create a 3-page strategic plan for three goals based on the stakeholder survey and environmental scan that enable the organization to determine the path forward.

8. Facilitate shared decision making through negotiation and consensus-building methods	CPH 707/HPRO 907: Advanced Public Health Leadership & Management	CPH 707: Reflection Papers: Students will write four reflection papers throughout the semester on change management, consensus building and facilitation tools, mentoring and coaching, and recognizing and celebrating team contributions, values & victories.
	CPH 711/ENV 911: Communication for Public Health Leaders	CPH 711: Communication Case Analysis: Each student will select a good and bad public health communication. Throughout the course, they will apply skills and knowledge developed to complete the following sections culminating in a complete case analysis.
9. Create organizational change strategies	CPH 707/HPRO 907: Advanced Public Health Leadership & Management	CPH 707: Implementing Organizational Change Paper: Students will write a 12-15 page paper on implementing organizational change in a public health organization. The paper will discuss the importance of change management in public health organizations and offer insights into the potential benefits achieved through successful change implementation.
10. Propose strategies to promote inclusion within public health programs, policies, and systems	CPH 700/HPRO 900: Health Equity and Community Engagement	CPH 700: DEI Statement: Students will use guided worksheets throughout the semester to craft a DEI statement. After completing the two guided worksheets to determine the content for their statement, they will complete a draft version. Once the draft version has been graded and feedback has been received, the students will use the information to write a final version to be included in their portfolio.
11. Assess one's own strengths and weaknesses in leadership capacities, including cultural proficiency	CPH 700/HPRO 900: Health Equity and Community Engagement	CPH 700: DEI Statement: Students will use guided worksheets throughout the semester to craft a DEI statement. After completing the two guided worksheets to determine the content for their statement, they will complete a draft version. Once the draft version has been graded and feedback has been received, the students will use the information to write a final version to be included in their portfolio.
	CPH 707/HPRO 907: Advanced Public Health Leadership & Management	CPH 707: Leadership Philosophy Statement: Students will write a 1-page (draft and final version) personal leadership philosophy statement. The statement must include the student's leadership style and

		beliefs, examples to illustrate their philosophy and explain how their philosophy will guide their future leadership development.
12. Propose human, fiscal, and other resources to achieve a strategic goal	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Project Part 5: Write a business plan with a supporting budget: Students will write a 3-page business plan for the organization and create a budget for the implementation and execution of the strategic goals.
13. Cultivate new resources and revenue streams to achieve a strategic goal[2]	CPH 712/HSRA 912: Systems & Strategic Thinking	CPH 712: Project Part 5: Write a business plan with a supporting budget: Students will write a 3-page business plan for the organization and create a budget for the implementation and execution of the strategic goals.
Policy & Programs		
14. Design a system-level intervention to address a public health issue	CPH 700/HPRO 900: Health Equity and Community Engagement	CPH 700: Conceptualize a Community Organization that Addresses Social Determinants of Health Parts 1-5: Throughout the course, students will develop a comprehensive concept for a community organization that aims to address social health determinants. Projects include a concept map, community asset map, community organization paper, and a public service announcement video.
15. Integrate community-informed knowledge such as cultural values and practices in the design of public health policies and programs	CPH 700/HPRO 900: Health Equity and Community Engagement	CPH 700: Conceptualize a Community Organization that Addresses Social Determinants of Health Parts 1-5: Throughout the course, students will develop a comprehensive concept for a community organization that aims to address social health determinants. Projects include a concept map, community asset map, community organization paper, and a public service announcement video.
	CPH 704/HPRO 904: Advocacy and Policy Engagement	CPH 704: Group Case Study-Health Equity: Students will participate in three group discussion boards focusing on approaches to policy engagement, policies impacting health equity, and relationships with elected officials.
16. Integrate scientific information, legal and regulatory approaches, ethical frameworks and varied stakeholder interests	CPH 704/HPRO 904: Advocacy and Policy Engagement	CPH 704: Policy Assessment Project: Throughout the semester, each student will complete various components of a policy assessment to culminate in a policy paper (part 4) and a policy brief (part 5) that includes a full analysis and

in policy development and analysis.		recommendations. Students may select the policy of their choice to assess. This may be an organizational policy or one at the local, state, or federal level.
17. Propose interprofessional and/or intersectoral team approaches to improving public health	CPH 704/HPRO 904: Advocacy and Policy Engagement	CPH 704: Legislative Testimonial: Students will select a legislative bill (can be past or current at any level) and provide an oral testimony in support or opposition to the bill. The 3–5-minute video will cover the purpose of the testimony, background information, statement of position, evidence, and recommendations.
	CPH 707/HPRO 907: Advanced Public Health Leadership & Management	CPH 707: Reflection Papers: Students will write four reflection papers throughout the semester on change management, consensus building and facilitation tools, mentoring and coaching, and recognizing and celebrating team contributions, values & victories. Each paper will be 2 pages long, allowing students to interpret their experiences, observations, and insights concerning the topic and course learning content.
Education & Workforce Development		
18. Assess an audience's knowledge and learning needs	CPH 705: Public Health Teaching and Training	CPH 705: Needs assessment: Students will conduct a needs assessment for the proposed public health training project outlined in the module plan using the four phases: planning, collecting data, analyzing data, and participants.
19. Deliver training or educational experiences that promote learning in academic, organizational, or community settings	CPH 705: Public Health Teaching and Training	CPH 705: Teaching/training project: Students will use the overarching public health teaching/training module designed in week 4 to complete a needs assessment, an evaluation plan, three teaching/training modules, and build content (assessment, presentation, & activity) in addition to an evaluation assessment of their modules. They will design and submit a powerpoint, session outline, student/trainee handout, assessment, and session evaluation.

20. Use best practice modalities in pedagogical practices	CPH 705: Public Health Teaching and Training	CPH 705: Teaching/training project: Students will use the overarching public health teaching/training module designed in week 4 to complete a needs assessment, an evaluation plan, three teaching/training modules, and build content (assessment, presentation, & activity) in addition to an evaluation assessment of their modules. They will design and submit a PowerPoint, session outline, student/trainee handout, assessment, and session evaluation.

3) Provide supporting documentation for each assessment activity listed in Template D3-2. Documentation should include the following, as relevant, for each listed assessment:

   - assignment instructions or guidelines as provided to students
   - writing prompts provided to students
   - sample exam question(s)

This documentation can be found in the ERF at ERF->D->D3.

4) Include the most recent syllabus from each course listed in Template D3-1, or written guidelines, such as a handbook, for any required elements listed in Template D3-1 that do not have a syllabus.

This documentation can be found in the ERF at ERF->D->D3.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The DrPH core curriculum is the same for all concentrations. This ensures students have appropriate grounding in foundational public health knowledge. The DrPH program matriculated its first cohort in spring 2021. Using feedback from these first groups of students, program administration quickly recognized the need to update the core curriculum. From August 2022 through June 2023, a comprehensive and inclusive process was used to update the DrPH core curriculum.

In August 2022, we held an initial meeting that was organized as a focused conversation where we discussed what general skills were needed by graduates of a DrPH program. We included several external partners who serve in leadership positions in local and state health departments. Current students in the DrPH program, all of whom work in various sectors of public health, were also included. Using this feedback and the de Beaumont Foundation's strategic skills guidance (see ERF) as a framework, a revision to the core curriculum was proposed, and then shared back with the group for additional feedback. This led to the identification of skills that DrPH graduates need to be successful leaders in public health. These skills were used as a framework to establish program course concepts and competencies. Current DrPH students were included in this process. Once it was decided which courses were to be included in the revised core curriculum, workgroups were established to develop the syllabi for each course. External partners and current DrPH students participated in these workgroups. The revised DrPH core curriculum was implemented in the fall 2024 semester.

Weaknesses: None identified.

D4. MPH & DrPH Concentration Competencies

The school defines at least five distinct competencies for each concentration or generalist degree at each degree level. These competencies articulate the unique set of knowledge and skills that justifies awarding a degree in the designated concentration (or generalist degree) and differentiates the degree offering from other concentrations offered by the unit, if applicable.

The list of competencies may expand on or enhance foundational competencies, but, in all cases, including generalist degrees, the competency statements must clearly articulate the additional depth provided beyond the foundational competencies listed in Criteria D2 and D3.

The school documents at least one specific, required assessment activity (e.g., component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals validate the student's ability to perform the competency.

If the school intends to prepare students for a specific credential (e.g., CHES/MCHES) that has defined competencies, the school documents coverage and assessment of those competencies throughout the curriculum.

1) Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the school will present a separate matrix for each concentration.

Assessment of Competencies for MPH in Biostatistics Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Employ effect size, sample size, and power calculations in the design or interpretation of studies as appropriate for the specific research questions and hypotheses.	CPH 517/BIOS 835: Design of Medical Health Studies	CPH 517/BIOS 835: Homework 1-4: Students will complete written critiques of the design, analysis, and interpretation of published articles in medical or public health literature. Also, students will complete assignments to calculate sample size and randomization schedules.
2. Apply appropriate statistical methods of estimation and inference, using a software package for data management, statistical analyses, and data presentation.	CPH 652/BIOS 818: Biostatistical Linear Models: Methods and Application	CPH 652/BIOS 818: Mini-projects 1-4: Students will complete mini projects throughout the semester that cover linear regression, inference, model fit, ANOVA, ANCOVA, inference, prediction, diagnostics, and mixed effects linear models. All projects will be completed in SAS or R.
	CPH 651/BIOS 810: Introduction to SAS Programming	CPH 651/BIOS 810: Final Project: Students will complete a final data analysis project in SAS where they apply the programming and analysis methods covered in class to a public health dataset and write up a summary of the analysis findings.

	CPH 653/BIOS 823: Categorical Data Analysis	CPH 653/BIOS 823: Midterm and Final Exam: Students will complete a midterm and final exam that covers topics covered throughout the course (i.e., contingency tables, GLM, Poisson, logistic regression, multicategory linear models, and loglinear).
3. Apply statistical methods for quality control and data cleaning to already collected data, verify assumptions of statistical tests and models, and implement appropriate methods to address any issues discovered.	CPH 652/BIOS 818: Biostatistical Linear Models: Methods and Application	CPH 652/BIOS 818: Final Exam: Students will complete a final exam where they will have to apply the statistical methods taught throughout the course.
	CPH 651/BIOS 810: Introduction to SAS Programming	CPH 651/BIOS 810: Homework assignments 1-10: Students will complete weekly assignments that cover reading in data, formatting data, cleaning data, IF-THEN statements, PROC statements, exporting data, and statistical testing.
4. Develop written and oral presentations based on statistical findings for both public health professionals and lay audiences.	CPH 517/BIOS 835: Design of Medical Health Studies	CPH 517/BIOS 835: Grant Proposal and Presentation: Students will work in groups to write a grant proposal that includes the study design, study conduct, data management procedures, data analysis plan, specific aims, background, significance, methods, and human subjects. Additionally, students will orally defend their proposals during a mock site visit.
5. Evaluate the strengths and limitations of study design and statistical analyses of public health and biomedical studies.	CPH 517/BIOS 835: Design of Medical Health Studies	CPH 517/BIOS 835: Homework 1-4: Students will complete written critiques of the design, analysis, and interpretation of published articles in medical or public health literature. Students will also calculate sample size and randomization schedules.
	CPH 652/BIOS 818: Biostatistical Linear Models: Methods and Application	CPH 652/BIOS 818: Article Critique: Students will select a recent original research article on a public health or medical research topic that utilizes a linear model to help in drawing their conclusion. The critique must be in the form of a rebuttal suitable for publication.
6. Communicate ethical consideration in research, study design, and data handling, analysis, and interpretation	CPH 517/BIOS 835: Design of Medical Health Studies	CPH 517/BIOS 835: Ethics Quiz: Students will complete a clinical research ethics quiz combined with their homework grade.
	CPH 653/BIOS 823: Categorical Data Analysis	CPH 517/BIOS 835: Journal Club: Students will sign up for a journal club week and present one article from his or her own field of study or area of interest that is related to recent course materials

Assessment of Competencies for MPH in Emergency Preparedness Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Identify adverse events and coordinate responses within the scope of authority and chain of command.	CPH 554: Emergency Preparedness: Respond and Recovery	CPH 554: FEMA Incident Command Certification – International Disaster Review Paper: Student will select and research a disaster that happened in the last 15 years. Students will write a 5-page paper that describes the event and discusses the successes and gaps in the response.
	CPH 631: Emergency Preparedness: Protection	CPH 631: Critical Infrastructure Paper: Students will choose an area of interest and write a 5-page paper detailing how preparedness planning will assist the sector and how vulnerable a community is to a disruption in service from this infrastructure.
2. Recognize protective behaviors in responders' actions during disasters and recommend appropriate adjustments.	CPH 554: Emergency Preparedness: Respond and Recovery	CPH 554: Mass Dispensing Plan Paper: Students will be assigned a hypothetical site in their neighborhood and must plan for it to become a mass dispensing clinic for an anthrax event. Students are required to write a 10-page paper on the topic.
	CPH 631: Emergency Preparedness: Protection	CPH 631: FEMA IS-200 course: Students will complete the Basic Incident Command System course online offered by FEMA. This course will allow students to describe the delegation of authority process, implementing authorities, management by objectives, and preparedness plans and objectives.
3. Research and analyze epidemiological, environmental, or health data from previous and current disaster responses.	CPH 554: Emergency Preparedness: Respond and Recovery	CPH 554: Peer Reviewed Article Critique: Students will write a 5-page paper that consists of a critical review of an article published in a peer-reviewed journal.
	CPH 631: Emergency Preparedness: Protection	CPH 631: Emerging Infections Paper/Presentation: Students will act as a local Emergency Response Coordinator and write a 5–7-page paper that describes their plans for an emerging infectious disease. They will describe disease transmission, treatment options, isolation guidelines, vaccination, non-pharmaceutical interventions, and how the community will respond given the guidance.
4. Summarize, coordinate, and direct the management of information for incident action planning.	CPH 550: Emergency Preparedness: Prevention	CPH 550: Training and Exercise Plan: Students will develop a comprehensive training and exercise plan for a hypothetical entity.

	CPH 631: Emergency Preparedness: Protection	CPH 631: Student presentations: This assignment involves the creation and presentation of the Emerging Infections Paper created by students and covers the public health measures related to isolation or quarantine.
5. Research and implement organizational capabilities for disaster preparedness and response.	CPH 550: Emergency Preparedness: Prevention	CPH 550: ESF Recorded presentation: Students will select any Emergency Support Function from the National Response Framework and record an 8–10-minute lecture highlighting the key components of the ESF (i.e., activities, governing/partner agencies, examples of when utilized, etc.).
	CPH 554: Emergency Preparedness: Respond and Recovery	CPH 554: Review of the National Response Framework: Students will complete the IS 800D course from FEMA that allows students to describe the purpose, scope, organization, and underlying doctrine of the National Response Framework.

Assessment of Competencies for MPH in Environmental and Occupational Health Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Analyze sources of exposure in the workplace and the environment that can cause health risks to humans or degradation of ecosystems.	CPH 503- Public Health, Environment and Society	CPH 503: Research Paper: Students will write a paper on a topic of their choice. Some suggested topics are provided but other topics are also accepted within the environmental and occupational health discipline. All topics involve the analysis of environmental and workplace exposures and their impact on human health.
	CPH 594 - Environmental Exposure Assessment	CPH 594: Quizzes 1-3: The first three quizzes cover an introduction to exposure assessment, risk assessment principles, and regulations/exposure limits.
2. Examine exposures and pathways for environmental and occupational agents associated with human injuries and diseases.	CPH 594 - Environmental Exposure Assessment	CPH 594: Presentation: Students will conduct in-depth research from a list of topics provided by the instructor that examines exposures and pathways associated with human injuries and diseases. Students will then formally present their findings to the class.
	CPH 597 - Principles of Toxicology	CPH 597: Exams 1: The student's first exam will cover exposures and pathways associated with environmental and occupational hazards.
3. Compare and contrast specific symptoms and health outcomes associated with occupational and	CPH 597 - Principles of Toxicology	CPH 597: Exam 2: The student's second exam will cover physiological symptoms and health hazards associated with specific occupational and environmental exposures.

environmental exposures.		
4. Apply genetic and physiological factors that affect susceptibility to adverse health outcomes following exposure to environmental and occupational hazards.	CPH 503- Public Health, Environment and Society	CPH 503: Assignments 3: This assignment will cover toxicology and carcinogenesis.
	CPH 597 - Principles of Toxicology	CPH 597: Exam 3: This exam will cover numerous topics related to toxicology including carcinogenesis.
5. Apply the dose-response principle in assessing risk from occupational and environmental exposures.	CPH 503- Public Health, Environment and Society	CPH 503: Quiz 2: This quiz will cover topics related to toxicology that include the dose-response principle related to occupational and environmental exposures.
	CPH 597 - Principles of Toxicology	CPH 597: Student Presentation: At the end of the semester students are asked to prepare and give a 10-minute PowerPoint presentation about a toxin that is related to their own life experience (work, household, environment, academia, etc.).
6. Develop and implement methodologies for measurement and estimation of workplace and environmental exposures.	CPH 594 - Environmental Exposure Assessment	CPH 594: Quiz 4: Students will be quizzed about exposure monitoring methods taught in the previous week.
	CPH 590 - Elements of Industrial Safety	CPH 590: Assignments 1: Students are tasked with developing a Job Hazard Analysis (JHA) that includes the methodologies and measurement of workplace and environmental hazards.
7. Employ measures to control workplace injury and illness including engineering, education, regulations, incentives, and best practices.	CPH 590 - Elements of Industrial Safety	CPH 590: Site Visit: Students will visit a local facility in industry and record detailed observations and reactions related to occupational safety and health controls.
	CPH 598 - Fundamentals of Industrial Hygiene	CPH 598: Exam 2: Students will be assessed on the topics covered in the previous seven weeks. This includes engineering controls, PPE, and biological hazards.
8. Examine information sources and public health indicators in occupational and	CPH 503- Public Health, Environment and Society	CPH 503: Second Presentation: Each student will make a 5-minute PowerPoint presentation to the class about a news article covering an environmental or occupational health problem from English language news media published in the past 6 months.

environmental health.	CPH 598 - Fundamentals of Industrial Hygiene	CPH 598: Student Presentation: Students are expected to conduct in-depth research from a list of topics provided by the instructor in combination with a site visit that they arrange. Students will distill their findings into a 15–20-minute presentation that they will record on PowerPoint or Zoom.

Assessment of Competencies for MPH in Epidemiology Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Determine strengths and weaknesses of the scientific literature and synthesize the evidence to inform public health practice.	CPH 628 - Epidemiologic Methods	CPH 628: Paper Critiques: Throughout the semester, students will be responsible for completing 5 epidemiology paper critiques. Students will assess the strengths and weaknesses of epidemiological literature to inform public health practice.
2. Apply appropriate study designs and data collection methods to answer specific epidemiologic questions and address public health issues.	CPH 628 - Epidemiologic Methods	CPH 628: Homework 3: Homework assignment number three covers measures of association, Cohot, Cross-sectional, and Case-control studies.
3. Analyze datasets using computer software.	CPH 651 - Intro to SAS Programming	CPH 651: Final Project: Students will complete a final project in SAS that requires students to apply the programming and analysis methods covered in class to a public health dataset and to write up a summary of the analysis findings.
4. Utilize analytical approaches to describe, summarize, and interpret epidemiologic data.	CPH 628 - Epidemiologic Methods	CPH 628: Midterm and Final Exams: Students will be assessed on their ability to describe, summarize, and interpret epidemiological data.
	CPH 621 - Applied Epidemiology	CPH 621: Discussion Boards: Students will engage in discussion board posts throughout the semester where they apply epidemiologic methods to real-world scenarios. In addition to their original submissions, students are required to reply to at least two other peers' submissions.
5. Apply principles of ethical conduct, cultural sensitivity, and social justice to public health research and practice.	CPH 628 - Epidemiologic Methods	CPH 628: Paper Critiques: Throughout the semester, students will be responsible for completing 5 epidemiology paper critiques. These article critiques will cover ethical conduct in research, cultural sensitivity, and social justice in public health research and practice.

Assessment of Competencies for MPH in Health Promotion Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Apply scientific theories and models in planning health promotion program, policy, systems, and environmental change strategies.	CPH 501 - Health Behavior	CPH 510: Paper #1: Students will select one of the four major individual theories of health behavior (TRA or TPB, SCT, HBM, IBM) and analyze the behavior in terms of this theory.
	CPH 505 - Applied Research in Public Health	CPH 505: Literature Review & Theory Identification: Students will find at least three peer-reviewed scholarly articles related to their topic. Additionally, students will locate at least one additional source that addresses theoretical foundations/models/frameworks related to their topic. Finally, students will create a concept map or outline describing main points from all four sources.
	CPH 545 - Health Disparities and Health Equity	CPH 545: Reflections: Students will write reflection papers on the epidemiological profile of racial and ethnic groups and the theories of racial and ethnic differences in health. The reflection papers should be no more than 500 words.
2. Analyze and address context and key factors relevant to the implementation of evidence-informed health promotion strategies.	CPH 534 - Interventions in Health Promotion	CPH 534: Final Paper: Students will write an 8–10-page paper reflecting on their volunteer experience and detailing the intervention they supported. Students will detail how the intervention and experience aligned with concepts covered in the course (i.e., level of intervention, theoretical underpinnings, frameworks, how public health ethics were applied, etc.). Students will use these concepts to explain the intervention's success or failure. They will make recommendations to improve the intervention.
	CPH 545 - Health Disparities and Health Equity	CPH 545: Reflection paper: Students will write a reflection paper on addressing disparities through resource allocation and practical solutions. The reflection papers should be no more than 500 words.
3. Develop rigorous projects to improve public health outcomes, community wellbeing, and reduce health disparities.	CPH 505 - Applied Research in Public Health	CPH 505: Final Group Project: Students will work together to write a research proposal including sections for introduction and background, methods, plan for disseminating the findings and contribution to the field. This will be a culmination of previous work and build on the participation/discussion board assignments throughout the semester.
	CPH 545 - Health Disparities and Health Equity	CPH 545: Documentary and Peer Review: Students will create a video documentary and post it online during the last week of class. The documentary should convey an original idea, thesis or perspective and include original footage or data (such as interviews or filming events/footage). Students will also provide a peer review of four peers' documentaries.

4. Demonstrate skills needed to coordinate and facilitate community partnerships to prioritize community needs, identify community assets, and create action to improve public health outcomes and reduce health disparities.	CPH 534 - Interventions in Health Promotion	CPH 534: Midterm Paper: Students will volunteer at a local community organization that delivers health promotion programs and interview a leader within the organization. Students will use the information provided in weeks 6 and 7 to develop a 1–2-page interview guide. Students will then write a 3–4-page reflection detailing the interview results. Required components of the paper are an overview of the organization, its target population(s), a short biography of the interview subject, and a summary of the interview findings.
5. Apply administrative and management plans for health promotion strategies using a systems approach.	CPH 545 - Health Disparities and Health Equity	CPH 545: Documentary: Students will develop a documentary that successfully analyzes successes and failures of major interventions aimed at reducing/eliminating health disparities or successfully proposes a multilevel intervention to address the health disparity.

Assessment of Competencies for MPH in Maternal and Child Health Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Examine the historical development of MCH public policies and practices in the US for federal, state, and local agencies and programs serving MCH populations and analyze the current gaps in MCH services and programs.	CPH 546 - Introduction to Maternal and Child Health	CPH 546: Quiz #4: Students will be quizzed on MCH policy and MCH in Public Health Departments.
	CPH 547 - MCH Theories and Interventions	CPH 547: Assignment #2 Local Expert Interviews Paper: Students will interview at least two local experts on their topic about the risk factors that are most relevant to their topic in the chosen city. The chosen experts will be familiar with policies and programs already in place, unmet needs, and characteristics of subpopulations of interest, related to a student's chosen topic.
2. Apply the life course perspective in addressing health, diseases, and behaviors of MCH populations.	CPH 546 - Introduction to Maternal and Child Health	CPH 546: Final Paper: Students will select an MCH topic of their choice. Students are expected to analyze the topic using the life course framework and propose an intervention rooted in life course theory.
	CPH 547 - MCH Theories and Interventions	Discussion Boards; Background and Risk Factors Paper; Local Experts Interview Paper; Socioeconomic/Contextual Interventions Paper; Long

		Lasting Protective/Clinical Interventions Paper; Education/Counseling Interventions Paper; infographic
3. Identify the key public health issues for MCH populations at the local, state, national, and global levels.	CPH 546 - Introduction to Maternal and Child Health	CPH 546: Indicators Assignment: Students will be asked to research an MCH indicator, then describe and analyze trends for that indicator. This paper is no more than 5 pages in length.
4. Examine how the major determinants of health and disease affect the MCH populations at the local, state, national, and global levels.	CPH 546 - Introduction to Maternal and Child Health	CPH 546: Discussion Boards: Students will utilize discussion boards to apply determinants of health concepts to explain MCH trends and discuss major health issues affecting MCH populations.
	CPH 548 - Life Course Health	CPH 548: Childhood Fact Sheet: Students are tasked with developing a childhood fact sheet that includes five major sections (i.e., economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context.
5. Develop rigorous projects to improve the health and to reduce inequalities and inequities of MCH populations.	CPH 547 - MCH Theories and Interventions	CPH 547: Socioeconomic/Contextual Interventions Paper: Each student will write a paper relevant to their chosen city/topic. The paper should include two sections. The first section should include a table that summarizes 4 evidence-based or promising socioeconomic or contextual interventions most relevant to a student's selected topic/city. The second section should discuss the risk factors the student's socioeconomic and contextual interventions would reduce.
	CPH 548 - Life Course Health	CPH 548: MCH Agency Critique: Each student will pick a real agency that provides MCH services and write a reflection that addresses several issues. Examples of types of agencies include public health departments (or departments within public health departments), non-profits, NGOs, and clinics.
	CPH 505 Applied Research	Citi training; Literature review and theory identification; Research questions; Study design, definitions, sampling, and analysis; Qualitative approach; Successful proposals; Final project

Assessment of Competencies for MPH in Public Health Administration and Policy Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Demonstrate the skills to analyze and resolve organizational issues through a multidisciplinary	CPH 502 - Health Services Administration	CPH 502: Briefing Paper 1: Each student will write a short (6-8 pages, excluding references list) briefing paper that will explore and describe two distinctly different health care organizations. Students will analyze their organizational structure, services offered,

systems-based approach.		types of providers, and the communities they serve.
2. Demonstrate the skills to evaluate financial and managerial performance, perform asset valuation, conduct operating and capital budget analysis, and undertake financial decision-making in public health and health services organizations.	CPH 565 - Health Care Finance	CPH 565- Case Studies: Students will complete two case study papers that review and apply concepts in healthcare finance. These case studies will evaluate financial, organizational, managerial, performance, and decision-making aspects of specific healthcare organizations.
3. Apply relevant theories and identify principles, best practices, and challenges of human resources management in health care organizations.	CPH 502 - Health Services Administration	CPH 502: Administrative Direction and Process Improvement Term Paper: Students will draft a comprehensive term paper that covers ACHE skills, leadership assessments, management in healthcare, conflict resolution, and operations. Each topic will be based on credible sources from peer-reviewed journals and books.
	CPH 562 - Human Resources Management in Organizations	CPH 562: HR Project: Students must complete an HR employee manual or conduct research with change recommendations. Each project will involve the application and understanding of relevant theories and principles related to human resources in healthcare organizations.
4. Summarize the legal, political, social, and economics issues that impact the structure, financing, and delivery of health services within health systems in the US.	CPH 565 - Health Care Finance	CPH 565: Worksheets: Students will complete six worksheets throughout the semester that address financial-related questions, solving a problem, and completing a financial exercise.
	CPH 580 - Health Care Organization Theory and Behavior	CPH 580: Macro Theory Paper: This assignment aims to assess students' understanding, application, and integration of macro-organizational theory's key terms, concepts, and applications within the context of healthcare.
5. Examine information about health policy issues and problems, and evaluate alternative policy options for these issues.	CPH 566 - Health Policy	CPH 566: Policy Analysis/Review Paper: Students will locate a healthcare policy and discuss the merits of the policy and describe/explain the policy and determine the stakeholders and those affected by the policy. Students will also assess and analyze the policy and evaluate alternative policy options for this issue.
	CPH 502 - Health Services Administration	CPH 566: Briefing Paper #2: Students will develop a briefing paper in the SBAR format (Situation-Background-Assessment-Recommendation) as it relates to a health policy issue or problem.

Assessment of Competencies for DrPH in Advocacy and Leadership Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Engage internal and external stakeholders to create, implement, and evaluate public health programs and policies.	CPH 731 - Community Organizing and Advocacy	CPH 731: Community Audit Project Part 1: Students will identify a community organization and key stakeholders and develop a stakeholder concept map.
	CPH 730 - Advanced Evaluation and Quality Improvement	CPH 730: Program Evaluation Project Part 2: Students will identify a current public health program and select two quality improvement (QI) tools and two quality improvement concepts to compare and contrast in a detailed matrix.
2.Examine approaches to the administration of public health interventions, policies, and programs and prioritize opportunities for improvement.	CPH 731 - Community Organizing and Advocacy	CPH 731: Community Audit Project Parts 3: Students will evaluate the strengths, assets, needs, and areas of improvement in their selected communities.
	CPH 730 - Advanced Evaluation and Quality Improvement	CPH 730: Program Evaluation Project Part 3: Students will propose ethical design improvements for their selected program that incorporates key ethical considerations.
3. Analyze and evaluate public health systems for gaps and design improvements to ethical decision-making, diversity, and advocacy into leadership and practice.	CPH 731 - Community Organizing and Advocacy	CPH 731: Community Audit Project Part 5: Students will write a 1-page letter to a legislator advocating for the proposed intervention or recommendation for their selected community.
	CPH 730 - Advanced Evaluation and Quality Improvement	CPH 730: Program Evaluation Project Part 4: Students will create a systematic process to monitor program activities, assess outcomes, and make informed decisions for ongoing improvement.
	CPH 718 - Leadership Theory & Practice	CPH 718: Reflection assessments: Student will write short essays covering content from weeks 8-15 that explore team leadership, leadership of culture, ethics, and diversity, change management, and crisis leadership.
4. Analyze, evaluate, and translate research into public health practice and advocacy.	CPH 731 - Community Organizing and Advocacy	CPH 731: Community Audit Project Part 4: Based on the audit of their selected community, students will develop an action plan that details the intervention, implementation, resources needed, communication strategies, and partnership required for success.
	CPH 730 - Advanced Evaluation and Quality Improvement	CPH 730: Discussion board posts: Students will engage in scheduled discussion board posts that cover evaluation, quality improvement, validity, advocacy, leadership, and data collection.

	CPH 757 - Survey Research Methods	CPH 757: Final Project: Students will select a research question, draft a survey questionnaire, pre-test the survey, and write a final survey protocol.
5. Build partnerships and organize stakeholders to advocate for communities to improve health equity.	CPH 730 - Advanced Evaluation and Quality Improvement	CPH 730: Program Evaluation Project: Students will identify a current public health program to evaluate. This will include the program's purpose, objectives, target population, key interventions, stakeholders and why they believe the program requires evaluation.
	CPH 718 - Leadership Theory & Practice	CPH 718: Reflection on Power and Negotiation: Students will write a reflection paper that explores skills in communication, feedback, collaboration, and negotiation.

Assessment of Competencies for DrPH in Emergency Preparedness Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Create and evaluate emergency preparedness exercise programs for local, state, national agencies and organizations.	CPH 726 - Exercise Design	CPH 726: Hazard Vulnerability Assessment (HVA): Students will compare and contrast three HVAs and provide a recommendation as to which is the best tool for their organization (hospital or healthcare facility).
	HPRO 903 – Mixed Methods Research	HPRO 903: Mixed Methods Project Proposal and Presentation: Students will create a Mixed Methods research proposal using a mixed methods design. The project can take the form of a non-funded project, proposal for extramural funding or internal funding, a dissertation proposal, or Mixed Methods Evaluation project for Public Health Program or Policy that addresses a public health issue.

2. Construct and facilitate preparedness tabletop exercises, functional exercises, and full-scale exercises.	CPH 726 - Exercise Design	CPH 726: Tabletop & Full-scale Exercise: Students will be divided into groups (teams) and will design a tabletop exercise. A template for the exercise will be provided on Canvas. Students will also critique the exercises of other groups. Finally, each student will record a briefing (PPT Presentation) that will be used at the beginning of a tabletop. For the full-scale exercise, students will design a full-scale exercise and complete all related exercise documentation. Each student will critique another student's FSE with the goal of making the exercise and accompanying documentation better.
3. Organize and manage a command structure to support an expanding events to include simultaneous disasters.	CPH 727 - Managing Complex Disasters	CPH 727: Final Project: OutbreakREADY! Digital Readiness and Response Simulation: Students will complete the Outbreak READY! Simulation in 3 parts. After reviewing the background material, the student will complete a quiz prior to starting the exercise. After each module of the exercise, the student will respond to a series of prompts and complete the first 2 sets via a discussion board. The response to the final set of prompts will be submitted in a written paper and submitted as a final project.
4. Identify challenges based on complex disasters and formulate solutions to prepare for future events.	CPH 727 - Managing Complex Disasters	*CPH 727: Discussion Boards 1, 2, 3, 4, 5, 7, 8: Students will complete discussion boards throughout the semester that cover complex disasters, emergency management principles, public health strategies in disasters, resource management, risk communication, and social considerations.
5. Evaluate disasters and effectively implement an Area Command or a Multiagency Coordination Center (MAC)	CPH 727 - Managing Complex Disasters	CPH 727: Outbreak READY! Virtual Readiness and Response Simulation: Students will complete the Outbreak READY! Simulation in 3 parts. There will be a quiz on the background information. After each part the student will respond to a series of prompts and complete the first 2 sets via discussion board. The response to the final set of prompts will be submitted in a written paper

Assessment of Competencies for DrPH in Epidemiology Concentration		
Competency	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**

1. Synthesize evidence, identify gaps, and inform public health research and practice based on a critical review and interpretation of the scientific literature.	CPH 626 - Health Information & Surveillance for Public Health Practice	CPH 626: Exams: Students will complete mid-term and final exams consisting of multiple choice, true/false, and short-answer questions related to health information and surveillance for public health practice.
	CPH 746 - Epidemiology in Public Health Practice	CPH 746: Epidemiologic Report: Students will work in small groups to identify a public health problem and prepare an epidemiologic report that includes an abstract, introduction summarizing the problem, data sources and methods of analysis applied to better understand the problem and identify the most vulnerable affected populations, a summary of finding, and a set of practical and feasible evidence-based recommendations that can be implemented to address the public health problem. Students will be individually assessed on the report.
2. Design, implement, and evaluate research studies and public health programs using epidemiologic concepts and methods	CPH 626 - Health Information & Surveillance for Public Health Practice	CPH 626: Group Project: Students will work in small groups to identify health problems that may need new or improved surveillance systems, evaluate an existing surveillance system, and prepare a proposal to improve an existing surveillance system or develop a new system. Each student will also individually prepare an evaluation report.
	CPH 746 - Epidemiology in Public Health Practice	CPH 764: Epidemiologic Report: Students will work in small groups to identify a public health problem and prepare an epidemiologic report that includes an abstract, introduction summarizing the problem, data sources and methods of analysis applied to better understand the problem and identify the most vulnerable affected populations, a summary of finding, and a set of practical and feasible evidence-based recommendations that can be implemented to address the public health problem. Students will be individually assessed on the report.
3. Utilize appropriate epidemiologic data and analytic methods, and interpret the results to inform public health research and practice.	CPH 626 - Health Information & Surveillance for Public Health Practice	CPH 626: Labs: Students will complete hands-on activities using open-source software and web tools to download, manage, and analyze data. They will also design and create an online survey instrument.
	CPH 621 - Applied Epidemiology	CPH 621: Homework 1-4: Homework assignments will help students learn the processes of data cleaning, data management, data analysis, data interpretation, and dissemination of results.

4. Integrate ethical principles and cultural sensitivity into the design, implementation, analysis, and dissemination of public health research and practice.	CPH 746 - Epidemiology in Public Health Practice	CPH 746: Oral Presentation: Each student will participate in developing and recording a video-recorded oral presentation on the chosen public health problem, findings, ethical principles, and recommendations from their group's epidemiologic report. Every student is expected to contribute substantively to the presentation. Students will provide feedback on their group members, and on other group's presentations.
5. Communicate epidemiologic concepts and finding orally and in writing in accordance with professional standards to professional audiences, policy makers, and the public.	CPH 626 - Health Information & Surveillance for Public Health Practice	*Project Presentation: As part of the surveillance system project, students will develop and present a PowerPoint presentation on their improved surveillance system proposal.
	CPH 621 - Applied Epidemiology	CPH 621: Presentation: Students will record an oral video presentation showcasing their integration of course competencies. They will synthesize and justify the analytic methods they used during the course, present findings, and make conclusions and recommendations for future research.
	CPH 746 - Epidemiology in Public Health Practice	CPH 746: Knowledge Transfer Prototype: Each student will individually create a knowledge transfer prototype specifically targeted as a discrete audience and describe the deployment of their chosen product. The student should demonstrate their ability to effectively communicate information about public health problems.

2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the school must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

Not applicable. The College does not allow students to tailor their competencies.

3) Provide supporting documentation for each assessment activity listed in Template D4-1. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

This documentation can be found in the ERF at ERF->D->D4. Each concentration has its own folder within D4.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH program and its applicable competencies are developed by faculty experts and offers students diverse opportunities that align with their public health interests. Since the last self-study, all MPH syllabi have been audited to ensure the applicable competencies are appropriately mapped to courses learning objectives. Despite its infancy, our DrPH program now has three different concentrations that recruit highly trained public health professionals from around the world. All DrPH competencies are designed around the concepts of public health practice and implementation. The DrPH core curriculum was updated in 2023 to incorporate lessons learned from COVID response. We continue to work on incorporating the best available evidence-based practices in research and public health practice into each MPH and DrPH concentration.

Weaknesses & Plans for Improvement: An area of improvement for both the MPH and DrPH degrees is that we are developing robust steering committees to help guide and inform each degree and their associated concentrations. An MPH Steering Committee was established in 2020, but ceased meeting starting in 2022 because of staffing capacity. It was re-established in fall 2024.

The faculty are currently working on updating and revising curriculum for the DrPH Epidemiology and Emergency Preparedness concentrations based on student feedback. These processes will include a backward design approach that includes external partner feedback. These curricular revisions will be completed over the 24-25 academic year with a goal of implementation in 2025-2026 academic year.

D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The school assesses each student's competency attainment in practical and applied settings through a portfolio approach, which reviews practical, applied work products that were produced for the site's use and benefit. Review of the student's performance in the APE must be based on at least two practical, non-academic work products AND on validating that the work products demonstrate the student's attainment of the designated competencies.

Examples of suitable work products include project plans, grant proposals, training manuals or lesson plans, surveys, memos, videos, podcasts, presentations, spreadsheets, websites, photos (with accompanying explanatory text), or other digital artifacts of learning. Reflection papers, contact hour logs, scholarly papers prepared to allow faculty to assess the experience, poster presentations, and other documents required for academic purposes may not be counted toward the minimum of two work products.

1) Briefly describe how the school identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.

The APEx is supervised and supported by the Director of Master's Programs and an Applied Practice Manager.

During the APEx planning phase, each student is required to assess and summarize the scope of the APEx partnership in an APEx Learning Contract (APEx LC). This LC template is housed on our public-facing website, easily accessible to students and preceptors. The LC provides step-by-step instructions, important considerations, and questions to prompt thoughtful discussion between students and their preceptors when planning the scope of the APEx. After its completion, this document acts as the roadmap for partnership for each student and their respective APEx. Within the APEx LC, students document the following;

- at least 5 activities that cumulatively contribute 100 hours of practical engagement,
- two tangible products that respond to the organization's priorities, and
- self-selection of 5 foundational public health competencies, naming and describing the specific activity/application that will integrate the competency.

Affiliation agreements are required legal agreements between the COPH and all partner organizations students are engaging with to receive academic credit. They are the mechanism that allows students to receive credit that counts towards their degree while engaging in applied public health work outside an academic setting.

The APEx faculty and staff review the competency and activity/application selection and approve it in partnership with the APEx partner organization. Nearing the conclusion of the APEx partnership, the student completes a critical reflection assessment of each competency, and then the partner organization's preceptor and the APEx faculty assess the competency attainment level, also taking into consideration the APEx product deliverables. The tool used for competency assessment may be found in the APEx LC and is documented in the ERF.

To ensure the goals of educational attainment and mutual benefit remain priorities throughout the partnership, there is a revision process to the APEx LC, when applicable. The policy, which is shared at

the beginning and throughout the implementation of the APEx partnership, requires that if there are changes in the scope of partnership, the products, or competency application, a request with justification must be shared with the APEx faculty and staff. Upon review and discussion, track changes are requested, and approval from the partner organization and APEx faculty is obtained. This ensures that activities and the scope of partnership are flexible, mutually beneficial, and stay in alignment with competency attainment.

2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

This documentation can be found in the ERF at ERF->D->D5

3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree schools, if applicable. The school must provide samples of complete sets of materials (ie, Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the school has not produced five students for which complete samples are available, note this and provide all available samples.

Please refer to the ERF for documentation of each concentration's examples; including, an APEx Learning Contract and two product/deliverables, as well as template D5-1. Materials can be found at:

- ERF->D->D5->Biostatistics
- ERF->D->D5->Emergency Preparedness
- ERF->D->D5->Environmental and Occupational Health
- ERF->D->D5->Epidemiology
- ERF->D->D5->Health Promotion
- ERF->D->D5->Maternal and Child Health
- ERF->D->D5->Public Health Administration and Policy

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
The APEx faculty and staff are committed to continuous quality improvement with the administration of the APEx course. Ongoing assessment, enhancement of successful infrastructure, or implementation of innovative approaches has helped our program respond to student needs and those of our partners. In response to student feedback to address challenges in the APEx planning phase, we developed an APEx Coaching Video series and began hosting group-based APEx Learning Contract Review meetings. In response to preceptor/partner organization feedback, we have created a Preceptor of the Year Award and have been collaboratively working toward the goal of offering library services access to select preceptors/partner organizations. Seeking feedback from students and partner organizations has been a critical investment to advance the APEx.

