Overview of the School

At the Rollins School of Public Health (RSPH), students learn to identify, analyze, and intervene in today's most pressing public health issues. The school's location in Atlanta, referred to as the "Public Health Capital of the World," also is home to the U.S. Centers for Disease Control and Prevention; CARE; the national headquarters of the American Cancer Society and the Arthritis Foundation; The Carter Center; numerous state and regional health agencies; and the patient care, teaching, and health-related research programs of Emory University's Woodruff Health Sciences Center. This setting is ideal for hands-on research, collaborations with the world's leading public health agencies, abundant opportunities for student practicum experiences, faculty resources within the practice community and interdisciplinary work with national and international organizations.

The Rollins School of Public Health is one of six independent professional schools at Emory University. Administratively, the school is part of the Woodruff Health Sciences Center (WHSC). The RSPH has been an independent school since its inception with the operational, fiscal, and programmatic responsibilities of any of the professional schools at Emory University.   The school started in the form of the Masters of Community Health (MCH) program within the Emory School of Medicine, under the design of medical faculty members Bill Marine and Tom Sellers and Centers for Disease Control and Prevention (CDC) director David Sencer. The MCH program admitted its first class of students in 1975. In 1983, Emory changed the program's name to Masters of Public Health to convey a larger worldview. The program became a division in 1989 and in 1990, Emory's Board of Trustees granted the division school status. The Rollins School of Public Health was first accredited by the Council on Education for Public Health (CEPH) in 1992. The school was most recently re-accredited in 2005.

The fall 2010 issue of *Public Health* magazine provides a complete history of the school. The magazine is available on site in the Resource Room, included in the mailings to site reviewers and is also located on the web at http://whsc.emory.edu/home/publications/public-health/public-health/fall2010/index.html

The school comprises six academic departments: Behavioral Sciences and Health Education, Biostatistics and Bioinformatics, Environmental Health, Epidemiology, Health Policy and Management, Hubert Department of Global Health, as well as a distance education-based Career MPH (CMPH) degree program for working health professionals. The school also hosts over 20 interdisciplinary centers. More than 160 full-time faculty members teach and conduct research in areas such as mathematical modeling of infectious disease transmission, exploring relationships between nutrition and chronic disease, and investigating cancer causation and control. Other research interests include identifying the social determinants of health-risk behaviors, AIDS, developing church-based health promotion programs to foster changes in nutrition and other health-related behaviors, detecting and preventing adverse outcomes in occupational settings, and evaluating the cost of health care and the allocation of health resources. The school offers dual-degree programs with Emory's business, medical, nursing, theology and law schools as well as the physical therapy program and the physician's assistance program. In addition to these programs, the schools of public health and medicine collaborate on many levels. Research areas of mutual interest include nutrition, Alzheimer's disease, and the prevention and control of AIDS, cardiovascular disease, cancer, and adverse reproductive outcomes.

The RSPH program is community-oriented, and many students bring actual problem-solving experience with them. Students join the Rollins community from all fifty states and from more than forty foreign countries to contribute to the school and apply knowledge to promote health and prevent disease in human populations. The RSPH ranks sixth among the nation's 49 accredited schools of public health in U.S. News & World Report's 2012 edition of America's Best Graduate Schools.

Glossary

Term	Definition
ADAP	Assistant/associate directors of academic programs (ADAPs). ADAPs provide departmentally-based advisement to students. ADAPS monitor student progress from the point of admission through graduation and beyond, serving as an advocate based on individual student needs.
Administrative Staff	The Dean, Associate Deans, Assistant Deans, the Director of Information Technology and the Director of Communications
APT Guidelines	Appointment, Promotion and Tenure (APT) Guidelines are policies addressing the appointment and promotion of faculty.
CMPH	Career Master of Public Health (CMPH). A distance-based degree program for working health professionals.
Community Engaged In-Kind Contributions	Non-compensated, structured contributions that faculty and students make (i.e. panelists for lectures sponsored by the Student Government Association).
DGS	Directors of Graduate Studies (DGS). Faculty who direct PhD programs in various RSPH departments who are accountable to the dean of the Laney School of Graduate Studies, as well as to their own department chairs. DGS meet periodically with the RSPH executive associate dean for academic affairs to coordinate common activities and ensure integration of all doctoral degree programs within the school.
Dual Degrees	Degree programs that RSPH offers with other Emory University schools or programs, such as an MD/MPH offered with the Emory School of Medicine. Competencies and requirements for the MPH are identical for dual degree students and students completing the MPH alone.
Faculty, Core	Full-time faculty ($\geq$ .80) who teach, as well as those who mentor students or who provide academic advisement to students regarding thesis, special studies project (SSP), directed studies, dissertation or practicum.
Faculty, Other	Adjunct, part-time, secondary or jointly-appointed faculty who teach a course or mentor students during the year.
GradInfo	Graduate Information Survey. An on-line survey administered by the Office of Career Services at three, six, and eleven months after graduation.
Interdepartmental Joint Degrees	MPH/MSPH degree programs jointed offered by two departments such as the MPH in Global Environmental Health.
IPA	Interagency Personnel Agreement (IPA) – A mechanism which allows full-time faculty to be employed part-time by an agency such as the CDC while remaining employed by the university.
Practicum Site Supervisor	Preceptor
TATTO	The Laney Graduate School requires all doctoral students complete the Teaching Assistant and Teacher Training Opportunity Program (TATTO) that involves common courses or workshops on the development of teaching skills. As part of the TATTO program, the school offers a required course for doctoral students in the public health sciences on teaching as applied to public health.
WHSC	The Rollins School of Public Health is one of three schools and one academic research center housed in the Robert W. Woodruff Health Sciences Center (WHSC).

Table of Contents

1.0   The School of Public Health

1.1   Mission

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

Required Documentation. The self-study document should include the following:

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a.   A clear and concise mission statement for the school as a whole.

The faculty of the Rollins School of Public Health revised its previous mission and goals statements at a retreat held in August, 2009, and circulated the new drafts for review and revision by faculty and administrators over a period of six months. All comments were collected by the executive associate dean of academic affairs who included these comments into developed modified drafts. In September 2010, these drafts were presented to the Accreditation Self-Study Steering Committee comprised of representatives from the faculty, staff, student and community. These individuals made additional revisions. After posting them on the school's website for further comments, they were adopted as final statements by the Accreditation Self-Study Steering Committee in June, 2011.

RSPH Mission Statement:

The mission of the Rollins School of Public Health (RSPH) of Emory University is to demonstrate excellence in the discovery, dissemination and application of knowledge as it trains and supports future leaders in health promotion and disease prevention through organized community efforts around the world.

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b.   One or more goal statements for each major function by which the school intends to attain its mission, including instruction, research and service.

The mission statement directs the development of the goals, which drives the development of measurable objectives that in turn result in the metrics that measure school progress.

RSPH Goal Statements:

- Educate individuals for leadership in community health promotion and disease prevention in populations around the world
- Advance the science of public health through discovery, dissemination and application of knowledge
- Build capacity in the public health workforce and support the continuing education of graduates while contributing to efforts that promote health and prevent disease in populations around the world
- Maintain an academic community that supports excellence in instruction, research and public health practice

On an annual basis, the school assesses achievement through the *Annual Report* with benchmarks within the school and with peer institutions. Copies of the *Annual Report* for the last three years are found in the Resource Room.

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c. A set of measurable objectives relating to each major function through which the school intends to achieve its goals of instruction, research and service.

Goal I: Educate individuals for leadership in community health promotion and disease prevention in populations around the world

A. Recruit students with capacity for academic success and public health leadership
B. Recruit a student body that is diverse in background and interests
C. Offer excellent training in public health
D. Engage students in collaborative research and practice with faculty and other public health professionals
E. Engage students in service to the community
F. Foster interdisciplinary and interschool training
G. Provide support for students and an engaged student community

Goal II: Advance the science of public health through discovery, dissemination and application of knowledge

A. Recruit, develop and retain nationally and internationally regarded faculty members
B. Advance public health discovery through externally funded scholarship
C. Disseminate research findings through publications
D. Promote interdisciplinary applied scholarship

Goal III: Build capacity in the public health workforce and support the continuing education of graduates while contributing to efforts that promote health and prevent disease in populations around the world

A. Train professionals in the public health workforce, including the continuing education of graduates
B. Provide leadership to public health organizations and service that promotes the health of the community

Goal IV: Maintain an academic community that supports excellence in instruction, research and public health practice

A. Maintain a faculty complement qualified to fully support the school's instructional program
B. Assure financial resources to fund innovations and financial stability for the school and to provide physical space to support the school's programs in training and research
C. Contribute to the professional development of faculty, staff and students
D. Attract and retain a faculty and staff with diverse backgrounds
E. Achieve recognition among peers as being in the top tier of schools of public health

Core Competencies of the Rollins School of Public Health

The school developed a set of ten core competencies as a guide for the school's MPH/MSPH curriculum. In a series of meetings during the 2010-11 academic year, faculty members and academic staff from all departments developed a draft set of over-arching competencies to be met by all MPH/MSPH graduates. It should be noted that students enrolled in the distance learning program (Career MPH) are also earning the MPH degree; therefore, references used throughout this document such as "MPH/MSPH" or "all MPH students" refers to CMPH students as well, unless otherwise noted.

Over a period of three months, department chairs, the school's Education Committee and individual faculty members suggested revisions to the draft set of over-arching competencies. The Accreditation Self-Study Steering Committee adopted the final draft in spring, 2011.

Upon graduation, a student with an MPH/MSPH should be able to:

- Use analytic reasoning and quantitative methods to address questions in public health and population-based research
- Describe environmental conditions, including biological, physical and chemical factors, that affect the health of individuals, communities and populations
- Describe the use of epidemiology methods to study the etiology and control of disease and injury in populations
- Discuss how health policy and finance affect the delivery, quality, access and costs of health care for individuals, communities and populations
- Describe behavioral, social and cultural factors that contribute to the health and well-being of individuals, communities and populations
- Assess global forces that influence the health of culturally diverse populations around the world
- Apply skills and knowledge in public health setting(s) through planned and supervised experience(s) related to professional career objectives
- Integrate the broad base of public health knowledge and skills acquired from coursework, practicum and other learning activities into a culminating experience (thesis, special studies project, capstone)
- Develop the capacity for lifelong learning in public health
- Apply principles of ethical conduct to public health practice

d. A description of the manner in which mission, goals and objectives are developed, monitored and periodically revised and the manner in which they are made available to the public.

Development, Monitoring and Annual Assessment of Mission, Goals and Objectives

Under the direction of the executive associate dean for academic affairs, the school annually assesses the achievement of school objectives at the conclusion of each academic year. The school then revises objectives, as appropriate, for the next academic year. The school uses several approaches for such assessment and revisions.

1) *Administrative staff reviews of progress on goals and objectives from the previous academic year including review of the following documents:*

- Department annual reports
- Data on outcomes, reported by the Office of Admissions and Student Services and Office of Career Services (admissions, recruitment, enrollment, academic performance, career services)
- Data from the Office of Administration and Finance (sponsored research, indirect cost recovery, tuition revenue, budget performance, faculty recruitment)
- Student surveys (exit survey, survey of recent graduates, course evaluations)

2) *Recommendations and reactions from faculty members at an annual retreat*

At the start of each academic year, the faculty discusses selected key issues for the school at an annual faculty retreat. The dean sets the agenda, with input from the associate deans, chairs, standing committees and faculty. At least once every 5 years, the dean asks faculty members to review the mission and values statements and to suggest revisions. Selected staff and students also provide input.

Retreats result in recommendations for changes in the direction of the school or in specific policy and procedures which may be further discussed and acted on during the academic year. The dean reports to the faculty at its annual retreat and to staff during the year on the "state of the school," including updates on actions pertaining to recommendations made at past faculty retreats.

Over the past three years, the retreat has focused on the following matters: organization of global health within the school; mission and values statements; opportunities for cross-school research collaboration or training grants; governance; approaches to outcomes assessment; recruitment of diverse faculty members; providing doctoral students a broad orientation to public health; rewarding teaching and quality instruction; incentivizing community service; adapting to changing funding environment for sponsored research; and what distinguishes this school from others.

3) *Strategic planning for the school, Woodruff Health Sciences Center (WHSC) and the university*

Strategic and budget planning within Emory University and the WHSC also may affect the RSPH's goals and objectives.

The school is required to annually report progress on its strategic plan for the university (encompassing some of the goals and objectives) and its strategic plan for research to the health sciences center (again, pertaining to some of the goals and objectives) and these reports are prepared by the administrative staff.

4) *Recommendations from standing committees and organizations (e.g., Faculty Council, Leadership Group, Student Government Association)*

Individual faculty members, staff, students or administrators may recommend changes in school objectives or measures to the Leadership Group. Most often, such recommendations arise, are assessed and recommended by standing committees or organizations (Faculty Council or Student Government Association).

5) *Recommendations from the public health community as represented in reports (e.g., Institute of Medicine, Council on Linkages Between Academia and Public Health Practice) and the RSPH Community Advisory Board*

   This information and advice normally enters the school's policy-making process through the standing committees or as it may pertain to topics or issues under discussion at the annual faculty retreat.

6) *Benchmarks such as Association of Schools of Public Health (ASPH) student data, Emory University-sponsored program data, Emory University Affirmative Action Plan and the U.S. university data as reported in the Chronicle of Higher Education.*

   Benchmarks help inform some of the targets for objectives. They are referenced in assessing progress by the administrative staff and when relevant issues are discussed during the annual faculty retreat and they may be useful in adjusting targets for some objectives.

Timeline and Process Used for the Assessment and Revision of Objectives

Table 1.1d summarizes the timeline and processes used for the assessment and revision of objectives.

Table 1.1d: Assessment and Revision Timeline and Process	
JUNE	Faculty members submit individual annual reports to chairs
JULY	Department chairs prepare department-level annual reports, compiling individual faculty annual reports, departmental accomplishments and objectives for the next year
AUGUST	Executive associate dean for academic affairs combines department reports with administrative and other data to assess performance against past year objectives and available benchmarks and proposes revised school wide objectives for the next academic year
AUGUST/ SEPTEMBER	Executive associate dean for academic affairs drafts a school *Annual Report*, inviting input from other deans and, on selected issues, faculty at the annual retreat

The annual assessment and revision of goals and objectives comprises the school's *Annual Report*. Copies of the *Annual Report* for the last three years are found in the Resource Room. Similar and related information are provided annually in a different format to the Emory University Provost.

Communication of Mission, Goals and Values

The mission, goals and values are conveyed through the school's catalog at http://www.sph.emory.edu/cms/academic_programs/documents/110081-1L_RSPH_catalog%20vfinal.pdf and in its *Annual Report*, which also contains objectives and measurable indicators. The school's mission and goals also appear on the university website at http://www.sph.emory.edu/cms/about/documents/RSPHMission.pdf, http://www.sph.emory.edu/cms/about/overview/overview_mission.html and, at times, in school publications such as the magazine, *Public Health*, and the university news periodical, *Emory Report*.

e. **A statement of values that guide the school, with a description of how the values are determined and operationalized**.

A draft values statement was developed by the administrative staff and circulated to all faculty prior to the 2009 annual faculty retreat. The draft statement was largely derived from the Emory University Vision Statement that had been developed by faculty from across the university during the previous year in a process let by the university president.

In small group meetings during the retreat, faculty suggested changes in themes, concepts and wording. Based on the retreat discussions, the executive associate dean for academic affairs drafted a revised values statement which was circulated to all faculty for comments followed by additional revisions that were again circulated for comments and resulted in another draft. The department chairs and administrators were then asked to review and approve the statement (or suggest revisions). The statement adopted by chairs and administrators was included in the draft self-study, which was reviewed by the Accreditation Self-Study Steering Committee, consisting of faculty, students, staff and community representatives, in 2010 and then adopted as revised.

Rollins School of Public Health Values Statement:

The Rollins School of Public Health is committed to understanding and improving health and well-being through inquiry-driven practice; preparing and supporting students as courageous and inquisitive leaders with a capacity for lifelong learning; and ethical engagement with communities in a quest for social justice and the elimination of health disparities.

The RSPH values statement draws from the Emory University Vision Statement, created by the leadership and faculty of Emory University.

Emory University Vision Statement:

Emory University is a destination university internationally recognized as an inquiry-driven, ethically engaged, and diverse community, whose members work collaboratively for positive transformation in the world through courageous leadership in teaching, research, scholarship, health care and social action.

The school adopts and applies the values of the larger university to its mission in public health. Values shape the school in the following ways:
- Priorities in academic programs
- Approaches to teaching and training
- Support for student and faculty extracurricular programs and activities
- Adoption of competencies for its graduates
- Faculty recruitment and priorities for scholarship
- Expectations for faculty roles
- Expectations for student community engagement
- Rewards and recognition of faculty, students and staff

f.   Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The RSPH has updated and approved a new mission statement and a new values statement.
- The school has updated goals and measurable objectives.
- The school has developed a common set of core competencies.

Lessons Learned:
- Engagement of the school's constituents for reaccreditation purposes resulted in innovative ideas for improving the school's curriculum and assessment processes. Although the reaccreditation process is time intensive, the faculty, staff, student and community engagement that result from this process has benefits.
- The school needs to ensure that goals and measurable objectives are clearly communicated, monitored and revised with faculty and student input and oversight on a regular basis.

1.2   Evaluation and Planning

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

Required Documentation. The self-study document should include the following:

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a.   Description of the evaluation procedures and planning processes used by the school, including an explanation of how constituent groups are involved in these processes.

The school systematically evaluates its overall efforts against its mission, goals and objectives; assesses its effectiveness in serving various constituencies; and seeks both internal and external guidance as it plans to achieve its mission in the future.

Annual Evaluation and Planning Process

The school annually evaluates progress on existing objectives and revises its objectives in support of its mission and goals. The school's *Annual Report presents* measures of accomplishments on goals and objectives. Copies of the *Annual Reports* from the past 3 years are in the Resource Room.

The following table (Table 1.2a) shows the sources of information used on an annual basis to measure the school's achievement of its goals and objectives. Also included is the unit (office or department) responsible for gathering data sets, documents or information for evaluation and assessment as well as the utility of the data for the planning process. Constituent groups involved in these processes are listed in parentheses in the "Data Sets, Documents or Information" column.

Table 1.2a: Evaluation and Planning Process		
Responsible Unit	**Data Sets, Documents or Information**	**Data Utility**
Office of Academic Affairs	- Student course evaluations (students; faculty) - Student honor/conduct code appeals (students; faculty) - Faculty engagement in university-wide activities (faculty) - Education Committee (faculty; staff; students) - Faculty recruitment and retention (faculty) - Faculty promotion and tenure (faculty) - SACS/University accreditation (faculty; staff)	Academic and curricular improvement Quality and complement of faculty
Office of Applied Public Health	- Public health practice activities and programs (faculty, staff, students; community) - Workforce development (faculty, staff, students; community) - Continuing Professional Education Committee (faculty; staff; students; community)	Professional development of public health workforce Advancement of public health practice
Office of Research	Research Advisory Committee (faculty)	Advancement of public health science base
Office of Administration and Finance	- Finances (faculty; staff) - Sponsored research funding (faculty; staff) - Personnel and employment (faculty; staff) - Facilities (faculty; staff; students; community)	Monitor adequacy of financial, facility and personnel resources
Office of Career Services	- Exit survey of graduating students (faculty; staff; students; community) - Survey of graduates on employment and whether they were trained well for key competencies (faculty; staff; community) - Career service programs and participation (staff; students; community) - Career Services Advisory Group (faculty; staff; students) - Community Advisory Board - Practicum policies, procedures and implementation (faculty; staff; students; community)	Application of public health competencies through a practice experience Employer feedback on the quality of RSPH students and graduates Professional development of students
Office of Admissions and Student Services	- Student applications, admissions and matriculation (faculty; staff) - Student enrollment, academic performance, grievances and graduation (faculty; staff) - Rollins Practical Experience Program (staff; students; community) - Community Engaged Learning Activities (faculty; staff; students; community)	Quality and complement of students Sustainability of community engagement for students, faculty and staff

Table 1.2a: Evaluation and Planning Process		
Responsible Unit	**Data Sets, Documents or Information**	**Data Utility**
Academic departments	• Departmental annual reports with departmental-level performance data (including a summary of individual faculty reports) (faculty) • Faculty annual reports documenting their activities in research, teaching and service (faculty)	Improved faculty competence and performance Professional development and advancement of faculty Academic and curricular improvement

The following chart (Chart 1.2a) summarizes the timeline and processes for evaluation, planning and initiating changes within the school.

Chart 1.2a: Timeline and Process for Evaluation, Planning and Initiating Changes

ONGOING

School governance groups and standing committees make recommendations to chairs and deans

Dean, administrators, committee members solicit and interpret recommendations from health sciences, university and community constituents, such as strategic planning groups and members of the Community Advisory Board

Chair of Faculty Council and Presidents of Student Government Association (SGA) and Alumni Board solicit input from their respective groups

Administrators, chairs, faculty or staff, as appropriate, implement assigned actions resulting from evaluation and planning activities

MAY
Executive associate dean for academic affairs, Office of Admissions and Student Services and Office of Career Services administer student and alumni surveys

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JUNE
Faculty and staff complete individual annual performance reports

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JULY
Offices of Student Services, Administration and Finance gather administrative performance data for past academic year

Departments prepare department annual reports

↓

AUGUST
Executive associate dean for academic affairs reviews and evaluates all performance data listed above plus recommendations from governance groups, standing committees, external reviewers, the larger public health community, and faculty at previous annual retreat

The dean and associate deans (who comprise the administrative staff), in consultation with the chairs, revises objectives for upcoming academic year

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AUGUST/SEPTEMBER
Dean reports performance and progress to faculty at annual retreat; faculty members recommend new initiatives to meet goals and objectives

Other Strategic Planning

- University: The office of the provost established a strategic planning process on thematic initiatives across the university. The RSPH has been an integral part of the planning and implementation of those initiatives. They include cross-university thematic programs (e.g., curricula, symposia, seminars, faculty recruitments, etc.) in Predictive Health, Global Health, Religion and the Human Spirit, Race and Difference, Computational Life Sciences and Neurosciences. The provost also asks the school to set goals and objectives on particular dimensions (e.g., targets for numbers of faculty, students, honors, etc.) and requires the school to report annually on their progress. This report is prepared by the associate deans.

- Woodruff Health Sciences Center (WHSC): The WHSC initiated a strategic planning process for research. RSPH faculty are members of the Research Advisory Committee, overseeing the development of a plan for the RSPH and WHSC. The associate dean for research reports progress on research goals and objectives to the WHSC.

Outcome Assessments

Course Performance: Competencies are linked to learning objectives included in required core and program courses. Instructors assess the achievement of competencies within the courses through examinations and other observations of performance.

Culminating Experiences: Department faculty members assess student performance (i.e., the achievement of competencies) through a culminating experience (e.g., a thesis, capstone or special studies project). Assessments of weaknesses inform changes in the training program.

Exit Survey of Graduates: In an exit survey, all graduating students provide their assessment of how well RSPH courses provide the basic competencies required for working in the public health environment.

Post-Graduate Survey of Graduates: The school has begun to annually survey graduates who have recently entered the workforce on what competencies have been most useful to them and what competencies they would like to have had further developed during their training. This information is shared with the departmental programs in which the graduates had been enrolled to be used in evaluating and revising their training.

Annual Department Program Outcome Assessments: Each academic department in the school annually assesses outcomes of importance to their training programs. Faculty members monitor student performance (e.g., in a particular required course, capstones and theses, practicum, etc.) to assess the extent to which those objectives were met. Changes in the training programs are considered on the basis of those outcomes. Reports of this annual outcomes assessment are submitted to the executive associate dean for academic affairs, who forwards them to the director of the office of institutional effectiveness located in the office of the provost for review and for the record. Doctoral programs also complete annual outcome assessments that are submitted through the Laney Graduate School to the office of the provost. Reports are on file in the Resource Room.

The Community Advisory Board (CAB): This group is composed of representatives from institutions that are the employers, potential employers and practicum preceptors of RSPH students. The board meets once a year at the RSPH to discuss the performance of current students and graduates and how training

programs can be adjusted to help students better develop competencies that the work environment requires or desires. The CAB shares this information with programs and administrators who use this information in periodic evaluations of their training program and the revision of its competencies.

b. Description of how the results of evaluation and planning are regularly used to enhance the quality of programs and activities.

The school annually evaluates its progress on achieving its mission, goals and objectives through a variety of measures which are summarized in the school's *Annual Report.* For each goal, the school lists the objectives and for each objective it lists the following:

- Measures to document the achievement of each objective
- Evaluation benchmarks or goals (may vary annually)
- Quality improvement steps that may be taken on the basis of each evaluation

The result of each outcome measure (e.g., exit survey responses, CAB recommendations, alumni survey) is shared with departments and faculty members. Departments, through an ongoing review of their competencies and curricula, have an opportunity to continuously improve the quality of their training/instructional programs. The annual outcomes assessment process requires each program to report how observed outcomes led to changes or changes under consideration.

Selected issues of school-wide interest are the basis for discussion at the annual faculty retreat. Recommendations for which there is some consensus are captured and used to assist in planning for the next academic year. Recommendations may address the curriculum as a whole, certain core requirements, the professional life and advancement of faculty or the relationship of the school to the public health community.

c. Identification of outcome measures that the school uses to monitor its effectiveness in meeting its mission, goals and objectives. Target levels should be defined and data regarding the school's performance must be provided for each of the last three years.

Table 1.2c displays the goals, objectives and measures tracking outcomes over the past 3 years. Annual reports are organized around this framework.   Target levels are established and annually revised by the administrative staff (dean, associate deans and director of information technology) following consultations with Emory and Woodruff Health Science Center administrators, RSPH department chairs, faculty and others. The table reflects targets adopted in 2011. Unless otherwise specified, data on students refer to MPH or MSPH students.

Some targets (e.g., selectivity, number of doctoral students, extramural funding, endowment, student performance on national examinations, peer ranking) are aspirational benchmarks based on performance by the leading schools of public health. Some targets (e.g., mean GRE scores of admitted students, proportion of graduates employed or continuing their education, student/faculty ratio, student participation in governance, student participation in a practicum, recruitment and retention of faculty, total research and growth, faculty publications, faculty service, continuing education activities, faculty editorial board membership, faculty recognition through leadership roles or national awards) are levels required by agencies such as CEPH or considered desirable by the Emory University Office of the Provost or Woodruff Health Sciences Center.

The school normally benchmarks against its own past performance in setting targets unless data from other schools of public health or units at Emory University are available. Some targets (diversity of enrolled students, class size, student course and instructor evaluations, student publications with faculty, number of global field experiences and merit scholarships, student success in competing for internships and fellowships, student evaluation of school services and advisement) are set by the school as internal measures of quality. These targets are normally benchmarks against past school performance.

Table 1.2c: Outcome Measures and Target Levels

Goal I: Educate individuals for leadership in community health promotion and disease prevention in populations around the world						
OBJECTIVE	**OUTCOME MEASURE**	**TARGET LEVEL** **Target levels are for 2011**	**YEAR 1** 2008-2009	**YEAR 2** 2009-2010	**YEAR 3** 2010-2011	**Criteria**
Objective A: Recruit students with capacity for academic success and public health leadership	Admissions: Proportion of applicants accepted • Applicants • Applications	Accept the top 50% of applicants	 75% 61%	 70% 56%	 68% 53%	4.4
	Matriculation: Proportion of accepted students who enroll	Matriculate 40% of accepted students	34%	35%	38%	4.4
	Qualifications of Enrolled Students: • Mean Graduate Record Examination scores (GRE) • Mean undergraduate grade point average (GPA)	Mean GRE scores (combined quantitative, verbal): 1250 of 1600/ Mean analytic writing GRE score: 4.5 Mean undergraduate GPA: 3.3	1193/4.5 3.4	1219/4.5 3.4	1230/4.5 3.4	4.4
Objective B: Recruit a student body that is diverse in background and interests	Proportion of matriculated entering students in categories of self-identified race and ethnicity	African American (AA): 14% American Indian/Alaskan Native (AI/AN): 1% Asian (A): 14% Hispanic (H): 4% Multi-Ethnic (ME): 1% Total: 34%	AA: 14% AI/AN: 0% A: 14% H: 3% ME: NA Total: 31%	AA: 11% AI/AN: 1% A: 13% H: 4% ME: 1% Total: 30%	AA: 11% AI/AN: 0% A: 10% H: 3% ME: 2% Total: 26%	4.5
Objective C: Offer excellent training in public health	Number of active doctoral (PhD) students (not including collaborative NHS program)	150	105	113	111	2.10/4.4
	Student course evaluation scores: mean evaluation of course on 5-point scale (poor to excellent)	4 (on a 5-point scale)	Fall 3.9 Spr 3.9	Fall 4.0 Spr 4.0	Fall 4.0 Spr 4.0	4.2
	Student exit survey responses on the quality of instruction: Agreement with statement, "RSPH offers excellent training in my area of study"	90% agreement	83.4% agree	78% agree	86% agree	2.6/2.7 4.2
	Course enrollment: Proportion of courses enrolling 30 or fewer students	70%	Fall 76% Spr 81%	Fall 72% Spr 83%	Fall 72% Spr 79%	1.6

Table 1.2c: Outcome Measures and Target Levels

Goal I: Educate individuals for leadership in community health promotion and disease prevention in populations around the world						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective C – cont.	Student performance on standard national examinations	100% pass Certified Health Education Specialist (CHES) examination (Oct & Apr)	Oct 100% Apr 100%	Oct 92% Apr 97%	Oct 97% Apr 100%	2.7
	Proportion of students employed or enrolled in additional graduate or professional programs 12 months after graduation • Employed • Seeking additional education • Not employed(unemployed or unemployed and not currently seeking work or education)	 80% 20% 0%	 87% 10% 3%	 80% 15% 5%	 81% 11% 8%* *6 months after graduation	2.7
	Proportion of graduates in the workforce who report they developed basic competencies or skills for current employment through training at RSPH	100%	Not reported	Not reported	74%	2.7
	Number of Community Advisory Board (CAB) meetings to discuss the training needs of students	2	1	1	1	1.5/2.7
	Proportion of graduating students who agree, on the exit survey, that "courses provide the basic competencies required for working in the public health environment"	100%	88.7%	89%	91%	2.7
	Proportion of students graduating within three years	80%	Enter 2006: 89%	Enter 2007: 93.6%	Enter 2008: 96%	2.7

Table 1.2c: Outcome Measures and Target Levels

Goal I: Educate individuals for leadership in community health promotion and disease prevention in populations around the world						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective D: Engage students in collaborative research and practice with faculty and other public health professionals	Number of co- authored presentations at professional meetings with faculty members	200	Not reported this yr	61	133	3.1
	Number of published or accepted articles by faculty with student co-authors	250	Not reported this yr	238	274	3.1
	Number of students employed on research projects	200	210	230	300	3.1
	Number of students employed by the Rollins School of Public Health	400	236	281	466	4.4
	Number of RSPH Merit Scholars with research assistantships	30	30	32	32	3.1
Objective E: Engage students in service to the community	Proportion of students engaged in a practicum with designated community preceptor, established competencies and learning objectives	100%	100%	100%	100%	1.6/2.4 2.6
	Number of students supported for a Global Field Experience	75	78	67	56	1.6/2.4
	Number of students in ASPH/CDC or other competitively awarded internships and fellowships	90	50	80	92	1.6/2.4
	Number (%) of theses completed in collaboration with community-based organizations or agencies	100	Not reported this yr	Not reported this yr	114 (44%)	1.6/3.2
	Number of students participating in school-organized community-service activities	500	541	602	659	1.6/3.2
Objective F: Foster interdisciplinary and interschool training	Number of students enrolled in dual degree programs	50	29	41	48	2.11 4.4
	Number of students enrolled in BA/MPH program	5	0	3	5	2.11 4.4

Table 1.2c: Outcome Measures and Target Levels

Goal I: Educate individuals for leadership in community health promotion and disease prevention in populations around the world						
OBJECTIVE	**OUTCOME MEASURE**	**TARGET LEVEL**	**YEAR 1** 2008-2009	**YEAR 2** 2009-2010	**YEAR 3** 2010-2011	**Criteria**
Objective G: Provide support for students and an engaged student community	Proportion of graduating students who agree, on the exit survey, that their needs were met by the following services: • Assistant/associate director for academic programs (ADAP) provided effective support • ADAP was available to meet my needs • Student Services met my needs • Enrollment Services met my needs • Information Technology met my needs • Career Services met my needs	85% 85% 85% 85% 85% 85%	84% 85% 64% 71% 70% 55%	85% 86% 63% 60% 69% 51%	85% 87% 77% 80% 77% 57%	4.6
	Career employment events • Career fairs • Networking night • Mentoring event • Mock interview blitz • Employer information sessions • Workshops (résumé, networking, etc.)	1 1 1 1 25 20	2 1 1 1 29 25	2 1 1 1 22 17	2 2 1 2 27 21	4.6
	Number of career services consultations on career advice (general, résumé, mock interviews, etc.)	1800	1638	1683	1817	4.6
	Number of students participating in: • Department meetings or committees • School-wide committees • Student Government Association Executive Committee, department representatives, SGA committees	12 5 20	Not reported 5 11	Not reported 4 26	10 10 26	1.5

Goal II: Advance the science of public health through discovery, dissemination and application of knowledge						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective A: Recruit, develop and retain nationally and internationally regarded faculty members	Number of successful tenure-track faculty recruitments • Number of searches • Proportion of searches ending with a successful recruitment	 9 80%	 15 12/15 (80%)	 8 7/8 (87.5%)	 16 13/16 (81%)	4.2
	Proportion of tenure-track faculty members with other employment offers who were retained	75%	1/4 (25%)	1/2 (50%)	0/1 (0%)	4.2
	Proportion of recruited tenure track faculty in the top 10% of the applicant pool	100%	100%	100%	100%	4.2
	Number of significant regional, national or international awards or honors to faculty	20	23	21	17	3.1/4.2
Objective B: Advance public health discovery through externally funded scholarship	Sponsored Awards • Total sponsored awards • Increase in sponsored awards over previous year • Total research awards • Per capita for tenured and tenure track faculty • Per capita for all faculty who support the research program	 $80 m 6% $70 m $800,000 $480,000	 $60.0 m 12% $46.9 m $603.620 $364,617	 $64.6 m 8% $52.9 m $639,710 $377,766	 $76.1 m 18% $65.4 m $723,927 $441,157	1.6 3.1
	Amount of awards from the National Institutes of Health (NIH) Annual increase in NIH funding Amount of all federal awards Non-Federal Funding	$40 m 6% $50 m $35 m	$21.7 m 6% $43.3 m $16.7 m	$24.3 m 11% $40.0 m $24.1 m	$31.1 m 29% $45.0 m $31.1 m	1.6 3.1
Objective C: Disseminate research findings through publications	Total and per capita number of faculty as authors of published or accepted refereed articles	Total: 520 Per Capita: 4	Total: 862 P/C: 8.3	Total:830 P/C: 6.6	Total:1288 P/C: 9.3	3.1 3.1
	Number of faculty as authors of book chapters	130	133	88	74	3.1
	Number of faculty edited or authored books	6	12	10	14	3.1
	Number of faculty as authors of presentations at professional meetings	600	661	611	689	3.1

Table 1.2c: Outcome Measures and Target Levels

Goal II: Advance the science of public health through discovery, dissemination and application of knowledge						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective D: Promote inter-disciplinary applied scholarship	Number of joint-secondary (across schools and departments) faculty appointments	75	79	100	99	4.1
	Number of sponsored collaborative research awards including faculty from more than one department or school	85	80	91	84	3.1
	Number of interdisciplinary centers and programs	12	16	17	17	1.4

Table 1.2c: Outcome Measures and Target Levels

Goal III: Build capacity in the public health workforce and support the continuing education of graduates while contributing to efforts that promote health and prevent disease in populations around the world						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective A: Train professionals in the public health workforce, including the continuing education of graduates	Number of students enrolled in Career MPH Program (head count)	120	95	106	119	2.12
	Continuing Education (CE): Number of continuing professional education activities	300	326	289	215	3.3
	Continuing Education: Enrollment in CE programs	9000	11,027	7,453	10,633	3.3
Objective B: Provide leadership to public health organizations and service that promotes the health of the community	Number of faculty consultant functions performed that build capacity and/or facilitate programs in local, state, federal and international organizations and agencies	250	243	220	186	3.2
	Number of regional, national or international panels, boards or programs served by faculty	250	175	228	265	3.2
	Number of community public health or health organizations and agencies participating in the RSPH Practical Work Experience Program	75	Not Applicable	Not Applicable	65	2.4/3.2
	Number of editorial board positions held by faculty	130	98	121	121	3.2
	Number of faculty serving on panels such as NIH study sections	60	19	44	50	3.2
	Number of leadership roles in professional associations held by faculty	50	21	43	53	3.2

Table 1.2c: Outcome Measures and Target Levels

OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Goal IV: Maintain an academic community that supports excellence in instruction, research and public health practice						
Objective A: Maintain a faculty complement qualified to fully support the school's instructional program	Total FTE Student/FTE Faculty (who support the teaching program) ratio	Overall ratio of FTE students to total FTE faculty: 6 or less	5.67	5.74	6.05	1.6/4.1
	FTE Student/FTE Faculty (who support the teaching program) ratio in each department	SFR by Total FTEF: 8 or less				1.6/4.1
		BSHE	7.12	6.46	6.52	
		BIOS	1.86	1.88	1.92	
		EH	4.54	2.96	3.84	
		EPI	6.12	7.38	9.42	
		HPM	9.02	9.56	9.26	
		GH	5.75	6.13	5.92	
Objective B: Assure financial resources to fund innovations and financial stability for the school and to provide physical space to support the school's programs in training and research	Book value of endowment	$100 million	$35.7m	$37.2 m	$39.6 m	1.6
	Contributions to endowment	$2 million	$1.8 m	$1.0 m	$1.4 m	1.6
	Institutional expenditures per FTE student	$50,000	$37,900	$39,575	S42,790	1.6
	Research awards per capita tenured and tenure-track faculty	$800,000	$603,620	$639,710	$723,927	1.6
	Research awards per capita all faculty who support the research program	$480,000	$364,617	$377,766	$441,157	1.6/3.1
	Extramural funding (other than sponsored activity and training) as a percent of total budget	12%	12%	12%	12%	1.6
	Facilities Classroom Gross Sq/Ft Office Gross Sq/Ft Laboratory Gross Sq/Ft	60,000 200,000 20,000	13,509 109,418 4,800	13,509 109,418 4,800	85,632 171,290 25,200	1.6
	Balanced budget	Academic year closes on a balanced budget	Balanced budget	Balanced budget	Balanced budget	1.6
	Amount of financial reserves	$10 million	$4,531,875	$4,113,933	$3,946,989	1.6

Table 1.2c: Outcome Measures and Target Levels

Goal IV: Maintain an academic community that supports excellence in instruction, research and public health practice						
OBJECTIVE	OUTCOME MEASURE	TARGET LEVEL	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011	Criteria
Objective C: Contribute to the professional development of faculty, staff and students	Number of faculty members enrolling in university or health science center leadership programs	2	1	2	1	3.3 4.2
	Number of faculty or senior administrators serving on university-wide committees	10	4	5	12	1.5
	Number of university or school teaching-related programs or events to increase faculty instructional skills	4	4	7	6	3.3/4.2
	Number of program or department seminars or colloquia offered	72	65	104	96	3.3/4.2
	Proportion of courses/instructors evaluated by students each semester	100%	100%	100%	100%	4.2
	Number of departments receiving an assessment of instructional quality by the executive associate dean for academic affairs each semester	100%	100%	100%	100%	4.2
Objective D: Attract and retain a faculty and staff with diverse backgrounds	Proportion of minority faculty members	30%	20%	25%	20%	4.1/4.3
	Proportion of women faculty members	50%	46%	45%	47%	4.1/4.3
	Proportion of minority staff members	30%	43%	49%	49%	4.3
Objective E: Achieve recognition among peers as being in the top tier of schools of public health	*US News and World Report* ranking	RSPH should be ranked in the top 5 schools of public health	#7	#7	#6	1.2

d. An analytical self-study document that provides a qualitative and quantitative assessment of how the school achieves its mission, goals and objectives and meets all accreditation criteria, including a candid assessment of strengths and weaknesses in terms of the school's performance against the accreditation criteria.

Each year, the administrative staff (dean, associate deans and director of information technology) monitors progress on goals and objectives and adjust targets. The reports on goals and objectives are circulated to chairs, are embedded in the dean's report to faculty at the annual retreat and to a presentation on progress to the staff. Some goals and objectives are selected for discussion at the annual faculty retreat. Nevertheless, members of the Accreditation Self-Study Steering Committee—faculty, students and staff—periodically indicated that they were unaware of school goals, objectives and priorities and how they were established. In reaction to this, the administrative staff indicated its intention to more widely disseminate goals, objectives and progress in the school to faculty, students and others. The school also adopted a new governance process which it began implementing in 2010-11, intended to assure better communication and exchange between groups in the academic and public health community.

The self-study process enabled a representative group of faculty, students, staff and public health community members to review data pertaining to goals and objectives in some detail and to comment on the appropriateness of specific targets and measurement of progress. Throughout the process, the Accreditation Self-Study Committee assessed the school's performance on the list of objectives and assessed strengths and weaknesses. The targets and indicators of progress included in the matrix (table 1.2.c), along with strengths and observations, often related to improving performance, are discussed in relevant sections of the self-study.

As self-study steering committee members have observed, the school has already exceeded certain targets listed in the matrix which could be revised in the future. The school has fallen short on a number of targets to which the school aspires and the school is on track to meet other targets in the near future. The goals, objectives and targets provide guidance to the school in setting priorities for investing or seeking resources for its various missions.

The self-study process provided an opportunity for a group of faculty, students, staff and representatives from the public health community to comment and provide guidance on goals, objectives and indicators of progress. As such, the process was fruitful for the school because of the committee's advice and guidance and resulting structural changes.

Hence, the self-study process and resulting document has achieved this criterion.

e. An analysis of the school's responses to recommendations in the last accreditation report (if any).

The six recommendations included in the 2004 accreditation report and the school's response to each follow:

1) *More effective and better articulated values statement*

The RSPH drafted a values statement based on the Emory University Vision Statement (which was generated with input from faculty across the university). RSPH faculty discussed and revised the

draft statement at a retreat and in subsequent meetings and email exchanges. Selected students and staff also reviewed the statement and suggested revisions. The Accreditation Self-Study Steering Committee incorporated those suggestions into a final values statement.

2) ***Should not provide automatic exemption of practicum requirement for those with prior professional or academic experience and dual degree students***

All MPH/MSPH students are now required to enroll in practicum or field experience(s) totaling at least 200 hours and completed under the guidance of a site supervisor.

3) ***Two departments believe the thesis is comparable to a practicum or field experience and thus, do not require a practicum.***

School policies and procedures now clearly state that the practicum (i.e., field experience) is not comparable to a thesis or other culminating experience. All students now formally enroll in both a practicum experience and a culminating experience. The school developed a practicum database to capture all practicum experiences. All master's level students must enter a practicum experience into the database in order to be cleared for graduation.

4) ***The school should strive to be creative in tracking student achievement by programmatic objectives.***

Department faculty members assess student performance (i.e., the achievement of competencies) through the student's course performance and a culminating experience, such as a thesis. The competencies link to the required core and program courses' learning objectives. If the faculty members discern a pattern of weaknesses in student performance, they may consider changing the curriculum or course learning objectives in order to improve student outcomes.

In an exit survey, all graduating students provide their assessment of how well RSPH courses provide the basic competencies required for working in the public health environment.

The School has begun to annually survey graduates who have recently entered the workforce on what competencies have been most useful to them. They are also asked what competencies they would like to have had further developed during their training. This information is shared with the departmental programs in which the graduates had been enrolled.

Each department conducts an annual outcomes assessment which requires faculty to measure student performance on some outcome, often program competencies. Actions based on outcomes assessment are reported. These assessments are collected and submitted to the office of the provost and its office of institutional effectiveness.

The Community Advisory Board (CAB) is composed of representatives from institutions that are employers, potential employers and practicum preceptors of RSPH students. This board meets annually at the RSPH to discuss the performance of current students and graduates. The CAB may suggest changes in the curriculum to help the students better develop competencies that they will need in the workplace.

5) Set targets for achievement of objectives; the listed objectives had no goals or targets

Targets are now included in the *Annual Report,* reviewed annually and adjusted for the next academic year.

6) Seek additional space for programs and laboratory research

With the opening of the Claudia Nance Rollins Building in 2010, the school has more than doubled its space for teaching, research, service, and operational activities. The building includes one floor of laboratory and office space that is leased to the School of Medicine for 5 years, allowing for future expansion of laboratory capacity with a growing research and teaching program.

f. A description of the manner in which the self-study document was developed, including effective opportunities for input by important school constituents, including institutional officers, administrative staff, teaching faculty, students, alumni and representatives of the public health community.

Self-Study Director: Richard Levinson, PhD, Executive Associate Dean for Academic Affairs.

Self-Study Coordinator: Laura Lloyd, MPH, Director of Continuing Professional Education in the Rollins School of Public Health.

Core Working Group: The Core Working Group is comprised of the self-study director, the self-study coordinator, the executive associate dean for administration and finance and the associate dean for applied public health and their administrative staff. This group generated data and related documents for the Accreditation Self-Study Steering Committee.

Accreditation Self-Study Steering Committee: The Accreditation Self-Study Steering Committee, which has met monthly since September 2010, has reviewed and provided feedback on the data as it pertained to each accreditation criterion. Committee members assessed the extent to which the criterion was met and made recommendations for remedies to weaknesses. The Core Working Group received these comments and adopted them as part of revised drafts. Minutes from all Steering Committee meetings are available in the Resource Room.

The Accreditation Self-Study Steering Committee included representatives from each of the school's constituency groups, including faculty in each academic program, administration, staff student advisors (assistant and associate directors for academic programs), students, staff from the Office of Admissions and Student Services, other staff, school alumni and members of the public health community.

Community: The Accreditation Self-Study Steering Committee made the document available on the web at http://www.sph.emory.edu/cms/about/accreditation/accreditation_2012.html and invited faculty, students, administrators, alumni and members of the public health community to comment. The Accreditation Self-Study Steering Committee received and reviewed these comments in subsequent meetings.

Other Accreditation Activities: The self-study coincided with the larger university preparation for accreditation by the Southern Association of Colleges and Schools (SACS). Efforts invested in assessments for CEPH were very helpful in preparation for SACS and discussions on procedures and

methods of accountability for SACS were useful in considering how to address criteria required by CEPH.

g. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school has adopted a process for evaluating and monitoring its efforts against its mission, goals and objectives.
- The school has strengthened weaknesses identified in the last CEPH review.
- The self-study process was rigorous and involved an engaged committee composed of a diverse group of faculty, staff, students, alumni and community members. This model provided equal value to everyone's voice being heard.
- The self-study process resulted in improvements in the metrics used to measure progress and outcomes.
- The self-study process led to structural changes to ensure wider participation in school governance.
- The school addressed recommendations made by the previous accreditation review site visitors.

Lessons Learned:
- The self-study process was a positive experience that provided opportunities for school improvement in its curriculum, its governance and its organizational structure. The self-reflection process involving members of all the school's constituencies is a model to consider in non-accreditation years.
- The self-study process advanced the school's preparation for the accreditation review of Emory University by the Southern Association of Colleges and Schools (SACS).
- The dean's office should engage the faculty and other school constituents more broadly in its annual review of its mission, goals and objectives.
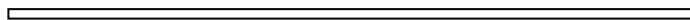
1.3   Institutional Environment

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

Required Documentation. The self-study document should include the following:

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a. **A brief description of the institution in which the school is located, along with the names of accrediting bodies (other than CEPH) to which the institution responds.**

The Rollins School of Public Health (RSPH) is one of six independent professional schools at Emory University. Administratively, the school is part of the Woodruff Health Sciences Center (WHSC). Academically, the school reports to the executive vice president for academic affairs and provost of Emory University in a manner similar to other schools with degree programs.

Emory University

Emory University, founded in 1836, has become a major international teaching, research and service center. As of fall 2011, Emory had a total enrollment of 13,893 students (undergraduate, 7,441; graduate and professional, 6,452) and employed 24,884 faculty and staff (including Emory University and Emory Healthcare). The university consists of nine colleges and schools including six professional schools: Rollins School of Public Health, Emory University School of Medicine, Nell Hodgson Woodruff School of Nursing, Goizueta Business School, Emory University School of Law, and Candler School of Theology. The campus is situated on 686 acres six miles northeast of the central business district of Atlanta, a city rich in public health resources and activities, and operations are housed in more than 170 buildings (8.2 million square feet of space). Emory University is currently ranked among the 15 universities with the largest endowments and is one of the fastest growing research universities in the country. Emory is building increasingly recognized academic programs, as evidenced by its membership in the Association of American Universities (AAU).

Robert W. Woodruff Health Sciences Center

Emory University's Robert W. Woodruff Health Sciences Center (WHSC) focuses on the missions of teaching, research, health care and public service.

The WHSC includes:
- Three academic units:
  - School of Medicine
  - Nell Hodgson Woodruff School of Nursing
  - Rollins School of Public Health
- The Yerkes National Primate Research Center
- Winship Cancer Institute
- Emory Healthcare, the largest, most comprehensive health system in Georgia, which includes:
  - Emory University Hospital
  - Emory University Hospital Midtown
  - Emory University Orthopaedics and Spine Hospital
  - The Emory Clinic

- o Emory-Children's Center
- o Wesley Woods Center
- o Jointly owned Emory-Adventist Hospital
- o Emory Healthcare of Atlanta, which includes two joint venture hospitals

The WHSC annual operating expenditures total $2.5 billion and Emory Healthcare annually provides approximately $50 million in charity care. Annual research funding exceeds $450 million and the WHSC employs 2511 faculty.

Rollins School of Public Health

The Rollins School of Public Health is 21 years old, with its origin extending back 35 years with the Master of Public Health (MPH) program. The school was originally created because it was viewed to contribute to the mission and vision of Emory University.

Since its inception, the RSPH has been an independent school with all the operational, fiscal, and programmatic responsibilities of any professional school at Emory University. The RSPH was first accredited by the Council for Education in Public Health (CEPH) in 1992 and was most recently accredited in 2005. In January 1995, the school moved into the Grace Crum Rollins Building, a ten-story facility providing 140,000 square feet of space for the school's offices, classrooms and laboratories. In 2010, with the addition of the Claudia Nance Rollins Building, a state-of-the-art building, the school added another 190,000 square feet of space, considerably expanding its classroom and laboratory facilities. In 2011, the Grace Crum Rollins Building was renovated, creating new state-of-the-art classrooms, space for student and faculty support services and space for students to carry out individual and group academic activities within the school. According to a 2011 survey conducted by the *US News and World Report*, peers rated the school as being sixth in quality among all U.S. schools of public health.

Accrediting Agencies

Emory University and its professional schools respond to a number of accrediting agencies including the following:

- *Commission on Colleges of the Southern Association of Colleges and Schools:* Emory University
- *Liaison Committee on Medical Education of the American Medical Association*: Emory School of Medicine
- *National League for Nursing Council of Baccalaureate and Higher Degree Programs*: Nell Hodgson Woodruff School of Nursing
- *American Bar Association*: Emory School of Law
- *American Assembly of Collegiate Schools of Business*: Goizueta Business School
- *Association of Theological Schools in the U.S. and Canada; The Senate of the United Methodist Church*: Candler School of Theology
- *Council on Education for Public Health*: Rollins School of Public Health

b. One or more organizational charts of the university indicating the school's relationship to the other components of the institution, including reporting lines.

Emory University Organizational Chart

Emory University
Board of Trustees

Robert W. Woodruff
Health Sciences Center Board

Emory University President
James Wagner, PhD

Executive VP & Chief Operating Officer
Michael J. Mandl

Executive VP Academic Affairs & Provost
Earl Lewis, PhD

Executive VP Health Affairs & CEO, Woodruff Health Sciences Center & Chairman, EMORY HEALTHCARE
S. Wright Caughman, MD

EMORY HEALTHCARE Board

Senior VP for Campus Life
John Ford, PhD

- Dean, Emory College
- Dean, Graduate A&S
- Dean, Oxford
- Dean, Theology
- Dean, Law
- Dean, Business

- Dean, Medicine
- Dean, Nursing
- Dean, Public Health
- Director, Yerkes

VP, Clinical & Academic Integration
VP, Academic Health Affairs
VP, Health Affairs & CFO, WHSC
VP, Research, WHSC
VP, Global Health*
VP, EU Information Technology & CIO*
VP, EU Research Admin*
VP, WHSC Development**
Chief Administrative Officer, WHSC

EMORY HEALTHCARE President and CEO
John T. Fox

The Emory Clinic
Emory Hospitals
Wesley Woods
ECC

Senior VP for Development and Alumni Relations
Susan Cruse

Executive Director, Winship
Director, CCI
Director, PHI

Emory Johns Creek Hospital
Emory Adventist Hospital
Emory Eastside Medical Center

Major Affiliates and Partners

| Children's Healthcare of Atlanta | Grady Memorial Hospital | Veterans Administration Medical Center | American Cancer Society | Centers for Disease Control and Prevention | Georgia Cancer Coalition | Georgia Institute of Technology | Georgia Research Alliance | Morehouse School of Medicine | Shepherd Center |

Notes: *Joint report to EU EVP (Mandl) and/or EU EVP for Academic Affairs and Provost (Lewis)
** Joint report to EU Senior VP for Development and Alumni Relations (Cruse)

*Note regarding organizational chart:
- Deans of the schools in the WHSC report to both the executive vice president for health affairs and the executive vice president for academic affairs and provost.

Chart 1.3b.i: The Organizational Structure of the Woodruff Health Sciences Center

Woodruff Health Sciences Center
Organizational Chart

President
Emory University
James Wagner, PhD

CEO, Woodruff Health Sciences Center,
Executive Vice President for Health Affairs, Emory University,
Chairman, Emory Healthcare
S. Wright Caughman, MD

Dean
School of Medicine
Thomas J. Lawley, MD

Dean, Nell Hodgson Woodruff
School of Nursing
Linda McCauley, PhD, RN, FAAN

Dean
Rollins School of Public Health
James W. Curran, MD, MPH

Director
Yerkes National Primate Center
Stuart M. Zola, PhD

Executive Director
Winship Cancer Institute
Walter J. Curran, MD

Director
Predictive Health Institute
Kenneth L. Brigham, MD

Director
Comprehensive Center for Informatics
Joel H. Saltz, MD, PhD

Emory Healthcare
President and CEO
John T. Fox, MBA

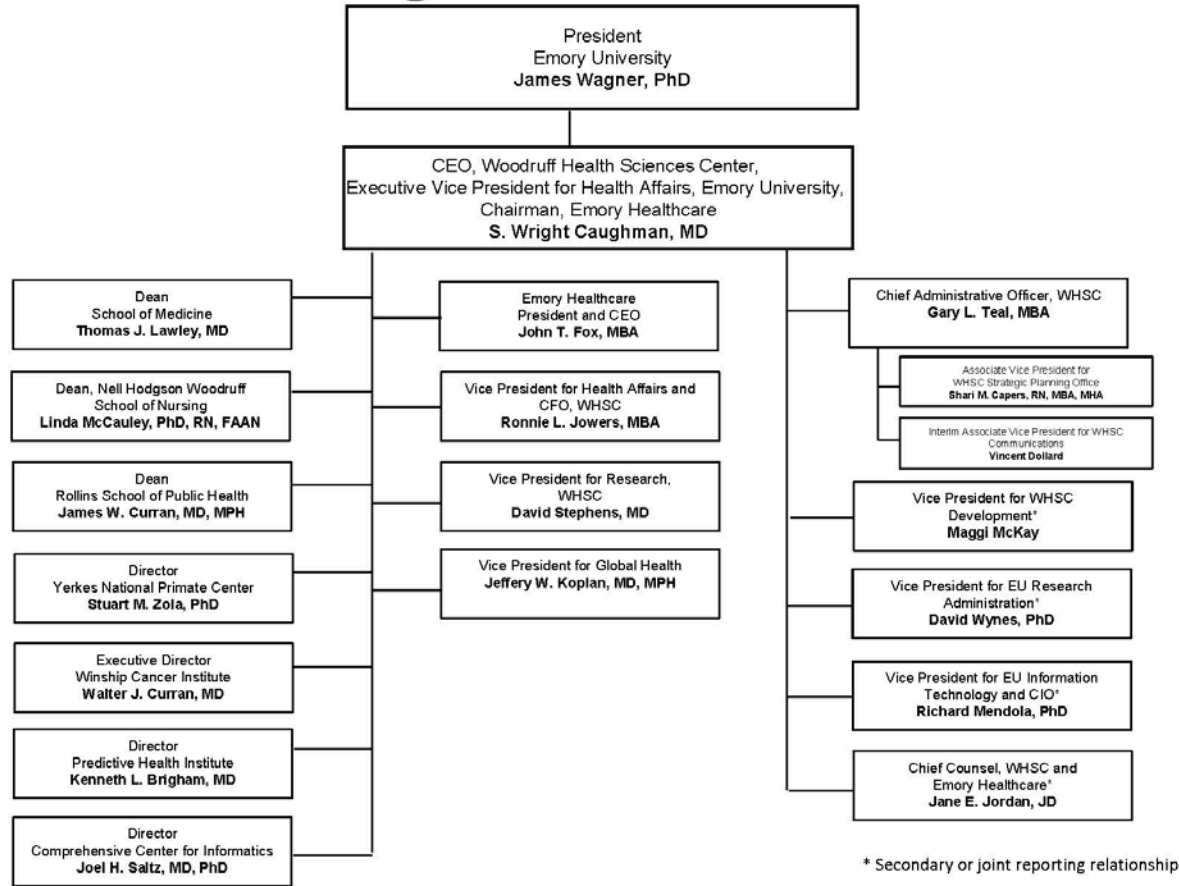Vice President for Health Affairs and
CFO, WHSC
Ronnie L. Jowers, MBA

Vice President for Research,
WHSC
David Stephens, MD

Vice President for Global Health
Jeffery W. Koplan, MD, MPH

Chief Administrative Officer, WHSC
Gary L. Teal, MBA

Associate Vice President for
WHSC Strategic Planning Office
Shari M. Capers, RN, MBA, MHA

Interim Associate Vice President for WHSC
Communications
Vincent Dollard

Vice President for WHSC
Development*
Maggi McKay

Vice President for EU Research
Administration*
David Wynes, PhD

Vice President for EU Information
Technology and CIO*
Richard Mendola, PhD

Chief Counsel, WHSC and
Emory Healthcare*
Jane E. Jordan, JD

* Secondary or joint reporting relationship

c. A brief description of the university practices regarding:
- **lines of accountability, including access to higher-level university officials**
- **prerogatives extended to academic units regarding names, titles and internal organization**
- **budgeting and resource allocation, including budget negotiations, indirect cost recoveries, distribution of tuition and fees, and support for fund-raising**
- **personnel recruitment, selection and advancement, including faculty and staff**
- **academic standards and policies, including establishment and oversight of curricula**

Lines of Accountability

The RSPH dean has authority comparable to the deans of other schools at Emory University and to those within the Woodruff Health Sciences Center. The executive vice president for health affairs appoints the dean for a renewable term of 5 years in consultation with the university president, provost and Board of Trustees.

President (James Wagner)
As the chief administrative officer of the university, the president reports to the Board of Trustees and chairs the University Cabinet, whose members together have the responsibility for all areas of university life. Deans of Emory's schools are reviewed and appointed by the president, in consultation with the executive vice president for academic affairs and provost and the executive vice president for health affairs, who are also members of the University Cabinet.

Board of Trustees
The Board of Trustees consists of 45 members who establish policy and exercise fiduciary responsibility for the long-term well-being of the institution. The Board and its Executive Committee act on recommendations from board committees, university officers and the University Senate. The board also confers tenure on university faculty members. By custom, several board positions are filled by active bishops of the United Methodist Church.

Executive Vice President for Academic Affairs and Provost (Earl Lewis)
The provost serves as the chief academic administrator of the university. All deans of university schools report to the provost on academic matters. The dean meets regularly with the provost to discuss academic matters as they pertain to the school. The deans of the schools and directors of certain other university units and affiliates (e.g., the Carter Center, Information Technology, libraries, etc.) meet on a monthly basis with the university provost to consider matters of policy, procedures, personnel, organization and university-wide programs. Through this process, the dean and the RSPH share in governance of the university. The provost is also advised on academic programs and policies by a Faculty Advisory Committee which includes a member of the RSPH faculty.

Dean, Laney Graduate School (Lisa Tedesco)
The dean of the Laney Graduate School oversees all doctoral degree programs, including those offered through the RSPH. Faculty who direct PhD programs in various RSPH departments (known as the directors of graduate studies or DGS) are accountable to the dean of the Laney Graduate School, as well as to their own department chairs. These directors of graduate studies meet periodically with the RSPH executive associate dean for academic affairs to coordinate common activities and ensure integration within the school. The dean is advised by an Executive Committee of faculty representing the doctoral

programs that includes a faculty member in the RSPH. A faculty member of the RSPH is currently serving a term as an associate dean of the Laney Graduate School. The current dean of the Laney Graduate School holds a tenured faculty position in the Department of Behavioral Sciences and Health Education (BSHE), RSPH.

<u>Woodruff Health Sciences Center Chief Executive Officer/Executive Vice President for Health Affairs (S. Wright Caughman)</u>
The RSPH dean is also accountable to the executive vice president for health affairs (EVPHA) and CEO of the Woodruff Health Sciences Center (same person) on all matters pertaining to budget, space and finances.

The dean regularly meets with the CEO/EVPHA to report on budget issues, programs or initiatives of the school and to discuss matters of the WHSC and university that have an impact on the school. The dean shares in governance of the WHSC by attending weekly executive meetings (chaired by the CEO/EVPHA) along with other WHSC deans, directors and executives.

Prerogatives Extended to Academic Units Regarding Names, Titles and Internal Organization

<u>Organization</u>
The RSPH is given the autonomy to determine school organization, including the number and type of deans or administrators and the departmental organization. However, the school routinely seeks advice from and shares plans for significant organizational changes with the provost and CEO/EVPHA.

<u>Academic Programs</u>
The RSPH is given the autonomy to determine the nature and content of its academic programs. However, the Board of Trustees must approve the offering of new degrees. In conjunction with the respective department and the director of graduate studies, the Laney Graduate School oversees the curriculum and requirements of doctoral programs.

<u>Faculty Appointments</u>
The RSPH adopts faculty titles and policies and procedures related to appointments, continuation and promotion as included in the Emory University Statement of Principles Governing Faculty Relationships. (See Resource Room and =at http://provost.emory.edu/faculty/Document%20clearinghouse/PartB.html and http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf– Emory and RSPH - for copy of these procedures.)

Budgeting and Resource Allocation

<u>Process</u>
The Rollins School of Public Health follows a budget process that is the same for all three of the professional schools and the Yerkes National Primate Research Center in the Woodruff Health Sciences Center (WHSC). The dean proposes the annual operating budget to the WHSC executive vice president for health affairs and the Emory executive vice president for finance and administration as well as additional members of Emory University's Ways and Means Committee. This budget is then approved by the Board of Trustees.

<u>Sources of Revenue</u>
The RSPH derives the bulk of its operating income from tuition charged to masters students and the

facility and administrative costs (F & A) received on sponsored project expenditures. The RSPH receives a small subsidy from the WHSC and Emory of less than $1 million.

Tuition is returned to the home school, in accord with Emory University policy. For example, if an RSPH student enrolls in a course offered by School of Business, tuition is retained by the RSPH. Conversely, if an undergraduate student in Emory College enrolls in a RSPH course, the RSPH receives no tuition revenue from the College. Cross-enrollments are periodically monitored, and, over the past several years, RSPH enrollment outside the school has been generally comparable to the enrollment of those outside the school who take RSPH courses.

Likewise, all F & A is returned to the school that houses sponsored awards. When multiple schools are involved in an externally funded project, distribution of F & A is determined by where the direct costs are spent. For example, if an award is made to a principal investigator in the RSPH with a co-investigator in the School of Medicine, the indirect cost on the salary paid to the co-investigator would flow to the School of Medicine.

University Cost Allocation
Emory University charges all schools, including the RSPH, an annual cost allocation, which is used to maintain facilities and Emory University's central services. The allocation is based on actual costs to maintain facilities, expenditures initiated by the school, numbers of faculty, staff, students and alumni, as well as other parameters.

Development and Philanthropy
The Emory University Office of Development and Alumni Relations is responsible for the identification, cultivation, solicitation and stewardship of individual, foundation and corporate donors, alumni associations and activities, annual giving and development communications.   Through a semi-decentralized structure, each school includes a staff member specifically focused on its fundraising strategy and priorities. At the RSPH, the associate dean for development and external relations reports to both the dean of the RSPH and to the vice president of development for the Woodruff Health Sciences Center. The associate dean for development and external relations is supported by a full-time staff of three persons and has liaison relationships with the Foundation and Corporate Relations, Planned Giving, Development Communications and Health Sciences Communications Offices.

Personnel Recruitment, Selection and Advancement

Staff
The school follows university policies for employee recruitment, evaluation and promotion. The policies and procedures for general staff employment are included in the university's employment manual (available on site and on the web). The university is an Affirmative Action/Equal Employment Opportunity employer (AA/EEO). University policies also address compliance with other federal regulations, discriminatory harassment, performance review and evaluation, vacation and sick leave. The web link is http://policies.emory.edu/.

Faculty
Emory University's AA/EEO guidelines stipulate that an open search must be conducted for any regular faculty appointment. RSPH departments receive permission from the dean to conduct searches for faculty positions and must file a report on search procedures and process with the Emory Office of Equal Opportunity Programs before initiating the search and at its conclusion. New faculty appointments are

recommended by departments and approved by the dean, who may consult the school's Appointments, Promotion and Tenure Committee (APT).

In the case of faculty appointments or promotions with tenure, the APT committee makes recommendations to the dean regarding academic rank, promotion and tenure following a review and recommendation by the department.   The dean's recommendation is reviewed by the EVPHA and then the provost and president, who consult with the President's Advisory Committee, made up of faculty representatives from all Emory schools. The provost and president transmit their recommendation to the Board of Trustees, who make the final decision.

The dean may approve the appointment of nontenure-track faculty members recruited without an open search in response to recommendations by department faculty when the faculty member brings unique skills to a program or project. The dean must report such administrative appointments to the Office of Equal Opportunity Programs for their review and approval.

Academic Standards and Policies

University
The school must receive university approval before adding a new degree program. The university provost reviews the proposal and, if approved, forwards it to the Board of Trustees for final consideration. In addition to degree program approval, the Office of the Provost may review certain academic standards and practices, particularly if they require coordination across the university.

Graduate School
The Graduate Executive Council and dean of the Laney Graduate School oversee the curriculum for doctoral programs.   The Graduate Executive Council, which is composed of nine graduate school faculty members, three from each division of the university (humanities, social sciences and natural sciences), reviews and approves proposed changes in curriculum, policies and procedures for doctoral students that are submitted by RSPH department faculty.

Rollins School of Public Health
The Rollins School of Public Health Education Committee oversees the curriculum, policies and procedures for the MPH/MSPH programs and that of other certificate or special programs. The Committee is made up of an elected faculty member from each department. Also in attendance are the assistant/associate directors for academic programs (ADAPs) in each department as well as staff from Enrollment Services. Schools or programs that offer dual degrees with RSPH are invited to send a representative. Two students also serve on the committee, which meets monthly. The executive associate dean for academic affairs staffs the meetings and provides support to the chair.

The Academic Standards Subcommittee, consisting of the faculty representatives on the Education Committee, advises the executive associate dean for academic affairs on student appeals of decisions affecting their academic standing such as, academic exclusion (dismissal) from the school.

The Teaching Subcommittee consists of faculty and student representatives who develop programs and policies pertaining to teaching and the development of teaching skills.

Academic Departments
Some departments have established curriculum committees and some deal with curricula through meetings with the faculty as a whole. Each department and the Career MPH program has one or more assistant/associate directors for academic programs (ADAPs) who support the academic programs and provide routine student advisement.