The APEx is supported through supplementary materials, including a one-pager document, orientation, and professional modules. These are designed to act as a resource for students and partners in the APEx planning phase (prior to the official partnership kickoff and course registration). These resources are disseminated to the students at specific progression checkpoints during the planning phase.

Along with supplemental materials, a strength of the APEx is the individualized, one-on-one, and group-based support offered to all prospective APEx students during their APEx planning phase. Also, through

outreach, networking, and relationship building, the APEx staff and faculty have developed partnerships and student experiences from a diverse range of traditional and non-traditional public health partners, such as nonprofits, governmental entities, university-affiliated settings, private businesses and industries, among others.

Weaknesses and Plans for Improvement:

Recruitment of partner organizations/preceptors from a workforce that has continued to be stretched thin can be challenging. Additionally, recruitment of partners from private industry has presented some challenges as the natural recruitment network has had fewer partnerships in that sector.

There are several strategies identified to address this challenge. To increase student exposure to governmental public health partners, the Nebraska Department of Health and Human Services contracted with our Office of Public Health Practice to offer a stipend to 30 UNMC public health students between 2022-2024, whose work was impacting local public health practice. As part of this partnership, more dialogue was generated, and new preceptors within the state health department emerged. Another strategy for improvement has been the development of a Preceptor Toolkit for Success. This toolkit was designed to help offer more support and resources to the preceptor, which can ease the perceived burden of engaging in an APEx Partnership. One module in this toolkit is focused on communication - facilitating dialogue with the student, effective strategies and approaches for delivering feedback, and examples for framing feedback.

D6. DrPH Applied Practice Experience (if applicable)

The work product may be a single project or a set of related projects that demonstrate a depth of competence. It may be completed as a discrete experience (such as a practicum or internship) or integrated into school coursework. In either case, the deliverable must contain a reflective component that includes the student's expression of personal and/or professional reactions to the applied practice experience. This may take the form of a journal or other written product, a professional portfolio, or another deliverable as appropriate for the school.

The school identifies a minimum of five foundational and/or concentration-specific competencies (as defined in Criteria D3 and D4) that are reinforced and/or assessed through application. The school may either choose at least one competency from the leadership, management, and governance domain in Criterion D3 or choose a concentration-specific competency identified in Criterion D4 if it relates to leadership skills. Competencies may differ from student to student.

1) Briefly describe how the school identifies competencies attained in applied practice experiences for each DrPH student, including a description of any relevant policies.

All DrPH students are required to complete six credit hours of practicum, with at least 300 hours of experience. Most students complete these over two semesters, with three credit hours (150 hours of experience) per semester. Students work with their faculty mentor and the Director of DrPH Program to identify an appropriate site for their practicum experience. They must choose a project that demonstrates leadership.

Students must integrate at least six foundational public health competencies into their practicum experience(s), including at least three leadership-related competencies from the Leadership, Management, and Governance domain. Before registering for practicum experience, students complete a learning contract approved by their preceptor and by the DDP. The learning contract includes information on their proposed practicum experience, including a description of the organization, description of the project and product(s), how the project will advance public health practice and the student's leadership skills, and a list of activities. The students also must list the six competencies and describe how they will be addressed in their experience.

Affiliation agreements are required legal agreements between the COPH and all partner organizations students are engaging with to receive academic credit. They are the mechanism that allows students to receive credit that counts towards their degree while engaging in applied public health work outside an academic setting.

At the end of their practicum experience, students submit their final product(s) and reflect on the alignment of their product with the demonstration of competencies. The preceptor evaluates the student's demonstration and reflection of competencies. The DDP also assesses the reflection. Lastly, students present a 15 minute live virtual presentation of their project, product, and competencies to faculty and DrPH students.

2) Explain, with references to specific deliverables or other requirements, the manner through which the school ensures that the applied practice experience requires students to demonstrate leadership competencies.

The process for registering for DrPH practicum first requires students to complete a learning contract which describes the project and how they will address at least three leadership competencies. The learning contract is reviewed by the preceptor and the DDP. Students must receive a permission code to register for practicum, and they do not receive this code until the learning contract is complete.

3) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

This documentation can be found in the ERF at ERF->D->D6.

4) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The school must provide samples of complete sets of materials (ie, Template D6-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the school has not produced five students for which complete samples are available, note this and provide all available samples.

Please refer to the ERF for documentation of each concentration's examples; including, project deliverable(s), and reflection components, as well as template D6-1. Materials can be found at:

- ERF->D->D6->Emergency Preparedness
- ERF->D->D6->Epidemiology

As the DrPH Advocacy and Leadership concentration's first students matriculated in the fall 2024 semester, no students have yet completed their practicum.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The DrPH applied practice experience (practicum) is an opportunity for students to directly impact the health of the public through a diverse range of activities and deliverables. Due to the asynchronous nature of our program, students from around the world participate in a wide range of experiences that directly benefit partner organizations and the populations they serve. An added benefit for our students is that they can complete their applied practice experiences at their place of employment; however, these activities must be outside their day-to-day work duties. In contrast to the MPH applied practice experience, DrPH students must select and apply six foundational competencies, selecting three from the leadership, management, and governance domain. The selection of competencies from this domain ensures our DrPH students are engaging in advanced leadership and policy-related issues.

Weaknesses & Plans for Improvement: As more students matriculate through the Practicum experience, evaluation data will be available to indicate any need for change.

D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals; demonstrating synthesis and integration requires more than one foundational and one concentration competency.

Professional certification exams (e.g., CPH, CHES/MCHES, REHS, RHIA) may serve as an element of the ILE, but are not in and of themselves sufficient to satisfy this criterion.

The school identifies assessment methods that ensure that at least one faculty member reviews each student's performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies. Faculty assessment may be supplemented with assessments from other qualified individuals (e.g., preceptors).

1) List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the school to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

All MPH students (including those in combined degree programs) must complete a Capstone/Integrative Learning Experience at the end of their degree program. Biostatistics and Epidemiology MPH students can complete a capstone course option, which is structured more like a typical course, with assignments and deadlines. All other concentrations complete an independent project under the direction of a three-member committee, of which the chair is a faculty member from the student's concentration. All concentrations must produce a written product and complete an oral presentation. All students must identify and demonstrate mastery of two foundational competencies and two concentration competencies.

MPH Integrative Learning Experience for MPH in Biostatistics Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. Biostatistics MPH students typically complete a data analysis with a report or a research project. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and approval form to Canvas. After students successfully complete the final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final

	paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.
CPH 529 Capstone Course for Biostatistics	This option is a course-based capstone in which students complete a replication study under the direction of one or more Biostatistics faculty. All components of the project are completed during the academic semester. Students send their plan of study to the Director of Master's Program for a permission code to register for CPH 529 Capstone Course for Biostatistics (three credit hours). Once enrolled, students must select a paper from a curated list to replicate. They develop a 4–10 page replication plan and identify two foundational competencies and two concentration competencies to be addressed by their project. Students meet regularly with the instructor while completing their project. Once complete, they schedule the oral presentation, which is open to all COPH faculty, staff, and students. After students successfully complete the oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The instructor also assesses the student's mastery of competencies using the same form. Once students receive approval from their instructor, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Emergency Preparedness Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. Emergency Preparedness MPH students typically complete a policy analysis, program evaluation, or program plan. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete the final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies

	in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Environmental and Occupational Health (EOH) Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. EOH MPH students typically complete a data analysis with report, research report, or program plan. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete the final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Epidemiology Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. Epidemiology MPH students typically complete a data analysis with a report or a research project. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's

	Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete the final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.
CPH 529 Capstone Course for Epidemiology	This option is a course-based capstone in which students complete a data analysis and report using an assigned dataset under the direction of one or more Epidemiology faculty. All components of the project are completed during the academic semester. Students send their plan of study to the Director of Master's Program for a permission code to register for CPH 529 Capstone Course for Epidemiology (three credit hours). Once enrolled, students must select a research question that the assigned data set could answer and identify two foundational competencies and two concentration competencies to be addressed by their project. Students meet regularly with the instructors while completing their project. There are weekly or bi-weekly deadlines for each component of the project. In addition, live sessions are held weekly to provide students the opportunity to ask questions. Once the project is complete, students schedule the oral presentation, which is open to all COPH faculty, staff, and students. After students successfully complete the final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The instructor also assesses the student's mastery of competencies using the same form. Once students receive approval from their instructor, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Health Promotion Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. Health Promotion MPH students typically complete a policy analysis, program evaluation, comprehensive literature review, or program plan.

	Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete their final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Maternal and Child Health Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. Maternal and Child Health MPH students typically complete a policy analysis, program evaluation, comprehensive literature review, or program plan. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete their final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

MPH Integrative Learning Experience for MPH in Public Health Administration and Policy (PHAP) Concentration	
Integrative learning experience (list all options)	**How competencies are synthesized**
CPH 529 Capstone Experience	This option is an independent project which requires students to work under the direction of a three-member committee to produce a written product. PHAP MPH students typically complete a policy analysis or comprehensive literature review. Once students identify a committee, they complete a capstone proposal paper, including the identification of two foundational competencies and two concentration competencies to be addressed by their project, and send it to their committee for review. Once the committee approves, students obtain signatures on the proposal approval form and send to the Director of Master's Program for a permission code to register for CPH 529 Capstone Experience (three credit hours). Once enrolled, students submit their proposal paper and form to Canvas. After students successfully complete their final paper and oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form. Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

2) Briefly summarize the process, expectations, and assessment for each integrative learning experience.

MPH students are initially introduced to Capstone during the MPH orientation held at the beginning of each semester in which students are admitted. During this orientation, they receive very general information about Capstone, including what it is, why it's important, when to get started, and who to contact with questions. A separate Capstone information session is held each semester by the Director of Master's Program. This presentation contains significantly more information to prepare students to start their projects. Students are encouraged to talk with their faculty mentor about project ideas.

In 2022, the Academic Affairs team recognized that students were struggling to complete their proposal paper, which is a requirement before enrollment in CPH 529 Capstone for students who are completing the option with the three-member committee. The Academic Affairs team developed a Canvas site with resources to guide students in developing their proposal. The Director of Master's Program oversees the site, updates content, and answers questions in the Discussion Boards. Faculty members also have access to the site, so they can help mentor their students on preparing a capstone proposal.

For the three-member committee option, students often spend their second-to-last semester of the program preparing their proposal. Their capstone committee oversees this work. Once the proposal is complete and approved by the committee, the student enrolls in CPH 529 Capstone Experience. Students then work on their capstone project.

Students meet regularly with their capstone chair while completing their project. After their paper is complete, it must be approved by their committee. At that point, they can schedule the oral presentation,

which is open to all COPH faculty, staff, and students. After students successfully complete the oral presentation, the student completes a competency assessment form. They must self-assess how they synthesized competencies in their project. The committee also assesses the student's mastery of competencies using the same form.

Faculty use a rubric to assess if the student passed their capstone project. The rubric assesses sections of the paper, outcomes/results, quality of writing, synthesis of competencies, significance/scope of the project, oral presentation, and professionalism.

Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral presentation, competency assessment form, and final approval form into Canvas.

3) Provide documentation, including syllabi and/or handbooks, that communicates integrative learning experience policies and procedures to students.

Documentation can be found in the ERF at:

- ERF->D->D7->CPH 529 Capstone Experience
- ERF->D->D7->CPH 529 Capstone Course for BIOS
- ERF->D->D7->CPH 529 Capstone Course for EPI

4) Provide documentation, including rubrics or guidelines, that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.

Documentation can be found in the ERF at:

- ERF->D->D7->CPH 529 Capstone Experience
- ERF->D->D7->CPH 529 Capstone Course for BIOS
- ERF->D->D7->CPH 529 Capstone Course for EPI

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The school must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

Samples of deliverables can be found, organized by concentration, in the ERF at ERF->D->D7->Student Samples

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MPH Integrative Learning Experience is a strength of the college as students work closely with trained faculty in their respective concentrations to develop a comprehensive project that aims to advance public health knowledge and practice. In Summer 2023, we changed the requirement for the MPH Integrative Learning Experience to meet one additional concentration-specific competency. This change has allowed for more robust final products related to a student's specific concentration.

Weaknesses & Plans for Improvement: Based on feedback from students and faculty that rigorous project identification was a challenge for some concentrations, we have explored new options for our Integrative Learning Experience. In Fall 2023, we piloted our new Epidemiology and Biostatistics Integrative Learning courses that guide students through developing a scientific product that may be submitted for publication. Through course surveys, we learned that students overwhelmingly rated their experiences in our new integrative learning course options as positive and worthy of their time. Most students said they

would recommend this course option to future students. Moreover, one student was able to get her Epidemiology Capstone paper published to a peer-reviewed journal. The college is working with each department to assess their willingness to develop integrative learning experiences for each concentration

D8. DrPH Integrative Learning Experience

As part of an integrative learning experience, DrPH candidates generate field-based products consistent with advanced practice designed to influence schools, policies or systems addressing public health. The products demonstrate synthesis of foundational and concentration-specific competencies.

The integrative learning experience is completed at or near the end of the school of study. It may take many forms consistent with advanced, doctoral-level studies and university policies but must require, at a minimum, production of a high-quality written product.

1) List, in the format of Template D8-1, the integrative learning experience for each DrPH concentration or generalist degree. The template also requires the school to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

DrPH Integrative Learning Experience	
Integrative learning experience (list all options)	**How competencies are synthesized**
Dissertation concentration: Epidemiology	Through independent work under the guidance of their Doctoral Dissertation Committee, DrPH students will prepare a dissertation demonstrating their ability to analyze and solve a complex, practice-based problem in public health. This dissertation is completed as a student's culminating integrated learning experience. The dissertation project can be completed at a student's worksite as a part of a student's normal job responsibilities. Given the DrPH program is a practice degree, the focus of the dissertation is to understand a current public health organizational, leadership, policy, or programmatic problem and identify a substantive solution that includes strategies to address that problem which are detailed in a "plan for change/implementation." This dissertation should be written through the lens of the student's DrPH concentration. The dissertation is expected to make a substantial contribution to the existing public health practice knowledge base and should inform best practice regardless of specific location or organization. The dissertation should rely on rigorous methodology which includes quantitative, qualitative, or mixed methods. The dissertation must address four foundational DrPH competencies and three concentration competencies. Students in Epidemiology concentration must ensure their practice-based dissertations incorporate rigorous epidemiological methods and often include original quantitative data collection and/or analysis.
Dissertation concentration: Emergency Preparedness	Through independent work under the guidance of their Doctoral Dissertation Committee, DrPH students will prepare a dissertation demonstrating their ability to analyze and solve a complex, practice-based problem in public health. This dissertation is completed as a student's culminating integrated learning experience. The dissertation project can be completed at a

	student's worksite as a part of a student's normal job responsibilities. Given the DrPH program is a practice degree, the focus of the dissertation is to understand a current public health organizational, leadership, policy, or programmatic problem and identify a substantive solution that includes strategies to address that problem which are detailed in a "plan for change/implementation." This dissertation should be written through the lens of the student's DrPH concentration. The dissertation is expected to make a substantial contribution to the existing public health practice knowledge base and should inform best practice regardless of specific location or organization. The dissertation should rely on rigorous methodology which includes quantitative, qualitative, or mixed methods. The dissertation must address four foundational DrPH competencies and three concentration competencies. Students in the Emergency Preparedness concentration often incorporate both quantitative and qualitative methods in their practice-based dissertations through the lens of preparedness, outbreaks, and management of complex disasters.
Dissertation concentration: Advocacy and Leadership	Through independent work under the guidance of their Doctoral Dissertation Committee, DrPH students will prepare a dissertation demonstrating their ability to analyze and solve a complex, practice-based problem in public health. This dissertation is completed as a student's culminating integrated learning experience. The dissertation project can be completed at a student's worksite as a part of a student's normal job responsibilities. Given the DrPH program is a practice degree, the focus of the dissertation is to understand a current public health organizational, leadership, policy, or programmatic problem and identify a substantive solution that includes strategies to address that problem which are detailed in a "plan for change/implementation." This dissertation should be written through the lens of the student's DrPH concentration. The dissertation is expected to make a substantial contribution to the existing public health practice knowledge base and should inform best practice regardless of specific location or organization. The dissertation should rely on rigorous methodology which includes quantitative, qualitative, or mixed methods. The dissertation must address four foundational DrPH competencies and three concentration competencies. To date, no students from the Advocacy and Leadership concentration have begun work on their practice-based dissertations. Nonetheless, students in this concentration will likely incorporate quantitative and qualitative methods emphasizing public health leadership, governance, and policy.

2) Briefly summarize the process, expectations, and assessment for each integrative learning experience.

The DrPH integrative learning experience (ILE) (also referred to as dissertation) is a chapter-based monograph. DrPH students are initially introduced to dissertation during the DrPH orientation held at the beginning of each semester in which students are admitted. During this orientation, they receive very general information about dissertation, including what it is, why it's important, when to get started, and who to contact with questions. A separate dissertation information session is held each semester by the Director of the DrPH Program. This presentation contains significantly more information to prepare students to start their projects. Students are encouraged to talk with their faculty mentor about project ideas.

Given the DrPH program is a practice degree, the focus of the dissertation is to understand a current public health organizational, leadership, policy, or programmatic problem AND identify a substantive solution that includes strategies to address that problem which are detailed in a "plan for change/implementation." This dissertation should be written through the lens of the student's DrPH concentration. The dissertation is expected to make a substantial contribution to the existing public health practice knowledge base and should inform best practice regardless of specific location or organization. The dissertation should rely on rigorous methodology which includes quantitative, qualitative, or mixed methods. Students must also identify four foundational and three concentration-specific competencies to address in their dissertation project.

Students identify a dissertation committee that must include at least one member who works in a practice-based setting. Students meet regularly with their dissertation chair while completing their project. Students first complete a Topic Approval Request (TAR) paper to ensure their chosen topic and proposed methods are appropriate for a practice-based dissertation. Once the dissertation committee has approved the TAR, it is sent to the DrPH Program committee for review. Once the TAR has been fully approved, students develop and submit a completed, formal written dissertation proposal to their committee. The purpose of the written proposal is to develop in greater depth the themes identified in the TAR.

Once the written proposal is approved by the committee, the student must make an oral presentation (with both public and closed components) based on that proposal to their doctoral Dissertation Committee for final approval. Once the dissertation proposal is approved, the student should develop and receive approval for a communications plan and timetable for the Dissertation Committee Members so they may review progress and provide continuous guidance throughout the project phase.

Upon completion of the dissertation project and paper, a formal oral defense occurs. Formal defense of the dissertation includes the student's public seminar presentation of no more than one (1) hour, followed by an oral examination by the dissertation committee that may have both public and closed sessions, and which must be completed within two hours. In their public seminar presentation, students will orally summarize the elements of their project and the practice implications. The public presentation should demonstrate the student's ability to work towards solving complex public health problems by applying public health scholarship and skills.

The Dissertation Committee determines the final oral dissertation defense outcome as:

- Pass, no revisions of the dissertation required.
- Pass, with revisions that must be approved by the Dissertation Chair.
- Pass, with revisions that must be approved by all Dissertation Committee members.
- Fail.

The Dissertation Committee will assess the student's performance during a formal presentation by the student in a public forum, evaluation of the written dissertation product, and through documentation of the student's dissertation experience as assessed by the following means:

- Overall assessment of the dissertation project based on the dissertation rubric.

- The student's mastery of at least seven competencies as demonstrated by the student within the content of the dissertation and measured by DrPH dissertation rubric. This includes three concentration competencies and four foundational competencies.
- Self-reflection of dissertation experience as measured by the DrPH Dissertation Rubric.

Once students receive approval from their committee, they route a final approval form for signature. Then, they submit their final paper, slides from oral defense, competency assessment form, and final approval form into Canvas.

3) Provide documentation, including syllabi and/or handbooks, that communicates integrative learning experience policies and procedures to students.

This documentation can be found in the ERF at ERF->D->D8

4) Provide documentation, including rubrics or guidelines, that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.

This documentation can be found in the ERF at ERF->D->D8

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations. The school must provide at least 10% of the number produced in the last three years or five examples, whichever is greater. If the school does not have five recent samples for an option, note this and provide all available samples.

Samples of all deliverables associated with the integrative learning experiences can be found, separated by concentration, withing the ERF at ERF->D->D8->Student Samples.

As no DrPH students have yet completed the Advocacy and Leadership concentration integrative learning experience, there are no samples from this concentration

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Due to the size of the DrPH program, the College of Public Health is uniquely positioned to provide our DrPH students with trained faculty that match their concentration and research interests. Moreover, all DrPH students are required to identify a practice partner relevant to their projects that can serve on their dissertation committee. As the DrPH program continues to grow, the college will work to recruit and retain faculty with DrPH and practice experience. Additionally, the college is working to establish a mentor network to provide each DrPH student with a practice-based mentor who can help guide students through their practice-based dissertations.

Weaknesses and Plans for Improvement: Following the graduation of the first four DrPH students, the DPD plans to convene a focus group of the dissertation committee members of those students (Fall 2024). This focus group will give overall feedback on the process, as well as identify opportunities for improvement through the orientation and dissertation launch processes, including an orientation for dissertation committee members, clear guidance to differentiate PhD and DrPH dissertation products, and instructional guidelines for students (for example, clarifying formatting rules).

D9. Public Health Bachelor's Degree Foundational Domains
Not Applicable

D10. Public Health Bachelor's Degree Foundational Competencies
Not Applicable

D11. Public Health Bachelor's Degree Cumulative and Experiential Activities
Not Applicable

D12. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences
Not Applicable

D13. MPH Program Length

An MPH degree requires at least 42 semester-credits, 56 quarter-credits or the equivalent for completion.

Schools use university definitions for credit hours.

1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

The MPH program is a minimum of 42 credit hours for all concentration options. Students in combined degree programs add credit hours (range of 6 to 15, depending on program) from their other degree program to the MPH for a total of 42 credit hours. Credit hours transferred from other degree programs in the combined degrees have been approved by the College Curriculum Committee.

2) Define a credit with regard to classroom/contact hours.

The College follows the university policy on credit-hour requirements. One credit hour is equivalent to one hour (50 minutes minimum) of lecture and two (2) hours of out-of-class work each week. For all standard 15-week semesters of instruction, and for non-standard (condensed) and online courses the following contact times (minimums) are assigned for every one (1) credit hour based upon the specific type of learning activity:

- Lecture: A course that disseminates cognitive knowledge (may be an oral presentation or other type of presentation). Is synchronous learning, even if students are at multiple locations; 1 hour of contact time and 2 hours of out-of-class work for each week of instruction
- Research/Field Work: Used for dissertation, capstone, thesis, or research other than thesis; 2-4 hours of contact time for each week of instruction
- Other Education Methods: (Simulation, Directed Studies, Independent Study, Practicum, Seminar, Exam): 3 hours of contact time (Exam time can be considered part of contact time if an instructor chooses to count time spent on assessment as part of contact time)
- Online or Distance Learning: All course activity is done online; there is no required face-to-face sessions within the course and no requirements for on-campus activity. Activities can be synchronous or asynchronous. Three (3) hours of student work for each week. Student work includes reading, research, online discussion, and instruction, and assigned group activities, preparation of papers or presentations. (Exception: Courses requiring only one in-person practicum, with all other work completed online)

The Curriculum Committee of each College approves the number of credit hours for all courses, regardless of mode of delivery. The determination/assignment of credit hours should reflect the educational content of the course and the time required for a typical student to achieve the College's desired outcomes.

D14. DrPH Program Length

The DrPH degree requires a minimum of 36 semester-credits, 48 quarter-credits of post-master's coursework or its equivalent. Credits associated with the integrative learning experience and, if applicable, a residency, internship or other applied practice experience conducted outside of a didactic course, do not count toward this requirement. The minimum credit requirement also does not count MPH-level prerequisite courses or their equivalent.

Schools use university definitions for credit hours.

1) Provide information about the minimum credit-hour requirements for all DrPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

The DrPH program is 54 credit hours for all concentration options, 42 credit hours not including the integrative learning experience or applied practice experience. Students must have completed a master's degree prior to admittance to the DrPH program. If students do not have a master's degree from a CEPH-accredited institution, they must enroll in CPH 500 Foundations of Public Health to obtain the Foundational Learning Objectives. The three credit hours for this course are in addition to the 54 credit hours of the DrPH program. Additionally, if students have not completed the required prerequisite courses for their program of study, the completion of these courses is not counted toward their credit hours for the DrPH program.

2) Define a credit with regard to classroom/contact hours.

The College follows the university policy on credit-hour requirements. One credit hour is equivalent to one hour (50 minutes minimum) of lecture and two (2) hours of out-of-class work each week. For all standard 15-week semesters of instruction, and for non-standard (condensed) and online courses the following contact times (minimums) are assigned for every one (1) credit hour based upon the specific type of learning activity:

- Lecture: A course that disseminates cognitive knowledge (may be an oral presentation or other type of presentation). Is synchronous learning, even if students are at multiple locations; 1 hour of contact time and 2 hours of out-of-class work for each week of instruction
- Research/Field Work: Used for dissertation, capstone, thesis, or research other than thesis; 2-4 hours of contact time for each week of instruction
- Other Education Methods: (Simulation, Directed Studies, Independent Study, Practicum, Seminar, Exam): 3 hours of contact time (Exam time can be considered part of contact time if an instructor chooses to count time spent on assessment as part of contact time)
- Online or Distance Learning: All course activity is done online; there is no required face-to-face sessions within the course and no requirements for on-campus activity. Activities can be synchronous or asynchronous. Three (3) hours of student work for each week. Student work includes reading, research, online discussion, and instruction, and assigned group activities, preparation of papers or presentations. (Exception: Courses requiring only one in-person practicum, with all other work completed online)

The Curriculum Committee of each College approves the number of credit hours for all courses, regardless of mode of delivery. The determination/assignment of credit hours should reflect the educational content of the course and the time required for a typical student to achieve the College's desired outcomes.

D15. Bachelor's Degree Program Length
Not Applicable

D16. Academic and Highly Specialized Public Health Master's Degrees

Students enrolled in the unit of accreditation's academic and highly specialized public health master's degrees (e.g., MS in biostatistics, MS in industrial hygiene, MS in data analytics, etc.) complete a curriculum that is based on defined competencies; produce an appropriately rigorous discovery-based paper or project at or near the end of the program of study; and engage in research at a level appropriate to the degree program's objectives.

These students also complete coursework and other experiences, outside of the major paper or project, that substantively address scientific and analytic approaches to discovery and/or translation of public health knowledge.

Finally, students complete coursework that provides instruction in the foundational public health knowledge at an appropriate level of complexity. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

The school identifies at least one required assessment activity for each of the foundational public health learning objectives.

The school validates academic public health master's students' foundational public health knowledge through appropriate methods.

1) List the curricular requirements for each relevant degree in the unit of accreditation.

Requirements for MS degree, Biostatistics		
Course Number	Course Name	Credit Hours
Core courses (9 courses, 27 credit hours)		
BIOS 801	Biostatistics Theory I	3
BIOS 802	Biostatistics Theory 2	3
BIOS 810	Introduction to SAS Programming	3
BIOS 815	Biostatistical Computing	3
BIOS 818	Biostatistical Linear Models: Methods and Applications	3
BIOS 823	Categorical Data Analysis	3
BIOS 824	Survival Data Analysis	3
BIOS 829	Introduction to Biostatistical Machine Learning	3
HPRO 830	Foundations of Public Health	3
Non-Thesis Electives (9 credit hours – at least 6 credit hours in Biostatistics)		
BIOS 825	Correlated Data Analysis	3
BIOS 835	Design of Medical Health Studies	3
EPI 820	Epidemiology in Public Health	3
EPI 845	Epidemiologic Methods I	3
EPI 945	Analytical Epidemiologic Methods	3
Thesis Electives (6 credit hours – at least 3 credit hours in Biostatistics)		
BIOS 825	Correlated Data Analysis	3

BIOS 835	Design of Medical Health Studies	3
EPI 820	Epidemiology in Public Health	3
EPI 945	Analytical Epidemiologic Methods	3
Required for Thesis Track (in addition to 6 elective credit hours)		
BIOS 899	Master's Thesis	3
	TOTAL CREDIT HOURS	36

2) Provide a matrix, in the format of Template D16-1, that indicates the assessment activity for each of the foundational public health learning objectives listed above (1-12). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical.

Content Coverage for Academic Public Health Master's Degree (SPH and PHP, if applicable)

Content	Course number(s) and name(s)	Describe specific assessment opportunity[n]
1. Explain public health history, philosophy, and values	CPH 500/HPRO 830 - Foundations of Public Health	What is Public Health? Video & Discussion Board Quiz
2. Identify the core functions of public health and the 10 Essential Services*	CPH 500/HPRO 830 - Foundations of Public Health	Quiz
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program, with attention to disparities among populations, e.g., socioeconomic, ethnic, gender, racial, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Current Student Presentation Discussion Board
6. Explain the critical importance of evidence in advancing public health knowledge	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
7. Explain effects of environmental factors on a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
8. Explain biological and genetic factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Public Health in the News Report
9. Explain behavioral and psychological factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board

10. Explain the cultural, social, political, and economic determinants of health and how the determinants relate to population health and health inequities	CPH 500/HPRO 830 - Foundations of Public Health	SDOH/Dr. Iton Discussion Board Quiz
11. Explain how globalization affects global burdens of disease	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Sustainable Development Goals Discussion Board
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Discussion Board

3) Provide supporting documentation for each assessment activity listed in Template D16-1. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

This documentation can be found in the ERF at ERF->D->D1->CPH 500 Syllabus

4) Provide a matrix, in the format of Template D16-2, that lists competencies for each relevant degree and concentration. The matrix indicates how each competency is covered in the curriculum. Typically, the school will present a separate matrix for each concentration. Note: these competencies are defined by the school and are distinct from the foundational public health learning objectives defined in this criterion.

Competencies for Academic Master's Degrees in Public Health (Biostatistics concentration)	
Competency	**Describe how this competency is covered[n]**
1. Demonstrate knowledge and skills necessary to conduct biostatistical research.	BIOS 801 - Biostatistics Theory I BIOS 802 - Biostatistics Theory II BIOS 810 - Introduction to SAS Programming BIOS 815 - Biostatistical Computing BIOS 829 - Introduction to Biostatistical Machine Learning
2. Think critically and creatively to solve problems in biostatistics.	BIOS 801 - Biostatistics Theory I BIOS 802 - Biostatistics Theory II BIOS 810 - Introduction to SAS Programming BIOS 815 - Biostatistical Computing BIOS 818 - Biostatistical Methods II BIOS 824 - Survival Data Analysis BIOS 829 - Introduction to Biostatistical Machine Learning
3. Effectively communicate biostatistical results.	BIOS 818 - Biostatistical Methods II BIOS 823 - Categorical Data Analysis BIOS 824 - Survival Data Analysis BIOS 829 - Introduction to Biostatistical Machine Learning

4. Apply appropriate statistical methods for estimation and inference, using a software package for data management, statistical analyses, and data presentation.	BIOS 810 - Introduction to SAS Programming BIOS 815 - Biostatistical Computing BIOS 818 - Biostatistical Methods II BIOS 823 - Categorical Data Analysis BIOS 824 - Survival Data Analysis
5. Apply statistical methods for quality control and data cleaning to already collected data, verify assumptions of statistical test and models, and implement appropriate methods to address any issues discovered.	BIOS 810 - Introduction to SAS Programming BIOS 815 - Biostatistical Computing BIOS 818 - Biostatistical Methods II BIOS 823 - Categorical Data Analysis BIOS 824 - Survival Data Analysis
6. Evaluate the strengths and limitations for study design and statistical analyses of public health and biomedical studies.	BIOS 818 - Biostatistical Methods II BIOS 823 - Categorical Data Analysis BIOS 824 - Survival Data Analysis

5) Provide supporting documentation that clearly identifies how the school ensures that students complete a curriculum based on defined competencies. Documentation may include detailed course schedules or outlines to selected modules from the learning management system that identify the relevant assigned readings, lecture topics, class activities, etc.)

Documentation for this can be found in the ERF at ERF->D->D16.

6) Briefly explain how the school ensures that the instruction and assessment in basic public health knowledge is generally equivalent to the instruction and assessment typically associated with a three-semester-credit course.

The College requires all students to complete CPH 500/HPRO 830 Foundations of Public Health. All foundational learning objectives are mapped to this course, so it ensures students are receiving instruction in basic public health knowledge. The course is three credit hours.

7) Identify required coursework and other experiences that address the variety of public health research methods employed in the context of a population health framework to foster discovery and/or translation of public health knowledge and a brief narrative that explains how the instruction and assessment is equivalent to that typically associated with a three-semester-credit course.

   Typically, the school will present a separate list and explanation for each degree program, but these may be combined if requirements are identical.

The MS in Biostatistics curriculum includes 15 credit hours of core courses in principles and theories of biostatistics from a population health framework. Each course includes rigorous assessments which provide students the ability to demonstrate mastery of content.

Requirements for MS degree, Biostatistics		
BIOS 801	Biostatistics Theory I	3
BIOS 802	Biostatistics Theory 2	3
BIOS 818	Biostatistical Linear Models: Methods and Applications	3
BIOS 823	Categorical Data Analysis	3

BIOS 824	Survival Data Analysis	3

8) Briefly summarize policies and procedures relating to production and assessment of the final research project or paper.

Students pursuing a master's degree in biostatistics have the option of completing the thesis or non-thesis track. Students on the thesis track must complete either a traditional thesis or a publication-quality manuscript. Following completion of their core course work and in the semester prior to completing the thesis, students are encouraged to enroll in Research other than Thesis hours with their thesis advisor. During Research other than Thesis hours, the student forms their advisory committee (consisting of at least 3 graduate faculty) and prepares their research proposal. The following semester, students register for master's thesis hours to complete the necessary research and prepare the thesis. The thesis is then presented in a public forum via seminar/oral defense. After which, in a private oral Q&A session, the committee determines whether the thesis is of appropriate rigor and quality for the awarding of a master's degree.

Students on the non-thesis track complete a comprehensive exam that covers theory and application of Biostatistics. The exam is graded on a 100-point scale and an 80% is required to pass.

9) Provide links to handbooks or webpages that contain the full list of policies and procedures governing production and assessment of the final research project or paper for each degree program.

This documentation can be found in the ERF at ERF->D->D16

10) Include completed, graded samples of deliverables associated with the major paper or project. The school must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

This documentation can be found in the ERF at ERF->D->D16->Student Samples

11) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The core of the program is strong with a basis in likelihood and inferential statistics theory and computing/machine learning. Students are also exposed to study design and traditional statistical methods. This is excellent preparation for those who want to enter the workforce or a PhD program.

Weaknesses: There is a growing need identified to address informatics in the program, including database design and query. To address this need, a new faculty member with a PhD in biomedical informatics was recently hired who will design and teach a course in informatics.

D17. Academic Public Health Doctoral Degrees

Students enrolled in the unit of accreditation's doctoral degree programs that are designed to prepare public health researchers and scholars (e.g., PhD, ScD) complete a curriculum that is based on defined competencies; engage in research appropriate to the degree program; and produce an appropriately advanced research project at or near the end of the program of study.

These students also complete coursework and other experiences, outside of the major paper or project, that substantively address scientific and analytic approaches to discovery and translation of public health knowledge.

These students complete doctoral-level, advanced coursework and other experiences that distinguish the school of study from a master's degree in the same field.

The school defines appropriate policies for advancement to candidacy, within the context of the institution.

Finally, students complete coursework that provides instruction in the foundational public health knowledge at an appropriate level of complexity. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

The school identifies at least one required assessment activity for each of the foundational public health learning objectives.

The school validates academic doctoral students' foundational public health knowledge through appropriate methods.

1) List the curricular requirements for each non-DrPH public health doctoral degree in the unit of accreditation, EXCLUDING requirements associated with the final research project. The list must indicate (using shading) each required curricular element that a) is designed expressly for doctoral, rather than master's students or b) would not typically be associated with completion of a master's degree in the same area of study.

   The school may present accompanying narrative to provide context and information that aids reviewers' understanding of the ways in which doctoral study is distinguished from master's-level study. This narrative is especially important for institutions that do not formally distinguish master's-level courses from doctoral-level courses.

   The school will present a separate list for each degree program and concentration as appropriate.

All courses that were designed expressly for doctoral students are shaded in dark gray. Masters students are often allowed to enroll in the courses, with instructor permission and having met pre-requisites, but the courses are designed for the doctoral program.

Department of Biostatistics **Doctor of Philosophy in Biostatistics**		
Biostatistics Core (6 courses/18 credits)		**Credit Hours**
BIOS 901	Advanced Biostatistics Theory I	3
BIOS 902	Advanced Biostatistics Theory II	3

BIOS 918	Biostatistical Linear Models: Theory and Applications	3
BIOS 924	Biostatistical Theory and Models Survival Data	3
BIOS 925	Theory Of General Linear and Mixed Models In Biostatistics	3
BIOS 941	Biostatistical Consultant Application and Practice	3
Health Care Core (1 course/3 credits)		**3**
HPRO 830	Foundations of Public Health Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution	3
Electives (minimum of 18 credits)		
Cognate Field Courses (minimum of 6 credits)		**6**
	Total Credit Hours Excluding Dissertation	**45**
	BIOS 999 Dissertation Credit Hours	**12**
	Total for Degree with Dissertation Hours	**57**

Department of Environmental, Occupational, and Agricultural Health Doctor of Philosophy in Environmental and Occupational Health Track		
Core Courses (34 credit hours)		**Credit Hours**
GRAD 800	Responsible Conduct in Research Training	0
BIOS 808	Biostatistics II	3
ENV 970	Seminar	1
ENV 908	Thermal Stress in The Work Environment	3
ENV 909	Occupational Noise Exposure and Hearing Loss	3
ENV 903	Injury Epidemiology	3
ENV 905	Climate Change and Human Health	3
ENV 904	Environmental, Agricultural, And Occupational Policy	3
EPI 845	Epidemiologic Methods 1	3
ENV 811	Agricultural Health and Safety	3
ENV 996	Directed Readings and Research	1-9
Electives (minimum of 6 courses, 18 credit hours)		

College of Public Health Required Course		
HPRO 830	Foundations of Public Health (Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution.)	3
	Total Credit Hours Excluding Dissertation	**55**
	ENV 999 Dissertation Credit Hours	**9**
	Total for Degree with Dissertation Hours	**64**

Department of Environmental, Occupational, and Agricultural Health **Doctor of Philosophy in Toxicology Track *(no longer accepting students starting fall 2024)***		
Core Courses (34 credit hours)		**Credit Hours**
BIOS 808	Biostatistics II	3
ENV 970	Seminar	1
ENV 914	Chemical Carcinogenesis	3
ENV 950	Advanced Toxicology	3
ENV 904	Environmental, Agricultural, And Occupational Policy	3
ENV 912	Risk Assessment And Toxicology	3
ENV 913	Environmental Pathology	3
IPBS 801	Fundamentals Of Biomolecules	3
ENV 811	Agricultural Health And Safety	3
ENV 996	Directed Readings And Research	1-9
Electives (minimum 6 courses, 18 credit hours)		
GRAD 800	Responsible Conduct In Research Training	0
College of Public Health Required Course		
HPRO 830	Foundations Of Public Health (Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution.)	3
	Total Credit Hours Excluding Dissertation	**55**
	ENV 999 Dissertation Credit Hours	**9**
	Total for Degree with Dissertation Hours	**64**

Department of Environmental, Occupational, and Agricultural Health **Doctor of Philosophy in Environmental. Agricultural, and Occupational Health *(curriculum effective fall 2025)***		
Core Courses (19 credit hours)		
GRAD 800	Responsible Conduct in Research Training*	0
ENV 900	Advanced Exposure Assessment	3
ENV 901	Environmental, Agricultural and Occupational Health Data: Methods and Applications	3
ENV 904	Environmental, Agricultural, and Occupational Policy	3
ENV 906	Grant Writing: Environmental, Agricultural and Occupational Health Perspectives	3
ENV 907	Legal Frameworks: Environmental, Agricultural, and Occupational Health	3
ENV 970	Seminar *(4 credits total taken in 1 cr increments)*	4
Electives (minimum of 9 courses, 27 credit hours; 9 credit hours must be doctoral-level)		**27**
College of Public Health Required Course		
HPRO 830	Foundations of Public Health (Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution.) *	3
	Total Credit Hours Excluding Dissertation	**49**
	ENV 999 Dissertation Credit Hours	**9**
	Total for Degree with Dissertation Hours	**55**

Department of Epidemiology **Doctor of Philosophy in Epidemiology**		
College of Public Health Required Course		**Credit Hours**
HPRO 830	Foundations of Public Health Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution	3
Core Courses (38 credit hours)		

GRAD 800	Responsible Conduct In Research Training	0
EPI 845	Epidemiologic Methods 1	3
EPI 821	Applied Epidemiology	3
EPI 945	Analytical Epidemiologic Methods	3
EPI 946	Epidemiology In Public Health Practice	3
BIOS 818	Biostatistical Linear Models: Methods and Application	3
BIOS 823	Categorical Data Analysis	3
BIOS 824	Survival Data Analysis	3
BIOS 825	Correlated Data Analysis	3
EPI 805	Human Health and Disease in Public Health	3
EPI 960	Education Theory and Application	3
EPI 910	Research Grant Proposal Development	3
EPI 970	SEMINAR (Total 2 Credits; 1 Credit Required Prior To Comprehensive Exam)	1
Selectives – Minimum 6 courses ≥4 at 900 level		
EPI 812	Chronic Disease Epidemiology	3
EPI 822	Host And Pathogen Factors in Public Health	3
EPI 837	Social Epidemiology	3
EPI 835	Health Information and Surveillance for Public Health Practice	3
EPI 810	Emergency Preparedness: Prevention	3
EPI 811	Emergency Preparedness: Protection	3
EPI 813	Emergency Preparedness: Response	3
EPI 814	Emergency Preparedness: Respond And Recovery	3
EPI 952	Mental Health Epidemiology	3
EPI 953	Cancer Epidemiology	3
EPI 955	Environmental Epidemiology	3
EPI 957	Survey Research Methods	3
EPI 958	Epidemiologic Analysis Of Healthcare Data	3
EPI 941	Epidemiologic Methods In Applied Clinical Genetics	3
EPI 924	Infectious Disease Modeling	3

Total Credit Hours Excluding Dissertation	38
EPI 999 Dissertation Credit Hours	15
Total for Degree with Dissertation Hours	54

Department of Health Promotion **Doctor of Philosophy in Health Promotion and Disease Prevention Research *(prior to fall 2025)***		
Core Curriculum (27 credits)		**CREDIT HOURS**
GRAD 800	Responsible Conduct in Research Training	0
HPRO 901	Advanced Theories in Health Promotion & Disease Prevention	3
HPRO 902	Complex Systems Thinking	3
HPRO 915	Foundations Of the CBPR Approach	3
HPRO 916	Implementation Science Models and Methods	3
HPRO 917	Advanced Research Methods In Health Promotion Disease Prevention Study Design	3
HPRO 996	Directed Readings and Research	3
HPRO 970	SEMINAR (3 Semesters)	3
HPRO 925	Scientific Writing for Public Health Research	3
BIOS 808	Biostatistics II	3
Selectives (Minimum 6 Credits)		**6**
HPRO 910	Humanistic Traditions of Qualitative Research	3
HPRO 903	Mixed Methods Research	3
BIOS 835	Design of Medical Health Studies	3
EPI 837	Social Epidemiology	3
Electives (15 credits, 9 must be at 900 [doctoral] level)		**15**
College of Public Health Required Course		
HPRO 830	FOUNDATIONS OF PUBLIC HEALTH (Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution.)	3
	Total Credit Hours Excluding Dissertation	**51**
	HPRO 999 Dissertation Credit Hours	**12**
	Total for Degree with Dissertation Hours	**63**

Department of Health Promotion
Doctor of Philosophy in Health Promotion and Disease Prevention Research *(effective fall 2025)*

Core Curriculum (30 credits)		**CREDIT HOURS**
GRAD 800	Responsible Conduct in Research Training	0
HPRO 901	Systems Thinking For Health Promotion Research	3
HPRO 903	Mixed Methods Research	3
HPRO 908	Knowledge Frameworks: Theory And Application	3
HPRO 910	Humanistic Traditions Of Qualitative Research	3
HPRO 915	Foundations Of The CBPR Approach	3
HPRO 918	Applications Of The CBPR Approach	3
HPRO 917	Advanced Research Methods In Health Promotion Disease Prevention Study Design	3
HPRO 925	Scientific Writing For Public Health Research	3
BIOS 808	Biostatistics II	3
HPRO 970	SEMINAR (3 Semesters, 1 credit each)	3
Electives (18-21 credits)		**18-21**
Minimum 6 courses. At least 9 of these credits must be at the 900 level		
College of Public Health Required Course		
HPRO 830	UNDATIONS OF PUBLIC HEALTH (Required for students o have not completed an MPH or taken a foundational urse at a CEPH-accredited institution.) *	3
	Total Credit Hours Excluding Dissertation	51
	HPRO 999 Dissertation Credit Hours	12
	Total for Degree with Dissertation Hours	63

Department of Health Services and Research Administration
Doctor of Philosophy in Health Promotion and Policy Research

Core Curriculum (30 credits)		**CREDIT HOURS**
GRAD 800	Responsible Conduct In Research Training	0
HSRA 810	U.S. Health Care System: An Overview	3
HSRA 860	Health Economics	3
BIOS 808	Biostatistics II	3

HSRA 920	Quantitative Methods In Health Services Research	3
HSRA 930	Design Of Health Services Research	3
HPRO 910	Humanistic Traditions Of Qualitative Research	3
HSRA 940	Integrated Seminar In Economics And Health Services Research	3
HSRA 960	Seminar In Health Care Administration	3
EPI 957	Survey Research Methods	3
EPI 910	Research Grant Proposal Development	3
Electives (18 credits, at least 9 credit hours must be 900-level [doctoral])		**18**
HPRO 901	ems Thinking For Health Promotion Research	3
HPRO 902	nplex Systems Thinking	3
HPRO 916	lementation Science Models And Methods	3
HPRO 925	ntific Writing For Public Health Research	3
BIOS 810	oduction To Sas Programming	3
BIOS 818	tatistical Linear Models: Methods and Application	3
BIOS 825	related Data Analysis	3
BIOS 918	tatistical Linear Models: Theory and Applications	3
BIOS 924	tatistical Theory and Models Survival Data	3
BIOS 925	ory Of General Linear and Mixed Models in tatistics	3
BIOS 935	niparametric Methods for Biostatistics	3
EPI 945	lytical Epidemiologic Methods	3
BMI 810	oduction To Biomedical Informatics	3
BMI 825	oduction To R Programming for Biomedicine	3
NRSG 931	nsformational Leadership	3
College of Public Health Required Course		
HPRO 830	FOUNDATIONS OF PUBLIC HEALTH (Required for students who have not completed an MPH or taken a foundational course at a CEPH-accredited institution.)*	3
	Total Credit Hours Excluding Dissertation	**51**
	HPRO 999 Dissertation Credit Hours	**15**
	Total for Degree with Dissertation Hours	**66**

2) Provide a matrix, in the format of Template D17-1, that indicates the assessment activity for each of the foundational public health learning objectives listed above (1-12). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical.