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d. Identification of any of the above processes that are different for the school of public health than for other professional schools, with an explanation.

The above processes are comparable to those of all other Emory professional schools.

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e. If a collaborative school, descriptions of all participating institutions and delineation of their relationships to the school.

The RSPH is not a collaborative school.

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f. If a collaborative school, a copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the school's operation.

N/A

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g. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths
- The RSPH is a part of a major university, which is accredited by the Southern Accreditation of Colleges and Schools (SACS).
- The RSPH is also part of a world-class health sciences center, which strengthens our access to collaborating health scientists.
- The RSPH has a collaborative relationship with the Laney Graduate School, which provides us with stipends for our doctoral students.
- The dean of the RSPH has equal status with every other dean in the health sciences center and university.
- The autonomy provided by the university structure enables the school leadership to initiate programs and respond effectively to challenges and opportunities.
- The dean actively participates in the leadership of both the central university and health sciences center.

Lessons Learned:
- This organizational structure fosters both formal and informal channels of communication between the dean and the faculty of the RSPH and the head of academic affairs (i.e., the provost) and CEO/EVPHA of the Woodruff Health Sciences Center.

1.4   Organization and Administration

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

Required Documentation. The self-study document should include the following:

a. **One or more organizational charts showing the administrative organization of the school, indicating relationships among its component offices, departments, divisions, or other administrative units.**

The school's organizational structure coordinates activities that further the school's mission, goals and objectives. (See RSPH organization chart, Chart 1.4a, as follows.)

Rollins School of Public Health
Organizational Chart

Interim CEO, Woodruff Health Sciences Center,
Executive VP for Health Affairs
Chairman, Emory Healthcare
S. Wright Caughman, MD

Provost & Executive VP
Academic Affairs
Earl Lewis, PhD

Dean
James W. Curran, MD, MPH

Associate Dean for Admissions
and Student Affairs
Kara Robinson, MS

Associate Dean for Development
and External Relations
Kathryn H. Graves, MEd, MPH

Executive Associate Dean
for Academic Affairs
Richard M. Levinson, PhD

Associate Dean for
Research
Gary W. Miller, PhD

Associate Dean for
Applied Public Health
Kathy Miner, PhD, MPH, MCHES

Executive Associate Dean for
Administration and Finance
P. Dean Surbey, MA, MBA

Director of Enrollment and
Financial Aid
Catherine Strate, MA

Director of Alumni and
Constituent Relations
Michelle James

Education Committee

Research Advisory
Committee

Chair of CMPH
**Melissa Alperin, MPH,
MCHES**

Assistant Dean for
Research Administration
Bill Lambert

Director of Leadership and
Community Engaged Learning
Kristin Unzicker, MPH, CHES

Director of Annual Giving
Kathleen Presswala

Appointments, Promotion
and Tenure Committee

Director of Continuing
Professional Education
Laura Lloyd, MPH, MCHES

Director of Career Services
Claudia Paez-Ellett, MPH

(9) Assistant/Associate
Directors for Academic
Programs

Assistant Director of
Development
TBD

Director of SITE
Dabney Evans, PhD, MPH

Director of Information
Services
Mark Condé

Director of TTAC
Debra Morris, MPH, CHES

Director of Business
Services
Phyllis Peninger

Department Chairs

Director of DTTAC
Linelle Blais, PhD

Director of Human
Resources/Payroll
Beth Brundige

Director of Emory PHTC
**Melissa Alperin, MPH,
MCHES**

Director of
Reimbursements/Payments
Rhonda Burke

Communications Manager
Tarvis Thompson

Behavioral Sciences
and Health Education
**Michael Windle, PhD
Chair**

Biostatistics &
Bioinformatics
**Lance Waller, PhD
Chair**

Environmental Health
**Paige Tolbert, PhD
Chair**

Epidemiology
**Viola Vaccarino, MD,
PhD
Chair**

Health Policy and
Management
**Kenneth Thorpe, PhD
Chair**

Hubert Department of
Global Health
**Carlos del Rio, MD
Chair**

Senior Operations Manager
Vanda P. Jackson

Revised February 2012

b. Description of the roles and responsibilities of major units in the organizational chart.

The dean and his administrative staff manage and coordinate school functions.   The dean holds executive authority and responsibility for the school and is assisted by the following deans:
- Executive Associate Dean for Academic Affairs
- Executive Associate Dean for Administration and Finance
- Associate Dean for Applied Public Health
- Associate Dean for Research
- Associate Dean for Development and External Relations
- Associate Dean for Admission and Student Affairs
- Assistant Dean for Research Administration

Academic activities are organized into six departments, each headed by a chair appointed by the dean. Chairs report directly to the dean and, for certain academic, fiscal or community liaison functions, may work in concert with the associate or assistant deans. Two associate deans are designated as *executive* associate deans, indicating that they have the authority to represent the dean in university affairs pertaining to academic (executive associate dean for academic affairs) or fiscal (executive associate dean for administration and finance) matters. The Career MPH (CMPH) Program is administered by a chair who is advised by faculty members from the departments and reports to the associate dean for applied public health.

The associate deans, along with the six department chairs and the chair of the CMPH Program share in school administrative governance. In addition, they advise the dean on matters relating to school policy and school-wide governance. Faculty and students share in school governance through representation on the school's standing committees, in academic department deliberations, and through their own organizations (i.e., Faculty Council and Student Government Association). Curriculum vitae for key administrators are included in the Resource Room on site.

The dean and most associate deans are engaged in the instructional program of the school, either as course instructors, presenters, student mentors or advisors.

Dean (James W. Curran)
The dean holds executive authority and responsibility for all school activities. The dean is directly accountable to Emory University's executive vice president for health affairs and the provost and, through these offices, to the university president and Board of Trustees.

The following executive associate/associate deans and department chairs report to the dean of the school:

Executive Associate Dean for Academic Affairs (Richard Levinson)
The executive associate dean for academic affairs oversees faculty recruitment, promotion, retention and tenure and professional development with the assistance of the six department chairs. He also coordinates the school's Appointments, Promotion and Tenure (APT) Committee. The executive associate dean is also responsible for the curriculum and quality of instruction and coordinates the school's Education Committee.

Executive Associate Dean for Administration and Finance (P. Dean Surbey)
The executive associate dean for administration and finance oversees the allocation and management of school resources. This office develops the operating budget and monitors expenses as well as coordinates strategic planning for the school. The executive associate dean oversees Business Office Services, which manages all aspects of pre- and post-award administration for grants and contracts including compliance and regulatory affairs, the school's human resources activities (including payroll), physical plant, space allocation, and information technology. The executive associate dean also oversees the Office of Career Service which provides consultation, training and advisement services for students to prepare them for public health practice as well as manages the practicum program.

Reporting to the executive associate dean for administration and finance, the Assistant Dean for Research Administration (Bill Lambert) supervises the grants management team for the RSPH.

Associate Dean for Applied Public Health (Kathleen Miner)
The associate dean for applied public health develops and maintains relationships and other activities that link RSPH with the public health practice communities at the global, national, state, and local levels. The functions of this position fall into two categories: those that are core activities of the school and those funded through extramural resources. The general areas of extramural funding include public health workforce development, technology-based instruction, applied research and evaluation, including the use of mixed methods. Offices and programs reporting to the associate dean for applied public health include the Southeastern Institute of Training and Evaluation (SITE), the Emory Public Health Training Center, the Office of Continuing Professional Education, the Career MPH (CMPH) Program, the Tobacco Technical Assistance Consortium (TTAC) and the Diabetes Training and Technical Assistance Consortium (DTTAC).

Associate Dean for Research (Gary Miller)
The associate dean for research is responsible for facilitating the school's programs of research. This office interacts with the Woodruff Health Sciences Center and Emory University on policies that affect research and also serves on the WHSC Research Advisory Committee. This office also liaises with the Emory University Office of Research Administration on issues pertaining to conflict of interest and the Institutional Review Board's policies and procedures. The associate dean for research is advised by the Research Advisory Committee, made up of faculty members from RSPH academic programs. This associate dean identifies opportunities for collaborative and/or interdisciplinary research and may convene faculty to initiate such activities, e.g., center grant proposals, and interact with extramural funding agencies to identify opportunities for supporting such programs.

Associate Dean for Development and External Relations (Kathryn Graves)
The associate dean for development and external relations is responsible for all areas of development and fundraising, alumni relations and philanthropic support of the RSPH. The associate dean oversees external relations for the school; oversees the content of the magazine, *Public Health*, and all alumni publications; and coordinates the RSPH Dean's Council, a group of community, business and philanthropic leaders whose primary mission is focused on providing visibility, support and counsel to the RSPH.   The associate dean reports to both the dean and to the senior associate vice president for development, WHSC.

Associate Dean for Admission and Student Affairs (Kara Robinson)
The associate dean for admission and student affairs oversees the Office of Admissions and Student Services and its functions in student admissions and recruitment, advisement, enrollment, honor code

matters, work-study programs and international student services. The associate dean liaises with the Emory University Office of Financial Aid and Registrar; works closely with the RSPH Office of Career Services; and coordinates the assistant/associate directors for academic programs (ADAPs) providing routine student advisement in each department.

Department Chairs
The school's academic programs and faculty are organized into six departments headed by chairs appointed by the dean (*organization chart indicates names of department chairs*). Chairs are responsible for (1) guiding the operations of departments within a budget, (2) building research and training programs within departments and in collaboration with other departments or units of the university, (3) cultivating opportunities to collaborate for the improvement of public health practice, (4) recruiting and retaining excellent faculty members, (5) offering a quality curriculum, and (6) evaluating instruction. Chairs are also responsible for working with faculty to identify needs and opportunities for developing and maintaining excellence in teaching, mentoring junior faculty and mentoring students.

Collectively, chairs participate in the leadership of the school with twice-monthly meetings and through regularly scheduled individual consultations with the dean. Chairs are also responsible for annually evaluating faculty and initiating recommendations for promotions and adjustments in salaries. In addition to their administrative responsibilities, chairs maintain their own programs of research, often supported by extramural funding. Chairs contribute to the instructional program by teaching in the academic programs of their department or the school and/ or serving as student mentors or advisors.

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c. Description of the manner in which interdisciplinary coordination, cooperation and collaboration are supported.

Emory University commits itself, as an institution, to promoting interdisciplinary and cross-disciplinary teaching and research. The RSPH embraces these values by supporting interdisciplinary collaboration through its organization and faculty appointments. All departments within RSPH are interdisciplinary, as exemplified by the breadth of academic degrees among its faculty.

The school shares resources, such as the Health Sciences Center Library, with the Schools of Medicine and Nursing. Research administration services (IRB, Conflict of Interest, Office of Sponsored Programs, etc.) serve the entire university. The Woodruff Health Sciences Center sometimes provides funds for school initiatives, including faculty recruitment.

Emory University commits resources to sponsor university-wide themes or initiatives, as part of its strategic planning, in which the RSPH participates or benefits. They include Strengthening Faculty Distinction, Global Health, Neurosciences, Computational and Life Sciences, Predictive Health, Religion and the Human Spirit and Race and Difference.

Support for interdisciplinary collaborations within the RSPH and Emory University is demonstrated in the following ways:

Interdisciplinary Faculty in RSPH
Faculty from various disciplines can be found in several departments. For example, five departments have one or more faculty members trained in epidemiology. Faculty members with an interest in environmental health and in global health have primary appointments in five departments. Social and behavioral scientists hold primary appointments in the Department of Behavioral Sciences and Health

Education as well as the Departments of Health Policy and Management and Global Health. Biostatisticians are appointed in both the Department of Biostatistics and the Department of Epidemiology. This mix of academic backgrounds has resulted in a number of cross-department faculty appointments within the school.

Joint Appointments between Schools at Emory University
As of 2011, 99 faculty members held joint, secondary appointments in the school (i.e., primary appointments were in another school or department). These include RSPH faculty who are affiliated with one of more departments and faculty with appointments in other Emory schools who are appointed, normally without compensation, to RSPH departments.

Participation in Dual and Bachelor/Master's Degrees
By administratively supporting several dual-degree programs, the RSPH fosters contact between faculty and students of different schools. The dual-degree programs include the MSN/MPH with the School of Nursing; MD/MPH with the School of Medicine; JD/MPH with the School of Law; the MBA/MPH with the School of Business; the MMSc/MPH with the Physician Assistant Program; the DPT/MPH program with the Physical Therapy Program; and the MDiv/MPH and MTS/MPH with the School of Theology. All MPH/MSPH students are eligible to enroll in courses outside the school of public health through cross-registration for classes in the schools of law, theology, nursing, business and the graduate school.

The school also collaboratively offers two five-year bachelor/master's degrees with the Emory College. The five-year bachelor/master's degree (BS/MPH) is offered through the Emory College Environmental Studies Department and RSPH Department of Environmental Health and a second (BA/MSPH), through the Department of Mathematics and RSPH Department of Biostatistics and Bioinformatics.

Certificate Programs
The RSPH offers 3 certificate programs that combine multiple disciplines. Open to students in any departmental program, they are administratively housed in a department. These certificates require 5-8 credit hours in course work and require that the practicum and/or culminating experience addresses the certificate topic. The courses are counted as electives in the MPH/MSPH program. The certificate programs are:
- *Global Complex Humanitarian Emergencies* (administered by Global Health)
- *Mental Health* (administered by Health Policy and Management)
- *Socio-Contextual Determinants of Health* (administered by Behavioral Sciences and Health Education)

A fourth certificate program, *Public Health Informatics*, is administered by the Department of Biostatistics and Bioinformatics. This program requires 20 semester hours of study and enrolls students who are not currently pursuing an MPH or MSPH degree. The program is designed to offer specialty training to those who may already have training in public health and may be practicing in the field. These certificate programs are described in the matrix of competencies in section 2.6 and the Public Health Certificate is included as well in Section 3.3.

The school also collaborates with 3 certificate programs offered through the Laney Graduate School that enroll students from multiple schools in the university. Students may count the required courses for the certificate as elective credits for the MPH/MSPH degree and direct the focus of their practicum and/or culminating experience toward the certificate topic. The certificate programs are:
- *Human Rights*

- *Religion and Health*
- *Russian and East European Studies*

Interdisciplinary Seminars and Lectures

The school sponsors several lecture series that are open to the university and the public, such as the Vaccine Dinner Club, Models of Excellence Lectures, Mental Health Certificate Program Lectures and the Center for AIDS Research Lectures. The school also schedules three or more Public Health Grand Rounds presentations each semester.

Departments support interdisciplinary communication through seminars and presentations to which students, faculty, and staff from Emory University are invited. They are designed, in part, to share the work of department faculty, students, and their related disciplines with others in the school. Faculty and students are invited to dissertation and thesis defenses, capstone course presentations and presentations based on research and practica sponsored by the school's Global Field Experience funds.

The school holds endowment funds that sponsor annual presentations: The DeHaan Lecture on Health Education/Promotion, The Michael M.E. Johns Lecture on Health Policy and the Donna Brogan Lecture on Biostatistics. Student organizations frequently sponsor lectures or panels on topics of general interest in public health, and the Public Health Academy Scholars in Action twice annually organizes a speaker or panel targeting the interests of students in the school and larger university. The school also organizes the annual Charles C. Shepard Symposium each May, which features student presentations based on the best theses, competitively selected by a school-wide faculty committee. Programs from previous years are located in the Resource Room.

Interdisciplinary Centers

The school's centers contribute to interdisciplinary research, teaching and service activities. The centers allow RSPH to expand expertise, respond to community needs and provide the opportunity for research collaboration with faculty from other schools and with professionals in public health practice. Center seminars allow students who are interested in research to gain exposure to other disciplines.

For administrative reasons, each center is aligned with the department in which the center's director is located. Most center participants receive extramural funding, and some may receive infrastructure support from the school, university or department in which they administratively reside. Table 1.4c illustrates the range of interdisciplinary centers and their reach within Emory and the wider community.

Table 1.4c: RSPH Interdisciplinary Centers and Collaborative Relationships

Department	Centers	Selected Examples of Collaborative Relationships	
		Internal to Emory	External to Emory
Behavioral Science and Health Education	• Emory Public Health Training Center • Emory Prevention Research Center • Southeastern Institute for Training and Evaluation • Diabetes Training and Technical Assistance Center • Tobacco Technical Assistance Consortium	• Woodruff Health Science Center • Emory Center for Comprehensive Informatics • Department of Biomedical Informatics • Emory Vaccine Center • Georgia Cancer Coalition • Emory School of Medicine • Winship Cancer Institute • Yerkes Primate Center • Emory Center for Health in Aging • Goizueta Business School • The Carter Center • Anthropology Department • Candler School of Theology • Emory College • Nell Hodgson Woodruff School of Nursing	• Southwest Georgia Cancer Coalition • American Cancer Society • Association of State and Territorial Health Officers (ASTHO) • Centers for Disease Control and Prevention (CDC) • Public and private health providers • State and local public health agencies • University of Puerto Rico School of Public Health • Georgia Department of Public Health • Hope Clinic • Georgia Hospital Association • Aetna • Grady Memorial Hospital • Population Services International • University of Georgia • Georgia Institute of Technology • CARE USA
Biostatistics and Bioinformatics	• Biostatistics Consulting Center • Center for Biomedical Imaging Statistics		
Environmental Health	• Southeastern Center for Air Pollution and Epidemiology • Parkinson's Disease Collaborative Environmental Research Center		
Epidemiology	• Emory Preparedness and Emergency Response Research Center • Center for Public Health Preparedness and Research • Emory Center for AIDS Research • Georgia Center for Cancer Statistics • Women's and Children's Center • Molecules to Mankind Program		
Health Policy and Management	• Emory Center on Health Outcomes and Quality • Emory Institute for Advanced Policy Solutions • Center for Entitlement Reform		
Global Health	• Center for Global Safe Water • Interfaith Health Program		

Interdisciplinary Teaching Facilitators and Barriers

Within the RSPH, department chairs have the administrative flexibility to credit faculty teaching activities, and tuition is allocated in a way that enables collaboration or team teaching. As indicated in the catalog, a number of courses are cross-listed in more than one department. The school partners with other schools in offering university-wide certificates in Human Rights and Religion and Health. Some courses taught by schools other than the RSPH are cross-listed in the RSPH and students may enroll in courses that are not cross-listed and taught by other schools. Because schools operate with

different business plans regarding reimbursement for teaching, collaborative instruction across schools sometimes requires negotiating special fiscal arrangements.

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d. Identification of written policies that are illustrative of the school's commitment to fair and ethical dealings.

The university and school follow all Georgia and federal laws and regulations regarding fair and ethical dealings. Written policies related to fair and ethical dealings are in the university's *Policies and Procedures Manual,* which is available in the Resource Room and posted on the school and university websites at http://policies.emory.edu.

University Documents Illustrating Commitment to Fair and Ethical Dealings

- Americans with Disabilities Act
- Budget and Resource Allocation
- Choices and Responsibility
- Code of Business Ethics and Conduct
- Corrective Discipline Measures
- Emory University Affirmative Action Plan
- Emory University Position Statement on the Care and Use of Animals in Research
- Emory University Statement of Guiding Ethical Principles
- Employment and Termination Decisions
- Equal Opportunity and Discriminatory Harassment Policy

- Fair Labor Standards Act
- Family Educational Rights and Privacy Act (FERPA)
- Family Medical Leave of Absence (FMLA)
- Guidelines for Responsible Conduct of Scholarship and Research
- Investigations/Research Rules
- Law on Alleged Sexual Assault
- Minority Health Research
- Non-immigrant Teachers
- Statement of Principles Governing Faculty Relationships

RSPH Documents Illustrating Commitment to Fair and Ethical Dealings

- Appointment, Promotion and Tenure (APT)
- Emory University Conflict of Interest Disclosure

- Institutional Research Board
- Performance Evaluation

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e. Description of the manner in which student grievances and complaints are addressed, including the number of grievances and complaints filed for each of the last three years.

The RSPH has two types of grievance/appeal policies: student appeals pertaining to a Student Academic Honor and Conduct Code violation, and student grievances that pertain to grades and academic issues. The student policies and codes and all associated appeals or grievance procedures are in the school catalog at http://www.sph.emory.edu/cms/academic_programs/documents/110081-1L_RSPH_catalog%20vfinal.pdf and on the website at http://www.sph.emory.edu/cms/current_students/enrollment_services/policies.html#gradpol. All entering students view an online video describing the Honor and Conduct Code process and take a quiz demonstrating their awareness and understanding for the policies and procedures.

The associate dean for admissions and student affairs oversees the administration of these policies and the executive associate dean for academic affairs reviews the appeals and transmits these decisions. If

there is a hearing by an ad hoc committee, it makes its recommendation to the executive associate dean for academic affairs, who may dismiss the case, accept the committee's recommendation or modify the recommendation and transmits that decision to the student(s). Appeals are made to the executive associate dean for academic affairs who administers the appeals process.

Grade and other academic appeals go to the faculty member, chair/ADAP and then to the executive associate dean for academic affairs, who may consult with the academic standards subcommittee.

Grievances that do not fall within the other two types go to the associate dean for admissions and student affairs who attempts to resolve it and, if the student chooses, set up a grievance committee process.

The following section describes each type of appeal/grievance process, as well as the number of appeals/grievances for the last three years.

RSPH Student Academic Honor Code and Conduct Code Appeals Process
Students may appeal a decision by the honor or conduct code ad hoc committee (consisting of two students and two faculty members) through a formal appeals process:

- Written appeal to the executive associate dean for academic affairs
- Executive associate dean for academic affairs may determine outcome of appeal or may appoint an ad hoc committee to review the charge(s), recommendation(s), and action(s)
- Ad hoc committee consists of a minimum of one student and two faculty members
- Ad hoc committee recommends to affirm, reverse or modify the prior decision or recommends another full hearing before a new ad hoc committee
- Executive associate dean notifies student of the appeals decision or arranges for another full hearing

Appeal Process for Academic Matters
Students may appeal decisions related to academic performance, such as a course grade, thesis committee approval, etc., through the following process:

- Discuss matter with course instructor or thesis chair
- Appeal to department chair in writing through department ADAP
- Appeal to executive associate dean for academic affairs in writing
- Executive associate dean for academic affairs makes a decision or seeks advice from the Academic Standards Sub-committee

Grievance Process
Students may wish to remedy grievances unrelated to academic performance or honor and conduct code violations. The following process is followed:

- Discuss grievance with department ADAP
- Present grievance to associate dean for admission and student affairs
- If unresolved by associate dean for admission and student affairs, file Formal Complaint

Grievance Process with Formal Complaint

If the student is not satisfied with the resolution of their grievance through the grievance process described above, they may file a formal complaint.

- Submit written statement to associate dean for admission and student affairs
- Associate dean for admission and student affairs convenes Ad Hoc Grievance Committee of two students and two faculty members
- Grievance committee reviews background material and may request additional information
- Grievance committee makes recommendation to the executive associate dean for academic affairs
- Executive associate dean for academic affairs informs students of outcome

Table 1.4e: Number of Appeals or Grievance Procedures during the Past Three years

Number of Appeals or Grievance Procedures during the Past Three Years				
Academic Year	**Honor or Conduct Code Appeals**	**Other Academic Appeals**	**Grievance Complaints**	**Formal Complaints**
2008 – 2009	2	0	NA	0
2009 – 2010	0	1	NA	0
2010 – 2011*	1	1	0	0

* 2010 – 2011 was the first year that the grievance policy and procedure was implemented.

f.   Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school's organization enables it to effectively carry out its missions in teaching, research and service, take advantage of strategic opportunities and respond to environmental challenges.
- The school includes an interdisciplinary faculty and collaborative academic programs with other schools in the university.
- Upper management is accessible and well integrated into the operational activities of the school. Administrative leaders contribute to the teaching, research and service missions of the school.

Lessons Learned:
- The increased growth and complexity of the school requires enhanced efforts at communication across the school. For example, there is no common organizational description of what is called a center, institute or program within the school.

1.5   Governance

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

 Required Documentation. **The self-study should include the following:**

a. **Description of the school's governance and committee structure and processes, particularly as they affect:**
   - **general school policy development**
   - **planning**
   - **budget and resource allocation**
   - **student recruitment, admission and award of degrees**
   - **faculty recruitment, retention, promotion and tenure**
   - **academic standards and policies**
   - **research and service expectations and policies**

Overview of RSPH Governance Structure

The purpose of governance is assessment, agreement and action. The governing organizations and standing committees provide all three functions for the school. The dean is responsible for decisions affecting the functioning and development of the school and oversees the development and implementation of school-wide policies. The dean acts in consultation with the governing organizations.

The RSPH governance structure is represented in the chart on the following page.

Chart 1.5a: Rollins School of Public Health Governance Structure

Rollins School of Public Health
Governance Chart
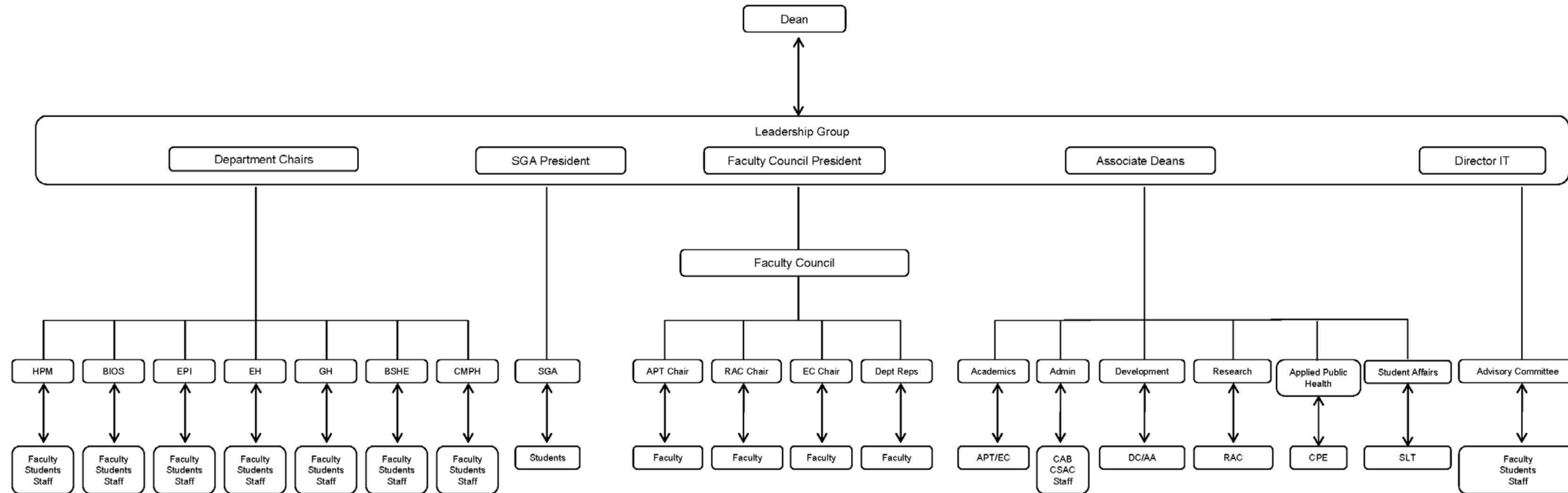
Department Chairs:
HPM   Health Policy and Management
BIOS   Biostatistics and Bioinformatics
EPI   Epidemiology
EH   Environmental Health
GH   Global Health
BSHE   Behavioral Sciences and Health Education
CMPH   Career MPH Program

SGA   Student Government Association

Faculty Council:
APT Chair   Appointments, Promotion and Tenure Committee Chair
RAC Chair   Research Advisory Committee Chair
EC Chair   Education Committee Chair
Dept Reps   Faculty Representatives from each department

Associate Deans and Governing Units They Support:
Academics   Executive Associate Dean for Academic Affairs
APT/EC   Appointments, Promotion and Tenure Committee; Education Committee
Admin   Executive Associate Dean for Administration and Finance
CAB   Community Advisory Board
CSAC   Career Services Advisory Committee
Staff   Staff members
Development   Associate Dean for Development and External Relations
DC   Dean's Council
AA   Alumni Association
Research   Associate Dean for Research
RAC   Research Advisory Committee
Applied Public Health Associate Dean for Applied Public Health
CPE   Continuing Professional Education Committee
Student Affairs   Associate Dean for Student Affairs
SLT   Student Leadership Team
Director IT   Director of Information Technology
Advisory Committee   Information Services Advisory Committee

Governing Organizations
Three governing organizations advise the dean: **Administrative Staff** (composed the dean, associate deans and the director of information technology); the **Leadership Group** (composed of department chairs, deans, director of information technology, chair of the CMPH Program and representatives from the faculty council and student government association); and, in recommendations for faculty appointments and promotion, the **Appointments, Promotion and Tenure Committee.**

Two organizations advise the Leadership Group and dean on matters pertaining to their constituents: The **Faculty Council** (on faculty professional life) and the **Student Government Association** (on student issues, policies and procedures).

The Faculty Council consists of faculty representatives from each department. They are joined by the three chairs of the standing committees. The Faculty Council assesses, finds agreement on and recommends policies that contribute to the professional life of faculty members. The Student Government Association includes representatives from all departments and reflects the interests of RSPH students.

Standing Committees
Three standing committees make recommendations on policies and procedures to the Leadership Group: The **Appointments, Promotion and Tenure Committee** on faculty professional advancement; the **Education Committee** on curriculum, teaching and policies and procedures pertaining to students; and the **Research Advisory Committee** on aspects of research support and administration. The three standing committees also oversee activities in their spheres of responsibility.

Committee members are elected by the faculty in each department or appointed by the chair with the consent of faculty. Standing committees are all chaired by committee faculty members who also become members of the Faculty Council. The school contributes salary coverage for a percent of effort (currently 5%) for the standing committee chairs and chair of the Faculty Council. The chairs of standing committees are nominated by committee members and approved by the dean.

Department Governance
Each department has governing structures under the oversight of the chair. Departments hold regular faculty meetings with student representation and have different committee structures. Standing committees may include those addressing curriculum, PhD program and admissions. Faculty members may meet as ad hoc department committees for faculty searches and program development.

Governance Process

General School Policy Development
Any of the governing organizations, standing committees, or the school's administration may propose school-wide policies. Proposals are presented to the dean or the Leadership Group which normally considers them in concert. The Leadership Group makes recommendations to the dean for adoption. The dean may also refer policies to any of the standing committees or governing organizations for their advice or may appoint advisory ad hoc committees.

Planning
Planning occurs during the school's annual budgeting process. Annual planning begins with a review of progress on objectives and the development of objectives for the next academic year. The indicators

are reported in the school's *Annual Report*. Copies of the *Annual Report* for the last three years are found in the Resource Room.

The annual review of progress on objectives is based on input from the following sources:
- Recommendations and reactions from faculty members at an annual retreat
- Data on various school outcomes reported by the Office of Admissions and Student Services (admissions, recruitment, class enrollment, career services) and the Office of Administration and Finance (sponsored research, indirect cost recovery, tuition revenue, budget performance)
- Strategic planning of the school, Woodruff Health Sciences Center and university
- Student surveys (exit survey, survey of recent graduates, course evaluations)
- Recommendations from standing committees and organizations (e.g., Faculty Council, Leadership Group, administration)
- Department annual reports
- Recommendations from the public health community

The RSPH participates in university-wide strategic planning processes. Most recently, the Woodruff Health Sciences Center developed a strategic plan for research, which involved several RSPH faculty members and administrators. Under the direction of the provost, the university organized a strategic planning process which established several university-wide programs (Global Health, Neurosciences, Religion and Health, Predictive Health, Race and Difference, etc.) which have involved RSPH faculty and students.

Operational planning is normally carried out by school's Administrative Staff, who consult at weekly meetings, and by the Leadership Group.

Budget and Resource Allocation
Budget: The school's budget is developed each year by the dean, supported by the executive associate dean for administration and finance, with the executive vice president for health affairs and his staff. The process is described in section 1.6.

Resource Allocation: Resource allocation within the school is based on initial assumptions and guidelines for the annual budget, which are normally discussed by the Leadership Group in the late spring and throughout the summer months. The process for allocation within the school and health sciences center is described in section 1.6.

Student Recruitment, Admissions and the Awarding of Degrees
Recruitment: Student recruitment is overseen by the associate dean for admission and student affairs and the associate director for recruitment in the Office of Admission and Student Services. Recruitment includes outreach to students at universities and in the public health workforce, as well as campus-based programs such as the annual Visit Emory! Program each spring. Each fall, the school sponsors a program on public health as a profession (Destination Public Health) that is open to prospective students. Additional recruitment program activities are organized by the Career MPH Program and by the several doctoral programs.

Admissions: The process is coordinated by the director of admission, recruitment and orientation and the associate director for admissions and makes use of the centralized Schools of Public Health Application Service (SOPHAS) application process. Decisions to admit students are made by faculty members in each department. Each department has guidelines for admission decisions (published in the

school catalog and posted on the website at http://www.emory.edu/home/admission/index.html), a process for applicant review and a method of admission decision-making. However, the school's Leadership Group establishes general policies concerning admissions and (with the participation of department chairs who are part of the Leadership Group) annually sets target enrollments both for the school and for each department.

Awarding of Degrees: The director for enrollment services oversees the awarding of degrees. The assistant/associate directors for academic programs (ADAPs) in each department assess the progress of students toward the completion of degree requirements.   The director of enrollment services reviews the academic records and approves students for graduation when all requirements have been met.

The Laney Graduate School awards the PhD degrees in Biostatistics and Bioinformatics, Epidemiology, Behavioral Sciences and Health Education, Health Services Research and Health Policy, Environmental Health Sciences and any Master of Science degrees. Faculty members that serve as directors of graduate studies (DGSs) in the departments offering doctoral programs oversee students' academic progress, administer the student recruitment program and are accountable to the Laney Graduate School on student progress and program quality. They interact with (and may serve on) the Executive Council of the Laney Graduate School in establishing policy, reviewing curricula and evaluating programs. All faculty members with doctoral degrees in departments offering the PhD are eligible to vote in elections of members of the graduate school's Executive Council. All tenure-track faculty members with doctoral degrees in departments offering the PhD are considered to be faculty members of the Laney Graduate School.

Faculty Recruitment, Appointments, Retention, Promotion and Tenure
Recruitment: Departments, with the permission of the dean, recruit faculty members in accord with standard university procedures described in the *RSPH Appointment, Promotion and Tenure (APT) Guidelines* (see Appendix 1.5.a) and posted on the web at http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf . Faculty searches also require the approval of the University Equal Opportunity Programs (EOP) Office. The hiring department must submit, for EOP approval, a Search Activity Request form that includes a job description, plan for recruitment and search committee composition. The search commences after EOP approval. All applicants responding to an open position are sent a form soliciting the applicant's background characteristics to be submitted anonymously to the EOP Office. The EOP Office assesses characteristics of the applicant pool and adherence to university policies and procedures. Once a desirable candidate for the faculty position has been recruited, a report is filed with the EOP Office. Assuming appropriate procedures are followed, a recommendation is made to the dean for the faculty appointment.

The dean may approve the appointment of nontenure-track faculty members recruited without an open search in response to recommendations by department faculty when the faculty member brings unique skills to a program or project. The dean must report such administrative appointments to the Office of Equal Opportunity Programs for their review and approval.

Appointments: The school's Appointments, Promotion and Tenure (APT) Committee reviews faculty appointments. If appointments recommended by the department are the result of a search following university and school procedures and do not involve tenure, they receive an "expedited" review. Committee members may comment on the appointment to the dean but do not make a formal recommendation. When the faculty appointment involves tenure, the APT Committee provides a

review with a formal recommendation and vote on the record to the dean. The university has written policies and procedures concerning the recruitment, retention, promotion and tenure of faculty. The school augments these university policies with considerations relevant to the mission of the Rollins School of Public Health. School policies emphasize the balance among teaching, research and service. These policies guide the decisions of the school's APT Committee.

Appointments with tenure or at the rank of professor in the tenure track (for which tenure is assumed) must also be approved by the Office of the Executive Vice President for Health Affairs, the President's Advisory Committee (a university-wide committee that advises the provost and president) and the Board of Trustees.

Retention: Department chairs annually review all faculty members, often with the input from senior faculty members of the department. All tenure-track faculty members appointed as assistant professors receive an evaluation by the APT Committee after three years of employment. The department initiates this mid-term review with senior faculty reviewing the candidate. The APT Committee then reviews the department's assessment and the candidate's dossier and writes an evaluation of the candidate's progress towards promotion and tenure with recommendations on how the individual's record might be improved. The APT Committee shares this written evaluation with the department chair and the candidate. The annual and three-year reviews are designed to give faculty an indication of their progress towards promotion in rank and, if weaknesses are detected, how they might be addressed so as to enhance the prospects of a successful outcome.

Faculty members without tenure hold positions that are annually renewable. If faculty members are not to be renewed at the end of the academic year, they must be notified before October 31, December 31 or January 31, depending upon length of employment. The rules are included in the *Emory University Statement of Principles Governing Faculty Relationships*, available on site in the resource room.

If faculty members receive offers from other institutions, the chair and senior department faculty may propose actions to retain that person at the RSPH. Retention offers are normally made in consultation with the dean and other school or university administrators. Faculty retention offers are reported annually to the university provost.

Promotion and Tenure: The department recommends a faculty promotion on the basis of achievements in teaching, research and service with "excellence" in at least one area and performance that it deemed at least "very good" in others. The department's senior faculty conducts the initial review of faculty members being considered for promotion. They consider external evaluation letters from at least six experts suggested by the senior faculty and the candidate. The department submits a supporting dossier to the school's Appointments, Promotion and Tenure (APT) Committee. The APT Committee makes its recommendation to the dean, who has responsibility for the school's decision. Promotion to the rank of associate professor with tenure or professor must be approved by the executive vice president for health affairs and the President's Advisory Committee. The president and provost make their recommendation to the Board of Trustees, which is empowered to grant tenure.

The APT Committee also reviews and recommends policies and procedures pertaining to the assessment of academic achievement and performance. Recommendations are made to the Leadership Group for action, often after consulting with the Faculty Council.

Academic Standards and Policies
Academic standards and related polices pertaining to students are normally recommended by the school's Education Committee. The dean may adopt policies that have an impact on the entire school in consultation with the Leaderships Group and Education Committee. Academic standards and policies are contained in the *Clifton Notes for Faculty* and *Clifton Notes for MPH/MSPH Students*, which are posted on the web at http://www.sph.emory.edu/cms/about/documents/FacCliftonNotes2011.pdf (faculty) and http://www.sph.emory.edu/cms/current_students/documents/Clifton_Notes_2011.pdf (student) and available on site. If there are questions in the application of academic standards or if a student wishes to appeal a decision made by a department or school administrator, the issue may be brought to the school's Academic Standards Subcommittee of the Education Committee.

Research and Service Expectations and Policies
Research: In keeping with the mission of the school, all tenure-track faculty members are expected to engage in research. The areas of investigation reflect individual programs of research or interests of tenure-track faculty. Faculty members often engage in collaborations or common research efforts, e.g., center grants, and the associate dean for research may help facilitate this collaboration. Faculty members appointed in the non-tenured research track are normally recruited to work on externally sponsored research. RSPH *APT Guidelines* describe how achievements in research are assessed.

Service: All tenure-track faculty members are expected to engage in service. The area of service or practice reflects the individual's interests or expertise. Faculty members appointed in the nontenured clinical track are normally recruited to work on externally sponsored service or practice activities. Guidelines for the assessment and reward of service in faculty are contained in the *APT Guidelines* (see Appendix 1.5.a) and posted on the web at http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf.

Support and Dedicated Effort: Tenure-track faculty members normally receive external funding to support effort devoted to research and service or practice. The proportion of effort dedicated to service or research varies by faculty member and over time. Tenure-track faculty members are typically paid two-thirds to three-fourths of their salary from external accounts supporting research or practice and approximately one-third to one-fourth from tuition accounts supporting teaching. The amount of tuition-based salary support for instructional activities varies among faculty depending upon teaching responsibilities, and, to some extent, varies between departments. Nontenure-track faculty members are normally supported by external funds for service or research.

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b.   A copy of the constitution, bylaws or other policy document that determines the rights and obligations of administrators, faculty and students in governance of the school.

University and School Policies and Procedures: The *Emory University Faculty Handbook* and *Employment Handbook* are on the web at http://provost.emory.edu/faculty/Document%20clearinghouse/Index.html and http://www.hr.emory.edu/eu/employeestoolkit/newhireresources/staffhandbook/index.html and available on site. Copies of *Clifton Notes for Faculty (at http://www.sph.emory.edu/cms/about/documents/FacCliftonNotes2011.pdf), Clifton Notes for MPH/MSPH Students (http://www.sph.emory.edu/cms/current_students/documents/Clifton_Notes_2011.pdf),* the *Graduate School Handbook is on the web* (at http://www.graduateschool.emory.edu/uploads/LGS%20Handbook%202011-12.pdf) and available on

site. Information about the dual degree program is included in the school catalog (online at http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html).

In addition, bylaws exist for the following governing bodies (identification of where they are located is noted for each):

- *Faculty Council:* The bylaws are available in the Resource Room.
- *Appointments, Promotion and Tenure Committee:* The bylaws are included in the committee guidelines, which are on the web at http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf and available in the Resource Room.
- *Education Committee:* The bylaws are on the web in the *Clifton Notes for Faculty* document at http://www.sph.emory.edu/cms/about/documents/FacCliftonNotes2011.pdf and available in the Resource Room.
- *Research Advisory Committee:* The bylaws are available in the Resource Room.
- *Student Government Association*: The bylaws are posted on the web at https://blogs.emory.edu/emorysga/governing-documents and available in the Resource Room.
- *Career Services Advisory Committee*: The bylaws are available in the Resource Room.
- *Information Technology Advisory Group*: The bylaws are available in the Resource Room.

c. A list of school standing and important ad hoc committees, with a statement of charge, composition, and current membership for each.

Table 1.5c summarizes the standing committee's comprising the school's governance structure.

Table 1.5c: RSPH School-wide Governing Organizations		
Leadership Group		
Charge	**Composition**	**Membership**
Advise the dean on school policies, procedures and programs; coordinate activities across the school; and initiate school-wide programs	dean associate deans director of information technology department chairs CMPH chair president, student government association president, faculty council	James Curran, MD, MPH, Dean
		Dean Surbey, MA, MBA, Executive Associate Dean for Finance and Administration
		Richard Levinson, PhD, Executive Associate Dean for Academic Affairs
		Kathleen Miner, PhD, MPH, MCHES, Associate Dean for Applied Public Health
		Kathryn Graves, MEd, MPH, Associate Dean for Development and External Relations
		Gary Miller, PhD, Associate Dean for Research
		Kara Robinson, MS, Associate Dean for Admission and Student Affairs
		Mark Conde, BA, Director of Information Technology
		Melissa Alperin, MPH, MCHES, Chair, CMPH Program
		Carlos del Rio, MD, Chair, Hubert Department of Global Health
		Kenneth Thorpe, PhD, Chair, Department of Health Policy and Management
		Paige Tolbert, PhD, Chair, Department of Environmental Health
		Viola Vaccarino, MD, PhD, Chair, Department of Epidemiology
		Lance Waller, PhD, Chair, Department of Biostatistics and Bioinformatics
		Michael Windle, PhD, Chair, Department of Behavioral Sciences and Health Hersh Gupta, President, Student Government Association
		Saad Omer, PhD, MBBS, MPH, Interim Chair, Faculty Council, Assistant Professor, Global Health
Administrative Staff		
Charge	**Composition**	**Membership**
Advise the dean on school operations and management; coordinate functions with other administrators	dean associate deans director of information technology	James Curran, MD, MPH, Dean
		Dean Surbey, MA, MBA, Executive Associate Dean for Finance and Administration
		Richard Levinson, PhD, Executive Associate Dean for Academic Affairs
		Kathryn Graves, MEd, MPH, Associate Dean for Development and External Relations
		Gary Miller, PhD, Associate Dean for Research
		Kathleen Miner, PhD, MPH, MCHES, Associate Dean for Applied Public Health
		Kara Robinson, MS, Associate Dean for Admission and Student Affairs
		Mark Conde, BA, Director of Information Technology

Faculty Council		
Charge	**Composition**	**Membership**
Propose policies, procedures and programs that pertain to the professional lives of faculty members and that advance the mission of the school	Faculty member elected by each department 2 at-large faculty members elected by the faculty Chair of the Appointment, Promotion and Tenure Committee Chair of the Education Committee Chair of the Research Advisory Committee	Saad Omer, PhD, MBBS, MPH, Interim Chair, Assistant Professor of Global Health Carolyn Drews-Botsch, PhD, MPH, Associate Professor of Epidemiology Justin Remais, PhD, MS, Associate Professor of Environmental Health Cam Escoffery, PhD, MPH, CHES, Assistant Professor of Behavioral Sciences and Health Education Brent Johnson, PhD, Assistant Professor Biostatistics and Bioinformatics Walter Burnett, PhD, Professor of Health Policy and Management Gary Miller, PhD, Chair, Research Advisory Committee Roberd Bostick, MD, MPH, Chair, Appointments, Promotion and Tenure Committee; Professor, Epidemiology Roger Rochat, MD, Chair, Education Committee Kimberly Hagen, EdD, Senior Associate, Behavioral Sciences and Health Education Michael Lynn, MS, Senior Associate, Biostatistics and Bioinformatics Bradley Pearce, PhD, Research Associate Professor of Epidemiology Richard Levinson, PhD, Executive Associate Dean for Academic Affairs (ex officio)

Student Government Association (SGA)		
Charge	**Composition**	**Membership**
Propose policies and procedures pertaining to student academic and social life; represent the interests of students in school governance; and, plan and implement social and academic programs of interest to students	10-member executive board elected by student body, including: president vice president secretary treasurer communication chair student activities coordinator (2) social chairs (3) members from each department/ program	Hersh Gupta, President Amogha Kannan, Vice President Alyssa Parr, Secretary Sundeep Gupta, Treasurer Yesenia Merino, Communications Chair Alex Emmitt, Mandip Kaur, Sara Millimet, Social Co-Chairs Ellen Dugan and Colin Regan, Student Activities Coordinators Raphael Coleman and Brooke Genkin, BSHE Department Representatives Jie Chen and Jason Lee, BIOS Department Representatives Ashleigh Best and Hana Richardson, Career MPH Representatives Chi Chen and Chris Wegner, EH Department Representatives Sasha Zaharoof and Siyu Zhang, EPI Department Representatives Mayowa Dayo, Global/EH Interdepartmental Representative Rachel Gordon-Roberts and Jessica Silvaggio, GH Departmental Representatives Dan Mercer and Lulu Tian, Global/EPI Interdepartmental Representatives Yash Ghodke and Neha Sachdev, HPM Departmental Representatives

Appointments, Promotion and Tenure (APT) Committee		
Charge	**Composition**	**Membership**
Review department faculty appointments involving tenure and make recommendations to the dean; review department recommendations to promote and tenure faculty members and make recommendations to the dean; provide an assessment of the progress of untenured tenure-track faculty members following the initial three years of their appointment	Elected tenured faculty member from each department Three tenured faculty members elected at-large Executive associate dean for academic affairs (ex officio)	Roberd Bostick, MD, MPH, Professor of Epidemiology (Chair, APT Committee) Kimberly Jacob Arriola, PhD, MPH, Associate Professor of Behavioral Sciences and Health Education Amita Manatunga, PhD, MA, MSc, Professor of Biostatistics and Bioinformatics Michael Haber, PhD, Professor of Biostatistics and Bioinformatics Barry Ryan, PhD, Professor of Environmental Health Harland Austin, DSc, MS, Professor of Epidemiology Aryeh Stein, PhD, MPH, Associate Professor of Global Health Usha Ramakrishnanm, PhD, Associate Professor of Global Health David Howard, PhD, Associate Professor of Health Policy and Management Richard Levinson, PhD, Executive Associate Dean for Academic Affairs (ex-officio)

Education Committee

Charge	Composition	Membership
Assess, agree on and recommend matters pertaining to the curriculum of the MPH, MSPH, and CMPH programs and their delivery, and related academic policies and procedures; and, review, evaluate, and approve new courses and new MPH, MSPH, CMPH and other academic programs	One faculty member from each department Chair of the CMPH program Ex Officio members, including: two students department assistant/ associate directors for academic programs representatives from schools participating in an RSPH dual degree program director of enrollment services executive associate dean for academic affairs	Roger Rochat, MD, Research Professor of Global Health (Chair, Education Committee) Delia Lang, PhD, MPH, MA, Research Assistant Professor of Behavioral Sciences and Health Education Brent Johnson, PhD, Assistant Professor Biostatistics and Bioinformatics Mitchel Klein, PhD, MAT, Research Assistant Professor of Environmental Health Penelope Howards, PhD, MS, Assistant Professor of Epidemiology Laura Gaydos, PhD, Research Assistant Professor of Health Policy and Management Melissa Alperin, MPH, MCHES, Senior Associate Faculty and Chair, CMPH Program Ex Officio members: Kristine Valenzuela, MPH student Trishna Narula, MPH student Deanne Dunbar, MA, ADAP, Behavioral Sciences and Health Education Cami Dettmer, BS, ADAP, Behavioral Sciences and Health Education Melissa Sherrer, MEd, ADAP, Biostatistics and Bioinformatics Ariadne Switchtenberg, MSW, ADAP, Environmental Health Jena Black, MTS, ADAP, Epidemiology Theresa Nash, MA, ADAP, Global Health Angela Rozo, ADAP, Global Health Flavia Traven, MPH, ADAP, Global Health Kathy Wollenzien, ADAP, Health Policy and Management Melissa Krancer, MS, ADAP, CMPH Program Catherine Strate, MS, Director of Enrollment Services Richard Levinson, PhD, Executive Associate Dean for Academic Affairs Madge Donnellan, PhD, RN, Professor of Nursing Harriet Ruskin, MBA, Director of International and Joint Degree Programs, School of Business

Education Committee: *Academic Standards Subcommittee*

Charge	Composition	Membership
Advise the executive associate dean for academic affairs on matters involving the academic performance of students; consider the appeals of students regarding decisions related to their academic status and performance	Faculty member from each department (those sitting on the Education Committee) Chair, CMPH program Executive associate dean for academic affairs	Delia Lang, PhD, MPH, MA, Research Assistant Professor of Behavioral Sciences and Health Education Brent Johnson, PhD, Assistant Professor Biostatistics and Bioinformatics Mitchel Klein, PhD, MAT, Research Assistant Professor of Environmental Health Penelope Howards, PhD, MS, Assistant Professor of Epidemiology Roger Rochat, MD, Research Professor of Global Health Laura Gaydos, PhD, Research Assistant Professor of Health Policy and Management Melissa Alperin, MPH, MCHES, Senior Associate Faculty and Chair, CMPH Program Richard Levinson, PhD, Executive Associate Dean for Academic Affairs (ex-officio)

Education Committee: *Teaching Subcommittee*		
Charge	**Composition**	**Membership**
Improve the quality of instruction in the school by establishing and promoting programs to teach skills development; initiating and promoting incentives, recognition and rewards for teaching; developing appropriate evaluations of teaching; and, initiating innovations in the curriculum and instruction	One faculty member from each department (more if interested) One student Director of information technology Chair, CMPH program Executive associate dean for academic affairs (ex officio)	Nancy Thompson, PhD, MPH, Associate Professor of Behavioral Sciences and Health Education Kimberly Hagen, MEd, EdD, Senior Associate Faculty of Behavioral Sciences and Health Education Ariela Freeman, PhD, MPH, MAT, BA, Research Assistant Professor of Behavioral Sciences and Health Education Azhar Nizam, MS, Senior Associate Faculty of Biostatistics and Bioinformatics Matthew Strickland, PhD, MPH, MA, Assistant Professor of Environmental Health Penelope Howards, PhD, MS, Assistant Professor of Epidemiology David Kleinbaum, PhD, Professor of Epidemiology Monique Hennink, PhD, Associate Professor of Global Health Steven Culler, PhD, MA, Associate Professor of Health Policy and Management Melissa Alperin, MPH, MCHES, Chair, CMPH Program Mark Conde, BA, Director, Information Technology Kristine Valenzuela, MPH student Trishna Narula, MPH student Richard Levinson, PhD, Executive Associate Dean for Academic Affairs (ex officio)
Research Advisory Committee		
Charge	**Composition**	**Membership**
Assess, agree on and recommend actions to support research administration in the school; identify opportunities for collaborative and/or interdisciplinary research	Senior faculty member from each department Junior faculty member from each department Director, information technology (ex-officio) Assistant dean for finance and administration (ex-officio) Associate dean for research (ex-officio)	Gary Miller, PhD, Associate Dean for Research (Interim Chair) Michelle Kegler, DrPH, MPH, Associate Professor of Behavioral Sciences and Health Education; Director of Emory Prevention Research Center Carla Berg, PhD, Assistant Professor of Behavioral Sciences and Health Education Michael Lynn, MS, Sr Associate of Biostatistics and Bioinformatics Dubois Bowman, PhD, MS, Associate Professor of Biostatistics and Bioinformatics Barry Ryan, PhD, Professor of Environmental Health and Director, Laboratories Dana Barr, PhD, Research Professor of Environmental Health Justin Remais, PhD, MS, Associate Professor of Environmental Health Roberd Bostick, PhD, MPH, Professor of Epidemiology Anne Spaulding, MD, MPH, Assistant Professor of Epidemiology Juan Leon, PhD, MPH, Assistant Professor of Global Health Venkat Narayan, MD, MSc, MBA, Hubert Professor of Global Health and Epidemiology Zhou Yang, PhD, Assistant Professor of Health Policy and Management Kimberly Rask, MD, PhD, Associate Professor of Health Policy and Management Bill Lambert, MAFM, Assistant Dean for Research Administration (ex-officio) Mark Conde, BA, Director, Information Technology (ex-officio) Gary Miller, PhD, Associate Dean for Research (ex-officio)

Career Services Advisory Committee		
Charge	**Composition**	**Membership**
Increase communication between the Office of Career Services, RSPH departments and faculty; create a forum for receiving feedback from faculty and sharing information about the activities and events of Career Services; strengthen the Career Services program while delivering consistent messages about employment to students	Two representatives from each department Chair, CMPH Program Associate Director of Admissions and Recruitment Executive Associate Dean for Finance and Administration Director of Career Services	Frank Wong, PhD, Associate Professor of Behavioral Sciences and Health Education Carla Berg, PhD, Assistant Professor of Behavioral Sciences and Health Education Dawn L. Comeau, PhD, MPH, Assistant Research Professor of Behavioral Sciences and Health Education Kirk Easley, MApStat, Associate Director, Biostatistics Consulting Center, RSPH Patrick D. Kilgo, MS, Senior Associate, Biostatistics and Bioinformatics Dana Barr, PhD, Research Professor of Environmental Health Matthew Freeman, PhD, MPH, Assistant Professor of Environmental Health Anne Spaulding, MD, MPH, Assistant Professor of Epidemiology Michael Goodman, MD, MPH, Associate Professor of Epidemiology Roger Rochat, MD, Research Professor of Global Health Carlos del Rio, MD, Chair, Hubert Department of Global Health David Howard, PhD, Associate Professor of Health Policy and Management Kathy Wollenzien, ADAP, Health Policy and Management Melissa Alperin, MPH, MCHES, Chair, CMPH Program Prudence Goss, MA, Associate Director, Admissions and Recruitment Dean Surbey, MA, MBA, Executive Associate Dean for Finance and Administration Claudia Paez-Ellet, MPH, Director of Career Services

Information Technology (IT) Advisory Group		
Charge	**Composition**	**Membership**
Share and disseminate information about activities, projects, and requirements around the application of technology at RSPH; provide a robust feedback channel from all academic departments to the technology department on needs and requirements; and communicate information shared at ITAG meetings. Explore new ideas to support teaching, administration, research and student requirements to decide on new projects and investments.	One faculty/staff representative from each department and Career MPH (more if interested) Two MPH/MSPH students Director of information technology Executive associate dean for administration and finance Two representatives from the Emory University Technology Services Office	Yvan Bamps, PhD, Senior Research Project Coordinator, Behavioral Sciences and Health Education Cami Dettmer, BS, ADAP, Behavioral Sciences and Health Education Jessica Sales, PhD, MA, Assistant Research Professor of Behavioral Sciences and Health Education George Cotsonis, MA, Senior Associate, Biostatistics and Bioinformatics Yang Liu, PhD, MS, Assistant Professor of Environmental Health Mark Hutcheson, BA, Senior Project Coordinator, Global Health Steven Culler, PhD, Associate Professor of Health Policy and Management Jan Hill, MEd, MS Senior Instructional Content Developer, Career MPH Julia Peace, MEd, MS Instructional Content Developer, Career MPH Kevin Ward, MPH, CTR, Director, Georgia Center for Cancer Statistics; Assistant Research Professor, Epidemiology Marc Overcash, BA, Deputy Chief Information Officer, Research and Health Sciences, Emory University Hersh Gupta, President of the SGA Nicole Bennett, SGA Representative Mark Conde, BA, Director, Information Technology Alan Cattier, MA, Director, Academic Technologies, University Technology Services Dean Surbey, MA, MBA, Executive Associate Dean for Finance and Administration

Other non-standing Committees or Councils Indirectly Involved in School Governance:

Ad Hoc Honor/Conduct Code Committee
When allegations or honor or conduct code violations are received, an Ad Hoc Committee of two students and two faculty members is convened to hear the case. The ad hoc honor/conduct code committees are administered by the associate dean for admission and student affairs. Committee recommendations are made to the executive associate dean for academic affairs who is responsible for reviewing them and implementing actions as necessary.

Dean's Council
The Dean's Council is a group of community, business and philanthropic leaders whose primary mission is focused on providing visibility and support to the RSPH.   They normally meet at least once per semester to learn about school programs and priorities. Current members of the Dean's Council are included in Appendix 1.5.c.1.

RSPH Alumni Association
The RSPH Alumni Association is headed by an executive committee, which annually elects officers. The association engages in activities to advance the school and its priorities and brings alumni together in common activities of service to the school and community. The Alumni Association also participates in

school programs and projects related to the mentoring of students and career advice and networking. It is supported by the school's Office of Development and External Relations. Current members of the executive committee are included in Appendix 1.5.c.2.

Community Advisory Board
The Community Advisory Board (CAB) was formed to communicate with public health employers and community leaders on issues affecting the long-term success of RSPH. Annual meetings include group discussions, one-on-one dialogue and evaluations addressing skills desired of graduates for service in public health. Information gained from board members is being used to help RSPH gauge students' professional readiness and forecast future academic needs, leading to appropriate changes within RSPH that strengthen the competitiveness of both the school and its graduates. This group is supported by the director of career services along with the executive associate dean for administration and finance. Current members of the Community Advisory Board are included in Appendix 1.5.c.3.

Continuing Professional Education Committee
The Continuing Professional Education committee is composed of public health professionals representing a variety of public health professionals including health educators, physicians, nurses, pharmacists and epidemiologists. The committee serves the Office of Applied Public Health and is available to assist other offices throughout the school, in developing continuing professional education offerings to meet the training needs of practicing public health professionals. Current members of the Continuing Professional Education Committee are included in Appendix 1.5.c.4.

Staff Governance
Policies and procedures governing staff are administered by the university's Department of Human Resources. Staff members participate in the development and assessment of those policies through the university's Employee Council. Staff members in the school elect a representative to sit on the council. Staff members also serve on the university-wide president's commissions (status of women; race and ethnicity; and sexuality, gender diversity, and queer equality). Although the staff members do not have a formal organization representing its interests within the school, the dean meets with staff for an annual "state of the school" presentation and town hall exchange and the associate dean for administration and finance organizes presentations each semester for staff on major school programs and activities.

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d. **Identification of school faculty who hold membership on university committees, through which faculty contribute to the activities of the university.**

Below is a partial list of school faculty and staff that represent public health on larger activities within the university.

- Women and Leadership Committee, President's Commission on the Status of Women: Kara Robinson, Associate Dean for Admission and Student Affairs
- President's Commission on the Status of Women: Carolynn Miller, Senior Business Manager, Student Services
- Faculty Advisory Board: Kathy Miner, Associate Dean for Applied Public Health; Gary Miller, Associate Dean for Research
- President's Commission on the Status of Gay, Lesbian and Transgendered Persons: Rob Stephenson, Associate Professor of Global Health

- University Senate and Faculty Council: Kathryn Yount, Associate Professor of Global Health
- President's Advisory Council: Benjamin Druss, Professor of Health Policy and Management
- Learning Outcomes Assessment Committee: Richard Levinson, Executive Associate Dean for Academic Affairs
- Compliance Committee: Richard Levinson, Executive Associate Dean for Academic Affairs
- Center for Faculty Development and Excellence (CFDE): Teaching Scholars: Nancy Thompson, Associate Professor of Behavioral Sciences and Health Education
- Provost's Faculty Advisory Committee: Carol Hogue, Professor of Epidemiology
- Instructional Technology Committee: Melissa Alperin, Chair, Career MPH Program
- Woodruff Health Sciences Center Research Advisory Committee: Gary Miller, Professor of Environmental Health; Lance Waller, Professor of Biostatistics and Bioinformatics

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e. Description of student roles in governance, including any formal student organizations, and student roles in evaluation of school and program functioning.

Student Roles in Department and School Committees
In addition to student organizations and the Student Government Association, students are represented on department and school-wide committees (except at discussions of certain personnel matters). The groups in which students have a role include the following:

- Department
  - Department faculty meetings
  - Faculty search committees
  - Department curriculum committees
  - Department PhD program committees

- School
  - Leadership Group
  - Education Committee (Teaching Subcommittee)
  - Information Technology Advisory Group
  - Honor-Conduct Code Ad Hoc Panels
  - SGA Professor of the Year Award Committee
  - Accreditation Self-Study Committee

Student Roles in Evaluation and Program Functioning
Students provide input to policies and procedures through:
- Representation on school and department committees
- Feedback on surveys (exit, alumni, etc.)
- Course evaluations
- Student organization activities

Student Organizations
- RSPH Student Government Association (SGA) and student organizations chartered through the RSPH SGA, including:
    - Association of Black Public Health Students
    - Health Organization for Latin America
    - Emory Global Health Organization
    - Georgia Public Health Association Student Chapter
    - Rollins Environmental Health Action Committee
    - Student Outreach and Response Team
    - Unite for Sight Emory Chapter
    - Rollins Environmental Health Action Committee
    - Emory Reproductive Health Association
    - Career Services Ambassadors
- Behavioral Scientists and Health Educators in Training
- Global Elimination of Maternal Mortality
- Institute for Healthcare Improvement, Atlanta Chapter
- Delta Omega Public Health Honors Society
- Human Rights Action
- Rollins Healthcare Association
- Scholars in Action

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f. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- School administration and faculty have clearly defined rights and responsibilities with regard to governance and academic policies.
- Recently adopted changes in the school's governing process have more effectively engaged faculty and students.
- Leadership in faculty governance will prepare faculty for future leadership roles in school administration and university service
- A diverse set of active student organizations contributes to strong communities sharing common interests.
- The newly formed Faculty Council, which replaced the Faculty Senate, has begun to function with interim leadership.

Lessons Learned:
- Staff members participate in university governance and service but do not currently have a formal organization representing their interests within the school.
- Departments and committees need to maintain diligence in engaging students in governance.

1.6 Resources

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

a. **A description of the budgetary and allocation processes, sufficient to understand all sources of funds that support the teaching, research and service activities of the school. This should include, as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact on the resources available to the school.**

Budget: The school's budget is developed each year by the dean in consultation with the executive associate dean for administration and finance. The budget process includes the school's three-year estimates for revenue and expenses. Plans for growth are coordinated with the school's strategic plan. The budget includes projected salary increases, faculty additions, MPH/MSPH enrollment targets, anticipated grant awards and proposed tuition changes. This budget is presented to a subset of the University Ways and Means Committee, which consists of the vice president for health affairs, the executive vice president for health affairs, the provost, and the executive vice president of finance. Following this presentation, the vice president for health affairs reviews the school's budget with the full University Ways and Means Committee. The Emory Board of Trustees approves the final budget. This annual budget review and approval process is consistent throughout all schools and units within the university.

The school has four main sources of non-sponsored revenue: tuition from MPH/MSPH enrollment, facility and administrative costs (indirect cost recovery) from extramural funding, endowment and gifts held by the school, and other Emory University support. All tuition generated by the school is returned to the school. Likewise, all indirect costs generated from sponsored projects flow directly to the school. It is Emory's policy to share indirect costs from collaborative projects that involve more than one school. The basic concept is that facility and administrative (F & A) costs follow the direct costs. For example, the school receives an appropriate portion of facility and administrative costs when public health faculty and staff are supported from a project when the principal investigator is in the school of medicine.

Although all tuition and facility and administrative cost revenue generated by the school flow to the school, the school is allocated a portion of central Emory costs to cover facilities and central administrative units. The internal cost allocation including utilities for fiscal year 2011 was $12,380,655.

Resource Allocation: Resource allocation within the school follows the assumptions and estimates of revenue and expenses approved during the budget process. Academic department budgets are based on the amount of tuition and facility and administrative cost generated by that department during the previous fiscal year. Historically, academic departments receive approximately 40% of the anticipated tuition revenue generated from courses taught by faculty in that department. Approximately 20% of the anticipated facility and administrative costs generated is returned to departments. Each academic department also receives an allocation of endowment funds to support doctoral training. These three revenue streams make up the annual departmental budget.

School infrastructure units consisting of business and finance, student services and admissions, information technology, and career services receive budgets that are negotiated annually. The entire budget must be justified each year. The total available for these support units is the amount of anticipated revenue remaining after academic departments receive annual budgets.

All departments and infrastructure units receive expenditure reports that indicate the rate of spending and projected balances/deficits. Any balances in academic departments remaining at the end of the fiscal year are retained by that department. Most departments have accumulated reserves from previous fiscal years. Any balances remaining in the infrastructure units flow into the school's reserves.

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b. **A clearly formulated school budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. This information must be presented in table format as appropriate to the school.**

The school has experienced consistent growth in the two major sources of revenue over the past five years.   Tuition revenue has increased 65%, reflecting significant increases in master's degree enrollment rather than tuition rate increases.   Facility and administrative costs increased 32%. Under the leadership of the current Dean, the school continues to operate "in the black" for the past 16 years.   Table 1.6b summarizes the school's financial status over the past 5 years.

Table 1.6b: All Sources of Funds and Expenditures by Major Category

Table 1.6.b Sources of Funds and Expenditures by Major Category, Fiscal Years 2007 to 2011					
	2007	**2008**	**2009**	**2010**	**2011**
Carryover Restricted from prior year	10,432,661	9,434,598	16,481,579	22,951,306	27,656,360
Carryover Unrestricted from prior year	5,257,961	3,478,048	3,884,445	4,531,875	4,113,933
Total Carryover	15,690,622	12,912,646	20,366,024	27,483,181	31,770,293
Sources of Funds	**2007**	**2008**	**2009**	**2010**	**2011**
Tuition and Fees	14,152,780	15,320,735	16,856,547	19,186,495	23,347,885
University Funds	1,739,214	1,820,321	1,672,529	1,015,623	980,269
Grants/Contracts (directs)	38,206,149	39,549,401	43,326,670	41,251,734	54,118,075
Grants/Contracts (non-federal prepayment carryover)	2,425,691	11,713,095	10,502,815	18,125,556	12,813,052
Indirect Cost Recovery	10,391,235	10,667,745	11,214,636	11,587,333	13,712,348
Endowment Distribution	1,652,208	1,808,794	1,920,248	1,932,570	1,712,641
Gifts	584,879	623,463	1,234,602	461,731	540,766
Cash Management	535,196	241,182	52,719	20,858	10,804
Other Revenue	2,135,789	3,227,351	3,503,346	5,344,512	3,449,428
Continuing Education	595,643	929,626	699,953	735,539	696,657
	72,418,784	85,901,712	90,984,064	99,661,950	111,381,924
Expenditures	**2007**	**2008**	**2009**	**2010**	**2011**
Faculty Salaries	15,313,704	16,977,407	18,586,531	18,673,947	19,872,635
Staff Salaries	15,511,684	17,034,847	16,462,436	16,976,481	19,279,988
Fringe Benefits	7,798,810	8,711,999	9,046,334	9,436,127	9,759,779
General Operating	23,238,470	21,783,236	25,416,824	34,595,660	45,244,365
Student Support	4,220,115	4,274,636	4,388,138	4,850,890	6,058,035
University Tax/Utilities	9,113,977	9,666,209	9,966,644	10,841,731	12,380,671
	75,196,759	78,448,335	83,866,907	95,374,837	112,595,473
Balance Restricted	9,434,598	16,481,579	22,951,306	27,656,360	26,609,756
Balance Unrestricted	3,478,048	3,884,445	4,531,875	4,113,933	3,946,989
Net Balance	12,912,646	20,366,024	27,483,181	31,770,293	30,556,745

c. If the school is a collaborative one sponsored by two or more universities, the budget statement must make clear the financial contributions of each sponsoring university to the overall school budget. This should be accompanied by a description of how tuition and other income is shared, including indirect cost returns for research generated by school of public health faculty who may have their primary appointment elsewhere.

NA

d. A concise statement or chart concerning the number (headcount) of faculty in each of the five concentration areas (and any other concentration areas identified in Criterion 2.1) employed by the school as of fall for each of the last three years. If the school is a collaborative one, sponsored by two or more institutions, the statement or chart must include the number of faculty from each of the participating institutions.

The school has a sufficient number of faculty available to support its mission. Table 1.6d indicates the head count of faculty with primary appointment in RSPH (both full-time and part-time faculty) for each of the last three years. Head counts of faculty with primary appointments have increased 5% and 9% respectively over the 3-year period.

Additionally, for each of the last three years, faculty resources have included over 400 adjunct, affiliated and secondary-appointed faculty and visiting lecturers.

Table 1.6d: Headcount of Faculty with Primary Appointment in RSPH* (Counts as of November 1 of each Year)			
Department**	2008 - 2009	2009 – 2010	2010 - 2011
	HC Faculty with Primary Appointment in RSPH	HC Faculty with Primary Appointment in RSPH	HC Faculty with Primary Appointment in RSPH
BSHE	28	30	36
BIOS	28	26	31
EH	12	16	17
EPI	31	31	31
HPM	20	20	20
GH	28	31	33
School-wide	147	154	168

Key: HC = Head Count

* The headcount (HC) includes both full-time and part-time faculty with primary appointment in the RSPH.
** The CMPH program draws on the faculty resources throughout the school, so the headcounts of faculty with primary appointments in RSPH who support the CMPH program have been included in the department to which they are appointed. For specific calculations on CMPH faulty, see Criteria 2.12.

e. **A table showing faculty, students, and student/faculty ratios, organized by department or specialty area, or other organizational unit as appropriate to the school for each of the last three years. These data must be presented in table format (see CEPH Data Template B) and include at least the following information: a) headcount of primary faculty who support the teaching programs (primary faculty are those with primary appointment in the school of public health), b) FTE conversion of faculty based on % time or % salary support devoted to the instructional programs, c) headcount of other faculty involved in the teaching programs (adjunct, part-time, secondary appointments, etc), d) FTE conversion of other faculty based on estimate of % time commitment, e) total headcount of core faculty plus other faculty, f) total FTE of core and other faculty, g) headcount of students in department or program area, h) FTE conversion of students, based on 9 or more credits per semester as full-time, i) student FTE divided by regular faculty FTE and j) student FTE divided by total faculty FTE, including other. All schools must provide data for a), b) and i) and may provide data for c), d) and j) depending on whether the school intends to include the contributions of other faculty in its FTE calculations. Note: CEPH does not specify the manner in which FTE faculty must be calculated, so the school should explain its method in a footnote to this table. In addition, FTE data in this table must match FTE data presented in 4.1.a and 4.1.b.**

Table 1.6e highlights a number of important parameters that reflect similar growth patterns seen in the 5-year financial summary. Head counts and FTE of faculty supporting the instructional program have increased 14.3% and 11.3% respectively over the 3-year period. Core faculty head counts and FTEs have each grown by 9%.

Student head counts and FTEs have increased 18.5% over the same time period.

Although student enrollment has grown significantly, the corresponding growth in faculty has resulted in a minimal increase in the student faculty ratio. Faculty searches for additional faculty members in each department along with plans to stabilize enrollment in the MPH/MSPH programs will enable the school to meet the needs of students.

Compared to other departments, the faculty/student ratio is least favorable in Epidemiology and Health Policy and Management. Since the time faculty members were counted for this report, Epidemiology appointed three new faculty members and is in the process of recruiting others. Health Policy and Management appointed two new faculty members and intends to recruit one or more additional faculty in the coming academic year.

Table 1.6e: Three Years of Faculty and Students Head Counts by Department and Resulting Ratios

2008 – 2009 Academic Year [Faculty and Student Counts as of November 1, 2008]									
	HC Core Faculty[1]	FTEF Core[2]	HC Other Faculty[3]	FTEF Other[4]	Total Faculty HC[5]	Total FTEF[6]	HC Students[7]	FTE Students[8]	SFR by Core FTEF[9]	SFR by Total FTEF[10]
BSHE	26	26.00	18	3.45	44	29.45	235	209.66	8.06	7.12
BIOS	27	27.00	2	0.35	29	27.35	53	51.00	1.89	1.86
EH	11	11.00	15	2.00	26	13.00	62	59.00	5.36	4.54
EPI	28	28.00	22	2.55	50	30.55	199	187.11	6.68	6.12
HPM	15	15.00	21	2.75	36	17.75	173	160.11	10.67	9.02
GH	23	23.00	22	3.55	45	26.55	155	152.66	6.64	5.75
School-wide	130	130	100	14.65	230	144.65	877	819.54	6.30	5.67

2009 - 2010 Academic Year [Faculty and Student Counts as of November 1, 2009]									
	HC Core Faculty[1]	FTEF Core[2]	HC Other Faculty[3]	FTEF Other[4]	Total Faculty HC[5]	Total FTEF[6]	HC Students[7]	FTE Students[8]	SFR by Core FTEF[9]	SFR by Total FTEF[10]
BSHE	29	29.00	23	4.45	52	33.45	243	216.11	7.45	6.46
BIOS	26	26.00	6	0.85	32	26.85	53	50.55	1.94	1.88
EH	15	15.00	15	2.85	30	17.85	55	52.77	3.52	2.96
EPI	28	28.00	15	1.90	43	29.90	233	220.77	7.88	7.38
HPM	14	14.00	25	4.30	39	18.30	191	175.00	12.5	9.56
GH	24	24.00	28	2.90	52	26.90	167	165.00	6.88	6.13
School-wide	136	136.00	112	17.25	248	153.25	942	880.2	6.47	5.74

2010 - 2011 Academic Year [Faculty and Student Counts as of November 1, 2010]									
	HC Core Faculty[1]	FTEF Core[2]	HC Other Faculty[3]	FTEF Other[4]	Total Faculty HC[5]	Total FTEF[6]	HC Students[7]	FTE Students[8]	SFR by Core FTEF[9]	SFR by Total FTEF[10]
BSHE	31	31.00	22	4.0	53	35.00	252	226.33	7.30	6.47
BIOS	31	31.00	9	1.00	40	32.00	64	61.55	1.99	1.92
EH	15	15.00	15	2.25	30	17.25	70	67.44	4.50	3.91
EPI	25	25.00	21	2.95	46	27.95	280	263.33	10.53	9.42
HPM	15	15.00	27	4.90	42	19.90	201	184.22	12.28	9.26
GH	25	25.00	27	3.95	52	28.95	173	171.44	6.86	5.92
School-wide	142	142.00	121	19.05	263	161.05	1040	974.31	6.86	6.05

Key:

HC = Head count

FTEF = Full-time-equivalent faculty

Core Faculty= full-time faculty who support the teaching programs. Core faculty who support the teaching program are defined as those full-time faculty (≥0.80) who teach, as well as those who mentor students or who provide academic advisement to students regarding thesis, special studies project (SSP), directed studies, dissertation or practicum.

Other Faculty = Other faculty who support the teaching program are defined as those adjunct, part-time, secondary or jointly-appointed faculty who teach a course or mentor students during the year.

SFR = Student/Faculty Ratio

1. Head count of **core faculty**
2. FTE conversion of **core faculty** (i.e., <u>full-time</u> faculty [≥ 0.80] who teach, as well as those who mentor students or provide academic advisement to students regarding thesis, SSP, directed studies, dissertation or practicum) is 1.0 FTE.
3. Head count of **other faculty** who support the teaching program
4. FTE conversion of **other faculty** based on 0.05 for each credit hour taught or 0.05 total for mentoring students (regular part-time faculty only). <u>Other Faculty</u> FTE has been assigned to the department for which they are appointed.

5. Total HC of **core faculty plus other faculty**
6. Total FTE of **core faculty plus other faculty**
7. Total HC of students (full-time + part-time)
8. FTE conversion of students (FT + PT Hours/9 HRS per FTE) = #FTEs
9. SFR by Core FTEF = FTE students/Core Faculty FTE
10. SFR by Total FTEF = FTE students/Total Faculty FTE

* The CMPH program draws on the faculty resources throughout the school, so the headcounts and FTE of core and other faculty teaching for the CMPH program have been included in the department to which they are appointed. Headcounts and FTE of CMPH students have also been assigned to the department for which their track is aligned. For specific calculations on CMPH faulty, see Criteria 2.12.

f. A concise statement or chart concerning the availability of other personnel (administration and staff).

A summary of non-faculty personnel as of November 1, 2010, is contained in Table 1.6f. Individuals working on specific research projects comprise the largest category of personnel (58% of all staff). Although these staff are hired for a limited project period, more than half (54%) of all staff have been with the school for more than 5 years indicating ongoing success with new and renewal awards.

Table 1.6f also details the number of centralized infrastructure positions that have school-wide responsibilities.

Table 1.6f: Staff FTEs by job category and department/unit as of November 1, 2010

	BSHE	BIOS	EH	EPI	HPM	HGH	School Wide/ Deans Office	Total
Assistant/Associate Director for Academic Affairs	2	1	1	1.5	1	2	1	8.5
Research Coordinator/ Research Staff	50.6	14	8.15	55.1	12	44.7	4.8	189.4
Managerial/Administration/ Finance	15.2	6.5	4.4	13.9	1.8	19.1	20.15	82.05
Information Technology	NA	NA	NA	NA	NA	NA	21.5	21.5
Student Services/Admissions	NA	NA	NA	NA	NA	NA	15	15
Career Services	NA	NA	NA	NA	NA	NA	3.5	3.5
Office Services/Facilities	NA	NA	NA	NA	NA	NA	5	5
Totals	**67.8**	**21.5**	**13.55**	**70.5**	**14.8**	**65.8**	**70.95**	**324.9**

Note: **Job Categories are grouped by function rather than specific job titles.**
   Assistant/Associate Director for Academic Affairs: The school employs staff in each academic department to assist with admissions, class scheduling and other student needs.
   Research Coordinator/Research Staff: This category includes several job titles, but all have responsibilities with sponsored research projects.
   Managerial/Administration/Finance: Departments and the dean's office employ a number of individuals to facilitate operations. Job titles include office manager, financial analyst, research administrators, and administrative assistants.
   Information Technology: All the individuals responsible for maintaining the computing environment for the school are included in this category.
   Student Services/Admissions: These individuals provide school-wide support for students including admissions, enrollment, and other student related functions.
   Career Services: This group consists of the individuals who provide school-wide support for the development of students' careers.
   Office Services/Facilities: These individuals are responsible for mail and supply deliveries, room set ups and other facility related tasks.

g. A concise statement or chart concerning amount of space available to the school by purpose (offices, classrooms, common space for student use, etc.), by program and location.

The school is located primarily in two buildings joined by a bridge connection on the first floor levels. The Grace Crum Rollins (GCR) Building opened in 1995, and the Claudia Nance Rollins (CNR) Building opened in 2010. The gross square feet by function and assignment are shown in Table 1.6g. The school has several

additional spaces leased for individual research field sites that are not included in these totals. The addition of the second building provided a significant increase in the amount of conference and classroom space, making up 25% of the total. The school maintains 18 classrooms, ranging in capacity from 12 to 126 as well as two auditoriums: the Alperin Auditorium located across Clifton Road seats 102, and the Rollins Auditorium holds 250. (Also see Classroom Technology).

The CNR building contains three floors of wet lab/bench space with adjacent offices that have allowed the school to develop a robust laboratory program of research. One of the three laboratory floors has been leased to the school of medicine for a 5-year period. At the conclusion of that time (summer of 2015), the school anticipates expanding into the additional wet lab/bench space to support the growing public health research base.

The design of the new building and the renovation of the original building, included spaces that build community throughout the school. A 110 seat café with additional outside seating is one example of that effort. The bridge connecting the two buildings is more than a pass-through; it is a place to meet, study or host receptions. All of the public spaces are designed to encourage interaction among faculty, staff and students. Floor plans of each building can be found in the Resource Room.

All students have security card access to all of the public areas of both buildings 24 hours a day and 7 days a week. Faculty and staff have additional access to office and laboratory floors.

Table 1.6g: (Space) Gross Square Feet Functionality and Assignment

(Space) Gross Square Feet Functionality and Assignment as of 2011				
	Grace Crum Rollins (GCR)	**Claudia Nance Rollins (CNR)**	**1525 Clifton**	**Total**
Conference/Classroom	31,536	52,800	1,296	**85,632**
Common Area	15,624	17,550		**33,174**
Laboratory		25,200		**25,200**
Office				
Behavioral Sciences and Health Education	28,957			**28,957**
Biostatistics and Bioinformatics	19,069			**19,069**
Environmental Health		16,800		**16,800**
Epidemiology	11,300	25,000		**36,300**
Health Policy and Management	15,538			**15,538**
Global Health		25,000		**25,000**
Student Service	4,238			**4,238**
Career Service	2,119			**2,119**
Information Technology	8,144			**8,144**
Business Office	6,356			**6,356**
Career MPH Program	2,119			**2,119**
Dean's Office		6,650		**6,650**
Totals	145,000	169,000		**315,296**

*excludes 21,000 square feet of laboratory and office space leased to the School of Medicine.

h. A concise statement or floor plan concerning laboratory space, including kind, quantity and special features or special equipment.

In 2010 Rollins School of Public Health occupied the new Claudia Nance Rollins Building, which effectively quintupled useful research facilities. Currently, RSPH investigators occupy 2 of the 3 floors of laboratory space (the third is under a 5-year lease agreement with the School of Medicine-this will end in 2015 providing room for further laboratory expansion). The laboratories on the RSPH-occupied 4th and 6th floors contain over 120 work stations (~6 per bench) several large fume hoods, instrumentation rooms, tissue culture rooms, and adequate water, gas, electrical, and other services to ensure proper laboratory practice. Notable equipment includes 5 new mass spectrometers (GC-MS/MS (2); HPLC-MS/MS (2) and ICP-MS) that enable the analysis of the entire gamut of environmental toxicants from metals to proteins. Specifically, this equipment includes an Agilent 6460 Series triple quadruple HPLC tandem mass spectrometer with an APCI/ESI interface for the analysis of polar chemicals in biological and environmental samples, an Agilent 7000 GC tandem mass spectrometer with EI and CI interfaces allowing the analysis of volatile and semi-volatile chemicals in multiple matrices, and an Agilent 7700 ICP-MS with a micronebulizer equipped with an HPLC to facilitate the analysis of metals and speciated metals in multiple matrices. All instrumentation is networked to the Rollins School of Public Health and Emory University network systems affording rapid and secure data transfer to locations within the Emory system. Investigators also maintain a Perkin-Elmer 4100ZL Zeeman-corrected atomic absorption spectrophotometer with graphite furnace and hollow cathode lamps specific for various metals; a Shimadzu High Performance Liquid Chromatograph, Model LC-10AT capable of four-mobile phase gradient elution, equipped with a SPD-10A UV/VIS detector, a RF-10A Spectrofluorometric Detector, an SIL-10 Auto Injector, and an SIL-10A System Controller; a Cahn C-33 Microbalance, as well as other balances. The school also maintains facilities including cold-room storage (-10 C), warm room facilities (37°C), isotope counting rooms, several spectrophotometers using both visible and UV light, autoclaves and automated dishwashers. Other notable items include: a ThermoCellomics ArrayScan for high content imaging, an EVOS fluorescent LED imaging system, an MBF stereological microscope system, BioRad imaging system for western blots, and a BioRad 96-well real time PCR system. Other general laboratory facilities include numerous -80 ^{o}C freezers with available space for long-term storage of samples. The school maintains a single -140 ^{o}C freezer for ultra-cold storage. The laboratory facility maintains multiple Milli-Q 18 MΩ ion-free water supplies in a common-room facility.

In addition, RSPH investigators have access to several important university cores including the Emory Biomarker Core, which includes automated DNA extraction, sequencing, and PCR. The facility can provide pyrosequencing and microarray (Illumina and Affymetrix) processing. There is also a Mass Spectrometry Core that has a Thermo Finnigan LTQ FT Ultra mass spectrometer. This instrument combines the most advanced Ion Trap and Fourier Transform Ion Cyclotron Resonance technologies into a single instrument. Three ionization sources are available; electrospray ionization (ESI), atmospheric pressure chemical ionization (APCI) and nanospray ionization.

i. A concise statement concerning the amount, location and types of computer facilities and resources for students, faculty, administration and staff.

Computing Environment
The school supports a dedicated Information Technology (IT) unit that maintains a state-of-the-art desktop and server infrastructure for more than 1600 individual PC and Macintosh computers for faculty, staff and students. The unit is responsible for ordering and maintaining iPads and smart phones and other hand-

held devices as well. IT also assists with laptops owned by students. Both buildings provide wireless connections, as well as network connectivity in offices and classrooms. The overall computer architecture has been designed to be modular and expandable to give the school the greatest computing capability, flexibility and growth potential.

Desktop and Laptop Computers
The IT department refreshes each faculty and staff computer approximately every 36 months at the conclusion of the warranty period. This lowers the cost of maintaining the equipment and ensures that computers have sufficient capacity to accommodate the most recent software requirements.

Server Environment
The school's server environment is based on a combination of UNIX and Windows 8 and can be divided into a number of service areas:

Computer Services: The core of the computer services is provided by high performance computing cluster, composed of 10 nodes with an aggregate of 108 processors and 544GB of RAM. Storage is provided through our SAN (storage area network) over a fiber channel network, with 54 terabytes of RAID-protected HIPAA-compliant storage local on the cluster.

Internet/Web Services: Email services are provided by a central campus resource through Exchange. Access is through a browser or direct interface such as Outlook. Dual web servers keep separate the secure and open access areas. The secure web areas are controlled at the Health Insurance Portability and Accountability Act (HIPAA) level.

Database Services: Numerous databases, including the SQLServer 2000-2008 and Oracle 10g, are available in both the VM Windows environment and the Linux systems. These databases service a number of applications systems to support administrative and research needs.

File and Print Services: Based on Windows NT, seven servers work together to provide file and print service to the school's desktop network. These state-of-the-art systems provide the latest in general use programs, including statistical and mathematical modeling software, database management, graphics and office support tools,

Information Security
The school's computing environment is a HIPAA-covered entity and complies with HIPAA and Emory information security and privacy policies and practices. In compliance with these policies and practices, the school is also aligned with the National Institute of Standards and Technology (NIST) special publications (800 series) for identifying, assessing and managing information security risk within a technology environment. Drawing on federal and industry best practices, the school has implemented a series of multi-layered security controls to protect the integrity, reliability and confidentiality of data.

Classroom Technology
Each classroom is equipped with a "smart podium" that provides the instructor control over all multimedia functions in the room as well as lighting, audio and window shades. Each podium houses a permanent computer and allows a laptop or iPad to be connected to the system. The external connections also allow for using older technology such as a VCR or some other type of media devices such as an Xbox that will display and be played through the room's audio/visual system. The available media include cable TV channels, a document camera and audio conferencing. An instructor is able to show two of these

media sources at once during a lecture by using a "split screen". Each classroom has a high definition camera that allows an instructor to videotape lectures, also known as classroom capture, and make them available at a later time and/or on the web. Direct telephone access to the IT help desk is integrated into the podium system for real-time assistance in the classroom.

Computer Laboratories

Two classrooms are dedicated to hands-on computer-based learning.   One is a traditional style linear table layout using PCs and a smart podium with a screen at the front of the room. This room has a capacity for 42 students. The second lab provides 56 workstations consisting of 21 inch iMac systems and smart podium located in the center of room. LCD panels display content on all four walls.   The layout of this room is conducive for group collaboration and mobile instruction since the workstations are arranged in clusters of 6 and 8 around the room.

All of the computers in the school's classroom labs have access to *RSPHDesktop*, a CITRIX-based virtual computer environment that allows students to run over 40 applications like SAS, R and EpiInfo from any computer connected to a network. Access is protected by going through the school's virtual protected network (VPN) and the system can be run from any computer platform through a browser.   This system allows students access to essential software programs anywhere on campus, at home or from international locations.

Kiosk Computing

In addition to the computer labs, students have access to 62 additional PC and Macintosh computers in an open study/lounge areas. These computers and the lab computers are connected to a printing system that allows students to print out their documents. Students can also print to these stations when they use their personal computing devices to connect to the Emory wireless network.

j.   A concise statement of library/information resources available for school use, including description of library capabilities in providing digital (electronic) content, access mechanisms and guidance in using them, and document delivery services.

The library resources of Emory University are contained in a system of nine libraries: the Robert W. Woodruff Library, the J.D. Guy Chemistry Library, the Hugh F. McMillan Law Library, Woodruff Health Science Center Library, Pitts Theology Library, Goizueta Business Library, the Marian K. Heilbrun Music and Media Library, the Manuscript, Archives and Rare Book library and Hoke O'Kelley Memorial Library at Oxford College. Total collections for the university number more than 3.6 million volumes and electronic serials exceeding 60,000. Print serials number nearly 7000.

While all Emory students and faculty have access to the entire system of libraries, public health students rely most on the Woodruff Health Science Center Library (HSCL) connected to the Grace Crum Rollins building via an underground connector. Most of the university library holdings associated with health and medical sciences are located in this location. In addition to traditional reference services, the HSCL conducts information retrieval seminars and teaches library users to perform their own online literature searches. Databases include MEDLINE, Psychinfo, and others, such as OVID full text file. The library participates in the National Network of Libraries of Medicine and obtains loans of books and photocopies of articles from health science libraries across the country. All students and faculty also have online access to the Emory University Library System's resources via the Internet. Courses may use Reserves Direct to link students to textbook chapters or eJournal articles.

k. **A concise statement describing community resources available for instruction, research and service, indicating those where formal agreements exist.**

The RSPH is located in a community that abounds with public health resources for students and faculty at all levels of practice (global to local) and most types of research (basic to applied). In the Metro Atlanta area alone, there are public health professionals who work for agencies at the federal, state, local levels of government; they work for NGOs who serve the global and local communities; they work for advocacy groups to influence public policy; they work for the health care industry; and they work within the many schools, colleges and universities. In later sections of the self-study many of these agencies are mentioned, however, to name just a few: the Centers for Disease Control and Prevention, Georgia Department of Public Health, DeKalb County Board of Health, American Cancer Society, the Carter Center, Care International, Georgia Healthcare Foundation, Georgia Public Health Association, Deloitte Consulting LLP, and the University of Georgia. In many occasions, RSPH faculty members develop collaborative research and other forms of extramural funding proposals involving these community partners. Several examples of funded proposals include Emory Public Health Training Center, Emory Prevention Research Center, Emory Preparedness and Emergency Response Research Center, and Center for AIDS Research. (For a complete list of research activities see criterion 3.1) Many of the individuals who work in these collaborating agencies are among the school's adjunct faculty. They augment the instruction program through providing guest lectures, teaching entire courses, and supervising theses.

In 2009 Emory University made the decision to retain all of the federal work study resources for the undergraduate college, so RSPH decided to self-fund its own version of work study. Without the federal restrictions, this greatly expanded the pool of agencies for MPH students to do a "Rollins Practical Experience Program". On an annual basis, approximately 325 students take advantage of this opportunity. In order to participate, in the Rollins Practical Experience Program, non-Emory affiliated agencies sign a formal agreement. However, many of these agencies can hire MPH/MSPH students with other resources that do not require formal agreements, which increases the numbers of students employed during their graduate education. While not inclusive of all student employment experiences, these agencies provide approximately 400 practicum supervisors per year. A complete list of all agencies with formal agreements is in Table 1.6.k below.

Table 1.6k: Community Agencies with Formal Agreements			
Agency	**Multiple Sites**	**Domestic**	**Global**
Advocates for Responsible Care		X	
American Cancer Society	X	X	
Ben Franklin Academy		X	
Brain and Spinal Injury Trust Fund Commission		X	
CARE International	X	X	X
CDC- Division of TB Elimination		X	
Center for Pan Asian Community Services, Inc.		X	
Centers for Disease Control and Prevention	X	X	X
Clarkston Community Center		X	
Clarkston Development Foundation		X	
Cobb- Douglas Public Health Department		X	
Community Advanced Practice Nurses		X	

Table 1.6k: Community Agencies with Formal Agreements			
Agency	Multiple Sites	Domestic	Global
Community Health Works		X	
DeKalb County Board of Health		X	
DeKalb Volunteer Lawyers Foundation		X	
Diabetes Association of Atlanta		X	
Education Development Center, Southeast Service Area		X	
Emmaus House		X	
Federal Defender Program		X	
Feminist Women's Health Center		X	
Fugees Family, Inc.		X	
Fund for Theological Education		X	
Georgia Appleseed Center for Law and Justice		X	
Georgia Campaign for Adolescent Pregnancy Prevention		X	
Georgia Senate		X	
Glenn After School Program		X	
Global Health Action		X	X
Good Samaritan Health Center		X	
Governor's Office of Planning and Budget		X	
Greater Atlanta Affiliate of Susan G. Komen for the Cure		X	
Health Promotion, Georgia Institute of Technology		X	
Hillels of Georgia	X	X	
Hispanic Health Coalition of Georgia, Inc.		X	
Kaiser Foundation Health Plan of Georgia, Inc.	X	X	
Marcus Autism Center/CHOA	X	X	
MEDICC		X	
Mental Health America of Georgia		X	
National Arthritis Foundation		X	
National Association of Chronic Disease Directors		X	
National Center for the Application of Prevention Technologies		X	
Partnership for Community Action	X	X	
Planned Parenthood Southeast, Inc.	X	X	
Prevent Blindness Georgia		X	
Safe States Alliance		X	
Side By Side Brain Injury Clubhouse		X	
Southwest GA Health District		X	
Taskforce for Global Health	X	X	
The Good Samaritan Health Center, Inc.		X	
Truancy Intervention Project Georgia		X	
U.S. Department of Health and Human Services, Atlanta Regional Office	X	X	

Additionally, the school has a number of international memoranda of understanding (MOUs) in place to facilitate both faculty and student opportunities. These are detailed in Table 1.6k.i.

Table 1.6k.i: Memorandum of Understanding (MOU) with International Agencies		
Agency	Multiple Sites	Global
Public Health Foundation of India -- India		X
The E-School of Health and Environmental Studies of Hamdan Bin (Mohammed E-University) – Dubai UAE		X
University of Copenhagen, Faculty of Health Sciences – Denmark		X
Zambia Emory HIV Research Project – Lusaka, Zambia		X
Instituto Nacional de Salud Publica, Mexico – Cuernavaca, Morelos, Mexico		X
Faculdade Da Saude e Ecologia Humana – Vespasiano, Minas Gerais, Brazil		X
The Peace Corps – Multiple host countries	X	X
Addis Ababa University – Ethiopia		X
Tbilisi State Medical University, School of Public Health Tbilisi – Republic of Georgia		X
Faculty of Medicine, Jazan University – Kingdom of Saudi Arabia		X

l.   A concise statement of the amount and source of "in-kind" academic contributions available for instruction, research and service, indicating where formal agreements exist.

As stated above, the Atlanta community has an unprecedented number of community agencies that are available to provide "in-kind" contributions to enrich the academic environment for the RSPH faculty, students, and staff. For purposes of the self-study, "in-kind" contributions are defined as activities that provide benefit but do not involve the exchange of money to the school or individuals or academic credit to the students. By way of example, new student orientation includes a day of community service called, Rollins-teer. Students, along with faculty and staff, work with local charities, such as senior citizen centers and meals on wheels, to start their public health education acting on the school's mission statement "through organized community efforts" in the Atlanta area. Similar service activities continue periodically during the academic year sponsored by many of the organizations within the Student Government Association (SGA) and Office of Leadership and Community Engaged Learning located in Student Services. In 2007, RSPH initiated a new group, Scholars in Action. This group organized all of the students who receive scholarships from the school into a student association that organizes programs for the larger RSPH student body. These activities include, at a minimum, school-wide lectures, a journal club and a book club discussion.

It is difficult to count the many community colleagues who are willing to come in as a guest lecturer for part of a class or to speak at student or faculty sponsored events held within the school. There is no system in place to compile all these activities and the "in-kind" contributions that arise from these efforts. An informal elevator survey done in the fall 2011 semester indicated that there was an average of 4.5 lectures and/or special seminars per week (the high was 11 and the low was 3). All were open to students, faculty, and staff and most involved external community lecturers or facilitators.

In addition to guest lecturing, some individuals also have primary responsibility for teaching an entire course. For a list of the faculty who participate as adjunct faculty and teach in the formal credit granting

curriculum, see Table 4.1b.

In addition to the volunteer activities that occur throughout the year, the relationships that RSPH has with its community agencies have a number of "in-kind" benefits. Within the school there are number of advisory committees associated with faculty and student activities which include members from the community.   Committees include those associated with standing academic units (e.g., Office of Career Services and Office of Continuing Profession Education), those associated with extramurally funded activities (e.g.; Emory Public Health Training Center, Emory Preparedness and Emergency Response Research Center, and Center for AIDS Research), and those that provide wise insight to the school's administration (Dean's Council, the Alumni Association Board, and CEPH Accreditation Self-Study Steering Committee). The function and make up of these groups varies depending upon the charter of each committee.

m. Identification of outcome measures by which the school may judge the adequacy of its resources, along with data regarding the school's performance against those measures for each of the last three years. At a minimum, the school must provide data on institutional expenditures per full-time-equivalent student, research dollars per full-time-equivalent faculty, and extramural funding (service or training) as a percent of the total budget.

To gauge the adequacy of its resources annually, the school uses outcome measures associated with three school wide objectives. The three objectives and associated outcome measures are identified in Table 1.6m on the next page.

Table 1.6m: Outcome measures the School uses to judge adequacy of resources				
GOAL & OBJECTIVE (from Matrix 1.2)	OUTCOME MEASURE	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011
Goal II: Objective B: Advance public health discovery through externally funded scholarship	• Total Sponsored Awards • Increase in Sponsored Awards over previous year • Total Research Awards • Per capita tenured and tenure-track • Per capita all faculty who support the research program	$60.0 m 12% $46.9 m $603,620 $364,617	$64.6 m 8% $52.9 m $639,710 $377,766	$76.1 m 18% $65.4 m $723,927 $441,157
	NIH Awards All Federal Awards	$21.7 m $43.3 m	$24.3 m $40.0 m	$31.1 m $45.0 m
Goal IV: Objective A: Maintain a faculty complement qualified to fully support the school's instructional program	Total FTE Student/FTE Faculty (who support the teaching program) ratio	5.67	5.74	6.05
	FTE Student/FTE Faculty (who support the teaching program) ratio in each department • BSHE • BIOS • EH • EPI • HPM • GH	 7.12 1.86 4.54 6.12 9.02 5.75	 6.46 1.88 2.96 7.38 9.56 6.13	 6.52 1.92 3.84 9.42 9.26 5.92
Objective B: Assure financial resources to fund innovations and financial stability for the school and to provide physical space to support the school's programs in training and research	Book value of endowment	$35.7 m	$37.2 m	$39.6 m
	Contributions to endowment	$1.8 m	$1.0 m	$1.4 m
	Institutional expenditures per FTE student	$37,898	$39,575	S42,790
	Per Capita tenured and tenure-track faculty	$603,620	$639,710	$723,927
	Per Capita all faculty who support the research program	$364,617	$377,766	$441,157
	Extramural funding (Other sponsored activity and Training) as percent of total budget	12%	12%	12%
	Facilities Classroom Gross Sq/Ft Office Gross Sq/Ft Laboratory Gross Sq/Ft	 13,509 109418 4,800	 13,509 109,418 4,800	 85632 171290 25,200
	Balanced budget	Balanced budget	Balanced budget	Balanced budget
	Amount of financial reserves	$4,531,875	$4,113,933	$3,946,989

Table 1.6m.i shows the expenditures per masters student and compares the annual cost of tuition. The school invests heavily in students and student-related systems to ensure that the 2-year program provides them with necessary competencies and experiences outside the classroom that will assist them throughout their careers.

TABLE 1.6m.i: Institutional Expenditures per Full Time Equivalent MPH/MSPH Student

1.6m.i. - Institutional Expenditures Per Full Time Equivalent MPH/MSPH Student			
	2009	**2010**	**2011**
Tuition & Fee Revenue	$16,856,547	$19,186,495	$23,347,885
University Tax & Utilities	$5,593,199	$6,083,361	$6,971,928
RSPH Infrastructure	$4,222,956	$4,713,192	$5,313,197
Endowment & Scholarships	$2,126,299	$2,155,415	$2,285,087
Student Stipend Support	$628,953	$828,110	$753,242
Rollins Practical Experience Program Support	0	$93,530	$579,256
Student Salary Support	$1,632,886	$1,773,835	$2,440,450
Total Student Support	$31,060,840	$34,833,938	$41,691,045
Student FTE	$819	$880	$974
Institutional Expense Per Student FTE	$37,900	$39,575	$42,790
Estimated Annual Tuition Based on 2 Full Time Semesters	$22,800	$24,000	$25,200
Annual Institutional Expense Over Tuition	$15,100	$15,575	$17,590

School's Endowment

The magnitude of the school's restricted and unrestricted endowment also indicates the school's overall resources and financial strength.   Table 1.6m.ii shows the school's endowment value for the past 3 years. The economic down-turn of 2008-2009 is evident in market value of the endowments. Despite continued contributions to endowment, the annual income distributed has decreased by 10% over the past three years.   Although the school is relatively young, it has 48 designated endowments that support the school's mission. None of these endowments are used to support operations; all enable the school to provide faculty and students with additional resources.

Emory University is entering the final year of a 7-year campaign to raise $2 billion. The school has met its goal of $100 million during the 6th year of the campaign, largely through foundation grant awards to faculty. The school still has a "stretch goal" of $100 million in endowment.

Table 1.6m.ii - Annual Contributions and Total Endowment Held by RSPH			
	2009	**2010**	**2011**
Cumulative Book Value	$35,719,662	$37,150,941	$39,618,412
Annual Contributions	$1,771,675	$1,015,743	$1,410,348
Total Market Value	$33,531,548	$35,580,128	$41,064,627
Annual Income Distributed	$1,920,248	$1,932,570	$1,712,640

n.   Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school has resources adequate to fulfill its mission and goals.
- The school has experienced substantial growth in its annual operating budget for each of the past 5 years due to consistent growth in tuition and facility and administrative cost recovery.
- The school has operated "in the black" for the past 16 years and continues to accumulate a modest reserve fund.
- The number of faculty has increased over each of the past 3 years, even during difficult economic challenges. The school is well on the way to achieving one of its strategic goals of 100 tenure-track and tenured faculty and maintaining a similar number of faculty of other types.
- With the addition of the Claudia Nance Rollins Building, the facilities dedicated to the school provide a high quality environment for instruction, research and service.
- Atlanta and Georgia offer a wealth of resources and opportunities for faculty and students. An active alumni base and many community partners enrich this environment.
- The school has many formal and informal relationships with other organizations and international partners. These relationships facilitate the Rollins Practical Experience Program, practica, community-engaged learning opportunities and global field experiences, in addition to providing research opportunities.
- The school is part of a vibrant university community that provides many interdisciplinary opportunities for research, instruction and service.

Lessons Learned:
- As a private university with no state support, the school must generate its own resources. This requires due diligence to be successful.
- The school depends on external sponsored projects and tuition for its annual support. While the school has demonstrated long-term financial success, a larger revenue stream from endowment would provide additional financial stability. The school must continue efforts to grow restricted and unrestricted endowments.
- The school needs to increase support and infrastructure staff to accompany the faculty growth. The school now includes a budget to support additional functions when it develops business plans for funding new faculty and includes these costs in the school's annual budget presentation to the university.
- The recent economic down-turn which decreased the market value of endowments hurt Emory schools that were dependent on endowment revenue for its operations. RSPH escaped much of the impact because it was less dependent on endowment and its strategy for the future is to use endowment revenue only to increase available resources for supporting the school's central missions of research, teaching, and service.

2.0 Instructional Programs

2.1   Master of Public Health Degree

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

The areas of knowledge basic to public health include:

Biostatistics – collection, storage, retrieval, analysis and interpretation of health data; design and analysis of health-related surveys and experiments; and concepts and practice of statistical data analysis;

Epidemiology – distributions and determinants of disease, disabilities and death in human populations; the characteristics and dynamics of human populations; and the natural history of disease and the biologic basis of health;

Environmental health sciences – environmental factors including biological, physical and chemical factors that affect the health of a community;

Health services administration – planning, organization, administration, management, evaluation and policy analysis of health and public health programs; and

Social and behavioral sciences – concepts and methods of social and behavioral sciences relevant to the identification and solution of public health problems.

Required Documentation.

a.   **An instructional matrix (see CEPH Data Template C) presenting all of the school's degree programs and areas of specialization, including undergraduate degrees, if any. If multiple areas of specialization are available within departments or academic units shown on the matrix, these should be included. The matrix should distinguish between professional and academic degrees and identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix.**

At the time of the school's last accreditation, the school offered 31 degree programs. Since then, the school has diversified its offerings by deleting some and adding others, bringing our total degree offerings to 39. The additional degree programs include two additional PhD programs, a BS/MPH program, MSPH in Health Policy and Health Services Research, MPH in applied PH informatics, MPH in applied epidemiology, MPH in Global Epidemiology, MSPH in Global Epidemiology and dual degree programs (MMSc/MPH, MDiv/MPH, MTS/MPH and DPT/MPH). These changes were made in response to an expansion in student interests and the changing field of public health.

Table 2.1a: Instructional Matrix

Table 2.1a: Instructional Matrix – Degree/Specialization		
	Academic	Professional
Masters Degrees (degree conferred) – Specialization		
Master in Public Health (MPH) – Behavioral Sciences		X
Master in Public Health (MPH) – Health Education		X
Master in Public Health (MPH) – Biostatistics		X
Master of Science in Public Health (MSPH)) – Biostatistics		X
Master of Science in Public Health (MSPH) – Public Health Informatics		X
Master in Public Health (MPH) – Environmental Health		X
Master in Public Health (MPH) – Epidemiology		X
Master of Science in Public Health (MSPH) – Epidemiology		X
Master in Public Health (MPH) – Health Policy		X
Master in Public Health (MPH) – Health Management		X
Master of Science in Public Health (MSPH) – Health Policy and Health Services Research		X
Master in Public Health (MPH) – Global Health in Infectious Diseases		X
Master in Public Health (MPH) – Global Health in Community Health and Development		X
Master in Public Health (MPH) – Global Health in Public Nutrition		X
Master in Public Health (MPH) – Global Health in Reproductive Health and Population Studies		X
Master of Science in Public Health (MSPH) – Public Nutrition		X
Career MPH (Distance-based master of public health) (degree conferred) – Specialization		
Master in Public Health (MPH) – Applied Epidemiology		X
Master in Public Health (MPH) – Applied Public Health Informatics		X
Master in Public Health (MPH) – Healthcare Outcomes		X
Master in Public Health (MPH) – Prevention Science		X
Doctoral Degrees (degree conferred) – Specialization		
Doctor of Philosophy (PhD) – Behavioral Sciences and Health Education	X	
Doctor of Philosophy (PhD) – Biostatistics	X	
Doctor of Philosophy (PhD) – Environmental Health Sciences	X	
Doctor of Philosophy (PhD) – Epidemiology	X	
Doctor of Philosophy (PhD) – Health Services Research and Health Policy	X	
Interdepartmental Joint Degrees (degree conferred) – Specialization		
Master in Public Health (MPH) – Global Environmental Health		X
Master in Public Health (MPH) – Global Epidemiology		X
Master of Science in Public Health (MSPH) – Global Epidemiology		X
Master of Science in Public Health (MSPH) – Environmental Health and Epidemiology		X
Dual Degrees (degree conferred) – Specialization		
Master of Science in Nursing/Master of Public Health (MSN/MPH)		X
Juris Doctor/Master of Public Health (JD/MPH)		X
Doctor of Medicine/Master of Public Health (MD/MPH)[1]		X
Master of Medical Science (physician assistant)/Master of Public Health (MMSc/MPH)		X
Master of Business Administration/Master of Public Health (MBA/MPH)		X

Doctor of Physical Therapy/Master of Public Health (DPT/MPH)		X
Master of Theological Studies/Master of Public Health (MTS/MPH)		X
Master of Divinity/Master of Public Health (MDiv/MPH)		X
5-Year Bachelor/Masters Joint Degrees (degree conferred) – Specialization		
Bachelor of Science/Master of Public Health (BS/MPH) – Environmental Studies and Environmental Health		X
Bachelor of Arts/Master of Science in Public Health (BA/MSPH) –Mathematics and Biostatistics and Bioinformatics		X

1. Some physicians in the MD/MPH program are enrolled in medical schools other than Emory University. Their requirements for the MPH program are identical to those of students at Emory School of Medicine.

NOTES:

Students are not recruited to enroll in Master of Science degree programs offered by the RSPH. When students in the PhD programs are unable to complete the program, departments may recommend that the Laney Graduate School award a terminal Master of Science Degree on the basis of completed work. This has happened only twice in the past three years, once in the Biostatistics doctoral program and once in the Epidemiology doctoral program.

The RSPH collaborates in teaching two graduate programs where the degree is conferred by other Emory University schools. The Master of Science in Clinical Research is administered by the School of Medicine and offered through the Laney Graduate School. The Nutrition and Health Sciences PhD program is administered by the Graduate Division of Biological and Biomedical Sciences of the School of Medicine and is offered through the Laney Graduate School.

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b. The school bulletin or other official publication, which describes all curricula offered by the school for all degree programs. If the school does not publish a bulletin or other official publication, it must provide for each degree program and area of concentration identified in the instructional matrix a printed description of the curriculum, including a list of required courses and their course descriptions.

The 2011-2012 RSPH School Catalog can be located online at http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html, found in Appendix 2.1.b, and in the resource room.

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c. **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- In addition to offering the MPH/MSPH in the five core areas of public health, the school also offers an MPH in global health.
- The development of hybrid interdepartmental programs such as Global Epidemiology has created valuable blends of expertise to meet contemporary public health challenges.
- Dual degree programs attract strong students who create a rich, inter-professional learning environment in the school.
- The school offers two bachelor/master degrees as an accelerated option for training students in public health.

- For working professionals, the school offers an MPH in a blended format utilizing face-to-face sessions and distance-based technology.

Lessons Learned:
- The growth and resulting complexity of interdepartmental, dual degree, and other programs creates challenges for coordination and administration of academic programs.
- Given the school's experience over the last seven years, the school can anticipate increased demand for training in additional specialty areas at the masters and doctoral levels.
- The school anticipates increased interest from the undergraduate college for training in population health, which may lead to additional collaborative instruction on that level.
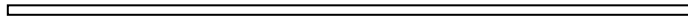
2.2   Program Length

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

Required Documentation:

a.   Definition of a credit with regard to classroom/contact hours.

The number of semester credit hours for a course must equal the number of contact hours per week. This is required by the Southern Association of Colleges and Schools (SACS), the accrediting agency for Emory University. If a course is listed as two credit hours, it must have two hours of direct contact, three credit hours requires three contact hours, etc. Labs and small group discussion meetings may count towards the contact hours, but they must be officially scheduled and recorded in OPUS (Online Pathway to University Students – Emory's online student information system).

b.   Information about the minimum degree requirements for all professional degree curricula shown in the instructional matrix. If the school or university uses a unit of academic credit or an academic term different than the standard semester or quarter, this should be explained and an equivalency presented in a table or narrative.

All MPH programs require a minimum of 42 semester credit hours. All MSPH programs require 48-50 semester credit hours.

With the revised tuition structure, which allows full-time students to take up to 18 credit hours per semester, many students are graduating with more than 42 credit hours. Students can take courses within the school and throughout the university. This new structure has also encouraged the development of certificate programs and additional concentrations throughout the school.

All dual degrees require a minimum of 42 semester hours; however, up to 10 program-approved semester credit hours taken in the non-MPH degree program may be counted as elective credits towards the MPH degree. The MPH is not awarded to dual degree students until they complete requirements for both the non-MPH and MPH degree.

c.   Information about the number of MPH degrees awarded for less than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.

No MPH degrees have been awarded for less than 42 semester credit hours.

d.   Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school requires a minimum of 42 semester hours for the MPH or MSPH degree and the average (mean) number of semester credit hours actually completed by MPH students is between 48-50 hours, suggesting that students are taking advantage of opportunities for additional training

while in residence.

Lessons Learned:
- Because students can enroll in more than the minimum 42 semester hours at no additional cost, faculty have been encouraged to develop certificate programs in specialty areas that provide an academic "minor". These "minors" often cross departmental lines, which adds to the complexity of academic offerings.

2.3   Public Health Core Knowledge

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

 Required Documentation.

a.   **Identification of the means by which the school assures that all professional degree students have a broad understanding of the areas of knowledge basic to public health. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

Core Curriculum
In support of its goal to "educate individuals for leadership in community health promotion and disease prevention in populations around the world" and the school's core competencies (see Criterion 2.6a), the RSPH assures that all MPH/MSPH degree students have a broad understanding of the principal areas of knowledge basic to public health through a series of required competency-based school core courses. The core curriculum is organized to provide students with an ecological approach to public health. The school explains this concept and rationale to students during orientation sessions.

Table 2.3a contains numbers and titles of core courses that all MPH/MSPH students must complete to achieve the specific competencies for the five core areas of public health (Behavioral Sciences and Health Education (BSHE), Biostatistics and Bioinformatics (BIOS), Environmental Health (EH), Epidemiology (EPI) and Health Policy and Management (HPM)) as well as the additional area of Global Health (GH). The new course in Global Health was added in 2010, following a review of the curriculum and related competencies.   Faculty members in departments with the appropriate expertise develop and revise the competencies, learning objectives and course content for the school core courses. The school's Education Committee, consisting of faculty members, students and staff from all academic departments, must approve any changes in the core course competencies.

Table 2.3a: School Core Courses for MPH/MSPH Students

Area of Public Health	Traditional Core Course Number and Title	CMPH Core Course Number and Title
Behavioral Sciences and Health Education	BSHE 500: Behavioral Sciences in Public Health	BSHE 504D: Social Behavior in Public Health
Biostatistics and Bioinformatics	BIOS 500 and BIOS 500L : Statistical Methods I & Statistical Methods I Lab	BIOS 503D Introduction to Biostatistics[1] **-- OR --** BIOS 516D: Applied Biostatistics I [2]
Environmental Health	EH 500: Perspectives in Environmental Health	EH 500D: Perspectives in Environmental Health
Epidemiology	EPI 504: Fundamentals of Epidemiology **-- OR --** EPI 530 and EPI 530L: Epidemiologic Methods 1 & Lab	EPI 504D: Fundamentals of Epidemiology[3] **-- OR --** AEPI 530D: Applied Epidemiology[4]
Health Policy and Management	HPM 500: Introduction to the U.S. Health Care System	HPM 500D: Introduction to the U.S. Health Care System
Global Health	GH 500: Critical Issues in Global Health	GH500D: Addressing Key Issues in Global Health

[1] BIOS 503D is the biostatistics core course taken by Applied Public Health Informatics (APHI) and Prevention Sciences (PRS) students.
[2] BIOS 516D is the biostatistics core course taken by Applied Epidemiology (AEPI) and Healthcare Outcomes (HCO) students.
[3] EPI 504D is the epidemiology core course taken by APHI and PRS students.
[4] AEPI 530D is the epidemiology core course taken by AEPI and HCO students.

Students enroll in the core courses at different points in their course of study. The assistant/associate directors for academic programs (ADAPs) in each department assist students in planning their course sequences to integrate the core courses to meet the individual student's program of study, career interest or current knowledge of a core area.

<u>Alternatives to Core Course Options by Program Area</u>
In some programs, students do not enroll in the core course offered by their area of concentration because they acquire the competencies through their entire program of study. Epidemiology offers a less advanced version of its core course (EPI 504) addressing the same competencies as its more advanced course (EPI 530) that is offered as an alternative to students.

b. **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:

- To fulfill the school's core competencies, students have to take core courses in each of the core areas of public health plus the newly required global health core course.
- Each department in the RSPH offers a core course.

Lessons Learned:

- The development of overarching core competencies for the school and introducing a new global health core course required compromise and collaboration between departments fostered by central administration.
- The establishment of overarching core competencies and revised program competencies resulted from the engagement of faculty in re-examining program goals and coordination of the curriculum.

2.4   Practical Skills

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

 Required Documentation:

a. **Description of the school's policies and procedures regarding practice experiences, including selection of sites, methods for approving preceptors, approaches for faculty supervision of students, means of evaluating practice placement sites and preceptor qualifications, and criteria for waiving the experience.**

Practicum Requirement
All MPH/MSPH students are required to complete an approved practicum or structured field experience of at least 200 hours. The practicum experience takes place in an agency, institution or community under the supervision of a preceptor (practicum supervisor) and the guidance of the student's department (faculty member and/or assistant/associate director of academic programs (ADAP)). Throughout RSPH there are numerous resources available that can that support student practica. These include endowments, extramural grants/contracts, the Rollins Practical Experience Program, and the Global Field Experiences to name just a few. These funding streams often refer to the field advisor by different names, such as preceptor, supervisor, or mentor. Regardless of the title, they all function in the same capacity and have access to the same guidance.   Some students identify field experiences through programs and projects administered by faculty in the school or funded through the school but that offer opportunities to work in external settings relevant for students' career aspirations.

The student and preceptor develop learning objectives that are reviewed by the department ADAP or faculty member and are intended to develop professional competencies in an actual public health field setting. Policies and procedures regarding the practicum requirement are included in Appendix 2.4.a.1, described in the school catalog and posted on the web at http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html. Dual-degree students and students with doctoral degrees are also required to complete the practicum.

Identifying, Selecting and Approving the Practicum Experience
The student identifies a field setting for a practicum which is reviewed and approved by faculty or the department ADAP. The student and field preceptor construct the learning objectives, which commonly address competencies that students wish to develop. Faculty members, the department ADAP or Office of Career Services may assist students in identifying appropriate practicum opportunities. As described below, the school has several mechanisms to facilitate identifying and supporting the practicum.

Students seek practicum experience in a range of field sites in the Atlanta metropolitan area, in other locations throughout the state, across the country and around the world. The school maintains memoranda of understanding with over 50 field sites in the metropolitan area but students may complete practica in other agencies and organizations with which the school has no formal memorandum of understanding. In some cases, students work in projects that are anchored in the school of public health but have field locations appropriate for the development of students' learning objectives for public health careers.

Students with opportunities for paid employment in public health settings, often through the Rollins Practical Experience Program (described below), may arrange for a period of that employment to serve as a practicum by establishing learning objectives and identifying a preceptor.

Orientation of Preceptors

All preceptors have access to a handbook describing expectations for students and how to assess student performance. The preceptor handbook is given to all supervisors and is available in hardcopy and electronically through the Career Services website and the Practicum Web Client (http://cfusion.sph.emory.edu/PracticumProposal/docs/PracticumGuide_Supv.pdf). In addition, representatives from organizations providing employment opportunities through the Rollins Practical Experience Program attend an orientation session that describes the practicum program and expectations for students. In the Emory Public Health Training Center, all preceptors are individually trained in the requirements of the summer internships and student placements. In conversations with faculty who advise students who do their practica in remote (international and domestic) settings, the Office of Career Services is developing a practicum tutorial to accompany the written handbook.

School Programs to Facilitate Practicum Placements

Although students are responsible for finding an experience that can serve as a practicum, the school manages and funds several programs to facilitate field placements.

- *Rollins Practical Experience Program*: The RSPH collaborates with 39 external organizations as well as multiple Emory-affiliated organizations to provide opportunities for training and practice in public health. Some of these larger organizations such as the Centers for Disease Control and Prevention and Emory may offer multiple field placement sites through their centers, institutes, offices and divisions. These placements are paid, with the school matching 50% of the students' salaries or stipends. Nearly all "need-eligible" students are offered a practical experience, often concurrently providing the requirements for a practicum. In 2010-11, 380 students were offered Practical Experience awards and approximately 325 actually used them.
- *Global Field Experience* (GFE): The school maintains three endowment funds that facilitate student field experiences around the world. Students are introduced to GFE opportunities at an annual meeting prior to developing their application for GFE support. To help in preparation, students who completed global field experiences in the previous year offer weekly "brown bag" presentations describing their activities. Applications for GFE support require a proposal for work at a particular site, anticipated activities, a sponsor or preceptor in the field and learning objectives. Students are selected by a faculty committee reviewing the applications. Each year, between 65 - 80 students complete a global field experience (56 in 2010-11), with many organizing their field work as a practicum.
- *Emory Public Health Training Center (Emory PHTC):* In 2010, the Health Resources and Services Administration (HRSA) awarded the RSPH with a 5-year cooperative agreement to support the Emory PHTC. One of the goals of the PHTC is to create competency-based field placement experiences for students in agencies focused on underserved populations or areas. During the summer of 2011, the Emory PHTC placed 9 students in 8 agencies. With continued HRSA funding and depending upon the nature of the work, the number of students participating in future field placements is expected to be 15 to 30 per academic year and 8-10 students in the summer months.
- *Practicum Opportunity Event:* The school hosts events at which opportunities for field experiences are described or illustrated. The annual Public Health in Action event selects 12-15 students to display posters describing their field experiences, giving awards for the best

presentation. Students and preceptors are invited to this celebration. Opportunity Fairs, periodically organized by the Office of Career Services, assemble faculty and potential preceptors from the field to describe opportunities for a practicum and/or thesis research.

- Similar events are held to describe opportunities for students to work in the field through the Global Field Experience and Rollins Practical Experience Programs.
- *Offices and Staff:* The Office of Career Services maintains a database of opportunities for field experiences, and department ADAPs and faculty assist students in finding appropriate placements. Many students are attracted to the RSPH because it promotes an "earn while you learn" approach in an environment offering numerous opportunities for gaining experience in the practice of public health.

Evaluation of Field Performance

The department ADAP, faculty advisor or Career Services help students locate possible practicum sites and preceptors. Once selected, the student creates learning objectives for the practicum experience and performs the field work. The student evaluates their practicum experience and the preceptor certifies that the practicum was successfully completed and learning objectives met. The student and preceptor evaluations are reviewed by the department ADAP, faculty advisor or Career Services who certifies that the practicum requirement was met. The Office of Career Services reviews and approves the practicum completion and assigns a grade once all components are finished. It is finally approved by the director of enrollment and financial aid services as she certifies that students have completed requirements for graduation.

ADAP or faculty help locate possible practicum sites and preceptors (or refers them to Career Services); student selects practicum site and creates learning objectives	PRACTICUM FIELD WORK	Student evaluates practicum experience	Preceptor evaluates student performance and completion	Completion certified by ADAP or faculty	Completion recorded by Career Services and certified by Enrollment and Financial Aid Services

Students in the Career MPH program prepare a poster presentation describing their practicum activities which is presented to peers and faculty during an on-campus session.

Electronic Practicum Database

To catalog student field experiences, the Office of Career Services maintains an electronic practicum database (Practicum Web Client) that includes the sites, objectives and student and preceptor's evaluations of the experience. The database is available as a reference for the school and for students who may be seeking future opportunities. The database enables the school to monitor how the practicum requirement is being met and allows electronic monitoring and approval at various steps.

Both a preceptor and student handbook are available for reference, as well. The preceptor handbook is given to all supervisors and is available in hardcopy and electronically through the Career Services website and the Practicum Web Client (http://cfusion.sph.emory.edu/PracticumProposal/docs/PracticumGuide_Supv.pdf). The student handbook is also available via the Career Services Website and the Practicum Web Client (http://cfusion.sph.emory.edu/PracticumProposal/docs/PracticumGuide_Student.pdf). These guides include detailed information about the practicum, requirements, a glossary of terms and a frequently

asked questions section. Both guides are included in appendix 2.4.a.2.

Information entered into the Practicum Web Client transmits information about the practicum experience to the department ADAP and faculty. The database is searchable and allows the school to monitor where students have served and their experiences.

b. Identification of agencies and preceptors used for practice experiences for students, by program area, for the last two academic years.

The following table (Table 2.4b) provides a list of the practicum sites and preceptors for the last two academic years. It should be noted that there is not a one-to-one relationship between the number of graduates and practica completed in any academic year. For example, students may complete a practicum in the summer following their first year or they may do more than one practicum. In addition, students often describe practicum field experiences as originating in the school, because the projects are administered by the school or funding for such experiences come through the school. The experiences, however, are normally in a field setting, practice oriented and relevant to their career aspirations.

Table 2.4b: List of Practicum Sites and Preceptors for the last two academic years

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
**List of Practicum Sites and Preceptors for 2010 – 2011** *All Preceptors mentored one student, unless otherwise noted*									
1.	Academy for Educational Development	DeNegri, Berengere						1		1
2.	Advocates for Responsible Care	Leone-Glasser, Dorothy, RN, HHC		1						1
3.	Aga Khan Foundation U.S.A	Scheid, Patricia, MS				1				1
4.	Agency for Toxic Substances and Disease Registry (ATSDR)	Forrester, Tina, PhD Abadin, Henry, MSPH			1	1				2
5.	AID Atlanta	Richard, Cicely, MSW		1						1
6.	Alere	Williams , Pamela, RN, BSN, CDE		1						1
7.	American Cancer Society	Kepner, James, PhD	1							1
8.	American Cancer Society Cancer Action Network	Doroshenk, Mary, Bachelors						1		1
9.	ArtReach	Anderson, Susan, MS		2						2
10.	Association of Occupational and Environmental Clinics	Desai, Bhairavi, BA				1				1
11.	Atlanta VA Hospital	Williams, Esther, MSHA, BSN,RN,NEA-BC							1	1
12.	Atlanta VA Medical Center	Brown, Robin Bell, Margarita, RN							1 1	2
13.	Barton Child Law and Policy Clinic	Widner,Kirsten, JD		1						1
14.	Black Lion Hospital	Foster, Stanley, MD, MPH						1		1
15.	Blacksmith Institute	Sunga-Amparo, Jenny, MA		1						1
16.	Booz Allen Hamilton	Muse, Carianne, MPH							1	1
17.	Brain and Spinal Injury Trust Fund Commission	Mautz, Kelley, MPA							1	1
18.	California Department of Public Health	Kimura, Akiko, MD					1			1
19.	Cape Flats Development Association	Van Kaam, Ferdinand, BS -- 2		2						2
20.	CARE	Lynch, Megan, MPH Beeson, Abigail, MPH – 2 Riley, Kanika, MEd, MA -2 Roy, Krist , MD Anderson, Trish, MPH-2 Ngurukie, Yvonne, BA - 2		6		2	1	1		10

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
21.	**CARE International - Kenya**	Otogo, Jude						1		1
22.	**CARE Madagascar**	McFarland, Deborah, MPH, PhD, MPH, MSc, PhD						1		1
23.	**CARE USA**	Mashni, Ayman, BS Golding, Lenette, PhD Asantewaa, L'Erin, BA Alford, Sylvia, MPH		1		1	1		1	4
24.	**CARE-Rwanda**	Stewart, Jaime, BA, MPH			1					1
25.	**Case Western Reserve University Department of Family Medicine**	Lawson, Peter, MA, MPH				1				1
26.	**Center for Global Safe Water**	Greene, Leslie, MPH Huttinger, Alexandra, MPH Dreibelbis, Robert, MPH, PhD- 2 Smith, Emily, MPH				1	1	3		5
27.	**Centers for Disease Control and Prevention (CDC)** Including: • CDC/NCHHSTP/DHAP • CDC/NCHHSTP/OD • CDC/NCZVED/DPD/Malaria	Anderton, John, PhD Ailes, Elizabeth, PhD – 2 Barfield, Wanda, MD, MPH Bern, Caryn, MD Brown, Allison, PhD Cadena, Loren, MPH – 2 Chiller, Tom, MD, MPH Cochran, Ronda, MPH Correa, Adolfo, MD, MPH Cox, Shanna, MSPH Cragan, Janet, MD Curry , Cecilia, PhD Di Meo, Nicholas, MPH Dittus, Patricia, PhD Dreibelbis, Robert, MPH, PhD - 2 Fischer, Gayle, MD Fishbein, Daniel, MD Garrett, Nedra, MS Gift, Thomas, PhD Greene, Leslie, MPH	2	16	4	11	27	18	13	91

		Haddad, Maryam, MSN, MPH, FNP							
		Haynes, Lia, PhD							
		Hess, Jeremy, MD, MPH							
		Hiland, Janice, MA							
		Hooper, Craig, PhD							
		Host, Melissa, PhD							
		Hough, Catherine, MPH							
		Huttinger, Alexandra, MPH							
		Jiles, Ruth, PhD							
		Juliao, Patricia, MPH, PhD							
		Kapil, Vikas, MD							
		Katz, Mark, MD							
		Kira Kira, Ibrahim, MD							
		Kruger, Judy, PhD							
		LeCoultre, Trent, MESEH							
		Lopes-Cardozo, Barbara, MD, MPH-2							
		Maddox, Ryan, MPH							
		Mase, Sundari, MD							
		McQuistin, Jennifer, DVM							
		Medlin, Elizabeth, MPH							
		Miller, Scott, MPA							
		Miramontes, Roque, PA-C, MPH - 2							
		Moore, Cory, MPH							
		Murphy, Trudy, MD							
		Nesheim, Steven, MD							
		O'Connor, Jean, JD, MPH							
		O'Mara, Elizabeth, PhD							
		Pearson, Michele, MD							
		Pestorius, Ted, BA							
		Quick, Rob, MD, MPH							
		Recuenco, Sergio, DrPH - 2							
		Reefhuis, Jennita, PhD							
		Rodriguez, Alfonso, PhD							
		Romaguera, Raul, DMD							
		Smith, Emily, MPH							
		Vaughan, Marla, MPH							
		Waterman, Steve, MD							
		Joshi , Heena, MSc							

		Majersky, Charlene, PhD - 3 Mehta, Prachi, DrPH Patrick, Mary, MPH Stallard, Christopher, BA, MSc(Candidate)-2 Walker, Nikki, MPH Annest, Joseph, PhD Delea, Kristin, MPH Holman, Robert, MS Mathieu, Els, MD Mazurek, Gerald, MD McAullife, Isabel, BS Rupprecht, Charles, PhD Fershteyn, Zarina, MPH Wallace, Aaron, MPH Duncan, Ted, PhD Edwards, Arlene, PhD - 2 Priya-Sneller, Vishnu, Tian, Hao, PhD Zarate-Bermudez, Max, PhD Lee, Yuek-Mui, PhD Yoder, Jonathan, MSW, MPH – 2								
28.	**Centers for Medicare and Medicaid Services**	Fellner, Bernard, MPH					1			1
29.	**Centro de Estudios Interamericanos (CEDEI)**	Weber, Michael						1		1
30.	**Chiang Mai University, Research Institute for Health Sciences**	Prapamontol, Tippawan, PhD				1				1
31.	**Children's Healthcare of Atlanta**	McKeen, Amber, BS Williams, Elizabeth, MPH		2						2
32.	**Children's Hospital of the King's Daughters Health System**	Karlowicz, Gary, MD		1						1
33.	**Colorado Department of Healthcare Policy and Finance**	Brookler, Katie, BA		1						1
34.	**Common Heritage Foundation**	Akogun, Oladele, MPH, PhD						1		1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
35.	**Consejo de Salud Rural Andino**	Chavez, Dardo, MD						1		1
36.	**Council of State and Territorial Epidemiologists**	Lemmings, Jennifer, MPH					1			1
37.	**Culture Connect, Inc.**	Nguyen, Christine, BS							1	1
38.	**CVS Caremark Corporation**	Patton, Stephanie, Pharm.D					1			1
39.	**CyberKnife Center of Miami**	Kotwica, Chrissie, RN							1	1
40.	**Deep Springs International**	Null, Clair, PhD – 2						2		2
41.	**DeKalb County Board of Health**	Cargal, Gordon, BS Jessemy-Whitney, Brandi, MPH				1		1		2
42.	**Deloitte Consulting LLP**	Collins, Darren, BA							1	1
43.	**Delta Airlines, Inc.**	Tochilin, Steve, MBA				1				1
44.	**Department of Health and Human Services**	Le-Yuen, Mai, MS		1						1
45.	**Department of Public Health, Mecklenburg County**	Laula , Priscilla, MPH			1					1
46.	**Diabetes Training and Technical Assistance Center (DTTAC)**	Lawley, Rachley, MPH		1						1
47.	**District 2 Public Health Office, Hall County Board of Health**	Parsons, Edith, PhD			1					1
48.	**Division of Public Health, Georgia**	Fuller, Tammy, BS			1					1
49.	**DTTAC**	Lawley, Rachley, MPH		1						1
50.	**Eagle Hospital Physicians, LLC**	Sanders, Richard, JD							1	1
51.	**ECO-Action**	Noibi, Yomi, PhD -- 2				2				2
52.	**ECODESS**	Levy, Karen, PhD				1				1
53.	**Educational Concepts Group LLC**	Heintz, Alison,MPH			1					1
54.	**Emory Cares 4 U**	Kaslow, Nadine, PhD		1						1
55.	**Emory Center for Injury Control**	Obolensky, Natasha, MPH - 2						1	1	2
56.	**Emory Children's Center**	Hubbard, Cynthia, BS Dr Ofori- Acquah, Slomon, MD			1				1	2

	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
57.	Emory Clinic	Chelton, Barbara, DHA Kramer, Alan, MBA Benton, Mallard, BS Malires, Nancy, Bloomquist, David, MBA Franklin, David, MS			1				5	6
58.	Emory College - Department of Health, Physical Education and Dance	Adame, Daniel, PhD - 2		2						2
59.	Emory Department of Human Genetics	Epstein, Michael, PhD	1							1
60.	Emory Global Health Institute	Mason, Suzanne, BA Duan, Yixin, MPH - 5				1	1	3	1	6
61.	Emory Healthcare	Kamke, Brooke, MPH – 3 Taylor, Williams, MHA, MBA		2					2	4
62.	Emory Latino Diabetes Education Program	Vukovljak, Lana, PhD Candidate			1					1
63.	Emory Office of Annual Giving	Adeniyi, Denise, BAbradley							1	1
64.	Emory Preparedness and Emergency Response Research Center	Alperin, Melissa, MPH Whitney, Ellen, MPH - 2			1		2			3
65.	Emory Prevention Research Center	Carvalho, Michelle, MPH Honeycutt, Sally, MPH Rodgers, Kirsten, EdD, MPH Alcantara, Iris, MPH Escoffery, Ngoc-Cam, PhD		5						5
66.	Emory Robert W. Woodruff Library	Page, Michael, BA, MA				1				1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
67.	**Emory University**	Barr, Dana, PhD Hunter, Valarie Herron, Adrienne, MS, PHD Levy, Karen, PhD Liu, Pengbo, PhD Livingston, Carolyn, PhD Null, Clair, PhD Patel, Archna, MPH, CHES- 3 Ramakrishnan, Usha, PhD Riederer, Anne, PhD Root, Christin, BS Stephenson, Robert, PhD Yu, Tianwei, PhD	1	7		3	1	4		16
68.	**Emory University Hospital**	Kamke, Brooke, MPH Watkins, Dan, PA-C, MBA		2						2
69.	**Emory University School of medicine**	Bryant, Pam, MD Lowery-North, Douglas, MD Denson, Donald, PhD Elizabeth Otwell, MSPH Fedovskiy, Kaney, MD, MPH Moffitt, Lauren, PhD Miller, Andrew, MD Tiyamiyu, Ray, MBA Drexler, Karen, MD Depadilla, Lara, PhD- 3 Herron, Adrienne, MS, PHD	1	6			1	1	4	12
70.	**Emory University Student Health and Counseling Services**	Banks, Shirley, BS, MTS Rollins, Phillis		1					1	2
71.	**Emory University/Grady Memorial Hospital**	Lim, Sam Gonzalez, Amparo, RN, CDE, FAADE			1		1			2
72.	**Emory University School of Nursing**	Dalmida, Safiya, PhD Stallcup, Elizabeth, MPH						2		2
73.	**Emory Winship Cancer Institute**	Flowers, Christopher, MD			1					1