Content Coverage for Academic Doctoral Degree in a Public Health Field (SPH and PHP, if applicable)		
Content	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Explain public health history, philosophy, and values	CPH 500/HPRO 830 - Foundations of Public Health	What is Public Health? Video & Discussion Board Quiz
2. Identify the core functions of public health and the 10 Essential Services*	CPH 500/HPRO 830 - Foundations of Public Health	Quiz
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program, with attention to disparities among populations, e.g., socioeconomic, ethnic, gender, racial, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Current Student Presentation Discussion Board
6. Explain the critical importance of evidence in advancing public health knowledge	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
7. Explain effects of environmental factors on a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
8. Explain biological and genetic factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Public Health in the News Report
9. Explain behavioral and psychological factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
10. Explain the cultural, social, political, and economic determinants of health and how the determinants relate to population health and health inequities	CPH 500/HPRO 830 - Foundations of Public Health	SDOH/Dr. Iton Discussion Board Quiz
11. Explain how globalization affects global burdens of disease	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Sustainable Development Goals Discussion Board

12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Discussion Board

3) Provide supporting documentation for each assessment activity listed in Template D17-1. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

This documentation can be found in the ERF at ERF->D->D1->CPH 500 Syllabus.

4) Provide a matrix, in the format of Template D17-2, that lists competencies for each relevant degree and concentration. The matrix indicates how each competency is covered in the curriculum. Typically, the school will present a separate matrix for each concentration. Note: these competencies are defined by the school and are distinct from the introductory public health learning objectives defined in this criterion.

Competencies for Academic Doctoral Degrees in Public Health (Biostatistics concentration)	
Competency	**Describe how this competency is covered[n]**
1. Serve as an expert Biostatistician on a collaborative team of investigators addressing a research question	* BIOS 924 - Biostatistical Theory and Models Survival Data *BIOS 918 Biostatistical Linear Models: Theory & Applications
2. Successfully conduct and disseminate original research on the theory and methodology of biostatistics.	* BIOS 924 - Biostatistical Theory and Models Survival Data *BIOS 925 - Theory of General Linear & Mixed Models in Biostatistics
3. Effectively teach biostatistics to biostatistical and non-biostatistical audiences	* BIOS 901 - Advanced Biostatistics Theory I * BIOS 902 - Advanced Biostatistics Theory II * BIOS 924 - Biostatistical Theory and Models Survival Data * BIOS 941 - Biostatistical Consultant Application & Practice *BIOS 918 Biostatistical Linear Models: Theory & Applications
4. Develop a perspective on public health and biomedical research.	*BIOS 925 - Theory of General Linear & Mixed Models in Biostatistics *BIOS 918 Biostatistical Linear Models: Theory & Applications
5. Demonstrate knowledge and expertise in a cognate field other than biostatistics.	6 credits of cognate field courses identified by Student, Advisory, and Supervisory Committee

[n] Description may include a specific course or a series of courses (e.g., "9 credits of methods coursework")

Competencies for Academic Doctoral Degrees in Public Health (Environmental and Occupational Health concentration)	
Competency	**Describe how this competency is covered[n]**
1. Formulate hypotheses and design experiments to test such hypotheses, aimed at advancing the body of knowledge surrounding environmental, occupational, and toxicology issues.	ENV 903 - Injury Epidemiology **BIOS 808 - Biostatistics II**
2. Prepare, orally and in writing, qualitative and quantitative information on environmental, occupational, and toxicology topics, to academic, professional, and public audiences.	ENV 904 - Environmental Policy ENV 903 - Injury Epidemiology ENV 905 - Climate Change and Human Health **ENV 970 - Seminar**
3. Foster collaboration and cooperation among various stakeholders, interest groups, and populations to raise awareness and achieve environmental, occupational, and toxicology objectives and benefits.	ENV 904 - Environmental Policy ENV 811 - Agricultural Health and Safety ENV 905 - Climate Change and Human Health
4. Design and assess intervention strategies and policies aiming to reduce injury or illness related to occupation or the environment.	ENV 903 - Injury Epidemiology ENV 909 - Occupational Noise Exposure and Hearing Loss
5. Identify, assess, control, and prevent environmental and occupational hazards that are significant risks to human health and safety.	ENV 811 - Agricultural Health and Safety ENV 909 - Occupational Noise Exposure and Hearing Loss **ENV 908: Thermal Stress in the Work Environment**
6. Apply research methods that utilize established classifications of exposures, health outcomes, and biological effects associated with these exposures.	ENV 903 - Injury Epidemiology **EPI 845 - Epidemiologic Methods I**
7. Design and execute a field study of occupational and environmental health hazards.	ENV 903 - Injury Epidemiology ENV 909 - Occupational Noise Exposure and Hearing Loss ENV 908: Thermal Stress in the Work Environment

[n] Description may include a specific course or a series of courses (e.g., "9 credits of methods coursework")

Competencies for Academic Doctoral Degrees in Public Health (Epidemiology concentration)	
Competency	**Describe how this competency is covered[n]**
1. Critically evaluate the scientific literature, generate hypotheses, and apply comprehensive knowledge of epidemiologic concepts to solve public health problems	EPI 910 - Research Grant Proposal Development EPI 970 - Seminar **EPI 946 - Epidemiology in Public health Practice**

2. Design and implement epidemiologic investigations and devise strategies to control biases and reduce random error.	EPI 821 - Applied Epidemiology EPI 945 - Analytical Epidemiologic Methods EPI 910 - Research Grant Proposal Development EPI 970 - Seminar **BIOS 818- Biostatistical Linear Models: Methods & Application** **BIOS 823 - Categorical Data Analysis** **BIOS 824 - Correlated Data Analysis**
3. Incorporate biological, medical and laboratory knowledge into the practice of epidemiology.	EPI 805 - Human Health & Disease in Public Health EPI 970 - Seminar **EPI 946 - Epidemiology in Public health Practice**
4. Apply advanced analytic methods to epidemiologic data.	EPI 845 - Epidemiologic Methods I EPI 821 - Applied Epidemiology EPI 945 - Analytical Epidemiologic Methods **BIOS 818- Biostatistical Linear Models: Methods & Application** **BIOS 823 - Categorical Data Analysis** **BIOS 824 - Correlated Data Analysis**
5. Effectively communicate and teach epidemiologic concepts.	EPI 821 - Applied Epidemiology EPI 945 - Analytical Epidemiologic Methods EPI 960 - Teaching Practicum EPI 910 - Research Grant Proposal Development EPI 970 - Seminar
6. Develop a competitive grant proposal.	EPI 910 - Research Grant Proposal Development

[n] Description may include a specific course or a series of courses (e.g., "9 credits of methods coursework")

Competencies for Academic Doctoral Degrees in Public Health (Health Promotion and Disease Prevention Research concentration)	
Competency	**Describe how this competency is covered[n]**
1. Conceptualize quantitative and qualitative research that is ethical, rigorous, and innovative and is based on an advanced knowledge of health promotions theories and disease prevention.	HPRO 901 - Advanced Theories in Health Promotion & Disease Prevention HPRO 902 - Complex Systems Thinking HPRO 916 - Implementation Science Models and Methods HPRO 917 - Advanced Research Methods in Health Promotion Disease Prevention Study Design HPRO 970 - Seminar HPRO 925 - Scientific Writing for Public Health Research
2. Conduct rigorous quantitative and qualitative research based on methodologically sound principles and analytical techniques.	HPRO 902 - Complex Systems Thinking HPRO 916 - Implementation Science Models and Methods HPRO 925 - Scientific Writing for Public Health Research **BIOS 808 - Biostatistics II**
3. Conduct needs assessment related to quality of life, health outcomes, and health behaviors in communities or priority population groups.	HPRO 915 - Applications of the CBPR Approach HPRO 917 - Advanced Research Methods in Health Promotion Disease Prevention Study Design

4. Develop measurable objectives and evidence-based interventions in response to needs assessment to promote health and prevent disease among target populations.	HPRO 915 - Applications of the CBPR Approach HPRO 916 - Implementation Science Models and Methods HPRO 917 - Advanced Research Methods in Health Promotion Disease Prevention Study Design
5. Implement evidence-based and high-impact health promotion and disease prevention interventions that effectively target policy, environmental, community, or individual health behavior change.	HPRO 915 - Applications of the CBPR Approach HPRO 916 - Implementation Science Models and Methods
6. Evaluate the reach, effectiveness, cost, and impact of evidence-based health promotion and disease prevention interventions and programs using scientifically sound study design, indicators, and analytical techniques.	HPRO 915 - Applications of the CBPR Approach HPRO 916 - Implementation Science Models and Methods
7. Disseminate and communicate results of research to a broad audience through such avenues as scientific conferences, community forums, and peer-reviewed journals.	HPRO 901 - Advanced Theories in Health Promotion & Disease Prevention HPRO 902 - Complex Systems Thinking HPRO 915 - Applications of the CBPR Approach HPRO 925 - Scientific Writing for Public Health Research

[n] Description may include a specific course or a series of courses (e.g., "9 credits of methods coursework")

Competencies for Academic Doctoral Degrees in Public Health (Health Services and Policy Research concentration)	
Competency	**Describe how this competency is covered[n]**
1. Compare and analyze alternative theoretical and conceptual models from a range of relevant disciplines to health services and policy research.	HSRA 860 - Health Economics HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Research HSRA 960 - Seminar in Health Care Administration
2. Design solutions for health policy problems based on knowledge of the structures, performance, quality, policy, and environmental context of health and health care.	HSRA 810 - US Health Care System: An Overview HSRA 860 - Health Economics HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Research HSRA 960 - Seminar in Health Care Administration
3. Critically evaluate evidence, synthesize findings, and draw inferences from literature relevant to health services and policy research.	HSRA 810 - US Health Care System: An Overview HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Research HSRA 960 - Seminar in Health Care Administration **EPI 910 Research Grant Proposal Development**
4. Create and evaluate appropriate interventional (experimental and quasi-experimental) or observational (qualitative, quantitative, and mixed methods) study designs to address specific health services and policy research questions.	HSRA 920 - Quantitative Methods in Health Services Research HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Research **HPRO 910 Humanistic Traditions of Qualitative**

	Research **EPI 957 Survey Research Methods**
5. Appropriately interpret the results of data analysis and discuss their implications for policy and practice in order to support decision-making in health services and policy.	HSRA 920 - Quantitative Methods in Health Services Research HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Research **BIOS 808 - Biostatistics II**
6. Produce manuscripts, reports, and oral presentations and develp other communication modalities to effectively communicate findings and implications of health services and policy research to technical and lay audiences.	HSRA 810 - US Health Care System: An Overview HSRA 930 - Design of Health Services Research HSRA 940 - Integrated Seminar in Economics and Health Services Reserach HSRA 960 - Seminar in Health Care Administration **EPI 910 Research Grant Proposal Development**

[n] Description may include a specific course or a series of courses (e.g., "9 credits of methods coursework")

Competencies for Academic Doctoral Degrees in Public Health (Toxicology concentration)	
Competency	**Describe how this competency is covered[n]**
1. Formulate hypotheses and design experiments to test such hypotheses, aimed at advancing the body of knowledge surrounding environmental, occupational, and toxicology issues.	BIOS 808 - Biostatistics II
2. Prepare, orally and in writing, qualitative and quantitative information on environmental, occupational, and toxicology topics, to academic, professional, and public audiences.	ENV 904 - Environmental Policy ENV 912 - Risk Assessment and Toxicology **ENV 970 - Seminar**
3. Foster collaboration and cooperation among various stakeholders, interest groups, and populations to raise awareness and achieve environmental, occupational, and toxicology objectives and benefits.	ENV 904 - Environmental Policy
4. Determine the relationship between chemical exposure and toxic response through experimental design and risk assessment.	ENV 912 - Risk Assessment and Toxicology ENV 913 - Environmental Pathology ENV 914 - Chemical Carcinogenesis ENV 950 - Advanced Toxicology
5. Determine the severity of toxic response to amount of chemical exposure by implementing the principles of dose-response and absorption, distribution, metabolism, and excretion.	ENV 913 - Environmental Pathology ENV 914 - Chemical Carcinogenesis ENV 950 - Advanced Toxicology IPBS 801- Fundamentals of Biomolecules

6. Correlate target organ responses with specific toxicant exposures.	ENV 913 - Environmental Pathology ENV 914 - Chemical Carcinogenesis ENV 950 - Advanced Toxicology IPBS 801- Fundamentals of Biomolecules
7. Manage risk assessment protocols to predict toxic responses to environmental and workplace exposures.	ENV 912 - Risk Assessment and Toxicology ENV 914 - Chemical Carcinogenesis ENV 950 - Advanced Toxicology ENV 811 Agricultural Health and Safety
8. Produce regulatory policies that protect human health using risk assessment methods.	ENV 904 - Environmental Policy ENV 914 - Chemical Carcinogenesis ENV 950 - Advanced Toxicology

5) Provide supporting documentation that clearly identifies how the school ensures that students complete a curriculum based on defined competencies. Documentation may include detailed course schedules or outlines to selected modules from the learning management system that identify the relevant assigned readings, lecture topics, class activities, etc.)

This documentation, arranged by concentration, can be found in the following ERF files:

- ERF->D->D17->PhD Biostatistics
- ERF->D->D17->PhD Environmental and Occupational Health
- ERF->D->D17->PhD Epidemiology
- ERF->D->D17->PhD Health Promotion and Disease Prevention Research
- ERF->D->D17->PhD Health Services and Policy Research
- ERF->D->D17->PhD Toxicology

6) Briefly explain how the school ensures that the instruction and assessment in introductory public health knowledge is generally equivalent to the instruction and assessment typically associated with a three semester-credit course.

The College requires all students to complete CPH 500/HPRO 830 Foundations of Public Health. All foundational learning objectives are mapped to this course, so it ensures students are receiving instruction in basic public health knowledge. The course is three credit hours.

7) Identify required coursework and other experiences that address the variety of public health research methods employed in the context of a population health framework to foster discovery and translation of public health knowledge and a brief narrative that explains how the instruction and assessment is equivalent to that typically associated with a three-semester-credit course.

   Typically, the school will present a separate list and explanation for each degree program, but these may be combined if requirements are identical.

All students in an academic doctoral program must complete courses in biostatistics and/or epidemiology. These courses emphasize biostatistical methods and theory and epidemiological principles and practices from a public health context. Many of the programs also include a research methods course specific to that domain of public health. The specific courses required for each degree program are listed below.

Doctor of Philosophy (PhD) in Biostatistics

BIOS 901: Advanced Biostatistics Theory I	3 credit hours
BIOS 902: Advanced Biostatistics Theory II	3 credit hours

BIOS 918: Biostatistical Linear Models: Theory and Applications	3 credit hours
BIOS 924: Biostatistical Theory and Models Survival Data	3 credit hours
BIOS 925: Theory of General Linear and Mixed Models in Biostatistics	3 credit hours

Doctor of Philosophy (PhD) in Environmental and Occupational Health Track

BIOS 808 Biostatistics II	3 credit hours
BIOS 845: Epidemiological Methods I	3 credit hours

Doctor of Philosophy (PhD) in Toxicology Track

BIOS 808 Biostatistics II	3 credit hours

Doctor of Philosophy (PhD) in Epidemiology

EPI 821 Applied Epidemiology	3 credit hours
BIOS 845: Epidemiological Methods I	3 credit hours
EPI 945: Analytical Epidemiologic Methods	3 credit hours
BIOS 818: Biostatistical Linear Models: Methods and Application	3 credit hours
BIOS 823: Categorical Data Analysis	3 credit hours
BIOS 825: Correlated Data Analysis	3 credit hours

Doctor of Philosophy (PhD) in Health Promotion and Disease Prevention Research

BIOS 808: Biostatistics II	3 credit hours
HPRO 925: Scientific Writing for Public Health Research	3 credit hours
HPRO 917: Advanced Research Methods in Health Promotion	3 credit hours

Doctor of Philosophy (PhD) in Health Services and Policy Research

BIOS 808: Biostatistics II	3 credit hours
HSRA 920: Quantitative Methods in Health Services Research	3 credit hours
HSRA 930: Design of Health Services Research	3 credit hours
HPRO 910: Humanistic Traditions of Qualitative Research	3 credit hours
EPI 957: Survey Research Methods	3 credit hours

8) Briefly summarize policies and procedures relating to production and assessment of the final research project or paper.

When the student has passed the Comprehensive Exam and satisfied the coursework and other requirements of his/her approved program, including those established by the Supervisory Committee, he/she will be admitted to Candidacy for the PhD degree. Following admission to Candidacy, students are expected to focus the majority of their effort toward completion of the dissertation project.

The dissertation should be a complete and independent document that can be understood without reference to other materials. It should represent original research on a defined problem – research for which the student has taken primary responsibility. The dissertation presents proof that the student has the ability to ask questions relevant to some field of inquiry, that the student has developed an appropriate, detailed approach to addressing these questions, and that the student can gather data and interpret them in relation to the current status of the field. The research must therefore be the student's work, not the collective work of several people (even if others have contributed in a minor way). The

dissertation must be an original, substantial and significant contribution to the body of knowledge in the student's field. Original – indicating that the exact data or the interpretation of the data do not already exist in the knowledge base of the discipline. Substantial – indicating that the research presented is important to the field of study (not tangential nor of little relevance) and examines a question in depth. Significant – indicating that the research presented provides information that is useful to other scholars in the field, ideally of such importance that it will alter the thinking or perspective in the student's field of study.

The dissertation is not of fixed length; rather, the dissertation should treat in depth a subject from the candidate's field as approved by the Supervisory Committee. It should show the student's technical mastery of the field and should advance or modify former knowledge; i.e., it should treat new material, or find new results, or draw new conclusions, or it should interpret old material with new insights.

The dissertation and abstract are to be presented to the members of the Supervisory Committee at least 4 weeks before the Final Oral Exam (dissertation defense). It is the student's responsibility to ensure that, at that time, the dissertation has been properly formatted and has been thoroughly checked for errors in terminology, grammar and spelling. The final examination is oral and public. It is administered by the Supervisory Committee after all other requirements have been met. The Supervisory Committee also determines the character and length of the defense, while maintaining compliance with the guidelines and usual practices followed by the major program. The examination may be devoted to the special field of the dissertation or to related matters, or it may be designed to test the candidate's judgment and critical powers. When the Final Oral Exam has been completed successfully, the final version of the dissertation must be submitted electronically to the DigitalCommons@UNMC.

9) Provide links to handbooks or webpages that contain the full list of policies and procedures governing production and assessment of the final research project or paper for each degree program.

This documentation is located in the ERF at ERF->D->D16.

10) Include completed, graded samples of deliverables associated with the advanced research project. The school must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

These samples can be found in the ERF, organized by concentration, at ERF->D->D17->Student Samples.

11) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Over the past five years, four of the five doctoral programs have undergone significant and comprehensive review and revision. The Biostatistics PhD program curriculum was updated in 2020. The Environmental Health department has historically offered a PhD program with two tracks: Environmental and Occupational Health, and Toxicology. In spring 2024, an inclusive curriculum retreat was held, which included graduates and current students, and led to the revision of the curriculum and reduced the program to one track in Environmental, Agricultural, and Occupational Health, effective fall 2024. The Health Promotion & Disease Prevention Research PhD program curriculum was reviewed and revised in spring 2024, leading to a change in curriculum to ensure graduates are better prepared to lead disease prevention research. The Epidemiology PhD program is currently under revision, with a revised curriculum expected to be implemented in fall 2025. It is anticipated that additional doctoral-level epidemiological courses will be developed and added to the plan of study.

Weaknesses and Plans for Improvement: The PhD in Health Services Research has not been through the process of reviewing and updating the curriculum, but that is expected to occur before the 2025-2026 academic year.

D18. All Remaining Degrees

Students enrolled in any of the SPH's degree programs that are not addressed in Criteria D2, D3, D9, D16 or D17 complete coursework that provides instruction in the foundational public health knowledge at a level of complexity appropriate to the level of the student's degree program.

The instruction and assessment of students' foundational public health knowledge are equivalent in depth to the instruction and assessment that would typically be associated with a three-semester-credit class, regardless of the number of credits awarded for the experience or the mode of delivery.

The school identifies at least one required assessment activity for each of the foundational public health learning objectives.

1) Provide a matrix, in the format of Template D18-1, that indicates the assessment activity for each of the foundational public health learning objectives listed above (1-12). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical.

Content Coverage for MHA degree (All remaining degrees^)		
Content	**Course number(s) and name(s)**	**Describe specific assessment opportunity[n]**
1. Explain public health history, philosophy, and values	CPH 500/HPRO 830 - Foundations of Public Health	What is Public Health? Video & Discussion Board Quiz
2. Identify the core functions of public health and the 10 Essential Services*	CPH 500/HPRO 830 - Foundations of Public Health	Quiz
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
4. List major causes and trends of morbidity and mortality in the U.S. or other community relevant to the school or program, with attention to disparities among populations, e.g., socioeconomic, ethnic, gender, racial, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Presentation & Discussion Board Quiz
5. Discuss the science of primary, secondary, and tertiary prevention in population health, including health promotion, screening, etc.	CPH 500/HPRO 830 - Foundations of Public Health	Ignite Current Student Presentation Discussion Board
6. Explain the critical importance of evidence in advancing public health knowledge	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
7. Explain effects of environmental factors on a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
8. Explain biological and genetic factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Public Health in the News Report

9. Explain behavioral and psychological factors that affect a population's health	CPH 500/HPRO 830 - Foundations of Public Health	Quiz Discussion Board
10. Explain the cultural, social, political, and economic determinants of health and how the determinants relate to population health and health inequities	CPH 500/HPRO 830 - Foundations of Public Health	SDOH/Dr. Iton Discussion Board Quiz
11. Explain how globalization affects global burdens of disease	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Sustainable Development Goals Discussion Board
12. Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health)	CPH 500/HPRO 830 - Foundations of Public Health	Mock Twitter Chat Discussion Board

2) Briefly explain how the school ensures that the instruction and assessment in introductory public health knowledge is generally equivalent to the instruction and assessment typically associated with a three-semester-credit course.

The College requires all students to complete CPH 500/HPRO 830 Foundations of Public Health. All foundational learning objectives are mapped to this course, so it ensures students are receiving instruction in basic public health knowledge. The course is three credit hours.

3) Provide supporting documentation for each assessment activity listed in Template D18-1. Documentation should include the following, as relevant, for each listed assessment:

- assignment instructions or guidelines as provided to students
- writing prompts provided to students
- sample exam question(s)

This documentation is located in the ERF at ERF->D->D1->CPH 500 Syllabus.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The MHA program is working towards program accreditation through Commission on Accreditation of Healthcare Management Education (CAHME). The program was accepted for candidacy and is proposing a site visit in fall 2025. The program also recently changed from on-campus to online, creating more opportunities for students across the region and country.

Weaknesses and Plans for Improvement: As the MHA program progresses through the self-study process through CAHME, there will be opportunities to identify weaknesses and plans for improvement. A curriculum retreat will be held in fall 2024 or winter 2025 that includes industry and practice partners with the goal of providing a robust review of the curriculum and gathering external partner feedback.

D19. Distance Education

The university provides needed support for the school, including administrative, communication, information technology and student services.

There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate school improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence school.

1) Identify all public health distance education degree programs and/or concentrations that offer a curriculum or course of study that can be obtained via distance education. Template Intro-1 may be referenced for this purpose.

All of the following UNMC COPH Degrees can be obtained via distance education:

MPH	Biostatistics
MPH	Emergency Preparedness
MPH	Epidemiology
MPH	Environmental and Occupational Health
MPH	Health Promotion
MPH	Maternal Child Health
MPH	Public Health Administration and Policy
Master of Health Administration	No concentration
DrPH	Epidemiology
DrPH	Emergency Preparedness
DrPH	Advocacy and Leadership (fall 2024)
MS	Biostatistics

In addition, students in all combined degree programs can completed the MPH coursework through distance education:

- MPH/MD
- MPH/PharmD
- MPH/MSW
- MPH/MBA
- MPH/MCRP
- MPH/DO

2) Describe the public health distance education programs, including

    a) an explanation of the model or methods used,

The College of Public Health follows the UNMC semester schedule with a fixed start and end date and offers online courses in the fall, spring and summer. Online classes are delivered using an internet connection and the UNMC learning management system (LMS) Canvas. Online courses are delivered in weekly modules that require students to sign into the LMS and interact multiple times each week. Each week students are immersed in completing required readings, activities, watching video lectures, websites, conducting research and participating with fellow students in discussions, group work. There may also be weekly assignments, quizzes, tests, projects and papers.

b) the school's rationale for offering these programs,

The rationale for offering online programs is to reach audiences outside of Omaha. This approach removes geographical barriers and enables rural students, military members, out-of-state students, international students and working adults to earn a graduate public health degree or certificate.

c) the manner in which it provides necessary administrative, information technology and student support services,

Oversight of distance education program quality is the responsibility of the Assistant Dean for Academic Affairs, in collaboration with the Director of the Office of Teaching and Learning (OTL). The Director of the OTL oversees two instructional designers who assist with course and content development, troubleshooting, and support services to faculty online course instructors. This group provides extensive support to faculty as they build their courses and helps them produce high quality content, including lecture videos.

Students have access to audio and video production services, such as YuJA, for coursework. Students receive technical support from UNMC ITS or from the college IT for systems access and troubleshooting to include but not limited to Microsoft Office Suite, Duo Security, MyRecords and Canvas (LMS.) Additionally, UNMC pays Canvas by Instructure (LMS) yearly to maintain 24/7 help for all students and faculty enrolled in our programs. The Office of Teaching and Learning staff can assist students with additional technology and connectivity needs.

d) the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and

All online courses are equivalent to their on-campus delivery counterparts to include competencies, learning objectives, learning content and assessments. Assessments may be adjusted to meet the delivery method of the course to ensure student success while meeting the same goals and objectives of the on-campus assessment. The OTL assists faculty throughout the online course design process to include syllabus design, course material development, course space design and delivery to include engagement and teaching presence.

The College Curriculum Committee approves all new online and on campus courses and programs. The formal course review process (see Criteria E for details) of individual courses regardless of delivery modality are facilitated by the OTL an ongoing basis on a rolling three and five-year schedule. Each review consists of a syllabus review, a Canvas (LMS) space review, a course reflection and the overall course score and comments to ensure rigor, consistency across on-campus and online modalities, competency alignment and course delivery.

e) the manner in which it evaluates the educational outcomes, as well as the format and methods.

Educational outcomes are equivalent to the on-campus programs and measure success through student and faculty performance. All courses evaluate student outcomes using a balanced approach of formative, summative and authentic assessments. This approach provides a balanced evaluation of educational outcomes. Assessments include papers, case studies, discussion boards, quizzes, exams, problem sets, projects, presentations and more. The evaluation of assessments is guided by analytic rubrics that not only guide students when completing an assessment but remove most grading subjectivity by faculty based on the predetermined criteria.

The OTL utilizes a rubric to review online course spaces in Canvas (LMS). The review encompasses course structure, design, organization and layout to ensure research-based practices provide an effective learning environment. Faculty teaching presence related to interaction, feedback and engagement are also

measured using the COPH Online Rubric. This review allows the OTL to confirm if the space meets the minimum rubric requirements and provide resources and support for faculty.

3) Describe the processes that the university uses to verify that the student who registers in a distance education course (as part of a distance-based degree) or a fully distance-based degree is the same student who participates in and completes the course or degree and receives the academic credit.

Upon matriculation to one of the online programs, all students are given individual usernames and passwords that they must use to access any course on Canvas (LMS). Additionally, students must use two factor authentication which requires an additional factor to access their courses. UNMC's internet use policy prohibits username and password sharing. According to the UNMC Policy Wiki (https://wiki.unmc.edu/index.php/Computer_Use/Electronic_Information), only the student whom the username and password are issued may use them.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: There are many strengths to our distance education. The Office of Teaching and Learning provides valuable resources to the College faculty across various areas of of instruction. The Instructional Design team under the OTL provides significant support to faculty for their courses. This ensures that courses are built using best practices for online education and there is consistency and quality. Another strength is the course evaluation process. The OTL has developed a robust process so that all College courses are reviewed on a regular basis.

Weaknesses: There were no weaknesses identified.

E1. Faculty Alignment with Degrees Offered

Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated. Faculty education, experience, demographics, and/or lived experience supports the instructional areas with which they are associated.

1) Provide a table showing the school's primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

Primary Instructional Faculty Alignment with Degrees Offered

Name*	Title/ Academic Rank	Tenure Status or Classification^	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Concentration affiliated with in Template C2-1
Abresch, Chad	Associate Professor	TT	PhD	University of Nebraska-Omaha	Public Administration	Health Promotion & Disease Prevention Research
			MEd	University of Nebraska-Lincoln	Health Education	
Brandert, Kathleen	Assistant Professor	TT	PhD	University of Nebraska-Lincoln	Leadership Studies	Advocacy & Leadership
			MPH	University of Nebraska-Omaha	Community Health Education	
Brett-Major, David	Professor	NTT	MD	Uniformed Services University	Medicine	Epidemiology
			MPH	Uniformed Services University	Tropical Public Health	
Carnes, Eric	Associate Professor	NTT	PhD	University of New Mexico	Chemical Engineering	Environmental & Occupational Health
			MS	University of New Mexico	Chemical Engineering	
Chen, Su	Associate Professor	TT	PhD	Oklahoma State University	Statistics	Biostatistics
			MS	Oklahoma State University	Statistics	

			MS	Oklahoma State University	Quantitative Financial Economics	
Cozad, Melanie	Assistant Professor	TT	PhD	University of Tennessee	Economics	Public Health Administration & Policy
Crosby, Kaitlyn	Assistant Professor	TT	PhD	University of South Carolina	Health Economics	Health Promotion
			MHA	University of Missouri	Health Economics & Biomedical Ethics	
Cross, Shaun	Research Assistant Professor	TT	PhD	Colorado State University	Microbiology	Environmental & Occupational Health
Dai, Ran	Assistant Professor	TT	PhD	University of Chicago	Statistics	Biostatistics
			MS	University of Chicago	Statistics	
			PhD	University of Minnesota-Twin Cities	Medicinal Chemistry	
Dickey, Brittney	Assistant Professor	TT	PhD	University of Nebraska Medical Center	Epidemiology	Epidemiology
			MPH	University of Nebraska Medical Center	Health Promotion	
Dong, Jianghu "James"	Assistant Professor	TT	PhD	Simon Fraser University	Statistics	Biostatistics
			MSc	University of Alberta	Statistics	
			MSc	Renmin University of China	Statistics	
Dzewaltowski, David	Professor	T	PhD	University of Iowa	Exercise Psychology	Health Promotion & Disease Prevention Research
			MS	West Virginia University	Exercise Psychology	
ElRayes, Wael	Associate Professor	TT	Mbbs	Cairo University	Surgery & Medicine	Public Health Administration & Policy
			PhD	University of Nebraska Medical Center	Health Services, Research, Administration & Policy	

			MS	University of Nebraska Medical Center	Emergency Preparedness	
Fauver, Joseph	Assistant Professor	TT	PhD	Colorado State University	Microbiology	Epidemiology
Gilbert, Carol	Assistant Professor	TT	PhD	University of Nebraska Medical Center	Preventive & Societal Medicine	Maternal & Child Health
			MS	University of Iowa	Mathematical Statistics	
Grimm, Brandon	Professor	T	PhD	University of Nebraska Medical Center	Social & Behavioral Health	Advocacy & Leadership
			MPH	University of Nebraska Omaha	Community Health Education	
Gwon, Yeongjin	Assistant Professor	TT	PhD	University of Connecticut	Statistics	Biostatistics
			MS	Kyungpook National University	Statistics	
Haynatzki, Gleb	Professor	T	PhD	University of California Santa Barbara	Statistics & Applied Probability	Biostatistics
			MA	University of California Santa Barbara	Statistics	
			DSc	Sofia University St Kliment Ohridski	Mathematical Sciences	
			MSc	Sofia University St Kliment Ohridski	Mathematical Sciences	
Hansen, Keith	Instructor	NTT	MBA	University of Nebraska-Lincoln	Business Administration	Emergency Preparedness

Herstein, Jocelyn	Assistant Professor	TT	PhD	University of Nebraska Medical Center	Environmental & Occupational Health	Environmental & Occupational Health
			MPH	University of Nebraska Medical Center	Environmental, Agricultural, & Occupational Health	
Im, Yunju	Assistant Professor	TT	PhD	University of Iowa	Statistics	Biostatistics
			MS	Ewha Womans University	Statistics	
Khan, Ali	Professor	T	MD	SUNY Health Science at Brooklyn	Medicine	Epidemiology
			MPH	Emory University		
			MBA	University of Nebraska Omaha	Business Administration	
Kim, Jungyoon "JY"	Assistant Professor	TT	PhD	Pennslyvania State University	Health Policy & Administration	Health Services & Policy Research
			MBA	KyungHee University	Health Services Management	
King, Keyonna	Associate Professor	TT	DrPH	Loma Linda University		Health Promotion & Disease Prevention Research
			MA	Pepperdine University	Psychology	
Kolm Valdivia, Nicole	Assistant Professor	TT	PhD	University of Toledo	Health Education	Advocacy & Leadership
			MPH	University of Toledo	Health Promotion & Education	
Lookadoo, Rachel	Assistant Professor	TT	JD	American University Washington College of Law	Law	Emergency Preparedness
Lyden, Elizabeth	Instructor	NTT	MS	University of Illinois-Chicago	Biostatistics	Biostatistics

			MA	University of Illinois-Chicago	Religion	
Maloney, Patrick	Assistant Professor	TT	PhD	Louisiana State University Health Sciences Center	Epidemiology, Biostatistics	Epidemiology
			MPH	University of Illinois-Chicago	Epidemiology	
Maloney, Shannon	Assistant Professor	TT	PhD	Pardee RAND Graduate School	Policy Analysis	Maternal & Child Health
			MPP	University of California Los Angeles	Public Policy	
Medcalf, Sharon	Associate Professor	TT	PhD	University of Nebraska Medical Center	Emergency Preparedness	Emergency Preparedness
			MEd	University of Oklahoma	Adult Education	
Mengist, Abraham	Assistant Professor	TT	PhD	Florida International University	Public Health Epidemiology	Epidemiology
			MSc	Addis Ababa University	Biomedical Sciences	
Michaud, Tzeyu	Assistant Professor	TT	PhD	University of Minnesota	Health Decision Science	Health Promotion & Disease Prevention Research
			MHA	Chang Gung University	Healthcare Management	
Nonnenmann, Matthew	Professor	T	PhD	University of Iowa	Industrial Hygiene/Ergo-nomics	Environmental & Occupational Health, Toxicology
			MS	University of Iowa	Industrial Hygiene	
O'Schneider, Erin	Assistant Professor	TT	EdD	Nebraska Methodist	Education	Health Promotion
			MSW	University of Kansas	Social Work	

Palm, David	Associate Professor	TT	PhD	University of Nebraska-Lincoln	Economics & Industrial Relations	Public Health Administration & Policy
			MS	University of Wyoming	Economics	
Peters, Edward	Professor	T	DMD	University of Connecticut	Dentistry	Epidemiology
			ScD	Harvard University	Epidemiology	
			SM	Harvard University	Epidemiology	
			SM	Harvard University	Health Policy & Management	
Peters, Stephen	Instructor	NTT	MA	Central Michigan University	Organizational Communication	Public Health Administration & Policy
Raikes, Hilary Abbie	Associate Professor	T	PhD	University of Nebraska-Lincoln	Developmental Psychology	Maternal & Child Health
			MPH	Columbia University	Population and Family Health	
Rajaram, Shireen	Associate Professor	T	PhD	University of Kentucky	Medical Sociology	Maternal & Child Health
			MA	University of Kentucky	Sociology	
			M.Com.	Madras University	Business & Commerce	
Ratnapradipa, Kendra	Assistant Professor	TT	PhD	Saint Louis University	Public Health Studies-Epidemiology	Epidemiology
			MSW	Brigham Young University	Social Work	
Rautiainen, Risto	Professor	T	PhD	University of Iowa	Occupational & Environmental Health	Environmental & Occupational Health, Toxicology
			MS	University of Helsinki	Agriculture	
Rosen, Marisa	Assistant Professor	NTT	PhD	University of Nebraska Medical Center	Health Promotion and Disease Prevention Research	Health Promotion
			MPH	George Washington University	Maternal and Child Health	

Rung, Ariane	Associate Professor	T	PhD	Tulane University	Behavioral Epidemiology International Health & Development	Advocacy & Leadership
			MPH	Tulane University	International Health & Development	
Sauer, Lauren	Associate Professor	TT	PhD (Pending)	Johns Hopkins University	Health and Public Policy	Environmental & Occupational Health
			MS	Towson University	Health System Preparedness	
Scofield, Leslie	Instructor	NTT	MPH	University of Nebraska Medical Center	Public Health Practice	Emergency Preparedness
Smith, Lynette	Associate Professor	T	PhD	University of Nebraska-Lincoln	Statistics	Biostatistics
			MS	University of Minnesota	Biostatistics	
Strong, Shelley	Assistant Professor	NTT	PhD	Texas A&M University	Health Education	Health Promotion
			MPH	Texas A&M University	Epidemiology	
			MFA	Case Western Reserve University	Contemporary Dance	
Su, Dejun	Associate Professor	T	PhD	University of Chicago	Sociology	Health Promotion
			MA	Peking University	Demography	
Tak, Hyo Jung	Assistant Professor	TT	PhD	University of Chicago	Public Policy	Health Services & Policy Research
			MA	University of Chicago	Economics	
Tibbits, Melissa	Associate Professor	TT	PhD	Pennsylvania State University	Human Development & Family Studies	Health Promotion
			MS	Pennsylvania State University	Human Development & Family Studies	

Verhoeven, Dana	Assistant Professor	TT	PhD	Clemson University	Industrial & Organizational Psychology	Public Health Administration & Policy
			MS	Clemson University	Applied Psychology	
Wang, Hongmei	Associate Professor	T	PhD	Yale University	Health Policy	Health Services & Policy Research
			MS	Harvard University	Health Policy & Management	
Watanabe-Galloway, Shinobu	Professor	T	PhD	University of Iowa	Epidemiology	Epidemiology
			MA	University of Northern Iowa	Psychology	
White, Trina	Assistant Professor	TT	DrPH	University of Nebraska Medical Center	Emergency Preparedness	Public Health Administration & Policy
			MBA	University of Nebraska Omaha	Business Administration	
			MS	University of South Dakota	Physical Therapy	
Wichman, Christopher	Associate Professor	TT	PhD	University of Nebraska-Lincoln	Statistics	Biostatistics
			MS	University of Nebraska Lincoln	Biostatistics	
			MS	University of Virginia	Materials Science	
Yu, Fang	Professor	T	PhD	University of Connecticut	Statistics	Biostatistics
			MS	University of Massachu-setts	Mathematics	
Zhang, Ying	Professor	T	PhD	University of Washington	Statistics	Biostatistics
			MS	Florida State University	Applied Mathematics	
			MS	Fudan University	Computational Mathematics	

Zheng, Cheng	Associate Professor	T	PhD	University of Washington	Biostatistics	Biostatistics
			MS	University of Washington	Biostatistics	

2) Provide summary data on the qualifications of any other faculty with significant involvement in the school's public health instruction in the format of Template E1-2. Schools define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students' practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

Non-Primary Instructional Faculty Regularly Involved in Instruction							
Name*	**Academic Rank^**	**Title and Current Employ-ment**	**FTE or % Time Allocated**	**Graduate Degrees Earned**	**Institution(s) from which degree(s) were earned**	**Discipline in which degrees were earned**	**Concentration affiliated with in Template C2-1**
Bell, Jesse	Professor	Director; Water, Climate, and Health Program, UNMC; University of Nebraska Daugherty Water for Food Global Institute	0.45 FTE	PhD	University of Oklahoma	Plant Biology	Environmental & Occupational Health
Beseler, Cheryl	Associate Professor	Associate Professor, UNMC COPH	1.0 FTE	PhD	Colorado State University	Environmental Health, Epidemiology	Toxicology
				MA	Colorado State University	Statistics	
				MS	Colorado State University	Environ-mental Health	
				MS	Colorado State University	Biochemistry	

Biggs, Erin	Assistant Professor	UNMC & Ochsner Health	0.2 FTE	PhD	Louisiana State University Health Sciences Center	Epidemiology	Epidemiology
				MPH	Louisiana State University Health Sciences Center	Epidemiology	
Casani, Julie Ann	Assistant Professor	UNMC	0.55 FTE	MD	New York University	Medicine	Emergency Preparedness
				MPH	Johns Hopkins University		
Dai, Hongying "Daisy"	Professor	Associate Dean of Research, UNMC COPH	1.0 FTE	PhD	University of Kentucky	Statistics	Biostatistics
				MS	University of Kentucky	Statistics	
				MS	University of Kentucky	Mathematics	
Kamal-Ahmed, Ishrat	Instructor	UNMC & DHHS	0.2 FTE	PhD	University of Minnesota	Environmental Health Sciences	Epidemiology
				MSc	Minnesota State University – Mankato	Health Science	
KC, Madhav	Assistant Professor	UNMC	0.15 FTE	PhD	Louisiana State University Health Sciences Center	Epidemiology	Epidemiology
				MPH	Louisiana State University Health Sciences Center	Epidemiology	
Kintziger, Kristina	Associate Professor	Associate Professor, UNMC COPH	1.0 FTE	PhD	University of South Carolina	Epidemiology	Environmental & Occupational Health
				MPH	Emory University	Epidemiology	

Kraus, Emily	Assistant Professor	UNMC, MITRE Corp	0.1 FTE	PhD	University of Colorado-Anschutz Medical Campus	Clinical Sciences	Epidemiology
				MPH	Emory University		
Levy, Deborah	Professor	UNMC	0.25 FTE	PhD	Johns Hopkins University	Epidemiology	Emergency Preparedness
				MPH	University of California Los Angeles	Epidemiology	
Lowe, Abigail	Associate Professor	UNMC	1.0 FTE	PhD	UNMC	Medical Sciences	Advocacy & Leadership
				MA	UNL	Continental Philosophy & Literature	
Lowe, John	Professor	Chair, UNMC COPH Department of Environmental, Agricultural, and Occupational Health Assistant Vice Chancellor for Health Security Training & Education, UNMC	1.0 FTE	PhD	University of Nebraska Medical Center	Medical Science	Environmental & Occupational Health
				MS	University of Nebraska-Lincoln	Molecular Virology	
McMillan, Analisa	Assistant Professor	UNMC COPH Director of Educational Design & Development	0.7 FTE	PhD	University of Nebraska Medical Center	Preventive & Societal Medicine	Advocacy & Leadership
				MSEd	University of Nebraska - Kearney	Instructional Technology	
McMillan, JoEllyn	Associate Professor	UNMC	0.35 FTE	PhD	Texas A&M University	Toxicology	Toxicology

Ramos, Athena	Associate Professor	UNMC	1.0 FTE	PhD	Clemson University	International Family & Community Studies	Advocacy & Leadership
				MBA	University of Nebraska Omaha	Business Administration	
				MS	University of Nebraska Omaha	Urban Studies	
Rogan, Eleanor	Professor	Associate Dean for Strategic Projects, UNMC COPH	0.49 FTE	PhD	Johns Hopkins University	Biochemistry	Toxicology
Samuelson, Mystera	Assistant Professor	Director; UNMC Animal Behavior Core	1.0 FTE	PhD	University of Southern Mississippi	Brain & Behavior	Environmental & Occupational Health
				MS	University of Idaho	Natural Resources	
Schmid, Kendra	Professor	Assistant Vice Chancellor of Academic Affairs; Assistant Dean of Graduate Studies, UNMC	0.1 FTE	PhD	University of Nebraska-Lincoln	Statistics	Biostatistics
				Ma	University of Nebraska Lincoln	Educational Administration	
				MS	University of Nebraska Lincoln	Statistics	
Sims, Brian	Associate Professor	UNMC	1.0 FTE	PhD	Education and Psychology	University of Michigan	Advocacy & Leadership
				MA	Social Psychology		

Stentz, Terry	Associate Professor	Associate Professor, Charles W. Durham School of Architectural Engineering & Construction; University of Nebraska-Lincoln		PhD	University of Nebraska-Lincoln	Psychological Studies	Environmental & Occupational Health
				MPH	Harvard University	Environmental and Occupational Health	
				MSIE	University of Nebraska Lincoln		
				AM	Dartmouth College		
				MA	University of Nebraska Lincoln		
Tesar, Megan	Assistant Professor	UNMC	0.35 FTE	PhD	University of Nebraska-Lincoln	Statistics	Biostatistics
				MS	University of Nebraska Lincoln	Statistics	
Wescott, Siobhan	Associate Professor	UNMC	1.0 FTE	MD	Harvard Medical School	Medicine	Health Promotion & Disease Prevention Research
				MPH	University of California Los Angeles		
Wyatt, Todd	Professor	UNMC	0.41 FTE	PhD	University of North Carolina	Pathology	Environmental & Occupational Health
Yoder, Aaron	Associate Professor	UNMC	0.9 FTE	PhD	Purdue University	Agricultural & Biological Engineering	Environmental & Occupational Health
				MS	Pennsylvania State University	Environmental Pollution Control	

3) Include CVs for all individuals listed in the templates above.

CV's for PIF Faculty can be found in the ERF at ERF->E->E1->PIF CVs

CV's for Non-PIF Faculty can be found in the ERF at ERF->E->E1->Non-PIF CVs

4) Provide a brief narrative summary, with specific examples, of how faculty education, experience, demographics, and/or lived experience supports instructional areas.

Faculty have educational or practice expertise in their instructional areas. Most of the faculty who teach the MPH core courses have an MPH degree, including Dr. Shelley Strong (CPH 539 Leadership and Advocacy); Dr. Erin O. Schneider (CPH 514 Planning and Evaluation); Dr. Jocelyn Herstein (CPH 500 Foundations of Public Health); and Dr. Erin Biggs (CPH 504 Epidemiology in Public Health). Two of these faculty (Dr. Shelley Strong and Dr. Erin Biggs) are teaching-focused faculty, and so do not have research responsibilities.

For the doctoral programs, COPH assigns faculty instructors who have significant research (PhD programs) or practice (DrPH program) expertise. For the PhD programs, the faculty who teach courses and advise students are recognized experts in the research of their field, including Dr. Kristina Kintziger (PhD program in Environmental and Occupational Health), Dr. Matt Nonnemann (PhD program in Environmental and Occupational Health), Dr. Ed Peters (PhD program in Epidemiology), Dr. Ariane Rung (PhD program in Epidemiology), Dr. David Dzewaltowski (PhD program in Health Promotion), Dr. Dejun Su (PhD program in Health Promotion), Dr. Chris Wichman (PhD program in Biostatistics), and Dr. JY Kim (PhD program in Health Services and Policy Research). For the DrPH program core curriculum, the faculty teaching core course have practice experience in their instructional area, including Dr. Brandon Grimm, Dr. Kathleen Brandert, Dr. Nicole Kolm Valdivia, Dr. Trina White, and Dr. Analisa McMillan.

5) If applicable, provide additional narrative explanation that supplements reviewers' understanding of data in the templates.

Faculty are classified as tenure track (TT), non-tenure track (NT), and tenured (T). Faculty appointments include Special Appointments (NT), Health Professions (TT), and continuous (T). The university verifies that an individual is qualified to teach courses at the level to which they are assigned, based on regional accrediting body (HLC) standards.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: COPH has a diverse set of faculty, including those with practice experience and other relevant backgrounds. However, the College continues to work on identifying community members with practice and lived experience to serve as instructors or co-instructors, particularly for the professional programs. In addition, COPH is working on developing a teaching track for faculty promotion purposes that is slated to be in place for the 2025-2026 promotion cycle.

Weaknesses: As the College continues to grow, we recognize we will need to continue to add faculty with appropriate breadth and depth of expertise.

E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the school employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Schools encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, schools regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

1) Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, other than faculty members' participation in extramural service, as discussed in Criterion E5. The unit may identify full-time faculty with prior employment experience in practice settings outside of academia, and/or units may describe employment of part-time practice-based faculty, use of guest lecturers from the practice community, etc.

The COPH employs multiple faculty with experience working in public health practice settings prior to joining COPH. These faculty include, but are not limited to:

Dr. Ali S Khan worked at the Centers for Disease Control and Prevention for 23 years before joining the COPH. He was one of the main architects of the US health security program and lead numerous infectious disease outbreaks. In his current role as Dean, he continues to respond to global outbreaks for WHO and serves on the WHO Executive Committee for the Global Outbreak Alert and Response Network. He currently works across the state in improving practices for reducing maternal and infant mortality and harm reduction. Dr. Khan joined the COPH in June 2014 as the Dean and Professor of Epidemiology. He draws from his practice experience when teaching courses and participating in MPH and DrPH capstone and dissertation committees.

Dr. Chad Abresch lead CityMatCH for over 20 years, a national membership organization of maternal and child health projects in local health departments across the country. This work allowed him to co-design and implement public health initiatives in dozens of U.S. cities. He has created surveillance and prevention methodologies that have been demonstrated effective and subsequently written into federal grant funding documents as required activities for grantees. Dr. Abresch joined the COPH in May 2023 as the Weitz Family Chair of Health Promotion and Associate Professor in the Department of Health Promotion. He draws from his practice experience when teaching courses, chairing and participating in MPH, DrPH, and PhD capstone and dissertation committees, and leading program and curricular design efforts within the department.

Dr. Kathleen Brandert has been grounded in workforce development and technical assistance for public health practitioners for over 20 years. At CityMatCH, a national maternal and child health membership organization, she co-developed and implemented a host of education and training initiatives for the MCH workforce across the country focused on issues like infant mortality, health inequities, and leadership development. From 2012-2022, she served as Manager of Workforce Development and Leadership Programs in the College of Public Health at the University of Nebraska Medical Center (UNMC). In 2022, she was named Assistant Dean of Public Health Practice for the COPH. Dr Brandert's research focuses on the development of leaders, with an interest in integrating equity, diversity, and inclusion competencies into leadership development. As a trained executive and team coach, she successfully supports individuals, teams, and organizations through small and large scale change efforts in their communities. Dr. Brandert's experiences and skillsets give her a unique vantage point to not only be able to quickly assess the needs of the workforce, but to offer education and training solutions to meet those needs. In the lectures she gives and the course she teaches (CPH 718), Dr. Brandert incorporates her breadth and depth of practice-based experience into the content and assessments.

Dr. David Brett-Major was a WHO medical officer based in Geneva for two years in support of Alert and Response Operations, to include global responses to Ebola virus disease in West Africa, avian influenza A(H7N9), Middle East respiratory syndrome coronavirus (MERS-CoV), chemical weapons use in Syria, as well as health security policy work on pandemic preparedness and response and dual use research of concern. A retired U.S. Navy medical officer, Professor Brett-Major led the military's tropical public health and tropical medicine training program, building longitudinal service and education relationships in Central and South America, Africa, and Asia. He helped to develop the Defense department's integrated biosurveillance division and created the Navy research and development enterprise's office of emerging infectious diseases. He led field laboratory operations for that enterprise, incorporating 1,500 personnel on 4 continents; and, later led network clinical research operations in Africa and Asia for the Military HIV Research Program. He has developed international programs for surveillance, product development, and discovery, principally in sub-Saharan Africa. In Nebraska, Professor Brett-Major and colleagues have built clinical research study portfolio focused on emerging and re-emerging infectious diseases and supported state and tribal efforts in COVID-19 and influenza prevention and mitigation efforts.

Dr. Julie Casani practiced clinical Emergency Medicine in the Johns Hopkins system for 17 years. She has been actively involved in Emergency Medical Services since the 1970's serving at every level from ambulance provider to an appointed member of the Maryland State EMS Board. Until June of 2017, she was the Director of Public Health Preparedness and Response in the North Carolina Division of Public Health. From 1999-2006, she was the Preparedness Director at the Maryland Department of Health and Mental Hygiene. She has been a policy and health practice consultant to several national workshops and committees in Weapons of Mass Destruction for Federal and State agencies, serving on 3 Defense Science Boards and has served as a member of the 2018-2021 National Academies of Science, Engineering and Medicine Committee on Evidence Based Practices for PH Preparedness. She also served three consecutive terms as a member of the Homeland Security Science and Technology Advisory Committee for DHS. She co-authored the text: Disasters and Public Health: Planning and Response. From 2017-2023, she was the Director and Medical Director of Campus Health at NC State University until December 2022 where she served as the Chief Medical Officer for the university during the COVID-19 response and established campus-wide programs for faculty, staff and students for testing, isolation and quarantine and vaccination. She was Adjunct Associate Professor in Biological Sciences where she instructed in Global Public Health, Agriculture Security and One Health, coordinated the Global Health Minor and mentored pre-health students. In January, 2023, Dr Julie Casani joined the faculty of the College of Public Health at the University of Nebraska Medical Center as an Assistant Professor in Epidemiology with a focus on Preparedness and Disaster Epidemiology.

Dr. Carol Gilbert has provided training and technical assistant to Maternal and Child Health (MCH) epidemiologists and program leaders in health departments across the US for more than two decades as part of CityMatCH. CityMatCH receives federal funding to increase the capacity of health departments and to address MCH issues such as preterm birth, infant mortality, and breastfeeding, and to improve health equity. Relying primarily on existing data sources such as vital records, health surveys, and administrative data, Dr. Gilbert teaches public health professionals how identify the underlying reasons for poor outcomes and disparities. She teaches analytic methods and use of data to advocate for policy changes, seek funding, and plan programs. In teaching courses at the COPH (Including HPRO 881 MCH Theory and Interventions, and soon HPRO 880 Intro to MCH), Dr. Gilbert provides many "real-life" examples of the challenges health departments face. She adds lessons in quantitative thinking to many topics and shows students how to find relevant data to bolster their arguments.

Dr. Brandon Grimm worked for several years in corporate wellness for Union Pacific and Honeywell. In addition, Dr. Grimm also worked in cardiac rehab before joining UNMC. He is the past associate dean of public health practice, and he created the Office of Public Health Practice. Dr. Grimm also co-created with practice partners throughout Nebraska, the Nebraska Educational Alliance for Public Health Impact, and

the Great Plains Leadership Institute. He is recognized across the state as a thought leader in public health practice and in creating systems and solutions to respond to communities' most important health threats. Dr. Grimm is also a board of health member for the Sarpy Cass Health Department. He used his experiences to create the core course Leadership and Advocacy and the DrPH course Advocacy and Policy Engagement.

Dr. Jocelyn Herstein specializes in high-consequence infectious disease preparedness and management, with focus on infection prevention and control, high-level isolation, training and education, and U.S. national preparedness infrastructure. She has provided technical expertise and conducted biopreparedness trainings on Ebola virus disease, H5N1, Lassa fever, and Covid-19 for healthcare workers and public health officials in the US, Europe, Africa, and Southeast Asia. During the COVID-19 pandemic, Dr. Herstein co-led the development of a national online just-in-time training program for federal first responders, was part of a team that provided technical assistance to meat processing facilities, schools, and other vulnerable sectors, and led the development of guidelines and Playbooks for a number of these industries. She leads multiple national and international multidisciplinary projects on health security, working with governmental partners, academic centers, healthcare facilities, and the private sector. Dr. Herstein also serves on the World Health Organization's Global Outbreak Alert and Response Network (GOARN) Research leadership team to advance operational research during public health emergencies. She draws from her field experiences when teaching CPH500 Foundations of Public Health, integrating practice experiences to illustrate public health in action, and when chairing and participating in MPH and PhD capstone and dissertation committees.

Mr. Keith Hansen is the Director of the UNMC/CoPH Center for Preparedness and Emergency Response Solutions (CPERS) and the co-Director of the Association of Healthcare Emergency Preparedness Professionals (AHEPP). During his career, he worked at both the Lincoln-Lancaster County Health Department (local) and Nebraska Department of Health & Human Services (NEDHHS, state) prior to joining the College of Public Health. He led the Injury Prevention programs at both organizations as well as the Sexually Transmitted Diseases Program at NEDHSS. Following those positions, he worked at NEDHHS as the emergency manager for public health and healthcare. He responded to multiple disasters in NE, wrote numerous disaster response plans, conducted hundreds of trainings for the public, local, and state health departments and conducted dozens of large- and small-scale exercises. Keith also co-founded AHEPP, an international association dedicated to the professional development of healthcare emergency managers. He uses his experience to teach the Exercise Development course (CPH726). He also mentors numerous students through their APEx and Capstone projects. His leadership with AHEPP and CPERS gives students real-world, practical experience in the field of public health and healthcare disaster emergency management.

Dr. Nicole Kolm Valdivia worked at the Iowa Department of Public Health for 8 years before joining the COPH. She served as an evaluation coordinator and then epidemiology program manager for HIV, Hepatitis, and STIs. Prior to joining the health department, she worked at Safe Kids Greater Toledo where she served as a pediatric injury prevention specialist, and at a high school for teen moms where she served as a health teacher, evaluation coordinator, and coordinator of student services. Dr. Kolm Valdivia joined the COPH in February 2020 as the Director of Professional Programs and was promoted to Assistant Dean for Academic Affairs and Assistant Professor in Epidemiology in November 2022. She has used her practice experience in teaching courses (including CPH 514 Planning and Evaluation) and leading curricular design and revisions.

Dr. Emily Kraus worked at Denver Public Health department as an epidemiologist and informaticist for the city and county of Denver for 9 years. She was an independent consultant to the Centers for Disease Control and Prevention, National Association of Chronic Disease Directors, Public Health Informatics Institute, National Assocation of Community Health Centers, Denver Health and Hospital Authority, the Louisiana Public Health Institute, and the Council of State and Territorial Epidemiologists for five years supporting public health informatics projects. She is currently a public health principal at the MITRE Corporation supporting informatics projects across government entities. Dr. Kraus joined the COPH in 2023

in the Department of epidemiology. She integrates content and expertise from her practice experience into an introduction to public health informatics class offered for the first time in the fall of 2024.

Ms. Rachel Lookadoo has worked with the University of Nebraska Medical Center since 2018, when she was hired to be a preparedness specialist for the (then-titled) Center for Preparedness Education. In that role, she worked closely with public health departments across Nebraska on issues relating to emergency preparedness and response. Prior to joining UNMC, Ms. Lookadoo worked as an attorney and compliance specialist for a regional healthcare organization, a role which focused on implementing the CMS emergency preparedness regulations in healthcare settings. Since becoming UNMC faculty in November 2019, Ms. Lookadoo has utilized her practice experience with both public health and healthcare to create practical courses and corresponding assignments for her students. Ms. Lookadoo teaches courses relating to Emergency Preparedness (CPH 550) and Public Health Law (CPH 555), and has chaired/participated in many MPH, DrPH, and PhD committees.

Dr. Sharon Medcalf launched her practice experience in Emergency Preparedness in 2001, leading the Metro Omaha area hospitals in the development of plans for healthcare facilities to receive/isolate and treat patients with Smallpox due to a bioterrorism release. From there she was hired in 2002 to build the first stand-alone outreach training center for Emergency Preparedness, under the CDC's Bioterrorism Cooperative Agreement. The mission of the training center was to train all staff responsible for general Emergency Preparedness, employed by health departments and hospitals across Nebraska and the region. This training center, now called the Center for Emergency Preparedness and Response Solutions (CEPRS) is still operational and continues to support practice partners in the field. In 2011, she developed an academic program beginning with a Graduate Certificate and a Masters degree in Emergency Preparedness, based largely on practice curriculum content. And finally in 2020, she launched the first DrPH in Emergency Preparedness, and continues to administer the suite of academic programs in Emergency Preparedness. Dr. Medcalf's continued involvement in the practice arena, through outreach training, benefits students in many ways. She is able to demonstrate Emergency Preparedness concepts through real-life practice examples in the courses she teaches, and through her vast network of practice connections at the local, state and national levels, she is able to mentor MPH and DrPH student with expertise through their coursework, practicum/APEx and capstone/dissertation projects, and provide career guidance at the same time.

Dr. David Palm worked at the Division of Public Health in the Nebraska Department of Health and Human Services for more than 30 years. At the Division of Public Health, he was involved in several health planning initiatives and for several years he served as the Director of the Office of Community and Rural Health. This Office was responsible for organizing 16 regional local health departments (LHDs) and building capacity in them. For example, this Office provided extensive technical assistance to assist LHDs in developing their community health assessments and community health improvement plans, QI/performance improvement initiatives, and PHAB accreditation. In 2014, Dr. Palm joined the College of Public Health as an Associate Professor in the Department of Health Services Research and Administration. In 2019, he also became the Director of the Center for Health Policy. He uses his practice experience to illustrate specific concepts and applications in his Strategic Planning and Management course, to advise students in the development of their MPH and MHA capstones and PhD dissertations, as well as his public health systems and services research efforts.

Dr. Marisa Rosen worked as a program evaluator in Georgia for three years and led both process and impact evaluations on a variety of education-related programs across the United States. During her Ph.D. program in the UNMC COPH, she worked as a Graduate Research Assistant as part of a larger evaluation team for the Adolescent Health Project (AHP), a community approach to reduce teen pregnancy and sexually transmitted infections (STIs) in Nebraska. In 2018, Dr. Rosen began working as the Community Data Research Coordinator in which she oversaw both the collection, analysis, and reporting of data, the development and implementation of the community-development component, and adherence to IRB protocols as part of a NIH-funded Whole-of-Community research project. In May 2019, Dr. Rosen joined the Family Planning Council of Nebraska (d.b.a. Nebraska Family Planning) as the Title X Project Director where she oversaw the implementation of the Title X Family

Planning program across 11 Title X agencies in Nebraska. In 2020, Dr. Rosen re-joined the College of Public Health at UNMC to continue her post-doctorate training in research and evaluation of complex community systems to improve maternal and child health outcomes. In 2021, Dr. Rosen became an Assistant Professor in the Department of Health Promotion. As an Assistant Professor, Dr. Rosen has led and been a part of different projects such as an evaluation of the Buffet Early Childhood Institute's We Care for Kids Campaign, an evaluation of the Nebraska Department of Health and Human Service's SHA/SHIP Redesign, and the Diabetes on Track project, a three-year initiative to improve rural prediabetes and diabetes outcomes. She draws from all of these different practice settings when teaching courses (including CPH500: Foundations of Public Health, CPH547 Maternal and Child Health Theories and Interventions, and CPH501: Health Behavior), chairing and participating in MPH Capstone committees, and engaging in the MCH curriculum revision.

Dr. Dana Verhoeven joined the COPH faculty in the fall of 2022 as an Assistant Professor in the Department of Health Services Research and Administration after completing a postdoctoral fellowship with the National Cancer Institute. In summer 2024, Dr. Verhoeven transitioned to the Epidemiology department. Her research examines organizational factors and processes that impact care team functioning to develop evidence-based practices that improve care coordination and patient outcomes. Her work primarily focuses on care coordination, team dynamics, and shared decision-making in healthcare, particularly in the context of cancer care delivery. Since joining UNMC, Dr. Verhoeven has led the needs assessment and evaluation for the Winnebago tribe's infant and maternal health home visitation program by integrating data from EHRs, WIC, the US Census, and community stakeholder interviews. She has also assisted in developing a succession planning toolkit for local health departments. Dr. Verhoeven integrates her experience from practice in her courses (including Health Care Organization Theory & Behavior), chairing MPH capstone committees, and mentoring her graduate assistants.

Dr. Chris Wichman was the Director of Biostatistics at Creighton University for 3.75 years before joining the COPH. Prior to Creighton University, he worked at University of Nebraska Lincoln as a Naval ROTC instructor, a Deputy Sheriff, and a nuclear trained surface warfare officer in the United States Navy. Dr. Wichman joined the COPH in September 2016 as an Assistant Professor of Biostatistics, promoted to Associate Professor in July 2023, and has been the Biostatistics Graduate Program Director since October 2020. He has used his practice experience in teaching courses (CPH506, CPH650, CPH652, and CPH656) and course development and revision.

Dr. Trina White's diverse practice background includes leadership of physician groups and clinics, service lines, hospitals, ambulatory surgery centers, ancillary services, home health and various inpatient and outpatient services. Trina has over 23 years of broad healthcare leadership experience and over 30 years in healthcare. Prior to joining UNMC as a full-time assistant professor in 2023, Trina worked for Sutter Health as the CEO for Sutter Surgery Center Division, Sutter Care at Home and Walk-In Care 2021-2023, the CEO for Sutter Valley Medical Foundation for the central region 2019-2021, the Chief Administrative Officer of Sutter Maternity & Surgery Center in Santa Cruz 2017-2019, and the Vice President of Operations for the Sutter Bay Medical Foundation - East Bay Region 2016-2017. Before joining Sutter, Trina served as Chief Administrative Officer of the Orthopedic Service Line at Eisenhower Medical Center in Rancho Mirage, CA. Earlier in her career, Trina worked in Omaha, NE including serving as Chief Executive Officer for Nebraska Orthopaedic Associates and in different Director roles for Methodist Health System. Trina draws from her practice experience when teaching courses including CPH 502 Health Administration, CPH 563 Strategic Planning and CPH 569 Health Leadership as well as an upcoming course in the DrPH new concentration, CPH 712 Systems and Strategic Thinking. Trina also incorporates her practice experience in chairing and participating in capstone committees, serving as a professional development consultant in the College of Nursing Fellowship Program, and in course creation and redesigns.

Dr. Aaron Yoder, an Associate Professor in the Central States Center for Agricultural Safety and Health (CS-CASH), integrates his extensive research into classroom instruction to enrich student learning. His research primarily focuses on agricultural safety and health, addressing critical issues such as tractor and machinery injuries, stress and mental health among agricultural workers, and respiratory diseases in animal production. Dr. Yoder actively involves students in CS-CASH's research projects and outreach efforts, providing them with hands-on experience in conducting research, analyzing data, and communicating findings to diverse agricultural communities. This engagement allows students to apply classroom knowledge to real-world scenarios, fostering critical thinking and problem-solving skills essential for their future careers in public health and agricultural safety.

In addition, COPH has an Academic Health Department agreement with the Nebraska Department of Health and Human Services and employs a faculty member whose time is shared between the two organizations:

Dr. Patrick Maloney is a practice-based epidemiologist, who has spent the better part of a decade bridging the gap between epidemiological theory and research and practice. He has a long history working in state and local health departments and with the Centers for Disease Control and Prevention. Dr. Maloney is currently jointly appointed as an Assistant Professor at the University of Nebraska Medical Center and as a Senior Epidemiologist with the Nebraska Department of Health and Human Services. He also runs the Applied Epidemiology Group, which focuses on the translational, applied components of public health and produces relevant and actionable work that has immediate and long-term effects in at-risk populations. Dr. Maloney applies his practice-based experience to his teaching portfolio, which includes surveillance and outbreak investigation.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: COPH has many faculty with public health practice experience who can draw on that experience for curriculum development and teaching courses, especially in the MPH and DrPH programs. In addition, the Office of Public Health Practice, directed by Assistant Dean Dr. Kathleen Brandert, works closely with Academic Affairs, the Office of Teaching and Learning, Career Services, and faculty to provide opportunities for faculty and students to participate in practice-based opportunities and remain current on issues facing public health practice. Another primary strength is having a Dean who has over 20 years of experience in public health practice. Dean Khan, as well as the entire College leadership team, has made integrating practice a priority of the college.

Weaknesses: none indicated.

Plans for Improvement: The COPH is in the process of developing a DrPH Practice Mentor network that will recruit and retain practice partners from around the world to provide career mentoring to our DrPH students with a focus on helping foster personal and professional career growth as well as practicum and practice-based dissertation opportunities. This network will establish partnerships with community leaders from various sectors (local, private, non-profit, and governmental institutions) to mentor DrPH students at the College of Public Health.

E3. Faculty Instructional Effectiveness

The school ensures that systems, policies, and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The school establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The school supports professional development and advancement in instructional effectiveness, including support for working with diverse students and communities.

1) Describe the school's procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable.

The COPH utilizes course evaluations at the end of each semester (fall, spring, summer) to evaluate course and instructional effectiveness for all courses. The evaluation instrument was designed by the COPH Evaluation Committee and is reviewed annually. The questions on the evaluation assess the amount of time spent in the course (measured as categories of hours per week), perceptions of instructor engagement and feedback (four-point scale ranging from strongly disagree to strongly agree), and overall instructor and course effectiveness (five-point scale ranging from poor to excellent). Students are provided the opportunity to leave narrative feedback. The response rate for course evaluations tends to be high (72% in fall 2023, 75% in spring 2024), and 69% in summer 2024, so we feel the results are representative. The course evaluations open one week before the end of the semester and remain open five days after grades are posted. The length of time the evaluations are open is based on student feedback. The course evaluation survey can be found in the ERF at ERF->E->E3->COPH Course Evaluation Survey.

Course evaluations are reviewed by the department chairs, Assistant Dean for Academic Affairs, Vice Dean, and Dean. Department chairs can use the evaluations to assist with annual performance evaluations and to determine teaching assignments. The Assistant Dean for Academic Affairs uses the qualitative feedback from course evaluations to determine which courses would benefit from assistance from the COPH Office of Teaching and Learning (OTL) instructional designers.

In addition to course evaluations at the end of each semester, faculty are encouraged to add a mid-semester course evaluation to receive timely feedback on their courses. Faculty can also request peer feedback from their colleagues, the Assistant Dean for Academic Affairs, and the Director of the OTL.

2) Describe available university and programmatic support for continuous improvement in teaching practices and student learning, including support for working with diverse students and communities. Provide three to five examples of school involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

All instruction within COPH is supported by the **Office of Teaching and Learning (OTL)** directed by Dr. Analisa McMillan. The OTL provides instructional design services for courses, including creating engaging learning experiences and developing and redesigning courses. There are two instructional designers employed full-time by COPH. The OTL also provides Canvas (Learning Management System) support, promotes effective and innovative teaching methods, and supports the development of new curricula. The OTL also provides professional development funds to faculty to refresh their courses to ensure content is relevant and updated.

The OTL offers regular **faculty development trainings**, including at least six faculty development trainings per year on Zoom for all faculty members, with an average attendance of 20 faculty per session. Recordings

and resources from these sessions are posted on the OTL SharePoint site for those unable to attend. Examples of AY 2023/2024 trainings include "Do This, Not That: The Science Behind Great PowerPoint Presentations Using Multimedia Principles," "Rubrics and Student Outcomes," "Inclusive Language and Strategies in the Classroom," and "Managing Your Canvas Gradebook." Other sessions included "AI for Inclusive Education," "Flipped Classroom," "Successful Group Projects," and "Helping Students Stay on Track and Be Successful in Your Course." Additionally, Bite-Size Professional Development emails are sent to faculty, which include topics like "Authentic Learning Opportunities," "Creating Discussion Opportunities," and "Reflective Teaching Practice." They are 5-10-minute reads that provide quick and practical learning opportunities into their busy schedules.

The OTL developed a **SharePoint site** for faculty that includes resources on rubrics, course development, student mentoring, educational research, technology, and supporting diverse students. Resources on supporting diverse students including creating an inclusive classroom, trauma-informed pedagogical practices, and links to resources from other institutions. These resources are available to all faculty, whether they are primary instructional faculty or not.

The OTL also hosts regular Scholarship of Teaching and Learning **Community of Practice (CoP)** meetings for COPH faculty. The CoP enhances teaching and learning experiences by fostering educator collaboration and facilitating writing circles based on interests. It provides structured support and promotes continuous improvement by engaging instructional faculty in innovative educational practices.

The **UNMC Office of Faculty Development** provides faculty with teaching tools by offering various workshops and trainings, plus a website with resources. Provided resources are categorized into course preparation, teaching tips, and remote teaching and learning. Examples of workshops include handling emotional conversations with students, AI resources, empowering students, developing presentations, supporting students with accommodations, managing feedback, writing test items, teaching technology, bias checklist, universal design, writing learning objectives, and syllabus development.

The **UNMC Interprofessional Academy of Educators (IAE)** provides faculty and staff with opportunities to collaborate with a community of educators. The area of teaching is one of the focus areas. IAE provides resources on the website, including a teaching toolkit and launchpad. It also provides opportunities for peer feedback on teaching.

Annually, the College releases a call for nominations for a **teaching award** for instructors who demonstrate excellence in teaching and innovation in College courses. This award is for full- or part-time faculty with at least a 0.25 FTE appointment in the College. The award is considered for distinguished teaching, which may include classroom instruction which engages and inspires students; innovation in teaching methods; mentoring students with attention and care; and creating inclusive and supportive classroom environments. An ad hoc faculty awards committee reviews nominations and uses a rubric to select two winners: one for online teaching and one for on-campus teaching. Each award winner receives $3,000 in professional development funds.

To recognize and incentive exceptional teaching, the College developed a **salary supplement policy for teaching**. Faculty with at least a .5 FTE in the College are eligible to earn the $3,000 supplement if they earn at least a 4.5 average (on a 5-point scale) on both the instructor and course evaluation sections of the course evaluation surveys administered after each semester. The original intent of this policy was to administer the $3,000 award as a salary supplement, but due to campus administration pushback, this has been administered as professional development funds.

The **Accessibility Services Center (ACS) at UNMC** aims to cultivate an accessible and inclusive community where students with permanent and temporary disabilities have an equal opportunities to participate in all aspects of campus life. The ACS offers support to faculty to ensure they are able to meet the educational needs of students with accommodations in their courses.

3) Describe means through which the school ensures that all faculty (primary instructional and non-primary instructional) maintain currency in their areas of instructional responsibility. Provide examples as relevant. This response should focus on methods for ensuring that faculty members' disciplinary knowledge is current.

Faculty maintain currency in their areas of instructional responsibility through ongoing engagement in their fields of expertise. This includes attending discipline-specific conferences, attending conferences focused on public health (such as APHA, ASPPH, CSTE, etc.), and reading and publishing in discipline-specific journals. During annual performance evaluations, Chairs often review with faculty how they've participated in conferences or other trainings. For the MPH core courses, four of the five faculty who regularly teach those courses hold an MPH degree. The exception is Biostatistics, and that faculty member holds a Ph.D. in Statistics.

The University provides tuition remission for up to 15 credit hours per year within the University of Nebraska system for faculty who want to pursue additional coursework or training. In addition, faculty can use their professional development funds, if available, or seek College funds to obtain training.

4) Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement.

All faculty are reviewed annually during a performance evaluation with their chair. This evaluation includes an assessment of research productivity, grant funding, teaching effectiveness, and service. For faculty whose role is primarily teaching, the instructional effectiveness assessment is weighed more heavily.

Faculty advancement or promotion is determined by the promotion and tenure committee using the approved promotion and tenure guidelines. For associate professor promotion, significant achievement will be made in teaching and research and competence shown in service. For promotion to full professor, it is expected that the highest level of excellence will be achieved in either teaching or research, with continued achievement in the other area of emphasis. Faculty must demonstrate their teaching achievements by but not limited to courses taught and developed, student evaluations, teaching awards, students mentored, educational publications, among other.

5) Provide quantitative and/or qualitative information that characterizes the unit's performance over the last three years on its self-selected indicators of instructional effectiveness.

   Select at least three indicators, meaningful to the unit, with one from each listed category.

Indicator #1- Faculty Currency: **Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc**
Internal review of curricula and individual courses within COPH is a continual process facilitated by the director of the Office of Teaching and Learning.

The College of Public Health (COPH) Curriculum Committee is charged with evaluating current COPH DrPH, MPH, MS, MHA, and Ph.D. courses to ensure that quality measures of teaching and learning are present. This process occurs in collaboration with the Evaluation Committee, an ad hoc committee. If course improvements are needed to meet the quality standards, the Director of the OTL will forward the recommendations to the Assistant Dean for Academic Affairs and the department chair. In addition to ensuring quality courses at COPH, the process ensures we meet CEPH accreditation requirements for course reviews.

All COPH courses are reviewed on a rolling 3- and 5-year schedule. During the rolling schedule, courses required for any COPH curriculums will be reviewed once every three years, and electives/selectives will be reviewed once every five years, allowing for each course to be reviewed at least once during the accreditation cycle.

The course review team consists of three members, of which one faculty will be a member of the Evaluation or Curriculum Committee. The Director of Teaching and Learning and a faculty member from the course department will also be part of the review team. Each team of three will conduct the review using the following information.

- Course Syllabus: The review team will use the COPH Syllabus Review Checklist (ERF location) to review the syllabus for quality measures of teaching and learning, as outlined in the checklist. All syllabi from the past year will be used to review changes and ensure competencies are being assessed in all versions.
- Course Evaluation Scores and Comments: Course evaluation scores and comments related only to the course from the last three years will be reviewed by the team. If a course has been taught by more than one faculty member, the chair will be contacted to determine who participates in the course evaluation review.
- Course Reflection: Faculty must complete a course reflection before the review team accesses review materials.
- Canvas Review Checklist (in-class and online versions): A Canvas course space review checklist will be completed by the Director of Teaching and Learning or OTL team member and all online/in-person canvas reviews will be submitted to the review team as part of the course review.

Once the review process is completed by the review team a final report will be assembled compiling information from the four sources. The final report will be emailed to the ADAA, the department chair, and the faculty on record.

A copy of all the material used in the course review process can be found in the ERF at ERF->E->E3->COPH Course Review Process.

Indicator #2 - Faculty Instructional Technique: Student satisfaction with instructional quality
The course evaluations collect information on student satisfaction with instructional quality, as discussed above (E.3.) The course and instructor scores can range from 0 (poor) to 5.0 (excellent).

UNMC COPH Course & Instructor Evaluation Aggregated Scores, 2021-22 to 2023-2024			
	Course Score	**Instructor Score**	**Average Response Rate**
2021-2022	4.08±1.01	4.32±0.97	59%
2022-2023	4.05±1.08	4.39±0.97	70%
2023-2024	4.19±0.97	4.45±0.91	73%

Indicator #3- School- or program-level outcomes: **Implementation of grading rubrics**
COPH began the implementation of rubrics for course assessments in the 2018-2019 academic year. In 2020, the COPH Curriculum Committee began assessing rubrics for new courses being developed or re-designed. During the course review process, described above, rubrics are reviewed or added. Also, as the Assistant Dean for Academic Affairs reviews course evaluations at the end of each semester, she notes any courses with low scores and verifies whether rubrics are being used in course assessments. If rubrics are not being utilized, this recommendation is made to the faculty member and Chair.

The Office of Teaching and Learning (OTL) provides resources on their Sharepoint site for how to create rubrics, as well as several examples. In addition, the OTL held a faculty session on rubric development and will meet individually with instructors for technical assistance.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The Office of Teaching and Learning (OTL) is a significant asset to the College, providing professional development and instructional design support. The services provided by the OTL are likely responsible for the steady increase in instructor scores on course evaluations.
Weakness: COPH continues to strive to improve course scores on course evaluations. Although an increase was observed in the 23-24 academic year, we seek to have an average course score of 4.5 across the College.
Plans for Improvement: The OTL and Academic Affairs will develop a peer mentoring program for faculty and staff in academic year 2024-25 to be implemented in the 2025-2026. One of the areas for mentoring will include teaching and will serve as an opportunity for faculty who've demonstrated excellence in teaching to mentor junior faculty.