	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
74.	Environment and Population Research Center	Hoque, Bilqis, PhD Environmental Engineering				1				1
75.	Environmental Protection Agency, Region IV	Mitchell, Ken, PhD Touart, Les, PhD				1				1
76.	Flour Fortification Initiative	Zimmerman, Sarah, BA						1		1
77.	Four Corners Family Dental	Mann, Tyler, DDS							1	1
78.	Fugees Family Inc.	Unzicker, Kristin, MPH -2 Ediger, Tracy, MD, PhD		2		1				3
79.	Fulton County Juvenile Court	West, Constance, PhD		1						1
80.	Fundacion Clinica Leticia	Gutierrez, Javier, MD Palomeque, Francisco, MPH						2		2
81.	Georgia Center for Cancer Statistics	Ward, Kevin, PhD					1			1
82.	Georgia Department of Community Health	Stein, Audrey, MPH Lense, Elizabeth, DDS, MSHA			1				1	2
83.	Georgia Association for Community Service Boards	Garrett-Gunnoe, Robyn, BS, MSA		1						1
84.	Georgia Campaign for Adolescent Pregnancy Prevention	Beale, Anna, MSW							1	1
85.	Georgia Emerging Infections Program	Farley, Monica, MD -- 2					2			2
86.	Georgia Coalition for Refugee Mental Health	Connors, Kathleen, PhD						1		1
87.	Georgia Governor's Office of Planning and Budget	Tanner, David, BA							1	1
88.	Georgia Institute of Technology - Health Services Division of Auxiliary Services	Cohen, Michelle, MPH		1						1
89.	Georgia Lions Lighthouse Foundation, INC.	Peart, Sharifa, BS, MPH Ellerbee, Tiffany, BSW		1			1			2
90.	Georgia State University	Akin, Joanna, MSPH		1						1
91.	Georgia Women for a Change	Senterfitt, Shelley, JD							1	1
92.	Georgia Obstetric and Gynecological Society	Dott, Andrew, MD, MPH						1		1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
93.	**Girls Inc. of Greater Atlanta**	Nowden, Nicole,					1			1
94.	**Global Diabetes Research Center**	Weber, Mary Beth, MS		1						1
95.	**Global diagnostics inc.**	Ogunwuyi, Sunday, MD							1	1
96.	**Global H.E.E.D**	Bandyopadhyay, Sonny, BA -- 2						2		2
97.	**Global Health Institute**	Mason, Suzanne BA							1	1
98.	**Goddard School**	Zaczek, Vanessa, BA			1					1
99.	**GOOD GANG-AN HOSPITAL**	Kim, Jongsung, MD							1	1
100.	**Government Accountability Office (GAO)**	Anderson, Bonnie, BA Bradley, Catina, BA, MHSA, PhD Finkel, Andy, MBA		1	1				1	3
101.	**Grady Hospital**	Barnes, Catherine, PhD VanDenBerg, Chad, MPH							2	2
102.	**Grady Memorial Hospital/Grady Health System**	Hankin, Abigail, MD Martin, Greg, MD Smith, Shakiyla, MPH Krenz, Julie, MD							3	3
103.	**Grupo de Información en Reproducción Elegida (GIRE)**	Paine, Jennifer, MA						1		1
104.	**Health Resources and Services Administration**	Cajina, Adan, MS Davis, Sylvia, MPH Neubert, Patrick, MPH					1	1	1	3
105.	**Health Students Taking Action Together**	Putnam, Michelle, MPH - 2						2		2
106.	**Health/ROI**	Jacobs, Robert, MA							1	1
107.	**Health4Men**	De Swardt, Glenn, BA - 2		1				1		2
108.	**HealthSTAT**	Putnam, Michelle, MPH		1						1
109.	**Healthy Mothers Healthy Babys**	Gaston, Pam, MPH -2			2					2
110.	**Hispanic Serving Health Professional Schools**	Izurieta, Ricardo, MD, DrPH						1		1
111.	**Hope Clinic of the Emory Vaccine Center**	Frew, Paula, PhD - 2 Horton, Takeia, MPH		2			2			4

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
112.	**Hospital Central de Maputo**	Lynch, Catherine, MD						1		1
113.	**Humana**	Jones, Creed, PhD							1	1
114.	**ICAN**	Verma,,Shipra, MD			1					1
115.	**ICDDR,B**	Unicomb, Leanne, PhD						1		1
116.	**ICICI Bank LTD**	Murarka, Pankaj, MCom							1	1
117.	**Indian Health Service, Office of Environmental Health and Engineering**	Dennison, Jodee, MPH						1		1
118.	**Infectious Disease, AIDS and clinical immunology research Center**	Chkhartishvili, Nikoloz, MD						1		1
119.	**Institute for Advanced Policy Solutions**	Ogden, Lydia, MA, MPP							1	1
120.	**Instituto de Investigacion Nutricional**	Lanata, Claudio, MD					1			1
121.	**Instituto Nacional de Salud Publica**	Bautista-Arredondo, Sergio, MS						1		1
122.	**International Association of National Public Health Institutes**	Hughes, James, MD			1					1
123.	**International Emerging Infections Program (IEIP), Guatemala - CDC**	Lindblade, Kim, PhD					1			1
124.	**International Livestock Research Institute**	Yount, Kathryn, PhD						1		1
125.	**International Relief and Development**	Jenkins, David, PhD						1		1
126.	**International Rescue Committee**	Kiapi, Lilian, MD, MPH						1		1
127.	**Island Food Community of Pohnpei**	Dr. Englberger. Lois, PhD						1		1
128.	**Island Journeys**	Ingraham, Shaun, MDiv, BA							1	1
129.	**Jhpiego**	Stolarsky, Galina, MPH						1		1
130.	**Johns Hopkins School of Public Health/Macha Mission Hospital**	Spurrier, John, MD							1	1
131.	**Knox County Health Department**	Buchanan, Martha, MD			1					1
132.	**Kaiser Permanente**	Marcus, Michele, PhD					1			1
133.	**Kromite, LLC**	Razavi, Homie, PhD					1			1
134.	**Leon Research Group**	Leon , Juan, PhD						1		1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
135.	**Lighthouse Trust**	Feldacker, Caryl, PhD					1			1
136.	**Living Waters for the World**	Lukins, Joanie -- 3						3		3
137.	**Maguan County Bureau of Education**	Li, Xiankui					1			1
138.	**Mamashine.net**	Curving, Michael, BA		1						1
139.	**March Of Dimes**	Spencer, Kandi, MA, LPC		1						1
140.	**Marcus Institute**	Shillingsburg, Alice, PhD		1						1
141.	**Maricopa County Department of Public Health**	Prestanski, Amy, PhD					1			1
142.	**Maternal and Newborn Health in Ethiopia Partnership**	Stephenson, Robert, PhD						1		1
143.	**Mental Health America of Georgia**	Schwartz, Sarah, MS		1						1
144.	**Millennium Challenge Corporation**	MacDonald, Gene, PhD						1		1
145.	**Ministry of Health & Welfare of Korea**	Shin, Myunghee, MD, PhD, MPH							1	1
146.	**Minority Health and Health Disparities International Research Training (MHIRT)**	Hai, Tajrina, MPH						1		1
147.	**Nasir -Ilahi Organization of America**	Ladipo, Mujidat, MSN-PH							1	1
148.	**National Center for Environmental Health (NCEH)**	Wolkin, Amy, MSPH				1				1
149.	**National Committee for Quality Assurance**	Johal, Kiran, MPH							1	1
150.	**National Health Law Program**	Perkins, Jane, JD, MPH							1	1
151.	**National Institutes of Health**	Hindorff, Lucia, PhD Wright, Linda, MD			1		1			2
152.	**National Kidney Foundation of Georgia and Alabama**	Hall, Danielle, MSW					1			1
153.	**National Park Service**	Flood, Jerome, BS Newman, Sara, DrPH				1	1			2
154.	**National Research Center of Mother and Child Health**	Akhmetzhanov, Alau							1	1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
155.	**New York City Department of Health and Mental Hygiene**	Mckelvey, Wendy, PhD Towe, Vivian, PhD Wilder, Terri, MSW	1	1			1			3
156.	**NGO "IMEDI"**	Tsurtsumia, Zoria, PhD		1						1
157.	**Oak Ridge Associated Universities**	Ellis, Elizabeth, PhD			1					1
158.	**Oakland County Health Department (OCHD)**	Renas, Richard, MPH					1			1
159.	**Ohio River Valley Water Sanitation Commission (ORSANCO)**	Schulte, Jerry, BS			1					1
160.	**One World Foundation**	Olds, Dana, MPA						1		1
161.	**Orange County Health Care Agency**	Nutter, Sandra, MPH						1		1
162.	**Papa's Pantry**	Saunders, Lynne, MS			1					1
163.	**Partners for International Development**	Wold, Judith, PhD						1		1
164.	**Partners in Hope**	Hamilton, John, BS						1		1
165.	**Partnership Health Center/ Medbank of Valdosta**	Smith, Libby, RN, BSN			1					1
166.	**Population Council**	Garcia, Sandra, ScM, ScD - 2						2		2
167.	**Porter Novelli**	Grulikowski, Kristy, ABJ, BBA		1						1
168.	**Positive Living Association of Liberia**	Ehrenkranz, Peter, MD, MPH		1						1
169.	**Prevent Blindness Georgia**	Pomeroy, Jenny, BA - 2		1			1			2
170.	**PricewaterhouseCoopers**	Hammond, Lee, MBA, MHA Showell, Courtney, MBA							2	2
171.	**Program for Appropriate Technologies in Health (PATH)**	Gordon, Scott, ScD						1		1
172.	**Project Gaia**	Stokes, Harry, MS						1		1
173.	**Project UPLIFT**	Patel, Archna, MPH, CHES		1						1
174.	**Public Health Foundation**	Moran, John, PhD			1					1
175.	**Refugee Women's Network**	Karimi, Sumaya – 2 Egner, Rebecca, MPH - 2		4						4

	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
176.	**Rollins School of Public Health**	Marcus, Michele, PhD Webb-Girard, Aimee				1		1		2
177.	**Rollins School of Public Health, Emory University**	Marcus, Michele, PhD Webb-Girard, Aimee Ali, Mohammed, MBchB, MSc Bamps, Yvan, PhD - 2 Barr, Dana, PhD Berg, Carla, PhD Bostick, Roberd, MD Cooper, Hannah, PhD Elon, Lisa, MPH Hogue, Carol, PhD James, Michelle, MPH Kramer, Michael, PhD Leon, Juan, PhD McFarland, Deborah, MPH, PhD McClellan, William, MD Narayan, K.M. Venkat, MD, PhD Null, Claire, PhD Oakley, Godfrey, MD Phillips, Victoria, DPhill Remais, Justin, PhD Rose, Eve, MPH Ryan, Barry, PhD Spaulding, Anne, MD Unzicker, Kristin, MPH, CHES – 3 Hertzberg, Vicki, PhD Kilgo, Patrick, MS Sullivan, Patrick, PhD Gaydos, Laura, PhD Er, Deja, MPH Hunter-Jones, Josalin, MPH, MSW Patel, Archana, MPH, CHES Salazar, Laura, PhD	3	11	2	8	17	3	3	47

No.	Organization	Names							Total
		Sarnat, Jeremy, ScD Swan, Deann, PhD Sterk, Claire, PhD – 2 Tcheugui, Justin, PhD Valeriano, Pia, MBA Weber, Mary Beth, MS Williams, Shauni, BA, MPHc -3 Ward, Kevin, PhD Wong, Frank, PhD								
178.	Rudd Center for Food Policy and Obesity	Andreyeva, Tania, PhD Schwartz, Marlene, PhD - 3	1				3		4
179.	Rwanda Zambia HIV Research Group	Allen, Susan, MD - 4				3		1	4
180.	Salvation Army World Service Office	Summer, Anna, MPH					1		1
181.	Samaritan's Purse	DiPasquale, John, BS					1		1
182.	SEWA Rural	Desai, Shrey, MD, MPH					1		1
183.	SK-Pharmacia	Iskakov, Nurlan, MD						1	1
184.	Society for Education, Action & Research in Community Health	Bang, Anand, MBBS, MPH					2		2
185.	South Texas Environmental Education and Research (STEERS)	Perales, Roger, MPH, RS				1			1
186.	Southeast Health District	Jones, Derek, MEd			1				1
187.	Stanford Prevention Research Center	Buman, Matt, PhD	1						1
188.	Summit Medical Group	Sayre, Warren, MD			1				1
189.	Taiwan Center for Disease Control	Juang, Jyh-Jye, MPH							
190.	Tennessee Department of Health	Moncayo, Abelardo, PhD					1		1
191.	Texas Obesity Research Center	Lee, Rebecca, PhD					1		1
192.	The Austin Project	Kutnick, Christine, BA	1						1
193.	The Carter Center	Bornemann, Thom, Ed.D - 2 Emerson, Paul, PhD King, Jonathan, MSPH					1	3	4
194.	The Emory Clinic, Inc.	Bloomquist, David, MBA Harris, Deb, MPH Wright-Bombardier, Katherine, MPH Williams, Taylor, MHA, MBA						4	4

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2010 – 2011 *All Preceptors mentored one student, unless otherwise noted*									
195.	**The Food Trust**	Deahl-Greenlaw, Amy, RN, LDN						1		1
196.	**The Methodist Hospital**	Guistwite, Monica, MPH Maldonado, Esther, BS							2	2
197.	**The Sanders Law Firm, P.C.**	Sanders, Richard, JD							1	1
198.	**Thomson Reuters**	Justice, Christopher, MS Kassed, Cheryl, PhD McAllister, Michelle, MPH					1		2	3
199.	**U.S. Food and Drug Administration**	Mettler, Erik, MPA, MPH							1	1
200.	**Un Kilo de Ayuda**	Labrada Alba Thanya Sofía						1		1
201.	**United States Department of Agriculture**	Rowe, Rose								
202.	**University of California Los Angeles School of Public Health**	Ruiz, Cristina				1				1
203.	**University of Kentucky College of Pharmacy**	Steinke, Douglas, PhD			1					1
204.	**University of Miami (FL)**	Goodman, Kenneth, PhD							1	1
205.	**University of New Mexico Institute for Public Health**	Scherzinger, Karen, MS					1			1
206.	**University of North Carolina at Chapel Hill School of Medicine**	Hinderliter, Alan, MD			1					1
207.	**University of South Florida**	Hamisu, Salihu, MD				1				1
208.	**University of the Witwatersrand**	Madhi, Shabir, PhD						1		1
209.	**University of Tsukuba**	Tokuda, Yasuharu, PhD							1	1
210.	**UPLIFT**	Thompson, Nancy, PhD		1						1
211.	**VA Connecticut Healthcare System**	Martinello, Richard, MD	1							1
212.	**Vinya Wa Aka**	Kiiti, Ndunge, PhD						1		1
213.	**Voices For Georgia's Children**	Yoon, Joann, JD		1						1
214.	**WebMD**	Greiner, Laura, BA			1					1
215.	**Westbrooke Manor Assisted Living Facility**	Guanio, Daniel, BS							1	1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
**List of Practicum Sites and Preceptors for 2010 – 2011** *All Preceptors mentored one student, unless otherwise noted*									
216.	**Winship Cancer Institute**	Smith, Renee		1						1
217.	**Woodruff Health Sciences Center Strategic Planning Office**	Capers, Shari, MBA, MHA							1	1
218.	**World Health Organization**	Bitalabeho, Florence Akiiki, MB.ChB.DTM&H, DPH, DOH, DHSM Kebede, Senait, MD, MPH		1			1			2
219.	**World Health Organization of the Western Pacific Region**	Lkhasuren, Oyuntogos, PhD				1				1
220.	**Yerkes National Primate Research Center**	Bloomsmith, Mollie, PhD							1	1
221.	**Zambia Emory HIV Research Project**	Allen, Susan, MD					1			1
	**Departmental and School-wide Totals**		11	110	37	49	90	98	87	481

	List of Practicum Sites and Preceptors for 2009 - 2010									
	All Preceptors mentored one student, unless otherwise noted									
Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
1.	Acadiana Addiction Center	Cunningham, Kerri, MSW		1						1
2.	AFIYA	Rose, Eve, MPH		1						1
3.	African Religious Health Assets Program	Germond, Paul, LLM		1						1
4.	Agency for Toxic Substances and Disease Registry (ATSDR)	Lee, Robin, MPH Neurath, Sue, PhD				2				2
5.	American Cancer Society	Ha-Iaconis, Tuyet Kajana, Kiti, MPH Virgo, Katherine, PhD, MBA		1		1	1			3
6.	American Red Cross	Hicks, Sara, MA		1						1
7.	AMREF	Yaggy , William, MFA					1			1
8.	Atlanta Allergy and Asthma Clinic, PA	Silk, Howard, MD			1					1
9.	Atlanta Legal Aid Society	Fineman-Sowers, Martha, JD							1	1
10.	Atlanta VA Hospital	Issa, Muta, MD, MBA					1			1
11.	Atlanta VA Medical Center	Compton, Bonnie, RN, BSN, MPH Kenward, Cynthia, MSHCM, FACHE Williams, Esther, MSHA, BSN,RN,NEA-BC							3	3
12.	Blacksmith Institute	Mendoza, Marlo, MDM				1				1
13.	BRAC	Jalal, Chowdhury, MD, PhD						1		1
14.	Braun Hebrew University-Hadassah School of Public Health and Community Medicine	Shtarkshall, Ronny, PhD						1		1
15.	CARE	Anderson, Trish, MPH - 3 Cottrell, Bethann, PhD - 2 Davis, Camille, MPA Golding, Lenette, PhD Riley, Kanika, MEd, MA - 2 Wright, Malaika		2		3		4		12
16.	CARE Ethiopia	Stephenson, Robert, PhD						1		1

List of Practicum Sites and Preceptors for 2010 – 2011

			BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
*All Preceptors mentored one student, unless otherwise noted*									
Number	**Organization**	**Preceptors***	**BIOS**	**BSHE**	**CMPH**	**EH**	**EPI**	**GH**	**HPM**	**Total**
17.	**CARE USA**	Beeson, Abigail, MPH Delea, Maryann, MPH Maurrisen, Stephanie, MPH				1		2		3
18.	**Catholic Relief Services**	Van de Reep, Jasper						1		1
19.	**CCHP/NCBDDD**	Correa, Adolfo, MD, PhD					1			1
20.	**Centers For Disease Control and Prevention** Including: • CDC Office in Vietnam • CDC/Georgia Poison Control Center/PERRC • CDC/NCHHSTP/DHAP • CDC/NCZVED/DPD/Malaria • CDC/OD/OSI	Brennan, Muireann, MD Cegielski, Peter, MD -3 Clark, Thomas, MD Delong, Stephanie, MPH – 2 Dreibelbis, Robert, MPH, PhD Duke, Charles, MD, MPH – 2 Fishbein, Daniel, MD Galloway, Fiona, MPH – 2 Holman, Robert, MS Jeffries, Carla, MPH Jiles, Ruth, PhD Joshi,Heena, MSc – 3 Kira, Ibrahim Kira, PhD Long, Fiona, BS MacFarlane, Kitty, CNM, MPH Maddox, Ryan, MPH, PhD Majersky, Charlene, PhD Mathieu, Els, MD Matjasko, Jennifer, PhD O'Connor, Jean, JD, MPH Rheingans, Richard, PhD Rodolfo, Valdez, PhD Roess, Amira, PhD Ryman, Tove, MPH Serbanescu, Florina, MD, MPH Skoff, Tami, MS Shapiro-Mendoza, Carrie, PhD Shaw, Frederic, JD, MD, PhD Walke, Henry, MD, MPH - 2 Wing, Jessie, MD		16	1	4	32	27	19	99

		Woodard, Tiffanee, MFT							
		Abellera, John, MPH - 2							
		Hoelscher, Mary, MS							
		Katsoyannis, Miranda, MS							
		Lin, Jin-Mann Sally, PhD							
		Smith, Kisha , MPH							
		Qualls, Noreen, PhD							
		Yoder, Jonathan, MSW, MPH							
		Abdul-Quader , Abu, PhD							
		Anderson, Lynda, PhD							
		Anido, Aimee, MS							
		Austin, Mark, MS							
		Bowen, Michael, PhD							
		Diallo, Yvette, BA							
		Prabhakaran, Doiraraj, MD							
		Goldberg, Stefan, MD - 3							
		Heiderscheidt, Paul, MD							
		Hillis, Susan, PhD							
		Limbago, Brandi, PhD							
		Lopes-Cardozo, Barbara, MD, MPH							
		MacCannell, Taranisia, PhD							
		Magri, Julie, MD							
		Mahon, Barbara, MD							
		Mai, Cara, MPH							
		McGee, Lesley, PhD							
		Mase, Sundari, MD							
		Sutton, Madeline, MD							
		Seither, Ranee, MPH							
		Stallard, Christopher, BA, MSc(Candidate)							
		Stephens, Wayne, PhD							
		Chen, Robert, MD							
		Tripp, Katie, MsC Public Health Nutrition							
		Yeung, Lorraine, MD							
		Baur, Cynthia, PhD							
		Bradshaw, Christine, DO							
		Brammer, Lynette, MPH							
		Handzel, Thomas, PhD							
		Haynes, Lia, PhD							

#	Organization	Names							Total
		Heetderks, Andrew, MPH Katz, Dolly, PhD Latham, Mike, MS Smith, Dawn, MD Wendel, Arthur, MD York, Liz, MA Nguyen, Duc, MD Chang, Arthur, MD Shi, Ya Ping, MD Brooks, John, MD Moulton, Anthony, PhD							
21.	Center for Global Safe Water	Dreibelbis, Robert, MPH, PhD Rheingans, Richard, PhD					2		2
22.	Center for Torture and Trauma Survivors	Kira, Dr. Ibrahim Kira, PhD		1					1
23.	Centro Promocional Rural Jesus Maria (CEPRUJEM)	Leon, Juan, PhD					1		1
24.	Cerana Foundation	Dhara, Sagar, PhD			1				1
25.	Children's Healthcare of Atlanta	Bromfield, Maekah, MS Fields, Kerrie, MBA Frank, Gary, MD			1	1			2
26.	Clean Air Task Force	Hill, Bruce			1				1
27.	Cobb & Douglas Public Health	Nemchik, Patsy, BS Wendholt-McDade, Cathy, BS, LD, MS		1				1	2
28.	Community Advances Practice Nurses, Inc.	Buchanan, Connie, MS, NP-C, FNP		1					1
29.	Comprehensive Rural Health Project	AROLE, SHOBHA, MBBS		1					1
30.	Contra Costa Public Health Division	Farley, Susan, RN				1			1
31.	Council of State and Territorial Epidemiologists	Lemmings, Jennifer, MPH				1			1
32.	Crown Medical Center	Vargas, Liz, MSN			1				1
33.	Dana-Farber Cancer Institute	Gray, Stacy, MD		1					1
34.	Darfur Stoves Project	Callis, Amy, BA					1		1
35.	DeKalb County Board of Health	Weisman, Janet, BA				1			1
36.	Deloitte Consulting LLP	Collins, Darren, BA						1	1

	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
Number	**Organization**	**Preceptors***	**BIOS**	**BSHE**	**CMPH**	**EH**	**EPI**	**GH**	**HPM**	**Total**
37.	**Delta Airlines, Inc.**	Tochilin, Steve, MBA - 2		1		1				2
38.	**Department of Health and Human Services**	Grant, Dwayne							1	1
39.	**Department of Resources and Economic Affairs**	George, Steven, MA						1		1
40.	**Diabetes Association of Atlanta**	Piper, Sarah, MPH		1						1
41.	**District 2 Public Health Office, Hall County Board of Health**	Durggin, Orisa, MPA			1					1
42.	**Division of Cancer Prevention and Control, NCCDPHP**	Saraiya, Mona, MD, MPH			1					1
43.	**Emory Clinic**	Abbott, Lindsay, MBA Fabien, Fred Franklin, David, MS		1					2	3
44.	**Emory College - Department of Health, Physical Education and Dance**	Unzicker, Kristin, MPH		7						7
45.	**Emory Global Health Institute**	Ali, Mohammed, MBChB, MSc- 2 Franco-Paredes, Carlos, MD	1	1				1		3
46.	**Emory Healthcare**	Cavallo, Dani, MBA Garrard, Andy, MHA Gress, Kelli, MHA Kamke, Brooke, MPH Mason, Mike, MPH, MBA							5	5
47.	**Emory Preparedness and Emergency Response Research Center**	Blake, Sarah, PhD (candidate) Whitney, Ellen, MPH					1		1	2
48.	**Emory School of Medicine**	Dunlop, Anne, MD, MPH					1			1
49.	**Emory University School of Medicine- Dept of Psychiatry**	Sivilli, Teresa, BA Otwell, Elizabeth, MSPH		2						2

			BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
Number	**Organization**	**Preceptors***	**BIOS**	**BSHE**	**CMPH**	**EH**	**EPI**	**GH**	**HPM**	**Total**
50.	**Emory University**	Abramson, Jerome, PhD Angeles-Han, Sheila, MD Gillespie, Thomas, PhD -2 Leon, Juan, PhD Liu, Pengbo, PhD Miller, Gary,PhD Teates, Kathryn, MPH Winskell, Kate, PhD Yarbrough, Dona, PhD		2	2	3	1	2		10
51.	**Emory University Department of Emergency Medicine**	Copeland, Brittney, BS Smith, Shakiyla, MPH - 2		1			1	1		3
52.	**Emory University Department of Psychiatry**	Tiamayu, Ray, MBA							1	1
53.	**Emory University Department of Psychiatry and Behavioral Science**	Kaslow, Nadine, PhD							1	1
54.	**Emory University Hospital**	Baker, Therese, MSN Fisher, Lisa, MHA Hamby, Heather, MPH							3	3
55.	**Emory University Hospital--Midtown**	Gitomer, Richard, MD			1					1
56.	**Emory University Institutional Review Board**	DeRijke, Stephanie, MSN, FNP Putney, Sarah, JD			1				1	2
57.	**Emory University Office of LGBT Life**	Shutt, Michael, PhD		1						1
58.	**Emory University School of medicine**	Bonney, Loida, MD – 2 Carlton, David, MD Herron, Adrienne, MS, PHD Miller, Dianne Osunkoya, Ojuro, MD Traynelis, Stephen, PhD		3	2		2			7
59.	**Emory University School of Medicine - Department of Neurosurgery**	Hill, Kenneth, MD					1			1
60.	**Emory University School of Medicine - Dept of Neurology**	Rye, David, MD, PhD					1			1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
61.	**Emory University School of Medicine - Division of Cardiology**	Butler, Javed, MD Vaccarino, Viola, MD, PHD			1				1	2
62.	**Emory University School of Medicine Department of Infectious Diseases**	Franco, Carlos, MD Patrick, Ericka, MSN		1				1		2
63.	**Emory University School of Medicine Department of Psychiatry and Behavioral Sciences**	Royster, Erica, MPH Woolwine, Bobbi, LCSW, CCRC		1			1			2
64.	**Emory University School Of Medicine Pathology Department**	Niyitegeka, Patricie, Wang, Yun, MD					1		1	2
65.	**Emory University School of Medicine, Division of Endocrinology, Metabolism and Lipids**	Beck, Jr., George, PhD		1						1
66.	**Emory Vaccine Center**	Boeras, Debrah, PhD					1			1
67.	**Emory Winship Cancer Institute**	Francis, Dixil, MPH							1	1
68.	**Environmental Community Action (ECO-Action)**	Noibi, Yomi, PhD				1				1
69.	**Ernst and Young Pvt. Ltd.**	Kocherry, Ranjan,							1	1
70.	**Faculdade da Saude e Ecologia Humana (FASEH)**	Ferreira, Jose, PhD					1	1		2
71.	**Feminist Women's Health Center**	Azuri, Maria, LMSW Rodriguez, Thalia, MBA, MPA		1			1			2
72.	**Foundation for Mitochondrial Medicine**	Stanley, Laura, MBA							1	1
73.	**Fugees Family Inc.**	Unzicker, Kristin, MPH – 2						2		2
74.	**Fulton County Department of Human Services**	Burns, Tekeisha, MBA Snyder, Thom, M.Div		1				1		2
75.	**Fuqua Center for Late Life Depression**	Byrd, Eve, MSN, MPH, APRN-BC						1		1
76.	**Future Foundation**	McGuire, Gavin, BA		1						1
77.	**Georgetown University Lombardi Comprehensive Cancer Center**	Selsky, Claire, MA						1		1
78.	**Georgia Campaign for Adolescent Pregnancy Prevention**	Beale, Anna, MSW		2						2

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
79.	**Georgia Department of Community Health**	Lense, Elizabeth, DDS, MSHA Park, Mahin (May), PhD Tobin-D'Angelo, Melissa, MD, MPH			1		1		1	3
80.	**Georgia Department of Human Resources**	Anyaehie, Delores, MSN, FNP							1	1
81.	**Georgia Division of Public Health**	Smith, Carol, MSHA, BBA, RDH							1	1
82.	**Georgia Emerging Infections Program**	Farley, Monica, MD				1				1
83.	**Georgia General Assembly**	Cooper, Sharon, MA, MSN							1	1
84.	**Georgia Lions Lighthouse Foundation, INC.**	Crosswhite, Shamae, MPH							1	1
85.	**Global Diabetes Research Center**	Narayan, K.M. Venkat, MD					1			1
86.	**Global Service Corps**	Roniger, Jennifer, MPH		1						1
87.	**Global Village School**	Freeman, Sarah, PhD						1		1
88.	**Grady Health System, Infectious Disease Program**	Nijem, Summer, MSN						1		1
89.	**Grady Memorial Hospital/Grady Health System**	McLeod, Jana, MD, MSc, FRCS Mercado, Flavia, MD		1					1	2
90.	**Health Students Taking Action Together**	Golabi, Mahsa, BS		1						1
91.	**Helping Hands Foreign Missions**	Whitlow, Damon						1		1
92.	**Hernando County Health Department/Nature Coast Community Health Center**	Crandall, Virginia, MPH							1	1
93.	**HHS Office for Civil Rights**	Johnson, Kenneth, JD							1	1
94.	**Hope Clinic of the Emory Vaccine Center**	Frew, Paula, PhD- 6 Horton, Takeia, MPH Parker, Kimberly, PhD		4			3	2		9
95.	**HOPE VI**	Hunter-Jones, Josalin, MPH, MSW		1						1
96.	**Hospital Albert Schweitzer Haiti**	Rawson, Ian, PhD						1		1
97.	**Hubert Department of Global Health**	Stephenson, Robert, PhD Valeriano, Pia, MBA		1					1	2
98.	**Humana**	Cohmer, Sherri, Pharm. D, MBA							1	1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
99.	**ICDDR,B**	Luby, Stephen, MD						1		1
100.	**Indian Institute of Public Health, Hyderabad**	Anchala, Ragupathy, MD				1				1
101.	**Institute for Developing Nations**	Beckwith, Colin, MSc				1				1
102.	**Institute For Developing Nations Emory University**	Beckwith, Colin, MSc - 2		1					1	2
103.	**International Center for Diarrheal Disease Research**	Unicomb, Leanne, PhD						1		1
104.	**International Justice Mission**	Luis, Gabriela, BA							1	1
105.	**International Relief and Development**	Miralles, Maria, MA, PhD				1				1
106.	**International Rescue Committee**	Affrah, Zeinab Barnett, Chip, MPH Masila, Lizzy		1				1	1	3
107.	**International Water Management Institute**	Keraita, Bernard, PhD					2	1		3
108.	**Island Food Community of Pohnpei**	Englberger, Lois, PhD						2		2
109.	**Korea Centers for Disease Control and Prevention**	Yoo, Jung Sik, MD					1			1
110.	**Korea Occupational Safety and Health Agency**	Chung, YunKyung, MD	1							1
111.	**Madras Diabetes Research Foundation**	Harish, Ranjani, MD -2						2		2
112.	**Maine Center for Disease Control**	Sites, Anne, MPH - 2					2			2
113.	**McKing Consulting Corporation**	Jackson, Jack, BA			1					1
114.	**Medd Tekk**	Gordon, Anthony, MBA							1	1
115.	**Ministry of Healthcare and Nutrition**	Kottegoda, Eeshara, MSc, MBBS, MD						1		1
116.	**Morehouse School of Medicine**	Quarells, Rakale, MD		1						1
117.	**Mt. Sinai School of Medicine, Department of Community and Preventative Medicine**	McGowan, Brian, MBA							1	1
118.	**N.C. Division of Public Health**	Proescholdbell, Scott, MPH			1					1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
119.	**National AIDS Education & Services for Minorities**	Daniels, Keith		1						1
120.	**National Alliance of State & Territorial AIDS Directors - Global Program**	May, Randy, DDS						1		1
121.	**National Center for Environmental Health**	Lewis, Lauren, MD, MPH					1			1
122.	**National Multiple Sclerosis Society, Georgia Chapter**	LaMotte, Hilary, MSW		1						1
123.	**New York City Department of Health and Mental Hygiene**	Olson, Carolyn, MPH					1			1
124.	**Noblis**	Rak, Andrew, Master of Toxicology				1				1
125.	**Noguchi Memorial Institute for Medical Research College of Health Sciences University of Ghana**	Ampofo, William, PhD						1		1
126.	**Oakhurst Community Garden Project**	Zaro-Moore, Kyla, Masters in Agriculture		1						1
127.	**Old Mutare Hospital**	Winskell, Kate, PhD						1		1
128.	**Optimal Body Chiropractic LLC**	Goldenberg, Lee, DC							1	1
129.	**P4 for Women**	Braxton, Nikia, MPH		1						1
130.	**Piedmont Hospital**	Sellers, Marty, MD				1				1
131.	**Planned Parenthood of Georgia**	Doyle, Dominique, MA, MHA		1						1
132.	**Population Council**	Apicella, Louis, MSPH						1		1
133.	**Population Services International**	Rakhmatova, Khursheda, MD		1						1
134.	**Positive Impact, Inc**	Davies, Gwen, PhD							1	1
135.	**Project Medishare**	Phanord, Germanite, MD		1						1
136.	**Refugee Women's Network**	Karimi, Sumaya, MD Wren, McKenzie, MPH Egner, Rebecca, MPH -3		3				2		5
137.	**RISEAL**	McFarland, Deborah, MPH, PhD							1	1
138.	**Rock the Earth**	Ross, Marc, JD				1				1

		List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*								
Number	**Organization**	**Preceptors***	**BIOS**	**BSHE**	**CMPH**	**EH**	**EPI**	**GH**	**HPM**	**Total**
139.	**Rollins School of Public Health, Emory University**	Berg, Carla, PhD		15	2	1	6	6	6	36
		Cunningham, Solveig, PhD								
		Grimes, Tanisha, PhD								
		Graham, Tracie, MPH								
		Hall, Dawn, MPH								
		Leon, Juan, PhD - 5								
		Marcus, Michele, PhD								
		McFarland, Deborah, MPH, PhD								
		Murray, Colleen, DrPH								
		Patel, Archana, MPH, CHES								
		Smith, Iris , PhD								
		Spaulding, Anne, MD								
		Thompson, Nancy, PhD								
		Gazmararian, Julie, PhD								
		Oakley, Godfrey, MD								
		Terry, Paul, PhD								
		Whitney, Ellen, MPH								
		Latham, Tina, MPH								
		Druss, Benjamin, MD								
		Gaydos, Laura, PhD								
		Von Esenwein, Silke, PhD - 3								
		Yang, Zhou, PhD								
		Alexander, Martha, MA, MPH								
		Berg, Carla, PhD								
		Cooper, Hannah, PhD								
		Wong, Frank, PhD								
		Shima, Naomi, MPH								
		Del Rio, Carlos, MD								
		Williams, Shauni,BA, MPHc								
135.	**Rowe Charities**	Auma, Bernard, MA						1		1
136.	**Rwanda Zambia HIV Research Group**	Allen, Susan, MD - 4					3	3		6
		Kalowa, James, MD								
		Karita, Etienne, MD								
137.	**Sacred Space, Inc.**	Moe, Cynthia, MFA			1					1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
138.	**Salvation Army World Service Office**	Summer, Anna, MPH					1			1
139.	**Salvation Army World Service Organization**	Davis, Sara, MPH Summer, Anna, MPH						2		2
140.	**San Antonio Metropolitan Health District**	Alsip, Byan, MD, MPH							1	1
141.	**Save the Children**	Abbott, Dan, MPH Hassen, Suadik, BA						2		2
142.	**SCA Inc.**	Lee, David							1	1
143.	**School of Medicine, Dept of Epidemiology and Biostatistics**	Cavaljuga, Semra, MD, MS			1					1
144.	**Seoul NOW Hospital**	Jung, Seung Ho, MD							1	1
145.	**Serve HAITI**	McGriff, Joanne, MD, MPH							1	1
146.	**Sewanee Outreach**	Galbreath, Angela, BA						1		1
147.	**Sichuan Provincial Center for Disease Control and Prevention**	Dongchuan, Qiu, PhD - 2 Xiao, Ning, MD, PhD				3				3
148.	**South African Centre for Epidemiological Modeling and Analysis**	Hargrove, John, PhD			1					1
149.	**South Georgia Farm worker Health Project**	Guest, Jodie, PhD		1						1
150.	**Southern California Kaiser Permanente Medical Group**	Vargas, Liz, MSN			1					1
151.	**SRA, International**	Mosley, Angela, MPH		1						1
152.	**Sullivan University College of Pharmacy**	Nash, James, Pharm D			1					1
153.	**SunTrust Robinson Humphrey**	Wood, Chris, MBA							1	1
154.	**Tebelopele VCT**	Raats, Jan, PhD					1			1
155.	**The Carter Center**	Bomberger, Denise, BA Bornemann, Thom, Ed.D - 2		1					2	3
156.	**The Center for Pan Asian Community Services (CPACS)**	Chung, Marianne, MPH		1						1

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
157.	The Emory Clinic, Inc.	Abbott, Lindsay, MBA - 2 Alligood, Ruth, BS Douis, Alison, MHA Mott, Michelle, MSN, RN, FNP							5	5
158.	**The Joint Commission**	Carr, Maureen, MBA							1	1
159.	**The Leukemia & Lymphoma Society Georgia Chapter**	Benson, Rachel, MSWc		1						1
160.	**The Methodist Hospital**	Liebl, Michael, MD, PhrmD							1	1
161.	**The Reproductive and Child Health Alliance of Cambodia**	Ketsana, Chan, PhD						1		1
162.	**Tobacco Technical Assistance Consortium (TTAC)**	Lawley, Rachel, MPH -3		3						3
163.	**U.S. Naval Medical Research Detachment - Lima, Peru**	Montgomery, Joel, PhD						1		1
164.	**United Nations Population Fund Afghanistan (UNFPA Afghanistan)**	Shinwari, Mohammad Ibrahim, MD, eMBA							1	1
165.	**United States Agency for International Development**	Mielke, Erin, MPH Truong, Jenny, Masters in Health Sciences						2		2
166.	**United States Environmental Protection Agency Region 4**	Abbott, David , BS Fehn, Curt, MBA				1			1	2
167.	**United States Public Health Service, Indian Health Service**	Tonrey, Lisa, MD, PhrmD			1					1
168.	**University of Arkansas for Medical Sciences - Northwest Campus**	Kohler, Peter, MD			1					1
169.	**Urban Initiative for Reproductive Health**	Yamarick, Janelle, BA							1	1
170.	**Verisk Health, Inc.**	Gunn, Nathan, MD			1					1
171.	**Vertex Pharmaceuticals**	Winnen, Amy, MBA							1	1
172.	**Veteran's Health Administration**	Titus, Tisha, MD		1						1
173.	**William Beaumont Hospital**	Barnes, Michael, MD			1					1
174.	**Women and Children's Center**	Carnevale, Claudine, MS Hogue, Carol, PhD		1					1	2

Number	Organization	Preceptors*	BIOS	BSHE	CMPH	EH	EPI	GH	HPM	Total
	List of Practicum Sites and Preceptors for 2009 - 2010 *All Preceptors mentored one student, unless otherwise noted*									
175.	**World Health Organization**	Saxena, Abha, MD Seita, Akihiro, MD Sobel, Howard, MD Thomas, Lisa, MD						3	1	4
176.	**Xi'an Hospital, China**	Tian, Puxun, MD					1			1
177.	**Zenith Medicare ltd (a subsidiary of zenith bank Plc**	Kanu, Onyekachi, MBBS							1	1
	Departmental and School-wide Totals		2	111	31	32	85	103	95	459

The following table (Table 2.4b.i.) summarizes the average number of hours committed to practica for students in each department for each of the last three academic years.

Table 2.4b.i: Average Hours of Practicum by Department and School for the Past Three Years

Department	2008 – 2009 Average Hours of Practicum	2009 – 2010 Average Hours of Practicum	2010 - 2011 Average Hours of Practicum
Behavioral Sciences and Health Education	417	364	296
Biostatistics and Bioinformatics	351	356	365
Environmental and Occupational Health	462	581	366
Epidemiology	411	400	561
Global Health	497	374	370
Health Policy and Management	342	366	317
Career MPH	461	259	210
Total Average Hours of Practicum	**424**	**381**	**371**

c. Data on the number of students receiving a waiver of the practice experience for each of the last three years.

Table 2.4c illustrates the number of students receiving a waiver of the practice experience for each of the last three academic years.

TABLE 2.4c: Number of Students Receiving Waivers of the Practicum

Academic Year	Number of Students Receiving A Waiver*
2008 – 2009	4
2009 – 2010	1
2010 – 2011	2

*   These waivers were given to students finishing their degrees under earlier practicum policies that were changed in 2005. These students were granted waivers based upon the following two criteria: (1) their admitted into the MPH program prior to the time when the no-waiver policy was implemented and (2) extensive public health practice experience prior to admission into the MPH degree program. These seven files are available in the resource room for review.

d. Data on the number of preventive medicine, occupational medicine, aerospace medicine, and public health and general preventive medicine residents completing the academic program for each of the last three years, along with information on their practicum rotations.

Table 2.4d illustrates the number of preventive medicine residents (the only such residents) completing the academic program for each of the last three years along with their practicum rotations.

TABLE 2.4d: Number of Preventive Medicine Residents Completing Academic Program

Academic Year	Number of Preventive Medicine Residents Completing the Academic Program	Information on their Practicum Rotation
2008 – 2009	1	Conduct epidemiological field investigation and report findings in writing and oral presentation; conduct program evaluation; work collaboratively on assessment and/or service delivery with state or local health department
2009 – 2010	0	NA
2010 – 2011	0	NA

e. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- All professional degree students develop and demonstrate skills through a practice experience.
- Students have ample opportunities for developing competence through public health field experiences around the world.
- The metropolitan Atlanta area includes agencies welcoming students for practicum experiences in public health.
- The school provides considerable support for facilitating field practicum experiences including paid employment.
- The practicum database provides RSPH with important information about the breadth and depth of community contributions made by our students. It also provides the school with useful data to make improvements in the practicum processes.

Lessons Learned:
- From an analysis of the practicum database, the school has learned that it needs to develop online practicum supervisor training. In addition, the school decided to update informational materials for students, site supervisors, faculty and staff to better outline the practicum process, define the roles and expectations of key parties (students, advisors and supervisors) and to clarify terminology. These updated materials are available on the Office of Career Services website.
- Most students exceed the minimum requirement of 200 hours for the practicum.
- There are specific situations where the most suitable practicum experience for a student's career will be within a unit associated the university, such as the Biostatistics Consulting Center, Woodruff Health Sciences Center and the Emory Ethics Center.
- Students often describe practicum field experiences as taking place within the RSPH when they are working on school-based projects in the community under field preceptors. Because of this confusion, community engagement may be under-reported and this should be corrected in the data and reporting systems.
- While the practicum database collects important information, there are improvements needed

in the structure and elements of the database in order to completely document the practicum experience.

- As the school grows in size and complexity, it needs to form a strategic advisory group to provide advice regarding efficient and effective practicum-related processes and software and to improve communication among all parties related to the practicum program.

2.5   Culminating Experience

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

Required Documentation:

a. **Identification of the culminating experience required for each degree program. If this is common across the school's professional degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

Each of the school's professional master's degree programs requires that students complete a culminating experience in addition to the practicum.

A culminating experience in the RSPH requires students to integrate and apply the competencies they developed during the course of their study, practica and related field experiences. The culminating experience may take on different forms, including original research that tests a hypothesis generated by a public health problem; evaluate a program or intervention to promote health or determine the etiology of a problem; investigating and proposing a solution or way to improve a public health problem; or describe an approach to solving a public health problem that they put into practice in the field and evaluate its impact. Students receive semester hours of credit for the academic work required in the culminating experience; the number of semester hours varies by department.

All students produce a written product based on their culminating experience and make an oral or poster presentation. Depending on the departmental requirements, there is usually a written product is one of the three following types:
- **Thesis:** This is research that may be written in the form of a narrative with chapters or journal article.   A faculty advisor and committee of faculty supervise the work.
- **Special Study Project:** This project usually is initiated by an organization to serve its needs and results in a tangible, substantial product such as a curriculum, strategic plan, agency or program evaluation or case book. A faculty member and a field preceptor supervise the student's work.
- **Capstone Seminar Project:** This is an analysis of a public health problem and an intervention or strategy for improvement, description of attempt to improve a public health condition in the field and evaluation of this effort or similar project. A faculty member who leads the capstone seminar supervises the project. Capstone seminars also bring in relevant curricula that pertain to the topics of focus for the capstone projects.

In January 2012, the Department of Biostatistics and Bioinformatics established a service to provide basic biostatistical support for MPH students in their culminating experience (e.g., thesis or capstone project). Three "thesis consultants" (graduate students or research staff) provide office hours for questions and one of our instructional faculty oversees the process to triage projects to the appropriate consultant. Students utilizing the service are required to work closely with their academic advisor (as well as the thesis consultant) in order to focus hypotheses, identify appropriate data sources (existing or to be collected) and interpret results.

Theses are placed in the Emory University Library. In 2011, the library created an electronic system for archiving dissertations and theses. An Emory Electronic Theses and Dissertations (**ETD**) Repository enables the school to search theses based on authors, topics, key words and collaborating agencies and programs.

The culminating experiences required for each department and the product of those experiences are described in the following table:

TABLE 2.5a: Culminating Experiences and Products required by each Department

Department	Culminating Experience	Product
Behavioral Sciences and Health Education (BSHE)	Thesis or Capstone Seminar Project*	Paper & Oral Presentation
Biostatistics and Bioinformatics (BIOS)	Thesis	Paper & Oral Presentation
Environmental Health (EH)	Thesis or Capstone Seminar Project	Paper & Poster Presentation
Epidemiology (EPI)	Thesis	Paper & Oral Presentation
Global Health (GH)	Thesis, Special Study Project	Paper & Poster Presentation
Health Policy and Management (HPM)	Capstone Seminar Project (for MPH)* Thesis (for MSPH)	Paper& Oral Presentation
Career MPH (CMPH)	Thesis**	Paper & Oral Presentation

*   The BSHE Department organizes capstone seminars around topics of broad interest; HPM offers capstone seminars based on the students concentration in either Policy or Management; EH offers a general capstone seminar.
**   Prior to spring 2011, CMPH called the culminating experience a Special Studies Project (SSP).

To illustrate the prevalence of varying culminating experiences in the school, the following table presents the number of students who chose each option in 2010-2011.

TABLE 2.5a.i: Number of Students Completing each Type of Culminating Experience during 2010-2011

Department	Capstone	Thesis	Special Study Project
BSHE	52	30	---
BIOS	---	10	---
EH	12	19	---
EPI	---	90	---
GH	---	79	8
HPM	75	5	---
CMPH	---	25	---

Each department provides policies, procedures and guidelines for completing theses, SSPs and capstone projects through the department's student manual and/or website. A faculty member and committee of one or two additional members supervise the thesis or SSP. The supervisory faculty member or the committee approves a student's proposal, supervises the research and approves the final document. Copies of each department's student manual are on file in the resource room.

Representative theses, SSPs and capstone projects are available in the resource room, and all theses are available online from the Emory University Library at http://health.library.emory.edu/communities/public-health. Syllabi for the Capstone Seminars are available in the resource room.

b. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- All students complete a faculty-guided culminating experience that integrates program competencies.
- All students produce a written product and prepare and present a poster or oral report.
- Since 2011, all theses are stored on the Emory Electronic Theses and Dissertations (ETD) Repository.

Lessons Learned:
- Students are given an opportunity to perform research or practice-related projects depending upon their career aspirations.
- The school has standardized the definitions of culminating experiences (thesis, special study project and capstone) across departments and all students are required to produce a written project and oral/poster presentation of their work under faculty guidance.

2.6   Required Competencies

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of educational programs.

Required Documentation:

a. **Identification of schoolwide core public health competencies that all MPH or equivalent professional degree students are expected to achieve through their courses of study.**

Core Competencies

Core course competencies are proposed by the faculty of each department representing the expertise in that area. The Education Committee, made up of faculty from all departments, assesses the content and provides oversight to assure integration.   The core curriculum is intended to provide an ecological approach to public health. The core curriculum provides students with an exposure to the social, economic, cultural and environmental conditions that influence human health.   The most recent review resulted in the current core competencies.

As adopted in 2011, upon graduation, a student with an MPH/MSPH should be able to achieve the following core competencies:

- Use analytic reasoning and quantitative methods to address questions in public health and population-based research
- Describe environmental conditions, including biological, physical and chemical factors, that affect the health of individuals, communities and populations
- Describe the use of epidemiology methods to study the etiology and control of disease and injury in populations
- Discuss how health policy and finance affect the delivery, quality, access and costs of health care for individuals, communities and populations
- Describe behavioral, social and cultural factors that contribute to the health and well-being of individuals, communities and populations
- Assess global forces that influence the health of culturally diverse populations around the world
- Apply skills and knowledge in public health setting(s) through planned and supervised experience(s) related to professional career objectives
- Integrate the broad base of public health knowledge and skills acquired from coursework, practicum and other learning activities into a culminating experience (thesis, special studies project, capstone)
- Develop the capacity for lifelong learning in public health
- Apply principles of ethical conduct to public health practice

The resource room includes course syllabi. The resource room also includes a description of the process by which faculty and academic staff were trained to develop and advance competency based instruction.

b. A matrix that identifies the learning experiences by which the core public health competencies are met. If this is common across the school, a single matrix will suffice. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.

The following matrix (Table 2.6b) indicates the courses providing learning experiences which contribute to the core public health competencies listed in section 2.6a. Core course instructors, department chairs and faculty overseeing the MPH/MSPH curriculum in each department were consulted in assessing the articulation of learning objectives with core competencies.

Table 2.6b: Learning Experiences by which the RSPH Core Public Health Competencies are Met

RSPH Core Public Health Competencies	Learning Experiences							
	BSHE 500: Behavioral Sciences in Public Health [CMPH - BSHE 504D: Social Behavior in Public Health]	BIOS 500 &500 L: Statistical Methods I & Lab [CMPH - BIOS 503D: Introduction to Biostatistics[1]] [CMPH - BIOS 516D: Applied Biostatistics I[2]]	EH 500: Perspectives in Environmental Health [CMPH - EH 500D: Perspectives in Environmental Health]	EPI 504: Fundamentals of Epidemiology[3] EPI 530: Epidemiologic Methods I[4] [CMPH - EPI 504D: Fundamentals of Epidemiology[5]] [CMPH - AEPI 530D: Applied Epidemiology[6]]	HPM 500: Introduction to the U.S. Health Care System [CMPH - HPM 500D: Introduction to the U.S. Health Care System]	GH500: Critical Issues in Global Health [CMPH - GH500D: Addressing Key Issues in Global Health]	Practicum	Culminating Experience (Thesis, SSP, Capstone)
Use analytic reasoning and quantitative methods to address questions in public health and population-based research		X		X				
Describe environmental conditions, including biological, physical and chemical factors, which affect the health of individuals, communities and populations			X					
Describe the use of epidemiology methods to study the etiology and control of disease and injury in populations				X				
Discuss how health policy and finance affects the delivery, quality, access and costs of health care for individuals, communities and populations					X			
Describe behavioral, social and cultural factors that contribute to the health and well-being of individuals, communities and populations	X					X		
Assess global forces that influence the health of culturally diverse populations around the world	X					X		
Apply skills and knowledge in public health setting(s) through planned and supervised experience(s) related to professional career objectives							X	
Integrate the broad base of public health knowledge and skills acquired from coursework, practicum and other learning activities into a culminating experience (thesis, Special Studies Project, Capstone)								X
Develop the capacity for lifelong learning in public health	X	X	X	X	X	X	X	X
Apply principles of ethical conduct to public health practice	X	X	X	X	X	X	X	X

[1] BIOS 503D is the biostatistics core course taken by APHI and PRS students

[2] BIOS 516D is the biostatistics core course taken by AEPI and HCO students.

[3] EPI 504 is the epidemiology core course taken by HPM and BSHE students.

[4] EPI 530 is the epidemiology core course taken by EPI, GH, BIOS and EH students.

[5] EPI 504D is the epidemiology core course taken by APHI and PRS students.

[6] AEPI 530D is the epidemiology core course taken by AEPI and HCO students.

c. Identification of a set of competencies for each program of study, major or specialization, depending on the terminology used by the school, identified in the instructional matrix, including professional and academic degree curricula.

Competencies for Degree Programs by Department

Competencies for each of the degrees and specialized certificates are organized by departments and listed in the following instructional matrices (see Table 2.6c).   During the self-study process of 2010 - 2011, departments assessed and updated their competencies by referencing existing relevant competency sets developed by academic and practice communities, how the knowledge base of their fields have changed as well as information derived from student exit surveys and course evaluations. The Career MPH Program followed a similar process for the review and modification of its competencies, which are organized into matrices by its four tracks.

The learning objectives of required courses for each program are tracked to the program competencies. The tracking was completed by faculty and academic staff. Competencies for students in joint degree programs are identical to those enrolled exclusively in the MPH/MSPH programs.

Certificate Programs
The RSPH offers 3 certificate programs that serve as "minor" concentrations of study and that combine several disciplines. Open to students in any departmental program, they are administratively housed in a department. These certificates require 5-8 credit hours in course work and require that the practicum and/or culminating experience addresses the certificate topic. The courses are counted as electives in the MPH/MSPH program. The certificate programs are:

- *Global Complex Humanitarian Emergencies* (administered by Global Health)
- *Mental Health* (administered by Health Policy and Management)
- *Socio-Contextual Determinants of Health* (administered by Behavioral Sciences and Health Education)

A fourth certificate program, *Public Health Informatics*, is administered by the Department of Biostatistics and Bioinformatics. This program requires 20 semester hours of study and enrolls students who are not currently pursuing an MPH or MSPH degree. The program is designed to offer specialty training to those who may already have training in public health and may be practicing in the field. These certificate programs are described in the matrix of competencies in table 2.6b.

Table 2.6c: Degree and Specialization Competency Sets

Department of Behavioral Science and Health Education

The Department of Behavioral Science and Health Education (BSHE) offers an MPH degree with a concentration in: Behavioral Science (BS), Health Education (HE) or both; a PhD in Behavioral Sciences and Health Education, and a Certificate in Social-Contextual Determinants of Health. The faculty, in collaboration with the BSHE ADAPs, completed the matrices and used the competencies from the Council on Linkages, ASPH and National Commission on Health Education Credentialing as their primary references.

MPH with a Concentration in Behavioral Sciences Competencies	BSHE 516: Behavioral Epidemiology	BSHE 520: Theory in Behavioral Science and Health Education	BSHE 530: Conduct of Evaluation Research	BSHE 532: Quantitative Analysis	BSHE 535: Macrosocial Determinants of Health	BSHE 538: Qualitative Research Methods	BSHE 540: Behavioral Research Methods	BSHE 544: Survey Methods	BSHE 550R: Theory-Driven Research in the Behavioral Sciences	BSHE 554: Social Marketing in Public Health	BSHE 555: Public Health Communication	BSHE 560R: Behavioral Sciences and Health Education Seminar	BSHE 578: Ethics in Public Health	BSHE 579: Applied History of Public Health	BSHE 585: Introduction to Public Mental Health	BSHE 589: Mental Illness, Public Health, and American Culture in Interdisciplinary Perspective	BSHE 590 Capstone: Health Disparities	BSHE 590 Capstone: Program Planning	BSHE 591W Thesis Mentorship	BSHE 599R: Thesis	BSHE 595: Practicum
Communicate in both written and oral format with public health programs, community-based organizations and others involved in improving the public's health		X					X				X		X		X	X	X	X	X	X	X
Conduct public health practices including needs assessment and/or evaluation of public health programs			X				X											X	X	X	
Design observational and intervention studies in critical public health areas using quantitative and qualitative research methods	X			X		X	X	X											X	X	
Apply social and behavioral science theory in public health research and practice	X	X			X				X	X	X							X	X	X	
Implement research protocols and programs employing behavioral sciences		X										X							X	X	X
Evaluate research theory and findings in a manner that effectively informs public health policy and programs						X					X								X	X	
Disseminate research theory and findings in a manner that effectively informs public health policy and programs						X					X								X	X	
Promote the adoption and integration of ethical behavioral science research methods and findings into a unified public health practice			X		X	X							X	X	X	X		X			
Conduct original research on the social determinants of health risks					X									X				X		X	X
Provide critical analysis of lessons to be learned from the past and present													X	X		X		X		X	X

Table 2.6c: Degree and Specialization Competency Sets

MPH with a Concentration in Health Education Competencies	BSHE 520: Theory in Behavioral Science and Health Education	BSHE 522: Principles in Curriculum and Instruction in Health Education	BSHE 524: Community Needs Assessment	BSHE 530: Conduct of Evaluation Research	BSHE 532: Quantitative Analysis	BSHE 535: Macrosocial Determinants of Health	BSHE 540: Behavioral Research Methods	BSHE 544: Survey Methods	BSHE 554: Social Marketing in Public Health	BSHE 555: Public Health Communication	BSHE 560R: Grant Writing	BSHE 560R: Health Literacy	BSHE 578: Ethics in Public Health	BSHE 579: Applied History of Public Health	BSHE 585: Introduction to Public Mental Health	BSHE 589: Mental Illness, Public Health, and American Culture in Interdisciplinary Perspective	BSHE 590 Capstone: Health Disparities	BSHE 590 Capstone: Program Planning	BSHE 591W Thesis Mentorship	BSHE 599R: Thesis	BSHE 595: Practicum
Communicate both in written and oral format, with public health programs, community based organizations and others involved in improving the public's health	X		X			X	X		X	X			X	X	X	X	X	X	X	X	X
Conduct public health practices including needs assessment and/or evaluations of public health programs.			X	X			X										X	X	X		
Assess individual and community needs for health education		X	X																X	X	
Plan effective health education programs	X	X									X										
Implement effective health education programs	X	X					X			X	X	X									X
Evaluate the effectiveness of health education programs	X			X			X				X								X	X	
Coordinate the provision of health education services	X						X														X
Act as a resource person in health education	X	X					X					X		X							
Communicate health education needs, concerns and resources	X						X			X		X							X	X	
Apply appropriate research principles and methods in health education	X			X			X					X		X		X		X	X	X	
Advance the profession of public health	X						X						X	X		X		X	X	X	
Provide critical analysis of lessons to be learned from the past and present													X	X		X			X	X	

Table 2.6c: Degree and Specialization Competency Sets

PhD in Behavioral Sciences and Health Education Competencies	Learning Experiences								
	BSHE 721: Applying Theory to Public Health Research and Practice	BSHE 725: Health Promotion Interventions	BSHE 728: Advanced Research Design and Analysis	BSHE 760R: Proposal Develop. I	BSHE 760R: Proposal Develop. II	BSHE 760R: Grant Writing Research Ethics	Graduate Research Assistantship	Comprehensive Exam	Dissertation
Draw from major social and behavioral science theories to apply appropriate empirical methods and analysis in research practices	X	X	X	X	X		X	X	X
Design health promotion interventions		X		X	X		X	X	X
Implement health promotion interventions		X			X		X	X	X
Evaluate health promotion interventions		X			X		X	X	X
Disseminate knowledge to students and the larger scientific community		X	X	X	X	X	X		X
Translate knowledge derived from research to promote public health through policy making				X	X		X		

Certificate in the Social-Contextual Determinants of Health Competencies	Learning Experiences		
	BSHE 535: Macrosocial Determinants of Health	BSHE 560R: Behavioral Sciences and Health Education Seminar	EPI 591S: Social Epidemiology
Identify the causes of social and behavioral factors that affect health of individuals and populations	X	X	X
Describe the role of social and community factors in both the onset and solution of public health problems	X	X	X
Describe the merits of social and behavioral science interventions and policies	X	X	X
Specify multiple targets and levels of intervention for social and behavioral science programs and policies	X	X	X
Critically evaluate the epidemiologic literature			X
Formulate a testable hypothesis to determine an appropriate study design concerning the etiology and control of health problems			X

Table 2.6c: Degree and Specialization Competency Sets

Department of Biostatistics and Bioinformatics
The Department of Biostatistics and Bioinformatics offers the following degrees: MPH and a MSPH degree in Biostatistics and an MSPH in Public Health Informatics. In addition, in collaboration with Emory College, the department offers a 5-year BA/MSPH degree. Competencies for the MSPH portion of the BA/MSPH are the same as the MSPH in Biostatistics. The department also offers a PhD in Biostatistics as well as a certificate in public health informatics. The faculty in the Biostatistics and Bioinformatics department reviewed the current syllabi with RSPH, departmental, and course competencies. The original competencies were developed after a department-wide review of RSPH competencies, and ASPH biostatistics and public health informatics. From the RSPH and departmental lists, faculty selected the most appropriate competencies for each course. These were reviewed by the chair of the Departmental Curriculum Committee, the assistant director of academic programs, and the department chair for consistency and relevance.

MPH in Biostatistics Competencies	Learning Experiences								
	BIOS 506: Biostatistical Methods I	BIOS 510: Statistical Theory I	BIOS 531: SAS/S-Plus	BIOS 507: Applied Linear Models	BIOS 511: Statistical Inference I	BIOS 508: Introduction to Categorical Data Analysis	BIOS 522: Survival Analysis Methods	BIOS 595: Practicum	BIOS 599R: Thesis
Assist medical and public health professionals in determining an appropriate research design for their research study	X			X				X	X
Estimate the appropriate sample size for conducting the study	X	X		X		X	X	X	X
Perform the appropriate statistical analyses of study data	X	X		X	X	X	X	X	X
Use computer statistical software for both data management and data analyses	X		X	X	X	X	X	X	X
Assist in the interpretation of study results	X	X		X	X			X	X
Interpret statistical results of biomedical studies effectively	X	X	X	X	X	X	X	X	X
Adhere to guidelines of responsible research	X			X		X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Biostatistics Competencies	Learning Experiences								
	BIOS 506: Biostatistical Methods I	BIOS 510: Statistical Theory I	BIOS 531: SAS/S-Plus	BIOS 507: Applied Linear Models	BIOS 511: Statistical Inference I	BIOS 508: Introduction to Categorical Data	BIOS 522: Survival Analysis Methods	BIOS 595: Practicum	BIOS 599R: Thesis
Assist medical and public health professionals in determining an appropriate research design for their research study	X			X				X	X
Estimate the appropriate sample size for conducting the study	X			X		X	X	X	X
Perform the appropriate statistical analyses of study data	X	X		X		X	X	X	X
Use computer statistical software for both data management and data analyses	X		X	X		X	X	X	X
Assist in the interpretation of study results	X	X		X	X	X	X	X	X
Interpret statistical results of biomedical studies effectively	X	X	X	X	X	X	X	X	X
Adhere to guidelines of responsible research	X			X		X	X	X	X
Assist in the development of new statistical methods as needed to address public health or medical problems					X	X	X		
Apply existing statistical theory and methods to a broad range of medical or public health problems	X		X	X	X	X	X	X	X
Conduct appropriate statistical analyses for a broad range of applications	X	X	X	X	X	X	X	X	X
Communicate the results of statistical studies both orally and in writing to senior statisticians and other investigators	X	X	X	X	X	X		X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Public Health Informatics Competencies	Learning Experiences								
	INFO 500: Principles of Public Health Informatics I	INFO 510: Database Management Systems	INFO 501: Principles of Public Health Informatics II	INFO 591J: Artificial Intelligence	INFO 511: Advanced Database Management	INFO 503: Management Information Principles	INFO 530: Geographic Information Systems (GIS)	INFO 595: Practicum	INFO 599R : Special Study Project
Develop public health information systems as needed to support public health efforts	X		X			X		X	X
Develop information systems that meet the needs of public health practice	X	X	X	X	X	X	X	X	X
Assist in the development and adoption of appropriate information technology in public health	X	X	X		X	X		X	X
Choose appropriate software allowing for the interface of data entry and statistical analysis software		X			X	X	X	X	X
Apply appropriate statistical methods in the analysis of public health information	X		X	X			X	X	X
Assess individual data elements	X	X	X	X	X	X	X	X	X
Display data results effectively and appropriately Adhere to guidelines of responsible research	X		X			X		X	X

Table 2.6c: Degree and Specialization Competency Sets

PhD in Biostatistics Competencies	Learning Experiences										
	BIOS 508: Introduction to Categorical Data	BIOS 522: Survival Analysis Methods	BIOS 707: Advanced Linear Models	BIOS 708: Advanced Methods of Categorical Data	BIOS 709: Generalized Liner Models	BIOS 710: Probability Theory II	BIOS 711: Statistical Inference II	BIOS 745R: Biostatistical Consulting	BIOS 777: How to Teach Biostatistics	BIOS 795R: Pre-Candidacy Research	BIOS 799R: Dissertation
Assist medical and public health professionals in determining an appropriate research design for their research study	X	X	X	X	X			X		X	X
Estimate the appropriate sample size for conducting the study	X	X	X	X	X		X	X		X	X
Perform the appropriate statistical analyses of study data	X	X	X	X	X	X	X	X		X	X
Use computer statistical software for both data management and data analyses	X	X	X	X	X	X	X	X		X	X
Assist in the interpretation of study results	X	X	X	X	X		X	X		X	X
Interpret statistical results of biomedical studies effectively	X	X	X	X	X			X		X	X
Adhere to guidelines of responsible research	X	X	X	X	X			X		X	X
Assist in the development of new statistical methods as needed to address public health or medical problems			X	X	X	X	X			X	X
Apply existing statistical theory and methods to a broad range of medical or public health problems	X	X	X	X	X			X		X	X
Conduct appropriate statistical analyses for a broad range of applications	X	X	X	X	X			X		X	X
Communicate the results of statistical studies both orally and in writing to senior statisticians and other investigators	X	X	X	X	X			X		X	X
Conduct independent research										X	X
Develop novel methodology in statistics										X	X
Apply new and existing statistical theory and methods as needed to address public health or medical problems	X	X	X	X	X		X	X		X	X
Develop new statistical theory and methods to address a broad range of complex medical or public health problems			X	X	X	X	X			X	X
Conduct complex statistical analyses for a broad range of applications			X	X	X		X	X		X	X
Teach statistical theory or methodology at all levels			X	X	X			X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

Certificate in Public Health Informatics Competencies	Learning Experiences						
	INFO 500: Principles of Public Health Informatics I	**INFO 501:** Principles of Public Health Informatics II	**INFO 503:** Management Information Principles	**INFO 510:** Database Management Systems	**INFO 511:** Advanced Database Management	**INFO 591J:** Artificial Intelligence	**INFO 530:** Geographic Information Systems (GIS)
Define public health information systems as needed to support public health efforts	X	X	X				X
Assist in the development and adoption of appropriate information technology in public health			X	X	X	X	X
Choose appropriate software allowing for the interface of data entry and statistical analysis software	X	X	X	X	X	X	X
Apply appropriate statistical methods in the analysis of public health information	X	x					X
Interpret data results effectively and appropriately adhere to guidelines of responsible research	X	X	X	X	X	X	X

Department of Environmental Health
The Environmental Health Department offers the following degrees: MPH degree in Environmental Health, a joint MSPH degree with Epidemiology, a joint MPH degree with Global Health, a 5-year BS/MPH degree and a PhD in Environmental Health Sciences. Competencies for the MPH portion of the BS/MPH are the same as the MPH in Environmental Health. The faculty referenced the ASPH environmental competencies and current environmental health scientific literature for guidance their competency development process. (Note for joint degrees: Faculty from each department, including the college, are involved in the curriculum development decisions.)