E4. Faculty Scholarship

The types and extent of faculty research align with university and school missions and relate to the types of degrees offered. For example, when doctoral degrees are offered, the school's research portfolio in those areas take on greater importance.

The school has policies and practices in place to support faculty involvement in these scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the school's definition of and expectations regarding faculty research and scholarly activity.

The College of Public Health defines research as a multifaceted process of investigation and inquiry that leads to the acquisition of new knowledge in public health and population science. This definition encompasses a wide range of scholarly activities, including creative activity, investigation leading to new knowledge, synthesis of new ideas, and the application of this knowledge to public health practice. These activities are not only central to the mission of the college but are also integral to faculty promotion and tenure (P&T) requirements. Faculty members are expected to engage in research and scholarly activities that contribute to the advancement of public health knowledge. Their work is evaluated based on its originality, impact, and relevance to the field, and successful research endeavors are a key criterion for career advancement within the college.

The college places a strong emphasis on the successful acquisition of extramural funds through peer-reviewed mechanisms and the publication of results in scientific literature. These traditional measures are given primary weighting in evaluating research productivity. However, consistent with the core functions of public health, the publication of research results in other venues, such as policy briefs, papers produced by research centers, and reports to public health agencies, is also considered evidence of research productivity.

Public health practice, defined as the collection and analysis of identifiable health data by a public health authority for protecting community health, is integral to the college's mission. Academic public health practice includes collaborations with international, national, state, or local health agencies to assess current public health problems or to plan, implement, or evaluate programs addressing these problems. These activities are considered scholarly and should be included in descriptions of research and scholarly activities. Public health service activities, such as membership on boards or committees and providing advice to public health entities, are categorized as service.

The college's expectations for faculty research and scholarly activity are comprehensive and apply to various faculty appointments. All faculty members are expected to produce a range of scholarly outputs, including but not limited to:

- **Publications**: Books (authored, co-authored, edited), chapters, monographs, journal articles, bulletins, reports, abstracts, and book reviews.

- **Creative Contributions**: Non-traditional scholarly outputs that demonstrate innovative thinking and application.
- **Grants**: Securing external funding, including documenting the dates, amounts, and roles (principal investigator or co-investigator).
- **Recognitions and Achievements**: Awards, prizes, and fellowships highlighting the faculty's contributions to their field.
- **Supervision of Student Research**: Mentoring and overseeing student research projects, including the number of theses and dissertations supervised.
- **Editorial Roles**: Serving on editorial boards or as editors for scholarly journals and publications.
- **Convention Papers**: Presenting research findings at professional conferences and symposia.

The College of Public Health employs a systematic approach to track each faculty member's publications and H-index across platforms such as Google Scholar and Scopus. Utilizing these tools allows the college to comprehensively monitor and assess the research productivity of its faculty. The tracking process ensures that all publications, including books, journal articles, monographs, and conference papers, are recorded accurately. Moreover, the H-index, which measures both the productivity and impact of an individual's scholarly output, provides further insight into the faculty's influence within their respective fields. This data is compiled and disseminated regularly through the Research Quarterly Report, which highlights the publications and achievements of faculty members across all departments. By showcasing these contributions quarterly, the college not only acknowledges the scholarly accomplishments of its faculty but also promotes a culture of transparency and collaboration in research endeavors.

The college's commitment to research is also reflected in its long-term strategic planning. The 2014-2020 and 2021-2026 Strategic Plans identify specific research-based objectives and indicators, which are tracked annually to measure the growth and impact of the college's research portfolio. The current research objectives include:

- **Increasing Grant Funding and Funded Researchers**: Aiming to expand the financial resources available for research and the number of faculty engaged in funded research projects.
- **Diversifying Funded Researchers and Projects**: Promoting a diverse range of researchers and research topics to enhance the breadth and depth of public health research.
- **Establishing a National Reputation in Research**: Striving to gain recognition as a leading institution in public health research on a national scale.
- **Involving Students in Research**: Actively involving students in research activities to enhance their educational experience and contribute to their professional development.

Through these objectives, the College of Public Health demonstrates its unwavering commitment to fostering a robust research environment that not only advances public health knowledge but also supports the professional growth of its faculty and students. The college’s strategic initiatives and rigorous evaluation processes ensure that faculty research and scholarly activity remain central to its mission and vision.

Faculty members are encouraged to develop a high level of teaching effectiveness alongside their research activities, ensuring that they contribute holistically to the college’s goals of improving public health through education, research, and service.

Service activities, including administrative and professional service within the university and broader community, are also crucial to the college's mission. Faculty members are expected to engage in service activities such as directing education programs, participating in scientific workshops, and serving on policy-making bodies. Professional service may also include leadership roles in professional associations, consultantships, service on advisory boards, and editorial duties. These activities, along with the faculty's research and teaching responsibilities, contribute to the overall mission and operation of the College of Public Health, ensuring a comprehensive and impactful approach to public health education and practice.

2) Describe available university and school support for research and scholarly activities.

The College of Public Health benefits from robust university and school support systems designed to foster research and scholarly activities. This comprehensive support structure is pivotal in enabling faculty and students to conduct high-impact research that addresses critical public health issues.

University-Level Support

Office of Vice Chancellor for Research

UNMC is home to a dynamic and innovative research community. The Office of the Vice Chancellor for Research (VCR) provides a plethora of resources to support researchers in their endeavors. Researchers at UNMC have access to world-class facilities and a collaborative community of skilled professionals who focus on cutting-edge fields such as transplant medicine, cancer research, neurodevelopment, and genomics. The Office facilitates the identification and exploration of critical questions that lead to groundbreaking discoveries and life-changing therapies.

Research Information Technology Office

This office offers a suite of IT solutions to support research activities, including pre-proposal planning, analysis software and hardware, and secure data storage throughout the life of a research project. Some examples of available software and applications include:

- REDCap: A secure web application for building and managing online surveys and databases.
- MATLAB: A multi-paradigm numerical computing environment.
- ELAb Suite: A laboratory information management system.
- EndNote: Reference management software.
- BioRender: A tool for creating professional science figures.

High-Performance Computing Resources

UNMC offers high-performance computing resources to support complex data analysis and simulations, including:

- GPU based A100-DGX system
- CPU based INBRE cluster
- Holland Computing Center (HCC) at Peter Kiewit Institute
- National Super Computing Network (XSEDE)

College-Level Support

Research Integration and Multidisciplinary Collaboration

The COPH promotes innovative, interdisciplinary research to understand and address public health challenges. Faculty members often collaborate across various centers and departments within the

college, as well as with other faculties and community partners. This multidisciplinary approach enriches research outcomes and fosters comprehensive public health solutions.

Center for Collaboration on Research Design and Analysis (CCORDA)
COPH's Center for Collaboration on Research Design and Analysis plays a pivotal role in supporting research and scholarly activities at UNMC and throughout the region. The Center's mission is to advance clinical, basic, translational, and public health research by providing expert guidance in quantitative sciences such as biostatistics, epidemiology, and health services research. Through its collaborative approach, the Center assists researchers in the design, planning, conduct, analysis, and interpretation of studies across various disciplines, ensuring that their research is of the highest quality, integrity, and validity. Additionally, the Center offers educational training opportunities for graduate students and investigators, further enriching the research ecosystem. With services that include research design, data acquisition and management, and statistical analysis, the Center is an indispensable resource for researchers seeking to enhance their work and contribute to the advancement of public health knowledge.

Financial Administrators
Financial administrators in the College of Public Health play a crucial role in supporting research and scholarly activities by ensuring that the financial aspects of research projects are managed effectively and efficiently. They assist faculty and researchers in budgeting for grant proposals, managing research funds, and ensuring compliance with university and funding agency regulations. By overseeing the financial planning and management of research projects, they help to secure the necessary resources, track expenditures, and provide financial reports that are essential for the successful completion of research initiatives. Their expertise in navigating the complexities of funding, including grants and contracts, allows researchers to focus on their scholarly activities, knowing that the financial aspects of their work are in capable hands. This support is vital for the sustainability and growth of research within the college, enabling faculty to continue contributing to public health knowledge and advancing their academic careers.

Diversifying Funding Portfolios
Diversifying funding portfolios is essential for increasing the success and sustainability of research within the College of Public Health (COPH). By expanding the range of potential funding agencies, COPH investigators can enhance their chances of securing more awards. This approach involves not only submitting a higher volume of applications but also strategically managing these applications from the initial concept through to the final submission. To support this effort, the Research Development Services (RDS) team has developed a comprehensive database of COPH investigators' research keywords, which is used to identify relevant funding opportunities through platforms like Grants.gov.

To further promote diversification, the GDS actively searches for funding options and shares them with principal investigators (PIs) to broaden their awareness of available agencies. Once potential funding sources are identified, they are promptly distributed to COPH investigators via email. In 2023 alone, 272 funding opportunities were shared with investigators across all areas of the college, underscoring the importance of a diversified funding strategy in fostering research growth and innovation.

COPH Innovation Fund (seed funding)
In summer 2022, the request for applications was updated for the COPH Innovation Fund. Overseen by the ADR, the Innovation Fund is an investment in current college strengths and seeks to help COPH investigators develop their ideas into solid research programs. It is expected that all COPH Innovation Fund projects will enable the investigator team to compete for extramural funding. As a condition of the awarded funds, the team will commit to sharing meaningful results through presentations at professional conferences, publishing manuscripts in high-impact journals, and submitting future proposals for extramural funding.

The recent COPH Strategic Planning (in 2022) uncovered the need for mentoring at all levels of one's academic career and for research mentoring in particular. The 2022 Innovation Fund encouraged the inclusion of mentor(s) in the project's design and offered financial incentives to willing mentors. Up to $1,000 was offered to the primary mentor who plays a pivotal role in guiding the principal investigator (PI) in completing the preliminary study and submitting applications for extramural funding in medium and

large projects. The proposed design and goals determined the duration and budget needed. The decision about the scope of a proposed project was passed to the investigators, who drafted the proposal, scope of work, and the corresponding budget to match the needs. The scope and length of the project were discussed during a 1:1 planning session with the ADR and RDS.

The GDS administered this seed funding, including tasks such as finalizing RFA; meeting with LOI PIs; receiving final proposals; compiling list of potential reviewers; contacting each reviewer with their proposal to read; organizing the virtual, synchronous review sessions; sending award letters to funded PIs; and ongoing communication for tracking of progress and final reports.

Grants Development Specialist and Research Support Coordinator

The COPH employs dedicated staff to support research and funding efforts:

- Grants Development Specialist (GDS): Provides information and resources about internal and external funding opportunities and assists with grant submissions.
- Research Support Coordinator (RSC): Supports all faculty and students with their research needs, including coordinating with other institutions and teaching research methodologies.

Expanding the number of potential funding agencies can increase the number of possible awards received by COPH investigators. Increased funding results from submission of more applications that have been planned and managed from idea conception all the way to the final deadline day. To summarize the varied expertise in the College, the GDS developed and uses a database of COPH investigators' research keywords to help search for funding opportunities using search tools such as Grants.gov. The GDS also searches for options and shares with PIs to help expand awareness of funding agencies. After the possible funding options are located, the opportunities are distributed to COPH investigators via email. In calendar year 2023, 272 opportunities were shared with investigators from all areas of the College.

There are multiple additional ways the GDS and RSC support research and scholarly activity among faculty, including proposal preparation, training and outreach, and research communication.

Proposal preparation:

Document Drafting

The GDS continues to refine and keep updated documents for common usage across the College. An assortment of templates has been developed for use when submitting proposals that include National Institutes of Health and National Science Foundation formatted biosketches, letters of support, cover letters, a consortium-contractual arrangements document, a multiple PI Leadership Plan, and a facilities document for college-wide use.

Editing of Documents

Editing is available as needed. The GDS is not a subject matter expert but a critical reader and writer. COPH investigators access editing expertise in different ways. Some provide a penultimate proposal that needs only copy editing. Others may send very rough and early outlines of their ideas and ask for help in turning the thoughts into cohesive paragraphs. The RDS's editing skills ensure that the investigators' needs are met through customized document preparation for their applications for extramural support.

Proposal Preparation Support

The COPH submitted 124 proposals to extramural sources in 2023. The GDS provided development and management for 74, or 60%, of all submissions. Eighty-four of these proposals were led by COPH (identified as grants in internal reports, vs. subcontracts or contracts). The support provided was based on each investigator's needs and requests. The research development (RD) committee assistance covers a range of areas: 1:1 meeting for overall discussion and project conceptualization, copy editing, document template drafting, providing and managing a writing schedule of iterative drafts, convening regular team meetings, collection and storage of documents, overall editorial review, and other help as determined by each PI.

Training and outreach.

Training
In an effort to increase the submissions of proposals for extramural funding, the ADR and GDS initiate and conduct training events for COPH faculty, staff, and students. The team organized and presented ways to ensure compliance with common issues experienced in NIH proposals and provided numerous “drop in” opportunities for COPH investigators to ask questions about proposal preparation. Other training topics include “how-to” sessions on using EndNote, the data found in NIH RePORTer, and moving from co-investigator to PI. All COPH members, including students, are invited to all training sessions. In addition, the RD committee holds fellowship training in both fall and spring semesters to encourage students to feel comfortable pursuing the application process for F31 funding from the NIH.

Strategic Planning
The ADR and GDS attended a 2-day Strategic Planning retreat for the COPH in May 2022. Common themes that emerged from the planning process were organized into four areas. One of them, Igniting Innovation in Scholarship, has involved the ongoing efforts of the RD committee. They attended brainstorming sessions in September 2022 and are responsible for updates related to this initiative in UNePlan, UNMC’s web-based tracking portal. To ensure they are aware of their potential assistance, both the ADR and GDS meet with all new faculty (and some staff members) during their onboarding process. During these meetings, they discuss ways to meet their research goals and what COPH resources may be needed.

Collaborations
The RD committee, comprised of the ADR and GDS, makes concerted efforts to forge meaningful research collaborations. They encouraged investigators to collaborate with colleagues from within the COPH, other UNMC colleges, and other universities and institutions, including:

- Kansas City University’s Doctor of Osteopathic Medicine program
- University of Nebraska-Lincoln’s College of Journalism and Mass Communications
- University of Nebraska at Omaha’s College of Education, Health, and Human Sciences
- Community partners

They held introductory and ongoing meetings to stoke relationships with KCU and UNO. Future activities will continue to develop these collaborations.

<u>Research communication</u>
Drafting and Editing of Research Quarterly Report
In 2020, the ADR conceived of a regular communication tool for COPH faculty, staff, and students that celebrates and highlights research and productivity in the College. The COPH Research Quarterly Report (RQR) was first published in the 3rd quarter of CY 2020 and describes applications, funding, publications and awards, funding opportunities, and research compliance. The newsletter is created using PowerPoint, and no additional costs for its publication have been added. Data are pulled from monthly reports provided by the Assistant Dean of Finance, and original articles are written that feature COPH projects and investigators. The RQR has an email distribution list of 800 recipients and is also posted on the COPH intranet website.

Promotion of Extramural Funding
To ease the burden on COPH investigators, documents have been drafted for use to stimulate and assist in proposal development. Included in those are a menu of pre-award services, an annual calendar of funding opportunities, Student Resources, and Student Investigator Expectations. The GDS also writes press releases on new grant awards received by the College for dissemination across the campus and broader university communities.

Public Health Innovation and Research Expo
The COPH hosts an annual Midwest Public Health Innovation and Research Expo (PHIRE) each fall to celebrate public health research. The event has had rotating academic co-sponsors, as well as support from the Great Plains IDeA-CTR (U54 GM115458). These partners help promote this event and contribute to the scholarship shared. The all-day event takes place in UNMC’s Maurer Center for

Public Health on the Omaha campus and enables faculty, students, and stakeholders to meet collaborators and community and clinical partners, showcase their research, hear updates from UNMC COPH Innovation Fund investigators, and brainstorm innovative ideas for federal funding.

The event includes oral and poster presentations with topics ranging from communication and public health to economic analysis of health interventions to global health issues. Many in attendance are COPH faculty, students, and staff, but there are also presenters and registrants from UNMC's other colleges. A virtual option is available to those who cannot attend in person, including the growing number of COPH's online students.

3) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities. This response should focus on instances in which students were employed or volunteered to assist faculty in faculty research projects and/or independent student projects that arose from or were related to a faculty member's existing research.

The COPH encourages faculty to involve students in their research projects, providing them with hands-on experience and mentorship. This approach not only enhances the educational experience but also cultivates the next generation of public health researchers.

Example #1:

The College of Public Health provides numerous opportunities for MPH and PhD students to engage in faculty-led research projects. One notable example is Moses New-Aaron, a student in the Environmental, Agricultural & Occupational Health (EAOH) department, who exemplified the successful involvement in faculty research. Moses was deeply engaged in research activities under the mentorship of faculty at the EAOH.

During his time at the college as an MPH student and a PhD student, Moses contributed significantly to the field through his research on several different topics. This included his dissertation on the hepatocyte-hepatic stellate cell axis in potentiation of alcohol and HIV-induced liver injury. He was awarded a prestigious F31 fellowship grant and co-authored 49 papers, demonstrating his extensive involvement in scholarly activities.

Moses's dedication and research excellence were also recognized through other awards, including the Student Researcher Award at the Midwest Public Health Innovation and Research Expo, the Sparks Student Award, the Memorial Award, and the Student Merit Award from the Research Society on Alcoholism, as well as a North American Graduate Fellowship from the American College of Toxicology.

Through these research opportunities, Moses gained invaluable experience in conducting high-level research, contributing to publications, and presenting findings at conferences. His achievements underscore the vital role that faculty-student collaborations play in advancing public health knowledge and providing students with meaningful, hands-on research experiences.

Example #2:

Our college also provides multiple avenues for PhD students to actively engage in faculty-led research, leading to substantial academic and professional growth. Aislinn Rookwood, a former PhD student in the Health Promotion department, exemplifies the success that can come from these opportunities.

Under the mentorship of Dr. Regina Idoate, Aislinn co-authored 12 papers, showcasing her active participation in research during her studies. Throughout her time as a student, Aislinn took on multiple roles working under faculty members that enriched her research skills and professional development. She served as a public health researcher, a Youth Enjoy Science (YES) Program Manager, and a Research Manager. These positions allowed her to apply her academic knowledge in practical settings, manage research projects, and contribute to the field of health promotion.

Aislinn's dedication and accomplishments as a PhD student were recognized and rewarded. Her exceptional work and commitment to public health research paved the way for her current role as an Assistant Professor in the Health Promotion department at CoPH, UNMC. This transition from student to faculty member highlights the significant impact that involvement in faculty research can have on students' careers, providing them with the experience and credentials needed to advance in academia and beyond.

Example #3:

MPH students are also given opportunities to work under faculty members, preparing them to enter the workforce or continue onto even higher education. Andrew Kochvar, a recent MPH graduate who completed their MPH program while finishing the last two years of medical school through a partnership with Kansas City University Medical School's DO program, exemplifies this success. As a graduate research assistant under Dr. Daisy Dai in her lab: Population Dynamics and Health Equity, Andrew played a crucial role in multiple studies.

Andrew's work with Dr. Dai involved significant contributions to manuscript writing and analyses, resulting in publications such as "Biomarkers of metal exposure in adolescent e-cigarette users: correlations with vaping frequency and flavoring" and "Genetic and environmental influences on early-age susceptibility and initiation of nicotine-containing product use: A twin-pairs study." His involvement in these projects allowed him to hone his research skills and contribute valuable insights to the field.
In recognition of his outstanding research and academic performance, Andrew received the Outstanding Capstone Award for the best capstone project in Spring 2024. Additionally, his exceptional work in both his DO and MPH programs, as well as his contributions to public health research, earned him the 2024 Excellence in Public Health Award issued by the US Public Health Service.

Andrew's journey highlights the significant impact of faculty-student research collaborations at our college, providing students with the experience, recognition, and credentials needed to excel in their careers.

Example #4:

All students in the college have numerous opportunities to engage in research, whether by participating in faculty-led projects or pursuing independent studies related to faculty research. Faculty advisors frequently invite students to join their research initiatives, and students are also encouraged to proactively reach out to faculty members to explore research roles. The college supports student research through various avenues, including faculty mentorship, training in research methodologies, access to scientific tools, and guidance on securing extramural funding.

One prominent example is the COPH Student Research Conference, organized annually by the COPH Research and Development Committee. This event offers a platform for students to present the results of their mentored research projects. Awards are conferred to five master's and five doctoral students for outstanding presentations, and awardees are encouraged to present their work at the American Public

Health Association conference. Additionally, the Public Health Innovation and Research Expo, held in the Fall, provides students with travel awards and the chance to showcase their research at a conference focused on health equity.

COPH also offers internal funding opportunities to support student research. The "Chancellor Robert D. Sparks" research awards are given annually to predoctoral students who have made exceptional contributions to Health Promotion and Disease Prevention. Similarly, the Suzanne and Ward Chambers Summer Global Health Fellowship funds two students each year to engage in global health projects, providing up to $4,000 for travel and project-related expenses.

Training is another critical component of student research involvement. COPH offers training events, including Grand Rounds and sessions on research software tools and funding strategies, all of which are open to students. Furthermore, all doctoral students involved in human subject research must complete the CITI Program's Basic Biomedical RCR Modules, covering essential topics such as Research Misconduct and the Protection of Human Subjects.

Students are also encouraged to apply for extramural funding, with COPH students eligible to serve as principal investigators on grant applications. These grant proposals are submitted through the COPH Financial Administrators to the UNMC Office of Sponsored Programs Administration. Faculty members provide close mentorship to ensure that students' research aligns with the mission of potential funders and adheres to the sponsor's guidelines.

Through these opportunities, COPH students gain valuable experience in conducting rigorous research, presenting their findings at national conferences, and contributing to the field of public health, all while receiving strong support and mentorship from faculty. This comprehensive approach ensures that students are well-prepared to become independent and productive scientists in the public health arena.

4) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students. This response should briefly summarize three to five faculty research projects and explain how the faculty member leverages the research project or integrates examples or material from the research project into classroom instruction. Each example should be drawn from a different faculty member, if possible.

Through the integration of research and teaching, our faculty and research director ensure that students actively participate in the research process. This approach not only enhances their learning experience and deepens their understanding but also fosters critical thinking, encourages innovation, and prepares them for the practical challenges they will face in their future careers.

1. **Dr. Lynette Smith – Statistical Replication Course**

Dr. Lynette Smith, an associate professor in the Biostatistics department, has developed an innovative Biostatistical Replication Capstone Course to enhance students' understanding of statistical methods through practical application. This course allows students to gain hands-on experience by performing an internal replication of existing studies, thereby deepening their comprehension of the methodologies and analyses used in the original research.

In the course, Dr. Smith leverages her expertise and ongoing research projects to create a dynamic and interactive learning environment. She integrates the replication studies directly into the course curriculum, allowing students to engage with actual data and research questions. This practical approach helps students understand the importance of clarity in scientific writing, statistical rigor and the implications of research findings.

Dr. Smith's current course involves mentoring two MPH students, Mallory Hayes, who is replicating and advancing a neurocognitive study that utilized adolescent brain cognitive development (ABCD) data. The second student, Jamila Nassir, is replicating a study using data from the Youth Risk Behavior Surveillance System (YRBSS), looking at physical activity behaviors in high school students and their change during the COVID-19 era. Previous students have used the YRBSS and the National Surgical Quality Improvement Program (NSQIP) data for replication studies. The objective of these educational efforts is to ensure the reliability and validity of the findings from the original studies and to provide students with valuable insights into the complexities and challenges of real-world data analysis. Dr. Smith guides students through the process of data extraction, analysis, and interpretation, demonstrating the application of various statistical techniques. By working on these real-world projects, students learn to critically evaluate the methodologies used in published research, identify potential sources of bias or error, and understand the importance of reproducibility in scientific research.

2. **Dr. Aaron Yoder – CS-CASH**

Dr. Aaron Yoder, an Associate Professor in the EAOH Department and a leader in the Central States Center for Agricultural Safety and Health (CS-CASH), integrates his extensive research into classroom instruction to enrich student learning. His research primarily focuses on agricultural safety and health, addressing critical issues such as tractor and machinery injuries, stress and mental health among agricultural workers, and respiratory diseases in animal production.

Dr. Yoder actively involves students in CS-CASH's research projects and outreach efforts, providing them with hands-on experience in conducting research, analyzing data, and communicating findings to diverse agricultural communities. This engagement allows students to apply classroom knowledge to real-world scenarios, fostering critical thinking and problem-solving skills essential for their future careers in public health and agricultural safety.

Additionally, Dr. Yoder's collaboration with agricultural safety and health organizations and UNMC extends to the annual Agricultural Health and Safety Course for Medical and Safety Professionals held each summer. This course offers students and health professionals the opportunity to delve into key health and safety issues specific to rural and agricultural workers. Participants, including physicians, nurses, emergency responders, educators, and safety specialists, benefit from practical, evidence-based learning that can be directly applied in their professional practice. The course also provides networking opportunities and qualifies participants for various continuing education credits, further enhancing their expertise in agricultural health and safety. Through these initiatives, Dr. Yoder ensures that both students and professionals are well-prepared to address the complex challenges and improve health outcomes in agricultural settings.

3. **Dr. Jungyoon Kim – CRCS and SURP**

Dr. Jungyoon Kim, an Associate Professor in the Department of Health Services Research & Administration, consistently engages in research that addresses racial disparities in colorectal cancer screening (CRCS). Her work aims to increase screening rates among African Americans through community-based programs and evidence-based interventions.

Dr. Kim's current project involves developing and evaluating a community-based CRCS program targeting African Americans. This initiative uses home-based stool tests (FIT) and culturally tailored educational materials, along with a unique multi-sector community collaboration (e.g., Department of Motor Vehicle), to overcome structural barriers to healthcare access. Dr. Kim and her collaborator, Dr. Keyonna King,

provide mentorship to undergraduate students through the UNMC Summer Undergraduate Research Program (SURP), where students gain firsthand experience in public CRCS health research by participating in various stages of the community-based project, such as conducting an exit interview with study participants to identify factors to further improve the reach of the intervention. Dr. Kim also mentors a PhD student and an MHA student working on this project, encouraging and guiding them to participate in publication and conference presentations (e.g., APHA).

Dr. Kim plans to use her colorectal cancer screening project as a case study in her classes. She will utilize this study to guide students through the entire research process, from identifying research questions and conducting literature reviews to designing interventions and analyzing data. This approach allows students to engage with actual data and understand the complexities of public health research. Because she uses her own research in class, she will be able to discuss the challenges that come along with the specific research topic, such as recruiting participants or ensuring the cultural relevance of educational materials. By addressing these issues in class, Dr. Kim not only reinforces theoretical knowledge but also provides students with practical skills in research design, data analysis, and community engagement.

Through this integration of research and teaching, Dr. Kim ensures that students are active participants in the research process. This approach enhances their learning experience, prepares them for future careers in public health, and fosters a deeper understanding of the importance of addressing health disparities.

5) Describe the role of research and scholarly activity in decisions about faculty advancement.

The College of Public Health (COPH) has a mission to promote optimal health and well-being through robust education, research, and service in collaboration with communities in Nebraska, across the country, and around the world. Results of rigorously designed and ethically conducted research inform the ways public health practice can reduce health disparities and help improve health outcomes among all populations. COPH investigators undertake research in their respective fields.

Research is a crucial component for quantifying scholarly impact of COPH faculty members. The Promotion and Tenure Guidelines specify that for consideration of promotion and tenure, faculty must demonstrate excellence in research or other scholarly activities. Acquisition of extramural funding and peer review publications are the primary methods for measuring research. The COPH also considers publications that are done in service to public health (e.g., policy briefs or reports for public health agencies) as evidence of scholarly productivity. Activities undertaken in pursuit of public health practice also factor into promotion and tenure considerations.

When applying for promotion and tenure, COPH faculty must provide documentation of their research record. The metrics presented include H-index (from Scopus), number of peer-reviewed publications, % of effort covered by both extramural and intramural funding, number of graduate assistants funded by extramural funding, and competitive national grants received (noting if they serve/d as principal investigator).

Effort funded by extramural funds quantifies productivity for COPH faculty, and there are expectations of partial salary coverage for Assistant Professors (31%) and Associate Professors and Professors (50%). To stimulate this pursuit, the College provides incentives through 1) a salary program whereby up to 25% of one’s base University salary can be returned to researchers through salary supplements; and 2) the return of indirect costs to the level at which they were generated.

The infrastructure in place to support the research enterprise is led by Dr. Daisy Dai, Associate Dean of Research (ADR), and Wendi Jensen, Research and Grants Development Specialist (GDS). The COPH added the 1.0 FTE GDS position in 2019 to help enhance investigators’ competitiveness for extramural funding and ultimately increase research expenditures and output. Research development contributions to COPH research can be categorized in five domains as described below. The varied RD committee

activities are carried out by the GDS in close collaboration with the COPH's financial administrators. The efforts to enhance the College's culture around research, extramural funding, and increasing outcomes for public health has begun to yield more NIH applications and funding, as well as overall growth in research expenditures.

6) Provide quantitative data on the unit's scholarly activities from the last three years in the format of Template E4-1, with the unit's self-defined target level on each measure for reference. In addition to at least three from the list in the criteria, the school may add measures that are significant to its own mission and context.

Template E4-1: Outcome Measures for Faculty Research and Scholarly Activities				
Outcome Measure	**Target**	**Year 1 2021-22**	**Year 2 2022-23**	**Year 3 2023-24**
Number of articles published in peer-reviewed journals	5 per person	5.12 per person	6.45 per person	6.175 per person
Total Research funding	$17,000,000	$17,322,374	$20,831,838	$28,159,502
Number of grant submissions	100	117	112	143

Over the three years, there has been a noticeable increase in research productivity, with the number of articles published in peer-reviewed journals rising from 5.12 per person in Year 1 to 6.45 per person in Year 2 and maintaining a strong output at 6.175 per person in Year 3. This demonstrates a consistent commitment to scholarly publication.

In terms of research funding, there was significant growth each year, starting at $17,322,374 in Year 1, increasing to $20,831,838 in Year 2, and culminating in an impressive $28,159,502 in Year 3. That is an increase of nearly 63% in total research funding from Year 1 to Year 3.

Over the three-year period, the number of grant applications submitted showed a promising upward trend, highlighting a growing dedication to securing grant funding. Although the number of grant submissions dipped slightly from 117 to 112 between Years 1 and 2, there was a remarkable rebound in Year 3, with applications surging to 143. This increase suggests a renewed effort and enhanced capacity in pursuing external funding opportunities.

Overall, these metrics underscore a robust and dynamic research environment with a strong focus on publication and ambitious funding pursuits.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The research development efforts undertaken in the COPH are critical for enhancing the competitiveness of development and submission of public health proposals for external funding. The growth in applications and research expenditures continue to validate the importance of providing researchers with support as they focus on their public health scholarship. Increased prime applications to the NIH exemplify this progress.

Weaknesses: We recognize that we would like to see more research grant applications from new and junior faculty.

Plans for Improvement: We will implement a mentorship resource hub to offer guidance and support, ensuring that COPH investigators and students have access to the tools and expertise they need to thrive in their research endeavors. Additionally, based on the identified lack of mentorship and need among junior investigators for assistance with procurement of extramural funding, the GDS and ADR will pilot a Junior Faculty Research Career Development Cohort. This 12-month program will provide tailored monthly seminars for an initial cohort (n=5). The vision of these efforts is to prepare COPH junior faculty for successful conduct of both mentored and independent research.

E5. Faculty Extramural Service

The school defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the school's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the school's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

Service activities are important to the overall mission and operation of the COPH. Extramural service is defined as service that will positively impact the community and profession. Extramural service includes the direction, consultation, and technical assistance of local and national/international public health programs, community-based organizations, scientific workshops, and policy-making bodies. Evidence of extramural service may also take the form of education and leadership of peer professionals. The latter would be indicated by election or appointments to offices in local, state, or national professional associations and societies, consultantships, service on advisory boards, service on editorial boards or as a manuscript reviewer, invited professional lectureships, and so forth. Relevant community or public service, particularly as it relates to the faculty member's professional competence, is encouraged and is a required review criterion for promotion and tenure. Additionally, all faculty are provided FTE support for extramural service.

2) Describe available university and school support for extramural service activities.

Extramural service is broadly defined to include professional and scholarly service and community-engaged service. The COPH recognizes service as part of promotion and the annual performance review process. All faculty receive salary support to meet their service expectations. Regardless of rank, all faculty members in the COPH, receive up to 15% FTE salary support to participate in service and engagement activities.

In addition to salary support, UNMC and the COPH offer resources that faculty can use to enhance their extramural service activities, foster collaboration and engage effectively with the community.

UNMC is designated as a Community Engaged Campus by the Carnegie Foundation, one of four medical schools and the first health professions university in the nation to be so designated. The Office of Community Engagement (OCE) at the University of Nebraska Medical Center (UNMC) supports faculty in developing and executing co-curricular community engagement projects. The OCE connects faculty with community partners, providing resources and guidance to transform ideas into impactful projects. Faculty can access current engagement initiatives, an extensive network of community partners, and resources for event planning. The OCE's support can help faculty publish their engagement work and leverage it for career advancement.

For faculty involved in clinical and translational research, the Clinical Research Development Fund, established by Nebraska Medicine in partnership with the UNMC College of Medicine and the Center for Clinical & Translational Research, provides pilot grants. These grants support faculty needing preliminary data for extramural research applications or those facing budget shortfalls in extramurally funded clinical

trials. Additionally, the Clinical Research Center (CRC) at UNMC offers a range of services to support clinical research, providing faculty with essential resources and education to improve research outcomes.

At the school level, COPH offers robust support for faculty engaged in extramural service activities through various specialized centers and offices. The Office of Public Health Practice plays a pivotal role in bridging academic research and practical public health initiatives. It provides faculty with opportunities to apply their research to real-world public health challenges, enhancing community health outcomes through evidence-based practices. This office supports faculty in developing and implementing public health programs that address critical health issues locally and beyond. In addition to the Office of Public Health Practice, COPH hosts seven specialized centers dedicated to supporting faculty in their extramural service endeavors. These seven centers collectively provide comprehensive support for faculty, enabling them to make significant contributions to public health and community well-being through diverse and interdisciplinary initiatives.

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students. This response should briefly summarize three to five faculty extramural service activities and explain how the faculty member leverages the activity or integrates examples or material from the activity into classroom instruction. Each example should be drawn from a different faculty member, if possible.

Examples are summarized in Table E5.1

Faculty Member	Description
Keyonna King	An exemplary faculty extramural service activity at UNMC is demonstrated through the contributions of Dr. Keyonna King within the Fred & Pamela Buffett Cancer Center's Office of Community Outreach and Engagement (COE). Dr. King, provides service as the assistant director of community-engaged research for the Cancer Center. In this capacity, she dedicates her efforts to promoting and facilitating community-engaged research initiatives, emphasizing collaboration, communication, and mutual benefits between researchers and community stakeholders. Her work involves developing and implementing cancer education and screening events in collaboration with Nebraska Medicine and UNMC, aiming to enhance public health outcomes and foster strong community partnerships. Dr King brings these experiences and several others in her role with Center for Reducing Health Disparities into her HPRO 915 Foundations of the CBPR Approach. In this course students partner with a community based organization and complete a service learning project using the Community Based Participatory Research Approach.
Dana Verhoeven	Dr. Verhoeven leads an evaluation project of the Winnebago Home Visitation Program for the Winnebago Tribe of Nebraska Health Department. Dr. Verhoeven uses lessons learned and experience from this project around team dynamics, care coordination, and multiteam systems to create case studies and discussion board posts in CPH 580 Health Care Organizational Theory and Behavior.
Sharon Medcalf	Dr. Medcalf is the director of emergency preparedness professional academic programs at the COPH. Dr. Medcalf is also the faculty advisor for the COPH Student response team. Dr. Medcalf’s is often called on to activate the student response team during extreme event situations like floods, tornadoes, or infectious disease outbreaks. Dr. Medcalf is also represents UNMC on the WHO Global Outbreak Alert and Response Network (GOARN). GOARN provides international public health resources to control outbreaks and public health emergencies across the globe. Dr. Medcalf uses these experiences in the development and instruction of the MPH and DrPH degrees in Emergency Preparedness. Dr. Medcalf teaches several courses in both degree programs.

4) Provide quantitative and/or qualitative information that characterizes the unit's performance over the last three years on the self-selected indicators of extramural service, as specified below.

Select at least three of the indicators listed in the criteria document that are meaningful to the school. In addition to at least three from the list in the criteria, the school may add indicators that are significant to its own mission and context.

Recommendations for self-selected indicators were made by the COPH EC after reviewing the indicator options and their relationship to our COPH mission, vision, values, and goals. The final indicators were selected by our Deans and Chairs committee.

Self-Selected Indicators:

1. Percent of faculty (specify primary instructional or total faculty) participating in extramural service activities

As part of the annual COPH Faculty Survey, faculty members are asked if they have participated in extramural service activities and are provided with a list of examples. Both quantitative and qualitative information is collected from respondents. Full copies of the survey results for the years listed are available in the ERF at ERF->E->E5.

Table EX.X - Percent of Total Faculty Participating in Extramural Service Activities, 2020-21 through 2023-24		
Year	Response Rate	Percent of Total Faculty Responding 'Yes'
2020-2021	72.6% (n=53)	74.5%
2021-2022	68.2% (n=58)	84.9%
2022-2023	74.4% (n=67)	74.6%
2023-2024	TBD for Final Self Study	TBD for Final Self Study

COPH Faculty members are involved in variety of different types of extramural service activities. Many serve as journal reviewers and on grant review committees. Several faculty members are involved with the Public Health Association of Nebraska (PHAN) Board of Directors and its committees. Besides serving on the boards of public health departments, our faculty members also serve on the board of local public health-adjancent community groups, like I Be Black girl, the March of Dimes, and the Nebraska Children's Home Society.

2. Number of community-based service projects

Community-based service projects are important to the UNMC COPH. Information about service projects is shared out through the College's COPH Drops college-wide newsletter and the COPHee Talk student newsletter, as well as through project specific emails. COPH faculty, as well as staff and students, have been involved in community-based service projects such as park clean-ups, ATV and agricultural safety presentation at rural school districts, refugee health fairs, menstrual product drives, and information booths at local community events, such as Earth Day, Cinco de Mayo, and Husker Harvest Days. A few additional community-based service projects are highlighted below:

- COPH Community Garden: In 2023, a COPH faculty member started a Community Garden on empty land near the COPH building. The garden was planted and tended by COPH faculty members, staff, and students, as well as students from other programs on campus. Produce from the garden was donated to several local food banks and pantries, with hundreds of pounds

of produce being donated over the course of the growing season. Due to student housing construction, the garden had to be moved in 2024 and became a campus-wide initiative. The number and size of beds were expanded, more garden locations were added on campus, and more student groups and research departments took ownership of maintaining garden boxes.

- Public Health Emergency Responses: Faculty in the COPH are leaders in establishing, and recruiting volunteers for, responses to public health emergencies. During the initial months of the COVID-19 pandemic, COPH faculty were instrumental in recruiting and facilitating training for contract tracers, as well as establishing and staffing COVID testing sites in the hardest hit parts of the Omaha community. In early 2024, COPH Faculty were called again called upon to help implement and recruit student volunteers for a mass testing clinic after an active-TB exposure at an Omaha daycare. In late-April 2024, the Omaha metro was stuck by several tornados. COPH Faculty organized a Community Assessment for Public Health Emergency Response (CASPER) in two Nebraska Counties. COPH faculty, staff, students, and other volunteers went door-to-door in Washington County, and helped conduct a mail survey in Douglas County, asking the community about early weather warnings, the physical and mental health impact of the storms, and the communication before, during and after the tornados.

- Agricultural Safety: The faculty members who are part of the CS-CASH team provide valuable community services to people throughout the Midwest. Each year, faculty members travel around the state of Nebraska to provide Tractor Safety Training courses. These are held in rural communities throughout the state and provide 14- and 15-year-olds with the opportunity to receive training and safety information on tractor operation. This allows them to obtain a certification that allows them to legally work on local farms. For the past two years, the team has also worked to make the annual Agricultural Health and Safety Course offered by the COPH free to public health and medical professionals. Over the course of four days, attendees learn basics about health issues related to various aspects of agriculture, basics of PPE and hazard avoidance, and tour an active agricultural operation to see potential hazards and their prevention measures in action.

3. Public/private or cross-sector partnerships for engagement and service.

The COPH values public/private and cross-sector partnerships that lead to opportunities for engagement service. During the Covid-19 Pandemic, faculty from the College worked together with local school districts to develop playbooks and assessment around returning students and teachers to the classroom safely. The College has also established a relationship with a local nonprofit, Partnership 4 Kids (P4K). P4K workes with over 3,000 pre-kindergarten through postsecondary students in the Omaha area, focusing on students who grow up in underserved neighborhoods. P4K has three main components: Literacy & Goal Setting, for students in grades pre-k through 6$^{th;}$ College & Career Readiness, for students in middle and high schools; and Postsecondary & Workforce Development, for high school students and beyond, to help bridge the gap between school and the workforce. The College has representatives from P4K come speak to facutly and staff about opportunities for involvement, a College administrator sits on the board of P4K, and College employees are encouraged to serve as mentors for P4K students.

In 2015, UNMC established an Office of Community Engagement (OCE) to increase and improve the medical center's engagement with communities in Nebraska. These efforts led to UNMC being designated a Community Engaged Campus by the Carnegie Foundation. To continue supporting community engagement efforts, the OCE started the UNMC Community Collaborations Council. This group brings together representatives from each college, division, institute, and center on campus to advise and support the creation and development of campus-level interprofessional and collaborative community engagement policies, processes, and actions. They also conduct surveys to measure the impact UNMC, its employees, and students, have on the community.

Table E4.X: Membership of UNMC Community Collaborations Council

Name	Affiliation
Anne Bowen Fischer	Senior Assistant to the Chancellor
Liliana Bronner	Assistant Professor, College of Medicine
Nicole Carritt	Assistant Vice Chancellor, Health Workforce Education Relations Director, Rural Health Initiatives Assistant Director, Community Outreach & Engagement; Fred & Pamela Buffett Cancer Center
Kiara Comfort	Assistant Professor, Community Outreach and Health Systems Librarian; McGoogan Health Sciences Library
Shirley Delair	Associate Dean of Diversity, Equity, & Inclusion & Associate Professor, College of Medicine
Armando De Alba	Assistant Dean of Diversity, Equity, & Inclusion & Assistant Professor, College of Medicine
Nada Fadul	Assistant Dean of Diversity, Equity, & Inclusion Education Programs & Professor, College of Medicine
Brooke Fitzpatrick	Coordinator; Office of Community Engagement
Marquita Govan	Inclusion Program Associate; Academic Affairs
Brandon Grimm	Vice Dean & Professor; College of Public Health
Michael Hollins	Associate Executive Director of Community & Business Strategy, iEXCEL
Becky Jackson	Director of Community & Patient Engagement; Nebraska Medicine
Heidi Keeler	Assistant Vice Chancellor, Office of Community Engagement Associate Professor & Director of Continuing InterProfessional Development and Innovation; College of Nursing
Keyonna King	Associate Professor, Center for Reducing health Disparities, College of Public Health
Kiara Kocsis Gregurich	Student Organization Activities Coordinator, SLIDO
Sarah Lowman	Assistant Dean for Admissions & Assistant Professor, College of Dentistry
Kristin Mayleben-Flott	Coordinator, Leadership Education in Neurodevelopmenal and Related Disorders, Munroe-Meyer Institute
Sarah McBrien	Associate Professor & Director of Academic Affairs, College of Allied Health Professions
Kieth Olsen	Dean, College of Pharmacy
Jennifer Pool	Community Engagement Associate, UNeTech
Athena Ramos	Associate Professor, Center for Reducing Health Disparities, College of Public Health
Shanda Ross	Director of Engagement, Outreach, and Belonging, Nebraska Medicine
Lydia Sand	Deputy Director & Program Manager, Nebraska Area Health Education Center Program

Yun Saksena	Associate Dean for Education, Diversity, Equity and Inclusion & Associate Professor; College of Dentistry
Sheritta Strong	Assistant Vice Chancellor for Inclusion
Ong Vang	Accreditation & Assessment Manager, Academic Affairs
Laura Vinson	Director of Master's Programs, College of Public Health
Melonie Welsh	Director, Department of Community Engagement & Associate Professor, Munroe-Meyer Institute
Christina Whitted	Communications Manager, Eppley Institute

5) Describe the role of service in decisions about faculty advancement.

Service plays a critical role in decisions about faculty advancement within COPH. Faculty members are expected to demonstrate competence in service activities in addition to achieving significant accomplishments in teaching and research for promotion to associate professor. For promotion to full professor, continued achievement in service, along with excellence in either teaching or research, is required. Types of Service Activities: Service activities are integral to the COPH's mission and can be categorized into several types:

- University Service: This includes administrative roles and contributions to the College, other units within UNMC, or the broader University of Nebraska system.
- Professional Service: This encompasses leadership roles in local, state, or national professional associations and societies, consultantships, service on advisory boards, editorial boards, manuscript review, and invited professional lectureships.
- Public Health Service: Faculty are encouraged to engage in community or public service activities related to their professional expertise. This includes collaborations with health agencies to address public health problems, plan, implement, or evaluate health programs, and provide expert advice.

Service activities are considered along with teaching and research in the promotion process. The following outlines how service is evaluated:

- Promotion to Associate Professor: Faculty must demonstrate competence in service activities, which involves active participation and contribution to the COPH's service mission.
- Promotion to Full Professor: Faculty must show continued achievement in service. This means a sustained and impactful contribution to service activities is expected, alongside excellence in teaching or research.

Candidates for promotion must provide comprehensive documentation of their service activities. This includes a narrative of their service contributions, evidence of leadership roles, such as directing educational programs or workshops, records of appointments or elections to offices in professional associations, documentation of consultantships, advisory board memberships, editorial board services, manuscript reviews, and professional lectures. The evaluation of service activities considers both the quantity and quality of contributions. Impactful service activities that align with the COPH's mission and demonstrate significant contributions to public health, the university, and the professional community are highly valued. The COPH acknowledges the diverse professional backgrounds of faculty members. Thus, the criteria for promotion allow for a flexible and individualized assessment of each candidate's service activities. Department Chairs and Promotion & Tenure Committees are encouraged to consider the unique blend of teaching, research, and service contributions each candidate brings.

In summary, service is a fundamental component of faculty advancement in the COPH. While teaching and research achievements are paramount, service activities play a significant role in demonstrating a faculty member's overall excellence and commitment to the COPH's mission. The evaluation process for promotion and tenure considers the comprehensive contributions of faculty members to service, emphasizing both the quality and impact of their activities.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The strengths of our college in the realm of extramural services are manifold and deeply embedded in our institutional ethos. Our dedicated faculty members are at the forefront of a wide range of service and engagement initiatives, underscoring their commitment to making tangible impacts beyond the classroom. In recognition of these efforts, we have recently revised our Promotion and Tenure Guidelines to more accurately reflect and reward faculty contributions in service, demonstrating our institutional support for this critical aspect of academic life. Our faculty's dedication to service is further evidenced by their active involvement of students in their research and extramural work, providing invaluable hands-on experiences that prepare them for real-world challenges. Additionally, our college has cultivated an extensive network of community engagement, collaborating with state and county health departments, academic institutions, non-profits, and other entities both within Nebraska and beyond. This robust network not only enhances our outreach capabilities but also ensures that our initiatives are grounded in the needs and realities of the communities we serve.

Weaknesses: While our college excels in many areas, there are a few aspects where we recognize the need for improvement. Currently, we do not systematically or stringently track extramural services or community engagement, which can hinder our ability to fully showcase the breadth and impact of our faculty's contributions. While our campus does college information about community engagement through the OCE, this information is not currently broken down or made available as college-specific information. Additionally, the response rate to this campus-wide survey is not high and does not yield a response demographically representative of the campus community. Additionally, our data integration with network partners is not as robust as it could be, making it challenging for faculty members to easily access and utilize valuable data from our collaborations. Finally, while we have a strong foundation in extramural service, there is an ongoing desire to further increase participation among our faculty members. To address these areas, we are committed to implementing more rigorous tracking systems for extramural activities, enhancing our data integration processes to facilitate seamless access to information, and developing targeted initiatives to encourage and support faculty engagement in extramural services. By focusing on these improvements, we aim to strengthen our overall impact and further our mission of community engagement and service.

Plans for Improvement: Plans for improvement include integrating extramural service activities as essential components of faculty evaluations, vital for promotion and tenure considerations. This strategy reinforces the college's commitment to fostering impactful contributions beyond the campus and aligns with university standards for faculty excellence. By actively engaging in community-based initiatives and discipline-specific service, faculty will enhance their professional reputations, enrich student educational experiences, and strengthen partnerships that benefit the broader community.

New faculty members will work closely with their Department Chairs to select primary areas of emphasis, including service, that align with their long-term career goals and aspirations for promotion to full professor. Department Chairs will provide ongoing support and guidance, helping faculty develop a sustained and impactful service record essential for their advancement. This comprehensive approach underscores the

college's dedication to scholarship, service, and community engagement as foundational elements of its educational mission

F1. Community Involvement in School Evaluation and Assessment

The school engages constituents, including community members, alumni, employers, and other relevant community partners. Partners may include professionals in sectors other than health (e.g., attorneys, architects, parks and recreation personnel). Partnerships should align with university and school missions and relate to the types of degrees offered and to relevant student and community demographics.

Specifically, the school ensures that partners provide regular feedback on its student outcomes, curriculum, and overall planning processes, including the self-study process. They may also provide regular feedback about efforts to prepare students to work with diverse populations and communities.

1) Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

The College of Public Health has two formal entities which provide guidance to the College on its mission, vision, and planning processes: The Panel of Advisors and the Alumni Council. The members on these two advisory bodies comprise alumni, community leaders, community organization representation, academic partners, and leaders in public health adjacent sectors.

UNMC COPH Panel of Advisors

The Panel of Advisors (discussed more completely in Section A1 of this self study) is an advisory board for the college and the Dean. The Panel meets twice annually and offers advice and perspective to the college from a community standpoint on programs, funding, education, and partnership opportunities. This formal advisory group to the college has been instrumental in building community relationships, securing additional funding for student scholarships, and providing direction for the Dean and the college overall. Members of the Panel of Advisors are (as of August 2024) listed below.

Table F1.1 UNMC COPH Panel of Advisors	
Professional Affiliation	**Name**
Director of Major Gifts, The Nature Conservancy of Nebraska	Sarah McClure, MPA (Chair)
Executive Director, Building Bright Futures	John Cavanaugh, JD
Founding Executive Director, Omaha Creative Institute (retired); Omaha Community Leader	Susan Thomas (Past Chair)
President, Weitz Family Foundation	Katie Weitz, PhD
Health Director, Douglas County Health Department	Lindsay Huse, DNP
Managing Partner, Clairrant Partners	Laura Schabloske
Douglas County Board of Commissioners; Director of Community and Government Relations at Creighton University.	Chris Rodgers, MPA, MBA
Senator, Nebraska District 8; Small Business Owner Shop Five Nine and Ceremony	Meghan Hunt
Associate Vice Provost, Health Sciences, Creighton University	Sade Kosoko-Lasaki, MD, MSPH, MBA
Associate Dean, School of Health and Kinesiology, University of Nebraska at Omaha	Jason Coleman, PhD
Associate Professor, School of Health and Kinesiology; Co-Director, Midlands Sexual Health Research Collaboration	Sofia Jawed-Wessel, PhD, MPH
Ex-Officio:	

Dean	Ali Khan
Vice Dean	Brandon Grimm
Associate Dean for Research	Daisy Dai
Associate Dean for Strategic Initiatives	Elli Rogan
Assistant Dean, Academic Affairs	Nicole Kolm Valdivia
Assistant Dean, Student Affairs	Jessica Tschirren
Assistant Dean, Public Health Practice	Katie Brandert
Assistant Dean, Operations and Management	Bradley Pfeifer
Assistant Dean, Finance	Pam Ehmke
Chair, Biostatistics	Ying Zhang
Chair, Department of Health Services Research and Administration,	Ronnie Horner
Chair, Department of Health Promotion	Chad Abresch
Chair, Department of Environmental, Agricultural, and Occupational Health	John Lowe
Chair, Department of Epidemiology	Ed Peters

COPH Alumni Council

The College of Public Health (COPH) Alumni Council is open to all graduates of the college and the council meets three times per year. The mission of the Council is to:

- encourage the lifelong stewardship and participation of its members;
- affirm the mission, vision, and values of the University; and
- support current and future COPH students and alumni through mentoring relationships, professional networking, and fundraising efforts for the University and the College of Public Health.

The Alumni Council is an active member of the broader campus-wide UNMC Alumni Association. The Association has four strategic goals that it focuses on across each of the campus's college-specific councils. These four goals are:

1. **Prepare students and new alumni to be engaged.** Purposefully build the next generation of alumni leaders and volunteers in support of institutional success.
2. **Engage alumni with UNMC and each other.** Deploy meaningful engagement, customized communication and valued volunteer opportunities.
3. **Impact institutional priorities.** Advance the mission and success of the University through intentional programmatic alignment.
4. **Empower alumni partners to achieve measurable outcomes.** The association will serve as a valued resource for UNMC, empowering alumni councils to achieve metrics-based outcomes.

Members of the COPH Alumni Council participate and sponsor many college-wide initiatives aimed at supporting and engaging students in their current curriculum and in lifelong learning. For example, in spring 2024, the Alumni Council partnered with the COPH Student Affairs Team, Wellness Council, and COPH Student Association to design and deliver events to help COPH students and employees de-stress from final exams. Events included a painting craft activity, a trail mix/charcuterie snack break bar, a sponsored session on "plant care" featuring a COPH staff member and current student, and an ice cream party complete with a caricature artist and yard games. Another example is the Alumni/Student Mixer event that features a Speed Networking component and supports current students in growing their personal networks and interview skills.

The Alumni Council plays a critical role not just in turning inward towards students and current student support, but also plays a significant role in keeping the college's full alumni network engaged and aware of the happenings at the college and sharing opportunities for involvement with the broader alumni base.

The Council sends information about “public health in action,” upcoming events, and opportunities to become involved in current college initiatives through the quarterly College of Public Health Alumni Newsletter. For example, a fall 2023 “Call for COPH Alumni First-Generation Student Panelists” by the Alumni Council through the newsletter yielded presenters and a well-attended event to celebrate and support current first-generation students in the college.

Alumni Council members as well as other COPH alumni have served as a sounding board for curriculum changes and course content development and have participated in the self-study process for this accreditation cycle.

The COPH Alumni Council Members (as of August 2024) are:

Table F1.2 UNMC COPH Alumni Council	
Professional Affiliation	**Name**
Assistant Professor, UNMC College of Nursing	Jessica Semin, DNP '21, MPH '17, BSN '15 (President)
Clinical Research Coordinator, UNMC	Kelly Erickson, MPH '14
Research Project Coordinator, UNMC	Sierra Garth, MPH '20
Director, PBM Analytics & ReportinJamieg, Amwins	Kate Grafel, MPH '17, Vice President
PhD Student, Boston University	Molly Hoffman, MPH '18
Chief Marketing and Communications Officer, Society of Gynecologic Oncology and Foundations for Women’s Cancer	Elizabeth Kix, MPH'11
Epidemiologist, Army Public Health Center	Katherine Kotas, MPH '17, Engagement Chair
Researcher, The Center for Evidence-based Policy	Shreya Roy, PhD '19
Evaluator & Epidemiology Surveillance Specialist, Nebraska Department of Health and Human Services	Emily Scarcello, MPH '21, Professional Development Chair
Senior Public Health Project Coordinator, CityMatCH	Ashleigh Sutphen, MPH '21
Director for Academic Partnerships, UNMC	Zenghan (Hannah) Tong, PhD, MPH '22
Student, UNMC COPH	Payton Allen, Student Representative
Ex Officio:	
Dean, UNMC COPH	Ali Khan
Assistant Dean for Student Affairs, UNMC COPH	Jessica Tschirren

2) Describe any other groups of external constituents (outside formal structures mentioned above) from whom the unit regularly gathers feedback.

Several Centers and Offices in the COPH have informal advisory boards, groups, or external constituents who support the specific work of that office or center.

ALIGN Nebraska

ALIGN Nebraska is a voluntary collaboration of chief medical officers and public health experts led jointly by the COPH and Partnership for a Healthy Nebraska. The goal of ALIGN is to “align” Nebraska’s insurers and primary care clinics around a common set of quality measures to reverse Nebraska’s multi-decade slide in America’s Health Rankings. In October 2023, ALIGN partners agreed to focus on a set of 11 quality measures that would make a significant impact on adult, pediatric, obstetric, and mental health in Nebraska. The group meets quarterly at COPH, and is co-facilitated by COPH Dean Khan, and faculty member Dave Palm. The perspective provided by these insurers and healthcare providers helps keep COPH up to date

on healthcare systems, policies, and Nebraska clinical outcomes. The collaboration also allows COPH to shape statewide connections between clinical and population health efforts.

Table F1.3 Align Nebraska Members	
Professional Affiliation	**Name**
Medical Director, Nebraska Perinatal Quality Improvement Collaborative (NPQIC)	Ann Anderson Barry
Endowed Chair, Department of Health Promotion, UNMC College of Public Health	Chad Abresch
Executive Director, Nebraska Coalition for Patient Safety	Emily Barr
Representative, Health Center Association of Nebraska	Amy Behnke
Vice President-Quality & Process Improvement, Nebraska Total Care	Aimee Black
Executive Director, Nebraska Association of Local Health Directors	Susan Bockrath
Medical Director, NPQIC	Bob Bonebrake
Assistant Dean of Public Health Practice, UNMC College of Public Health	Katie Brandert
Director, Behavioral Health Clinical	Ty Callahan
Nebraska Representative, Pfizer	Lisa Carlson
Program Administrator, NPQIC	Sydnie Carraher
Representative, CHI Health	Ashley Carroll
Winnebago Comprehensive Healthcare System	David Edwards
Chief Medical Officer, Nebraska Total Care	Chris Elliot
Public Health Performance & Improvement, UNMC College of Public Health	Celeste Ehrenberg
Chief Medical Officer, Molina Healthcare, Inc. Of Nebraska	Debra Esser
Chief Executive Officer, Nemaha County Hospital	Marty Fattig
Chief Medical Officer, United Health Care	Julie Fedderson
Senior Partner, Mercer	Kerry Finnegan
Senior MCH Epidemiology, Nebraska Department of Public Health	Erika Fuchs
Analyst, Healthy Lincoln/Healthy Nebraska	Ted Fraser
Representative, Girls Inc.	Denai Gordon
Chief Medical Officer, Blue Cross Blue Shield	Josette Gordon-Simet
Vice Dean, UNMC College of Public Health	Brandon Grimm
Director of Quality & Population Health, Prairie Health Ventures	Anne Hansen
Physician, Franciscan Healthcare	Brian Hass
Chief Medical Officer, Bryan Health Connect	Jess Heckman
Division Vice President, Care Services Physician Enterprise, CHI Health	Carol Henrichs
Chief Medical Officer, South East Rural Physicians Alliance Network-ACO	Barry Hoover
Physician, York Medical Clinic	Patrick Hotovy
Associate Medical Director, One World Omaha	Jeremy Howe
Director, Douglas County Health Department	Lindsay Huse
Dean, UNMC College of Public Health	Ali Khan
Chief Executive Officer, Ronald McDonald House Charities in Omaha	Lindsey Kortan

Representative, Molina Healthcare Inc of Nebraska	Lynette Kramer
Chief Executive Officer, Nebraska Health Network	Lee Handke
Executive Vice President; Chief Clinical Officer; Physician-In-Chief, Childrens Nebraska	Chris Maloney
Managing Partner, Paxton Advisors LLC	Steve Martin
Representative, Omaha Community Foundation	Anne Meysenburg
Family Medicine Specialist, Plum Creek Medical Group	Joseph Miller
Director, Omaha Pathways Community Hub	Kelly Nielsen
President, Nebraska Hospital Association	Jeremy Nordquist
Associate Professor, UNMC College of Public Health	David Palm
Network Performance Manager, Aetna	Maggie Paulson
Representative, Pfizer	Heather Peterson
Chief Operating Officer, CyncHealth	Larra Peterson-Lukenda
Assistant Dean of Operations & Facilities Management	Brad Pfeifer
Chief Executive Officer, Total Nebraska Care	Heath Phillips
Senior Medical Director, Physicial Engagement, Medica	John Piatkowski
Chief Medical Officer, CyncHealth	Ann Polich
Professor, Creighton University	Dhitinut Ratnapradipa
Chief Medical Officer, OneHealth Nebraska/Healthy Nebraska	Bob Rauner
Executive Vice President, Nebraska Medical Association	Amy Reynoldson
Chief Medical Officer, Nebraska Health Network	Michael Romano
Medical Director, Total Wellness/Vaccination Services of America	Tom Safranek
Medical Director, CHI Health Center	Henry Sakowski
Executive Vice President, National Association of Medical Examiners	Mary Ann Sens
Chair-Population Heath, Executive Director-Institute for Population Health, Creighton University	Scott Shipman
Executive Director, Nebraska Academy of Family Physicians	Liz Simon Fidone
Director, Quality & Care Experience, Nebraska Medicine	Nicole Skinner
Patient Safety Program Director, Nebraska Coalition for Patient Safety	Carla Snyder
Director, Quality & Performance Improvement, Nebraska Hospital Association	Dana Steiner
Regional Chief Medical Officer; National Medical Director, United Health Care	Tony Sun
Chief Clinical Officer, CyncHealth/Nebraska Health Information Initiative	Melanie Surber
Chief Medical Officer, Nebraska Department of Health & Human Services	Tim Tesmer
Vice President for Medical Affairs; Chief Medical Officer, Bryan Health Connect	John Trapp
Representative, CHI Clinics	Kandy Truong
Medical Director, Nebraska Medicaid	Elise Verbik
Health Equity & Access Advisor, Health Center Association of Nebraska	Samantha Wall
Medical Director, OneHealth Nebraska	Brandon Webb

Assistant Professor, UNMC College of Public Health	Trina White
President, Midwest Independent Physicians Practice Association	Stephen Williams
Vice President, Workforce, Quality & Data, Nebraska Hospital Association	Margaret Woeppel
Representative, Winnebago Comprehensive Healthcare System	Mona Zuffante

Central States Center for Agricultural Safety and Health External Advisory Bodies

External Advisory Board

The external advisory board for the Central States Center for Agricultural Safety and Health (CS-CASH) provides strategic planning, guidance, and advice. The advisors serve as force multipliers to enhance the center's effectiveness, expanding the center's reach, and increasing the sustainability of center efforts.

Table F1.4 CS-CASH External Advisory Board

Professional Affiliation	Name
Founding President, Farm Safety 4 Just Kids (Earlham, IA)	Marilyn Adams
Director, Western North Dakota AHEC (Hettinger, ND)	Denise Andress
Beef Systems Extension Educator, University of Nebraska Lincoln Extension (West Point, NE)	Alfredo DiCostanzo
Farmer and Agribusiness Owner (Carson, IA)	Brad Forristall
Extension Director, University of Missouri (Columbia, MO)	Karen Funkenbusch
Professor of Biological Systems Engineering, University of Nebraska at Lincoln (Lincoln, NE)	Dr. Roger Hoy
Extension Coordinator Farm and Ranch Safety, North Dakota State University (Fargo, ND)	Angela Johnson
Senior VP Loss Control Services, Gallagher, Insurance (Omaha, NE)	Mike Keenan
Epidemiologist, Nebraska Department of Health and Human Services (Lincoln, NE)	Allison Keyser Metobo
Director, Occupational and Environmental Medicine Academic Program, Midwest Center for Occupational Health and Safety (Minneapolis, MN)	Steven Kirkhorn
Project Coordinator, Kansas State University Department of Biological and Agricultural Engineering, AgrAbility (Manhattan, KS)	Tawnie Larson
Director of Producer Education, Nebraska Cattlemen (Lincoln, NE)	Bonita Lederer
USDA - retired	Brad Rein
Director Brand Reputation, Nationwide Insurance (Des Moines, IA)	Brad Snyder
Injury Epidemiologist, Nebraska Department of Health and Human Services (Lincoln, NE)	Derry Stover
Journalist and Founding Member of Iowa Women in Agriculture (Pilot Mound, IA)	Cheryl Tevis

Feedyard Advisory Board

CS-CASH has another advisory board that is actively engaged in the development, implementation, evaluation, and dissemination of the CS-CASH Feedyard-15 training program. The Feedyard 15 is a free safety training curriculum that is available to cattle feedyard operations. The program addresses critical safety issues commonly found in feedyard operations, including ATVs/UTVs safety, horsemanship, chemical hazards, manure lagoons, and more. The Feedyard Advisory Board supports this specific program and consists of external constituents with a stake in the success of the program.

The Office of Public Health Practice External Advisory Constituents

The COPH OPHP interacts with and provides services, trainings, and technical assistance to the current public health workforce in Nebraska, Federal Region VII (Missouri, Iowa, Nebraska, and Kansas), and across the nation. Informal feedback is received for the COPH through several means.

- The COPH Dean, Vice Dean, and Assistant Dean for Practice (ADP) meet quarterly with the Nebraska State Health Officer, State Medical Officer, and State Epidemiologist to share upcoming events and opportunities.
- The ADP meets monthly with the NE DHHS Division of Public Health Organizational Effectiveness Officer (Workforce Lead), Caryn Vincent, to discuss NE workforce needs, challenges, and solutions.
- The ADP and Ms. Vincent co-lead the Nebraska State Health Improvement Plan (SHIP) Workforce workgroup, which provides feedback on training and technical assistance needs across the state. The workgroup is comprised of external members representing local health departments and the state health department.
- The ADP meets monthly with Susan Bockrath, the Executive Director of the Nebraska Assocation of Local Health Directors (NALHD) to ensure continuity between the college and local/tribal health departments in the state, receive feedback, and discuss opportunities related to local and tribal public health needs. Additionally, as needed, COPH OPHP staff are invited to participate on the weekly calls of the NALHD Board of Directors—which includes all Health Directors of local and tribal health departments in Nebraska to share upcoming events and receive feedback on existing programs and services.
- OPHP staff and the Vice Dean participate on numerous committees through the Midwestern Public Health Training Center (MPHTC). MPHTC is housed at the University of Iowa and the COPH is the local performance site for the MPHTC in Nebraska. The MPHTC Executive Committee, Regional Steering Committee, and Systems Workgroup provide feedback and general information useful to the college in developing and updating workforce education and training programs.

21st Century Learning Community, Nebraska Team

The COPH OPHP is a member of the Nebraska Team for the Public Health Accreditation Board (PHAB) 21st Century Learning Community (21C). 21C states are at the forefront of envisioning what transformed public health systems in the United States look like and are leaders in developing an understanding of a state's approach to transformation, conducting capacity and cost assessments, making the case for sustainable funding for core public health, advancing equity, and exploring various models for workforce and service sharing. They are using various state approaches — such as the Foundational Public Health Services (FPHS), PHAB accreditation, Public Health 3.0, and more — to strengthen infrastructure, improve performance, and rebuild trust in and accountability to their communities. As a member of the team, the COPH is supporting and driving efforts to modernize public health in our home state and the region. More importantly, the learning, discussions, and decisions drive COPH efforts to advance student curriculum and OPHP offerings for workforce development. For example, public health modernization content has been updated and included in the DrPH course CPH 718 Leadership Theory and Practice.

Members of the 21C team include Nebraska DHHS Division of Public Health (Charity Menefee, Nebraska's State Health Officer; Caryn Vincent, Organizational Advancement Officer), NALHD (Susan Bockrath, Executive Director), representation from multiple local health departments (Sarah Shram, Health Director, Sarpy/Cass Public Health Department; Gina Uhing, Health Director, Elkhorn Logan Valley Public Health Department), and the COPH Office of Public Health Practice (Kathleen Brandert, Assistant Dean for Practice; Colleen Svoboda, Partnerships and Assessment Manager)

CityMatCH Board of Directors

CityMatCH is a national organization of city and county health departments' maternal and child health programs and leaders representing urban communities in the United States. Established as a national organization in 1991, and housed at UNMC, CityMatCH moved from the COM Department of Pediatrics to the COPH Department of Health Promotion in 2023. This move has strengthened the relationships and increased the collaborative work between CityMatCH and COPH faculty, staff and students. CityMatCH is guided by a Board of Directors, listed in the table below. The Board establishes policy that outlines how CityMatCH accomplishes its mission, which is to strengthen public health leaders and organizations to promote equity and improve the health of urban women, families, and communities. Board members provide regular input via virtual meetings, serve as representatives at our national partner meetings, and at the in-person meeting at the CityMatCH annual conference.These local health department leaders are instrumental to the success of CityMatCH's programmatic, resource, training and research efforts. Additionally, this input and feedback is infused more broadly into COPH, as current and former CityMatCH staff are also COPH faculty and instructors. Notably, the current Chair of the Department of Health Promotion was Executive Director of CityMatCH for over a decade.

Table F1.5 CityMatCH Board of Directors	
Professional Affiliation	**Name**
Leadership for Rhode Island Executive Office of Health and Human Services & Rhode Island Dept. of Health	Ana Novais
Leadership for Houston Dept. of Health	Clemelia Richardson
Leadership for Metro/Nashville Dept. of Health	D'Yuanna Allen-Robb
Leadership for Allegheny County Dept. of Health	Dannai Wilson
Leadership for LA County Dept. of Health	Melissa Franklin
Leadership for Franklin County Dept. of Health	Theresa Seagraves
Leadership for NYC Dept. of Health	Ilish Neely
Leadership for Minneapolis Dept. of Health	Stephanie Graves
Leadership for Madison & Dane County Dept. of Health	Sarah Hughes
Leadership for Palm Beach County Dept. of Health	Leonie Reeves Hutchinson
Leadership for Harris County Dept. of Health	Lariana Varnado
Leadership for Douglas County Dept. of Health	Leah Casanave
Leadership for King County Dept. of Health	Michelle Sarju
Pilot Community Representative	Angela Newman-White
CityMatCH Principal Investigator & Senior Advisor	Chad Abresch
CityMatCH Executive Director	Denise Pecha

3) Describe how the school incorporates perspectives from external partners (i.e., other than current students and alumni) who align with the school's mission and relate to the types of degrees offered and to relevant student and community demographics.

In addition to each formal group and structured process described in other sections of F1, COPH incorporates perspectives from external partners in many ways. These are intentionally driven by roles and responsibilities of individuals and teams throughout COPH. This approach has led to longstanding relationships with a variety of types of partners related to each of our degree programs, and those partners reach out with opportunities, questions, suggestions, and other feedback on a regular basis. Examples of what this looks like include:

- Faculty and staff with the Center for Reducing Health Disparities (CRHD) work closely with community-based partners, including non-profits, and the Community Care Councils for North and South Omaha. CRHD supports community-identified health priorities through education, training and research. Notably, CRHD has a physical space in North Omaha, to increase the direct connection between external partners and community members with COPH.
- Faculty and staff with the Center for Preparedness and Emergency Response Solutions (CPERS) have close partnerships with all external entities involved with emergency preparedness and response throughout the state of Nebraska, HRSA Region VII, and beyond. CPERS—as the coordinating body for all Emergency Response Coordinators at local health departments in Nebraska—delivers training and education developed and tailored to external partners' specific needs. The CPERS team also delivers curriculum on Emergency Preparedness, so students benefit by having faculty and instructors who work with external practitioners daily.
- The Central States Center for Agricultural Safety and Health (CS-CASH) works with agricultural partners throughout our seven state HRSA Region. Their work has enabled Health Promotion students to design, deliver and evaluate agricultural safety trainings, Epidemiology students to engage in morbidity and mortality surveillance, and Environmental Health students to study risk and exposure in agricultural settings.
- Healthcare partners are engaged closely with our health administration faculty and programs, and have helped the Student Interest Group for Healthcare Leaders be successful by serving on panels and presenting opportunities for student involvement. For example, the Nebraska Hospital Association and the Health Center Association of Nebraska (HCAN) regularly reach out with opportunities for collaboration. HCAN has even extended an invitation for students to attend some of their workforce development offerings, which helps COPH stay up to date on the current needs of the healthcare workforce. We also have several faculty with leadership positions in both the local chapter and national American College of Healthcare Executives (ACHE), which helps COPH stay up to date on healthcare trends, challenges, best practices, and opportunities for students.
- COPH and NE DHHS have established an academic public health department framework, which provides channels for communication and collaboration between the two entities. One significant aspect is a faculty member whose time is shared between COPH and the state's Epidemiology Division. Because this faculty member participates in meetings at both entities, there is a constant feedback loop and line of direct communication.

4) Describe how the school engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

The COPH includes external voices—including but not limited to alumni—to design and enhance curriculum offered to current students. Examples of how external constituents have been involved in three recent COPH curriculum revisions are found below.

DrPH core curriculum revision (Aug 2022 through June 2023)

- COPH convened an initial meeting to discuss general skills needed by graduates of a DrPH program. We included several external partners who serve in leadership positions in local and state health departments. Current students in the DrPH program, all of whom work in various sectors of public health, were also included.
- Using this feedback, a revision to the core curriculum was proposed and then shared back with the group for additional feedback. This led to the identification of skills that DrPH graduates need to be successful leaders in public health.
- These skills were used as a framework to establish program courses and competencies. Current DrPH students were included in this process.

- Once it was decided which courses were to be included in the revised core curriculum, workgroups were established to develop the syllabi for each course. External partners and current DrPH students participated in these workgroups.
- The revised DrPH core curriculum was implemented in the fall 2024 semester.

Environmental and Occupational Health (EOH) PhD program curriculum revision (February through May 2024)

- The EOH department held a full-day retreat to establish a revised curriculum for the PhD program. They included two graduates of the program, both of whom work in public health, plus two current students.
- The retreat included a modified backward design-type of process that started with identifying which skills are needed for graduates of the EOH program and concluded with a proposed revised curriculum
- Workgroups were established to develop syllabi for the new courses, and external partners were invited to participate in those workgroups.

MPH in Epidemiology (January through June 2024)

- The Epi department held a full-day retreat to establish a revised curriculum for the MPH in Epi concentration. Although no external partners were able to participate live, we solicited and received feedback from 6 program graduates, all of whom work in public health practice settings across the U.S.
- The retreat included a modified backward design-type of process that started with identifying which skills are needed for graduates of the MPH in Epi concentration and concluded with a proposed revised curriculum
- Workgroups were established to develop syllabi for the new or revised courses, and external partners were invited to participate in those workgroups.

Another way external constituents and partners voices are heard is through the APEx Preceptor Survey. Each semester, preceptors provide feedback related to their experience with the students, student preparedness to work and ability to address priorities of the organization, and suggestions for improvement of the APEx course. One example of how these results are used. In Summer 2022, preceptors were asked to identify how they would most feel appreciated for the contributions they make as preceptors. The information gleaned has furthered conversations around how to expand partnerships with preceptors organizations beyond APEx, and led to the creation of the Preceptor Partnership Award given by the college annually beginning in 2024.

Finally, the alumni survey (discussed in Criteria B) is also used to inform program directors and other leadership on what skills are most useful in post-graduation destinations, areas in which graduates feel well prepared, and areas in which they could have benefited from additional training or preparation. Details on alumni survey results are provided in Section B.5.1.

5) Describe how the school's external partners contribute to the ongoing operations of the school, including the development of the vision, mission, values, goals, and evaluation plan and the development of the self-study document.

Development of the Vision, Mission, Values, and Goals

In the previous strategic planning process, the COPH involved many external partners whose input and perspectives help shape the future directions of the college. During that process, the external partners, UNMC campus leaders, and COPH faculty, staff and students who participated considered the context of Nebraska, the unmet needs present in our state, region, and the nation, the unique positioning of the college, and the existing strengths and assets available. From this process, four priority areas for the college were identified: Cancer prevention and control; implementation science; rural health; and health security/bio preparedness. These priority areas continue to guide research focus areas and funding applications for the college.

In 2022, when the COPH undertook a new strategic planning process, the need for specific areas of strategic focus was different. First, in the years between planning processes, the COPH had received specific directives from the UNMC chancellor to increase extramural funding as well as increase student enrollment. While the COPH had made great strides with both directives, there was more work to be done. Second, in the previous process where four priorities were identified, the presence of community and external partners outweighed faculty and staff, who expressed frustration and did not feel included in the process. Third, following the COVID-19 pandemic, the popularity of formal public health education grew (note the nationwide increase in enrollment for schools and programs of public health). The COPH wanted to capitalize on this increased desire and enrollment and focus on needs in COPH curricula, innovation, and research to take our programs to the next level. Finally, the major societal events of 2020 and 2021, including the COVID-19 pandemic and cultural uprising following the deaths of George Floyd and others, were also deeply felt by the faculty, staff and students in the COPH. There was both desire and opportunity to address public health fatigue, burnout, and internal culture challenges within the COPH. Because of these reasons, it was decided to undertake a new strategic planning process, and to focus on a wide pool of internal COPH perspectives. The invitation list for the 2022 strategic planning process included a broader mix of COPH staff and faculty who represented more voices internally than we have had in the past, and included those in the college with a wide reach of connections and partnerships with those in the field.

The Panel of Advisors was presented with the strategic directions and gave advice and feedback to the overall plan and the four strategic directions of: Igniting innovation in scholarship; Infusing COPH culture with JEDI (Justice, Equity, Diversity, and Inclusion); Ensuring the COPH is a Great Place to Work; and Enhancing our Operational Approach and Market Position (ERF->B->B1).

From the strategic planning process, it was determined that the COPH needed to take a fresh look at the mission, vision and values as a part of the goal to “Enhance our operational approach and market position” An outside consulting firm was hired to lead the process, which also included new marketing language and materials for our five COPH departments. The Panel of Advisors provided feedback and approved the final versions of the new statements and materials.

Evaluation Plan
The evaluation metrics used by the college are developed by the Evaluation Committee and vetted and discussed by the Governing Faculty and the Panel of Advisors. The Panel of Advisors is presented evaluation data each year, provides feedback and perspectives on outcomes, and supports ongoing efforts to maintain and improve results.

Other Areas of Planning and Operations
The COPH includes community partners and alumni on hiring/search committees for faculty as well as for COPH leadership positions such as department chair searches, giving them a voice to the COPHs organizational structure and hiring decisions. Additionally, one of the COPH’s most prestigious awards, the Nebraska Public Health Defender Award, includes multiple external constituents on the selection committee.

Self-Study Document

Panel of Advisors will be receiving a copy of the full self-study and at the Fall 2024 meeting will be discussing college wide strengths, weaknesses, and plans for improvement, as well as providing feedback.

External constituents, including alumni of both online and in-person programs, practice partners, and advisors received sections of the self-study relevant to their work and provided comments and feedback. In fall 2024, select criteria had meetings with committee members to review, discuss and provide comment as part of the development of the self-study document.

Table F1.6 External Constituents who Participated in the Self-Study Process		
Name	**Organization**	**Constituency Type**
To be completed when lists are final		

6) Provide documentation (e.g., minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation requests 3 and 4.

Documentation of external contribution is included in three documents in the ERF at ERF->F->F1:

- Summer 2022 and Summer 2023 Preceptor Survey results
- Meeting notes from initial DrPH core curriculum revision meeting (August 11, 2022)
- MOU from the DHHS academic Health Department

7) Summarize the findings of the employers' assessment of program graduates' preparation for post-graduation destinations and explain how the information was gathered.

With students and alumni spanning the nation and globe, COPH uses several information sources to understand how our graduates are prepared to meet public health employers' needs. For example, publications from the Consortium for Workforce Research in Public Health provide insight into overall workforce trends, and details on recruitment, training and retention. The de Beaumont Foundation's Public Health Workforce Interests and Needs Survey (PH WINS) and data dashboard along side the PHAB and ASPPH Governmental Public Health Job Tasks Survey provide snapshots of essential functions, strengths and training needs for the governmental public health workforce. The Director of Career Services, the Assistant Dean for Academic Affairs, and the Office of Public Health Practice all review and share this information with each other and others in COPH. While this type of information is not direct feedback on our graduates, it does allow us to examine whether our curricula align with identified gaps and needs of public health practice.

COPH also gathers information directly from employers in our immediate geographic area. Historical attempts to gather this feedback via survey had low response rates, so focus groups are now the primary method. COPH also piloted a way to gather feedback at the 2024 Nebraska Public Health Conference. A brief survey was available via a QR code at the COPH exhibitor table. Unfortunately, there was a low completion rate, so the pilot did not yield useful feedback, but the process can be improved and repeated

in the future. The remainder of this section describes the COPH Employer Focus Group process and summarizes findings from the most recent round.

In spring of 2024, a series of focus groups were held with employers to gain insight into their hiring preferences and gather feedback on COPH graduates' preparedness for the workforce.

Four 90-minute sessions were conducted via Zoom, facilitated by the COPH Director of Career Services. All sessions were recorded with a full transcript of the audio generated. Zoom Whiteboard was also used to allow participants to directly type their feedback in their own words. Text from facilitator notes, audio transcripts and Zoom Whiteboard spaces was consolidated into one document for analysis. A draft of this document was shared with all participants for review and additional input. All participants supported the themes, takeaways and next steps outlined.

Thirteen individuals participated, representing a federal agency, state health department, urban and rural local health departments, healthcare, university research, and non-profit organizations.

The first part of the discussion focused on general hiring over the past three years, to understand the types of positions filled and who was hired to fill them. The second part centered on feedback on COPH graduates and how they compare to others at similar points in their career. Towards the end of the discussion, participants were provided with the 9 Strategic Skills from the de Beaumont Foundation and asked to indicate whether the skill area is a strength or an area for improvement in COPH graduates.

The full Focus Group Summary can be found in the ERF (ERF->F->F1->Employer feedback). Overall feedback was positive, with the following strengths and areas of improvement noted:

Strengths of COPH Graduates

- Knowledge of population health and foundational public health concepts and approaches
- Understanding of social determinants of health and how equity needs to be considered throughout public health work
- Data analysis skills
- Ability to communicate complex health information in a variety of ways to different audiences

Areas of Improvement for COPH Graduates

The number one thing focus group participants would like to see improved in COPH graduates is a better understanding of practice vs. research. It is worth noting that this feedback may apply mostly to a subset of COPH graduates. A majority of COPH students work full-time while in their degree program and focus group participants indicated that they can immediately tell when a student or graduate has had prior work experience.

Additional areas for improvement include:

- Interpreting, applying and communicating about data in a practice setting
- Skills related to working through a project start to finish:
    - project management,
    - collaborating with others (including knowing when and how to problem solve vs ask for assistance),
    - knowing when and how to adapt to changing conditions, and
    - seeking and incorporating feedback effectively (not taking it personally)
- Workplace norms and expectations, including professional communication

8) Provide documentation of the method by which the school gathered employer feedback.

The following documents can be found in the ERF at ERF->F->F1->Employer feedback:

- Spring 2024 Employer Focus Group Outline. The outline includes notes on when and how Zoom Whiteboard space was used during the sessions.
- Survey questions piloted at the 2024 Nebraska Public Health Conference through a posted QR code at the COPH OPHP exhibit table. Survey was used to gather feedback from employers and partners.

9) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The curriculum revision processes described have been successful, as such the ADA and the Director for the Office of Teaching and Learning are planning to formalize processes for including external partners in curriculum design and revisions. Regarding seeking feedback on COPH graduates' preparation, focus groups have been successful at gathering candid feedback from employers. COPH will also gather feedback at the 2025 Nebraska Public Health Conference, with changes based upon lessons learned in 2024.