MPH in Environmental Health Competencies	Learning Experiences										
	EH 520: Human Toxicology	EH 524: Risk Assessment I	EH 530/ EPI 530: Environmental Epidemiology	EH 540: Environmental Hazards I	EH 550: Environmental and Occupational Health Practice	EH 570: Environmental and Occupational Health Policy	EHS 747/EPI 747: Methods in Occupational and Environmental Epidemiology	EH 596: Research Design in Environmental Health	GH 555: Proposal Development	EH 595: Practicum	EH 599R/EH 594: Culminating Experience (Thesis, Capstone)
Describe major environmental risks to human health ranging from the local to global scale				X							
Assess the sources and movement of contaminants through the environment				X							
Characterize the magnitude, frequency and duration of environmental exposures				X							
Apply the principles of toxicology to assess health effects of environmental exposures	X										
Apply the principles of epidemiology to assess health effects of environmental exposures			X				X				
Evaluate the risks posed by environmental hazards using risk assessment methods		X									
Explain major policy issues in environmental health including regulatory frameworks					X	X					
Design environmental health programs, policies, interventions and/or research intended to improve the health of individuals, communities, and populations								X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

MPH in Global Environmental Health *(offered by EH and GH Depts.)* **Competencies**	Learning Experiences									
	GH 501: Policies in Global Health	**EH 520:** Human Toxicology	**EH 530:** Environmental Epidemiology	**EH 540:** Environmental Hazards I	**EH 546:** Environmental Microbiology: Control of Food and Waterborne Disease	**EHS 747/EPI 747:** Methods in Occupational and Environmental Epidemiology	**EH 596:** Research Design in Environmental Health	**GH 555:** Proposal Development	**EH 595:** Practicum	**EH 599R/EH 594:** Culminating Experience (Thesis, Capstone)
Describe major environmental risks to human health ranging from the local to global scale				X						
Assess the sources and movement of contaminants through the environment				X						
Characterize the magnitude, frequency and duration of environmental exposures				X						
Apply the principles of epidemiology to assess health effects of environmental exposures			X			X				
Apply the principles of toxicology to assess health effects of environmental exposures		X								
Appraise the environmental, behavioral and social factors that contribute to the emergence, re-emergence and persistence of infectious diseases					X					
Assess the major forces that influence the health of populations around the world.	X									
Critique major global priorities and the reasons for their prioritization	X									
Design environmental health programs, policies, interventions and/or research intended to improve the health of individuals, communities, and populations							X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Environmental Health and Epidemiology (offered by EH and EPI Depts.) Competencies	Learning Experiences														
	BIOS 500: Statistical Methods I	EH 520: Human Toxicology	EPI 530: Epidemiologic Methods I	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods II	EPI 538: Advanced Epidemiologic Methods I	EH 540: Environmental Hazards I	EH 570: Environmental and Occupational Health Policy	EH 580: Injury Prevention and Control	EPI 591U: Applications of Epidemiologic Concepts	BIOS 591P: Statistical Methods II	EPI 740: Epidemiologic Modeling	EHS 747/EPI 747: Methods in Occupational and Environmental Epidemiology	EH 595: Practicum	EH 599R/EPI 599R: Thesis
Describe major environmental risks to human health ranging from the local to global scale							X			X					
Characterize the magnitude, frequency and duration of environmental exposures							X								
Explain major policy issues in environmental health including regulatory frameworks								X							
Describe the role of toxicology in evaluating health effects of environmental exposures		X													
Develop an epidemiologic study to address an environmental health question			X		X					X			X		X
Conduct basic epidemiologic analysis of environmental health data	X		X	X	X	X				X	X	X	X		X
Interpret results of epidemiologic studies of an environmental health question						X				X			X		X
Synthesize epidemiologic literature on an environmental health question													X	X	X

Table 2.6c: Degree and Specialization Competency Sets

PhD in Environmental Health Sciences (University-wide program, based in Environmental Health) Competencies	Learning Experiences												
	EHS 780R: Research Design and Management	EHS 710: Advanced Laboratory and Field Methods in Exposure Science	EHS 715: Advanced Environmental Epidemiology	EHS 740: Molecular Toxicology	EHS 750: Public Health Ecology	EHS 760: Advanced Risk Assessment	EHS 721: Problem Based Learning in Environmental Health Sciences	EHS 722: Problem Based Learning in Environmental Health Sciences	EHS 600R: Research Rotations	EHS 796R: Research Credit	TATT 600: TATTO Summer Course	TATT 605/610: Teaching Assistantship/Associateship	EHS 797R: Dissertation
Utilize advanced methods in exposure assessment of environmental contaminants		X					X	X	X	X			
Interpret advanced methods in exposure assessment of environmental contaminants		X					X	X	X	X			
Describe mechanisms of toxic action and how physiological and other factors can modify effects of environmental toxicants				X			X	X	X	X			
Advanced epidemiological methods to examine associations between environmental factors and disease			X				X	X	X	X			
Use risk assessment tools to describe the risks associated with various environmental exposures						X	X	X	X	X			
Design novel research projects to examine key challenges in field	X		X			X	X	X	X	X			X
Identify the ethical issues involved in the responsible conduct of research	X		X		X	X	X	X	X	X			X
Teach graduate course content in environmental health sciences	X						X	X	X	X	X	X	X
Disseminate research findings in multiple formats	X						X	X	X				X

Table 2.6c: Degree and Specialization Competency Sets

Department of Epidemiology
The Epidemiology Department offers the following degrees: MPH, MSPH and PhD degrees in Epidemiology. The department collaborates with Hubert Department of Global Health to offer two joint degrees: MSPH in Global Epidemiology and MPH in Global Epidemiology. The epidemiology departmental curriculum committee reviewed the ASPH, COL, and epidemiology competencies used by other schools of public health. The curriculum committee developed a competency listing and circulated the list to the core faculty instructors to identify the competencies relevant to their courses. The curriculum committee summarized this input and circulated the competencies to the larger departmental faculty for further suggestions to include in the final matrices. (Note: The department discussions include faculty representation from epidemiology and global health.)

MPH in Epidemiology Competencies	EPI 530: Epidemiologic Methods 1	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods 2	EPI 591U: Applications of Epidemiologic Concepts	EPI 740: Epidemiologic Modeling	EPI 538: Advanced Epidemiologic Methods I	EPI 750: Analysis of Longitudinal Data	BIOS 500: Statistical Methods I	BIOS 591P: Statistical Methods II	GH 501: Policies in Global Health	EPI 599R: Thesis	EPI 595R: Practicum
Describe public health problems in terms of magnitude, time, place, person and their associated risk factors	X		X	X				X	X		X	X
Identify principles and limitations of epidemiologic screening programs	X		X					X				X
Identify major epidemiologic problems of importance	X									X	X	X
Identify key sources of data for epidemiologic purposes	X		X	X				X			X	X
Formulate a research question	X	X		X		X		X	X		X	X
Differentiate between descriptive and analytic epidemiologic methods	X	X	X	X		X		X	X		X	X
Critically evaluate the strengths and weaknesses of different study designs with respect to a given research question	X		X	X		X		X	X		X	X
Calculate basic epidemiologic measures	X	X	X	X		X		X	X		X	X
Implement methods of data cleaning and documentation for epidemiologic data sets		X	X	X				X	X		X	X
Conduct basic epidemiologic analyses using linear, logistic, Cox, and Poisson regression		X	X	X	X		X		X		X	X
Fit Epidemiologic Models			X		X	X	X		X		X	X
Interpret epidemiologic results in a causal framework	X	X		X	X	X	X				X	X
Evaluate the strengths and weaknesses of the epidemiologic literature	X		X	X		X	X				X	X
Utilize information technology tools and statistical programming packages in preparing scientific reports		X	X	X	X		X	X	X		X	X
Communicate epidemiologic information in a scientific report		X		X					X		X	X
Recognize potential ethical and legal issues in epidemiologic studies	X			X							X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Epidemiology Competencies	Learning Experiences											
	EPI 530: Epidemiologic Methods 1	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods 2	EPI 591U: Applications of Epidemiologic Concepts	EPI 740: Epidemiologic Modeling	EPI 538: Advanced Epidemiologic Methods I	EPI 750: Analysis of Longitudinal Data	BIOS 500: Statistical Methods I	BIOS 591P: Statistical Methods II	GH 501: Policies in Global Health	EPI 599R: Thesis	EPI 595R: Practicum
Describe public health problems in terms of magnitude, time, place, person and their associated risk factors	X		X	X				X	X		X	X
Identify principles and limitations of epidemiologic screening programs	X		X					X				X
Identify major epidemiologic problems of importance	X									X	X	X
Identify key sources of data for epidemiologic purposes	X		X	X				X			X	X
Formulate a research question	X	X		X		X		X	X		X	X
Differentiate between descriptive and analytic epidemiologic methods	X	X	X	X		X		X	X		X	X
Critically evaluate the strengths and weaknesses of different study designs with respect to a given research question	X		X	X		X		X	X		X	X
Calculate basic epidemiologic measures	X	X	X	X		X		X	X		X	X
Implement methods of data cleaning and documentation for epidemiologic data sets		X	X	X				X	X		X	X
Conduct basic epidemiologic analyses using linear, logistic, Cox and Poisson regression		X	X	X	X		X		X		X	X
Fit Epidemiologic Models			X		X	X	X		X		X	X
Interpret epidemiologic results in a causal framework	X	X		X	X	X	X				X	X
Implement causal models and use different case-control designs in appropriate fashion						X						
Evaluate the strengths and weaknesses of the epidemiologic literature	X		X	X		X		X			X	X
Utilize information technology tools and statistical programming packages in preparing scientific reports		X	X	X	X		X	X	X		X	X
Communicate epidemiologic information in a scientific report		X		X					X		X	X
Recognize potential ethical and legal issues in epidemiologic studies	X			X							X	X

Table 2.6c: Degree and Specialization Competency Sets

MPH in Global Epidemiology Competencies	EPI 530: Epidemiologic Methods 1	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods 2	EPI 591U: Applications of Epidemiologic Concepts	EPI 740: Epidemiologic Modeling	EPI 538: Advanced Epidemiologic Methods I	EPI 750: Analysis of Longitudinal Data	BIOS 500: Statistical Methods I	BIOS 591P: Statistical Methods II	GH 501: Policies in Global Health	GH 599R/GH 598R: Thesis	GH 595R: Practicum
Describe public health problems in terms of magnitude, time, place, person and their associated risk factors	X		X	X				X	X		X	X
Identify principles and limitations of epidemiologic screening programs	X		X					X				X
Identify major epidemiologic problems of importance	X									X	X	X
Describe major global health priorities and the reasons for their prioritization										X	X	X
Identify key sources of data for epidemiologic purposes	X		X	X				X			X	X
Formulate a research question	X	X		X		X		X	X		X	X
Differentiate between descriptive and analytic epidemiologic methods	X	X	X	X		X		X	X		X	X
Critically evaluate the strengths and weaknesses of different study designs with respect to a given research question	X		X	X		X		X	X		X	X
Calculate basic epidemiologic measures	X	X	X	X		X		X	X		X	X
Implement methods of data cleaning and documentation for epidemiologic data sets		X	X	X				X	X		X	X
Conduct basic epidemiologic analyses using linear, logistic, Cox and Poisson regression		X	X	X	X		X		X		X	X
Fit epidemiologic models		X	X	X	X		X		X			X
Interpret epidemiologic results in a causal framework	X	X		X	X	X	X				X	X
Evaluate the strengths and weaknesses of the epidemiologic literature	X		X	X		X		X			X	X
Utilize information technology tools and statistical programming packages in preparing scientific reports		X	X	X	X		X	X	X	X	X	X
Communicate epidemiologic information in a scientific report		X		X					X		X	X
Recognize potential ethical and legal issues in epidemiologic studies	X			X							X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Global Epidemiology Competencies	EPI 530: Epidemiologic Methods 1	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods 2	EPI 591U: Applications of Epidemiologic Concepts	EPI 740: Epidemiologic Modeling	EPI 538: Advanced Epidemiologic Methods I	EPI 750: Analysis of Longitudinal Data	BIOS 500: Statistical Methods I	BIOS 591P: Statistical Methods II	GH 501: Policies in Global Health	GH 599R/GH 598R: Thesis	GH 595R: Practicum
Describe public health problems in terms of magnitude, time, place, person and their associated risk factors	X		X	X				X	X		X	X
Identify principles and limitations of epidemiologic screening programs	X		X					X				X
Identify major epidemiologic problems of importance	X									X	X	X
Describe major global health priorities and the reasons for their prioritization										X	X	X
Identify key sources of data for epidemiologic purposes	X		X	X				X			X	X
Formulate a research question	X	X		X		X		X	X		X	X
Differentiate between descriptive and analytic epidemiologic methods	X	X	X	X		X		X	X		X	X
Critically evaluate the strengths and weaknesses of different study designs with respect to a given research question	X		X	X		X		X	X		X	X
Calculate basic epidemiologic measures	X	X	X	X		X		X	X		X	X
Implement methods of data cleaning and documentation for epidemiologic data sets		X	X	X				X	X		X	X
Implement causal models and use different case-control designs in appropriate fashion						X						
Conduct basic epidemiologic analyses using linear, logistic, Cox and Poisson regression		X	X	X	X		X		X		X	X
Fit epidemiologic models		X	X	X	X		X		X			X
Interpret epidemiologic results in a causal framework	X	X		X	X	X	X				X	X
Evaluate the strengths and weaknesses of the epidemiologic literature	X		X	X		X		X			X	X
Utilize information technology tools and statistical programming packages in preparing scientific reports		X	X	X	X		X	X	X		X	X
Communicate epidemiologic information in a scientific report		X		X					X		X	X
Recognize potential ethical and legal issues in epidemiologic studies	X			X							X	X

Table 2.6c: Degree and Specialization Competency Sets

PhD in Epidemiology Competencies	EPI 530: Epidemiologic Methods I	EPI 533: Programming in SAS I	EPI 534: Epidemiologic Methods II	EPI 590R: Analytic Foundations	EPI 591U: Application of Epidemiologic Concepts	EPI 738: Advanced Epidemiologic Methods I	EPI 739: Advanced Epidemiologic Methods II	EPI 740: Epidemiologic Modeling	EPI 750: Analysis of Longitudinal Data	BIOS 500/506: Statistical Methods I	BIOS 507/591P: Applied Linear Models	BIOS 510: Probability Theory	EPI 790R: Journal Club	EPI 791: Teaching Epidemiology	LGS TATTO: Teaching Workshop	Teaching Assistantships	Research Apprenticeship	Research and Progress Symposium	Dissertation
Critically evaluate scientific literature	X				X								X				X		X
Synthesize scientific literature findings across studies, balancing limitations and contributions of each study	X				X								X				X		X
Render an informed judgment on the state of knowledge in an area of public health																	X		X
Articulate research questions that advance scientific knowledge about the topic				X	X				X								X		X
Conduct an advanced, original research project in the student's discipline					X				X								X		X
Participate in data collection through one or more of the following: developing a questionnaire, piloting a study instrument, recruiting study participants, etc.																	X		X
Apply quantitative and reasoning skills, as well as content-area knowledge to analyze data from epidemiological studies	X	X	X	X	X	X	X	X	X	X	X	X					X		X
Present epidemiologic findings clearly, in writing and orally, to students, professionals and the public					X				X				X			X	X	X	X
Develop a proposal for extramural research funding																	X		X
Teach epidemiologic concepts to students and peers													X	X	X	X		X	
Complete training on the basic principles of ethics in human subjects research																	X		X
Recognize potential ethical issues in epidemiologic studies													X				X		X
Prepare an application to an Institutional Review Board																	X		X
Utilize information technology tools which are critical to scientific productivity including scientific literature databases and search engines, reference management software and statistical analysis software		X		X	X				X				X				X		X

Table 2.6c: Degree and Specialization Competency Sets

Department of Health Policy and Management
The Department of Health Policy and Management offers the following degrees: MPH degree with a concentration in one of two tracks, Health Management or Health Policy; the MSPH in Health Policy and Health Services Research; a PhD Degree in Health Services Research and Health Policy. The department also oversees a certificate in Mental Health. The director of graduate studies, selected faculty, and the ADAP reviewed the curriculum for its initial competency constructs. Following the initial review, several faculty members, with assistance from a doctoral student, developed a second version of the matrix for review. It draws upon the management, economic, health policy and social science literature for its competency development guidance.

MPH in Health Management Competencies	Learning Experiences												
	HPM 500: Introduction to the US Health Care System	HPM 502: Introduction to Health Care Management	HPM 510: Financial and Managerial Accounting	HPM 511: Financial Management for Health Care organizations	HPM 521: Introduction to Health Economics	HPM 540: Human Resource Management in Healthcare	HPM 545: Health Care Marketing	HPM 550: Capstone I: Operations Management	HPM 560: Capstone II: Strategic Management	HPM 557: Health Care Administration Law (Students take 1 of 2)	HPM 561: Public Health Law (Students take 1 of 2)	HPM 595: Practicum	HPM 550/560 or HPM 575/576: Capstone
Describe how the organization and financing of health services influence access, quality and cost	X											X	X
Apply management principles to planning, organizing, leading and controlling health care enterprises		X		X		X						X	X
Apply skills in financial accounting to healthcare administration decisions			X	X								X	X
Apply analytic tools and theories to guide the management of financial assets in healthcare organizations				X								X	X
Apply principles of health economics in analyzing the behavior of healthcare market stakeholders					X							X	X
Incorporate human resources management principles in administering healthcare organizations						X						X	X
Apply marketing concepts in the design of health services							X					X	X
Incorporate legal principles in the administration of health services										X	X	X	X
Be prepared to assume supervisory-level general -management responsibilities in a health services delivery organization		X	X	X		X	X	X	X	X	X	X	X
Execute both an operations management and a strategic management analysis in the role of a health services consultant								X	X			X	X

Table 2.6c: Degree and Specialization Competency Sets

MPH in Health Policy Competencies	Learning Experiences											
	HPM 500: Introduction to the US Health Care System	HPM 502: Introduction to Health Care Management	HPM 510: Financial and Managerial Accounting	HPM 521: Introduction to Health Economics	HPM 522: Economic Evaluation of Health Care Programs	HPM 523: Public Financing in the Health Care System	HPM 557: Health Care Administration Law	HPM 561: Public Health Law	HPM 575: Capstone I: US Health Policy	HPM 576: Capstone II: Policy Analysis: Analytic Applications	HPM 595: Practicum	HPM 581/582/583/584: Thesis
							Students take 1 of 2		Students take 1 of 2			
Describe how the organization and financing of health services influence access, quality and cost	X					X					X	X
Apply management principles to planning, organizing, leading and controlling health care enterprises		X									X	X
Apply skills in financial accounting to healthcare administration decisions			X								X	X
Apply principles of health economics in analyzing the behavior of healthcare market stakeholders				X							X	X
Conduct economic evaluations of health services					X						X	X
Utilize public finance theory to assess the impact of proposals to reform the financing and delivery of health services						X					X	X
Incorporate legal principles in the administration of health services							X	X			X	X
Prepare health policy briefings suitable for the range of policy stakeholders involved with the formulation and implementation of a health policy under consideration by decision makers									X	X	X	X
Design an advocacy strategy for the development and implementation of a health policy									X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

MSPH degree in Health Policy and Health Services Research Competencies	Learning Experiences													
	HPM 500: Introduction to the US Health Care System	HPM 521: Introduction to Health Economics	HPM 522: Economic Evaluation of Health Care Programs	HPM 523: Public Financing in the Health Care System	HPM 576: Capstone II: Policy Analysis: Analytic Applications	HPM 581: Research Seminar I	HPM 582: Research Seminar II	HPM 583: Research Seminar III	HPM 584: Research Seminar IV	HPM 585: Quantitative Methods I	HPM 586: Quantitative Methods II	HPM 587: Advanced Research Methods	HPM 595: Practicum	HPM 581/582/583/584: Thesis
Describe how the organization and financing of health services influence access, quality and cost	X			X									X	X
Apply principles of health economics in analyzing the behavior of healthcare market stakeholders		X											X	X
Conduct economic evaluations of health services			X										X	X
Utilize public finance theory to assess the impact of proposals to reform the financing and delivery of health services				X									X	X
Conduct a health services or health policy research investigation using quantitative analytic techniques					X	X	X	X	X	X	X	X	X	X
Function as a team collaborator in the development and/or execution of a health services research investigation	X	X	X	X		X	X	X	X				X	X

Table 2.6c: Degree and Specialization Competency Sets

PhD in Health Services Research and Health Policy Competencies	Learning Experiences													
	ECON 500: Microeconomic Theory I	ECON 501: Microeconomic Theory II	ECON 520: Probability and Statistics for Economists	ECON 521: Econometric Methods	ECON 526: quantitative Methods I	ECON 721: Advanced Microeconometrics	POLS 500: Political Theory	POLS 540: American National Government	POLS 542: Public Opinion and voting Behavior	BIOS 500: Statistical Methods I	BIOS 501: Statistical Methods II	HPM 720R: Doctoral Seminar in Health Policy	HPM 760: Doctoral Seminar in Health Services Research	Dissertation
Apply economic concepts, theories and methods to the framing and analysis of research questions in health services and policy	X	X	X	X	X	X								
Apply political science concepts and theories and statistical techniques to the framing and analysis of research questions in health services and policy							X	X	X	X	X			
Describe major problems in health services and policy that are currently the subject of empirical investigations												X		
Apply advanced mathematical and theoretical economics to describe physician and hospital behavior, personal health decisions, the functioning of health insurance markets and related policy-relevant matters													X	
Effectively teach concepts and methods of health services and health policy research to students													X	
Design a health services or health policy research proposal involving both qualitative and mixed methods approaches	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Conduct a health services or health policy research activity investigation suitable for peer-reviewed publication as an independent researcher	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Function as an interdisciplinary team collaborator in the design and conducting of a health services or health policy research investigation	X	X	X	X	X	X	X	X	X	X	X	X	X	

Table 2.6c: Degree and Specialization Competency Sets

Certificate in Mental Health Competencies	HPM 579: Mental Health and Public Health Interface	BSHE 512 : Medical Sociology	BSHE 516: Behavioral Epidemiology	BSHE 560R: Mental Health Seminar	BSHE 581: Stress Reduction	BSHE 586: Prevention of Mental and Behavioral Disorders	BSHE 587: Seminar in Substance Abuse	BSHE 588: Addiction, the Brian, History and Culture	BSHE 589: Mental Illness, Public Health and American Culture in Interdisciplinary Perspective	HPM 563: Long Term Care Policy and Practice	HPM 577 : Mental Health and Medical Interface	Culminating Experience (Thesis, SSP, Capstone)
Epidemiologically describe the burden of mental illness on society—US and global populations	X	X	X	X		X	X		X		X	X
Describe the major theories on the etiology of mental illness or categories of mental illness	X			X			X	X	X			X
Evaluate empirical evidence on social determinants of mental illnesses or categories of mental illness	X		X	X	X	X	X	X	X			X
Describe how cultural differences affect the experience of mental illness and the seeking of health services	X	X	X	X			X	X	X			X
Identify population-based interventions that would reduce the onset of mental illnesses or categories of mental illness	X			X	X	X	X	X	X			X
Describe how populations in the US receive and finance mental health services	X	X		X			X			X	X	X
Identify policy initiatives that would improve access to mental health services in the US	X	X		X						X	X	X
Identify gaps in coverage for mental health services in the US and global settings and their consequences for mental health	X			X		X				X	X	X

Table 2.6c: Degree and Specialization Competency Sets

Hubert Department of Global Health

The Hubert Department of Global Health offers the MPH degrees with a concentration in the following tracks: Infectious Diseases, Reproductive Health and Population Studies and Community Health and Development and Public Nutrition. The department offers the MSPH degree in Public Nutrition and a certificate in Global Complex Humanitarian Emergencies. Under the lead of the director of graduate studies and with the assistance of the ADAPS, the faculty reviewed the required core courses for the global health concentrations and identified the competencies associated with each of these courses. The faculty referenced the drafted ASPH global health competencies and the COL competencies.

MPH in GH in Infectious Diseases Competencies	Learning Experiences					
	GH 501: Global Health Challenges and Opportunities	GH 542: Evidence-Based Strategies	GH 511: International Infectious Diseases	GH 515: Intro to PH Surveillance	GH 595R: Practicum	GH 599R /598R: Culminating Experience (Thesis, SSP)
Assess the major forces that influence the health of populations around the world	X					
Critique major global priorities and the reasons for their prioritization	X					
Critique the evidence for improving health delivery systems and health status of individuals, communities and populations around the world	X	X				
Design programs, policies and/or interventions intended to improve health services and health status of individuals, communities and populations		X			X	X
Conduct research, including formulation of specific research aim, conducting a literature review and formulating a hypothesis and selecting appropriate methodologies related to the emphasis						X
Compose a written scientific thesis that is consistent with department guidelines and relevant writing style sources						X
Communicate the key methods, findings and public health implications of the thesis on a poster and verbally to an audience of public health professionals						X
Explain the science of infectious disease including types of organisms, mechanisms of pathogenesis, host response and susceptibility			X			
Apply principles of infectious disease epidemiology, laboratory detection and clinical strategies to identify specific infectious pathogens and diseases			X	X		
Interpret the geographic and demographic distributions and morbidities and mortality of major infections in the US and globally			X	X		
Implement strategies to prevent and control infectious diseases			X	X		
Appraise the environmental, behavioral and social factors that contribute to the emergence, re-emergence, and persistence of infectious diseases			X			
Develop and maintain surveillance for infectious diseases			X	X		

Table 2.6c: Degree and Specialization Competency Sets

MPH in GH in Reproduction Health and Population Studies Competencies	Learning Experiences											
	GH 501: Global Health Challenges and Opportunities	GH 542: Evidence-Based Strategies	GH 530: GEMMA	GH 541: Technology of Fertility Control	GH 547: Issues in Repro and Sexual Health	GH559: Gender and Global Health	GH 502: Survey Methods	GH 523: Obesity and Society	GH 540: Population Dynamics	GH 569: Intro to Demography for Public Health	GH 595R: Practicum	GH 599R/598R: Culminating Experience (Thesis, SSP)
			Students take 1 of 2		Students take 1 of 2		Students take 1 of 4					
Assess the major forces that influence the health of populations around the world	X											
Critique major global priorities and the reasons for their prioritization	X											
Critique the evidence for improving health delivery systems and health status of individuals, communities and populations around the world	X	X										
Design programs, policies and/or interventions intended to improve health services and health status of individuals, communities, and populations		X									X	X
Conduct research, including formulation of specific research aim, conducting a literature review and formulating a hypothesis and selecting appropriate methodologies related to the emphasis												X
Compose a written scientific thesis that is consistent with department guidelines and relevant writing style sources												X
Communicate the key methods, findings and public health implications of the thesis on a poster and verbally to an audience of public health professionals												X
Critique current population, sexual, reproductive health policies and programs at local, national and global levels			X	X	X	X			X	X		
Discern quality and appropriateness of data sources to measure sexual, reproductive health and population issues			X		X	X	X		X	X		
Apply demographic, epidemiologic and anthropologic methods to measure population change and population patterns at local, national and global levels			X	X	X		X	X	X	X		
Develop a policy, project or program to address a sexual, reproductive health or population problem			X	X		X						
Propose recommendations to improve sexual, reproductive health or population change issue			X	X	X	X						
Compare the theoretical and use effectiveness and relative cost of different methods of fertility regulation			X	X	X				X			
Compare the patterns and determinants of use of fertility regulations methods			X	X	X	X			X			

Table 2.6c: Degree and Specialization Competency Sets

MPH in GH in Community Health and Development Competencies	GH 501: Global Health Challenges and Opportunities	GH 542: Evidence-Based Strategies	GH 507: Health as Social Justice	GH 508: Health and Human Rights	GH 513: Community Based Participatory Action Research	GH 572: Community Transformation	GH 539: Reproductive Health Mgmt	GH 505: Case Studies in GH Mgmt	GH 560: Monitoring and Evaluation	GH 595R: Practicum	GH 599R/598R: Culminating Experience (Thesis, SSP)
			Students take 1 of 4				Students take 1 of 2				
Assess the major forces that influence the health of populations around the world	X										
Critique major global priorities and the reasons for their prioritization	X										
Critique the evidence for improving health delivery systems and health status of individuals, communities and populations around the world	X	X									
Design programs, policies, and/or interventions intended to improve health services and health status of individuals, communities and populations		X								X	X
Conduct research, including formulation of specific research aim, conducting a literature review and formulating a hypothesis and selecting appropriate methodologies related to the emphasis											X
Compose a written scientific thesis that is consistent with department guidelines and relevant writing style sources											X
Communicate the key methods, findings and public health implications of the thesis on a poster and verbally to an audience of public health professionals											X
Assess health needs and assets of communities			X	X	X	X	X				
Design programs that mobilize community assets for social and behavioral change			X	X	X	X					
Manage the resources of organizations working at the community, local, regional or national level in health or development							X	X			
Assess personal management and leadership styles							X	X			
Operate in partnership with local, national and international organizations engaged in the health and social sectors			X				X	X	X		
Develop systems to monitor progress toward targets, objectives, and goals									X		
Evaluate programs and their operational components									X		

Table 2.6c: Degree and Specialization Competency Sets

MPH in GH in Public Nutrition Competencies	Learning Experiences									
	GH 501: Global Health Challenges and Opportunities	GH 542: Evidence-Based Strategies	GH 545: Nutritional Assessment	GH 546: Maternal Child Nutrition	GH 551: Diet and Chronic Diseases	GH 534: Diabetes	GH 552: Global Elimination of Micronutrient Malnutrition	GH 560: Monitoring and Evaluation	GH 595R: Practicum	GH 599R/598R: Culminating Experience (Thesis, SSP)
				Students take 1 of 3			Students take 1 of 2			
Assess the major forces that influence the health of populations around the world	X									
Critique major global priorities and the reasons for their prioritization	X									
Critique the evidence for improving health delivery systems and health status of individuals, communities and populations around the world	X	X								
Design programs, policies and/or interventions intended to improve health services and health status of individuals, communities and populations		X							X	X
Conduct research, including formulation of specific research aim, conducting a literature review and formulating a hypothesis and selecting appropriate methodologies related to the emphasis										X
Compose a written scientific thesis that is consistent with department guidelines and relevant writing style sources										X
Communicate the key methods, findings and public health implications of the thesis on a poster and verbally to an audience of public health professionals										X
Assess the nutritional status of individuals using anthropometric, diet and biochemical methods			X	X			X			
Calculate the magnitude, distribution and trends of nutrition problems in populations			X		X		X			
Evaluate the causes and consequences of under- and over-nutrition in populations				X	X	X				
Critique the evidence base for the efficacy and effectiveness of nutrition programs and policies				X	X	X	X	X		
Develop innovative approaches to address nutrition problems				X	X	X	X			
Manage public health nutrition programs							X	X		

Table 2.6c: Degree and Specialization Competency Sets

MSPH in Public Nutrition Competencies	GH 501: Global Health Challenges and Opportunities	GH 542: Evidence-Based Strategies	GH 548: Human Nutrition I	GH 591L: Assessment Diet Intakes	GH 545: Nutritional Assessment	GH 546: Maternal Child Nutrition	GH 538: Food and Nutrition in Human Emergencies	GH 552: Global Elimination of Micronutrient Malnutrition	GH 551: Diet and Chronic Disease	GH 534: Diabetes	GH 523: Obesity and Society	GH 595R: Practicum	GH 599R/598R: Culminating Experience (Thesis, SSP)
				Students take 1 of 2		Students take 1 of 3			Students take 1 of 3				
Assess the major forces that influence the health of populations around the world	X												
Critique major global priorities and the reasons for their prioritization	X												
Critique the evidence for improving health delivery systems and health status of individuals, communities and populations around the world	X	X											
Design programs, policies and/or interventions intended to improve health services and health status of individuals, communities and populations		X								X		X	X
Conduct research, including formulation of specific research aim, conducting a literature review and formulating a hypothesis and selecting appropriate methodologies related to the emphasis													X
Compose a written scientific thesis that is consistent with department guidelines and relevant writing style sources													X
Communicate the key methods, findings and public health implications of the thesis on a poster and verbally to an audience of public health professionals													X
Assess the nutritional status of individuals using anthropometric, diet and biochemical methods				X	X	X	X	X					
Calculate the magnitude, distribution and trends of nutrition problems in populations			X	X	X		X	X	X				
Evaluate the causes and consequences of under- and over-nutrition in populations			X	X		X	X		X	X	X		
Critique the evidence base for the efficacy and effectiveness of nutrition programs and policies						X	X	X	X	X	X		
Develop innovative approaches to address nutrition problems							X	X	X	X	X		
Conduct rigorous nutrition research			X	X	X								X

Table 2.6c: Degree and Specialization Competency Sets

Certificate in Global Complex Humanitarian Emergencies Competencies (CHE)	Learning Experiences		
	GH 512: Health in Complex Emergencies	GH 510: Epi Methods in Humanitarian Emergencies	GH 538: Food and Nutrition in Humanitarian Emergencies
		Students take 1 of 2	
Describe a complex humanitarian crisis in terms of magnitude, person, time and place	X	X	X
Calculate basic epidemiology measures	X	X	X
Evaluate the strengths and limitations of epidemiological data within the context of CHE		X	X
Develop public health programs and strategies responsive to the diverse cultural values and traditions of the community being served	X		X
Identify internal and external problems that may affect the delivery of essential public health services in a CHE	X		X
Collaborate with communication and informatics specialists in the process of design, implementation and evaluation of public health programs in CHE	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

Career Master of Public Health Program

The Career Master of Public Health Program (CMPH) offers the MPH degree in the following tracks: Prevention Science (PRS), Applied Epidemiology (AEPI), Healthcare Outcomes (HCO), and Applied Public Health Informatics (APHI). The chair and the associate directors reviewed the track curricula, courses and competencies. Individual course instructors then examined this initial review – and edited as appropriate. The faculty referenced the ASPH, COL, NCHEC, Applied Epidemiology and Public Health Informatics competencies.

MPH in Prevention Science Competencies	AEPI 515D: Introduction to PH Surveillance	APHI 501D: Applied PH Informatics	PRS 561D: PH Advocacy	PRS 565D: PH Ethics	PRS 540D: Conduct of Evaluation Research	PRS 501D: Technology Tools for PH	PRS 505D: Integrated Communication Strategies	PRS 530D: Quantitative Analysis	PRS 532D: Qualitative Methods	PRS 560D: Policy Analysis	PRS 535D: Questionnaire Design and Analysis	PRS 538D: Community Needs Assessment	PRS 554D: Prevention Effectiveness	PRS 575D: Planning and Performance Measures	PRS 580D: Research Design and Grant Preparation	PRS 598D: Thesis	PRS 595R: Practicum
			Students take 1 of 2					Students take 2 of 3									
Assess individual and community agency needs and assets	X	X			X	X	X				X	X		X	X		
Plan public health interventions, and programs					X							X			X		
Implement public health interventions and programs					X		X										
Oversee the management and fiscal procedures of public health interventions and programs													X	X			
Assess the effects of public health interventions and programs	X				X		X	X					X	X			
Incorporate the use of technology and public health informatics in professional practice	X	X				X		X			X						
Develop communication strategies for public health interventions and programs	X	X	X	X		X	X				X						
Make community-specific inferences from quantitative and/or qualitative data	X				X			X	X	X	X	X		X	X	X	
Describe the ethical and the policy implications on program operations that result from public health decision making		X	X	X	X		X	X	X	X	X	X	X				
Contribute to the science base of public health	X							X	X	X					X	X	
Contribute to the professional and leadership development of oneself and to the larger public health field		X	X	X		X	X							X	X	X	X

Table 2.6c: Degree and Specialization Competency Sets

MPH in Applied Epidemiology Competencies	APHI 501D: Applied PH Informatics	PRS 561D: PH Advocacy	PRS 565D: PH Ethics	AEPI 515D: Introduction to PH Surveillance	AEPI 530D: Applied Epidemiology I [1]	AEPI 534D: Applied Epidemiology II	AEPI 536D: Epidemiogical Modeling	BIOS 516D: Applied Biostatistics I [2]	BIOS 517D: Applied Biostatistics II	BIOS 518D: Applied Biostatistics III	HCO 537D: Applied Regression and Cost Effectiveness Analysis	AEPI 538D: Applied Data Analysis	AEPI 555D: Chronic Disease Epidemiology	AEPI 545D: MCH Epidemiology	AEPI 540D: Case Studies in Infectious Disease Epidemiology	AEPI 598D: Thesis	PRS 595R: Practicum
		Students take 1 of 2															
Describe public health problems in terms of magnitude, time, place, person and their associated risk factors				X	X	X	X					X	X	X	X	X	X
Identify principles and limitations of epidemiologic screening programs				X	X								X		X		
Identify major epidemiologic problems of importance				X	X								X	X		X	X
Apply basic principles of public health surveillance in the practice of public health				X									X		X		
Identify key sources of data for epidemiologic purposes				X	X	X	X			X		X	X			X	
Formulate a research question				X	X		X	X	X	X	X	X	X			X	
Differentiate between descriptive and analytic epidemiologic methods				X	X	X	X	X	X				X	X		X	
Evaluate the strengths and weaknesses of different study designs with respect to a given research question				X		X	X	X	X	X	X					X	
Calculate basic epidemiologic measures				X	X	X	X	X	X			X		X	X	X	X
Implement methods of data cleaning and documentation for epidemiologic data sets								X	X	X	X	X				X	X
Conduct basic epidemiologic research using multivariable models (e.g., linear, logistic, Cox and Poisson regression)						X	X		X	X	X	X		X		X	
Fit epidemiologic models						X	X		X	X		X	X			X	
Interpret epidemiologic results in a causal framework					X	X	X					X	X		X	X	
Evaluate the strengths and weaknesses of the epidemiologic literature				X	X								X	X	X	X	
Utilize information technology tools and statistical programming packages in preparing scientific reports	X				X	X	X	X	X	X	X	X			X	X	X
Communicate epidemiologic information in a scientific report		X		X				X	X	X	X	X			X	X	X
Recognize potential ethical and legal issues in epidemiologic studies			X	X											X	X	X

[1] AEPI 530D: Applied Epidemiology I is the epidemiology core course taken by AEPI students. It is also listed on the Core Course Matrix.

[2] BIOS 516D: Applied Biostatistics I is the biostatistics core course taken by AEPI students. It is also listed on the Core Course Matrix.

Table 2.6c: Degree and Specialization Competency Sets

MPH in Healthcare Outcomes Competencies	APHI 501D: Applied PH Informatics	PRS 540D: Conduct of Evaluation Research	PRS 565D: PH Ethics	AEPI 530D: Applied Epidemiology I [1]	AEPI 534D: Applied Epidemiology II	AEPI 536D: Epidemiogical Modeling	BIOS 516D: Applied Biostatistics I [2]	BIOS 517D: Applied Biostatistics II	BIOS 518D: Applied Biostatistics III	HCO 537D: Applied Regression and Cost Effectiveness Analysis	HCO 538D: Evidence-Based Medicine Concept	HCO 535D: Population-Based Outcomes Research	HCO 536D: Managing HC Databases	HCO 539D: Outcomes Based Process Improvement	HCO 598D: Thesis	PRS 595R: Practicum
Conduct a clinically oriented outcomes study using basic quantitative analytic techniques				X	X	X	X	X	X	X		X			X	
Function as a team collaborator in the development and/or execution of a clinically oriented outcomes study												X	X	X	X	X
Articulate the differences among activity, process and outcomes measures to peers, clients or patients		X										X				
Articulate health and disease concepts in evidence based medicine terms.											X					
Use analytic tools in the development, design and implementation of an outcomes study.				X	X	X	X	X	X	X		X			X	
Evaluate the strengths and weaknesses of standard outcome measures used in health services research and clinical practice.		X										X			X	
Articulate ethical issues related to health services outcomes research.			X	X								X				
Translate outcomes study results into "best practices" to be implemented in practice situations.										X	X			X		
Manage information systems for collection, retrieval and use of data for decision making.	X											X				

[1] AEPI 530D: Applied Epidemiology I is the epidemiology core course taken by HCO students. It is also listed on the Core Course Matrix.
[2] BIOS 516D: Applied Biostatistics I is the biostatistics core course taken by HCO students. It is also listed on the Core Course Matrix.

Table 2.6c: Degree and Specialization Competency Sets

MPH in Applied Public Health Informatics Competencies	AEPI 515D: Introduction to PH Surveillance	PRS 535D: Questionnaire Design and Analysis	APHI 520D: Introduction to PH Informatics	APHI 525D: Overview of Data Sources, Standards, and Information Systems	APHI 530D: Interpersonal and Organizational Communication for the PH Informatician	*APHI xxxD: Project Management and Information System Lifecycle	APHI xxxD: Data Management and Enterprise Architecture	APHI xxxD: Information Security and Privacy; Legal, and Ethical Issues	APHI xxxD: Business Aspects of Public Health Informatics	APHI xxxD: Applied Public Health Informatics Evaluation and Research	APHI xxxD: Information for Public Health Decision Making	APHI xxxD: Informatics in Support of Public Health Leadership and Management	APHI 598 D: Thesis	PRS 595R: Practicum
Support development of strategic direction for public health informatics within the enterprise								X				X	X	X
Participate in development of knowledge management tools for the enterprise		X									X			X
Use informatics standards	X		X	X			X						X	X
Ensure that knowledge, information and data needs of a project or program users and stakeholders are met	X	X		X	X	X					X		X	X
Support information system development, procurement and implementation that meet public health program needs	X	X				X	X		X				X	
Manage IT operations related to project or program (for public health agencies with internal IT operations)						X	X	X						X
Monitor IT operations managed by external organizations						X			X					X
Communicate with cross-disciplinary leaders and team members	X				X								X	
Evaluate information systems and applications										X			X	X
Participate in applied public health informatics research for new insights and innovative solutions to health problems										X			X	
Contribute to development of public health information systems that are interoperable with other relevant information systems		X	X			X							X	X
Support use of informatics to integrate clinical health, environmental risk and population health	X		X	X		X					X		X	
Implement solutions that ensure confidentiality, security and integrity while maximizing availability of information for public health	X		X					X						X
Conduct education and training in public health informatics			X		X							X		

* Applied Public Health Informatics Courses are under development. Course numbers will be assigned the semester before the courses are taught.

d. A description of the manner in which competencies are developed, used and made available to students.

Process for Advancing Competency-Based Instruction
In response to the school's decision to advance competency-based instruction, the associate dean for applied public health conducted a series of sessions for faculty and instructional support staff on the use of competencies in graduate public health professional preparation. These sessions helped the faculty and academic staff from each department map their courses to school and departmental competencies. This session also provided training and assistance to faculty in revising their course syllabi to reflect how learning objectives contribute to program and core competencies.

The meetings on competency-based instruction resulted in faculty recommendations to: (1) revise the syllabus template to be more explicit about how learning objectives contribute to competencies and (2) develop a set of overarching core competencies for the master's level graduate program.

Core Competencies for the MPH/MSPH
Departments assessed, reviewed and revised the existing competencies for courses in their area of expertise. These decisions were made with reference to the ASPH Core Competencies and Cross-Cutting Competencies. Faculty and others (students and staff) participating in the process for advancing competency-based instruction recommended that a set of overarching core competencies be developed, and a draft was developed by a group of faculty who were engaged that process. This draft was then reviewed and revised by the following groups:
- All school faculty members in electronic exchanges
- Core course instructors
- Department chairs
- Education committee
- Leadership Group (decision to adopt)

As a result of this review, a set of ten core competencies was adopted (see Criterion 2.6a). The process also resulted in the addition of a new core course in global health to address a gap identified in the revised core competencies.

Program Competencies (for department concentrations and certificate programs)
The program competencies matrix above (Table 2.6c) outlines the process followed in their development. In each instance, faculty in the departments offering the programs reviewed and revised existing competencies. In updating their competencies, faculty made reference to how their field of study has evolved over the past five years, reviewed relevant lists of competencies available in their fields and public health more generally and considered student feedback from recent exit interviews and course evaluations.
Program competencies were then circulated to the Education Committee for their review. The Accreditation Self-Study Steering Committee provided comments, leading to additional minor revisions.

Faculty and ADAPs in each department determined how the learning objectives of courses tracked to each program competency. Faculty in departments adjusted learning objectives of their courses so as to better contribute to the development of the newly described competencies. In some cases, new courses were created or the curriculum was altered.

Dissemination of Competencies

Core and Program competencies are disseminated as follows:

- Presentations at new student orientation
- School catalog
- *Clifton Notes for Students* (printed guide for students on policies and procedures)
- Course syllabi (list learning objectives and program and core competencies addressed)
- Web
  - Link to Program Competencies on each department page
    (http://www.sph.emory.edu/cms/about/documents/RSPHCoreandProgram%20Competencies2011_08192011.pdf)
  - Online version of *Clifton Notes for Students*(http://www.sph.emory.edu/cms/current_students/documents/Clifton_Notes_2011.pdf)
  - Online version of *Clifton Notes for Faculty* (http://www.sph.emory.edu/cms/about/documents/FacCliftonNotes2011.pdf)

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e. A description of the manner in which the school periodically assesses the changing needs of public health practice and uses this information to establish the competencies for its educational programs.

The executive associate dean for academic affairs, in concert with the school's Education Committee, periodically initiates a review and revision of core and program competencies. Those involved in this review and assessment are asked to refer to existing sets of competencies in their field or in public health more generally. Feedback is solicited from students and the public health community as described in the following sections.

Student Feedback

Exit Survey: The associate dean for academic affairs monitors the annual exit survey of graduating students that addresses topics of study or competencies that they would like to have developed but did not, or topics of study that the school did not offer in its curriculum. Students are also asked on the exit survey whether they are familiar with the competencies for the MPH/MSPH and their departmental programs. The survey then asks students to agree or disagree with the following items: "Coursework completed at the RSPH provided me with the basic competencies required for working in the public health field" and "RSPH offers excellent training for students in my area of study."

A report of exit survey findings, including a content analysis of students' responses on gaps in training, is distributed school-wide to faculty, chairs and other administrators. Those findings may influence the initiation of new courses, adjustments in course requirements and approaches to curriculum review by the education committee. A recent example is finding significant numbers of students reporting that they desired more advanced training in analytic methods, resulting in an upgrading of the learning objectives for both Biostatistics and Epidemiology core courses and several departments (BSHE, GH and HPM) revising their programs' analytic methods requirements. Another recent example is a change in the course requirement for students in Global Health as a result of graduates reporting a need for a stronger foundation in health policy. Findings from the most recent exit survey are in Appendix 4.1.d.

Responses on the exit survey to the questions on training for competencies for the past three years are found in Table 2.6e.

Table 2.6e: Proportion of Graduating Students who Agree with Statements on Exit Survey

Proportion of Graduating Students who Agree with Statements on Exit Survey		
Year Graduating	RSPH Provided Basic Competencies	RSPH Provided Excellent Training
2009 (N= 210)	89%	83%
2010 (N= 209)	89%	78%
2011 (N= 252)	91%	86%

Survey of Graduates: In 2011, the Office of Career Services initiated an annual survey of graduates on whether they believe they were well trained in competencies for practice and what essential competencies they would have liked to develop better. The responses of students are provided to the departments, so, this information may be used for an assessment of their outcomes and considered in changes in program curricula and related training experiences. Prior to 2011, some departments independently surveyed their graduates and found responses useful in initiating changes to their programs.

In 2011, 74% of the respondents indicated that "the RSPH provided them with basic competencies and skills required for working in the public health field," a lower proportion than responses to a similar question on the Exit Survey, completed at the time of graduation. Responses of graduates probably reflect their additional experience in employment.

Recommendations from the Larger Public Health Community

RSPH monitors emerging information and recommendations related to local, national and global public health needs, and considers these needs when they establish competencies. For example, the most recent review of degree program competencies focused on the Association of Schools of Public Health recommended core and cross-cutting competencies. These developments are brought to the attention of the faculty through the Education Committee and disseminated through department chairs and periodic lunch-N-learn seminars sponsored by faculty and staff throughout the school. (Examples of these announcements/flyers of these programs are available in the resource room)

Input from the Community Advisory Board

The Office of Career Services formed a Community Advisory Board (CAB) in 2004 to communicate with public health employers and community leaders about the changing needs of public health practice. Annual meetings include group discussions, one-on-one dialogue, and evaluations addressing skills desired of graduates for service in public health. Input from the Community Advisory Board has led to the development of specialized competency-based training seminars for students and alumni in topics not covered in the traditional course work, including weekend training sessions covering both basic and advanced training in Microsoft Excel. In 2005, the Community Advisory Board created a "Guide for Professional Skill Development" including a list of skills and experiences that employers desired in new employees. This brochure is made available to all students In addition, the Professional Development Series was created to help advise students on the variety of ways students can use their skill set in the a professional work setting. The series brings in outside, hiring organizations for panel sessions allowing

students to hear pertinent information, as well creating an environment for questions. [Materials from the Professional Development Series over the past two years are available on site in the resource room.]

f. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school adopted clearly stated competencies that guided the development of its educational programs.
- Many faculty and staff were trained in an initiative designed to advance competency-based instruction in the school, an outgrowth of the self-study process.
- A streamlined set of overarching core competencies was adopted for MPH/MSPH students as a result of faculty recommendations.
- The core curriculum was revised with the addition of a course in global health as the result of an assessment and revision of core competencies.
- As part of a revision of core and program competencies, departments mapped the learning objectives of required courses to program and school competencies.
- Certificate programs enable students to gain additional competencies in a "minor" substantive area of concentration.

Lessons Learned:
- The school aspires to having a higher proportion of its graduates indicate that their education provided them with the basic skills and competencies for employment in public health.
- Revised competencies resulted in faculty adopting changes to their course learning objectives.
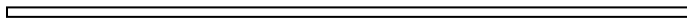
2.7 Assessment Procedures

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

Required Documentation:

a. Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies.

Core and program competencies guide the development of course learning objectives and instructional strategies. Therefore, satisfactory student completion of coursework is one approach to evaluating student progress in achieving expected competencies in combination with other assessments and indicators in 2.7b.

Administrative Oversight
In each department, the assistant/associate director for academic programs (ADAP) monitors student progress toward completing degree requirements. The ADAP maintains a record of student course enrollment and grades as one measure of performance. This information is shared with faculty advisors.

The ADAP also monitors progress on other academic requirements such as the satisfactory completion of the practicum. As the student enters the last semester of enrollment preparing for graduation, the ADAP reviews their record and determines whether all requirements will have been met by the end of the semester and advises the student accordingly. The ADAP and faculty advisor may inform and direct students when problems are identified in progress towards the degree.

At the end of the last semester, the student's record is also reviewed by the ADAP and the school's director of enrollment services located in the Office of Admissions and Student Services. This office "clears" students for graduation, determining that all program and school requirements are met.

Academic Oversight
The school arranges various forms of academic advisement which students may utilize in accord with their requirements and special needs to help monitor and evaluate progress.

Faculty Advisors: All students are assigned department faculty advisors at the start of their academic program. Students consult faculty advisors for career mentoring, suggestions related to their practicum and thesis, their general academic program and their future career trajectory. Lists of faculty advisors for students are recorded in each department. Should the student prefer a different faculty advisor, the department ADAP reassigns the student to the preferred faculty advisor.

Thesis Advisement: The thesis (or special study project) faculty chair monitors the progress, competency and quality of work on a thesis. The chair and committee review and approve the proposal, provide guidance on the project and determine whether the project is satisfactorily completed. Students select faculty with appropriate expertise in their thesis topic to chair their thesis committees. The thesis chair may or may not be the original faculty member assigned to the student as an advisor.

Course Instructors: Faculty course instructors are responsible for evaluating whether students meet course competencies. They do so through conventional methods of evaluation that most commonly include:

- Take-home examinations
- In-class examinations or quizzes
- Homework exercises
- Research papers
- Classroom presentations or participation
- Group projects

Course syllabi indicate the competencies, learning objectives and methods of evaluation. These are available in the resource room on site.   Faculty members who teach the capstone courses oversee the development of capstone projects and their evaluation.

Grades: Grades are used to indicate achievement of course competencies and learning objectives. Grade point averages are based on a range of 1-4 points, with "4" indicating a grade of "A," and "3" a grade of "B." A grade of "A" normally indicates superior performance and "B" indicates a good performance. The school does not offer a grade of "D" and does not give any credit for a grade of "F." The student must repeat required courses in which a grade of "F" was earned and pass the course with a grade of "C" or better. The grading system uses + and – in evaluating academic work with numeric equivalents (e.g., an A- is 3.7).

Lower grades indicate that the student did not achieve certain learning competencies or that the level of competency was less than satisfactory. Hence, a grade point average lower than 2.7 (B-) results in being placed on academic probation and requires certain remedies, described below, to avoid academic exclusion (i.e., dismissal from the school). Students may not graduate with a grade point average lower than 2.7.

With the approval of the department ADAP or course instructor, students may register for elective courses under the Satisfactory/Unsatisfactory (S/U) grading option rather than a letter grade. A grade of S indicates the student has achieved a grade of at least B-. All core courses must be taken for a letter grade and no more than 6 credit hours may be taken under the S/U arrangement, not including credits for the thesis.

Achievement of program competencies is determined by grades in required and elective courses and in performance on the thesis, special study project or capstone seminar project.   The department ADAP monitors overall achievement in each component. Grades are not always indicative of an ability to practice and so the school solicits the assessment of preceptors of practicum and thesis activities.

Academic Probation: If a student falls below a cumulative grade point average of 2.7 (B-) on a 4-point scale , the director of enrollment services notifies the executive associate dean for academic affairs. The dean places the student on academic probation, informing both the student and the department ADAP of that status. The ADAP normally notifies the faculty advisor. Students placed on academic probation are required to raise their cumulative grade point average to 2.7 or higher within the next 10 semester hours (6 hours for the CMPH program) of course work or be academically excluded (i.e., dismissed from the school). If, in subsequent semesters, the student's grade point average again drops below 2.7, the student is academically excluded. These requirements are described in the

school catalog and posted on the web at
http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html and
http://college.emory.edu/home/academic/policy/continuation_exclusion.html.

Doctoral Student Advisement: Progress among doctoral students is monitored by instructors in individual courses, the student's faculty advisor, the department's director of graduate studies (this is the PhD program director who is a faculty member) and, at the time of advancement to candidacy, the faculty dissertation advisor. Department faculty members annually assess students' progress towards the doctoral degree and recommend interventions when necessary.   Qualifying or comprehensive examinations provide a critical method of assessment prior to entering candidacy, i.e., starting dissertation research.

Annual Outcome Assessments: Faculty in each MPH/MSPH Program and doctoral program conduct an annual assessment of selected outcomes. Programs annually select three to five goals that may include competencies or other desired outcomes; determine a method for assessing the achievement of those goals (e.g., reading a sample of the capstone projects or theses, assessing a sample of comprehensive examinations, reviewing a sample of practicum preceptors' evaluations, etc.); indicate the extent to which the outcomes were achieved; and recommend changes in the training program, if any, to remedy deficiencies. The assessments are reported annually to the executive associate dean for academic affairs who shares them with the university's provost and its office of institutional effectiveness. Outcome assessments of doctoral programs are submitted to the Laney Graduate School where they are reviewed and then collectively submitted to the university's office of institutional effectiveness. All university programs are required to conduct annual outcomes assessments. Recent annual outcomes assessments of RSPH programs are included in the Resource Room.

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b.   Identification of outcomes that serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures for each of the last three years.

Assessment of Individual Student Performance
Individual course grades and a cumulative grade point average (GPA) reflect the achievement of competencies and learning objectives in courses, as reflected in exams, projects and papers, as described on course syllabi. A grade for performance on the thesis, special study project, or capstone project is also assigned by the chair of the thesis or special study project committee, or a grade is given by the instructor of the required capstone seminar. Grades are normally assigned following the final presentation or defense of the thesis or special study project.   Preceptors indicate whether students achieve the objectives for the practicum. Grades for students' course performance over the past 3 years are available in the resource room on site.

Indicators of Aggregate Student Performance
Aggregate student performance is assessed by monitoring completion rates, self-assessment of graduates on preparation for practice, employment and annual outcome assessments based on faculty observations of student performance.

- **Completion Rates:** Students must complete the MPH or MSPH program within 5 years; however, the school anticipates that most full-time students will complete the program within 2 – 3 academic years. Full-time CMPH students are expected to complete within 3 academic years and part-time students in the traditional and CMPH programs may take a longer period of time.

TABLE 2.7b: Proportion of all MPH or MSPH Students Completing their Degrees within 3 years and 5 years

Entering Class Year	Completed in 3 years	Completed in 5 years
Fall 2004	87.23%	95.01%
Fall 2005	86.17%	91.64%
Fall 2006	89.61%	97.19%
Fall 2007	93.16%	----
Fall 2008	96.25%	----

- **Self-Assessment of Graduates on their Preparation for Practice:** As previously noted, in 2011 the school initiated a survey of graduates who were asked to assess the extent to which they were prepared for practice. In past years, individual departments had surveyed graduates on similar matters. The report for 2011 is available on site in the Resource Room.

- **Employment Following Graduation:** The Office of Career Services surveys graduates at the time of graduation and approximately 3, 6 and 11 months following graduation and requests information on current employment status. Findings for the past three years are presented in table 2.7d below. Overall, the proportion of graduates employed or continuing their education within a year of graduation is: 2009: 97%; 2010: 95%; 2011: 92% (six months following graduation). An assessment of the findings is offered in 2.7c.

- **Annual Outcomes Assessment:** As described in 2.7a, faculty in each department conduct an annual assessment of selected outcomes, often program competencies. Faculty members assess the achievement of those outcomes based on direct and indirect observations of student performance. They report the extent to which those outcomes are achieved and may recommend changes in the training program as a way to improve future outcomes. Recent annual outcomes assessments of RSPH programs are included in the Resource Room.

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c. **If the outcome measures selected by the school do not include degree completion rates and job placement experience, then data for these two additional indicators must be provided, including experiential data for each of the last three years. If degree completion rates, in the normal time period for degree completion, are less than 80%, an explanation must be provided. If job placement, within 12 months following award of the degree, is less than 80% of the graduates, an explanation must be provided.**

N/A

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d. **A table showing the destination of graduates by specialty area for each of the last three years. The table must include at least a) government (state, local, federal), b) nonprofit organization, c) hospital or health care delivery facility, d) private practice, e) university or research institute, f) proprietary organization (industry, pharmaceutical company, consulting), g) further education, h) non-health related employment, or i) not employed.**

The Office of Career Services surveys graduates at the time of graduation and approximately 3, 6 and 11 months following graduation and requests information on current employment status. Findings for the past three years are presented in table 2.7d below. Graduates in 2009 report 1% unemployment

(neither employed nor pursuing additional education) and 2% report that they are voluntarily unemployed, i.e., not seeking employment or additional education. Graduates in 2010 report 2% unemployment and 3% are voluntarily unemployed.

Graduates in 2011 six months following graduation report that 8% were neither employed or in school. This group will again be surveyed 11 months following graduation when the employment/education rates may increase.

This information is gathered through two online surveys administered by the Office of Career Services. The exit survey is sent to students at the time of graduation and the second survey, GradInfo (Graduate Information Survey), gathers information on employment among recent graduates and is sent electronically at three, six and eleven months following graduation to track their employment. The collected information is disseminated to departments, Career Services and the deans and associate deans of the Rollins School of Public Health. Survey results are used to identify strengths and weaknesses in the school and information on employment that is provided to prospective and current students.

Table 2.7d: Destination of Graduates by Specialty Area for Each of the Last Three Years

<u>2008-2009, 11 months after Graduation</u>

Two-hundred seventy-two of the 350 graduates from 2008 – 2009 completed the GradInfo survey at graduation and 3, 6 and 11 months after graduation (a response rate of 78%). Of the 272 graduates who responded, 234 (86%) were employed, 4 (1%) were unemployed 28 (10%) were pursuing further education and 6 (2%) were neither seeking work nor pursuing further education.

Destination of 2008 - 2009 Graduates by Specialty Area (Data Gathered 11 Months After Graduation)																			
Department	Government (Federal/ State/Local)		Nonprofit/ NGO		Hospital/ Health care		Private Practice		University/ Research		Proprietary Organization		Employment sector unspecified		Further Education		Not seeking work or education		Un-employed		Total
BIOS	2	18%	2	18%	0	0%	0	0%	4	36%	1	9%	2	18%	0	0%	0	0%	0	0%	11
BSHE	13	20%	1	2%	5	8%	0	0%	12	19%	3	5%	17	27%	10	16%	2	3%	1	2%	64
CMPH	3	18%	0	0%	2	12%	1	6%	3	18%	0	0%	7	41%	0	0%	0	0%	1	6%	17
EOH	8	32%	1	4%	1	4%	0	0%	3	12%	1	4%	10	40%	1	4%	0	0%	0	0%	25
EPI	14	33%	3	7%	3	7%	0	0%	3	7%	3	7%	7	16%	8	19%	2	5%	0	0%	43
GH	22	31%	5	7%	5	7%	0	0%	10	14%	5	7%	18	25%	4	6%	1	1%	2	3%	72
HPM	9	23%	3	8%	6	15%	0	0%	4	10%	3	8%	9	23%	5	13%	1	3%	0	0%	40
Grand Total	71	26%	15	6%	22	8%	1	0%	39	14%	16	6%	70	26%	28	10%	6	2%	4	1%	272

2009 – 2010, 11 months after Graduation

Two-hundred ninety-five of the 365 graduates from 2009 -- 2010 completed the GradInfo survey at graduation and 3, 6 and 11 months after graduation (a response rate of 81%). Of the 295 graduates who responded, 237 (80%) were employed, 6 (2%) were unemployed, 44 (15%) were pursuing further education and 8 (3%) were neither seeking work nor pursuing further education.

Destination of 2009 - 2010 Graduates by Specialty Area (Data Gathered 11 Months After Graduation)																			
Department	Government (Federal/ State/Local)		Nonprofit/ NGO		Hospital/ Health care		Private Practice		University/ Research		Proprietary Organization		Employment sector unspecified		Further Education		Not seeking work or education		Un-employed		Total
BIOS	0	0%	0	0%	1	50%	0	0%	0	0%	0	0%	0	0%	1	50%	0	0%	0	0%	2
BSHE	22	33%	6	9%	8	12%	0	0%	12	18%	5	7%	1	1%	10	15%	2	3%	1	1%	67
CMPH	3	15%	2	10%	5	25%	1	5%	6	30%	0	0%	2	10%	0	0%	0	0%	1	5%	20
EOH	7	33%	3	14%	2	10%	0	0%	3	14%	1	5%	2	10%	2	10%	0	0%	1	5%	21
EPI	20	32%	10	16%	8	13%	0	0%	9	15%	3	5%	0	0%	11	18%	1	2%	0	0%	62
GH	22	31%	6	8%	9	13%	0	0%	11	15%	2	3%	1	1%	15	21%	4	6%	1	1%	71
HPM	12	23%	3	6%	13	25%	1	2%	10	19%	4	8%	1	2%	5	10%	1	2%	2	4%	52
Grand Total	86	29%	30	10%	46	16%	2	1%	51	17%	15	5%	7	2%	44	15%	8	3%	6	2%	295

2010 - 2011, 6 months after Graduation

Two hundred and ninety five of the 413 graduates from 2010 - 2011 completed the GradInfo survey at graduation, three and six months after graduation (a response rate of 71%). Of the 295 graduates who responded, 273(92%) were employed or continuing their education, 8 (3%) were unemployed and 14 (5%) were neither seeking work nor pursuing further education.

Destination of 2010 – 2011 Graduates by Specialty Area (Data Gathered at Time of Graduation)																			
Department	Government (Federal/ State/Local)		Nonprofit/ NGO		Hospital/ Health care		Private Practice		University/ Research		Proprietary Organization		Employment sector unspecified		Further Education		Not seeking work or education		Un-employed		Total
BIOS	2	25%	0	0%	0	0%	0	0%	3	38%	1	13%	0	0%	2	25%	0	0%	0	0%	**8**
BSHE	13	19%	7	10%	1	1%	2	3%	19	27%	6	9%	5	7%	11	16%	3	4%	3	4%	**70**
CMPH	6	30%	3	15%	1	5%	0	0%	5	25%	2	10%	1	5%	0	0%	2	10%	0	0%	**20**
EOH	6	25%	3	13%	0	0%	0	0%	8	33%	3	13%	1	4%	2	8%	1	4%	0	0%	**24**
EPI	25	36%	3	4%	4	6%	0	0%	18	26%	2	3%	7	10%	5	7%	3	4%	2	3%	**69**
GH	11	18%	11	18%	3	5%	0	0%	14	23%	4	7%	5	8%	6	10%	3	5%	3	5%	**60**
HPM	5	11%	4	9%	8	18%	1	2%	5	11%	11	25%	1	2%	7	16%	2	5%	0	0%	**44**
Grand Total	**68**	**23%**	**31**	**11%**	**17**	**6%**	**3**	**1%**	**72**	**24%**	**29**	**10%**	**20**	**7%**	**33**	**11%**	**14**	**5%**	**8**	**3%**	**295**

e. **In public health fields where there is certification of professional competence, data on the performance of the school's graduates on these national examinations for each of the last three years.**

Some students elect to take the Certified Health Education Specialist (CHES) Examination. The National Commission for Health Education Credentialing, Inc. reports the following results for RSPH students:

TABLE 2.7e: Proportion of RSPH Students Passing the CHES Examination

Proportion Passing CHES Examination		
Exam Date	**RSPH**	**National**
2011: April	100% (N = 34)	77% (N = 1106)
2010: April &October	97% (N = 38)	74% (N= 1593)
2009: October	92% (N = 12)	78% (N = 499)
2009: April	100% (N = 23)	76% (N = 923)
2008: April & October	100% (N = 22)	79% (N = 1412)

f. **Data describing results from periodic assessments of alumni and employers of graduates regarding the ability of the school's graduates to effectively perform the competencies in a practice setting.**

To gather information regarding the effectiveness and comprehensiveness of the academic program, an Alumni Survey was sent to 700 young alumni who completed their degree between 2008 – 2010. Of the 700 surveyed, 141 responded, providing a 20% response rate. Of the 20% that responded, 90% are employed, 8% are pursuing an additional degree, 1% are unemployed and 1% are currently not pursuing employment due to personal reasons.

Of the categories of employment, government employment, including federal, state and local, is the most common with 40% of respondents identifying their work as this category. Twenty-five percent of respondents work in a university/research setting and 13% for non-governmental organizations.

Of the 141 that replied, 88% felt their MPH/MSPH degree was valuable in the job market. The most useful skills cited in the survey were research, qualitative data collection and analysis, program monitoring and evaluation and proposal/grant writing. Seventy-four percent of graduates responding were satisfied with their skills and competencies developed at the Rollins School of Public Health.

The most common skills that graduates would have wanted to develop further while at the Rollins School of Public Health included financial skills, program management, statistical skills, such as using STATA and SPSS instead of SAS, epidemiological skills, grant writing, public speaking and Microsoft Excel. Feedback from employers will be collected during the November 2011 meeting of the Community Advisory Board to complement the information gathered from young alumni.

g. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school adopts multiple indicators of competence among students in required areas of performance.
- The school initiated a survey of graduates and their self-assessment of competencies for practice that will be used by departments in the assessment of their training programs.
- The school and university initiated annual outcome assessments conducted by each program requiring direct and indirect observations by faculty of student performance and, when necessary, the development of plans to change the training programs to improve outcomes.
- RSPH students perform better than the norm on the Certified Health Education Specialist exam.

Lessons Learned:
- The school needs to revise its methodology used for administering the *GradInfo* survey, so as to achieve higher response rates following graduation. In addition, the school should consider adding a qualitative component to determine the underlying factors that occur with unemployed students at 3, 6 and 11 months.

2.8   Other Professional Degrees

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

Required Documentation:

a. Identification of professional degree curricula offered by the school, other than those preparing primarily for public health careers, and a description of the requirements for each.

N/A

b. Identification of the manner in which these curricula assure grounding in public health core knowledge. If this means is common across these other professional degree programs, it need be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program.

N/A

c. Assessment of the extent to which this criterion is met.

N/A

**2.9	Academic Degrees**

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

Required Documentation. The self-study document should include the following:

**a.	Identification of all academic degree programs, by degree and area of specialization. The instructional matrix may be referenced for this purpose.**

See Instructional Matrix (Criterion 2.1) for the list of academic degree programs.   The specific academic requirements for each of the doctoral programs are available on line:

- Behavioral Sciences and Health Education
  [http://www.sph.emory.edu/cms/departments_centers/bshe/bshe_phd.html]
- Biostatistics and Bioinformatics
  [http://www.sph.emory.edu/cms/departments_centers/bios/degree_programs/phd.html]
- Environmental Health Sciences
  [http://www.sph.emory.edu/cms/departments_centers/eh/phd/index.html]
- Epidemiology
  [http://www.sph.emory.edu/cms/departments_centers/epi/degree_programs/phd_programs.html]
- Health Services Research and Health Policy
  [http://www.sph.emory.edu/cms/departments_centers/hpm/about/doctoral_program.html]

**b.	Identification of the means by which the school assures that students in research curricula acquire a public health orientation. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

Background
All doctoral programs are offered through the Laney Graduate School but each of the programs in public health sciences has the autonomy to develop its curriculum and evaluate student performance. Programs are administered by academic departments and led by an appointed faculty member called the Director of Graduate Studies (DGS).

Approximately half of all doctoral students in the public health science programs have earned an MPH degree or its equivalent, contributing to a public health orientation.

Common Experiences
All students in doctoral programs taught by the Rollins School of Public Health (i.e., the public health sciences) also share common experiences. As of fall 2011, all doctoral students are required to enroll in a course, *Translational and Interdisciplinary Public Health Research*. This course focuses on how research in each discipline of public health may be disseminated and put into practice, contributing to the improvement of population health. This course also lays the foundation for students to move beyond disciplinary silos common to doctoral work and enrich their studies through multiple

perspectives. To both of these ends, this course prepares students to understand the language and approaches of several disciplines comprising the field of public health (in academia and practice), thereby fostering greater potential for collaboration and improvement in population health. Each departmental program offers illustrations of how research is translated into practice. The syllabus is on file and available on site in the resource room.

Student course evaluation results from the fall 2011 *Translational and Interdisciplinary Public Health Research* course were very positive and reinforced the value in bringing together all doctoral students for a broader exposure to public health. When students were asked what the most important things they learned from the course were, they mentioned:

- Getting to meet other PhD students and faculty members in a discussion-based environment
- Finding the synergies among public health disciplines
- Realizing how much other PH disciplines have to offer as collaborators
- Seeing the real world application of future research careers
- How to communicate with people in other disciplines and lay audiences
- Learning the perspectives/values/skill sets of other PH disciplines
- What translation is and why it is important: *"There's so much work that needs to be done in translating evidence from research into actionable knowledge."*

Faculty who provided seminar lectures in the *Translational and Interdisciplinary Public Health Research* course reported that they enjoyed their interaction with the doctoral students, recognized the value in such a course and supported the continuation of this course for all first year doctoral students

Students also obtain a broader public health perspective by taking courses with students from other doctoral programs in the school as students are eligible, and sometimes required, to take courses in several departments. Doctoral students also participate in colloquia offered by all departments and attend public health grand rounds presentations. Students in all doctoral programs except Health Services Research and Health Policy (HSRSP) enroll in epidemiology courses as required or elective courses. Students in HSRHP are required to enroll either in econometric or social science research design and methods courses which provides basic competencies for their analytic work. HSRHP student are exposed to epidemiology through the Translational and Interdisciplinary Public Health Research course.

The Laney Graduate School requires all doctoral students complete the Teaching Assistant and Teacher Training Opportunity Program (TATTO) that involves common courses or workshops on the development of teaching skills. As part of the TATTO program, the school offers a required course for doctoral students in the public health sciences on teaching as applied to public health. The Laney Graduate School also requires all doctoral students enroll in a program on research ethics that it annually sponsors.

Academic Studies
Students in all doctoral programs are encouraged to enroll in advanced courses offered to MPH or MSPH students. In some cases, the master level courses provide competencies that students may need for completing doctoral studies and thus may be required (e.g., epidemiology and analytic methods).

c. **Identification of the culminating experience required for each degree program. If this is common across the school's academic degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program.**

All doctoral students complete a dissertation based on original empirical research. Students are supervised by a faculty advisor and are supported by a committee of faculty members with expertise in the student's area of investigation. Dissertation proposals must be approved by a faculty committee, and the final product is reviewed during a formal public defense. Dissertations may be a single monograph or a series of three articles linked together with an introduction and conclusion. More detailed descriptions of doctoral program requirements are found on their web sites listed in 2.9a.

d. **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- Students in academic degree programs receive a broad introduction to public health and how their discipline contributes to achieving the goals of public health.
- The school brings doctoral students in all of its programs together for a shared course on translational and interdisciplinary research—putting research into public health practice and working in multi-disciplinary teams — thereby creating a larger learning cohort and broader exposure to the field of public health.

Lessons Learned:
- Students entering doctoral programs in the public health sciences both with and without a background in public health are introduced to the importance of translational research in public health.
- Faculty from departments in all the core areas of public health participate in the translational and interdisciplinary research course.
- Faculty who provide seminar lectures in the PhD *Translational and Interdisciplinary Public Health Research* course report that they enjoyed their interaction with the doctoral students and support continuation of this course for all first year doctoral students.

2.10   Doctoral Degrees

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

Required Documentation:

a. **Identification of all doctoral programs offered by the school, by degree and area of specialization. The instructional matrix may be referenced for this purpose. If the school is a new applicant and has graduates from only one doctoral program, a description of plans and a timetable for graduating students from the other two doctoral programs must be presented, with university documentation supporting the school's projections.**

See Instructional Matrix (Criterion 2.1) for the list of doctoral degrees offered by the school. Detailed requirements for each program are included on the program websites listed in 2.9a.

b. **Data on the number of active students in each doctoral degree program as well as applications, acceptances, enrollments and graduates for the last three years.**

Table 2.10a provides the data on the number of active students in each doctoral degree program as well as applications, acceptances, enrollments and graduates for the last three years. Table 2.10a.i provides data on the total number of active doctoral students for the last three years.

Table 2.10a: Number of Active Students in Each Doctoral Degree Program for the Past Three Years						
Department and Degree	**School Year**	**Applicants**	**Accepted**	**Enrolled**	**Total Active**	**Graduates**
Behavioral Sciences and Health Education (BSHE) *– PhD in Behavioral Sciences and Health Education*	**2008 - 2009**	52	7	1	16	2
	2009 - 2010	40	4	4	18	4
	2010 - 2011	49	8	4	18	3
Biostatistics and Bioinformatics (BIOS) – *PhD in Biostatistics*	**2008 - 2009**	63	14	8	33	5
	2009 - 2010	79	6	6	33	2
	2010 - 2011	124	15	6	33	7
Environmental Health (EH) *-- PhD in Environmental Health Sciences*	**2010 - 2011***	----	----	----	----	----
Epidemiology (EPI) -- *PhD in Epidemiology*	**2008 - 2009**	64	15	8	38	5
	2009 - 2010	92	9	8	39	7
	2010 - 2011	116	21	12	45	4
Health Policy and Management (HPM) – *PhD in Health Services Research and Health Policy*	**2008 - 2009**	37	7	3	11	0
	2009 - 2010	44	5	3	14	3
	2010 - 2011	65	4	3	14	1

* PhD in Environmental Health Sciences admitted its first class of doctoral students in Fall 2011.

Table 2.10a.i: Total Number of Active Doctoral Students for the Past Three Years					
School Year	Applicants	Accepted	Enrolled	Total Active	Graduates
2008 - 2009	216	43	20	98	12
2009 - 2010	255	24	21	104	16
2010 - 2011	354	48	25	110	15

Global health faculty, with particular expertise in nutrition, are engaged in the Nutrition and Health Sciences doctoral program which is administered by the Graduate Division of Biological and Biomedical Sciences of the School of Medicine and is offered through the Laney Graduate School. Therefore, the doctoral students in that program are not included in this table.

In 2011, the Laney Graduate School (LGS) decided to recognize the five doctoral programs offered through the RSPH as a group, The Public Health Sciences. Together with the RSPH, the LGS provides stipends to doctoral students in all five programs at a level comparable to National Research Service Award (NRSA) pre-doctoral levels (currently $22,032) for their initial 2 or 3 years of study, after which students are supported by training, research or dissertation grants. The LGS also covers all tuition costs for doctoral students and provides health insurance. Doctoral programs admit only the number of students for whom they can provide stipends and tuition coverage.

c.   **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- The school offers five doctoral degree programs, one in each of the five areas of basic public health knowledge.
- The school added a new doctoral program, Environmental Health Sciences, in 2011-12.
- The graduate school recently joined the RSPH in increasing their financial commitment to support and grow doctoral programs in public health.
- Doctoral students are well supported. All entering doctoral students receive stipends at the NRSA level for at least two years, after which students are supported on research, training or dissertation grants. The graduate school also covers tuition and health insurance.

Lessons Learned
- The school needs to expand is externally funded research base in order to build enrollment in doctoral programs. The school should invest in administrative support for faculty in the writing and administering training grants in order to increase the number of doctoral students.

2.11 Joint Degrees

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

Required Documentation:

a. **Identification of joint degree programs offered by the school and a description of the requirements for each.**

Programs*
Consistent with the school's objective to encourage interdisciplinary and inter-school training, the Rollins School of Public Health (RSPH) offers several dual degree programs. They include offering the MPH in combination with degrees from five schools (Medicine, Law, Nursing, Business and Theology) and two graduate programs (Physician

*Note that RSPH refers to degree programs with other Emory University schools as *dual degrees*. Such programs are described in this section. Competencies and requirements for the MPH are identical for dual degree students and students completing the MPH alone.   RSPH also offers MPH/MSPH degree programs offered *jointly* by departments such as the MPH in Global Environmental Health and the MPH/MSPH in Global Epidemiology, included in the instructional matrix in section 2.1.

MPH Requirements for Students in Dual Degree Programs
The RSPH works in partnership with Emory graduate schools to give students the opportunity for interdisciplinary studies at Emory University. Students must apply to and be accepted into each School separately in order to be eligible for a dual degree.

All dual-degree students complete 42 semester hours required for the MPH, including the core courses, required courses for their program, practicum and the culminating experience. The dual degree programs allow students to count 10 hours of departmentally approved course work in their other academic program towards the MPH degree. In essence, these courses are used as *elective* courses for the MPH degree. The competencies for the MPH through a dual-degree program are identical to those of students pursuing the MPH degree alone.

Dual-degree students must enroll for a minimum of two full-time semesters in the RSPH and complete all core courses and required courses for their program, a practicum and the culminating experience for their concentration. Because 10 hours of credit in the other program are counted as elective hours toward the MPH degree, the MPH degree is not awarded until the requirements for both degrees are completed.

Requirements for each dual-degree are included in the school catalog (online at http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html). In addition, handouts about the dual degree are disseminated to dual degree students at a spring informational meeting and available in our resource room.

Advisement of Students in Dual Degree Programs
Student advisement occurs in the MPH department in which dual degree students enroll. Like all MPH/MSPH students, dual-degree students are advised by the department ADAP and a faculty member.

A staff advisor in the RSPH Office of Admissions and Student Services oversees and coordinates all dual degree programs. This staff person plans for the orientation of dual degree students as they enter the MPH portion of the program. Orientation sessions are held in the spring semester prior to their enrollment and at the start of the academic year.

<u>BA/MSPH Program in Mathematics and Biostatistics and Bioinformatics and BS/MPH Program in Environmental Studies and Environmental Health</u>
The school offers, in cooperation with the undergraduate college Department of Mathematics, a 5-Year BS/MSPH program in Biostatistics and Bioinformatics and, with the Department of Environmental Studies, a 5-Year BS/MPH program in Environmental Studies and Environmental Health. This is not technically a dual-degree program as these exceptional students complete the requirements for both the BA in mathematics and MSPH in Biostatistics and Bioinformatics or BS in Environmental Studies and MPH in Environmental Health. Competencies for the MPH or MSPH are identical to those for students completing the MPH or MSPH program alone.

This program allows undergraduates to take RSPH courses in their fourth or senior year (up to 10 semester hours) and apply them to both the baccalaureate degree in Emory College and the MPH or MSPH degree in the school of public health. Upon graduation from the baccalaureate program, they enter the school of public health to complete the MPH or MSPH degree. Information about the BA/MSPH and BS/MPH programs are available on site in the Resource Room.

<u>Dual Degree Student Enrollment</u>
Table 2.11a provides data on the number of dual degree students enrolled in the RSPH for the last three years in total and by program.

Table 2.11a: Dual Degree Student Enrollment*

Number of Dual Degree Students Enrolled in the RSPH, in Total and by Program			
	2008 – 2009	**2009 – 2010**	**2010 - 2011**
DPT/MPH	0	0	1
JD/MPH	5	6	1
MBA/MPH	1	3	3
MD/MPH	14	20	26
MDIV/MPH	0	2	0
MSN/MPH	2	5	14
MTS/MPH	0	1	0
PA/MPH	7	4	3
TOTAL Dual Degree Students	29	41	48

*Table does not include the two BA/BS-MPH/MSPH programs.

b. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The requirements for dual degree students are identical to those of students completing the MPH or MSPH program alone.
- The school offers an array of dual degree programs that are experiencing a growth in enrollment.
- The staff advisor for dual programs works to ensure a smooth transition for dual students from other schools to RSPH.
- The field of public health is well served by having more professionals practice with a background in the field.

Lessons Learned:
- Dual degree programs require careful coordination by both participating schools because of the complexity associated with meeting the academic requirements of both programs along with the managing of services by the university registrar, bursar and office of financial aid.
- Having a dedicated staff advisor to handle dual degree students helps ensure a quality experience for the students and the faculty.

2.12   Distance Education or Executive Degree Programs

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

   Required Documentation:

a. **Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The instructional matrix may be referenced for this purpose.**

The RSPH offers the distance education-based Career MPH (CMPH) degree program for working health professionals. The Career MPH program is in direct response to the school's objective to "train professionals in the public health workforce." The CMPH program offers concentrations ("tracks") in: (1) Applied Epidemiology; (2) Applied Public Health Informatics (first cohort started fall 2011); (3) Healthcare Outcomes; and (4) Prevention Science. In October 2011, the decision was made to phase out the Healthcare Outcomes track. Therefore the last cohort of Healthcare Outcomes students was admitted in fall 2010. These students will continue in the program through fall 2013.

Using the cohort that enrolled in the Career MPH program in fall 2011 as an example, the average age of this cohort is 36 years with an average of 8 years of work experience. These 66 individuals currently reside in 13 states and France. Career MPH students include:

- Environmental Health Specialist in a local public health district where she works in four counties to implement county-wide programs (e.g., sewage management, food service, body art establishments, tourist accommodations, public pools and spas) for compliance, monitoring, enforcement and corrective action.
- Operations Research Analyst at CDC where one of her roles is to manage the distribution of influenza vaccine to state and local health departments.
- Quality Control Technician at the American Red Cross where she performs quality control on products, reagents and equipment to ensure safe and effective products are released to the public.
- Assistant Director for the Guinea Worm Eradication Program at The Carter Center where he has been working to eradicate guinea worm in Ethiopia.
- Biologist working in a research lab at St. Jude Children's Research Hospital.
- Registered Dental Hygienist where she has seen the detrimental effects that tobacco and diabetes have on oral health.

- Vice President of Clinical Operations for a company that provides dialysis services to 12,000 patients nationwide.

The Career MPH program is staffed with a part-time chair (0.50 FTE program administration; 0.20 FTE teaching), full-time academic advisor (ADAP) (1.0 FTE), three full-time instructional designers (3.0 FTE), full-time course support manager (1.0 FTE), part-time multimedia developers (0.20 FTE), and part-time administrative support (0.75 FTE). Each track has a faculty member who serves as the associate director and is responsible for oversight of that track (0.10) (e.g., admissions, curricular issues, faculty selection and student advisement for discipline-specific issues). The program reports to the associate dean for applied public health (see figure 2.12a). In addition, similar to the traditional degree programs, all CMPH programs of study and courses are approved by the RSPH Education Committee.

Figure 2.12a: CMPH Organizational Chart
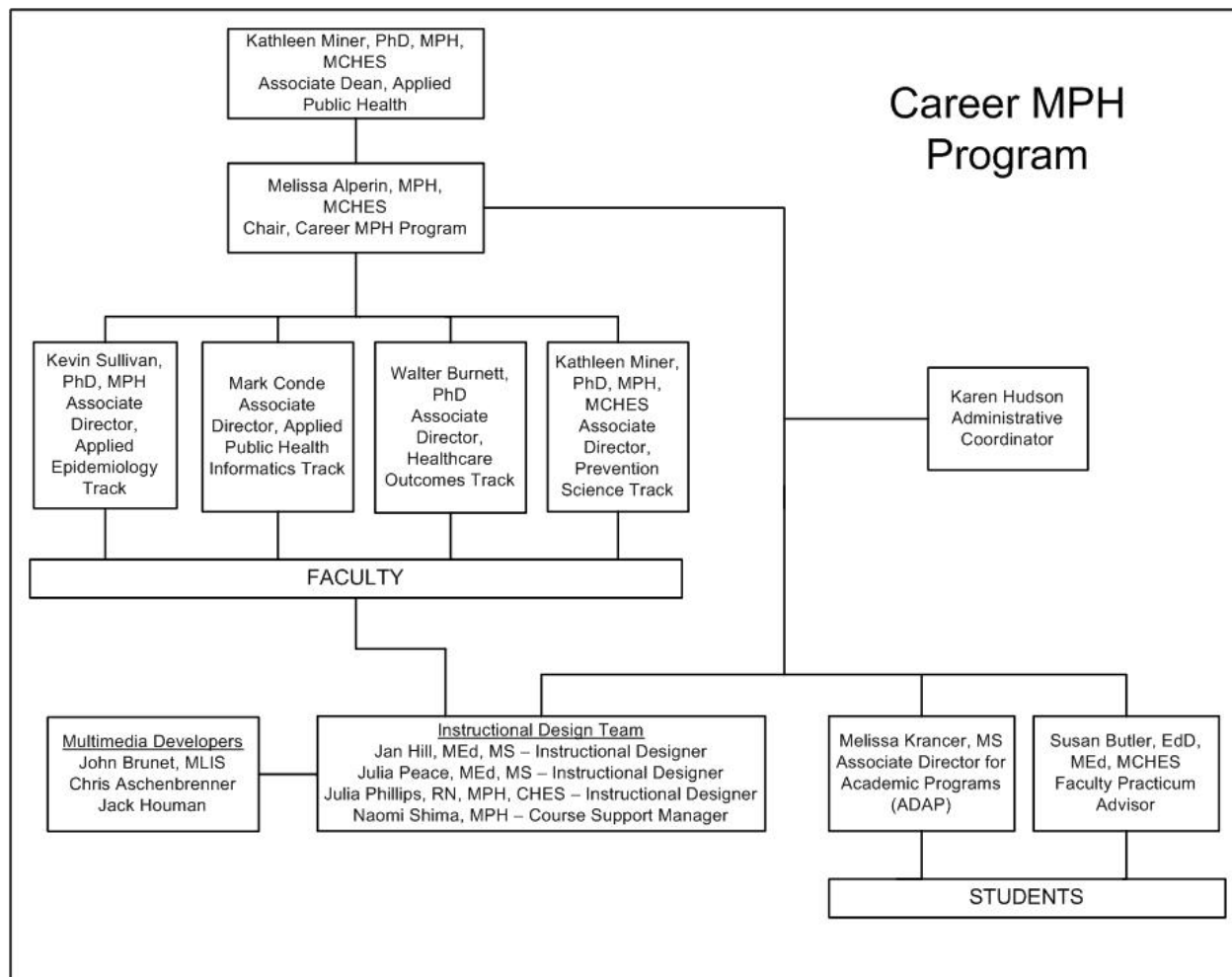
The CMPH degrees are included in the instructional matrix (Criterion 2.1).

b. Description of the distance education or executive degree programs, including an explanation of the model or methods used, the school's rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the school, and the manner in which it evaluates the educational outcomes, as well as the format and methodologies.

Strategy

The RSPH distance education program uses web-based technologies to provide effective, engaging and easily accessible graduate courses to further the education and skills of individuals in the public health workforce. For each 2-credit course, the web-based technologies are anchored by six hours of on-campus classroom instruction, at both the beginning and end of each semester. Students are expected to pay for their own travel to Emory and accommodations for these on-campus weekends, although the program secures an affordable rate at a nearby hotel that offers a free shuttle to campus. The Career MPH program's strategy is achieved through courses that are highly interactive, based on sound educational principles and theories, the use of standardized comprehensive evaluations and collaborative efforts among faculty from academia and practice settings.

Admission

Other than the requirement for a minimum of 3 to 5 years of professional experience, the basic requirements for acceptance into the Career MPH are the same as the traditional curriculum, including satisfactory GPA and GRE scores, a personal narrative and two letters of recommendation. The one exception is that students applying for the Prevention Science track or the Applied Public Health Informatics track can request to waive the standardized test score. Faculty in these two tracks have determined that the GRE is not always the best indicator of success in the program or success in the public health practice arena for the CMPH applicant who is a working professional and may have received formal education years earlier. Faculty reviewing these applicants assess the applicant's verbal and quantitative skills through previous coursework, current and previous professional experience and the written personal narrative. On the other hand, because students in the Applied Epidemiology and Healthcare Outcomes tracks take three semesters of quantitative courses, the faculty felt it was important to review quantitative GRE scores for these applicants. While making these decisions, the CMPH program also researched other professional programs on campus and determined that applicants to the Executive MBA programs may waive the standardized test requirement. Faculty in the CMPH program have developed guidelines which allow for the expedited review of applications that meet identified criteria. When applications for admissions do not meet these criteria, the applications are reviewed by the program chair and/or track associate directors and other faculty, as needed.

Tuition and fees for the CMPH program are determined on a per credit hour basis (e.g., in 2010-2011, tuition was $1200 per credit hour). This tuition structure differs from the traditional MPH program, where students taking 9 or more credits per semester pay a flat fee per semester based on the length of their degree program (3 or 4 semesters). In the CMPH program, students take 6 credits or less per semester and therefore, the tuition structure is based on a per-credit-hour model.

Program Structure

The structure of the Career MPH program is a mixed format design and students must complete 42 credits hours at the RSPH. Each semester-length course begins and ends on campus over "long weekends" from Friday morning through Sunday afternoon, during which each 2-credit course meets

for 6 hours of instructional time. The remaining course work occurs during the 12-week distance-based sessions using the Blackboard education technology platform. Blackboard is a course management system that is maintained at the university level. It has tools – including course content areas, discussion forums, wikis, blogs, group areas, gradebook, that allow faculty to deliver course material and assess student learning in a collaborative and interactive manner.

The Career MPH design requires students to take the five required core courses (six as of fall 2011) as listed in Criterion 2.6 and track courses in one of four areas: (1) Applied Epidemiology; (2) Applied Public Health Informatics (starting fall 2011); (3) Healthcare Outcomes; and (4) Prevention Science. In addition, all CMPH students take course work that includes competencies in the following areas: public health informatics, evaluation, surveillance, and advocacy or ethics. All CMPH students complete a 2-credit practicum under the guidance of a site supervisor and culminating thesis (formerly called special studies project) under the guidance of a faculty member. In spring 2011, the CMPH chair and associate directors met and decided to formally change the name of the culminating experience from special studies project to thesis. (CMPH Thesis Manual and CMPH Student Manual are available in the Resource Room.)

With the exception of 1-hour seminars for Prevention Science students, all classes are 2 credit hours each. A student taking a full load of courses takes 6 hours of credit each semester and can complete the degree in seven semesters.

Student Support
All student support services provided to students in the traditional program are available to the Career MPH students, including academic advisement, access to faculty and program administrators, library and participation in special seminars and/or presentations by public health leaders. The program has a student manual which provides information including program overview, learning at a distance, computing requirements, course listings and track information, core and program competencies, important dates, academic policies and procedures, and student finances. (CMPH Student Manual is available in the Resource Room)

Academic Advising: Academic advising is handled by the associate director of academic programs (ADAP), which is a full-time position with the Career MPH program. The Career MPH program's ADAP is available to students via telephone, email or in person. During the on-campus weekends, the Career MPH ADAP is available to meet individually with students. If the ADAP is temporarily unavailable, the Career MPH chair can advise students.

Technology Support and Class Monitoring: Faculty in the Career MPH program work with an instructional design team (instructional designer and course support manager) to develop and implement their Career MPH course. During the semester, these individuals and the course faculty monitor the course sites for logistical questions and any technical issues that might arise. Students are therefore able to receive quick resolution to any logistical or technology questions. Technical issues that cannot be handled by the instructional design team are sent to the Rollins School of Public Health IT Help Desk or the Blackboard Help Desk on the main campus.

Practicum Advisement: In addition to the RSPH Office of Career Services, the Career MPH program has a dedicated 0.5 FTE practicum faculty advisor dedicated to working with Career MPH students to identify, implement and document the practicum requirement. Career MPH students, like all students at Rollins,

document their practicum experience(s) in the RSPH Practicum Web Client database. In 2009, the Career MPH program sought and received permission from the school's Education Committee to add 2 credit hours to the practicum requirement for Career MPH students. This decision allowed for the additional professionalization of the practicum requirement for Career MPH students many of whom hold a senior status within their work agencies. Career MPH students present their practicum project(s) during a poster session held during the on-campus weekends and students have access to a dedicated 0.5 FTE practicum faculty advisor who also provides practicum opportunity guidance and coordinates the poster sessions.

Career Services: Career MPH students have access to the RSPH Office of Career Services via email, phone or in person. During the on campus sessions, staff from the RSPH Office of Career Services will meet with the Career MPH students to talk about issues of relevance to the students (e.g., leveraging the MPH degree, transitioning to a new position, how to seek a federal job, practicum opportunities, etc.).

Library Access: Career MPH students have access to the Emory University Library System and its resources via the Internet. Many courses use Reserves Direct to link students to textbook chapters or eJournal articles. One of the reference librarians from the Health Sciences Library is on the Career MPH program's student and faculty listservs and available to answer questions via email, phone or in person. This reference librarian also conducts EndNote sessions for Career MPH students several times each academic year. In spring 2011, the Woodruff Library and Laney Graduate School created a new pilot writing support service for graduate students that is also available to CMPH students.

RSPH Office of Admissions and Student Services (including RSPH Office of Enrollment Services): Career MPH students have access to the RSPH Office of Admissions and Student Services including the RSPH Office of Enrollment Services, which serves in a liaison capacity to university-wide services including financial aid, registrar and disability services. Within the RSPH Office of Enrollment Services, Career MPH students interact with both the director and associate director.

Scholarships: Career MPH students have access to merit scholarship funds. As other funding is available, Career MPH students have access to additional scholarships, such as the Hearst Foundation scholarships available to students who work in rural Georgia; Georgia Health Foundation scholarships specific to Career MPH students who work in rural Georgia in governmental public health agencies; and the Sencer scholarship, awarded to an individual who is employed in state or local public health department.

Orientation Program (Online, In-person): Students in the Career MPH program participate in a comprehensive orientation program, which includes a facilitated 10-day online class that introduces students to Career MPH courses and the Blackboard learning platform. This online orientation, PRS 500D: Strategies and Resources for Online Learning (0 credits), introduces students to the design and structure of CMPH courses, provides instruction on course navigation and the use of Blackboard Tools and simulates activities that students will encounter in their academic courses. Assignments throughout the online orientation prepare students for the Career MPH program. Career MPH students also participate in a half-day in-person orientation where they interact with Career MPH administration and staff, representatives from the Woodruff Health Sciences Library, and RSPH Office of Career Services. During the in-person orientation, students also learn more about the practicum requirement and talk with a panel of Career MPH students.

Saturday Lecture Series: The Career MPH program offers a Saturday lecture series for students two to three times each year. The lectures feature public health leaders and have included: Stanley O. Foster, MD, MPH; Maureen Lichtveld, MD, MPH; Kimberly Rask, MD, PhD; and Anne Spaulding, MD, MPH. The Saturday lectures have also included students presenting their practica and presentations by other offices on campus (e.g., Student Counseling Services talking about stress management).

Student Government Association (SGA): Like other academic departments in the school, the Career MPH program has a student representative on the Rollins School of Public Health SGA. Several times since April 2009, the RSPH Student Government Association has held a popular social event (Convos on Tap) during Career MPH weekends so that Career MPH students could participate. In September 2010, the Career MPH representative to SGA organized a Ben & Jerry's Ice Cream Social for Career MPH students and in November 2011, a hot beverage break (tea, lattes, hot chocolate) was organized.

Curriculum and Competencies
As is true for the traditional degree programs, all Career MPH students are expected to achieve the RSPH core public health competencies through their courses of study (see the complete list of RSPH core public health competencies in Criterion 2.6).

Table 2.12b indicates the existing competency sets used as reference to develop competencies for each of the four Career MPH tracks, including:

Table 2.12b: Referenced Competency Sets used to Develop Competencies for CMPH Tracks

Concentration/Track	Referenced Competencies
Applied Epidemiology	The Applied Epidemiology competencies were modified from the Department of Epidemiology's competencies which were developed from the MPH Core Competency Model – Epidemiology competencies (ASPH), Core Competencies for Public Health Professionals (Council on Linkages), and Applied Epidemiology Competencies (CSTE, CDC).
Applied PH Informatics	The Applied PH Informatics competencies are drawn from the Informatics Competencies for Public Health Professionals (Centers for Disease Control and Prevention and the University of Washington Northwest Center for Public Health Practice).
Healthcare Outcomes	The Healthcare Outcomes competencies are drawn from and/or modified from the MPH Core Competency Model – Health Policy and Management, Epidemiology, and cross-cutting competencies (ASPH).
Prevention Science	The Prevention Science competencies were drawn from the Competencies for Certified Health Education Specialists (National Commission for Health Education Credentialing, Inc.) and Core Competencies for Public Health Professionals (Council on Linkages).

Instruction
As a program for working professionals, the Career MPH seeks out faculty who represent both academic public health and public health practice. The current faculty members who teach in the Career MPH include core RSPH faculty and a number of other faculty with adjunct appointments who work at the CDC and other public health agencies. This approach allows students to learn from individuals who are

leaders in their fields based on their academic preparation and/or extensive experience in the field. This is especially important in emerging fields such as public health informatics. The program has a faculty manual which provides information about teaching in the CMPH program, adult learning theory, communication and technology information, and programmatic information. (CMPH Faculty Manual is available in the Resource Room) Instruction in the Career MPH program is tailored for the adult learner. This is demonstrated in several ways which include the use of relevant examples for students; ability of students to immediately use course content in their professional work; and feedback mechanisms between faculty and students. All courses are evaluated using the standard MPH course evaluation with additional questions specific to the CMPH program (see Appendix 2.12.b.1). In addition, all faculty complete an evaluation each semester that they teach. (See Appendix 2.12.b.2)

Student-Faculty Ratio
The CMPH is not a department with its own designated faculty, line of research, or service income. It draws its budget exclusively from tuition revenue. In addition, its students pay tuition by the credit hour, which as previously mentioned, is a variation from the traditional program. Thus, in order to determine an assessment of faculty to student commitment requires taking into account both the faculty time spent in teaching assigned courses and the time spent in thesis advisement and directed studies courses, which are not compensated instructional activities.

Table 2.12b.i: Career MPH Student-Faculty Ratios

Academic Year	Total Faculty HC[1]	Faculty FTE[2]			Total Student HC[3]	Total Student FTE[4]	SFR by Total Faculty FTE[5]
		Compensated	Uncompensated	Total			
2008-09	28	4.35	6.25	10.6	95	82.36	7.77
2009-10	34	5.25	6.70	11.95	106	89.37	7.48
2010-11	35	5.15	7.60	12.75	118	101.33	7.95

Key:
HC = Head count
FTE = Full-time-equivalent.
Compensated = The CMPH program draws on faculty resources from throughout the school, so the Compensated Faculty FTE is based on 0.05 for each credit hour taught, 0.10 for associate directors, and specific coverage of the faculty practicum advisor and program chair.
Uncompensated = Uncompensated faculty effort is based on 0.05 for each credit hour of Directed Study and Thesis hours taken.
SFR = Student/Faculty Ratio

1. Head count of faculty (both compensated and uncompensated) contributing to the CMPH teaching program
2. Faculty FTE includes compensated, uncompensated and total full-time-equivalents.
3. Total HC of students
4. FTE conversion of students (Hours/6 HRS per FTE) = #FTEs
5. SFR by Total Faculty FTE = Total Student FTE /Total Faculty FTE

In the 2010-2011 academic year, in addition to individual course evaluations, the Career MPH program assessed the achievement of the following three objectives:

1. Develop skills for the distance-learning environment.
2. Apply graduate level skills in an applied public health context.
3. Apply analytic methods to a public health issue.

1. Develop skills for the distance-learning environment. Student achievement of this objective was measured by examining student performance through the successful completion of PRS 500D: Strategies and Resources for Online Learning and student perception of how well PRS 500D prepared them for distance-learning environment.

Findings: One hundred percent of students (n=48) received a grade of Satisfactory for PRS 500D and when asked what the most valuable aspects of PRS 500D were, students stated:
- Good overview of online learning environment
- Learning how to use Blackboard was very necessary and needed.
- A great way to meet your classmates and get comfortable with the online tools
- Fantastic-It would have been a nightmare to start a full load of classes without the Blackboard course. I appreciate the time and effort in developing this activity.
- Learning the skills necessary to operate the tools on the Blackboard system.

Action Plans: As of the 2010-11 academic year, PRS 500D is a 0 credit course that shows up on each student's transcript. In the future, the Career MPH program will continue to emphasize the importance of participating in PRS 500D. Program faculty and the instructional design team will assess the content of PRS 500D and determine whether any changes need to be made. While program faculty are asked to assess whether students are academically prepared for their courses, the program will consider asking faculty whether the students have the necessary Blackboard and technology skills to succeed in the distance-learning environment.

2. Apply graduate level skills in an applied public health context. Student achievement of this objective was measured by examining the practicum evaluations by both students and practicum site supervisors. Achievement was also measured by student presentations of their practicum experiences at on-campus sessions.

Findings: The RSPH Practicum Web Client database contains practicum information for CMPH students who graduated in 2010 – 2011. These individuals completed a total of 25 practicum experiences, totaling 4672 hours (average of 246 practicum hours per student). Supervisor evaluations indicated that 100% of the students achieved all of their stated objectives. In addition, when asked if the student would apply for a position in their agency, 88% of the supervisors said they would "strongly recommend" the student; 4% would "recommend with reservation" the student; and 8% did not respond. When students were asked about the level of guidance/ mentorship from their site supervisor, in 76% of the practicum experiences they said it exceeded expectations and 24% met expectations. When students were asked about the professional feedback and/or suggestions provided from their site supervisor, in 72% of the practicum experiences they said it exceeded expectations and 28% met expectations. During 2010-2011, 5 practicum experiences were presented to CMPH faculty and students as poster presentations. The requirements to present practicum experiences started with the fall 2009

cohort of students who are not slated to graduate until December 2011 at the earliest.

Action Plans: The Career MPH program's faculty practicum advisor will continue to work with students to identify appropriate practicum experiences for CMPH students who are working professionals. In addition to meeting individually with students, program's faculty practicum advisor will hold a practicum session for students in their first summer or second fall to discuss the practicum requirement and answer any questions.

3. Apply analytic methods to a public health issue. Student achievement of this objective was measured by examining student completion of the culminating experience (thesis) and their thesis defense to a faculty committee. The Career MPH program's participation in the Charles C. Shepard Award Symposium, which is a school-wide contest for the best thesis, was also used as a method of assessing this objective.

Findings: During the 2010-2011 academic year, 25 Career MPH students completed their culminating experience. Of these theses, 96% (n=24) were determined to be "excellent" by the Thesis Committee Chair and 4% (n=1) "Good". CMPH faculty nominated Monica Youngblood's thesis (Global Update on the Prevention of Folic Acid-Preventable Spina Bifida and Anencephaly Cases) for the Shepard Award.

Action Plans: The Career MPH program's Thesis Manual has been updated to reflect different types of culminating experiences that can be completed by Career MPH students (e.g., quantitative or qualitative research, program evaluation, curriculum development, needs assessment, grant writing). Conversations with Career MPH students and Thesis Committee Chairs indicate that there are a number of Career MPH students that do not graduate within the 7 semester timeframe because of difficulty identifying appropriate projects/faculty and staying on track while juggling family, work and school. The Career MPH program chair and associate directors will continue to work with students to assist them in the identification of thesis chairs. The program will also continue to offer sessions during on-campus weekends that focus on issues related to the thesis process (e.g., Emory IRB, sessions with Associate Directors of the individual tracks, panels with students/alums to discuss their thesis).

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c. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The distance-based CMPH degree program is consistent with the mission of the school, has clear and well evaluated student outcomes, is subject to quality control comparable to the traditional on-campus programs and includes planned and evaluated learning experiences responsive to the characteristics and needs of adult learners.
- CMPH students have access to same student service resources as traditional students.
- The program has academic rigor (e.g., courses vetted through RSPH Education Committee).
- Faculty is a mix of both academic public health and public health practice, which encourages the translation of public health science into practice.
- The course development model involves interaction between the faculty and instructional designers who ensure the translation of educational materials into effective pedagogy for delivery in an asynchronous environment.
- The instructional process includes both face-to-face and distance methodologies.

Lessons Learned:

- Identifying practicum experiences for working professionals provides an opportunity for creative thinking. The CMPH program hired 0.5 FTE practicum faculty advisor to work with Career MPH students to identify, implement and document the practicum requirement.
- Identifying thesis committee chairs for students who are primarily off-campus is a challenge because students do not have as many opportunities as students in the traditional program to interact informally with non-CMPH faculty. The chair of the CMPH program and the track associate directors have taken a primary role in identifying thesis committee chairs for students. The program should continue to look for opportunities to engage non-CMPH faculty with CMPH students during the on-campus weekends.
- Calculating full time graduate student equivalents who are in a mix format program (part distance part on campus) that are limited to taking only 6 credit hours per semester is a challenge.
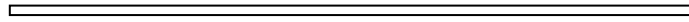
3.0 Creation, Application and Advancement of Knowledge

3.1 **Research**

The school shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

Required Documentation:

a. **A description of the school's research activities, including policies, procedures and practices that support research and scholarly activities.**

Research Activities

Research is one of the principal missions of the Rollins School of Public Health (RSPH) and is reflected in the goal to "advance the science of public health through discovery, dissemination and application of knowledge." Emory University, a Category I Carnegie Research University, places a high value on conducting and disseminating peer-reviewed research and competing for sponsored research projects.

RSPH faculty members conduct research in a variety of areas including practice-based, community-based, clinical and laboratory. Collectively, RSPH faculty members have made notable contributions to knowledge and public health practice.

The school has a comprehensive research base that spans the breadth of the field of public health. All of the critical areas in the field of public health are represented. Many of these areas span multiple departments across the school. Rather than trying to provide a list in this document of the research areas pursued in RSPH, the school will have a complete list of active grants from faculty in the Resource Room. The research portfolio demonstrates the interdisciplinary nature of the school's research programs, including the collaborations that cross departmental and school divisions. The section below highlights some of the school's major research initiatives:

- *The Center for Aids Research (CFAR)*. Co-directed by Dr. James Curran, Dean and Professor of Epidemiology and Dr. Carlos del Rio, Chair of the Hubert Department of Global Health, the CFAR is a university-wide, NIH-funded research collaborative that conducts basic, clinical, translational and social/behavioral research in HIV/AIDS.
- *The Center for Global Safe Water (CGSW)*. Headed by Dr. Christine Moe in the Hubert Department of Global Health, the CGSW conducts applied research, evaluation and training to promote global health equity through universal access to safe water, sanitation and hygiene solutions. The CGSW has received significant funding from the Gates Foundation.
- *The Pneumococcal Molecular Epidemiology Network*. Chaired by Dr. Keith Klugman in the Hubert Department of Global Health, this international research collaborative was established to provide global surveillance of antibiotic resistant *S.pneumoniae* and to standardize nomenclature and classification of resistant clones.
- *The EPA Clean Air Center (Multi-Scale Assessment of Health Effects of Air Pollution Mixtures Using Novel Measurements and Models)*. One of only four centers funded nationwide, this interdisciplinary research initiative headed by Dr. Paige Tolbert in the Department of Environmental Health examines the health impacts of air pollution and provide key data needed

for environmental policy.
- *The Emory Preparedness and Emergency Response Research Center*. Headed by Dr. Ruth Berkelman in the Department of Epidemiology, this CDC-funded research center focuses on novel strategies to prepare for and respond to local, national and global emergencies.
- *Emory Prevention Research Center*. Funded by the CDC and lead by Dr. Michele Kegler, the Emory Prevention Research Center (EPRC) is dedicated to reducing health risks associated with cancer by studying behaviors and environments that support and/or hinder tobacco use, physical activity, and healthy eating. The core research of the EPRC is conducted in the spirit of community-based participatory research and emphasizes understanding and improving social-environmental contexts in rural communities that influence the major risk factors of tobacco use, nutrition, physical activity, and obesity.
- *Research Training Programs in Biostatistics and Bioinformatics.* Dr. Lance Waller, in the Department of Biostatistics and Bioinformatics, leads two NIH-funded research training programs in biostatistics that span the fields of genetics, immunology, imaging, and environmental health.

The recent economic downturn has led to a tightening of funding resources from multiple entities. The American Recovery and Reinvestment Act (ARRA) funding to NIH provided some level of relief for a short period at many institutions but RSPH received little ARRA funding (<2% of annual funding). However, during the past three years RSPH witnessed a significant increase in its research funding base. From 2008-2009 research funding increased from $54M to $60M (10% increase), from 2009-2010 it increased from $60M to $65M (6.7% increase), and from 2010-2011 it increased from $64M to $76M (19% increase). In the past three years the school's research portfolio has increased by an impressive 41%. This increase is due to a combination of factors, including an increase in the number of faculty members and an increase in large center-type grants.

Support for the school's research programs comes from a variety of sources with the National Institutes of Health (NIH) being the largest supporter. The National Institute of Allergy and Infectious Diseases, the National Heart, Lung, and Blood Institute, the National Institute of Human Genome Research, and the National Institute of Environmental Health Sciences provide the most funding. The school's faculty members also receive grant support from the Environmental Protection Agency, the United States Department of Agriculture and the Centers for Disease Control and Prevention. The school also has received significant support from foundations, such as the Gates Foundation. The school's Office of Research has been analyzing the research funding trends to identify opportunities that may help the school's investigators deal with the pending decrease, or at least flattening, of the federal budget.

Figure 3.1a: Research Funding in the Rollins School of Public Health
Out years are projected at a conservative 3% growth.

Sponsored Awards by Fiscal Year (in Millions)
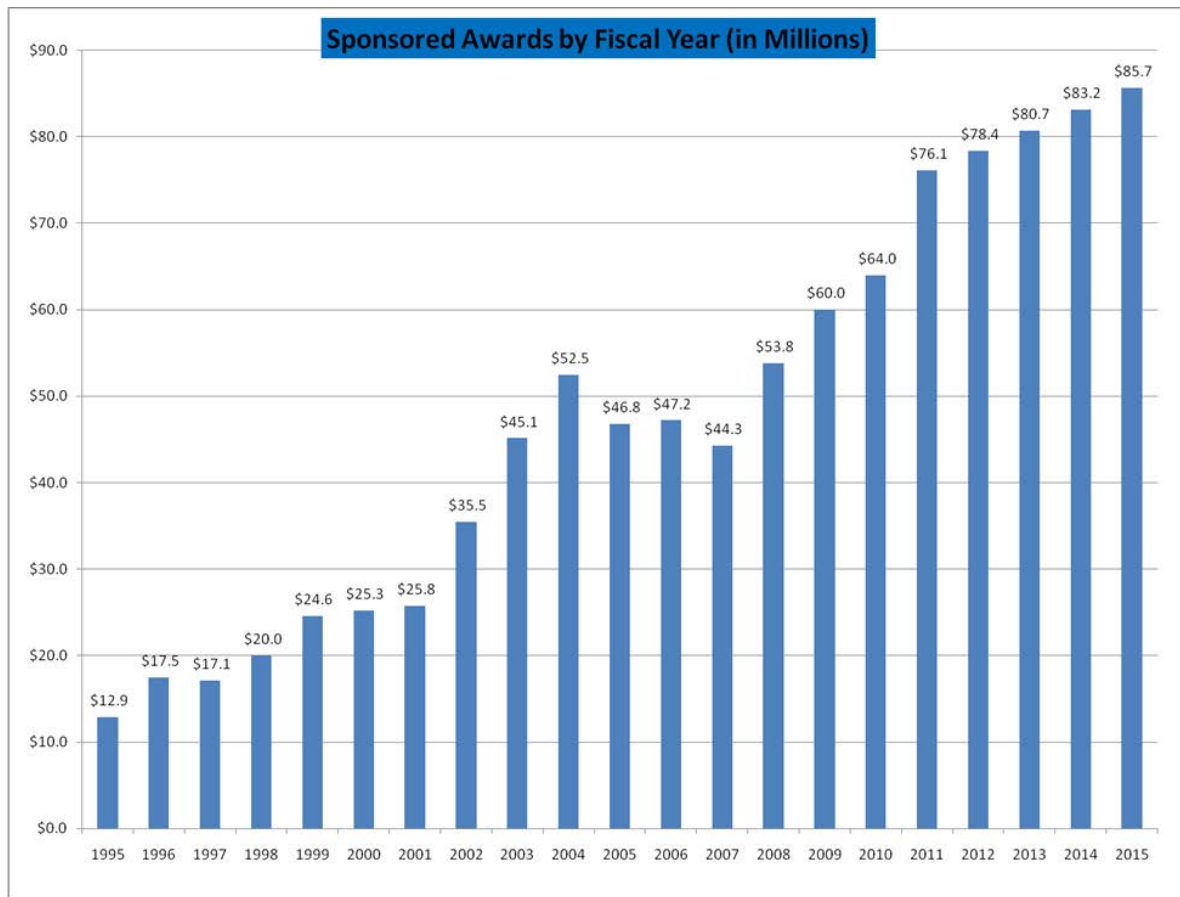
One of the school's strategies has been to build coalitions of investigators with similar interests to pursue multi-investigator training and center grants. Through individual meetings and meetings of the Leadership Group, the associate dean for research promotes these types of activities. The Office of Research has also initiated a new school-wide Public Health Sciences (PHS) Grand Rounds series that aims to introduce faculty to the breadth of research occurring within the school and encourage new collaborations. The PHS Grand Rounds involves a 45 minute lecture from a faculty member followed by 45 minutes of questions and discussions. As part of the PHS Grand Rounds, two sessions are reserved for selected new faculty members to give a 10-15 minute overview of their research programs to introduce them to the entire school. In conjunction with the Office of Academic Affairs, the school is developing strategies to improve infrastructure that will make it easier for faculty to prepare training grants (see below).

Doctoral Programs as Essential Elements of the RSPH Research Program
Doctoral students play a critical role in public health research. RSPH has made a concerted effort to expand and enrich its doctoral training. Many of these topics are covered in other sections of this document, but are worth noting here.

As of June 2010, the school's doctoral programs had very different funding structures and levels of support from the Laney Graduate School (LGS). The doctoral programs in Epidemiology and Biostatistics, which have been in existence since before the founding of RSPH, received significant

support from the Laney Graduate School for student stipends. The doctoral programs in Behavioral Sciences and Health Education and Health Policy and Management received no stipend support from the Laney Graduate School for stipends.

In 2011, the Laney Graduate School (LGS) decided to recognize the five doctoral programs offered through the RSPH as a group, The Public Health Sciences, and apply to them a common business model. Together with the RSPH, the LGS now provides stipends to doctoral students in all five programs at a level comparable to NRSA pre-doctoral levels (currently $22,032) for their initial 2 or 3 years of study, after which students are supported by training, research or dissertation grants. The LGS also covers all tuition costs for doctoral students and provides health insurance. Doctoral programs admit only the number of students for whom they can provide stipends and tuition coverage.

The RSPH is further integrating its programs at didactic and administrative levels. A common course required of all entering doctoral students as of fall 2011, *Translational and Interdisciplinary Public Health Sciences,* is offered and may be expanded.   The school also offers a common course that trains doctoral students for teaching in public health, a course that complements the training for teaching students receive from the graduate school and within their departments. The school is working to better consolidate efforts across programs in student recruitment, orientation and with administrative support for the development and management of training grants.

Complete lists of sponsored awards for research, other sponsored activity and training for the past three years are available in the resource room on site.

Administration of Research Programs at the RSPH
The administration of research programs at the RSPH is conducted by several entities within the school: the Office of Research, the Office of Administration and Finance, departmental administrative staff, and individual faculty. Table 3.1a describes the roles and responsibilities of each of these entities.

Table 3.1a: Administration of RSPH Research Programs

Entity	Research-related Administrative Roles and Responsibilities
Office of Research	The associate dean for research is responsible for facilitating the school's programs of research. Working closely with 12 (2 from each department) other faculty members appointed to the RSPH Research Advisory Committee, the associate dean for research identifies opportunities for collaborative and/or interdisciplinary research and promotes multidisciplinary activities, such as center and training grants. The associate dean also stays abreast of trends among major funding agencies and identifies opportunities for faculty or groups of faculty for sponsored programs of research. The associate dean promotes the school's alignment with research-related strategies, policies and procedures through active participation on the Woodruff Health Sciences Center (WHSC) Research Advisory Committee, the RPSH Research Advisory Committee, the Office of Sponsored Programs Faculty Advisory Board, regular meetings with other associate deans of research in the WHSC and interaction with the relevant university and school offices. The executive associate dean for administration and finance and the assistant dean for research administration assist the associate dean in the research administration compliance efforts (see below).

Entity	Research-related Administrative Roles and Responsibilities
Office of Administration and Finance	The executive associate dean for administration and finance heads the RSPH Business Services Office which provides a range of organizational support for research, including budget preparation for grant and contract proposals and post-award administration. The office has recently added the position assistant dean for research administration to focus on research-specific activities within the office. The office is responsible for assisting faculty with a variety of compliance issues, including adherence to agency regulations, managing conflicts of interest, institutional review board (IRB) and the Health Insurance Portability and Accountability Act (HIPAA). While the assistant dean for research administration is based in the Office of Administration and Finance, this individual works closely with the associate dean for research to optimize systems for pre- and post-award management. Assistance is also available for purchasing and other accounts payable tasks. The human resources arm of the Business Services Office provides support for the process of hiring new research project staff, from developing the initial job description to conducting employee orientation.
Departmental Staff	While the school provides central administrative support for research through these two aforementioned offices, individual departments are responsible for providing clerical support to assist faculty in the preparation of research proposals. This support includes initial preparation of budgets and compilation of grant proposal documents for submission.
Faculty	Faculty members autonomously initiate research in areas of their academic expertise, often collaborating with colleagues who share their interests. Faculty members, as principal investigators, are responsible for administering and managing their sponsored research projects. Senior faculty often help mentor newly recruited junior faculty in developing programs of research. In recent years, the school has supported a grant-writing consultant to work with junior faculty in preparing grants for submission or revising previously reviewed proposals.

Policies and Procedures
Policies and procedures related to research are posted on the Faculty Page of the school's website at http://www.sph.emory.edu/cms/about/faculty_resources.html. Most university policies are included in the *Faculty Handbook*, available at
http://provost.emory.edu/faculty/Document%20clearinghouse/Index.html and in the resource room on site. This section below describes research-related policies.

Expected Effort in Research
- All tenure-track faculty members are expected to engage in research pertinent to the recognition, characterization and resolution of health problems in human populations.
- Full-time tenure-track faculty members normally maintain programs of research or related activities that fund roughly two-thirds to three-fourths of their 12-month salary (the rest coming from teaching and administrative efforts); however, this does vary by department. Extramural funding may support a greater proportion of nontenure-track faculty members, that is, those on a research or clinical track. Those recruited to junior faculty positions are generally supported by departmental funds for a period of 2 to 4 years (departmental funds typically decrease each

year so that a first year faculty member may be fully supported by the department but only receive 50% in year 2 and 25% in year 3), until they have an opportunity to develop funded programs of research. The RSPH policy is to assign equal weight in the evaluation of research accomplishments for raises and promotion whether it be practice-based, clinical, laboratory or community-based research.

Policies for Those Engaged in Research
- **Conflicts of Interest.** All faculty members who apply for external funding at the university level must report any potential conflicts of interest and, if appropriate, certify that no conflicts exist. Potential conflicts of interest are referred to the university Conflict of Interest Committee (http://www.coi.emory.edu/) to determine whether a conflict exists, whether it is manageable and what steps must be taken in the conduct of the research. Faculty members also complete, for the university, an annual declaration of conflicts of interest at the school level. The latter helps identify potential conflicts that may not be identified in a specific research project, but that may influence research programs.
- **HIPAA Compliance**. All faculty members must adhere to university policies on confidentiality adopted in compliance with the Health Insurance Portability and Accountability Act (HIPAA).
- **Institutional Review Board.** All faculty members, students and research staff who engage in human-related research and faculty members who supervise student research must be certified by the Institutional Review Board (IRB) as having been trained in the ethics, policies and procedures associated with human subject research. Certification is obtained by achieving the learning objectives of the IRB educational program as demonstrated on a web-based examination accessed through the IRB main website (http://www.irb.emory.edu/).
- **Responsible Conduct of Research.** All RSPH doctoral and post-doctoral students must satisfactorily complete a research ethics course, *Values in Science, IBS 606*, offered by the Emory Center for Ethics.
- **Biosafety Concerns.** Investigators working with biological agents (body fluids) or recombinant DNA must obtain approval from the Institutional Health and Biosafety Committee.
- **Animal Research.** Investigators working with laboratory animals must obtain approval from the Institutional Animal Care and Use Committee.

Procedures and Resource Allocation
- All research proposals must be routed through the school's Office of Administration and Finance and, when approved, through the university's Office of Sponsored Programs.
- Principal investigators are responsible for the management of funded projects.
- Indirect cost recovery is used to support research activity in the school, and approximately 20% is distributed to departments; some departments distribute a portion of that revenue directly to investigators for the support of their research.
- All full-time faculty members are assigned office space in the Grace Crum Rollins Building (GCR), the Claudia Nance Rollins Building (CNR) or in nearby locations such as the Emory Briarcliff Campus, approximately one mile from the main university campus, or 1599 Clifton Road Building, approximately one block away.   The executive associate dean for administration and finance, in consultation with the associate deans, oversees space allocation for research. In the case of laboratory space allocation, the associate dean for research makes recommendations to the executive associate dean for administration and finance.

b. A description of current community-based research activities and/or those undertaken in collaboration with health agencies and community-based organizations. Formal research agreements with such agencies should be identified.

In fiscal year 2011, 64% of sponsored research awards were directed to community-based research. Table 3.1b shows community based research awards in domestic and international locations for the past three years. A complete listing of the awards is available in the resource room.

Table 3.1b: Community Based Research			
Number of Dollars (Research Awards)			
	FY 2009	**FY 2010**	**FY 2011**
Domestic	$25,736,872 (95)	$26,668,117 (93)	$35,542,536 (105)
International	$1,664,712 (22)	$1,149,204 (27)	$13,262,612 (35)
Total	$27,401,584 (117)	$27,401,584 (120)	$48,805,148 (140)

It is rare that the school has formal agreements with community based organizations and agencies as part of a research program. Typically goods and services are not exchanged. The school does have a large number of MOUs with organizations participating in the Rollins Practical Experience Program. Many of these community based experiences involved student research, but these activities are not captured in the list of sponsored research awards. (See section 1.6k for a list of MOUs.)

Community-based research and related activities within RSPH are defined as those that include:
1. Population-based data collection within a community by researchers or students (community-based participatory intervention);
2. Program evaluation that involves identified stakeholder impact (utility-focused evaluation);
3. Programs of institutional design and delivery for public health practitioners; or
4. Technical assistance to state and local health departments, for example, the Tobacco Technical Assistance Consortium.

The RSPH definition of community-based activities excludes research that involves third-party secondary data analysis, even if the data were community driven; theoretical framework development or modeling; and clinical treatment services, for example, the collection of data in a hospital or clinic.

c. A list of current research activity of all primary and secondary faculty identified in Criterion 4.1.a. and 4.1.b., including amount and source of funds, for each of the last three years. This data must be presented in table format and include at least the following information organized by department, specialty area or other organizational unit as appropriate to the school: a) principal investigator, b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year's award, g) whether research is community based, and h) whether research provides for student involvement. Only research funding should be reported here; extramural funding for service or training grants should be reported elsewhere.

A complete list of the research activity of core and other faculty for each of the last 3 years is included in Appendix 3.1.c.

d. Identification of measures by which the school may evaluate the success of its research activities, along with data regarding the school's performance against those measures for each of the last three years. For example, schools may track dollar amounts of research funding, significance of findings (eg, citation references), extent of research translation (eg, adoption by policy or statute), dissemination (eg, publications in peer-reviewed publications, presentations at professional meetings), and other indicators.

Success in research is measured by several objectives that support the RSPH goals to:
- Educate individuals for leadership in community health promotion and disease prevention in populations around the world; and,
- Advance the science of public health through discovery, dissemination and application of knowledge.

Two key indicators of the success of the school's research activities over the past 3 academic years are per capita dollars in extramural funding and the mean number of publications in the peer-reviewed literature. Additional indicators of success include the various honors bestowed on faculty, based primarily on their contributions to research (see Appendix 3.1.d.) and the level of interdisciplinary scholarship. Table 3.1d summarizes the goals, objectives and measures the school uses to measure the success of its research activities.

Annual reports from faculty
Faculty members are asked to provide annual reports of activities to their respective department chairs. Accomplishments in research are a major component of the annual report. Copies of the *Annual Report* for the last three years are found in the Resource Room.

Table 3.1d: Outcome Measures to Evaluate the Success of Research Activities

OBJECTIVE	OUTCOME MEASURE	YEAR 1 2008-09	YEAR 2 2009-10	YEAR 3 2010-11
Goal I: Objective D: Engage students in collaborative research and practice with faculty and other public health professionals	Number of co- authored presentations at professional meetings with faculty members	Not reported this yr	61	133
	Number of published or accepted articles by faculty with student co-authors	Not reported this yr	238	274
	Number of students employed on research projects	210	230	300
	Number of RSPH Merit Scholars with research assistantships	30	32	32
Goal II: Objective B: Advance public health discovery through externally funded scholarship	Sponsored Awards • Total sponsored awards • Increase in sponsored awards over previous year • Total research awards • Per capita for tenured and tenure-track faculty • Per capita for all faculty who support the research program	$60.0 m 12% $46.9 m $603,620 $364,617	$64.6 m 8% $52.9 m $639,710 $377,766	$76.1 m 18% $65.4 m $723,927 $441,157
	Amount of awards from the National Institutes of Health (NIH)	$21.7 m	$24.3 m	$31.1 m
	Annual increase in NIH funding	6%	10.7%	29%
	Amount of all federal awards	$43.3 m	$40.0 m	$45.0 m
	Non-Federal Funding	$16.7 m	$24.1 m	$31.1 m
Goal II: Objective C: Disseminate research findings through publications	Total (T) and per capita (P/C) number of faculty published or accepted refereed articles	Total: 862 P/C: 8.3	Total: 830 P/C: 6.6	Total: 1288 P/C 9.3
	Number of faculty-authored book chapters	133	88	74
	Number of faculty-edited or -authored books	12	10	14
	Number of faculty presentations at professional meetings	661	611	689
Goal II: Objective D: Promote interdisciplinary, applied scholarship	• Number of sponsored collaborative research awards including faculty from more than one department or school	80	91	84
	• Proportion of collaborative awards of all research awards	38%	41%	35%

e.   A description of student involvement in research.

MPH/MSPH students are involved in research in various ways, including thesis research, student research assistants, merit scholars, student research activity outside the school and authorship of presentations or peer-reviewed papers in collaboration with faculty. The number of students involved in each of these research-related activities for the past 3 years is included on Table 3.1e.

Thesis Research
All students complete a thesis, special study or capstone project as a culminating experience. Doctoral students complete a dissertation. Theses and dissertations (and some special study and capstone projects) involve original research. Some thesis and dissertation activity is related to research projects of faculty and of professionals at neighboring public health or health institutions (e.g., CDC, American Cancer Society). In 2010-2011, 114 theses were completed in collaboration with public health organizations or agencies and 8 special study projects were completed in collaboration with community and/or public health organizations.

Student Research Assistants
Many students are employed by research projects and programs associated with RSPH faculty members, professional staff and interdisciplinary teams. Some students work without compensation, e.g., when they use some portion of a faculty research project for a thesis. Table 3.1e shows the number of students who were paid employees over the past 3 years; the majority of them provided assistance on research projects.

Table 3.1e: MPH/MSPH Students Involved in Research Sponsored Projects for the Past 3 Years

Students involved in Research Sponsored Projects			
Year	Head count of students	Estimated number of hours students are employed on projects	Dollars spent supporting students
2008-2009	210	46,222	$734,911
2009-2010	230	54,766	$801,015
2010-2011	300	63,125	$929,981

Table 3.1e.i: Other indicators of students' involvement in research-related Activities for the past 3 years

Year	Students Completing Theses	Student Assistants Employed by RSPH	Merit Scholars	Student co-authored presentations with faculty at professional meetings	Student co-authorships with faculty on publications or in press
2008-2009	235	236	30	Not reported	Not reported
2009-2010	262	281	32	61*	238
2010-2011	238	466	32	133	274

*2009-2010 was the first year of reporting these data in annual reports and thus, as a transitional year, faculty under-reported presentations with students.

Merit Scholars
The RSPH MPH/MSPH merit scholars are promising students who receive four semesters of research assistantship support. Such students, recommended by their departments and selected by a committee

represented by all departments, receive either full or partial support for tuition, as well as a research assistantship for each of four semesters.

Doctoral Students
Doctoral programs focus on training students for research (much of it applied research). Students are generally selected for admission to doctoral programs because of a demonstrated aptitude for scientific investigation that links to existing faculty research activity in a specific department. Following 2 years of stipend support, doctoral students are expected to be covered on grant support by their faculty mentors. All doctoral students complete a dissertation based on empirical research that is either written in narrative form or as a series of three publishable journal articles integrated with a common introduction and conclusion. Doctoral students are expected to author or co-author published articles in peer-reviewed journals during their program of study.

Student Research Activity outside the RSPH
Some students are involved in research activity outside the school through internships and other work arrangements, often supported by previous federal work-study funds or the RSPH Practical Experience Program.

Authorship of Presentations or Peer-Reviewed Papers in Collaboration with Faculty
Many MPH/MSPH (and doctoral) students co-author published papers or presentations in collaboration with faculty. Faculty members report student co-authors of publications at the end of each academic year as part of their annual report.

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f.   Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school's program of research is consistent with its mission and engages faculty and students in contributing to the knowledge base and practice of public health.
- The school has an active and growing program of extramurally funded research.
- Many faculty and students collaborate on research activity, publications and presentations.
- Students are well integrated into the school's research program.
- The school's growing doctoral programs provide superb training opportunities for students and enhance research programs by providing highly qualified collaborators for faculty research projects.
- The school provides an infrastructure that supports research.

Lessons learned:
- The school has experienced dramatic growth in its research program and must be prepared for a diminished increase in available funds.
- Effective research administration is required to coordinate the many units engaged with developing, submitting and administering grants.
- Student involvement in research activities is under-reported because only collaborative work with faculty is currently captured. Thus, the school needs to develop a formal mechanism to collect these types of data.

- Diversified research base has its advantages. The loss of one particular funding base, e.g., ARRA NIH funds, has not had a dramatic impact on the school's research funding.
- There is a benefit to having both masters and doctoral levels students involved in research.
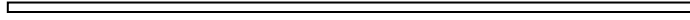
3.2   Service

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

Required Documentation:

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a. **A description of the school's service activities, including policies, procedures and practices that support service. If the school has formal contracts or agreements with external agencies, these should be noted.**

Service in Support of Mission and Goals
Service is reflected in the RSPH goal, to "build capacity in the public health workforce and support the continuing education of graduates while contributing to efforts that promote health and prevent disease in populations around the world."

The school has traditionally viewed paid or unpaid service as having two dimensions: supporting the activities of the academic community and contributing to the practice of public health. Service includes:
- participating on professional or academic committees;
- teaching continuing education courses;
- contributing to public health practice through consultation and instructional programs (e.g., service learning, practica and theses); and
- delivering public health training programs funded through grants, contracts and formal agreements.

Activities related to training and workforce development will be described more fully in Criterion 3.3.

RSPH reflects an academic culture that values service and the majority of faculty and students contribute to the school's service goals. In particular, the school's tenure and promotion policies embrace a commitment to service excellence and include indicators that measure such service (See *APT Guidelines* in Appendix 1.5.a).

Rewards for Service or Public Health Practice
Inspired by the ASPH publication, *Demonstrating Excellence in Academic Public Health Practice*, in 2001 RSPH developed and adopted guidelines for the tenure and promotion of faculty who demonstrate excellence in service.   These *APT (Advancement, Promotion and Tenure) Guidelines* are available in Appendix 1.5.a) and posted on the web at
http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf.

In the past 3 years, all tenure-track faculty members who were promoted to associate or full professor met the guidelines for being "very good" in service, and two faculty members were promoted based on meeting the criteria of "excellence" in service. In 1998, the school adopted a nontenure-track category of "clinical" faculty for those who mainly focus on public health practice or instruction. Faculty members in those ranks are also eligible for promotion under the APT Guidelines.

Organizational Support for Service

Office of the Associate Dean for Applied Public Health:

The position of associate dean for applied public health, part of the administrative staff of the school, was created to initiate and manage programs that link the school with the public health practice community, including private corporations, and the federal, state and local governmental agencies in the surrounding area. Through grants and other extramural revenue sources, the office of the associate dean for applied public health oversees several centers that provide a linkage between the school and community. These centers and their service efforts are described below.

Tobacco Technical Assistance Consortium (TTAC): TTAC is a national network of tobacco educators and technical consultants who provide information resources to state and local tobacco prevention and control programs. TTAC began in 2001 with funding from the American Cancer Society, the American Legacy Foundation and the Robert Wood Johnson Foundation and is currently funded by contracts from CDC and state and local public health agencies. TTAC has provided technical assistance consultations and training programs to more than 1000 clients in all 50 states plus Micronesia, Virgin Islands, Puerto Rico and Guam.

Diabetes Training and Technical Assistance Center (DTTAC): Modeled after TTAC and funded by CDC, DTTAC is dedicated to assisting local, state and national partners develop and expand highly effective diabetes prevention and control programs. DTTAC works with local volunteer and community agencies that provide proven primary prevention diabetes training programs. DTTAC staff and consultants provide timely, targeted diabetes education focusing on a "train the trainer" model. DTTAC provides unique and results-oriented services for primary prevention diabetes programs nationwide.

Emory Public Health Training Center (PHTC): Funded by HRSA, the Emory PHTC is a learning community designed to build competence in the current and future public health workforce, expose public health students to the value of working in underserved areas and advocate for public health systems and policies. It assesses the competency-based needs of the public health workforce in underserved areas of Georgia, provides competency-based education and training to improve the capacity of the public health workforce in underserved areas of Georgia and educates boards of health members about current public health issues in order to create stronger public health systems.