Weaknesses: The COVID-19 pandemic put a strain on public health practice partners, particularly those in governmental public health. Out of respect for how over-extended public health organizations were during that time, college feedback opportunities such as the employer focus groups were put on hold. Moving forward, focus groups will be held more regularly, with the timing coordinated with the Office of Public Health Practice to not overburden partners or be redundant with any other information collection efforts. Additionally, the college could begin using our Panel of Advisors and other feedback groups more regularly and as a more in-depth part of our strategic planning process in the future.

Plans for Improvement: The COPH Curriculum Committee has identified the need to establish a template for new or revised program proposals. This template will include a required section that describes how external partners were included in curricular discussions. This template will be presented to departments, so they are aware of this requirement before initiating curriculum changes or new program development.

As our number of alumni grows, we have more opportunities to incorporate alumni in meaningful ways across all of our degree programs. The college will review our alumni engagement strategies and update them to better serve the COPH and to better meet the growing engagement interests of the alumni network.

Another plan for improvement relates to the composition and function of the Panel of Advisors. In the next year, the college will work with the panel to identify members that bring additional unique perspectives and experiences. Furthermore, the COPH Dean and Vice Dean will work with the POA to look at the processes for feedback and make changes to use this group of external constituents as effectively as possible.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D5, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.

Students are notified and encouraged to become involved in service, community engagement and professional development activities in a variety of ways. Communication about these activities begins during new student orientation. All incoming students complete a set of online asynchronous modules, including one on public health careers that explains how to explore options in public health and identify opportunities for getting involved. This information is followed up during the live orientation presentation by the Director of Career Services, who outlines a strategy for how to reflect on strengths, interests and gaps, explore options, and then engage in activities to develop skills and experience needed for one's public health career. This presentation helps students make the connection between the COPH curriculum, their existing skills and experiences, and their career goals, and then think through how to fill any gaps with additional activities. Specific ideas are also provided for those who are working full time while completing their academic program. The campus orientation for all incoming UNMC students also includes an optional opportunity fair, which showcases over 60 internal and external organizations that have service and professional development opportunities for students.

Throughout their time at COPH, students are notified of opportunities through multiple avenues, including via email and biweekly and monthly College newsletters. 'COPHee Talk' is the COPH-specific student newsletter sent on a twice-monthly basis. The newsletter indicates specific events and important dates, community news, upcoming workforce development sessions and trainings available to students, and a "career corner" section with upcoming events and recent job postings (campus, state, and national postings). COPHee Talk is one of the main ways students are notified of upcoming opportunities for service, community engagement and professional development. UNMC Vitals is a student newsletter for all students on the UNMC campus. Vitals is a weekly digest sent out each Monday morning to all on-campus and online students and includes a listing of campus events for the upcoming week. Finally, ENGAGE is the online platform used at UNMC to house information on all student organizations, and other events and activities that may be of interest to students. Students are introduced to ENGAGE during orientation, so they know how to find activities relevant to their interests.

Students are also connected to organizations and external partners on an individual basis if interest is expressed during one-on-one degree planning, career advising or faculty mentor meetings. If students want to get involved, they are encouraged to contact the partner via email or are given a warm handoff during a meeting with the partner. Additionally, students are encouraged to subscribe or sign up for trainings and networking happening at large, nationwide public health entities. These trainings are also regularly posted and shared via email and the College's newsletters. Some courses within the MPH program also have community service opportunities and requirements built into their curriculum.

COPH Career Services provides a variety of resources to help students engage in professional development activities, in addition to the orientation content. The Student Success Center in Canvas includes an entire page on Volunteering (benefits, tips and websites), Student Leadership (links to ENGAGE and lists the job-related experience one can gain from student leadership), content on Professional Memberships (including a handout on the Top 10 reasons for COPH Students to Join Professional Associations) and Conferences. Each year an APHA 101 presentation is offered, which helps prepare students to navigate the APHA annual meeting and engage effectively with others. The

presentation includes showcasing the value of attending the conference. Individual career counseling sessions, including the assignment requirement for the Leadership & Advocacy course, often includes making a plan for how one can get involved as a student. After talking through their interests and current skills/experience, there is a discussion about how they can further explore their options (strategies always include professional associations), and what they can do to be as qualified/competitive for those options as possible. This plan includes talking through what they will learn in their program, how to maximize their APEx, capstone, and other curricular requirements, and then any other skills/experience they may want to consider. This type of planning allows the advising to be fully customized to the student's circumstances (work, school, family obligations), so it isn't just a generic list of things that students can do. We collaboratively identify high value activities that will be worth their time and effort and are based on their career goals. Sometimes the Director can immediately connect a student to an opportunity here at UNMC, and other times they go online in real time to find organizations in the student's geographic area.

One specific experience that all COPH students are encouraged to participate in is the Student Responses Team (SRT). Students are introduced to the SRT in orientation each semester, describing the activities of the team and the instructions to be added to the list. Then each semester, the SRT provides training on one of 3 specific duties that may be required during a deployment. These trainings are alternated each semester. The executive team assembles email addresses of all members and notices are sent out when a health department requests assistance. Elections are held each spring for a new exec committee in accordance with the SRT Constitution.

2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

In our 2023-2024 annual student survey, 47% of students stated they participated in community service activities during the past 12 months. Here are examples of professional development and community service opportunities in which public health students have participated.

- **Nebraska Public Health Conference Attendance.** For more than three years, the college has supported COPH students to attend the Nebraska Public Health Conference through registration stipends. The conference offers keynotes and breakout sessions highlighting nationwide public health modernization efforts, as well as local examples of public health in action. Additionally, the conference includes networking events for students and professionals. In 2022, the conference began offering virtual attendance options, which has allowed online COPH students to also attend this conference at a reduced cost. The student fee for the last three years has been $175 and the college has paid $150 of this cost for up to 40 students through the Office of Public Health Practice.
- **Annual Preparedness Symposium Series.** For more than three years, CPERS (Center for Emergency Preparedness and Response Solutions) has offered free admission to students at the annual Preparedness Symposia Series. A few students have participated each year; the feedback from students on the value of the experience has been overwhelmingly positive.
- **APHA Dean's Office Student Travel Awards.** For more than three years, the COPH has funded awards to students that have an accepted abstract for the American Public Health Association Conference. The Dean's office is committed to funding a select number of awards at $1000 minimum each for students selected to do an Oral Presentation, and a select number of awards at $500 minimum each for students selected to do a Poster or Round Table Presentation. Students apply for these competitive awards each year. Awards are available for any student from any COPH program, and both on-campus and online students are eligible.
- **Building Excellence in Administration and Management (BEAM) course**. In 2023, COPH partnered with NE DHHS to pay for five students to complete the BEAM course, provided by the

University of Miami and developed in partnership with the de Beaumont Foundation. This course was a great opportunity for students, including online students, to build their skills in public health administration areas.

- **Academic Public Health Department Graduate Assistantships**. As a part of our partnership with the NE DHHS, we have had a contract for more than five years that places 5-8 students each year at the state health department in public health practice assistantships. These work experiences have provided invaluable experience and professional development for students, while familiarizing them with the workings of governmental public health.
- **Post-Tornado Rapid Needs Assessment.** More than 20 UNMC College of Public Health students, faculty, and staff, led by Faculty in the UNMC Water, Climate and Health Program, assisted the Three Rivers Public Health Department (Fremont, NE) with a rapid needs assessment following tornado events in May 2024. Volunteers from several local health departments, UNMC and Nebraska Department of Health and Human Services went door-to-door in a roughly two-mile radius around the tornado path in Washington County to get residents' responses to survey questions. The topics included how well the early warning system worked, physical and mental health impacts and how residents received information before, during and after the tornados. This real-time, on-the-ground epidemiology experience included
- **COPH Community Garden.** In 2023, students at the College of Public Health, in collaboration with other on-campus groups, spearheaded the creation of the College's first community garden. A total of about 20 students regularly supported the garden's construction and harvesting; others were involved in the planning committee. Material donations were collected, a small amount of funding was secured, and the student group worked together to construct, plant, and harvest the garden's first iteration in early spring through summer 2023. Produce generated by the garden was free to all students and extra produce was donated to the University food pantry as well as community organizations who also provided food pantry services.
- **Mass Testing for TB Exposure.** In 2023, several hundred young children were exposed to TB through a drop-in daycare at a local YMCA facility in Douglas County, NE. Students were called to assist the Douglas County Health Department with a mass testing operation for confirmed TB exposures. Students played important roles in in-processing, screening and greeting of exposed children and their families.
- **Healthcare Medical Surge Exercise.** In 2024, students were recruited to act as scribes for a city-wide full-scale exercise to test healthcare medical surge following a chemical incident. Three students volunteered to assist and consequently were able to interact with over 100 participants, in addition to witnessing the interaction between response partners in a city-wide response effort.
- **Douglas County NEMS.** The Douglas County Health Department (Omaha, NE) solicited student volunteers to support the NEMS (Nutrition Environment Measures Study) project in spring 2024. NEMS assesses observational measures of the nutrition environment within retail food stores (NEMS-S) to determine availability of healthy options, price, and quality. Students completed training in the assessment tool /process and have been completing assessments in summer 2024.

- **Online Student Service.** In addition to activities in the Omaha-metro area, COPH's online students are active with service activities in their own communities. As part of the COPH Student Survey, online students reported being involved in a variety of service activities, including serving on local boards, assisting with immunization clinics, volunteering with local schools and churches, and coaching youth sports teams.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Our college has fantastic partnerships with our local health departments in Nebraska and they reach out to us and our students when they need additional support. This provides our students with real-

time and real-life opportunities to experience public health in action. The vast majority of our online students work full time, so their needs related to connecting to professional and community service opportunities are a little different. For those working full time, we discuss options and opportunities that will be most relevant to their goals while also being mindful of their time commitments. We also inform all students of relevant professional development opportunities, not just those located in Nebraska. Whether it be an ASTHO webinar or a new offering on CDC's TRAIN website, we try to highlight offerings that complement their COPH training.

Weaknesses: None indicated.

Plans for Improvement: None indicated

F3. Delivery of Professional Development Opportunities for the Workforce

The school advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Provide two to three examples of education/training activities offered by the school in the last three years in response to community-identified needs. For each activity, include the number of external participants served (i.e., individuals who are not faculty or students at the institution that houses the school) and an indication of how the unit identified the educational needs. See Template F3-1.

The UNMC COPH places a high value on public health practice. We consider responding to the needs of the current workforce a top priority for the college. As such, several Offices and Centers in the COPH are dedicated to meeting the professional development needs of the current public health workforce. Examples include the CS-CASH (Central States Center for Agricultural Safety and Health), CPERS (Center for Preparedness and Emergency Response Solutions), and the OPHP (Office of Public Health Practice). Over the last year, we have provided education and training opportunities to more than 1000 members of the public health workforce.

The Central States Center for Agricultural Safety and Health works with the agricultural community in the Central States (Kansas, Missouri, Nebraska, Iowa, South Dakota, North Dakota and Minnesota) and beyond, conducting research, intervention, education, and outreach activities, which aim to discover the mechanisms of injury and illness, and to develop, implement, and evaluate prevention strategies that measurably improve the health and safety of members of the agricultural community. An example of professional development offered by CS-CASH includes the annual Agricultural Health and Safety Course for Medical and Safety Professionals. The course is designed to examine key health and safety issues specific to rural and agricultural workers. Experts present course material relevant to those working in health care, public health, education, and safety professions.

The Center for Preparedness and Emergency Response Solutions conducts planning, training, and exercise services for public health and medical care providers and current health care and public health emergency managers. For example, CPERS created the *Hospital First Receiver (Hospital Decontamination) Training*. There are many instances where a hospital needs to decontaminate prior to admitting a patient. This two-day training provides health care facilities with the skills needed to provide a high level of care for their patients while maintaining worker safety. CPERS has also developed multiple web-based education tools for public health, health care, emergency responders, and businesses.

The Office of Public Health Practice is dedicated to advancing academia and practice toward a more effective, interconnected, just, and modernized public health system. The OPHP has four main areas of work including academic and practice partnerships (e.g. Academic Health Department with Nebraska DHHS), capacity development efforts (e.g. the Great Plains Leadership Institute), training and technical assistance (e.g. robust technical assistance for local health departments applying for national accreditation through PHAB), and student practice experiences (e.g. field placements through the Midwestern Public Health Training Center). The office provides a considerable menu of workforce development, training, and technical assistance opportunities for public health practice partners in Nebraska, federal region VII, and nationally. These services and trainings include (but are not limited to): expert presentations; synchronous and asynchronous online learning; organizational development opportunities such as team building workshops, performance management/quality improvement trainings, and team and executive coaching services; technical assistance for local and state health departments in meetings national standards and measures; national accreditation technical assistance for state, local, and tribal health departments in Nebraska; and facilitation services. Needs for services are identified through partner-initiated requests, formal and informal conversations with national, state and local workforce partners, results of national workforce surveys, and results of workforce competency assessments previously conducted through the OPHP. Below are three examples of workforce/professional development activities offered by the OPHP, how the need was identified, and the partners served.

Education/training activity offered	How did the unit identify this educational need?	External participants served*
The Sizzling Summer Series. Since 2019, the Office of Public Health Practice, in collaboration with the Midwestern Public Health Training Center, has offered the Sizzling Summer Series. The multi-part webinar series features the latest topics and issues facing the field of public health today. Webinars are held via Zoom for one hour per session, 2-5 sessions per summer. Participants learn from subject matter experts, case studies, panel discussions, and activities. Calls are recorded and made available on our website following the event. Offerings in recent years include: ***2022 Communicating the Value of Public Health*** • Talking Health: A New Way to Communicate About Public Health June 28, 2022 • Media Training for Public Health Professionals July 28, 2022 • Building Bipartisan Support August 31, 2022 ***2023 Making Data Come Alive, Part 1*** • Framing with Data June 14, 2023 • "Storifying" Data for Greater Impact August 30, 2023 ***2024 Making Data Come Alive, Part 2*** • Visualizing Data: Crafting Compelling Stories for Diverse Audiences June 26, 2024 • The Art of Persuasion: Using Data to Enhance Credibility, Logic, and Emotional Appeal July 31, 2024 • Advancing Health Equity through Data Visualization August 22, 2024	The Midwest Public Health Training Center (MPHTC) Executive Committee, comprised of representatives from Region VII institutions in Nebraska, Iowa, Missouri and Kansas, discusses trending topics they hear from regional, state, and local partners and decides on the series' topics. Topics are linked to the de Beaumont Strategic Skills, HRSA priority areas, and public health leadership competencies.	Registration links are shared through multiple sources including the MPHTC list serv, and the Public Health Training Center Network. Additionally, partner organizations and associations in Nebraska, Iowa, Missouri, and Kansas send registration information to their lists and partners. Participants represent a range of public health disciplines and states/localities. 2022 Webinars • #1: 111 Participants • #2: 96 Participants • #3: 49 Participants 2023 Webinars • #1: 95 Participants • #2: 79 Participants 2024 Webinar • #1: 54 participants • #2: 85 registered • #3: 85 registered

Great Plains Leadership Institute. (GPLI)
GPLI is a year-long competency-based training program designed for established and emerging leaders in organizations whose primary mission is to improve the health and well-being of populations and communities. A robust experiential curriculum includes residential and distance learning, mentoring and coaching, and collaborative practice projects. The Institute serves Region VII (NE, IA, MO, KS) and welcomes applicants from surrounding states as well (SD, ND, MN, etc.)
 	
Annual Calendar and Events Example:
• Orientation Call
• In-Person Kickoff (3 days)
• Monthly webinars (2 hours)
  ○ Values, Vision, & Mission
  ○ Peer Coaching
  ○ 360 Introduction
  ○ Managing Difficult Conversations Diversity, Equity, & Inclusion
• In-Person Midyear (4 days)
• Monthly webinars (2 hours)
  ○ 360 Follow-up Support
  ○ Emotional Intelligence
  ○ Five Dysfunctions of a Team
  ○ Adaptive Leadership
  ○ Psychological Safety
• Executive Coaching Sessions x 2
• Peer Coaching Experience
• Mentoring Experience
• Group Book Club
• Individual Leadership Development Plan
	The Leadership Institute was first developed in 2005. In Nebraska and Iowa, an assessment of local health department directors shows a gap in leadership competency and a requested desire for access to leadership training opportunities. This was in line with nationwide efforts at the time to bring leadership development to public health practice organizations. The current list of competencies covered in GPLI was created through a Think Tank in 2015 comprised of leadership experts and public health leaders. Content is updated based on feedback following each intersession, and pre- and post-assessments are conducted yearly. New content or resources are added yearly to supplement the material as new leadership content is published and reviewed.	The Institute accepts up to 28 participants per year.
		
		• 2022 (Cohort 17): 28
		• 2023 (Cohort 18): 27
		• 2022 (Cohort 17): 28

BEAM Training. BEAM is an online certificate program in budget and financial management developed by nationally recognized public leaders	Workforce competency assessments completed by the COPH OPHP with Nebraska state, local, and tribal health departments between 2016 and	57 state, local, and tribal health department staff participated in BEAM training in 2022 and 2023.

and practitioners at the University of Miami's public health and business programs, the de Beaumont Foundation, and other leading organizations. The COPH provided full scholarships for interested health department staff to receive the training.	2022 indicated that as a state, the highest workforce training need was in financial management and planning. The COPH identified the BEAM training as a high priority training opportunity and worked with NE DHHS partners to provide scholarships for health department staff to attend the training.	

Organizational and Team Development (Ad Hoc)
Local health departments and public health adjacent organizations have requested team development/training to address workforce needs. In response to these requests, we have staff who are skilled at facilitation, leadership development, and coaching.
 	
OPHP has offered these services for more than 10 years. From 2024, here are examples of OPHP workforce development and technical assistance services.
 	
• Central District Health Department
  ○ Interpersonal Needs Team Training (2/8/2024)
  ○ Team alignment discussion (4/23/2024)
  ○ Team Coaching Services (July-November 2024)
• Southwest District Health Department
  ○ MBTI Team Training (2/26/2024)
  ○ Conflict Management Team Training (5/20/2024)
  ○ Performance Management/Quality Improvement team training (
• East Central District Health Department
	Health Departments and community organizations contact the OPHP with specific team-based challenges and requests. The OPHP team meets with the organization's representatives to better understand the specific challenges they are facing and offers options for team-based training and development services.	Participant numbers:
		• Central District Health Department: 8-10
		• Southwest District Health Department: 11-15
		• East Central District Health Department: 14
		• Elkhorn Logan Valley Health Department: 17
		• Sarpy/Cass County Health Department: 14-25
		• Nebraska Family Planning Association: 7
		• Loup Basin Health Department: 12
		• South Heartland District Health Department: 15
		• Lincoln Lancaster County Health Department: 15
		• The Women's Fund Adolescent Health Project Meetings:25
		• Four Corners Health Department: 10
		• Nebraska DHHS: 50

○ Performance Management/Quality Improvement team training (11/30/24) ○ Performance Measure Selection and Evaluation Training (11/30/24) • Elkhorn Logan Valley Health Department CSI Team Training (3/15/2024) • Sarpy/Cass County Health Department ○ MBTI Team Training (6/7/2024) ○ Conflict Management Team Training (9/13/2024) ○ Change Styles Team Training (9/23/2024) ○ Interpersonal Needs Team Training (10/25/24) • Nebraska Family Planning Association Team Training ○ MBTI Team Training (6/7/2024) ○ Conflict Management Team Training (9/13/2024) ○ Change Styles Team Training (9/23/2024) • Loup Basin Health Department ○ Performance Management/Quality Improvement team training ○ Performance Measure Selection and Evaluation Training (2/12/24) • South Heartland District Health Department Performance Management/Quality Improvement team training (September 2024) • Lincoln Lancaster County Health Department Heat		

Planning Facilitation (1/12/2024) • The Women's Fund Adolescent Health Project Meetings (May 8, 2024; September 11, 2024) • Four Corners Health Department Community Health Improvement Planning Prioritization facilitation (October 26, 2024) • Nebraska DHHS Maternal and Child Health Needs Assessment facilitation (November 2024)		

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The COPH offers a myriad of professional development services, trainings, workshops, and consulting services to meet the needs of the current workforce. Furthermore, there is strong breadth of topics, community challenges, and team development needs that can be served. With the number of faculty and staff with practice experience and the college's identification of practice as a priority, the COPH is well-aligned and prepared to meet the needs of the current workforce.

Weaknesses: None Indicated

Plans for Improvement: None indicated.

G1. Diversity & Cultural Humility

The school defines systematic, coherent, and long-term efforts to incorporate elements of diversity and cultural humility. Considerations relate to faculty, staff, students, curriculum, scholarship, and community engagement efforts.

The school also provides a learning environment that prepares students with broad competencies regarding diversity and cultural humility, recognizing that graduates may be employed anywhere in the world and will work with diverse populations.

Schools and programs advance diversity and cultural humility through a variety of practices, which may include the following:

- **incorporation of diversity and cultural humility considerations in the curriculum**
- **recruitment and retention of diverse faculty, staff, and students**
- **development and/or implementation of policies that support a climate of equity and inclusion, free of harassment and discrimination**
- **reflection of diversity and cultural humility in the types of scholarship and/or community engagement conducted**

The school monitors its progress and efforts in diversity and cultural humility using evidence, including, at a minimum, student, faculty, and staff (if appropriate) perceptions of the unit's climate. The unit regularly collects, monitors, and responds to perceptions of its climate relating to diversity and cultural humility.

The school defines qualitative and/or quantitative methods designed to provide useful information on climate.

The school documents and regularly examines its methodology for collecting climate perceptions, making revisions as necessary, to ensure useful data.

1) List the school's specific goals for advancing diversity and cultural humility.

The UNMC College of Public Health has had a commitment to equity, diversity and inclusion for many years. The UNMC College of Public Health views diversity as the collective mixture of differences and similarities that includes individual characteristics, values, beliefs, experiences, and backgrounds. It encompasses our personal and professional histories that frame how we see the world, collaborate with colleagues and stakeholders, and support communities through our research, education and service.

In 2016, the College of Public Health went through its second accreditation process. It was recommended that we develop a more cohesive thread for diversity efforts across the College. Since then, the College has formalized a Justice, Equity, Diversity and Inclusion Council (membership included in Table A1.8), hired a Culture and Sustainability Manager (CSM), and completed a College wide planning process to determine goals for advancing diversity and cultural humility in the college. During the Summer of 2021 workgroups were formed at the College of Public Health in response to the Black Lives Matter movement. These *Ideas to Action* Workgroups were charged with defining goals and actions that would make the College a safer and more inclusive environment for all. Ideas to Action was a voluntary activity for anyone interested in making the COPH a great place to work. Over two years, over 50 individuals participated in six self-driven workgroups. 1) Community-engaged research, 2) Scholarship and Fellowship development for URM students, Pipeline and Pathway Programs, 3) Curriculum Review, 4) Racial Justice Report Card, 5) Hiring, recruitment, and retention, and 6) Training.

The College has identified four goals to advance our diversity and cultural humility.

1. Formulate a comprehensive Diversity and Cultural Humility strategy.
2. Design a recruitment strategy to enhance diversity of students, staff, and faculty.
3. Provide an inclusive and safe environment for all to retain the best and brightest.
4. Develop a diversity and cultural humility training plan for college students, staff, and faculty.

2) List the actions and strategies identified to advance the goals defined in documentation request 1.

The table below provides the goals, actions, strategies, and those accountable that were presented by the JEDI Council to the COPH Leadership Council and accepted by the College.

Table G1.1 COPH Diversity and Cultural Humility Goals and Strategies

Goal	Actions and Strategies	Accountability
Formulate a comprehensive Diversity and Cultural Humility strategy.	Four diversity and cultural humility workgroups were launched (membership included ERF->B->B1) in 2023 and are responsible for recommendations to the leadership council to improve/create the college's communication, evaluation strategies, policy and procedures, and education and training in relation to Diversity and Cultural Humility. The workgroups meet monthly and the CSM reports recommendation to the leadership council.	JEDI Council Leadership Council CSM
Design a recruitment strategy to enhance diversity of students, staff, and faculty.	All members of search committees, both faculty and staff, are now required to participate in the UNMC-wide training modules regarding recruitment, which include information on diversity, inclusion, and bias. The office of educational services recruits at conferences and meetings focused on diverse populations and students. Removed the GRE requirement from most program admissions requirements. Funding is available to all departments to recruit post docs that work with under resourced and diverse communities. A grant from the Health Resources and Services Administration provides 37 scholarships to current practitioners who live and work in tribal, rural and under-resourced communities in Nebraska, Iowa, Missouri and Kansas, including tribal communities in South Dakota and North Dakota. The scholarships provide full tuition and fees for students obtaining an MHA, Certificate or DrPH. Competitive start up packages are offered to all new faculty regardless of rank.	ADSA ADO Leadership Council
Provide an inclusive and safe environment for all	New Student orientation includes an implicit bias presentation.	ADSA ADO Wellness Council

to retain the best and brightest students, faculty, and staff.	Trauma Awareness and Safe Space Training was developed for COPH students. Students are supported through The Student Life Inclusion and Diversity Office (SLIDO) Resources were provided to Ideas to Actions workgroups to implement new initiatives. COPH Wellness Council provides opportunities to all students, staff, and faculty. Revise the College's Promotion and Tenure criteria to increase equity in Promotion and Tenure processes. The College hosts a 1st Generation College Student Day. Annually review and update a College Racial Justice Report Card	Leadership Council Promotion and Tenure Committee Governing Faculty CSM
Develop a diversity and cultural humility training plan for students, staff, and faculty.	Year-long training schedules are created and disseminated. Coordinated administration of the College's first Intercultural Development Inventory (IDI) rollout and provide coaching and resources. Developed and provided the Responsible Inclusive Student Engagement (RISE) Pilot Program – provided students with more in-depth DEI learning and support inclusion of such materials in courses Complete a review of all MPH courses to examine competency attainment. Hosted a training for students on LGBTQ2AI+ Safe Space in conjunction with the UNMC Gender Resource Center.	JEDI Counci CSM ADSA Leadership Council

3) Provide evidence of the school's approaches, successes, and/or challenges in advancing diversity and cultural humility.

Based on the approaches mentioned above and our commitment to creating a more diverse, inclusive and culturally humble college, we have set and track metrics of our students, faculty, and staff to be representative of the Nebraska and the Nation.

The College considers under-recognized populations or URP to be Black/African American, Hispanic/Latino, and Indigenous/Native American/Pacific Islander individuals. According to the 2020 US census data, 34.5% of US citizens identified as Native American, Black or African American, Hispanic or

Latino, Native Hawaiian or Other Pacific Islander. Subsequently, using the same US Census Data, 29.5% of Nebraskans identified as Native American, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander. Nationally in 2022-23, 23.7% of the graduate student population at public institutions was Native American, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander (National Center for Education Statistics).

Table G1.2 Under-recognized Students, Staff, and Faculty Representation in the COPH (Non-International Students Only)				
Total COPH URP Population	2020-2021	2021-2022	2022-2023	2023-2024
Student	20%	26%	23%	22%
Faculty	13%	12%	13%	10%
Staff	16%	16%	21%	16%

It is not only important to recruit a diverse student population it is equally even more important to retain the student and provide the support to graduation

Table G1.3 - COPH 2022-2023 URP Student Retention Rates	
MPH	100% (7)
DrPH	100% (2)
PhD	100% (1)
MS	N/A

Table G1.4 - COPH 2023-2024 Graduation Rates		
COPH Degree	All COPH Non-International Student Graduation Rate	COPH URP Student Graduation Rate
MPH	83%	71%
MS-BIOS[1]	NA	NA
DrPH[1]	NA	NA
PhD	71%	67%
1: This program has not yet had any cohorts reach MTTG.		

Faculty and the Assistant Dean of Academic Affairs have developed course content that incorporates aspects of diversity and cultural humility into the curriculum. Content is included in the following courses, whose syllabi can be found in the ERF at ERF->G->G1

- CPH 500/HPRO 830 Foundations of Public Health
- CPH 545/HPRO 809 Health Disparities and Health Equity
- CPH 637/EPI 820 Social Epidemiology
- HPRO 915 Foundations of the Community-Based Participatory Research Approach
- HPRO 918 Application of the Community-Based Participatory Research Approach
- CPH 700/HPRO 900 Health Equity and Community Engagement

Finally, in the 2024 employer focus groups, DEI was identified as an area of strength among COPH students and graduates. Specifically, employers appreciate how diverse our student body is, their strong understanding of equity and the social determinants of health and being able to think through how equity is to be considered throughout public health work. This feedback is notable, given that this was seen as an area for improvement in previous focus groups.

Successes

- The percentage of URP students in the College is very close to the national data.

- Our student retention rates are 100%.
- Employers communicated their appreciation about how diverse our student body is, their strong understanding of equity and the social determinants of health and being able to think through how equity is to be considered throughout public health work.
- The College has updated the promotion and tenure guidelines to be more inclusive.
- The College has trained search committees to recruit the best and brightest team members.
- Students are provided multiple levels of support in a safe and inclusive environment.
- The JEDI Council provides recommendations to enhance diversity and cultural humility to the Leadership Council.
- Dedicated resources have been provided to diversity and cultural humility workgroups to make the College an inclusive and safe place to work.

Challenges

- Based on the national data, faculty and staff are not currently proportionately represented.
- The political climate in Nebraska can make diversity and cultural humility work difficult.
- It is important that we continue to create metrics for all of our goals and not only those related to URP students, staff, and faculty.

4) Provide student and faculty (and staff, if applicable) perceptions of the school's climate regarding diversity and cultural humility.

The College's annual student and faculty surveys include questions about climate and cultural humility. The response rate for the 2023-24 COPH Student Survey was 53% (n=190). 74% of COPH students said they perceived the climate of the COPH to be very or moderately inclusive regarding diversity. In open-ended feedback, students stated that diversity can be seen in the College's student body. Several students noted, however, that the College's faculty and staff are not as diverse as the student body. Issues with inclusivity for students with disabilities were also mentioned. Students were also asked about their perceptions of the college's climate regarding cultural humility. For this question, students were also provided with CEPH's definition of cultural humility for reference. Sixty-eight percent of COPH students said they perceived the culture of the COPH to be very or moderately inclusive regarding cultural humility. There was limited open-ended feedback to this question, possibly because most comments came from on-line students who said they did not know.

The response rate for the 2023-24 COPH Faculty Survey was 74% (n=67). As part of this survey, faculty were asked several questions related to this criterion. Over 76% of faculty indicated that, in the past two years, they have made changes to their course materials to add more global and diverse perspectives. Faculty were also given the opportunity to provide qualitative feedback regarding their perceptions of the COPH's climate regarding diversity and cultural competence (as this survey was conducted in Fall 2023, before the new CEPH criteria with cultural humility was released). Many faculty who provided comments said they felt the college was making an effort to be more diverse and more culturally competent. One respondent wrote, "The COPH has a vision of what diversity and cultural competency looks like, and much is being done to pursue that vision within the constrains existing in the state in which we live." While this sentiment was expressed by most respondents, several also noted that there is still work to be done in the College, specifically in the areas of diversity in leadership and gender equity.

UNMC also performs an annual campus-wide student survey. This survey does include questions centered around diversity, equity, and inclusion. Colleges are provided with response information specific to their college. While a response rate is not provided, the total number of respondents is provided. The following table outlines responses over the last two years (since the survey changed to its current format). A full copy of both surveys can be found in the ERF at ERF->G->G1->UNMC Campus-Wide Surveys.

Table G1.5 UNMC Student Survey, selected results; 2022-23 and 2023-24

Question	2022-23 Response	2023-24 Response
How valued do you feel at UNMC?	83% very or somewhat valued (n=83)	89% very or somewhat valued (n=101)
How fairly are students treated at UNMC regardless of differences?	93% very or somewhat fairly (n=81)	96% very or somewhat fairly (n=100)
How are students from all backgrounds respected at UNMC?	95% very or somewhat respected (n=81)	96% very or somewhat respected (n=100)
How respected do you feel at UNMC?	94% very or somewhat respected (n=83)	94% very or somewhat respected (n=101)
How comfortable are you talking about your personal cultural experiences at UNMC?	90% very or somewhat comfortable (n=82)	88% very or somewhat comfortable (n=99)
How committed is UNMC to meeting the needs of students with disabilities?	90% very or somewhat committed (n=40)	94% very or somewhat committed (n=64)
How encouraging is UNMC to the open expression of ideas, opinions, and beliefs?	90% very or somewhat encouraging (n=80)	94% very or somewhat encouraging (n=100)
How much of your authentic self does UNMC allow you to be?	93% very or somewhat authentic (n=80)	94% very or somewhat authentic (n=100)
How supportive is UNMC of members of the LBGTQIA+ community?	97% very or somewhat supportive (n=37)	100% very or somewhat supportive (n=55)
How comfortable would you feel reporting a concern about harassment and discrimination at UNMC?	88% very or somewhat comfortable (n=80)	82% very or somewhat comfortable (n=100)
How aware are you of how to report concerns about harassment and discrimination?	75% very or somewhat aware (n=81)	76% very or somewhat aware (n=100)
How clearly do UNMC policies and procedures discourage harassment and discrimination?	94% very or somewhat clearly (n=68)	97% very or somewhat clearly (n=79)
How appropriate is the action UNMC takes in response to incidents of harassment and discrimination?	85% very or somewhat appropriate (n=27)	98% very or somewhat appropriate (n=50)

Additionally, the University of Nebraska system routinely completes system-wide climate studies. The last system-wide study was completed in 2021. Data is provided on a campus level only but is separated by faculty and staff. The response rate is not provided; each group must have a minimum n-size of 10 to have a result. The full survey can be found in the ERF at ERF->G->G1->NU System-Wide Survey

Table G1.6 UNMC Responses to University of Nebraska System-wide Climate Study, 2021

Question	Faculty Strongly/Somewhat Agree	Staff Strongly/Somewhat Agree
At work, I am treated with respect.	83%	81%
If I raised a concern about ethics and integrity, I am confident my employer would do what is right.	69%	64%
Everyone at this organization is treated fairly regardless of ethnic background, race, gender, age, disability, or other differences not related to job performance.	68%	65%
Diversity and inclusiveness issues are openly discussed.	76%	63%

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The College has significantly invested in enhancing diversity and cultural humility. The college has hired a cultural sustainability manager, provided resources to implement culture-building activities, revised promotion and tenure criteria, and worked to recruit the best and brightest students, staff, and faculty.

Weaknesses: The College continues to work to have a more diverse student, staff, and faculty community. It is important that we create metrics and evaluation plans for all identified goals, not only those related to URP students, staff, and faculty.

Plans for Improvement: The diversity and cultural humility workgroups will recommend evaluation metrics for all goals identified and report on each annually to the leadership council.

H1. Academic Advising

The school provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the school's curricula and about specific courses and programs of study. Additionally, advisors understand the needs of a diverse student body and are qualified to address student needs and support their success.

Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

1) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

All admitted students are invited and encouraged to attend the UNMC campus orientation activities for all students. The all-campus orientation offered by the central UNMC Office for Student Success is offered in both in-person and online formats. The all-campus orientation provides information to students about services and activities available to all UNMC students like the Gender Resource Center, peer support, Office of Accessibility Services, Counseling and Psychological Services, Financial Aid, Student Life Inclusion and Diversity Office, Student Accounts, and Parking Services. The UNMC Office of Student Success also coordinates with the Colleges to host a New Student Onboarding website with important information for all newly admitted students https://www.unmc.edu/student-success/academic-success/onboarding/new-student-instructions.html

International students attend a mandatory two-day orientation hosted by the UNMC Office of Global Engagement. This orientation includes "moving to Omaha" information, information about housing, getting their SSN, banking, setting up utilities, maintaining their Visa, OPT/CPT, campus services, resources, and student groups.

The week before each admission term start date, COPH hosts a live, mandatory New Student Orientation offered virtually via Zoom to ensure the best experience for all students. The orientation is recorded and posted for students unable to attend to complete at a convenient time for them in the first couple weeks of term. This orientation welcomes students and introduce them to the COPH community, services and support available to students, policies and procedures that apply to students, workshop on unconscious bias, student organizations, alumni services, research support, career services, academic requirements, and plan of study requirements. All incoming MPH, MHA and DrPH students must complete asynchronous online orientation hosted in Canvas, students are enrolled shortly after receiving their admission offer. The online asynchronous orientation requires students to proceed through a series of modules that inform them about tasks required for matriculation, administrative requirements, education technology, campus and college policies and procedures in the Catalog. As part of the orientation week, all COPH departments invite their students to department-based webinars to meet the faculty and learn about program requirements and opportunities. In-person events, a student organization fair (includes a virtual attendance option), campus BBQ, COPH Welcome Back and international student luncheon are offered for COPH on-campus students to meet each other, faculty, and staff.

Students entering PhD and MS programs are enrolled and complete the Graduate Studies orientation modules in Canvas before registering for classes. The Graduate Studies orientation modules review the degree requirements, program completion requirements and research information specific to the MS and PhD degrees. Graduate Studies hosts a matriculation ceremony for all incoming students and their families to welcome them and kick-off their new academic journey.

2) Describe the school's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

MPH, MHA, DrPH Programs

Upon admission to the certificate, MPH or MHA programs, students are assigned to the Academic Program Support Specialist (APSS) for academic plan of study advising, while DrPH students are assigned to the Director of DrPH Program (DDP). The APSS or DDP meets with students after program admission to provide information on the essential components of the program, including core and concentration curriculum, prerequisites, course sequencing, and any additional academic requirements for their program. The student and APSS or DDP devise a study plan tailored to the anticipated progress through the program based on the student's needs. Throughout the program, students and the APSS or DDP meet regularly (typically one to two times per year) to discuss coursework and update the plan of study, as needed.

During the first semester of their program, MPH, MHA, and DrPH students are assigned to a faculty mentor in their concentration area by a department chair or graduate program director. Faculty mentors meet with students once or twice per year and discuss with students how to prepare for practicum and capstone/dissertation, how to select elective courses based on career goals, research or practice opportunities, and career preparation. Students in the MPH dual degree programs also have an academic advisor from their other degree program to ensure students meet requirements for both programs.

The Student Affairs Coordinator (SAC) in the COPH Office of Educational Services is responsible for the administrative advising of MPH, MHA and DrPH students. For example, registration deadlines, change of concentration, change with enrollment status, academic calendar, university requirements, compliance requirements, degree audit, graduation requirements, transfer credit, University and COPH policies and procedures, student activities, wellness activities, and support for student organizations. The Student Success Coordinator (SSC) works with students having challenges in their academic journey that may self-identify or are identified by their faculty as struggling in a course. The SSC also works with students that have violated the good academic standing policy on formulating and following their remediation plan back to good academic standing. The SSC also works preventively and provides webinars on topics related to student academic success and preparedness. Examples include setting up tech for success, time management, how to use AI in education, academic writing skills. The SAC and the SSC work under the support, guidance and supervision of the ADSA.

PhD and MS Programs

Each MS and PhD program is overseen by a Graduate Program Committee that consists of graduate faculty that teach and mentor in the program. The committee is led by the Graduate Program Director, who serves as the student’s temporary supervisor until the appointment of a permanent Supervisor (mentor). The MS students have a permanent Advisor, who chairs the student’s Advisory Committee, and must be a member of the Graduate Faculty. The Advisory Committee consists of 3 or more members, including the Advisor, selected by the program’s Graduate Committee and approved by the Dean for Graduate Studies. The Advisory Committee acts on behalf of, and reports to, the program Graduate Committee and is responsible for supervising the student’s work toward earning the MS degree. The Advisory Committee must be appointed within 6 months after matriculation (8 months for part-time students) and must meet with the student at least once every 6 months thereafter. PhD students must designate a member of the Graduate Faculty to serve as Supervisor and at least 3 other members of the Graduate Faculty to serve as their Supervisory Committee within 12 months after matriculation (18 months for part-time students). The student’s Supervisor serves as chair of the Supervisory Committee and advises the student on its overall composition. It is encouraged that one or more members of the Supervisory Committee be from a field or fields of study different from the major area of interest, whenever such representation will contribute to the student's program and/or the overall effectiveness of the graduate program.

The Graduate Studies Office is responsible for the administrative advising of MS and PhD students. For example, registration deadlines, change with enrollment status, academic calendar, university requirements, compliance requirements, degree audit, graduation requirements, transfer credit, University and Graduate Studies policies and procedures, student activities, wellness activities, and support for student organizations. The COPH Office of Educational Services will provide support to MS and PhD students as well but always in collaboration and under the guidance of the Graduate Studies Office.

3) Explain how advisors are selected and oriented to their roles and responsibilities.

MPH, MHA Students
For MPH and MHA programs, students are automatically assigned to the APSS to receive their plan of study advising. Faculty mentors are assigned by the faculty director in the department home of their chosen concentration. Assignments are based on matching research or professional interests of students with faculty. The faculty's mentoring load and availability are also considered in the selection process. Faculty mentors are informed of who their incoming advisees are around the start of the of the student's first semester and students receive notification via email of their assigned faculty mentor, advising them that the contact information is posted in their MyRecords portal and encouraging them to reach out and schedule an introductory meeting.

The APSS is a member of the Academic Affairs staff, attends meetings and receives guidance from the department leadership on course sequencing and requirements. To orient and support the APSS, they use the Catalog and program handbooks, utilize standardized plan of study and transfer credit forms, a two-year schedule of planned classes, and attends meetings with and receives guidance on administrative policies and procedures from the Office of Educational Services and ADSA.

New faculty mentors for MPH and MHA students are oriented to their roles and responsibilities through a faculty onboarding session conducted by the ADAA and the APSS. This session describes the role of the mentor and support services available from the university. Ongoing training is provided on topics and changes important to mentoring students. New faculty also receive training on student administrative policies and procedures from the Office of Educational Services and the ADSA updates the Governing Faculty regularly on changes to policy, procedure or processes. In addition, a SharePoint site is available for all faculty mentors which includes expectations for student mentoring, and resources for advising and supporting students.

DrPH Students
For the DrPH program, students meet with the DDP to receive their plan of study advising and the requirements of practicum and dissertation. Faculty mentors are assigned by the faculty director of their chosen concentration, in consultation with the individual faculty members. Assignments are based on matching research or professional interests of students with faculty. The faculty's mentoring load and availability are also considered in the selection process.