Southeastern Institute for Training and Evaluation (SITE): Founded in 1995, SITE designs and offers training programs under contracts with public health organizations and agencies, including the CDC. Recent short courses have included Basic Principles of Public Health (Part 1 and Part 2), Introduction to Public Health Policy, Public Health Advocacy and Policy Development, Introduction to Surveillance and Public Health Program Management. SITE also contracts with community agencies and organizations to provide them with assistance, including program evaluation.

Service Programs Located Within Departments:

In addition to the service provided by some of the centers included in 3.1a, the following two centers are particularly notable:

Biostatistics Consulting Center: The Biostatistics Consulting Center (BCC) within the Department of Biostatistics and Bioinformatics offers comprehensive technical assistance, statistical consultation and computational services to faculty, staff and students in the RSPH, other divisions of the Woodruff Health Sciences Center and throughout the university.

Interfaith Health Program: Located in the Hubert Department of Global Health, this program is funded from grants and contracts. The Interfaith Health Program collaborates with faculty from other Emory schools and is recognized nationally and globally as a leader in fostering health equity through capacity building and mobilization of faith-based community assets in alignment with public health partners.

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b.   **A list of the school's current service activities, including identification of the community groups and nature of the activity, over the last three years.**

In addition to the activities listed in section 3.2.a, RSPH faculty members are involved in many other service activities. Faculty members list all service activities as part of their annual report and a full listing of all service activities are included in the department annual reports for the past three years available in the resource room.   A table listing the communities, agencies and programs served by faculty (board members, advisory panels, consultants, technical assistance, etc.) over the past three years is included in Appendix 3.2.b. This table does not include faculty service to professional associations, research groups, journals or editorial boards and NIH study sections. The number of activities reported by faculty over the past three years by type of service is reported in Table 3.2c.

Several school projects administered by faculty and staff provide services to community agencies, organizations and programs. Some are listed in 3.2a but some are research groups that also provide service in the form of technical assistance and consultation or training and evaluation. A partial list of the recipients of this service is found in Table 3.2.b on the next two pages.

Table 3.2.b: Community Agencies, Organizations and Programs Served by School-Based Programs	
Tobacco Technical Assistance Consortium (TTAC) and	
Diabetes Training and Technical Assistance Center (DTTAC)	
Louisiana Public Health Institute	South Dakota Human Services Agency
The Rapides Foundation	Multi-State Collaborative for Health Systems Change
Oklahoma Tobacco Settlement Endowment Trust	Guiding Right, Inc.
Central Louisiana Area Health Education Center	Latino Community Development Agency
Southwest Louisiana Area Health Education Center	Osage Nation
Partnership for Healthy Mississippi	Breakfree Alliance
American Legacy Foundation	National Latino Tobacco Control Network-Latino
Black Hills Special Services Cooperative	Saludables Sin Tobacco
The Next Step Network, Inc., Guymon, OK	Canadian County for Children and Families, OK
Missouri Breaks Research Industries, SD	Gateway to Prevention and Recovery, Shawnee, OK
Great Plains Tribal Chairman's Health Board, SD	LeFlore County Youth Services, Inc, Poteau, OK
Cankdeska Cikana Community College, SD	Ki Bois Community Action Foundation, Stigler, OK
Enemy Swim Day School, SD	Northwest Family Services, Inc, Alva, OK
Crow Creek Tribal School, SD	Rural Health Projects, Inc, Enid, OK
Timber Lake School, SD	
Center for Global Safe Water	
African Medical Research Foundation (Tanzania)	REST (Ethiopia)
CARE (Kenya, Ethiopia, Mali)	Kalihiwot Church (Ethiopia)
Catholic Relief Services (Kenya)	Kenya Water and Health Organization (Kenya)
Food for the Hungary (Kenya)	Sustainable Aid in Africa (Kenya)
Millennium Water Alliance (Kenya, Ethiopia)	UNICEF (global, Uzbekistan, Kyrgistan, Malawi, Uganda,
Oxfam (Mali)	East Timor, Phillipines, Mali)
Save the Children (Kenya, Mali)	Water.org (Kenya)
	WaterAid (Ethiopia, Mali)
Emory Preparedness and Emergency Response Research Center	
Local Government Public Health:	*Professional Associations*
San Diego County Health Services	Association of Schools of Public Health
Marion County Health and Hospital Corporation	MVP- Association of Immunization Managers
Denver Public Health Department	National Commission on Correctional Healthcare
Miami/Dade Health Department	American Health Care Association
Madison County Public Health Department	California Association of Health Facilities
Madison County Emergency Management	California Association for Health Services at Home
San Diego County Emergency Management	Florida Health Care Association
City of Austin Office of Homeland Security	Georgia Association of Home Health Agencies
Coastal Health District of Georgia Department of	Home Care Association of Florida
Emergency Preparedness	Kentucky Association of Health Facilities
	Kentucky Home Health Association
Federal Government Public Health:	Maine Health Care Association
Centers for Disease Control and Prevention	National Association for Home Care and Hospice
Federal Bureau of Prisons	Southeastern Kidney Council
MVP- Administration on Aging	San Diego Chapter of the California Association of
Agency for Healthcare Research and Quality	Health Facilities
Centers for Medicare and Medicaid Services (CMS)	Wisconsin Health Care Association
Office of the Assistant Secretary for Preparedness and	American College of Obstetricians and Gynecologists
Response- Healthcare Systems Preparedness	National Commission on Corrections Healthcare
Programs	Association of State and Territorial Health Officials
	National Association of County and City Health
Private Sector	Officials
Ethica Health and Retirement Communities	
RBC Limited	

Table 3.2.b: Community Agencies, Organizations and Programs Served by School-Based Programs	
Emory Prevention Research Center	

Mini-grant & technical assistance recipients
   Atlanta Lesbian Health Initiative (Atlanta, GA)
   Berrien County Collaborative (Nashville, GA)
   BPSOS, Inc. (Atlanta, GA)
   Cook County Commission for Children and Youth (Sparks, GA)
   Network of Trust Family Matters (Albany, GA)
   New Birth Fellowship Church (Albany, GA)
   Oakridge Baptist Church (Albany, GA)
   Pleasant Grove Complex Center, Inc. (Pelham, GA)
   Phoebe Putney Medical Center (Albany, GA)
   Samaritan Clinic (Albany, GA)
   Shaw Industries Group, Inc. Plant 70 & 86 (Bainbridge, GA)
   South Georgia Medical Center (Valdosta, GA)
   Southwest Georgia Council on Aging (Albany, GA)
   Spring Creek Health Cooperative (Blakely, GA)
   Sylvester New Beginning Missionary Baptist Church (Thomasville, GA)
   Thomasville Comm. Resource Cntr (Thomasville, GA)
   Tift County School System (Tifton, Georgia)
   Union Mission Outreach Center, Inc. (Albany, GA)

Other Financial Support/Primary Community Partner
   Southwest Georgia Cancer Coalition (Albany, GA)

Trainings
   Albany New Life, Inc. (Albany, GA)
   Albany State University (Albany, GA)
   Bethany Congregational Church (Thomasville, GA)
   Redmond Occupational Health (Rome, GA)
   Central Georgia Community Development, Inc. (Warner Robins, GA)
   Chattooga County Health Dept. (Summerville, GA)
   Chosen To Conquer, Inc (Albany, GA)
   City of Albany (Albany, GA)
   City of Albany Recreation & Parks Dept (Albany, GA)
   Clinch County Family Connection (Homerville, GA)
   Columbus State University (Columbus, GA)
   Curtis and Elizabeth Anderson Cancer Institute (Savannah, GA)
   Columbus Regional Healthcare Syst (Columbus, GA)
   Dougherty County Health Department (Albany, GA)
   Family Visions Outreach, Inc. (Sylvester, GA)
   Floyd County Health Department (Rome, GA)
   Foundation for a Healthy Kentucky (Louisville, KY)
   Gordon Hospital (Adairsville, GA)
   House of Mercy Comm. Outreach Center (Albany, GA)
   Irwin County Family Connection (Ocilla, GA)

John B Amos Cancer Center (Columbus, GA)
Lee County Family Connection (Leesburg, GA)
Lighten Your Load Ministries/GA Partnership for TeleHealth (Albany, GA)
Lowndes County Partnership for Health (Valdosta, GA)
Mt Early Health Ministry (Albany, GA)
Moultrie YMCA (Moultrie, GA)
New Visions Community Development Corp, Inc. (Albany, GA)
Northwest GA Healthcare Partnership (Dalton, GA)
Northwest GA Public Health District (Rome, GA)
Northwest GA Regional Cancer Coalition (Rome, GA)
Oakridge Baptist Church (Albany, GA)
Open Arms, Inc. (Albany, GA)
Pataula Center for Children (Blakely, GA)
Phoebe Putney Memorial Hospital (Albany, GA)
Polk Medical Center (Cedartown, GA)
Redmond Regional Medical Center (Rome, GA)
Shorter University (Rome, GA)
South Georgia Partnership to End Homelessness (Valdosta, GA)
South West Georgia Project (Albany, GA)
Southern GA Area Agency on Aging (Waycross, GA)
Southwest GA Cancer Coalition (Albany, GA)
Southwest GA Public Health District (Albany, GA)
Southwest GA Resource Center, Inc. (Sylvester, GA)
Strive2Thrive (Albany, GA)
TEACH Outreach Ministries (Valdosta, GA)
The YBA Project, Inc. (Albany, GA)
Thomasville Community Resource Center (Thomasville, GA)
Tift County Schools (Tifton, GA)
Uplift, Incorporated (Morven, GA)
Valley Healthcare System, Inc. (Columbus, GA)
WCHD District Clinical Services (Columbus, GA)
West Central GA Cancer Coalition (Atlanta, GA)

Technical Assistance and Evaluation to Local Governments
   Albany Fire Department (Albany, GA)
   City of Americus (Americus, GA)
   Mississippi State Dept of Health (Jackson, MS)

Technical Assistance and Evaluation to Community Based Organizations (CBOs)
   Chosen to Conquer (Albany, GA)
   My Brother's Keeper (Jackson, MS)
   Samaritan Clinic (Albany, GA)
   Southwest GA Cancer Coalition (Albany, GA)
   Youth Becoming Healthy (Albany, GA)

c. Identification of the measures by which the school may evaluate the success of its service program, along with data regarding the school's performance against those measures for each of the last three years.

Success in the school's service program is measured by indicators of RSPH's ability to build capacity in the public health workforce, support the continuing education of graduates and promote health and prevent disease in populations around the world.

The key indicators of the success of the school's service program over the past 3 academic years relate to faculty leadership in public health organizations and service that promotes the health of the community.   Table 3.2c summarizes measures of the success of its service program. Numbers of students engaged in service are reported in Table 3.2.d in the next section.

Table 3.2c: Number of Selected Types of Service Activities Reported by RSPH Faculty

Selected Types of Service Activities Reported	2008-2009	2009-2010	2010-2011
Editorial boards/editorships	98	121	121
Referee for articles (journals)	110	124	140
Peer reviews of research (NIH panels, etc.)	19	44	50
Consultant, technical assistance or advisory member to national or international organization	243	220	186
Panels, boards and programs of associations served by faculty	175	228	265
Leadership roles in professional associations	21	43	53

d. A description of student involvement in service.

Students are involved in community service through a variety of school- and university-supported initiatives. A university program supports school activities that encourage *service-learning*. The RSPH offers programs providing students with paid internships in public health agencies and organizations, supporting travel to countries outside the US for field experiences and facilitating transition to service in the US Peace Corps. Students are also required to enroll in a public health practicum. Individually and through more than a dozen student organizations, students volunteer their time for community service.

RSPH Community-Engaged Learning Initiative**:**
The Emory Office of University-Community Partnerships supports the RSPH Community-Engaged Learning Initiative that institutionalizes and strengthens capacity for scholarship and community service opportunities for public health students in concert with community needs in the Atlanta area.   This initiative assists the school in organizing and promoting community-engaged learning (or service learning) in curricular, co-curricular and extra-curricular activities.

This initiative aims to:
- Build and strengthen partnerships between faculty, students and community organizations
- Support faculty in cultivating, nurturing and maintaining community partnerships for adding or strengthening community components of course offerings
- Connect students to sustainable, skill-building, community-engaged learning opportunities that serve communities in need and enrich their public health experience

- Provide infrastructure for communications and dialogue about community-engaged learning among students, faculty and community partners
- Share best practices of community-engaged learning across Emory University and at the local and national level

The initiative has enabled the school to:
- Assist faculty in building service-learning components into their courses e.g., community needs assessment, program evaluation, etc.
- Develop and strengthen co-curricular and extra-curricular programs that link students to opportunities for service to the community, e.g., refugee support program
- Further develop the Masters International Program (described below)
- Maintain the "Rollins-teers" program (described below), which facilitates volunteer activities in community-based organizations and charitable agencies

Emory Public Health Training Center (Emory PHTC)
The Emory PHTC funded by HRSA in 2010 is a training program for both individuals in practice and students in academic programs who want to have opportunities to work in public health agencies while attending graduate school. These funds have helped RSPH develop two graduate student programs: 150 hour student placements during the academic year and placing students for extended 12 week internships during the summer semester. For more information see Table 3.3a.

Rollins Practical Experience Program
In 2010, the school launched the Rollins Practical Experience Program, enabling students to find employment in area public health agencies, programs and institutions and be compensated by matched funding shared by RSPH and the employer. In 2010-2011, 325 students worked in more than 60 health and public health sites through this program. If the employment is structured, mentored and evaluated in accordance with practicum guidelines, the employment may be used to meet the practicum requirement.

Global Field Experiences (GFE)
Three endowment funds (Eugene J. Gangarosa Fund, The Anne E. and William A. Foege Global Health Fund, and the O.C. Hubert Charitable Trust), support the Global Field Experience, which began in 1996. Students submit proposals to engage in international field experiences, sometimes structured as a practicum or designed to facilitate thesis research. Since its inception, nearly 800 students have participated in overseas thesis research and practicum opportunities, most lasting 3 months during the summer. The number of students participating in the GFE program for the past 3 years is as follows: 78 students during academic year 2008 – 2009; 67 students during academic year 2009 – 2010; and, 56 students during academic year 2010 – 2011. A list of 2010-2011 Global Field Experiences is found in Appendix 3.2.d.1.

Masters International Program
The RSPH offers a Master of Public Health degree in conjunction with the Peace Corps' Master's International (MI) program for students planning to enter to Peace Corps. MI students enroll in a special seminar that is led by an RSPH staff member with the assistance of returned Peace Corps volunteers (Peace Corps Fellows). The intent is to prepare students to apply their public health expertise in the field. These students are also provided with opportunities for domestic community service that may prepare them for work abroad when they serve in the Peace Corps. A description of this program and its

community partners is found in the promotional materials located in Appendix 3.2.d.2.

Rollins-teer
As a part of RSPH Fall Orientation, each incoming student participates in a day of service around metro Atlanta. On this day, students, along with faculty and staff, work with local charities that focus on poverty, homelessness, refugees and immigrants, distribution of medical supplies and services, chronic disease, environmental conservation and more. This day of community service helps fulfill the school's mission statement "through organized community efforts" in the Atlanta area. A full list of organizations that RSPH students, faculty and staff provide service to through the Rollins-teer program during the last three years is available in Appendix 3.2.d.3.

Student Outbreak and Response Team
The Student Outbreak Response Team (SORT) was initiated in 2002 by the DeKalb County Board of Health in collaboration with the RSPH Center for Public Health Preparedness and Research. The purpose of SORT is to provide opportunities for RSPH students to gain experience in the practical aspects of outbreak investigation while applying theoretical concepts learned in the classroom to local public health situations. SORT is led by RSPH students who provide leadership and input to the program's structure on a voluntary basis. In exchange for providing the surge capacity (extra personnel) that SORT members offer to health departments in the Atlanta area, these public health students receive instruction via practical experiences, mini-training events and guest presentations with health officials. Each year, 40 students participate in SORT activities.

Student Organizations
A number of student organizations foster community service or service to the profession.   RSPH student organizations chartered by the RSPH Student Government Association (thereby receiving funds from the SGA) include:

- RSPH Student Government Association (SGA)
- Association of Black Public Health Students (ABPHS)
- Behavioral Scientists and Health Educators in Training (BSHE-IT)
- Delta Omega Public Health Honors Society
- Emory Global Health Organization (EGHO)
- Emory Reproductive Health Association (ERHA)
- Health Organization for Latin America (HOLA)
- Institute for Healthcare Improvement, Atlanta Chapter
- Red Cross Club
- Rollins Career Services Ambassadors (CSA)
- Rollins Environmental Health and Action Committee (REHAC)
- RSPH Student Chapter of the Georgia Public Health Association (GPHA)
- Rollins School of Public Health Scholars in Action
- Student Outbreak and Response Team (SORT)
- Unite for Sight Emory Chapter

Students in these 15 organizations, as well as those in the general student body, participate in numerous service activities each year. Activities range from large, national events to local and school-wide projects. For example, students raise money for the AIDS walk and the Susan G. Komen Breast Cancer Foundation marathon. The number of students participating in school-organized community activities appears in Table 3.2d below.

Student Research as Service
MPH/MSPH students are required to conduct a culminating project in the form of thesis, special study project or an applied public health paper for a capstone seminar. Many of these projects are done in

collaboration with public health agencies and have direct relevance to public health programs and practice. In addition, many doctoral dissertations involve partnering with local public health agencies on their research. The number of student theses completed in collaboration with non-university public health agencies and organizations appears in Table 3.2d.

Table 3.2d: Number of Students Engaged in Community Service

Selected Types of Service Activities Reported	2008 - 2009	2009-2010	2010-2011
Number of students participating in school-organized community service activities	541 (62% of all students)	602 (64% of all students)	659 (63% of all students)
Number of theses completed in collaboration with non-university public health agencies and organizations	Not reported	Not reported	114 (44% of all theses)

Recognition for Student Service

Each year, two RSPH students are recognized for outstanding service by being selected as recipients of the James W. Alley and Eugene J. Gangarosa awards. Students are nominated for these awards by other students and faculty, and selected by an ad hoc faculty panel.

- The *James W. Alley Award*. This award is presented to the graduating MPH/MSPH student who has provided the greatest service to disadvantaged populations during his or her career.
- The *Eugene J. Gangarosa Award*. RSPH recognizes the graduating student who has demonstrated a creative approach to solving public health problems and who shows promise for outstanding service in the international arena.

To honor public health practice, the Office of Career Services annually organizes an event, Public Health in Action. This reception features poster presentations of outstanding practica with awards presented to the winning displays. Preceptors and adjunct faculty are invited to attend, along with alumni, faculty and students. Outstanding preceptors or adjunct faculty are honored with awards.

e. **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- The school pursues service activities through which faculty and students contribute to the advancement of public health practice.
- Faculty report considerable engagement in professional service activities.
- The school has received funding to support community-based public health organizations and activities through various programs.
- The school actively engages students in community service and practice through a variety of organizations, programs and initiatives.
- Students are significantly engaged in service.

Lessons Learned:
- Service through learning in the community is being further integrated into the curriculum with the support of Emory's Community Engaged Learning Initiative.
- Students come to this school with a strong commitment to service and respond to available service opportunities as part of their education.
- RSPH has successfully attracted and maintained significant funding to support service activities.
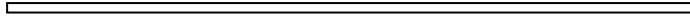
3.3 Workforce Development

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

Required Documentation:

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a. A description of the school's continuing education program, including policies, needs assessment, procedures, practices, and evaluation that support continuing education and workforce development strategies.

The RSPH is committed to supporting the professional development of practicing public health professionals. This commitment is reflected, in part, by the fact that every academic department in the school offers continuing professional education (CPE) activities. Additionally, workforce development is a significant focus of many of the school's centers and programs (see Table 3.3a). Moreover, the school has invested resources in the establishment of a school-wide Office of Continuing Professional Education to centralize vital CPE supporting services and resources.

Workforce development is reflected in the RSPH goal: "to build capacity in the public health workforce and support the continuing education of graduates while contributing to efforts that promote health and prevent disease in populations around the world."

As mentioned in 3.2, the school's recognition of service activities includes workforce development activities such as the following:
- teaching continuing education courses
- contributing to public health practice through consultation and instructional programs (e.g., service learning, practica and theses)
- delivering public health training programs funded through grants, contracts and formal agreements

Continuing Professional Education Administration

Consistent with the School's mission, the continuing professional education (CPE) mission is:

> …. to further educate and support individuals in the public health workforce by enhancing their competence in analytic/assessment skills, policy development and program planning skills, communication skills, cultural competency skills, community dimensions of practice skills, basic public health sciences skills, financial planning/management skills, or leadership and systems thinking skills.

To fulfill this mission, the school, offers a variety of trainings designed to sharpen the practicing professional's ability to identify, analyze and intervene in current health problems.   RSPH departments and centers assess the needs of target audiences in various ways, including surveys or focus groups, advisory boards, planning committees and reviews of evaluation results. Examples of assessment and evaluation are highlighted in Table 3.3a below.

As described below, administration of the RSPH continuing education program is semi-decentralized and

takes place on a school-wide level as well as departmental level.

School-wide Administration: Office of Continuing Professional Education
Under the direction of the associate dean for applied public health and staffed by the director of continuing professional education (CPE), the Office of CPE is the entity responsible for coordinating the school's continuing professional education program. Primary roles and responsibilities of the Office of CPE include:

Professional Assistance and Services
The office provides professional assistance and services to the school's departments and centers to offer continuing professional education activities, train public health professionals, provide continuing education credit and increase the visibility of the school's continuing professional education offerings.

NCHEC Accredited Multiple Event Provider (MEP) Program
The Rollins School of Public Health is designated as a provider of continuing education contact hours in health education by the National Commission for Health Education Credentialing, Inc. (NCHEC). The office of CPE is responsible for managing the NCHEC accredited multiple event provider (MEP) program for the school. Once a year, in collaboration with the Behavioral Sciences and Health Education Department, the Office of CPE offers a strategy session for students and professionals planning to take the Certified Health Education Specialist (CHES) certification exam.

Cvent Event Management System
In 2011, the school purchased Cvent, a web-based event management software program for use by all RSPH faculty and staff. The system helps manage all the details involved in developing a training event, including participant registration, event promotion, pre-event surveys, post-event evaluation and participant training history.

CPE Annual Report
Each year, the director of continuing professional education produces an annual report that describes the year's continuing professional education activities, including workforce development activities offered by the school and its departments and centers. Appendix 3.3.a shows annual CPE reports from the past 3 years, as well as the school's policy on continuing professional education.

Departmental and Center Administration
In addition to the administrative role of the Office of Continuing Professional Education, RSPH departments and centers direct efforts to support workforce development. Most departments offer monthly lectures, journal clubs or special events that are open to public health professionals in the community, as well as to their own faculty. Several centers affiliated with RSPH, most externally funded, also focus on workforce development. Table 3.3a summarizes the purpose of these centers and selected examples of their activities. A complete list of all workforce-related activities during the past 3 years is included in Appendix 3.3.a.

Table 3.3a: RSPH Affiliated Centers or Programs with a Significant Focus on Workforce Development

Center/Program [Affiliated Department]	Overview of Center	Examples of Workforce Needs Assessment, Training and Evaluation Activities
Center for AIDS Research **[Epidemiology]**	The Center for AIDS Research (CFAR) at Emory is funded by the National Institutes of Health to help expand the breadth and depth of NIH-funded research in HIV/AIDS. The CFAR LINCS Initiative (Linking Investigators through Networking, Communication and Science) organizes and facilitates all CFAR activities that promote research interactions between Emory CFAR members and between Emory CFAR members and: (1) non-HIV investigators, (2) HIV/AIDS research colleagues in other domestic and international institutions, and (3) the community.	Through its CFAR LINCS program, the Center for AIDS Research (CFAR) sponsors a monthly lecture series, entitled the Vaccine Dinner Club. These seminars are open to faculty throughout the university and public health professionals from the CDC and state and local public health agencies. These seminars attract more than 100 attendees at each session.
Center for Public Health Preparedness and Research **[Epidemiology]**	The Center for Public Health Preparedness and Research (CPHPR), funded in 2002 through a generous gift from the O. Wayne Rollins Foundation, endeavors to advance research and promote public health practice to help communities prepare for and respond to bioterrorism and other threats to public health. CPHPR also provides resources and expertise to train public health students and professionals. Faculty and staff of CPHPR conduct research and assess policies to identify areas where public health preparedness can be enhanced.	In collaboration with the NIH-supported Southeast Regional Center of Excellence for Biodefense and Emerging Infections (SERCEB), the CPHPR has developed a comprehensive education and training program in BSL2, BSL3, and BSL4 laboratory safety practices. This training is conducted in a mock BSL3/4 laboratory at Emory.
Diabetes Training and Technical Assistance Center (DTTAC) **[Behavioral Sciences and Health Education]**	The Diabetes Training and Technical Assistance Center (DTTAC) is dedicated to assisting organizations develop and expand highly effective diabetes prevention and control programs.	DTTAC works with national, state and community-based organizations to respond to their needs. The center provides customized trainings, a variety of tools and products and individualized technical assistance to help clients succeed in their diabetes prevention and control efforts.

Center/Program [Affiliated Department]	Overview of Center	Examples of Workforce Needs Assessment, Training and Evaluation Activities
Emory Center for Public Health Preparedness **[Behavioral Sciences and Health Education]**	From 2002 – 2010, the RSPH received CDC funding for a Center for Public Health Preparedness (CPHP). This center was funded to partner with state and local public health agencies to develop and deliver training and education programs on topics related to the adequate preparation of the public health infrastructure for bioterrorism and emergency response events. These funds increased the capacity of RSPH to produce high-quality continuing education products using distance education strategies, which include CD-ROM, DVD, streaming video and in-depth courses managed via a Blackboard interface. In 2003, RSPH was awarded additional funds to expand the Emory CPHP to include a partnership with the Graduate School of Public Health at the University of Puerto Rico.	In partnership with the Georgia Division of Public Health, the Emory CPHP developed a web-enabled Learning Assessment and Management System called "G-TRAIN." This system allowed potential public health employee learners to indicate their biographical and professional backgrounds, specify their training needs, assess their competence, enroll in distance-based modules and sign up for continuing education units. Approximately 3,700 out of 7,000 state employees entered their profiles into G-TRAIN to select suitable training. Although no longer funded, the CPHP program was grounded in the concept of just-in-time learning, competency-based instruction and multimedia instructional technologies. Since its inception in 2002, the Emory CPHP developed and disseminated via CD-ROM and the web: 73 instructional lectures; 7 conference proceedings; 11 interactive trainings; 4 web-based case studies, and 5 Spanish language trainings. More than 57,000 copies of these instructional materials have been distributed to state and local public health workers across Georgia and the nation.
Emory Preparedness and Emergency Response Research Center **[Epidemiology]**	The Emory Preparedness and Emergency Response Research Center (Emory PERRC) analyzes the ability of public health systems to produce practical and sustainable outcomes that serve to improve our nation's public health systems in the event of a disaster. Led by Ruth Berkelman, MD and an interdisciplinary team of project directors and staff, the Emory PERRC analyzes state and local health departments' systems of preparedness to identify factors that affect a community's ability to successfully respond to a crisis with public health consequences and to document the systems and infrastructure needed to foster constructive responses.	One of the activities offered by the Emory PERRC is the training of new investigators spanning the Departments of Epidemiology, Health Policy and Management, Behavioral Sciences and Health Education, Global Health, in RSPH and the Emory School of Medicine. New investigators address important questions in public health systems research relating to emergency preparedness and response. Training is designed to develop independent, rigorous academic investigators skilled in the use of multidisciplinary research methods. The program includes mentorship, training and research in a multidisciplinary environment.

Center/Program [Affiliated Department]	Overview of Center	Examples of Workforce Needs Assessment, Training and Evaluation Activities
Emory Prevention Research Center **[Behavioral Sciences and Health Education]**	The Emory Prevention Research Center (EPRC) focuses on community-based cancer prevention and reducing health disparities in the rural communities of Southwest Georgia. EPRC's main behavioral focus is primary prevention, and more specifically reducing health risks related to tobacco, physical activity and nutrition, including reduction of overweight/obesity. EPRC's primary partner is the Southwest Georgia Cancer Coalition, which has defined a 31-county rural region as its service area; the EPRC has adopted these same boundaries to define its partner community.	An active and engaged Community Advisory Board (CAB) provides ongoing community input and guidance into planning and implementation of research and other activities. The CAB also guided a training needs assessment in southwest Georgia. Training and education activities are one strategy of the EPRC, and its affiliated Cancer Prevention and Control Research Network (CPCRN). Through the CPCRN and the EPRC Training Core, EPRC provides training and technical assistance for local community-based organizations and health agencies on such topics as program planning, evaluation, grant writing, community assessment and the selection, and adaptation and implementation of evidence-based interventions.
Emory Public Health Training Center **[Behavioral Sciences and Health Education]**	In September 2010, the RSPH received funding from HRSA to establish the Emory Public Health Training Center (Emory PHTC). The mission of the Emory PHTC is to create a learning community that will build competence in the current and future public health workforce, expose public health students to the value of working in underserved areas and advocate for public health systems and policies. The goals of the Emory PHTC pertaining to training include to the following: assess competency-based training needs of the public health workforce in underserved areas of Georgia; provide competency-based education and training to improve the capacity of the public health workforce in underserved areas of Georgia; and, educate boards of health members about current public health issues in order to create stronger public health systems.	The center conducted a training needs assessment of all local, district and state public health workers in Georgia during spring 2011. Training activities of the Emory PHTC include the Models of Excellence lecture series, the Public Health Practice Academy, partner-requested trainings and the boards of health trainings offered in collaboration with the Georgia Public Health Association. All trainings help build competence in public health workers who serve the needs of underserved populations and areas. Throughout each year, the center conducts an ongoing comprehensive evaluation plan of all activities, processes and outcomes.

Center/Program [Affiliated Department]	Overview of Center	Examples of Workforce Needs Assessment, Training and Evaluation Activities
Epidemiology in Action and Applied Epidemiology International Programs **[Global Health]**	Dr. Philip Brachman, in the Hubert Department of Global Health, is an internationally regarded training expert in field epidemiology and public health surveillance. Through his office, Dr. Brachman offers training courses in epidemiology and surveillance throughout the United States and around the world.	This office's activities includes an annual 2-week Epidemiology in Action course for public health professionals from the United States; an annual 4-week International Course in Applied Epidemiology for public health professionals from other countries; and other epidemiology and surveillance courses (such as, Introduction to Public Health Surveillance, Epidemiology in Action (Intermediate Methods) and, customized courses like Epidemiology In Action for Chinese Health Practitioners).
Georgia Center for Cancer Statistics **[Epidemiology]**	Based in the Department of Epidemiology and in the SEER (Surveillance, Epidemiology and End Results) Program, the Georgia Center for Cancer Statistics is directed by John Young and offers multiple trainings on campus and internationally on the collection and use of cancer registry and surveillance data. The courses are attended by state and local public health professionals and cancer registry professionals within health care facilities. Key faculty affiliated with this program have helped develop an NCI SEER program web-based instructional module on ICD-O-3 and its implementation in North America. The program holds seminars and lectures on current issues in epidemiology science and practices.	Examples of recent trainings include Cancer Research and Hypothesis Generation (Kremlin Palace Hotel, Antalya, Turkey), Research Manuscript and Grant Writing Workshop (King Hussein Cancer Center, Amman, Jordan), and Introduction to Cancer Registration and the Fundamentals of Tumor Registry Operations (National Cancer Registrars Association, Palm Springs, CA).
Southeast Institute for Training and Evaluation (SITE) **[Behavioral Sciences and Health Education]**	In 1995, the Southeastern Institute for Training and Evaluation (SITE) began as a Woodruff Foundation project that was the evaluation and training center for the Information Network for Public Health Officials program. SITE's educational programs consist of customized trainings targeted toward practicing public health professionals. SITE trainings are managed by Dr. Dabney Evans who contracts with Emory-based and adjunct faculty to teach the courses and evaluate each course offering.	On an annual basis, SITE competes for CDC university-sponsored courses. These courses are a part of the CDC university program and are offered to CDC employees. Trainings include Basic Principles of Public Health (Part 1 and Part 2), Introduction to Public Health Policy, Public Health Advocacy and Policy Development, Introduction to Surveillance and Public Health Program Management.

Center/Program [Affiliated Department]	Overview of Center	Examples of Workforce Needs Assessment, Training and Evaluation Activities
Tobacco Technical Assistance Consortium (TTAC) **[Behavioral Sciences and Health Education]**	The Tobacco Technical Assistance Consortium (TTAC) was established in 2001 through grants from the American Cancer Society, the American Legacy Foundation, and the Robert Wood Johnson Foundation to provide training and technical assistance services to enhance national, state and local tobacco control programs and policies. By reducing the appeal of and access to tobacco products, and by promoting state and federal policies and other population-based approaches, TTAC has effected environmental change that has proven to reduce tobacco use. TTAC's many contributions to the field of tobacco control include: • Design and delivery of tailored training, technical assistance and resources to states and localities to meet their unique program and policy needs • Administration of national and state networks • Development of varied training curricula; in-person, webinar and distance learning courses for individuals or groups; and web-based educational opportunities for larger audiences on a range of public health and tobacco-related topics. • Planning and management of major conferences, training and capacity building events. TTAC has demonstrated the capacity to skillfully manage, both financially and programmatically, numerous clients and projects simultaneously.	To date, TTAC has managed more than 120 grants, with funding amounts ranging from $763 to $14 million and grant funding totaling over $36 million including $4.9 million of federal funds. TTAC has provided technical assistance or training for more than 1000 clients and organizations since 2001. TTAC has developed a number of major instructional products, including products and courses including: *Addressing Tobacco Pricing Policies: A Toolkit for Tobacco Control Program Managers; Demystifying the World of Public Health Policy; The Fundamentals of Evaluation and Logic Model Essentials; Developing Smokefree Implementation Regulations Website; Using Best Practices: Practical Lessons in Building and Sustaining Comprehensive Tobacco Control Programs; Tobacco 101; Reaching Higher Ground: A Guide For Preventing, Preparing For, And Transforming Conflict For Tobacco Control Coalitions*

b. Description of certificate programs or other non-degree offerings of the school, including enrollment data for each of the last three years.

The school offers one non-degree program of study, Public Health Informatics. The informatics certificate program combines computer, information and public health science to manage and process public health data, information and knowledge in the support of public health practice. Enrollment data for the Public Health Informatics certificate is identified in Table 3.3b below.

Table 3.3b: Public Health Informatics Enrollment Data for the Last Three Years			
	2008 – 2009	2009 – 2010	2010 - 2011
Enrollment	4	4	4

Unlike the Public Health Informatics Certificate Program, the other certificate programs (Mental Health, Social-Contextual Determinants of Health and Global Complex Humanitarian Emergencies) are offered to MPH/MSPH students to enhance their department academic programs using elective hours for courses and focusing a practicum and/or culminating experience on a particular topic.

Certificate programs and their competencies are described in section 2.6.c, and they are described on the web and in the RSPH Catalog available in Appendix 2.1.b.

c. A list of the continuing education programs offered by the school, including number of students served, for each of the last three years. Those that are offered in a distance learning format should be identified.

Table 3.3c summarizes the numbers of continuing professional education activities and participants served in total during the last 3 years. The continuing professional education annual reports for the last 3 years, including all activities and numbers of participants served, is included in Appendix 3.3.a.

Table 3.3c: Numbers of Continuing Professional Events and Participants during last three years

Number of Continuing Professional Events and Participants						
Year	Total Events	Live Events	Enduring Materials (CD-ROM, web-casts, etc.)	Total Number of Participants at Live Events	Total distributions, viewings, if known, or requests for CE	Total Events Offering CE Credit
2008 – 2009	326	211 (65%)	115 (35%)	11,027	7972	41 (13%)
2009 – 2010	289	179 (62%)	110 (38%)	7,453	6774	35 (12%)
2010 – 2011	215	203 (94%)	12 (6%)	10633	3282	29 (14%)

d. A list of other educational institutions or public health practice organizations, if any, with which the school collaborates to offer continuing education.

RSPH actively partners with other agencies to co-sponsor local, state and national public health lectures,

trainings and conferences. For example, the Tobacco Technical Assistance Consortium (TTAC) at Emory has collaborated with several state health departments (the New York State Department of Health and the Tennessee State Tobacco Control Program) to offer trainings such as "Evaluating the Impact of Clean Indoor Air Laws on Heart Attack Hospitalization Rates" and "Tennessee Capacity Building Webinar: Addressing Disparities". TTAC has also collaborated with the CDC and the Communities Putting Prevention to Work Evaluation Team to offer trainings on "How to Write an Evaluation Plan". Similarly, the Emory Prevention Research Center (EPRC) has cosponsored trainings with the Southwest Georgia Cancer Coalition entitled "Prevention Programs that Work: Evidence-based Program Planning and Adaptation".

The Southeastern Institute for Training and Evaluation (SITE), one of the programs within RSPH, is another resource for public health workers to develop the skills that they need to prepare for and respond to ever-changing public health challenges. The SITE program provides customized continuing education opportunities to public health professionals at the local, state, and federal levels. On an annual basis, SITE offers 12 courses for federal employees.

A list of institutions and public health practice organizations that the school has collaborated with on workforce development activities during the last 3 years is included in the CPE Annual Report as well (see Appendix 3.3.a). The following is a partial list of the organizations that the school has collaborated with to offer continuing professional education.

National Institutes of Health	Medical University of South Carolina
Department of Veterans Affairs	Hollings Cancer Center
Rapides Foundation	Comprehensive Cancer Control Collaborative of North Carolina (4CNC)
Centers for Disease Control and Prevention (CDC) (multiple centers, institutes and offices)	REACH US
Emory Environmental Health Science Center	New Mexico Tumor Registrars Association
Emory School of Law	Northwest Georgia Regional Cancer Coalition (NWGRCC)
Georgia Institute of Technology	Michigan Department of Community Health, Tobacco Section
Tobacco Control Program, Virginia Department of Health	Elizabeth Griffin Institute
Middle East Cancer Consortium	Morehouse School of Medicine
University of California at Irvine	Americans for Nonsmokers' Rights
King Hussein Cancer Center	West Virginia Tobacco Control Program
SW GA Cancer Coalition	Oklahoma Tobacco Control Program
Society for Public Health Education (SOPHE)	Ceridian Corporation
Fulton County Department of Health and Human Services	Campaign for Tobacco-Free Living and Louisiana Tobacco Control Program
University of North Carolina	National Cancer Registrars Association

e. **Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- The school engages in numerous activities that support the professional development of the public health workforce.
- Primarily through its centers, the school has received funding to support workforce development efforts of public health professionals throughout Georgia, the nation and the world.
- The school actively collaborates with a variety of local, national and global organizations to provide considerable amount of training to the public health workforce.
- The school takes workforce development seriously as evidenced by the amount of CPE offered by all departments, centers and many individual faculty and staff.

Lessons Learned:
- Despite the decreased funding for many of the workforce training programs, the demand for public health training and development continues to grow both domestically and globally. Meeting these demands is an on-going challenge.
- As a result of our location, facilities, reputation, expertise and history of collaboration, we regularly receive requests for training and workforce development opportunities. Consequently, we are often faced with the challenge of prioritizing requests, particularly during a time of reduced resources.
- RSPH's location in Atlanta and proximity to the Centers for Disease Control and Prevention and other major prominent health organizations increases the school's opportunities and its obligations to provide workforce educational programs.
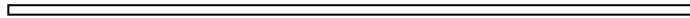
4.0   Faculty, Staff and Students

4.1   Faculty Qualifications

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

Required Documentation:

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a.   **A table showing primary faculty who support the degree programs offered by the school. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification*, e) gender, f) race, g) graduate degrees earned, h) discipline in which degrees were earned, i) institution from which degrees were earned, j) current teaching areas, k) current research interests, and l) current and past public health practice activities. *Note: classification refers to alternative appointment categories that may be used at the institution.**

To achieve its mission, the Rollins School of Public Health requires a highly qualified and diverse faculty, built by recruiting and retaining nationally and internationally known scholars, teachers and practitioners, and by creating an environment that supports excellence in instruction, research and service. Two indications of the high quality of the RSPH faculty are the appointments of eleven Institute of Medicine, National Academy of Sciences members (five RSPH faculty members, five jointly-appointed faculty members, and one emeritus faculty member) and the presence of two faculty members who hold Woodruff Chairs, Emory University's highest faculty honor.

Faculty Classification and Titles
Tenured faculty members have *continuous* appointments at Emory University, renewable unless there is cause for dismissal. Faculty members without tenure are on *limited* appointments, annually renewable by the dean or designate. Tenure is conferred by the Emory University Board of Trustees with the recommendation of the dean, executive vice president for health affairs, provost and president. Further details are included in the RSPH Appointment, Promotion and Tenure Guidelines   http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines. pdf and the Emory University Faculty Handbook http://www.emory.edu/PROVOST/documents/facultydevelopment/Faculty_Handbook.pdf .

Faculty may be appointed in the tenure track at ranks of *instructor, assistant professor, associate professor* and *professor*. Appointments in non-tenure track lines include the research track (in which the faculty is primarily engaged in research activity) or clinical track (in which the faculty is primarily engaged in teaching or public health practice). Ranks in each track include *instructor, assistant professor, associate professor* and *professor*. Adjunct faculty appointments are recommended by departments to the dean for professionals who contribute to the school's mission but who are not otherwise appointed to a faculty position at Emory University. Joint or secondary faculty appointments are given to faculty in other Emory University schools who contribute to the mission of the Rollins

School of Public Health. Affiliated faculty are appointed to centers or units because they contribute to the mission of those particular programs.

Definition of Core Faculty

The RSPH defines a *core* faculty member (tenure-track or nontenure-track) as a member who has a primary appointment of 0.8 FTE or greater in the RSPH and supports the teaching program (i.e., those who teach, as well as those who mentor students or who provide academic advisement to students about thesis, SSP, directed studies, dissertation, or practicum). Full-time faculty appointed to tenure-track positions are expected to participate in the school's degree programs, conduct sponsored research and participate in professional and public health service activities.

Faculty FTEs are attributed to the departments in which they hold a primary appointment. The Career MPH (CMPH) program draws on the faculty resources throughout the school, so the FTE of core faculty teaching for the CMPH program have been included in the department to which they are appointed. (For specific calculations on CMPH faulty, see Criteria 2.12)

Table 4.1a, which follows, includes the list of all core faculty supporting the instructional programs as of November 1, 2010. It should be noted that FTE of faculty listed in this table are the FTE assigned in the human resources database (and include two faculty who support the research program, but not the instructional program), so the FTE totals here will be slightly different than in Table 1.6e, where FTE of Core faculty 0.80 FTE or more were counted as 1.00 FTE and research faculty were not included.

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

				Behavioral Sciences and Health Education (BSHE) Department						
Name	**Title/ Academic Rank**	**Tenure status or class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Alperin, Melissa	Senior Associate	Non-tenure-track	1.00	F	WHITE	MPH	Emory University	Health Promotion and Education	Technology Tools; Questionnaire Design and Analysis; Health Education & Computers	Training; Workforce Development
Berg, Carla Jean	Asst Professor	Tenure	1.00	F	WHITE	PhD MA	University of Kansas; University of Kansas	Clinical Psychology; Clinical Psychology	Chronic Diseases; Health Psychology	Public Health; Cancer Prevention; Health Disparities; Multiple Health Risk Behavior; Tobacco Control; Young Adults and Adolescents; Positive Psychology
Blais, Linelle Marie	Assoc Research Prof	Non-tenure-track	1.00	F	WHITE	PhD	University of Rhode Island	Psychology	Training; Technical Assistance	Public health; Organizational Development; Program Development; Evaluation
Chae, Hui Woong David	Asst Professor	Tenure	1.00	M	ASIAN	ScD MA	Harvard University; Columbia University	Social Epidemiology; Psychology	Behavioral Research Methods; Race and Health	Behavior and Health; Disease Surveillance; Health Outcomes; Mental Health; Cardiovascular Disease
Cooper, Hannah L.F.	Asst Professor	Tenure	1.00	F	WHITE	ScD SM	Harvard SPH; Harvard SPH	Health and Social Behavior; Health and Social Behavior	Macrosocial Determinants of Health; Qualitative Research Methods	Addiction/Drug Abuse Prevention; Behavior and Health; HIV/AIDS

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Behavioral Sciences and Health Education (BSHE) Department										
Name	Title/ Academic Rank	Tenure status or class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
DePadilla, Lara Mireille	Asst Research Prof	Non-tenure-track	1.00	F	HISPANIC	PhD MS	Emory University; Georgia State University	Behavioral Sciences and Health Education; Biostatistics	Quantitative Analysis	HIV/AIDS; Sexual Behavior; Statistical Modeling
Diclemente, Ralph Joseph	Professor	Tenure	1.00	M	WHITE	PhD ScM	University of California, San Francisco; Harvard University	Health Psychology; Behavioral Sciences	Adolescent Health Promotion; Grantwriting/ Research Ethics; Approaches to Health Promotion	HIV/STD Prevention; Adolescents and HIV
Dilorio, Colleen Ann	Professor	Tenure	1.00	F	WHITE	PhD MS	New York University; New York University	Nursing; Nursing	Behavioral Research; Measurement; Health Behavior Theory; Program Planning; Research Design	Health Promotion; Health Behavior; Behavioral Change: adherence/self-management and HIV prevention
Dunkle, Kristin	Asst Professor	Tenure	1.00	F	WHITE	PhD MPH	University of Michigan; University of Michigan	Epidemiological Science; International Health	Sexual Health in Global and Social Context; HIV/AIDS; AIDS Public Health Implications	Behavior and Health; Global Health; HIV/AIDS; Maternal and Child Health; Sexual Behavior
Elifson, Kirk W.	Research Professor	Non-tenure-track	1.00	M	WHITE	PhD MA	Vanderbilt University; Vanderbilt University	Sociology; Sociology	Qualitative Research Methods; Multivariate Data Analysis; Research methodology; Statistics	Religion; Deviance; AIDS/HIV; Social Behavior; Quantitative Studies

Behavioral Sciences and Health Education (BSHE) Department										
Name	**Title/ Academic Rank**	**Tenure status or class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Escoffery, Ngoc-Cam T	Asst Professor	Tenure	1.00	F	ASIAN	PhD MPH	University of Georgia; Emory University	Health Promotion & Behavior; Health Promotion and Education	Behavioral Sciences and Health Education Theories; Community Needs Assessment; Research Design and Grant Preparation; Program Planning	Cancer Prevention; Evaluation; Health Promotion; Smoking Prevention/Cessation
Hagen, Kimberly	Senior Associate	Non-tenure-track	1.00	F	WHITE	EdD MEd	University of Georgia; University of Georgia	Adult Education; Adult Education	Curriculum and Instruction in Health Education; Evaluation	HIV/AIDS
Jacob Arriola, Kimberly R.	Assoc Professor	Tenure	1.00	F	BLACK	PhD MPH MA	North-eastern University; Emory University; North-eastern University	Social Psychology; Epidemiology; Social Psychology	Behavioral Research Methods; Health Promotion Interventions	Organ and tissue donation; program evaluation; breast cancer education and screening
Kegler, Michelle Crozier	Assoc Professor	Tenure	1.00	F	WHITE	DrPh MPH	University of North Carolina; University of Michigan	Health Behavior & Health Education; Health Behavior & Health Education	Health Promotion Interventions; Evaluation; Community Needs Assessment	Cancer Prevention; Community Based Research; Evaluation; Health Promotion; Obesity Prevention; Smoking Prevention/ Cessation

Behavioral Sciences and Health Education (BSHE) Department										
Name	**Title/ Academic Rank**	**Tenure status or class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Lang, Delia Lucia	Research Assoc Prof	Non-tenure-track	1.00	F	WHITE	PhD MPH MA	Loma Linda University; Loma Linda University; California State University, San Bernadino	Clinical Psychology; Biostatistics; General Experimental Psychology	Survey Methods; Grant Writing; Quantitative Analysis; Theory in Behavioral Science; Research Methods in Behavioral Science	STI/HIV prevention; Adolescent/Women's Health; Gender Based Violence; International Research
Levinson, Richard M	Exec Assoc Dean, Professor	Tenure	1.00	M	WHITE	PhD MA	University of Wisconsin; University of Wisconsin	Sociology; Sociology	Social Behavior in Public Health	Social determinants of health risk behavior; access to and utilization of health services
Miner, Kathleen Rae	Assoc Dean, Applied Public Health	Tenure	1.00	F	WHITE	PhD MPH MEd	Georgia State University; Emory University; Georgia State University	Educational Leadership; Community Health Education; Science Education	Teaching in Public Health; Health Education Curriculum and Instruction; Introduction to Behavioral Sciences; Research Methods; Evaluation	Public Health Workforce Training/Development; Evaluation; Emergency Preparedness
Morris, Debra Gardner	Senior Associate	Non-tenure-track	1.00	F	BLACK	MPH	Emory University	Behavioral Science & Health Education	Training: Technical Assistance	Public Health Training and Program Development; Health Promotion: Tobacco Prevention and Control; Nutrition and Fitness

Behavioral Sciences and Health Education (BSHE) Department										
Name	**Title/ Academic Rank**	**Tenure status or class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Nehl, Eric	Asst Research Prof	Non-tenure-track	1.00	M	WHITE	PhD MS	Indiana University; Ball State University	Health Behavior; Community Health Education	Theory in Behavioral Sciences and Health Education	HIV/STIs
Salazar, Laura F	Asst Research Prof	Non-tenure-track	1.00	F	HISPANIC	PhD MA	Georgia State University; Georgia State University	Community Psychology; Community Psychology	Behavioral Science in Public Health; Theories of Behavioral Science and Health Education; Applied Research Methods	STD/HIV Prevention and Control; Adolescent Health; Violence Against Women; Program Evaluation
Sales, Jessica A.	Asst Research Prof	Non-tenure-track	1.00	F	WHITE	PhD MA	Emory University; Emory University	Cognitive and Developmental Psychology; Cognitive and Developmental Psychology	Evaluation; Adolescent Health/Child Health	STD/HIV Prevention; Sexual Behavior; Gender-based Violence; Adolescent Health/Child Health
Sterk, Claire Elizabeth	Sr Vice Provost, Acad Affairs	Tenure track	1.00	F	WHITE	PhD PhD	Univ of Rotterdam/ City U of New York; University of Utrecht	Sociology; Medical Anthropology	Substance Abuse; Qualitative Research Methods	Addiction/mental health; HIV/AIDS, Women's issues; Health disparities; Community-based behavioral interventions
Surbey, Paul Dean	Exec Assoc Dean, Fin & Admin	Non-tenure-track	1.00	M	WHITE	MA MBA	University of Minnesota University of Minnesota	Developmental Psychology and Statistics; Management Information Sciences	Financial Management	Administration and financial accounting; operations management
Swan, Deanne	Asst Research Prof	Non-tenure-track	1.00	F	WHITE	PhD MS	Georgia State Univ. Georgia	Educational Policy Studies; Educational	Research Design and Analysis; Quantitative	Child Health and Education; Methodology

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Name	Title/ Academic Rank	Tenure status or class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Behavioral Sciences and Health Education (BSHE) Department											
							State Univ.	Psychology	Methods and Analysis	
Talley, Colin L.	Asst Research Prof	Non-tenure-track	1.00	M	WHITE	PhD MA MA	Univ of CA, San Fran; Univ of CA, San Fran; San Diego State Univ	History Health Sciences; History Health Sciences; History	Behavioral Sciences/Public Health; Social Behavior in Public Health; LGBTQ Public Health; History of Public Health	History Health Sciences
Thompson, Nancy J	Assoc Professor	Tenure	1.00	F	WHITE	PhD MPH	Georgia State University; Emory University	Clinical Psychology; Public Health	Behavioral Epidemiology; Theory-driven Research; Mindfulness; Public Mental Health; Teaching in Public Health	Behavior and Health; Mental Health; Mindfulness; Injury and Violence; Faith Based Health
Thompson, Winifred Wilkins	Asst Research Prof	Non-tenure-track	0.96	F	BLACK	PhD MSW	University of South Carolina; University of Georgia	Health Promotion, Education and Behavior; Social Work	Community Needs Assessment; Health Education	Behavior and Health; Cancer Prevention; Community-Based Research; Evaluation; Faith Based Health; Maternal and Child Health; Cardiovascular Disease
Windle, Michael Terrence	Professor And Chair	Tenure	1.00	M	WHITE	PhD MA	Penn State; Southern Illinois University	Human Development and Family Studies; Clinical Psychology	Health Promotion; Proposal Development	Addiction/Drug Abuse Prevention; Adolescent Health/Child Health; Mental

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Behavioral Sciences and Health Education (BSHE) Department										
Name	Title/ Academic Rank	Tenure status or class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
										Health; Statistical Modeling
Windle, Rebecca Crosley	Senior Associate	Non-tenure-track	0.80	F	WHITE	MSW	State University of New York at Buffalo	Social Work	Alcoholism and mental health	Adolescent Alcohol/Substance Abuse
Wingood, Gina M.	Professor	Tenure	1.00	F	BLACK	ScD MPH	Harvard University; Univ of CA, Berkeley	Health & Social Behavior; Maternal and Child Health	Theory in Behavioral Sciences and Health Education	STD/HIV Prevention for Adolescents and Young Women
Wong, Frank Yuan	Assoc Professor	Tenure	1.00	M	ASIAN	PhD	Texas A&M University	Social Psychology	Global Health Programming; Syndemics; Global Infectious Diseases	Community-Based Research; Global Health HIV/AIDS; Infectious Disease; Sexual Behavior

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Biostatistics and Bioinformatics (BIOS) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Binongo, Jose Nilo G	Assoc Research Prof	Non-tenure-track	1.00	M	ASIAN	PhD MS MEd	University of Ulster; Sophia University; University of Virginia	Applied Statistics; Mathematics; Curriculum and Instruction	Statistical Methods; Clinical Trials; Applied Biostatistics	Biostatistics; Applications of Statistics to Language and Literature; Statistical Methods for Classification; Clinical Trials; Statistics Education; Statistical Consulting
Bowman, Frederick D.	Assoc Professor	Tenure	1.00	M	BLACK	PhD MS	University of North Carolina, Chapel Hill; University of Michigan	Biostatistics; Biostatistics	Advanced Linear Models; Neuroimaging Statistics; Theory of Linear Models	Addiction/Drug Abuse Prevention; Bioinformatics; Imaging; Mental Health; Statistical Modeling
Carnevale, Claudine	Associate	Non-tenure-track	1.00	F	WHITE	MS	Medical College of VA, VA Common-wealth Univ	Biostatistics	Statistical Methods; Applied Biostatistics; Data Management	Disease Surveillance; Maternal and Child Health; Nutrition; Obesity Prevention; Vaccines
Chen, Zhengjia	Asst Research Prof	Non-tenure-track	1.00	M	ASIAN	PhD	University of Southern California; University of Southern California; Peking University	Biostatistics; Biometry; Biochemistry and Molecular Biology	Clinical Trials	Design of Cancer Clinical Trials; Bayesian Modeling; Genetic Epidemiology; Risk Prediction

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Biostatistics and Bioinformatics (BIOS) Department										
Name	**Title/ Academic Rank**	**Tenure Status or Class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Cotsonis, George Anthony	Senior Associate	Non-tenure-track	1.00	M	WHITE	MA	University of West Florida	Mathematics	Statistical Computing; SAS Statistical Programming	Statistical Consulting; Statistical Computing; Clinical Trials
Easley, Kirk Anthony	Senior Associate	Non-tenure-track	1.00	M	WHITE	MA MS	Louisiana State University; Louisiana State University	Applied Statistics; Renewable Natural Resources	Clinical Trials Methodology; Biostatistical Consulting	Statistical Consulting
Elon, Lisa K	Senior Associate	Non-tenure-track	1.00	F	WHITE	MPH MS	Emory University; North Carolina State Univ.	Biostatistics; Soil Science	Statistical Methods	Health Promotion; Nutrition; Exercise
Guo, Ying	Asst Professor	Tenure	1.00	F	ASIAN	PhD MS	Emory University; Renmin Univ of China	Biostatistics; Statistics	Biostatistics; Neuroimaging Statistics; Logistic Regression; Categorical Data Analysis	Neuroimaging; Assessing agreement/ reliability/ reproducibility; Psychiatry; Mental Health; Women's Health
Haber, Michael J	Professor	Tenure	1.00	M	WHITE	PhD MSc	Hebrew University, Jerusalem; Hebrew University, Jerusalem	Statistics; Statistics	Biostatistics; Survey of Applied Biostatistics; Probability Theory; Statistical Inference; Categorical Data Analysis	Infectious Disease; Statistical Modeling; Vaccines

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Biostatistics and Bioinformatics (BIOS) Department										
Name	**Title/ Academic Rank**	**Tenure Status or Class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
Hanfelt, John J.	Assoc Professor	Tenure	1.00	M	WHITE	PhD MS	Johns Hopkins University; George Washington University	Biostatistics; Operations Research	Statistical Inference	Proteomics; Alzheimer's Disease; Statistical Analysis of Sparse Dependent Data; Estimating Functions; Artificial Likelihood theory
Hertzberg, Vicki Stover	Assoc Professor	Tenure	1.00	F	WHITE	PhD	University of Washington, Seattle	Biostatistics	Public Health Informatics	Public Health Informatics; Statistical Applications in Stroke; Clinical Trial Methodology Reproductive Data Analysis; Environ-mental Statistics; Statistical Genetics
Huang, Yijian	Assoc Professor	Tenure	1.00	M	ASIAN	PhD MS	University of Minnesota; University of Minnesota	Biostatistics; Biostatistics	Survival Analysis; Covariate Measurement Error	Survival Analysis; Covariate Measurement Error; Quantile Regression; Semi and Non-parametric Inferences; Statistical Computing
Johnson, Brent Alan	Asst Professor	Tenure	1.00	M	WHITE	PhD MS	North Carolina State University;	Statistics; Biostatistics	Statistical Inference	Semiparametric Regression in Missing Data Problems; HIV/

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
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Biostatistics and Bioinformatics (BIOS) Department										
Name	**Title/ Academic Rank**	**Tenure Status or Class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
							University of Minnesota			AIDS; Environmental Engineering and Epidemiology; Vaccine Development; Heart Disease
Kelley, Mary Elizabeth	Assoc Research Prof	Non-tenure-track	1.00	F	WHITE	PhD MS	University of Pittsburgh, University of Pittsburg School of Public Health	Biostatistics; Biostatistics	Statistical Computing; Applied Multivariate Analysis	Mental Health
Kilgo, Patrick Donovan	Senior Associate	Non-tenure-track	1.00	M	WHITE	MS	University of Georgia	Statistics	Biostatistical Methods	Clinical trials design; statistical power calculations, data analysis
Kowalski, Jeanne	Assoc Professor	Tenure	1.00	F	WHITE	PhD MA	University of Pittsburgh; University of Pittsburgh	Statistics; Applied Statistics	Cancer statistics	Cancer research; clinical trial study design and analysis; genetic and genomic analyses
Kutner, Michael H	Professor	Tenure	1.00	M	WHITE	PhD MS	Texas A&M University; Virginia Polytechnic Institute and State University	Statistics; Statistics	Statistical Methods; Clinical Trials; Logistic Regression/Survival Analysis	Statistical Education and Consultation; Clinical Trials; Regression Methodology; HIV/AIDS; Statistical Modeling

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					Biostatistics and Bioinformatics (BIOS) Department					
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Liu, Yuan	Asst Research Prof	Non-tenure-track	1.00	F	ASIAN	PhD MS	USC, Columbia; UNC, Wilmington	Biostatistics; Mathematics	Cancer statistics	Causal inference in hybrid intervention trials; statistical analysis for microarray and other genetic data
Long, Qi	Asst Professor	Tenure	1.00	M	ASIAN	PhD MS	University of Michigan	Biostatistics; Biostatistics	Generalized Linear Models; Advanced Methods for Categorical Data	Statistical Methodology: causal inference, noncompliance, missing & coarsened data, prediction models, issues in clinical trial designs & monitoring, functional data analysis, non/ semiparametric regression methods, Bayesian modeling & prediction methods; Subject-Matter Applications: cancers, mental health, diabetes, renal diseases
Lyles, Robert H.	Assoc Professor	Tenure	1.00	M	WHITE	PhD MS	University of North Carolina, Chapel Hill; University of	Biostatistics; Biostatistics	Applied Linear Models; Statistical Analysis with Missing and Mismeasured Data	Statistical Methods in Environ, HIV, Cancer Epi; Models for Longitudinal Data; Random

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Biostatistics and Bioinformatics (BIOS) Department										
Name	**Title/ Academic Rank**	**Tenure Status or Class-ification**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Institution where degrees were earned**	**Discipline in which degrees were earned**	**Teaching Area**	**Research Interest**
							North Carolina, Chapel Hill			Effects Prediction; Measurement Error & Misclassification Models; Censored Data Problems
Lynn, Michael J	Senior Associate	Non-tenure-track	1.00	M	WHITE	MS	Mississippi State University	Statistics	Biostatistical Methods	Clinical trials; statistical applications in ophthalmic research; statistical computing
Manatunga, Amita K	Professor	Tenure	1.00	F	ASIAN	PhD MA MSc	University of Rochester, New York; University of Rochester, New York; Purdue University	Statistics; Statistics; Mathematical Statistics	Bioinformatics	Survival Analysis; Multivariate Survival Data; Frailty Models; Categorical Data; Inter-rater Agreement Studies; Longitudinal and Survival Models for Exposure Data; Applications in Biomedical Data
Nizam, Azhar	Senior Associate	Non-tenure-track	1.00	M	ASIAN	MS	University of South Carolina	Statistics	Statistical Methods	Statistical Modeling of Infectious Disease Processes
Peng, Limin	Asst Professor	Tenure	1.00	F	ASIAN	PhD MS	University of Wisconsin, Madison; University of Science and	Statistics; Probability Theory and Mathematics Statistics	Probability Theory; Survival Analysis Methods	Survival Analysis; Semi/Competing Risks Problems

							Biostatistics and Bioinformatics (BIOS) Department			
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
							Technology of China			
Qin, Zhaohui	Assoc Professor	Tenure	1.00	M	ASIAN	PhD MS	University of Michigan; University of Michigan	Statistics; Statistics	Bayesian Modeling; Advanced Biostatistics	Statistical Genetics & Modeling; Genomics; Bioinformatics;
Tighiouart, Mourad	Assoc Research Prof	Non-tenure-track	1.00	M	WHITE	PhD MS MS	Florida State University; Florida State University; University of Central Florida	Statistics; Statistics; Mathematics	Cancer statistics	Bayesian phase I/II cancer clinical trials; Bayesian statistical modeling of survival data; Bayesian non-linear mixed modeling; Multilevel modeling
Waller, Lance A	Professor And Chair	Tenure	1.00	M	WHITE	PhD MS	Cornell University; Cornell University	Operations Research; Operations Research	Spatial Analysis of Public Health Data; Bayesian and Empirical Bayesian Methods	Disease Surveillance; Infectious Disease; Public Health Preparedness; Safe Water; Statistical Modeling
Weiss ,Paul Samuel	Senior Associate	Non-tenure-track	1.00	M	WHITE	MS	University of Michigan	Biostatistics	Statistical Methods; Statistical Programming; Sampling	Survey sampling Design; research methodologies; statistical computing; Statistical Education
Wu, Hao	Asst Professor	Tenure	1.00	M	ASIAN	PhD MHS MS	Johns Hopkins University;	Biostatistics; Bioinformatics; Electrical	Advanced Biostatistics; Data analysis using R and	Bioinformatics; Computational Biology; Statistical

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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							Johns Hopkins University; Iowa State University	Engineering	bioconductor	Modeling
Yu, Tianwei	Asst Professor	Tenure	1.00	M	ASIAN	PhD MS MS MS	UCLA; UCLA; UCLA; Tsinghia University	Statistics; Biochemistry & Molecular Biology; Statistics; Biochemistry & Molecular Biology	Bioinformatics	Bioinformatics; Statistical Genomics; Metabolomics; Biological Network Modeling; Pattern Recognition; Cancer Prevention; HIV/AIDS; Mental Health; Nutrition
Zhang, Rebecca Hong	Senior Associate	Non-tenure-track	1.00	F	ASIAN	MS MS	Florida State University Florida State University	Statistics; Applied Mathematics	Probability Theory	Clinical Trials; Statistical Applications in Quality of Life of End Stage Renal Disease Patient

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Environmental Health (EH) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Barr, Dana Boyd	Research Professor	Non-tenure-track	1.00	F	WHITE	PhD	Georgia State University	Analytical Chemistry	Biomarkers and Environmental Health, Research Methods	Environmental Exposures Assessment; Maternal and Child Health
Caudle, William	Asst Professor	Tenure	1.00	M	WHITE	PhD	Emory University	Biological and Biomedical Science	Human Toxicology	Environmental Exposures; Neurodegenerative Diseases
Darrow, Lyndsey Alise	Asst Professor	Tenure	1.00	F	WHITE	PhD	Emory University	Epidemiology	SAS Programming, Epidemiologic Methods	Children's Environmental health; Effects of Air Pollution on Respiratory Disease and Pregnancy
Guillot, III, Thomas Spec	Asst Research Prof	Non-tenure-track	0.92	M	WHITE	PhD	Emory University	Neuroscience	Neurotoxicology	Neurotoxicology; Pesticide Exposure; Parkinson's Disease
Klein, Mitchell	Asst Research Prof	Non-tenure-track	1.00	M	WHITE	PhD MAT	Emory University Indiana University	Epidemiology Mathematics	Analytic Methods for Clinical Research, Programming in SAS, Epi. Fundamentals	Air Pollution and Respiratory Outcomes
Levy, Karen	Asst Professor	Tenure	1.00	F	WHITE	PhD MSc MPH	UC Berkeley UC Berkeley UC Berkeley	Environmental Science; Policy & Mgt Environmental Science; Policy & Mgt Epidemiology	Research Methods for Studies of Water and Health; Epi. of Enteric Diseases	Water Quality and Health Outcomes; Environmental Determinants of Infectious Disease
Li, Shenshen	Visiting	Non-	1.00	M	ASIAN	MSCS	Henan	Computer Science	Air pollution	Atmospheric

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Environmental Health (EH) Department										
	Scholar	tenure-track					University		monitoring and exposure	Pollution Monitoring Technology; Spaceborne Remote Sensing
Liu, Yang	Asst Professor	Tenure	1.00	M	ASIAN	PhD MS	Harvard University University of California	Environmental Science and Engineering; Mechanical Engineering	Remote Sensing of Environment and Public Health	Air Quality; Remote Sensing
Miller, Gary W	Assoc Dean, Research	Tenure	1.00	M	WHITE	PhD MS	University of Georgia Old Dominion University	Pharmacology and Toxicology Biology	Human Toxicology, Neurotoxicology, Molecular Toxicology	Neurodegenerative Disorders; Parkinson's Disease; Environmental Exposures
Remais, Justin Victor	Asst Professor	Tenure	1.00	M	WHITE	PhD MS	University of California at Berkeley University of California at Berkeley	Environmental Health Sciences Civil and Environmental Engineering	Environmental Determinants of Infectious Disease, Global Climate Change	Environmental Determinants of Infectious Disease; Climate Related Health Risks
Ryan, P Barry	Professor	Tenure	1.00	M	WHITE	PhD MS	Wesleyan University University of Chicago	Computational Chemistry Physical Chemistry	Control of Environmental Hazards, Risk Assessment	Dietary Pesticide Exposure; Air Pollution Exposure
Sarnat, Jeremy A.	Associate Professor	Tenure	1.00	M	WHITE	ScD MS MSC	Harvard University Indiana University Harvard University	Environmental Health Biological Anthropology Environmental Risk Assessment	Urban Air Quality, Control of Environmental Hazards	Human Exposure to Urban Air Pollution
Sarnat,	Asst	Tenure	1.00	F	WHITE	ScD	Harvard SPH	Environmental	Research Design, Air	Air Pollution and

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Environmental Health (EH) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Stefanie Tania Ebelt	Professor					MSc	University of British Columbia	Health Occupational Hygiene	Pollution, and Health	Cardiorespiratory Health; Population Based Time Series; Panel Based Studies
Steenland, Nelson Kyle	Professor	Tenure	1.00	M	WHITE	PhD PhD MS	University of Pennsylvania; State University of NY @ Buffalo University of Cincinnati	Epidemiology History Mathematics (Statistics)	Environmental Epi.	Neurological Diseases; Adult Occupational Lead Exposure; Indoor Air Pollution; PFOA Water Contamination
Strickland, Matthew Joseph	Asst Professor	Tenure	1.00	M	WHITE	PhD MPH MA	Emory University Ohio State University Care Western Reserve University	Epidemiology Epidemiology Anthropology	Environmental Epi.	Air Pollution and Respiratory Health; Spatial and Temporal Modeling and Infant Morbidity
Tolbert, Paige E	Professor And Chair	Tenure	1.00	F	WHITE	PhD MSPH	University of North Carolina, Chapel Hill University of North Carolina, Chapel Hill	Epidemiology Environmental Science	Environmental Epi	Air Pollution and Respiratory Health; Water Quality and Health Outcomes
Zhou, Ying	Asst Research Prof	Non-tenure-track	0.80	F	ASIAN	DSc	Harvard University, SPH	Environmental Health	Risk Assessment	Global Health; Risk Assessment

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Epidemiology (EPI) Department										
Abramson, Jerome	Asst Research Prof	Non-tenure-track	1.00	M	WHITE	PhD	Yale University	Epidemiology	Cardiovascular Epidemiology	Cardiovascular Disease
Austin, Harland D	Professor	Tenure	1.00	M	WHITE	DSc MS	Harvard University; State University of New York, Stony Brook	Epidemiology; Statistics	Epidemiologic Methods	Cancer Epidemiology; Epidemiologic Methods; Prevention of Sexually Transmitted Diseases; Blood Clotting and Bleeding Disorders
Bostick, Roberd M	Professor	Tenure	1.00	M	WHITE	MD MPH	The Medical University of South Carolina; University of Minnesota	Medicine; Epidemiology	Epidemiology of Cancer; Epidemiology Grant Writing; PhD Journal Club	Cancer Epi ; Etiology; Prevention; Diet and Nutrition; Biomarkers and Molecular Epi
Brockman, Janice E	Senior Associate	Non-tenure-track	1.00	F	WHITE	MPH	Emory University	Epidemiology	Epidemiology Data Management	Cancer Prevention; Cancer Epi.; Clinical Trials
Carter, John T	Clin Asst Professor	Non-tenure-track	1.00	M	WHITE	PhD MPH	Rice University; Emory University	Physics; Epidemiology	Data Sources and Methods in EPI	Perinatal epidemiology; Nutrition; Cancer
Curran, James Walter	Professor	Tenure	1.00	M	WHITE	MD MPH	University of Michigan; Harvard SPH	Medicine; Epidemiology	HIV/AIDS; Epidemiology	AIDS; Emerging Infectious Diseases
Drews-Botsch, Carolyn Dawson	Assoc Professor	Tenure	1.00	F	WHITE	PhD MPH	University of California, Los Angeles; University of California, Los Angeles	Epidemiology; Population Family Health	Pediatric & Perinatal Epidemiology	Pediatric Epidemiology; Epi of Developmental Disabilities; Epi Methods; Ophthalmic Epi.