New faculty mentors for DrPH students are oriented to their roles and responsibilities through a faculty onboarding session conducted by the Assistant Dean of Academic Affairs and the DDP. This session describes the role of the mentor and the program's specific requirements, including those specific to the student concentrations. Ongoing training is provided on topics and changes important to mentoring students. New faculty also receive training on student administrative policies and procedures from the Office of Educational Services and the ADSA updates the Governing Faculty regularly on changes to policy, procedure or processes. In addition, a SharePoint site is available for all faculty mentors which includes expectations for student mentoring, and resources for advising and supporting students.
The MyRecords student information system includes an advising center where the advisor and mentors have access to student information that includes previously taken courses, real-time enrollment, expected graduation, and grades. A student planner is available for students to input and track their plan of study and can be accessed by the APSS, DDP, and faculty mentor.

MS and PhD Students
Faculty advisors for MS and PhD students are assigned by the Graduate Program Committee based on the student's research interests and faculty availability. The Graduate Studies Office provides detailed guidance on plan of study requirements, completion timelines, comprehensive exams and dissertation. The Graduate Studies office also requires all faculty advisors to attend mentoring training facilitated by their office to serve in the advisor role.

MS and Doctoral Students, their advisors and Graduate Program Chairs have access to a program management system call Seguidor. Seguidor documents the student's progress in their degree program, manages advisory/supervisory committee membership, the official plan of study, the scheduling of required meetings, comprehensive exams, and dissertation defense. Faculty involved in the supervision of a student have access to view the student's information in the Seguidor system.

4) Explain how advisors are trained to understand the needs of a diverse student body and to address students' needs and support their success.

Staff in advising with advising roles are members of professional organizations to support the growth and development of their skill in working with a diverse student body. These organizations include the National Academic Advising Association (NACADA), the National Association of Student Personnel Administrators (NASPA), American Association of Collegiate Registrars and Admissions Officers (AACRAO), Association of Schools and Programs of Public Health (ASPPH). Staff and faculty receive regular training and updates from the campus Office of Gender Resources, the Accessibility Services Center, the Counseling and Psychological Services office, and the Student Life Inclusion and Diversity Office. Faculty are offered additional training through the Office of Faculty Development. The COPH faculty and staff have also done the Intercultural Development Inventory with which they received individual consulting sessions with the IDI facilitators that included developing plans to develop their understanding and growth on the continuum.

5) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.

This documentation is located in the ERF at ERF->H->H1.

6) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable. Schools should present data only on public health degree offerings.

Information is gathered through the annual college-wide student survey, which goes out to all currently enrolled students each spring. All Students are asked about frequency of communication with academic/faculty advisor and faculty mentor (as appropriate), assistance with overall plan of study, other academic issues, availability, and overall satisfaction with advising. A copy of the survey results from the last three years can be found in the ERF at ERF->H->H1->COPH Student Surveys

MPH students also asked about satisfaction with Faculty Mentor/Advisor advising related to preparing for APEx, Capstone, career prep, research opportunities, and selecting electives.

MS-BIOS students are assessed on satisfaction with faculty advisor related to support for choosing between thesis/non-thesis, selecting thesis topics, writing thesis, career prep, research opportunities, and selecting electives.

DrPH students are assessed on satisfaction with faculty advisor related to preparing for practicum, developing digital portfolio, selecting dissertation topic, writing dissertation proposal, writing dissertation, connecting with other faculty/public health professionals, selecting courses/electives, and career exploration.

PhD students are assessed on satisfaction with faculty advisor related to preparing for qualifying exam, preparing for comps, selecting dissertation topics, writing research proposals, conducting dissertation research, writing dissertation, writing a journal article, connecting with faculty/public health professionals, selecting courses/electives, career exploration, and identifying TA/GA opportunities.

Public Health Student Satisfaction with Overall Quality of Academic Advising
% Responding "Agree" or "Strongly Agree"

	2021-2022 Response Rate: 31%	2022-2023 Response Rate: 67%	2023-2024 Response Rate: 53%
Master's	77.3%	80.9%	93.9%
Doctoral	81.3%	85.7%	88.0%

Students are asked for qualitative feedback as part of the survey too. The common themes expressed by students in this feedback have shifted since the implementation of the APSS position. Before this position, students wanted more training for faculty advisors on advising and mentoring students. They desired advisors that did not change frequently who had better knowledge of program requirements and course availability. After the APSS position was implemented, there was an increase in the number of students who commented on their excellent experiences and happiness with having the APSS their academic advisor.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: Feedback from student surveys indicates changes made that separating academic plan of study advising to staff from the faculty mentor's role enhances the student experience. By delineating these roles, students receive more personalized support, leading to a deeper comprehension of academic pathways and opportunities for personal and professional development. This structured approach has demonstrated that students value comprehensive guidance tailored to their academic needs and career aspirations, fostering a more well-rounded educational journey.

H2. Career Advising

The school provides accessible and supportive career advising services for students. Faculty and/or staff provide appropriate career placement advice, including advice about enrollment in additional education or training programs, when applicable.

All students, including those who may be currently employed, have access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce, and prepared to address student needs and support their success. Career advising must be sensitive to the needs of a diverse student body.

Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The school provides such resources for both currently enrolled students and alumni. The school may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the school's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

COPH Career Services provides the following to all College Students:

One-on-One Services
All College students may receive one-on-one assistance from the Director of Career Services in person or via Zoom. The most frequent one-on-one service is general career counseling, which includes:

- Identifying types of public health careers that may be a good fit for the individual's interests and skill set.
- Helping students plan their time at the College in a way that will maximize their opportunities post-graduation.
- Providing suggestions for how to gain experience while a student.
- Guiding students on how to grow their professional network.

The next most utilized individual service is professional document reviews, such as resumes, cover letters, CVs, and personal statements. The final one-on-one service available is interview preparation. Students may schedule an appointment to receive general interview advice, or they may complete a mock interview.

On-Demand Resources
Our students are located throughout the country and globe, and the majority work full time, so we ensure that they can access career development resources 24 hours a day. A robust Career Services area has been created within the Student Success Center hosted in Canvas. Using the Canvas LMS enables new content to be added regularly.

Table H2.1 Table of Contents for Career Services materials in Canvas Student Success Center	
Career Services Events *Recordings and materials from past Career Services events from 2022 to present.*	**Job Search** Handshake at UNMC Public Health Careers Job Search Databases Fellowships Federal Job Search International Student Resources

Professional Development General Professional Resources Volunteering Student Leadership Additional Trainings & Certifications Connect with Alumni	**Applying** CV/Resume Review & Tips Cover Letters & Personal Statements Career Counseling Scheduler COPH Work Study/Job Opportunities
Networking Resources LinkedIn Tips Networking Tips Professional Associations Conferences Informational Interviews Connect with Alumni	**Interviewing** Mock Interview Scheduling Interviewing Tips Salary Negotiation

Presentations & Events

The Director of Career Services hosts events that cover information and skills necessary for navigating the public health job market effectively. Topics covered during the past three years include:

- Effective Public Health Resumes
- Tips for Preparing for Interviews
- Global Health Career Panel
- 101 Careers in Public Health
- Creating & Managing your Personal Board of Directors
- APHA Annual Meeting 101

All events are available via Zoom, and recordings and materials are posted in Canvas.

Additionally, the Director of Career Services facilitates a Career Conversation series for students, featuring guests visiting as Grand Rounds presenters. This series provides an informal opportunity for students to hear the career journey of public health leaders, ask questions and receive career advice.

Job Posting Assistance

UNMC launched Handshake in the Summer of 2022, as a centralized site for all UNMC students to view student opportunities. The COPH Director of Career Services co-led the campus wide implementation team with the UNMC Financial Aid Director. In addition to all UNMC student positions being posted in Handshake, the Director of Career Services has worked with COPH partner organizations to create Handshake accounts and directly post opportunities. The Director of Career Services includes approximately 20-30 positions from Handshake (student positions, Nebraska-based, national, fellowships, internships, etc.) in the biweekly student newsletter, to help encourage students to use the platform.

The Student Success Center also links to a number of public health-related job databases, including ASTHO's PublicHealthCareers.org, ASPPH's PublicHealthJobs.org, Emory's Public Health Employment Connection, USAJobs, and a number of specialized job posting sites related to each COPH Concentration. There are also instructions and tips for how to use job search sites such as Indeed and LinkedIn.

Meeting Students' Needs

All services described are available to students in each degree program. Students in some degree programs have additional resources available. For example, MHA students have access to health administration specific content in Canvas, and MS and PhD students have access to workshops and presentations via UNMC Graduate Studies.

Because a majority of students are online and working full-time, the Director of Career Services is available beyond traditional business hours. Student appointments are regularly held in the evenings and weekends.

Appointments are scheduled using Microsoft Bookings, which allows students to schedule a meeting directly via a link, instead of emailing back and forth to identify a timeslot.

2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

The Director of Career Services was hired in 2012 after an extensive application review and interview process. The Director obtained an MPH in 2005 from Emory University and has a wide breadth of experience in public health practice, spanning community-based organizations, non-profits, local health departments, community health centers, federal public health agencies and global health.

The Director maintains professional memberships in public health and career services associations to stay up to date on best practices. Through state and national career services associations, the Director has received formal mentoring, participated in on-going professional development and has access to materials and resources. The Director attends the state public health conference annually, and the APHA Annual Meeting on a rotation. These conferences enable the Director to maintain and expand their professional network and learn about current and upcoming public health practice topics. Finally, the Director has been engaged in ASPPH's Career Services Assembly (CSA) since being hired in 2012 and has served as Chair of the assembly from 2022 to present. The CSA provides professional development specific to individuals providing career services at schools and programs of public health. The CSA community regularly shares resources, materials and advice related to serving public health students.

3) Explain how advisors are trained to understand the needs of a diverse student body and to address students' career needs and support their success.

The Director of Career Services came to COPH with extensive DEI-related training and experience, after leading health equity and undoing racism efforts in previous employment. For example, they completed an intensive Undoing Racism workshop with The People's Institute for Survival and Beyond, and created a project that received funding from The Kellogg Foundation's first round of Racial Healing grants.

Since joining COPH, the Director has participated in a variety of training and activities aimed at better understanding and serving our diverse student body. Every COPH employee had the opportunity to complete the Intercultural Development Inventory (IDI) and receive individual coaching. The IDI assessment, coaching, workshops and individual development plan process resulted in the Director pursuing additional training on understanding and serving the needs of students who are neurodiverse, deaf and hard of hearing. National Association of Colleges and Employers (NACE) workshops and resources have proven particularly helpful with regard to coaching students in these populations.

4) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

Leadership & Advocacy Class Assignment

- Required class assignment, within a core MPH course
- From Fall '21 – Spring '24: 1hr long appointments with 316 students
- Description:
  As the demographics of our students has evolved to consist of more online, working students, we wanted to shift away from a purely opt-in model for Career Services. Students who are already established in their careers might not see a need for traditional Career Services, so we created a Career Coaching assignment within a course. The Leadership & Advocacy course was selected because there were existing assignments on professional

values, and assessments such as MBTI and Change Style Indicator, all of which lend themselves to thinking about how one wants to have an impact with their career. Students complete a survey at the start of the course, which includes career-related questions, and the faculty shares those career responses with the Director of Career Services. Students also send their resume in advance of the appointment, so the Director can see the student's background.

The nature of the career coaching appointment is unique to each student, based upon their current needs. Some end up including a resume review or interview preparation. Most are some form of general career coaching that includes understanding the nature of public health jobs, what they look like, where they happen and who is doing the work. It is common to review resources in the Student Success Center as well as additional websites related to the student's specific interests, with the goal of equipping each student to continue exploring on their own.

This assignment has been an overwhelming success. Students regularly email the course faculty after the appointment to express how helpful the session was, and during course evaluations it is mentioned as a highlight of the semester. Even students who are mid and senior career level express appreciation for how valuable it is to have this opportunity to pause and reflect, so they can be more intentional about their career development while a student. Many students have admitted that they would not have independently scheduled with Career Services but were grateful for the assignment and go on to schedule additional appointments in the future.

Health Resources and Services Administration (HRSA) Scholars Learning Community Professional Development

- Required component for scholarship recipients
- From Fall '23 -- Spring '24: 39 students
- Description:

  COPH was awarded a HRSA Public Health Scholarship grant, which has supported scholarships for working students in the region, many of whom are returning to school for the first time in many years. As a part of the scholarship program, COPH created a learning community to provide general support across the scholars, and specific resources to make sure these scholars are successful in our academic programs. The Director of Career Services has provided a series of development activities for the Learning Community, starting with a presentation on the Public Health and Social Sciences – Individual Development Plan (PHaSS-IDP). Scholars completed the four assessments of the PHaSS-IDP, created development goals and submitted a reflection on the process in Fall 2023. The Director of Career Services provided feedback directly to each scholar, and coached the group on how to use the PHaSS-IDP effectively for themselves and with others they may mentor or supervise. Scholars have found the tool and process valuable, with several scheduling individual sessions with the Director of Career Services to work through their results, goals and action plans.

  The developmental goals and reflections were used to create learning content in Spring 2024. A dedicated discussion board was created in the Learning Community's Canvas space, resulting in a curated resource list directly related to their development goals. Two faculty presentations were developed and delivered live during evening Learning Community sessions:

  - Leadership, Management & Followership
  - Grant Writing Tips for Public Health Practice

Career Conversation Series

- Optional sessions available live to all students
- From Fall '21 -- Spring '24: 19 sessions, with 5-15 students attending each session

- Description: The Career Conversation series was launched in 2014, and provides a unique opportunity for COPH students to gain career insight from national and international public health experts. Each session highlights:
    - The career path of public health leaders in research and/or practice
    - Tips for how to get started in a particular area of public health
    - Insight on current challenges and opportunities in an area of public health
    - Advice for career development

  The design of this series leverages other college resources by adding this student session onto the itinerary when experts are visiting to deliver a Grand Rounds talk or another invited lecture. The guest is provided a document in advance to help them think about stories and advice to share related to their career journey. Each conversation is facilitated by the Director of Career Services, with students able to join in person and via Zoom. Because of the informal nature of these sessions and the types of personal stories that are shared, slides are not used, and the sessions are not recorded. Students appreciate the opportunity to learn the lessons behind the job titles, hear how professional decisions have been navigated, and hear about upcoming trends they should keep in mind. Simultaneously, the Director of Career Services gains valuable insight into specific areas of public health, which helps them serve students more effectively.

LinkedIn Group for Students & Alumni

- Private LinkedIn Group managed by Director of Career Services
- Currently over 280 members
- Description:
  The Director of Career Services manages a private LinkedIn Group for COPH Students and Alumni. The group was established in 2013 to allow students and alumni to communicate on LinkedIn. The Director of Career Services also shares professional development resources and event information in the group. In recent years LinkedIn has become a leading platform for job searching, both in the job search tab and with people posting and sharing open opportunities with their professional networks. In early 2024 the Director of Career Services began sharing relevant jobs in the group, with between 15-35 jobs shared in the group each week. These posts collectively receive over one thousand impressions weekly. Expanding the use of this LinkedIn Group helps maintain visibility with alumni. Even for those who are not currently looking for employment, it is helpful to see what types of positions are open, and in which types of organizations. At the spring 2024 Nebraska Public Health Conference, several alumni spontaneously mentioned the job postings and how much they like seeing them.

5) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

Information is gathered through the annual College-wide student survey which goes out to all currently enrolled students. A copy of the survey results from the last three years can be found in the ERF at ERF->H->H1->COPH Student Surveys

Students are asked about satisfaction with networking opportunities, career preparation resources, assistance seeking employment, and overall career services. In 21-22 all students were asked to respond to this question. Because of the large amount of 'NA' responses, in 22-23 a screening question was added asking if students had met with the Career Services Director or accessed any COPH Career Services. If they responded yes, they were then asked about satisfaction with specific components of Career Services.

Student Satisfaction with Overall Quality of Career Advising % Responding "Agree" or "Strongly Agree"

	2021-2022 Response Rate: 31%	2022-2023 Response Rate: 67%	2023-2024 Response Rate: 53%
Master's	83.9	97.5	97.2
Doctoral	73.1	90.0	100.0
Student Satisfaction with specific components of Career Services % Responding Somewhat or Very Satisfied			
Career preparation resources		96.1	95.6
Assistance seeking employment		86.2	85.4
Networking opportunities		84.7	87.2
Career Services website		92.9	93.0
Handshake platform		86.2	90.2

Students are asked for qualitative feedback as part of the survey as well. The comments related to career services are notably stable from year to year. Each year, a number of students express their appreciation and gratitude for the assistance they have received from the DCS. Students have commented that they would like to see more career services geared towards specific populations, such as international students not living in the United States and midcareer students seeking to advance in their current organizations.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths*:* The Director of Career Services' professional background and extensive public health network allow them to guide students in an in-depth and nuanced way. Whatever a student's interests, skills and background, the Director can point them towards relevant resources and career options to explore.

Structurally, the Director of Career Services is on the Academic Affairs team and reports to the Assistant Dean for Academic Affairs. This provides a direct link between understanding student and alumni experiences on the job market, and how our curriculum prepares them for employment. The Director can weigh in on conversations about curriculum, and regularly communicates trends in job postings, employer feedback, and student and alumni experiences with their job search.

Career Services has effectively adapted to student demographics, making sure that students in different states and countries don't just have access to resources, but are served in a way that exceeds their expectations.

Weaknesses and Plans for Improvement*:* Career Services resources in the Student Success Center will continue to be expanded based upon student needs and shifts in the public health workforce and job market. One area of content currently under development is related to managing one's career over time, which ties back to student survey comments. Currently this information is covered briefly during new student orientation, and more in-depth during individual career counseling sessions.

Prior to COVID, COPH Career Services hosted a variety of in-person events each year, including an Opportunity Fair (to promote opportunities and networking with community organizations), an Experience Expo (to highlight ways students can gain experience), and site visits to a variety of public health-related

organizations. While large in-person events are not warranted given the COPH student demographics, Career Services is currently exploring options for smaller events relevant to those students who are on campus.

Continued growth in student enrollment (and therefore our alumni body) will require additional staff to fully support student and alumni career development.

H3. Student Complaint Procedures

The school enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to school officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate complaints and/or grievances to school officials, addressing both informal complaint resolution and formal complaints or grievances. Explain how these procedures are publicized.

Student complaints and grievances are taken seriously by the College of Public Health and UNMC. When a student expresses an issue to a faculty, staff, or administrator, they are encouraged to bring the concern to the attention of the Assistant Dean for Student Affairs, Assistant Dean for Academic Affairs, student services staff or faculty member. The College of Public Health wants to resolve complaints and grievances with as little disruption to the student and their academic progression as possible by supporting informal discussions with the faculty, advisor, or instructor. The MPH, MHA and DrPH students apply the grievance procedures defined by the College of Public Health, the MS and PhD students apply the grievance procedures defined by the Graduate College and the UNMC Graduate Studies Office. These procedures are outlined thoroughly in the Student Catalog the student grievance procedure section of the College of Public Health and Graduate Studies. The catalog is available at the following webpage link https://catalog.unmc.edu.

Procedure for MPH, MHA, and DrPH Students

Informal Resolution

At any stage of an informal process the Ombudsperson can be consulted as an independent, neutral, informal, and confidential consultant. The Ombudsperson can provide additional information and clarification on university policies and proceedings, assistance in facilitating difficult conversations, and guidance in prioritizing options for dealing with the problem. The Ombudsperson will also report ongoing trends in student grievances, while maintaining students' confidentiality, to campus administrators including the Dean of the College of Public Health and the UNMC Chancellor. It is recommended that the first course of action is a discussion between the student and the faculty member involved to resolve the issue. If discussion with the involved faculty member is not possible or effective, the student should discuss the issue with the chair of the faculty member's primary department. If discussion with the department chair is not possible or effective: the student should discuss the issue with the Assistant Dean for Student Affairs. If the issue cannot be resolved informally, and the student wants to summarize the incident without proceeding to a formal complaint, this may be done through one of two mechanisms; unwritten summary in which the student vocalizes a summary of the issue with the Student Ombudsperson or written documentation in which the student sends a written summary to the COPH Assistant Dean for Student Affairs who will keep this documentation in a confidential and secure file. The COPH Assistant Dean for Student Affairs will inform the student that the recourse will be limited without filing a formal complaint.

Formal Resolution

If the issue cannot be resolved informally, and the student wants to proceed with an investigation of the incident(s), then the complaint may move to the formal procedure as follows. The complaint must be submitted electronically to the COPH Dean and the COPH Assistant Dean for Student Affairs within 60 class days after the incident occurred or 60 class days after informal resolution procedures have failed. The complaint should attempt to identify the following: the student grievant; the respondent faculty or administrator; any other person involved; the incident, including approximate date and time, and whether the incident is ongoing; the policy claimed to have been violated or the limitation imposed on the student's ability to complete his/her degree; and a brief statement of the remedy sought. Every complaint will be acknowledged by email correspondence from the COPH Office of the Dean within 5 class days of the receipt of the complaint. At this stage, the faculty or administrator involved will be notified by the Vice Dean that a grievance has been filed against them, and the nature of the grievance. Within 10 class days of

acknowledging the complaint, the COPH Assistant Dean for Student Affairs will meet with the student and the involved faculty separately to determine first whether a preliminary resolution can be reached. If a preliminary resolution cannot be achieved, the COPH Assistant Dean for Student Affairs shall notify both parties that the grievance will be referred to an ad-hoc COPH Professional Student Grievance Panel. COPH Assistant Dean for Student Affairs will inform the faculty member that they may prepare a statement in response to the allegations for review by the grievance panel, due within 10 class days. The COPH Assistant Dean for Student Affairs may adjust this timeline if there are compelling reasons for delay. The COPH Professional Student Grievance Panel consists of six members (three faculty and three students). The COPH Dean will select three members of the COPH Leadership Council who have no conflicts in the case. The COPH Student Association President will select three Student Association Executive Board members who have no conflicts in the case. The panel will be reconstituted for each formal grievance brought forward.

The COPH Assistant Dean for Student Affairs will be responsible for keeping all documentation pertinent to the formal complaint in a secure and confidential place.

Procedure for MS and PhD Students

Informal

Prior to filing a confidential complaint or grievance, students are encouraged to make an initial attempt to resolve conflicts with faculty/their advisors using a preliminary resolution process, such as the ones outlined here. It is recommended that, when possible, the first course of action involves a discussion between the graduate student, the faculty member involved, and/or the student's Supervisory Committee to resolve the issue. The student is encouraged guidance as needed about this conversation from various individuals including, but not limited to other faculty or supervisory committee members, their Graduate Program Director, a Student Ombudsperson and/or the graduate student wellness advocate. Some of these individuals also may be helpful in resolving the issue by serving as a mediator. Supervisory committee members and Graduate Program Directors, when made aware of a conflict, are encouraged to consult with the faculty member's department chair and/or dean to resolve the problem amicably. If the conflict is resolved to the student's satisfaction and, in the case of student-advisor conflicts that the resolution does not involve the student changing advisors, then no further action is required.

Formal

If a MS or PhD student files a formal complaint, an initial inquiry will be conducted to assess all confidential complaints filed. If the complaint involves behaviors or conduct that could potentially be considered inappropriate mentoring behaviors, then at a minimum, a confidential incident report may be filed to document the concerns/allegations. If the student requests further action beyond the confidential incident report or if incident reports of a similar nature have been filed previously, then corrective action may be taken appropriate to the nature of the incident/inappropriate behavior. The complaint is submitted to the Assistant Dean for Graduate Student Success. Alternatively, the complaint may be placed in one of the Graduate Studies suggestion boxes. Graduate students are encouraged to file a complaint promptly after an incident occurs or after the preliminary resolution procedures have failed. Students are welcome to file complaints after changing advisors or after leaving the institution. Every non-anonymous confidential complaint will be acknowledged via email correspondence from the Assistant Dean for Graduate Student Success within 5 business days. Complaints submitted electronically and designated by the submitting party as "Urgent" will be reviewed and acknowledged within 72 hours.

The Assistant Dean for Graduate Student Success will conduct an initial assessment of the complaint by meeting individually with the affected student(s) and, with the student's permission, possibly also, the faculty member involved. Affected students could include someone mentioned in an anonymous complaint, filing a complaint, or mentioned in the initial assessment of the complaint. The purpose of this initial assessment is to determine if the concern involves alleged behaviors that constitute inappropriate conduct or if, instead, it represents a misunderstanding or misperception on the part of either the graduate student or the faculty. The Assistant Dean for Graduate Student Success, in conjunction with the Dean of Graduate Studies and Vice Chancellor for Research, will make the determination of whether a behavior is egregious or non-egregious. The subsequent processes governing the investigation of the complaint, the potential responses, and the potential actions, including corrective actions, will be dictated by the assigned complaint

level. The complaint level and the level of response and corrective action will be determined based upon factors such as the nature of inappropriate conduct, the number of complainants, and, if applicable, previous confidential incident reports or grievances. In situations in which the faculty member involved is informed about the complaint, resources, information, and/or the opportunity to enhance their mentoring skills will be provided to reduce the probability of a recurrence of such behaviors or misunderstanding, and to minimize the likelihood that further and/or significant corrective action is required.

2) Briefly summarize the steps for how a formal complaint or grievance is filed through official university processes progresses. Include information on all levels of review/appeal.

The steps for a formal complaint or grievance for MPH, MHA and DrPH students are as follows:

1. The student submits the complaint electronically to the Assistant Dean for Student Affairs within 60 days after the incident occurred or within 60 days after informal resolution has failed.
2. The Assistant Dean for Student Affairs acknowledges receipt of the complaint electronically to the student within 5 days after receiving complaint.
3. The Assistant Dean for Student Affairs meets individually with the student and the faculty member involved within 10 days of notification of receipt.
4. The Assistant Dean for Student Affairs convenes a panel if resolution is not reached within 10 days of the last individual meeting.
5. The student and the faculty member submit statements and evidence to the grievance panel within 10 days of the last individual meeting.
6. The Panel submits written report of complaint review to the college dean within 30 days of panel assembling to review complaint.
7. The college dean distributes the panel's conclusion and recommended actions to the involved faculty member and their department chair within 10 days of receiving the panel's full report.
8. The college dean distributes the panel's conclusion and non-confidential recommended actions, and non-confidential corrective actions as determined by the college dean to the student within 10 days of receiving the panel's full report.
9. If the panel identifies misconduct, the college dean, in coordination with the faculty member's department chair, takes corrective action against the faculty member, considering the recommendations of the panel.

The steps for a formal complaint or grievance for PhD or MS students are as follows:

1. The student submits the complaint electronically or via Graduate Studies complaint box.
2. Preliminary review of complaints and determination of complaint level is conducted by the Assistant Dean for Graduate Student Success in conjunction with the Vice Chancellor of Research.
3. All formal complaints are reviewed by the Graduate Student Grievance Committee, consisting of four graduate students and four faculty members will be assembled.
4. The Grievance Panel members will review the statements of all parties from the Assistant Dean's assessment(s).
5. The Grievance Panel will separately interview the involved parties and any named witnesses. They will review other provided evidence. The panel may seek additional, relevant information or documents from all appropriate sources.
6. The involved parties may each select a trusted individual (e.g., another student, a faculty member, or an attorney) to accompany them when meeting with the Grievance Panel. The involved party is responsible for any fees that this individual may charge. This individual may provide guidance and support but may not otherwise directly participate or speak in the meeting. The process shall not be unduly delayed based on the availability of this individual.
7. The panel will provide a written report summarizing the obtained evidence, detailed proceedings, conclusions, including voting records of student, faculty, and staff members, and recommended actions to the Dean of Graduate Studies within 15 business days of when the panel last assembled to meet with involved parties.

8. The Executive Associate Dean for Graduate Studies will advise the Grievance Panel about recommended corrective action, as needed.
9. The graduate student and faculty/administrator's names, identifying information, statements, and comments as well as any deliberations, advice, or evidence given during Grievance Panel deliberations are confidential. The members of the Grievance Panel are expected to abide by this duty to maintain confidentiality. Any unauthorized release or carelessness in the handling of this confidential information is considered a breach of this duty to maintain confidentiality and is strictly prohibited.
10. The Grievance Panel will submit a formal report to the Dean of Graduate Studies summarizing the proceedings, including the interviews conducted and the evidence/material reviewed, the deliberation, and the findings of the Panel. The Panel may also submit specific recommendations for remediation and/or redress.
11. Within 6 business days of receipt of the full report from the Grievance Panel, the Dean of Graduate Studies or designee, will distribute the conclusion, any required corrective action(s), and appeal procedures to the faculty member and the department/Division Chair or Dean of the faculty member's primary unit.
12. The Dean of Graduate Studies or designee will distribute the conclusion and non-confidential recommendation(s) by the panel as well as the non-confidential corrective action(s) as determined by the Dean of Graduate Studies to the student.
13. The Dean of Graduate Studies or designee is responsible for reporting to UNMC General Counsel regarding situations in which corrective action could potentially require reporting to the NIH.
14. If the Grievance Panel determines that the preponderance of evidence indicates that inappropriate conduct took place, then the Executive Associate Dean for Graduate Studies is responsible for prompt implementation of the plan for corrective action, such as the performance improvement plan, on the behalf of the Dean of Graduate Studies. The Executive Associate Dean for Graduate Studies will work in coordination with the department/Division Chair or Dean of the faculty member's primary unit to implement this plan.

3) List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution.

INSERT NARRATIVE HERE – waiting for verificaiton from Graduate Studies. Will update in Final Self Study

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths: The COPH and Office of Graduate Studies have detailed complaint and grievance procedures documented in the catalog. In the 2023-2024 academic year, the Office of Graduate Studies updated the policy for PhD and MS students to include more detail for preliminary conflict resolution procedures and assessment of confidential complaints.

Weaknesses: The current COPH grievance process for MPH, MHA and DrPH students does not include the same level of detail of preliminary conflict resolution procedures and assessment of confidential complaints as the PhD and MS policy.

Plans for Improvement: The COPH will review the current policy and make updates to ensure it includes consistent preliminary conflict resolution procedures and assessment of confidential complaints.

H4. Student Recruitment and Admissions

The school implements 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.

1) Describe the school's recruitment activities. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.

The College's Student Affairs and Admissions Office has primary responsibility for the oversight and implementation of recruitment initiatives and devising strategies to:

- Identify and attract qualified applicants of diverse backgrounds and perspectives interested in improving the health of communities and in a future career in public health.
- Matriculate students who are academically prepared to succeed in rigorous educational programs and offer diverse academic, professional, and social perspectives.

The Admissions Office cooperates closely with the other professional schools and graduate studies at UNMC and the COPH departments and programs to provide prospective students with a multitude of avenues to learn more about the profession of public health, the College, specific programs, and the criteria for admissions. The avenues provided are as follows:

- The college academic and admissions websites
- Promotional materials and brochures
- Social media paid advertising (Facebook, Instagram, Google, etc.)
- Campus visit events
- Admission and program webinars
- Walk-in visits and phone calls
- Recruitment graduate and career fairs, including in-person and virtual.
- Booths at discipline specific research and professional conferences
- Campus outreach efforts, including monthly counseling sessions for undergraduates.
- Established relationships with undergraduate advisors and career centers.
- Faculty visits and lectures with undergraduate classes and student organizations
- Strategic activities with Dual-Degree Program partners
- Dissemination of electronic materials to undergraduate and master's level feeder programs.
- Dissemination of materials to human resource and industry partners with employee training needs (ex. Health departments, clinical healthcare organizations)

2) Provide a brief summary of admissions policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each. Schools should discuss only public health degrees. Detailed admissions policies, if relevant, may be provided in the electronic resource file and referenced here.

In accordance with University Policy, UNMC prohibits the denial of admission, or of Medical Center privileges, to students or applicants based on individual characteristics such as race, color, sex, national origin, age, disability, religious or political beliefs, or sexual orientation.

The College of Public Health, Office of Admissions, manages the application for all programs through the Schools of Public Health Application System (SOPHAS) and through SOPHAS Express for dual degrees. The MHA degree applications are managed through SOPHAS and the Health Administration, Management, and Policy Centralized Application Service (HAMPCAS) application service.

The professional degree programs (MPH, MHA, DrPH) applicants must meet the general College requirements and any department and discipline requirements. Once the admissions office determines that applications are complete and ready for review, they are referred to the respective department faculty admission leads who are responsible for reviewing the applications with the department-based program

admissions committee. Applications must be reviewed by at least two Department-level faculty together to make an admissions determination and recommendation to the Admissions Office. The official notification of admissions decision is communicated in a letter from the COPH Dean.

Applicants seeking admission to the College's MS or PhD programs must meet the general requirements for application set by the UNMC Graduate Studies Office for UNMC Graduate Studies general requirements as well as the requirements of the specific College degree/program of study. Complete applications are distributed to respective Departmental Graduate Program Committee (GPC) Chairs for review by the Departmental GPC. The Departmental GPCs make admission recommendations and communicate recommendations to the Graduate Studies Office. The official notification of admissions decision is made by the Dean of Graduate Studies.

Admissions of MS and PhD students are limited to the number that can best be handled too the advantage of the College, the admitting department, and the students. To assess fit for the program, the GPC will evaluate the candidates for a match of their academic and research interests with that of faculty in the Department who will be working closely with the students throughout their study in the College. For all degree programs, no single criterion determines admission of an applicant; instead, the College admission recommendations consider the following:

Master of Public Health

Applicants to the MPH program must submit official transcripts reflecting an earned bachelor's degree with a 3.0 or higher GPA on a 4.0 scale. Applicants to the epidemiology concentration must have completed one college-level precalculus or similar math course with grade of B or better, the environmental and occupational health concentration applicants must have successfully completed one semester of biology, one semester of chemistry and on semester of college-level math and applicants to biostatistics must have completed college level statistics and algebra with a grade of B or better. All non-US transcripts must be evaluated by the World Education Service or ECE using a course-by-course evaluation with verification of comparable degree status; three letters of recommendation from recommenders that can speak to the academic, practice and/or research abilities of the applicant; a one page personal statement describing the applicants interests in and potential for contributing to public health and the chosen concentration area, career objectives and a self-assessment of personal skills and general preparation for succeeding in a public health graduate program; a resume or curriculum vitae; Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

Doctor of Public Health

Applicants to the DrPH program must submit official transcripts reflecting an MPH or MSPH degree from a CEPH accredited institution. Additional foundational coursework will be required for individuals who do not meet this requirement. MPH or MSPH degree from a Council on Education for Public Health accredited institution. Additional foundational coursework will be required for individuals who do not meet this requirement. There are also minimum years of experience required, the Epidemiology concentration requires a minimum of 3 years of relevant public health practice experience with emphasis on epidemiology, Emergency Preparedness requires a minimum of 3-5 years of relevant emergency preparedness experience and the Leadership and Advocacy concentration requires a minimum of 5 years of relevant public health management or leadership experience. All non-US transcripts must be evaluated by the World Education Service or ECE using a course-by-course evaluation with verification of comparable degree status. Three letters of recommendation are required from recommenders that can speak to the academic, practice and/or research abilities of the applicant; applicants must submit a personal statement that is no more than 1500 words in length and answers questions listed on the programs admissions page; an updated resume or curriculum vitae that includes employment history, public health practice experience, volunteer and service activities; Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

Master of Science in Biostatistics

Applicants to the MS in Biostatistics program must submit official transcripts reflecting an earned bachelor's degree with a 3.0 or higher GPA on a 4.0 scale. All non-US transcripts must be evaluated by the World Education Service. All applicants must have a bachelor's degree in mathematics, statistics, computer science, or a related field from an accredited college or university, with a GPA of at least B (3.0 on a 4.0-point scale). Applicants need to have taken undergraduate courses in calculus, multivariable calculus, linear algebra, and introductory statistics, each with a grade of B (3.0 on a 4.0-point scale) or higher. Applicants must have three letters of recommendation submitted with a minimum of one coming from an academic source (instructor, faculty mentor); a one page personal statement that describes the applicants interest in and potential for contributing to the field of biostatistics, career objectives and self-assessment of computer, quantitative analysis, personal skills and general preparation for succeeding in a biostatistics master's program, a resume or curriculum vitae; Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

PhD in Biostatistics

Applicants for the PhD in Biostatistics must hold at least a Bachelor of Science in Mathematics, Statistics, or equivalent degree. Applicants with MPH in Biostatistics will be considered if they have college-level Calculus I, Calculus II, Multivariate Calculus, and Linear/Matrix Algebra, from a recognized college or university. Applicants must submit official transcripts reflecting an earned bachelor's degree with a 3.0 or higher GPA on a 4.0 scale. All non-US transcripts must be evaluated by the World Education Service. Three letters of recommendation are required, two letters must be from faculty members from the applicant's previous program who can attest to the applicant's ability to successfully pursue a PhD program in Biostatistics. The remaining letter may be an academic or professional reference. Applicants must submit a statement of intent which supports interest areas and career goals and a resume or curriculum vitae. Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec). The GRE is not required but is recommended for students with a cumulative GPA below 3.0 or received a grade of B- or lower in any STEM course.

PhD in Environmental Health, Occupational Health and Toxicology

Applicants must have a bachelor's degree or equivalent from a recognized college or university. Applicants must submit official transcripts reflecting an earned bachelor's degree with a 3.35 or higher GPA on a 4.0 scale. All non-US transcripts must be evaluated by the World Education Service. They must submit three letters of recommendation from academic or professional references, a statement of intent which supports interest areas and career goals and a resume or curriculum vitae. Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

PhD in Epidemiology

Applicants must hold a Master of Science, Master of Arts, or Master of Public Health in epidemiology or equivalent degree. Applicants must submit official transcripts reflecting an earned bachelor's degree with a 3.0 or higher GPA on a 4.0 scale. All non-US transcripts must be evaluated by the World Education Service. Three letters of recommendation are required, two letters must be from faculty members from the applicant's previous program who can attest to the applicant's ability to successfully pursue a PhD program in Epidemiology. When previous graduate training was completed more than 3 years ago, letters from other academic or professional references may be submitted. Applicants submit a statement of intent which supports interest areas and career goals and a resume and curriculum vitae. A Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

PhD in Health Promotion & Disease Prevention Research

Must hold a master's degree or other advanced degrees in a field related to health promotion and disease prevention from a recognized college or university. Exceptional students with a bachelor's degree will also be considered. Applicants must submit official transcripts from all previously attended colleges and

universities demonstrating a minimum GPA of 3.50 on a 4.00 scale GPA for all graduate coursework. Applicants must submit three letters of recommendation. At least two letters should be from faculty members in the applicant's previous academic program. The remaining letter can be from an academic or professional reference. A statement of intent with 500-700 words that describes their research interests, career goals, and how they contribute to a diverse campus environment and a resume or curriculum vitae. A Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

PhD in Health Services and Policy Research

Applicants must have a bachelor's degree from an accredited university or college. Applicants must submit official transcripts reflecting an earned bachelor's degree with a 3.0 or higher GPA on a 4.0 scale. All non-US transcripts must be evaluated by the World Education Service. Applications must include three letters of recommendation from academic or professional references are required. At least one letter should be from a faculty member in your previous academic program. Applicants must submit a one thousand word or less statement of intent which supports interests' areas and career goals and a resume or curriculum vitae. Official GRE scores taken in the last five years are required for all applicants. A Test of English as a Foreign Language, IELTS, or Duolingo scores are required of all applicants who have not received a previous degree from a US institution or a country where the only official language is English, such as U.K., Australia, or Canada (excluding Quebec).

3) Provide quantitative data on the unit's student body from the last three years in the format of Template H4-1, with the unit's self-defined target level on each measure for reference. In addition to at least one from the list that follows, the school may add measures that are significant to its own mission and context. Schools should focus data and descriptions on students associated with the school's public health degree programs.

Table H4.1 Outcome Measures for Recruitment and Admissions

Outcome Measure	Target	Year 1 21-22	Year 2 22-23	Year 3 23-24
Quantitative Score (GPA) for newly matriculating students	3.5	3.38	3.42	3.38

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

- We have a strong process for application review with committees whose membership is sufficiently experienced in evaluating applications. This helps ensure consistency in the application reviews and the use of application rubrics.
- The COPH has experienced consistent growth in enrollment for the last five years.
- The admissions office leadership has over fifteen years' experience in the admissions and recruitment profession.
- COPH has strong relationships with all the major universities and colleges, health departments and many of the healthcare entities in the State of Nebraska.
- Social media ads and regional/national efforts for recruitment have contributed to a student body that represented over 43 U.S. States in the 2023-24 academic year.

Weaknesses:

- The GPA for newly matriculating students has been below the 3.5 target for the last three years.
- The UNMC campus does very little marketing of education which means the COPH must carry the full weight and expense of promoting programs.
- The University of Nebraska releases scholarship funds around May 1st for the fall term which makes it challenging to compete with aid packages provided by peers much earlier in the admissions cycle.

Plans for Improvement:

- The COPH has begun working with a newly assembled campus marketing committee to advise UNMC Strategic Communications Office on needed products and services to support recruitment of students.

H5. Publication of Educational Offerings

Catalogs and bulletins used by the school to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

1) Provide direct links to information and descriptions of all degree schools and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

   COPH Homepage: https://www.unmc.edu/publichealth/

   COPH Academic Calendar: https://catalog.unmc.edu/general-information/academic-calendar/

   COPH Admissions Policies: https://www.unmc.edu/publichealth/academics/admissions/index.html
   Campus Wide Academic Policies: https://catalog.unmc.edu/general-information/student-policies-procedures/
   COPH (MPH & DrPH) Academic Policies: https://catalog.unmc.edu/public-health/student-section/

   Graduate Studies (MS & PhD) Academic Policies: https://catalog.unmc.edu/graduate-studies/policyandprocedures/

   COPH Educational Programs:
   - MPH: https://catalog.unmc.edu/public-health/academic-programs/master-of-public-health/
   - MS: https://catalog.unmc.edu/graduate-studies/programs-requirements/msdegrees/mbios/
   - DrPH: https://catalog.unmc.edu/public-health/academic-programs/doctor-of-public-health/
   - PhD: https://catalog.unmc.edu/public-health/academic-programs/doctor-of-philosophy/#text

   UNMC Graduate Studies: https://catalog.unmc.edu/graduate-studies/

   Grading policies and academic integrity standards can be found in all COPH course syllabi.