Epidemiology (EPI) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Flanders, William Dana	Professor	Tenure	1.00	M	WHITE	MD DSc MPH MA	University of Vermont; Harvard University; Harvard University; Columbia University	Medicine; Epidemiology; Epidemiology; Mathematics	Advanced and Intermediate Epidemiologic Methods	Epidemiologic Methodology; Chronic Disease Epidemiology; Cancer Epidemiology
Gazmararian, Julie A.	Assoc Professor	Tenure	1.00	F	WHITE	PhD MPH	University of Michigan; University of South Carolina	Epidemiology; Health Education	Social Epidemiology	Health Literacy; Maternal and Child Health; Health Outcomes; Social Epidemiology
Goodman, Michael	Assoc Professor	Tenure	1.00	M	WHITE	MD MPH	Kaunas Medical Academy, Lithuania Johns Hopkins University	Medicine; Public Health	Epidemiologic Methods	Cancer Prevention; Cancer Epidemiology; Molecular/Genetic Epidemiology, cancer Outcomes, Children's Health
Goyal, Abhinav	Asst Professor	Tenure	1.00	M	ASIAN	MD MHS	Northwestern University Medical School; Duke Univ.	Medicine; Health Sciences	Fundamental of Epidemiology	Diabetes; Global Health Health; Outcomes; Risk Assessment; Cardiovascular Disease
Hogue, Carol J Rowland	Professor	Tenure	1.00	F	WHITE	PhD MPH	University of North Carolina, Chapel Hill; University of North Carolina, Chapel Hill	Epidemiology; Epidemiology	Issues in Women's Health; Applied Maternal and Child Health Epidemiology	Maternal and Child Health; Reproductive Health

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Epidemiology (EPI) Department										
Howards, Penelope P.	Asst Professor	Tenure	1.00	F	WHITE	PhD MS	University of North Carolina, Chapel Hill; Pennsylvania State University	Epidemiology; Geography	Application of Epidemiologic Concepts	Reproductive Epi.
Kaufman, Sean G.	Senior Associate	Non-tenure-track	1.00	M	WHITE	MPH	San Diego State University	Health Promotion and Education	Behavioral-based Preparedness; Risk Communication; Emergency Health Education	Training; Workforce Development
Kleinbaum, David G	Professor	Tenure	1.00	M	WHITE	PhD	University of North Carolina	Mathematical Statistics	Fundamentals of Epidemiology; Epidemiologic Modeling; Longitudinal Data	Theoretical Research in Multivariate Analysis; Applied Statistical and Epidemiologic Methods
McGowan Jr., John E	Professor	Tenure	0.80	M	WHITE	MD	Harvard University	Medicine	Infectious Diseases; Hospital/ Healthcare Epidemiology.; Epidemiology of Tuberculosis; Clinical Research	Antibiotic Resistance; Disease Surveillance; Global Health
Menon, Ramkumar	Assoc Research Prof	Non-tenure-track	0.80	M	ASIAN	PhD MS	Univ of Aarhus, Aarhus, Denmark Wright State University, Dayton, OH	Medicine - Genetic Epidemiology; Microbiology and Immunology	Microbiology; Immunology	Maternal and Child Health; Reproductive Immunology
Mink, Pamela J.	Asst Professor	Tenure	1.00	F	WHITE	PhD MPH	University of Minnesota;	Epidemiology; Epidemiology	Epidemiologic Methods	Cancer Prevention

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
							Epidemiology (EPI) Department			
Pearce, Bradley D	Assoc Research Prof	Non-tenure-track	0.80	M	WHITE	PhD	University of Miami	Pharmacology	Maternal-child health	Adolescent Health/Child Health; Behavior and Health; Infectious Disease; Maternal and Child Health; Mental Health
Spaulding, Anne C	Asst Professor	Tenure	1.00	F	WHITE	MD MPH	Medical College of Virginia; Johns Hopkins SPH	Medicine; Public Health	Dynamics of HIV/STD Transmission; Correctional Healthcare	Infectious and Chronic Disease Epidemiology
Su, Shaoyong	Asst Research Prof	Non-tenure-track	1.00	M	ASIAN	PhD	Peking Union Medical College & Chinese Academy of Medical Sciences	Epidemiology	Cardiovascular Epidemiology	Cardiovascular Disease; Genetic Epidemiology
Sullivan, Kevin M	Assoc Professor-RT	Non-tenure-track	1.00	M	WHITE	PhD MPH MHA	University of Michigan; University of Michigan; Ohio State University	Epidemiology; Epidemiology; Preventive Medicine	Applied Epidemiology; Epidemiologic Modeling; EPI Info	Bioinformatics; Disease Surveillance; Global Health; HIV/AIDS; Infectious Disease; Nutrition; Statistical Modeling
Sullivan, Patrick Sean	Assoc Professor	Tenure	1.00	M	WHITE	PhD DVM	University of Tennessee, Knoxville TN; University of Tennessee, Knoxville TN	Comparative and Experimental Medicine; Veterinarian	HIV Epidemiology	Behavior and Health; Disease Surveillance; HIV/AIDS; Infectious Disease; Sexual Behavior

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Epidemiology (EPI) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Vaccarino, Laura V	Professor And Chair	Tenure	1.00	F	WHITE	MD PhD PhD	Milan University, Italy; Milan University Institute of Pharmacology ; Yale University School of Medicine	Medicine; Nutrition Toxicology; Epidemiology	Cardiovascular Disease Epidemiology; Issues in Women's Health	Cardiovascular Epidemiology and Prevention
Ward, Kevin	Asst Research Prof	Non-tenure-track	1.00	M	WHITE	PhD MPH	Emory University; Emory University	Epidemiology; Epidemiology	Epidemiology Methods; Public Health Surveillance	Bioinformatics; Cancer Prevention; Disease Surveillance; Statistical Modeling

Hubert Department of Global Health (GH)										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Ali, Mohammed Kumail	Asst Professor	Tenure	1.00	M	ASIAN	(IP) MBChB MSc MSc	University of Cape Town Medical College; Oxford Univ., UK; Oxford Univ., UK	Medicine and Surgery; Global Health Sciences; Cardiovascular Medicine	Knowledge Translation; Diabetes	Diabetes; Global Health; Cardiovascular Disease; Chronic Disease Surveillance; Economics and Policy
Andes, Karen Louise	Assistant Professor	Non-tenure-track	1.00	F	WHITE	PhD MA	Northwestern University; Northwestern University	Political Science; Political Science	Qualitative Methods for Research in Global Health; Qualitative Data Analysis; Proposal Development	Sexual and Reproductive Health in Adolescents and Young Adults; Qualitative Research Methods
Argeseanu Cunningham, Solveig	Asst Professor	Tenure	1.00	F	WHITE	PhD MA MSc	University of Pennsylvania Philadelphia; University of Pennsylvania Philadelphia; London School of Economics and Political Science	Demography and Sociology; Demography; Develop-mental Studies	Global Health Survey Research Methods; Obesity and Society; Demography for PH	Adolescent Health/Child Health; Behavior and Health; Global Health; Nutrition
Brachman, Philip S	Professor	Non-tenure-track	1.00	M	WHITE	MD	University of Wisconsin Medical School	Medicine	Public Health Surveillance; Epidemiology in Public Health Practice; Public Health Prepare & Bioterrorism; International Infectious Diseases; Global Parasitic Diseases; Humphrey	Infectious Diseases; Public Health Surveillance; Bioterrorism; Prevention

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Hubert Department of Global Health (GH)										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
									Fellow Practicum	
Day, Cheryl Liane	Asst Research Prof	Non-tenure-track	1.00	F	WHITE	PhD	Harvard Medical School	Virology	Vaccinology	Cellular Immune Responses in Human Chronic Infections; Viral Infectivity; AIDS Training
del Rio, Carlos	Professor And Chair	Tenure	1.00	M	HISPANIC	MD	Universidad La Salle	Medicine	International Infectious Diseases; Public Health Implications; Epidemiology and Dynamics STD/HIV Transmission	HIV/AIDS
Girard, Amy Webb	Asst Professor	Tenure	1.00	F	WHITE	PhD	Emory University	Biological and Biomedical Sciences	Qualitative Research Methods; Determinants of Food Intake; Nutrition	Food Security; Agriculture and Nutrition; Nutrition Epidemiology; Qualitative Methods; Community-Based Participatory Research
Hennink, Monique Marcelle	Assoc Professor	Tenure	1.00	F	WHITE	PhD	University of Southampton, United Kingdom	Demography	Qualitative Methods for Research in Global Health Qualitative Data Analysis	Adolescent Health/Child Health; Behavior and Health; Community-Based Research; Global Health; HIV/AIDS; Sexual Behavior; Qualitative

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Hubert Department of Global Health (GH)										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
										Research Methods
Huang, Cheng	Asst Research Prof	Non-tenure-track	1.00	M	ASIAN	PhD MA MA	University of Pennsylvania; University of Pennsylvania; Peking University	Demography Demography Population Studies	Population Dynamics	Tobacco Control; Demography; Global Health; Public Nutrition
Klugman, Keith P	Professor	Tenure	1.00	M	WHITE	PhD MMed	University of Witwaters-rand	Physiology; Microbiological Pathology	Global Issues	Antibiotic Resistant; Immunization Policies; Acute Respiratory Infections; Bacterial Vaccines; Typhoid Fever
Leon, Juan	Asst Professor	Tenure	1.00	M	HISPANIC	PhD MPH	Northwestern University Medical School; Northwestern University Medical School	Immunology; Epidemiology	Public Health Biology; Global Perspectives in Parasitic Diseases	Immunology; Parasitic and Enteric Viral Pathogens (Foodborne and Waterborne Disease); Chagas Disease
Liu, Pengbo	Asst Research Prof	Non-tenure-track	1.00	M	ASIAN	PhD MS	Peking Union Med College; Xi'an Jiaotong University, Xi'an, China	ID Epidemiology; Epidemiology	Water-borne Illnesses	Bioinformatics; Infectious Disease; Safe Water
Martorell, Reynaldo	Professor	Tenure	1.00	M	HISPANIC	PhD	University of Washington, Seattle	Biological Anthropology	Elimination of Micronutrient Malnutrition	Maternal and Child Nutrition; Child Growth and Development; Micronutrient Malnutrition; Obesity and

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
										Chronic Diseases
McFarland, Deborah A	Assoc Professor	Tenure	1.00	F	WHITE	PhD MSc MPH	University of Tennessee; London School of Economic and Political Science; University of North Carolina	Strategic Management and Industrial Organization Economics; Economics; Public Health	Policies in Global Health; International Health Management; Health Systems Performance and Health Systems Financing Methods and Evidence	Evaluation; Global Health; Health Economics; Health Policy; Infectious Disease
Moe, Christine Lorraine	Assoc Professor	Tenure	1.00	F	WHITE	PhD MS	University of North Carolina, Chapel Hill; University of North Carolina, Chapel Hill	Environmental Science and Engineering; Environmental Science and Engineering	Water and Sanitation in Developing Countries; Environmental Health Microbiology	Global Health; Viral Gastroenteritis Infectious Disease; Safe Water and Sanitation
Null, Alex Clair	Asst Professor	Tenure	1.00	F	WHITE	PhD	University of California - Berkeley	Agricultural and Resource Economics	Monitoring and Evaluating Global Health Programs	Community-Based Research; Evaluation; Global Health; Health Economics; Rural Health; Safe Water; Statistical Modeling
Omer, Saad Bin	Asst Professor	Tenure	1.00	M	ASIAN	PhD MPH MBBS	Johns Hopkins University; Johns Hopkins University; The Aga Khan Univ	Global Disease Epidemiology; General Public Health; Medicine	Vaccines and Vaccine Preventable Diseases; Field Trials and Intervention Studies	HIV/AIDS; Infectious Disease; Vaccines

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
							Medical College			
Ramakrishnan Usha	Assoc Professor	Tenure	1.00	F	ASIAN	PhD MSc	Cornell University; University of Madras, India	International Nutrition; Foods and Nutrition	Nutritional Assessment; Maternal And Child Nutrition; Human Nutrition	Global Health; Maternal and Child Health; Nutrition
Stein, Aryeh D.	Assoc Professor	Tenure	1.00	M	WHITE	PhD MPH	Columbia University; Columbia University	Epidemiology; Epidemiology	Diet and Chronic Disease; Monitoring and Evaluating Global Health Programs; International Health; Assessment of Dietary Intakes	Adolescent/Child Health; Behavior and Health; Diabetes; Global Health; Nutrition; Obesity Prevention; Cardiovascular Disease
Stephenson, Robert Brian	Asst Professor	Tenure	1.00	M	WHITE	PhD MSc	Univ of Southampton; London School of Hygiene and Topical Medicine	Demography; Medical Demography	Migration and Health; Maternal & Child Health Demographics; Monitoring and Evaluation of International Health Programs	Reproductive Health; Maternal Health; Family Planning; Service Delivery
Thurman, Sandra L	Lecturer	Non-tenure-track	1.00	F	WHITE	MA	St. Paul's University	Religion and Health	Religion, health and AIDS	HIV/STD Prevention; Reproductive Health
Venkat Narayan, Kabayam M.	Professor	Tenure	1.00	M	ASIAN	MD MBA MSc	St. John's Medical College, Bangalore, India; Herriot Watt Univ., Edinburgh, UK; University	Medicine and Surgery; Public Health Management	Knowledge Translation; Diabetes: A Model for Global Non-communicable Disease Prevention and Control	Diabetes; Global Health; Health Economics; Health Policy; Nutrition; Cardiovascular Disease

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Hubert Department of Global Health (GH)										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
							of Edinburgh, United Kingdom			
Vidal Graniel, Jorge Eugenio	Asst Research Prof	Non-tenure-track	1.00	M	HISPANIC	PhD MSc	CINVESTAV National School of Biological Sciences; ENCB-IPN	Cellular Microbiology; Microbiology	Antibiotic resistance of bacterial biofilms; molecular bacterial pathogenesis; lab methods in molecular epi	Antibiotic Resistance; Bioterrorism; Infectious Disease
Williamson, David F.	Visiting Professor	Non-tenure-track	1.00	M	WHITE	PhD MS	Cornell University; Cornell University	International Nutrition; International Nutrition	Epidemiology	Diabetes
Yount, Kathryn Mary	Assoc Professor	Tenure	1.00	F	WHITE	PhD MHS	Johns Hopkins University; Johns Hopkins University	Social Demography; Demography	Population Dynamics; Gender and Global Health	Behavior and Health; Global Health; Maternal and Child Health

Health Policy and Management (HPM) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Adams, E Kathleen	Professor	Tenure	1.00	F	WHITE	PhD MS	University of Colorado, Boulder; Florida State University	Economics; Economics	Public Financing/Health Care Systems; Access to Care: Measures, Determinants and Current Issues	Hospital markets and competition; Medicaid and other vulnerable populations; Cost effectiveness evaluation
Becker, Edmund R	Professor	Tenure	1.00	M	WHITE	PhD MA	Vanderbilt University; Ohio University	Sociology; Sociology	Physician Performances; Negotiations and Conflict Management in Healthcare Settings; Healthcare Organization and Management	Health Care Organization and Financing; Health Politics and Policy; Negotiations and Conflict Resolution; Organizational Theory and Behavior; Physician Payment and Productivity; Unions and Labor Relations; Worksite Health Behaviors and Health Outcomes
Blake, Sarah Caroline	Senior Associate	Non-tenure-track	1.00	F	WHITE	PhD MA	Georgia State University/Georgia Tech; George Washington University	Public Policy; Public Policy in Women's Studies	US Healthcare System; Women's Health Policy; Public Health Finance; Program Planning Health Promotion	Adolescent Health/Child Health; Cancer Prevention; Evaluation; Health Policy; Maternal and Child Health; Public Health; Preparedness
Culler, Steven	Assoc	Tenure	1.00	M	WHITE	PhD	University of	Economics;	Financial &	Health Care

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

Gray shaded rows indicate faculty who supported the research program, but not the instructional program in 2010-2011.

Health Policy and Management (HPM) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
D.	Professor					MA	Illinois; University of Illinois	Economics	Managerial Accounting for Health Care Organization; Health Care Financial Management; Economic Evaluation of Health Care Programs	Financial Management and Financial Accounting; Utilization of Health Services; Cost Effectiveness Analysis; Outcomes Research and Risk Adjusted Benchmarking
Cummings, Janet R	Asst Professor	Tenure	1.00	F	WHITE	PhD	University of California, Los Angeles	Health Services, Economics Cognate	Theory-Based Research Design in Health Services and Health Policy; US Political Institutions and Health Policy Implementation	Adolescent Health/Child Health; Health Economics; Health Policy; Mental Health
Druss, Benjamin G	Professor	Tenure	1.00	M	WHITE	MD MPH	New York University; Yale University	Medicine General; Public Health	Mental Health/Public Health Colloquium; The Mental Health/Medical Interface in the US	Mental Health; Primary Care
Gaydos, Laura Marti Dokson	Asst Research Prof	Non-tenure-track	1.00	F	WHITE	PhD	University of North Carolina, Chapel Hill	Health Policy and Administration	Health Policy and Management Research Seminar, Directed Thesis Preparation	Women's/Reproductive Health; Adolescent Health; Religion and Public Health; Maternal and Child Health; Obesity Prevention; Sexual Behavior
Howard,	Assoc	Tenure	1.00	M	WHITE	PhD	Harvard	Health Policy,	Policy Analysis;	Health Economics;

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)

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Health Policy and Management (HPM) Department										
Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
David Hill	Professor							Economics	Health Economics; US Health Care System	Medical Decision-making
Lipscomb, Joseph	Professor	Tenure	1.00	M	WHITE	PhD	University of North Carolina, Chapel Hill	Economics	Health Economics	Health Economics and Outcomes Research; Patient-Reported Outcomes Assessment; Quality-of-Care Evaluation and Improvement; Cost-Effectiveness Analysis
Phillips, Victoria L	Assoc Professor	Tenure	1.00	F	WHITE	PhD	Oxford University	Health and Labor Economics	Economic Evaluation of Health Care Programming	Long Term Care; Dementia; Evaluation
Raskind-Hood, Cheryl Lynne	Senior Associate	Non-tenure-track	0.95	F	WHITE	MPH MS	Emory University; State University of New York	Epidemiology Life Span Development/ Cognitive Aging	Public Health Finance; Access to Healthcare; Quantitative Analysis	Life-span Development; Computer Application/ Systems for Public Health; Quantitative Analysis; Database Development; Maternal and Child Health
Roemer, Enid Chung	Visiting Assistant Professor	Non-tenure-track	1.00	F	ASIAN	PhD	George Washington University	Applied Social Psychology	Social Psychology	Diet/nutrition; Physical Activity; Stress Management; Smoking; Obesity-related Disease Prevention
Saltman,	Professor	Tenure	1.00	M	WHITE	PhD	Stanford	Political Science;	Comparative Health	Health Care

Table 4.1a: Faculty who Support Degree Offerings of the School as of November 2011 (CORE FACULTY)
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Name	Title/ Academic Rank	Tenure Status or Class-ification	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Health Policy and Management (HPM) Department										
Richard B						MA	University; Stanford University	Political Science	Systems; US Health Policy	Systems
Thorpe, Kenneth E.	Professor And Chair	Tenure	1.00	M	WHITE	PhD MA	Rand Graduate Institute; Duke University	Public Policy; Public Policy	Public Health and Health Resource Allocation; Health Policy	National and State Health Care Policy; Health Care Financing and Organization; Application of Econometric Techniques to Health Policy Issues
Yang, Zhou	Asst Professor	Tenure	1.00	F	ASIAN	PhD MPH	University of North Carolina, Chapel Hill; University of California, Los Angeles	Health Policy and Administration; Health Services	Quantitative Analysis of Health Services Research	Cost and Efficacy of Prescription Drugs; Economic Burden of Chronic Diseases
			142.83							

FTE of faculty listed in this table are the FTE assigned in the human resources database (and include two faculty who support the research program, but not the instructional program), so the FTE totals here will be slightly different than in Table 1.6e, where FTE of Core faculty 0.80 FTE or more were counted as 1.00 FTE and research faculty were not included.

b. If the school uses other faculty in its teaching programs (adjunct, part-time, secondary appointments, etc), summary data on their qualifications should be provided in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to teaching program, e) gender, f) race, g) graduate degrees earned, h) discipline in which degrees were earned, and i) contributions to the teaching program.

Other faculty in the teaching program

The RSPH defines *other faculty who support the teaching program* as those with adjunct faculty appointments, primary appointments in the department of less than 0.8 FTE (part-time), or joint-secondary appointments and who also taught a class during the academic year or mentored students such as directing a thesis or dissertation.

Adjunct faculty appointments are given to those who do not have another faculty appointment at Emory University but who contribute to the department or school. *Joint-secondary* appointments are given to faculty members who hold a faculty appointment in another department or school at Emory University but who also contribute to the programs of the department in which they are given a joint-secondary appointment. For the purposes of the self-study, *other faculty* (e.g., adjunct, part-time and joint-secondarily appointed faculty) are counted only if they taught a course during the academic year or, in the case of part-time faculty, if they mentored students (e.g., directed a thesis or dissertation).

When calculating FTE faculty or faculty-student ratios, *other faculty who support the teaching program* are counted as 0.05 FTE per credit hour taught. FTE of *other faculty who support the teaching program,* including those who support the teaching program for the CMPH program, have been included in the departments to which they are appointed. (For specific calculations on CMPH faulty, see Criteria 2.12)

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

	Behavioral Sciences and Health Education (BSHE) Department							
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Alexander, Martha E	Visiting Instructor	Workforce and Career Development Specialist; NCBDDD, CDC	0.15	F	WHITE	MPH MA	Public Health Administration and Health Educ.; Speech/ Language Pathology;	Curriculum and Instruction in Health Ed.
Baldwin, Grant T.	Visiting Instructor	Director of Division of Unintentional Injury Prevention National Center for Injury Prevention and Control	0.20	M	WHITE	PhD MPH	Health Behavior and Health Educ.; Behavioral Sciences and Health Educ.	Community Needs Assessment
Brody, Gene H.	Research Professor	Part-time Research Professor Emory University, RSPH	0.50	M	WHITE	PhD MA	Developmental Psychology; Developmental Psychology	Behavior and Health, Community-Based Research, Drug Abuse Prevention
Butler, Susan O.	Asst Professor	Research Assistant Professor Emory University, RSPH	0.59	F	WHITE	EdD MEd	Public Health Education; Health and Physical Educ.	Community Needs Assessment, Disease Prevention, Health Advocacy
Carlson, Lisa M	Adjunct Professor	Director of Academic Programs and Administration, Emory University School of Medicine	0.15	F	WHITE	MPH	Behavioral Sciences and Health Educ.	Qualitative Research Methods, Public Health Ethics, and Behavioral Sciences
Conis, Elena Christine	Senior Associate	Senior Fellow Emory University	0.74	F	WHITE	PhD MJ MS	Anthropology, History, and Social Medicine; Journalism; Global Health	History of Public Health

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Behavioral Sciences and Health Education (BSHE) Department								
							and Development	
Comeau, Dawn Leslie	Research Asst Prof	Assistant Research Professor and Project Director Emory University, RSPH	0.55	F	WHITE	PhD MPH	Women's Studies; Behavioral Sciences and Health Educ.	Qualitative Research Methods, Curriculum and Instruction in Health Ed., Behavioral Sciences
Filipowicz, Rebecca Tomlin	Visiting Instructor	Epidemiology and Surveillance Group Manager, Texas Dept of State Health Services	0.05	F	WHITE	MPH MS	Behavioral Sciences and Health Educ.; Kinesiology, Exercise Physiology	Quantitative Analysis, Community Health, Applied Behavioral Research Methods
French, Jennifer Katherine Nichols	Adjunct Professor	Research Supervisor, Strategic Planning and Research Porter Novelli	0.10	F	WHITE	MPH	Behavioral Science and Health Educ.	Theory and Application of Social Marketing in Public Health
Hankin-Wei, Abigail Dorit	Adjunct	Assistant Professor, Emory University Emergency Medicine	0.05	F	WHITE	MD MPH	Medicine; Public Health	Violence as Public Health Problem
Hinman, Johanna Mary	Staff	Associate Director of Operations, Emory Prevention Research Center	0.10	F	WHITE	MPH	Behavioral Sciences and Health Educ.	Behavioral Science Theory
Jorgensen, Cynthia M	Visiting Instructor	Lead for Communication, Education, and Training in Viral Hepatitis Division, CDC	0.25	F	WHITE	DrPH	Public Health	Risk and Health Communications, Behavioral Science Theory

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Behavioral Sciences and Health Education (BSHE) Department								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Koplan, Carol	Visiting Instructor	Assistant Professor Grady Memorial Hospital	0.10	F	WHITE	MD	Medicine	Mental Health Policy and Promotion, Prevention and Behavioral Disorders
Kushner, Howard	Professor	Director of BSHE MPH Program Emory University, RSPH	0.25	M	WHITE	PhD MA	History of Medicine; History	Mental Illness, Addiction and Behavior, Health History
Ngowe, Karen Kanne	Visiting Instructor	Senior Instructional Technologist, CDC	0.10	F	WHITE	MA	Education Administration, Adult and Continuing Educ.	Public Health Preparedness
Noonan, Rita K	Visiting Instructor	Behavioral Scientist CDC	0.10	F	WHITE	PhD MA	Sociology; Sociology	Violence as a Social Problem, Women and Society
Pluhar, Erika	Visiting Instructor	Therapist Private Practice	0.10	F	WHITE	PhD MS/EdS	Education - Human Sexuality; Professional Counseling	Human Sexuality
Rutz, Daniel C	Visiting Instructor	Global Health Communication Specialist CDC	0.10	M	WHITE	BS MPH	Speech and Broadcasting; Public Health	Integrated Communication Strategies
Sanchez, Travis Howard	Visiting Instructor	Associate Chief for Science CDC	0.10	M	HISPANIC	DVM MPH	Veterinary Medicine; International Health and Epidemiology	Public Health Surveillance
Semaan, Salaam	Visiting Instructor	Deputy Associate Director for Science CDC	0.20	F	WHITE	DrPH MPH	Health Services Research, Evaluation, and Policy Research;	Public Health Ethics

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Behavioral Sciences and Health Education (BSHE) Department								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
							Epidemiology and Biostatistics	
Smith, Iris Evangeline	Clin Assoc Professor	Coordinator, S.E. Resource Team; Education Development Center	0.75	F	BLACK	PhD MPH	Community Psychology; MPH Health Education	Social Behavior and Health; Substance Abuse; Program Evaluation
Tangka, Florence Kpulaban	Visiting Instructor	Health Economist and Instructor/Case Studies Facilitator, CDC	0.10	F	BLACK	PhD MS	Food and Resource Applied Economics; Agricultural Economics	Global Humanitarian Emergencies

Biostatistics and Bioinformatics (BIOS) Department								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Clennon, Julie Ann	Visiting Instructor	Postdoctoral Research Fellow, BIOS, Emory University, RSPH	0.10	F	WHITE	PhD MSc	Veterinary Pathobiology; Community Health Epidemiology	Geographic Information Systems for Public Health
Gordon, Frank Jeffrey	SOM	Associate Professor Emory University	0.20	M	WHITE	PhD MA	Biopsychology; Psychology	Statistics and Experimental Biology
Haberling, Dana Lynn	Visiting Instructor	Biostatistician, CDC	0.05	F	WHITE	MSPH	Biostatistics	Statistical Methods
Higgins, Melinda Kay	SON	Associate Research Professor/Senior Statistician	0.15	F	WHITE	PhD MS	Chemometrics/ Analytical Chemistry;	Statistical Methods

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Biostatistics and Bioinformatics (BIOS) Department								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
		Emory University					Statistics	
Overcash, Marc James	Emory University - Staff	Assistant Dean Information Technology, Emory University SOM	0.20	M	WHITE	BA	English Literature	Public Health Informatics
Page, Michael Chance	Emory Librarian	Coordinator of Geospatial Services and Data Librarian Emory University Libraries	0.15	M	WHITE	MA	Geography	Advanced GIS, Remote Sensing
Perez, Sebastian Daniel	Visiting Instructor	Present Data Analyst/Statistician Emory University	0.05	M	WHITE	MSPH	Biostatistics	Statistical Methods
Superak, Hillary Margolin	SPH Staff	Doctoral student, Biostatistics and Bioinformatics, Emory University	0.05	F	WHITE	MSPH	Biostatistics	SAS Lab
Vidakovic, Brani	Adjunct Professor	Professor of Biomedical Engineering, Georgia Institute of Technology and Emory University	0.05	M	WHITE	PhD	Statistics	Intro to BIOS

Environmental Health (EH) Department								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
Devine, Owen John	Adjunct Associate Professor	Senior Statistician; CDC	0.20	M	WHITE	PhD MS	Biostatistics; Forest Resources	Risk Assessment, Directed Study

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

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Environmental Health (EH) Department								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
Greenwald, Robert James	Asst Research Prof	Research Assistant Professor Emory University, RSPH	0.75	M	WHITE	PhD MS	Environmental Engineering; Environmental Engineering	Air Quality in Urban Environments
Hertzberg, Richard Carl	Adjunct Professor	Senior Advisor in Biomathematics, Toxicology Excellence for Risk Assessment Emory University	0.10	M	WHITE	PhD	Biomathematics	Risk Assessment in Environmental Health
Hess, Jeremy Johnson	SOM	Assistant Professor Emory University SOM	0.30	M	WHITE	MD MPH	Medicine; Global Environmental Health	Environment, Climate, and Infectious Disease
Houry, Debra Elaine	SOM	Associate Professor with Tenure Emory University SOM	0.20	F	WHITE	MD MPH	Medicine; Public Health	Violence as a Public Health Problem, Comparative Health Systems, Injury Prevention
Johnson, Barry Lee	Adjunct Professor	Adjunct Professor Emory University RSPH	0.15	M	WHITE	PhD MS	Electrical Engineering; Electrical Engineering	Environmental Health Policy
Keim, Mark Edward	Visiting Instructor	Senior Science Advisor CDC	0.10	M	WHITE	MD	Medicine	National Security and Public Health Consequences of Disasters
Kitron, Uriel D	College - Env. Studies	Professor and Chair Emory University Env. Studies	0.20	M	WHITE	PhD MPH	Biological Sci., Ecology, Parasitology; Epidemiology	Behavior, Ecology, and Evolution

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Environmental Health (EH) Department								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Kochtitzky, Christopher S	Visiting Instructor	Associate Director for Program Development, CDC	0.10	M	WHITE	MS	Environmental and Natural Resources Planning	Built Environment
Konradsen, Flemming	Visiting Professor	Director, Copenhagen School of Global Health	0.05	M	WHITE	PhD MSc	Malaria Epidemiology; Environmental Health	Malaria Transmission, Water Sanitation, Pesticide Poisoning
Millette, M Deborah	Adjunct Instructor	Deputy Division Director, CDC	0.20	F	WHITE	MPH	Public Health	Env. Health Practice
Moorhead, Joel F	Adjunct Assistant Professor	Clinical Director FairCode Associates	0.10	M	WHITE	PhD MD MPH	Public Health; Medicine; Public Health	Env. Health Practice
Myers, Melvin L.	Visiting Instructor	Cost Engineer Consultant CDC	0.15	M	WHITE	MPA	Intl Environmental Policy, Science and Technology Management	Env. Health Policy
Vazquez Prokopec, Gonzalo Martin	Adjunct Associate	Guest Researcher CDC	0.20	M	HISPANIC	PhD MSc	Ecology; Ecology	Disease Ecology, Spatial Analysis of GIS Data
White, Mary Claire	Adjunct Professor	Chief of Cancer Division CDC	0.10	F	WHITE	DSc MPH	Epidemiology and Occupational Health; Epidemiology	Env. Epidemiology

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

	Epidemiology (EPI) Department							
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Berkelman, Ruth Lyon	Tenured Professor	Professor Emory University RSPH	0.50	F	WHITE	MD	Medicine	Public Health Preparedness, Infectious Diseases
Boring, John	Professor	Professor Emory University RSPH	0.50	M	WHITE	PhD MS	Microbiology; Microbiology	Analysis of Clinical Research Data, Data Management
Guest, Jodie L	Visiting Instructor	Associate Professor Emory University SOM	0.10	F	WHITE	PhD MPH	Epidemiology; Epidemiology	Fundamentals of Epi., Methods in HIV Epi.
Gwinn, Marta	Adjunct Instructor	Senior Consultant CDC	0.05	F	WHITE	MD MPH	Medicine; Biostatistics	Human Genome Epi.
Hinman, Alan R	Adjunct Professor	Senior Public Health Scientist The Task Force for Global Health	0.30	M	WHITE	MD MPH	Medicine; Public Health	Immunization, Health and Human Rights, Infectious Diseases, Disease Elimination
Idler, Ellen Louise	College - Sociology	Professor Emory University, Soc.	0.25	F	WHITE	PhD MA	Sociology; Sociology	Religion and Public Health, Epidemiology of Aging
Johnson, Ted	SOM	Professor Emory University SOM	0.10	M	WHITE	MD MPH	Medicine; Public Health	Epidemiology of Aging
Khan, Ali Shan	Adjunct Professor	Deputy Director CDC	0.10	M	ASIAN	MD MPH	Medicine; Biostatistics	Infectious Diseases
Khoury, Muin J	Visiting Instructor	Director Public Health Genomics, CDC	0.05	M	WHITE	PhD MD	Epidemiology; Medicine	Genetic Epi.
Kramer, Michael Root	Asst Professor	Assistant Professor Emory University RSPH	1.00	M	WHITE	PhD MS MSSC	Epidemiology; Emergency Medicine; Physician's Assistant	Maternal and Child Health Epi.
Liff, Jonathan M	Assoc Professor	Associate Professor Emory University RSPH	0.60	M	WHITE	PhD MSPH	Epidemiology; Biometry/Epidemiology	Epidemiology of Cancer
Lynch, Michael R	Adjunct Asst	Medical Epidemiologist	0.05	M	WHITE	MD	Medicine;	Epidemiology of

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Professor	CDC				MPH	Public Health	Foodborne Diseases
Maisonet, Mildred	Adjunct Asst Professor	Epidemiologist CDC	0.10	F	HISPANIC	PhD MS	Epidemiology; Epidemiology	Fundamentals of Epi.
Marcus, Michele	Professor	Assistant Program Dir. Kaiser Permanente	0.50	F	WHITE	PhD MPH	Epidemiology; Epidemiology	Environmental Epi.; Reproductive Epi.
McClellan, William M	Adjunct Instructor	Professor Emory SOM	0.55	M	WHITE	MD MS MPH	Medicine; Basic Medical Science/ Physiology; Epidemiology	Disease Epi.
McNabb, Scott J	Visiting Professor	Visiting Professor Emory University RSPH	0.05	M	WHITE	PhD MS	Microbiology & Immunology; Medical Microbiology	Oral Communications, Scientific Writing
Oakley Jr., Godfrey P	Visiting Professor	Research Professor Emory University RSPH	0.50	M	WHITE	MD MSPM	Medicine; Preventive Medicine/ Epidemiology	Nutritional Epidemiology
Small, Chanley Moxham	Asst Research Prof	Research Assistant Professor	0.10	F	WHITE	PhD MS	Epidemiology; Biology	Epidemiology Methods
Soucie, John M	Visiting Instructor	Epidemiologist CDC	0.15	M	WHITE	PhD MPH	Epidemiology; Epidemiology	Programming in SAS
Swerdlow, David L	Adjunct Assoc Professor	Senior Advisor for Epi. and Emergency Response, CDC	0.05	M	WHITE	MD	Medicine	Foodborne Disease Epi.
Vernon, Andrew Anthony	SOM	Chief, Clinical and Health Systems Research, CDC	0.10	M	WHITE	MD MHS	Medicine; Epidemiology	Epi. of Tuberculosis
Young Jr., John Lewis	Professor	Professor Emory University RSPH	0.50	M	WHITE	DrPH MPH	Biostatistics/Epidemiology; Biostatistics	Cancer Prevention, Disease Surveillance

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Hubert Department of Global Health (HGH)								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
Allen, Susan	Adjunct Professor	Professor Emory University SOM	0.10	F	WHITE	MD DMTH MPH	Medicine; Tropical Medicine; Epidemiology	Prevention Sci. and Epi.
Barker, Nancy D	Visiting Instructor	Visiting Instructor Emory University RSPH	0.50	F	WHITE	MS	Statistics	Fundamentals of Epi.
Blevins, John B.	Assoc Research Professor	Associate Research Professor Emory University RSPH	0.75	M	WHITE	ThD MDiv	Counseling Psychology and Theology; Divinity	Reproductive Health; Religion as a Social Determinant of Health; Religion and Sexuality
Brown, Peter J	Professor	Professor Emory University	0.10	M	WHITE	PhD MA	Anthropology; Anthropology	Anthropological Perspectives and Global Health
Churchill, R.Elliott	Adjunct Sr Assoc	Adjunct Professor Emory University RSPH	0.05	F	WHITE	MS MA	Technical Communications; English Language and Lit.	Oral Communications
Creanga, Andreea	Adjunct Instructor	Medical Epidemiologist CDC	0.10	F	WHITE	MD PhD	Medicine; Population, Family and Reproductive Health	Reproductive Health
Evans, Dabney Page	Senior Associate	Senior Associate Emory University RSPH	0.25	F	WHITE	PhD MPH	Law Behavioral Science and Health Education	Health and Human Rights
Flores-Ayala,	Adjunct Assoc	Team Leader	0.10	M	HISPANIC	DrPH	Biostatistics	Survey Methods,

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Hubert Department of Global Health (HGH)								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Rafael	Professor	Malnutrition Prevention, CDC				MApStat	Experimental Statistics	Directed Study, Water and Sanitation, Nutrition
Foster, Stanley Owens	Visiting Professor	Professor Emory University RSPH	0.65	M	WHITE	MD MPH	Medicine; Public Health	Global Challenges and Opportunities
Galloway, Fiona McLaren	Adjunct Instructor	Management and Program Analyst, CDC	0.20	F	WHITE	MPH	Epidemiology	Health in Complex Emergencies
Gangarosa, Eugene	Professor Emeritus	CEO, Gangarosa Intl Health Foundation	0.20	M	WHITE	MD MS	Medicine; Microbiology	Environmental Microbiology
Gletsu, Nana A	SOM	Assistant Professor Emory University SOM	0.30	F	BLACK	PhD	Nutrition and Metabolism	Nutrition and Health
Hatcher, Robert A	SOM	Professor Emory University SOM	0.10	M	WHITE	MD MPH	Medicine; Public Health	Reproductive Health
Kiser, Miriam	Senior Associate	Program Director Interfaith Health/Senior Associate Faculty, Emory University RSPH	0.25	F	WHITE	MPH RN	Behavioral Sci. and Health Educ.	Faith and Health, Health as Social Justice
Lathrop, Eva	Adjunct Instructor	Assistant Professor Emory University SOM	0.10	F	WHITE	MD MPH	Medicine; Global Reproductive Health	Global Reproductive Health
Malik, Fauzia Aman	Lecturer	Lecturer Emory University RSPH	0.15	F	ASIAN	MSc	Anthropology	Community-Based Research and Issues in Global Health
Martel, Lise	Adjunct Instructor	International Emergency Preparedness Team Lead CDC	0.05	F	WHITE	PsyD MPsy MEd	Social Psychology; Social Psychology; Education	Psychology and Health in Complex Emergencies; Emergency Preparedness
McGee, Lesley	Adjunct Asst	Microbiologist	0.10	F	WHITE	PhD	Medical	Infectious Diseases

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Hubert Department of Global Health (HGH)								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
	Professor	CDC					Microbiology	
Queen II, Edward L.	Emory Ethics Center	Director Emory University Center for Ethics	0.10	M	WHITE	PhD JD MA	Church History; Criminal Defense and Human Rights Law; Divinity	Human Rights
Rheingans, Richard D	Assoc Research Prof	Associate Professor University of Florida	0.03	M	WHITE	PhD MA	Forestry and Environmental Studies; International Relations	Global Env. Health, Water and Sanitation, Global Health Programs
Rochat, Roger W	Research Professor	Research Professor Emory University RSPH	0.66	M	WHITE	MD	Medicine	Reproductive Health
Schroeder, Dirk G	Visiting Instructor	Executive Vice President and Co-Founder, Holadoctor Inc	0.10	M	WHITE	DSc MPH	International Health; International Health	Proposal Development
Suchdev, Parminder Singh	Asst Professor - TT	Assistant Professor Emory University	0.10	M	ASIAN	MD MPH	Medicine; Public Health/Epi.	Nutrition and Global Health
Talley, Leisel Emerson	Adjunct Instructor	Epidemiologist CDC	0.10	F	WHITE	MPH	Global Health	Health and Nutrition in Complex Emergencies

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Hubert Department of Global Health (HGH)								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Teunis, Peter	Visiting Professor	Senior Biostatistician Epidemiology and Surveillance Unit, RIVM, Netherlands	0.10	M	WHITE	PhD MSc	Neurobiology Biology/Physics	Microbial Risk Assessment
Villarino, Elsa	Adjunct	Team Leader, TB Trials Consortium, Clinical Research Branch, Division of Tuberculosis Elimination, National Center for HIV, Hepatitis, STD and TB Prevention, CDC	0.05	F	HISPANIC	MD MPH	Medicine; Epi. and Biostatistics	Epi. of Tuberculosis
Winskell Enger, Samantha Kate	Visiting Assistant Professor	Visiting Asst Professor Emory University RSPH	0.75	F	WHITE	PhD MA MA	History of Art; History of Art; Modern Languages	Reproductive Global Health, Critical Issues in Global Health

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Health Policy and Management (HPM) Department								
Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Anderson, Gregory James	Visiting Instructor	Senior Scientist CDC	0.20	M	WHITE	MPH MS	Health Policy and Management; Microbiology	Health Policy and Resource Allocation, US Healthcare
Bern, Caryn	Adjunct Asst Professor	Medical Epidemiologist CDC	0.15	F	WHITE	MD MPH	Medicine; Intl. Health	Parasitic Diseases and Global Health
Buckner, Ayanna Virginia	Visiting Instructor	Assistant Professor Morehouse SOM	0.10	F	BLACK	MD MPH	Medicine; Health Management	Evidence-based Medicine
Burnett, Walter M	Visiting Professor	Professor Emory University RSPH	0.60	M	WHITE	PhD MA	Hospital and Health Administration; Hospital and Health Administration	Health Policy and Economics
Cavallo, Daniele	Visiting Instructor	Controller, Emory Clinic	0.15	M	WHITE	MBA	Business	Accounting for Healthcare
Downs, Fred H	Visiting Instructor	Administrator Diagnostic Imaging Specialists	0.30	M	WHITE	MSN	Nursing Administration	Intro to Healthcare Management
Downs, Myra Jane	Visiting Instructor	Director of Education, Visiting Nurse Health System	0.20	F	WHITE	MSN	Community Health Nursing	Intro to Healthcare Management
Florence II, Curtis S.	Visiting Assistant Professor	Senior Health Economist CDC	0.30	M	WHITE	PhD	Labor Economics/ Econometrics	Intro to Health Economics, Health Insurance Concepts
Goetzel, Ron Z	Research	Research Professor	0.60	M	WHITE	PhD	Organizational	Worksite Health

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Health Policy and Management (HPM) Department								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
	Professor	Emory University RSPH				MA	Leadership and Policy Development; Applied Social Psychology	Promotion
Goldman, Allan Barry	Visiting Instructor	Health Policy and Planning Specialist GA Dept of Human Resources	0.10	M	WHITE	MPH	Community Health	Public Policy and Practice
Gross, Robert E.	Visiting Instructor	Professor of Neuroscience, Emory University School of Medicine	0.10	M	WHITE	MBA	Finance	Medical Outcomes Research
Hamby, Leigh Scott	Visiting Instructor	Exec. Vice President and Chief Medical Officer Piedmont Healthcare	0.15	M	WHITE	MD MHA	Medicine; Healthcare Administration	Strategies for Quality Improvement
Harrell, David Edwin	Adjunct Asst Professor	Director Strategic Development Healthcare University of Phoenix	0.30	M	WHITE	PhD MSFS MSHCM	Health Services; Financial Services; Health Care Policy and Management	Strategic Management
Jacobson, Kara L.	Visiting Associate	Senior Associate Research Faculty, Emory University RSPH	0.68	F	WHITE	MPH	Behavioral Sciences and Health Education	Community Needs Assessment, Health Literacy
Joski, Peter J.	Visiting Instructor	Research Associate II Kaiser Permanente GA	0.10	M	WHITE	MSPH	Biostatistics	Quantitative Methods with SAS
Kamke, Brooke N	Visiting Instructor	Business Analyst II Emory Healthcare Inc	0.10	F	WHITE	MPH	Health Policy &Management	Human Resource Management
Kohler, Susan A	Senior	Senior Research Project	0.75	F	WHITE	MPH	Public Health	Medical Outcomes

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

Health Policy and Management (HPM) Department									
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
	Research Assoc	Associate, Emory Center on Health Outcomes and Quality						Research
McCarthy, Mary Jeanne	Visiting Instructor	Consulting Manager Thomson Reuters Healthcare	0.10	F	WHITE	MBA MSN	Business Administration; Nursing	Health Care Marketing
Merritt, Robert Kenneth	Visiting Instructor	Branch Chief and Supervisory Health Specialist CDC	0.35	M	WHITE	MA	Medical Sociology	US Healthcare, Healthcare Management, Resource Allocation
O'Connor, Jean C	Visiting Instructor	Deputy Assoc. Director for Planning and Evaluation CDC	0.25	F	WHITE	DrPH JD MPH	Health Policy; Law; Public Health	Public Health Law, Public Health Advocacy
Ogden, Lydia Lee	Adjunct Asst Professor	Senior Policy Advisor CDC	0.20	F	WHITE	PhD MPP MA	Health Policy; Press, Politics, and Public Policy; English Lit.	US Health Systems, Contemporary Health Policy, Policy Analysis
Osburne, Robert Carl	Visiting Instructor	Staff Endocrinologist Atlanta Diabetes Associates	0.10	M	WHITE	MD MBA	Medicine; Business Administration	Clinical Outcomes Based Process Improvement
Rask, Kimberly J.	Assoc Professor-CT	Medical Director GA Medical Care Foundation	0.70	F	WHITE	MD PhD	Medicine; Health Economics	Health Outcomes
Sanders Jr., Lawrence	Visiting Instructor	Associate Dean Morehouse SOM	0.10	M	BLACK	MD MBA	Medicine; Health Care Management	Indigent Health Care
Sanders, Richard D.	Visiting Instructor	Attorney The Sanders Law Firm, PC	0.10	M	WHITE	JD MA	Law; Political Science	Healthcare Administration Law
Shaw, Frederic	Adjunct	Acting Director ,	0.10	M	WHITE	JD	Law;	Public Health Law

Table 4.1b: Other Faculty Used to Support Teaching Programs as of November 2011 (adjunct, part-time, secondary appointments, etc.)

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Health Policy and Management (HPM) Department								
Name	**Title/ Academic Rank**	**Title & Current Employer**	**FTE or % Time**	**Gender**	**Race or Ethnicity**	**Graduate Degrees Earned**	**Discipline for earned graduate degrees**	**Teaching Areas**
Elijah	Instructor	Division of Behavioral Surveillance, CDC				MD	Medicine	
Wollenzien Jr, Jon William	Visiting Instructor	CEO, Palmetto Health Council, Inc	0.30	M	WHITE	DBA MS	Business Administration Health Care Administration	Operations Management
			28.65					

FTE of faculty listed in this table are the FTE assigned in the human resources database, so the FTE totals here will be slightly more than in Table 1.6e, where FTE of "other faculty supporting the instructional program" (i.e., regular part-time, adjunct, secondary appointment faculty) are counted as 0.05 per credit hour taught (or for mentoring).

c. Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the school.

The school's faculty integrates perspectives from the field of public health practice into the curriculum of the school in several ways.

Extensive Faculty Experience in Public Health
Faculty may draw on their public health practice experience in classroom instruction and mentoring of students. In 2010-11, faculty reported performing 186 consultations or episodes of technical assistance to health or public health agencies, programs or institutions. Over half of the full-time tenure-track faculty members have had significant experiences working in public health agencies and organizations as employees or through mechanisms such as an Interagency Personnel Agreement (IPA), which allows for part-time employment by an agency such as the CDC while remaining employed by the university.

RSPH is located in a community that includes many public health practitioners (for example, from CDC, CARE USA, American Cancer Society) with extensive experience in the field. Their involvement in the instruction of RSPH students adds both historical and contemporary relevance to the curriculum of the school. These part-time and/or adjunct faculty members contribute to the teaching of many courses as guest lecturers or as principal instructors, and in doing so, integrate the perspectives of public health practice with academic work in the classroom. For example, during the 2010-2011 academic year, 56 courses were partially or fully taught by practitioners from public health or related health services agencies and organizations who served as adjunct faculty members. Additional courses drew on professionals from the practice community as guest lecturers, resource persons for class projects, or evaluators of student projects. Practitioners also serve as mentors to students in paid employment, practica, thesis research and professional development.

Community Outreach Experiences Within the Classroom
Some courses (18 in 2010-11) within the RSPH curriculum combine classroom exercises with applications in the community. Following the general principles of service learning and under the close scrutiny of the instructor, the community-outreach experiences provide opportunities to apply course objectives in resolving concerns within population-based health practice. For example, students in the Community Needs Assessment course perform an actual assessment of needs in a community setting for a public health program, agency or organization. Some of the products generated through these courses have included program evaluation, needs assessments, advocacy initiatives and curricula. Syllabi, learning objectives and products for these courses are in the resource room available on site.

Faculty may apply for funding to support the integration of working in the community with academic instruction from the Office of University-Community Partnerships (OUCP) through its *Community-Engaged Learning Initiatives (CELI)* Grants Program. The program is intended to increase and institutionalize community-engaged learning, scholarship and service across the university. It supports the development of pedagogy that can be focused or leveraged to assist neighborhood groups, nonprofit organizations and public agencies with addressing critical community needs at the same time strengthening students' sense of citizenship, understanding of community issues, application of knowledge to real-world problem solving and ability to deepen community and academic linkages over time. During 2010 – 11, the RSPH received a grant from OUCP to build infrastructure support for CELI initiatives within the RSPH, resulting in a needs assessment, inventory of community engagement opportunities and establishing communication networks about those opportunities and resources. Also

during 2010-11, three individual RSPH faculty members received CELI mini-grants to integrate community engagement into a new or existing course.

Applied, Translational and Community-Based Research
Many faculty members engage in applied, translational and community-based research (see Appendix 3.1c for research activities of faculty). Their research findings are integrated into their course work to demonstrate how knowledge impacts the practice of public health in the community. Departmental and school-sponsored seminars allow for the wider discussion among faculty and students about the relevance of findings to the practice of public health.

Service and Professional Involvement
RSPH has a commitment to the continuing professional education of the existing public health workforce. As is fully described in Criterion 3.3, the school encourages and recognizes faculty involvement in workforce development activities such as contributing to public health practice through consultation and instructional programs (e.g., service learning, practica and theses) and delivering public health training programs funded through grants, contracts and formal agreements. For example, under the aegis of the Southeast Institute for Training and Evaluation (SITE), grants, contracts and cooperative agreements fund RSPH faculty members to design and instruct training for public health professionals. These courses bring faculty and practitioners into conversations about the translation of theory into practice. Courses taught recently include Basic Principles of Public Health (Part 1 and Part 2), Introduction to Public Health Policy, Public Health Advocacy and Policy Development, Introduction to Surveillance and Public Health Program Management.

Many full- and part-time faculty members are active in public health professional organizations, including the American Public Health Association, Georgia Public Health Association, Society for Public Health Education, American College of Epidemiology, American Sociological Society, American Anthropological Society and Academy Health.

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d. Identification of outcome measures by which the school may judge the qualifications of its faculty complement, along with data regarding the performance of the school against those measures for each of the last three years.

The school measures the adequacy of the faculty using both individual and school-wide performance criteria. These performance criteria are briefly listed below.

Processes for the Assessment of Faculty Members' Performance
The quality and performance of *individual* faculty members are assessed by the following:
- All core tenure-track faculty members are required to hold a terminal degree in their field, and evidence of achieving such credentials is kept in personnel files.
- The performance of all faculty members with a primary appointment in a department is annually reviewed by their department chairs when they recommend salary adjustments.
- All faculty members teaching a course are expected to review their student course evaluations, and evaluations are shared with the department chair and executive associate dean for academic affairs. Faculty members are expected to address identified problems. The executive associate dean for academic affairs monitors problems reflected in evaluations and is responsible for assuring that the department chair works with the faculty member to remedy those problems or take actions to assure they do not persist. The associate dean communicates

his assessment of the instructional quality to the chairs, based on a review of student course evaluations, at the end of each semester. Those messages are available in the Resource Room.

- The record of teaching, research and service for all faculty members recommended for promotion in rank and tenure is reviewed by the senior members of departments, external experts in the field, the school's Appointment, Promotion and Tenure (APT) Committee and the dean. If tenure is recommended, the dossier is also reviewed by the executive vice president for health affairs, the University President's Advisory Committee, the provost and Board of Trustees.

Outcome Measures of Faculty Complement and School Performance

Outcome measures by which the school evaluates the qualifications of its faculty complement and performance include:

- Amount of sponsored research, total and per capita, each year. These data are presented in Section 3.1 of this document.
- Number (and per capita mean number) of published refereed articles as presented in Section 3.1 of this document.
- Recognition and honors given to faculty for their achievements in research, teaching, leadership or service, as illustrated in Section 4.2 and detailed in the school's *Annual Reports*. Copies of the *Annual Report* for the last three years are found in the Resource Room.
- Incidence or number of consultancies or technical assistance efforts of faculty members, as presented in Section 3.2 of this document.

Table 4.1d identifies the outcome measures used to evaluate the qualifications or performance of faculty over the past three years.

Table 4.1d: Outcome Measures to Evaluate the Qualifications of Faculty Complement and Performance

Table 4.1d: Outcome Measures to Evaluate the Qualifications of Faculty Complement and Performance				
GOAL & OBJECTIVE (from Matrix 1.2)	OUTCOME MEASURE	YEAR 1 2008-2009	YEAR 2 2009-2010	YEAR 3 2010-2011
Goal II: Objective A: Recruit, develop and retain nationally and internationally regarded faculty members	Proportion of recruited tenure-track faculty in the top 10% of the applicant pool	100%	100%	100%
	Number of significant regional, national or international awards or honors to faculty	23	21	17
Goal II: Objective B: Advance public health discovery through externally funded scholarship	Sponsored Awards: • Total sponsored awards • Total research awards • Per capita research awards for tenured and tenure track faculty • Per capita research awards for all faculty who support the research program • Increase in awards over previous year	$60.0 m $46.9 m $603,620 $364,617 12%	$64.6 m $52.9 m $639,710 $377,766 8%	$76.1 m $65.4 m $723,927 $441,157 18%
Goal II: Objective C: Disseminate research findings through publications	Total and per capita (P/C) number of faculty published or accepted refereed articles	Total: 862 P/C: 8.3	Total:830 P/C: 6.6	Total:1228 P/C 9.3
	Number of faculty authored book chapters	133	88	74
	Number of faculty edited or authored books	12	10	14
	Number of faculty presentations at professional meetings	661	611	689
Goal III: Objective B: Provide leadership to public health organizations and service that promotes the health of the community	Number of faculty consultant functions performed that build capacity and/or facilitate programs in local, state, federal and international organizations and agencies	243	220	186
	Number of regional, national or international panels, boards or programs served by faculty	175	228	265
	Number of editorial board positions held by faculty	98	121	121
	Number of faculty serving on panels such as NIH study sections	19	44	50
	Number of leadership roles in professional associations held by faculty	21	43	53

<u>Additional Outcome Measures of the Faculty Complement and School Performance</u>

*External Reviews: E*very 5 years, a panel of external evaluators, appointed by the executive vice president for health affairs and the provost, reviews the school and the dean. This review requires the preparation of a self-study and a site visit. In addition, departments periodically receive external evaluations from outside experts.

The most recent department to be so evaluated was Environmental Health, a process conducted by the Laney Graduate School in assessing its capacity to offer doctoral training (2010).

Measures of Faculty Teaching Effectiveness: Course evaluations of the instructional program are routinely conducted at the end of each semester. Students assess courses on two scales (course and instructor) with 5 items per scale. Mean evaluations for all courses for the past 3 years are reported in the Outcomes Matrix (Table 1.2c) in Section 1.2 as well as in Criterion 4.2. Faculty set aside class time for completing web-based evaluations in the last sessions of each semester and most recently (fall semester, 2011), more than two-thirds of enrolled students completed evaluations in 82% of the classes. Mean evaluations of both instructors and courses by department are included in the school's annual reports. Copies of the *Annual Report* for the last three years are found in the Resource Room.

Graduating Student Exit Survey: As discussed in Section 4.6, students complete an anonymous web-based survey at the time of graduation. The results of this survey are shared with department chairs and administrators and circulated to faculty. This feedback is used to strengthen departmental goals and objectives for future academic years. The exit survey asks students to list faculty members who were particularly valuable in a variety of capacities, for example, faculty members who went above and beyond standard teaching expectations to assist in thesis or special study project research, career advancement or direction, as a classroom teacher or as a general advisor. The exit survey also asks students to list particular strengths and weaknesses of the academic program so that each year, the school can improve the overall satisfaction of its graduates. Reports for the past 3 years are available in the resource room on site. A copy of the most recent exit survey findings can be found in Appendix 4.1.d.

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e. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school maintains a faculty with the competence to fully support the school's mission, goals and objectives.
- Students are trained by faculty with strong and diverse academic credentials, many with experience in applied public health settings, and who are complemented by adjunct faculty members who are professionals from public health agencies.
- Strategic growth in faculty over the last seven years has strengthened the school in specialized areas which has enabled us to expand our curriculum and research portfolio.

Lessons Learned:
- The school needs to be diligent in attracting and retaining a faculty complement that achieves balance in its missions of research, teaching and service.

4.2 Faculty Policies and Procedures

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

Required Documentation:

a. A faculty handbook or other written document that outlines faculty rules and regulations.

The policies for the appointment and promotion of qualified faculty are specified in the Rollins School of Public Health *Appointment, Promotion and Tenure (APT) Guidelines* (see Appendix 1.5.a and posted on the web at http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf) and in the *Emory University Statement of Principles Governing Faculty Relationships at http://provost.emory.edu/faculty/Document%20clearinghouse/Index.html.* These policies address the appointment and promotion of all faculty categories. Both are included in the resource room on site and are also available on the web.

The school abides by all procedures and policies related to faculty employment identified in the *Emory University Employee Handbook* (http://hr.emory.edu/eu/employeestoolkit/newhireresources/staffhandbook/)and the *Emory University Faculty Handbook* (http://provost.emory.edu/faculty/Document%20clearinghouse/Index.html) on the web and available in the resource room on site.

Salary levels for faculty members are set in concert with Emory University's general salary structure. However, department chairs, with guidance from the dean, have broad latitude in negotiating items included in the recruitment packages as they attempt to hire full-time faculty members.

b. Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

The RSPH supports faculty development in a number of ways, viewing this investment as one way of recruiting and retaining talented faculty members.

Support for Faculty Development by the Rollins School of Public Health

Technology Training: As part of its continuing professional education program, the school offers free ongoing seminars for all faculty members about ways to apply technology to teaching and research. The school's Office of Information Technology trains faculty on the use of new technology. For example, "classroom capture technology" allows faculty to record their lesson and guest lectures and replay at a later date.

In addition, the university and the school offers training for faculty members who want to incorporate web-based instruction in their courses. In addition, the Career MPH program employs a number of instructional designers and computer technicians who are available to faculty members for developing web-based instruction in that program; they are also available to assist faculty incorporate similar

technology into their traditional on-campus classes.

Seminars: During the academic year, some departments organize an ongoing seminar series, which features the research and public health service work of RSPH faculty members, advanced graduate students and guests. In 2010-2011, three departments offered weekly seminars, three departments scheduled seminars less frequently and numerous programs were sponsored by more than a dozen RSPH student organizations.   In 2011, the school initiated a monthly grand round in which faculty members describe their ongoing programs of research. All RSPH faculty members may attend lectures, seminars and training programs sponsored by RSPH, other Emory schools and university-wide offices such as Emory's Center for Interactive Teaching.

Professional Meetings: Professional association meetings offer an opportunity for faculty to update knowledge and acquire additional training. Nearly all full-time faculty members participate in at least one professional meeting per year (as indicated in individual faculty annual reports). While many faculty members support travel to meetings through extramural funding, some departments provide support for travel and participation in professional meetings out of internal budgets or through start-up packages for professional development of newly appointed faculty.

Internal Funding for Research: The Center for AIDS Research (CFAR) makes NIH funds available to junior investigators who are launching new programs of research or pilot projects that are likely to result in larger, externally funded studies. The funds are awarded competitively to faculty members across the Woodruff Health Sciences Center.   The Emory Prevention Research Center offers CDC funding for research proposals (Special Interest Projects) that address the Center's emphasis on cancer prevention or related studies.

Assistant Professor Support and Mentoring: At least once a semester, the executive associate dean for academic affairs meets with tenure-track assistant professors about topics pertaining to professional development. Where appropriate, the executive associate dean for academic affairs helps junior faculty seek guidance from a senior faculty member as a mentor. In response to interviews by the executive associate dean for academic affairs, more than half of the newly appointed faculty currently report having a mentoring relationship with a senior faculty member within the school.

The assistant professors are also given access to a professional grant-writer (paid by the school) who assists in the formulation of ideas and preparation of proposals for extramural funding.

Newly appointed tenure-track assistant professors (and some more senior appointees) are normally provided several years of partial salary support from internal school funds (departmental or central school funds) so that they may develop their own research or public health practice agenda. Internal sources of funding for new faculty lines include general tuition revenue, endowment accounts, endowment accounts from outside the school (e.g., Woodruff Health Sciences Center) and grants to the school from foundations. The school has also created endowed chairs for assistant professors, the *Rollins Assistant Professor Chairs, to* provide partial support for salary through the probationary pre-tenure years.

Junior faculty members commonly invite senior faculty to observe and evaluate their classroom instruction. Those peer evaluations are often found in teaching portfolios included in dossiers prepared for promotion reviews. Individual faculty members may request that the Emory University Center for Faculty Development and Excellence (CFDE) provide a senior teaching scholar to assess and advise them

on classroom instruction and approaches to teaching.

Development of Teaching Skills: The RSPH Teaching Subcommittee offers occasional sessions on teaching innovations. For example, faculty have offered seminars describing the application of problem-based learning for teaching biostatistics, the use of "clickers" among students for teaching courses in health management and finance and the application of technology for teaching in "smart" classrooms. Junior faculty are also invited to sit in on a "teaching skills" course offered annually by the school to doctoral students as part of a graduate school requirement. Faculty members sometimes invite peers to observe and evaluate their classroom. Junior faculty members often do this in preparing a portfolio of teaching accomplishments for promotion decisions.

Advancement of Associate Professors: Chairs meet with long-term (8 or more years in rank) associate professors to work on their plan for advancement to the rank of professor. Chairs are expected to establish a set of criteria for promotion and discuss with the faculty member plans to achieve them so that their academic advancement is not stalled at the associate professor rank. This activity is monitored by the executive associate dean for academic affairs who is accountable to the provost for this oversight.

Student Research Assistants: The school supports a number of students with funding that enable them to work as research assistants, thereby contributing to faculty activity in research and public health practice. For example the school awards entering merit scholarship students with stipends for work (approximately 10 hours per week) as a research assistant for a faculty member of their choice. Many students are given Rollins Practical Experience Program funds, in which the school shares a portion of the student's salary with an employer. Some of those students find employment as research assistants to faculty members.   School funds therefore subsidize faculty research and practice.

Support for Faculty Development by Emory University

Emory University Research Fund: RSPH faculty members have been recipients of support from the Emory University Research Fund. The University Research Committee dispenses these funds, roughly $500,000 annually, to applicants, based on the assessed merit of proposed work. The Committee tends to favor new programs of research proposed by junior faculty and, in the sciences, projects that may result in additional external funding, e.g., promising pilot projects.

Office of University-Community Partnerships' (OUCP) Community-Engaged Learning Initiatives: As described in section 4.1.c, the university offers funding to assist faculty in developing community-engaged learning in their courses, involving students in neighborhood groups, nonprofit organizations and public agencies. Three RSPH faculty members received such grants in 2010-11, and the school received a grant from the OUCP to develop the infrastructure for supporting community-engaged learning in curricular, co-curricular and extra-curricular activities.

Development of Teaching Skills: The University Teaching Fund provides faculty members with grants to develop new courses and curricula through an annual competitive application process. Several faculty members in the RSPH have, in recent years, received funds for teaching initiatives.

The university's Center for Faculty Development and Excellence (CFDE), overseen by the senior vice provost, provides a range of opportunities for professional development among Emory University faculty. A number of RSPH faculty members have participated in CFDE-sponsored programs. They

include a range of teaching-related programs including Teaching Portfolio Workshops, Master Teacher Training Workshops and Luncheon Roundtables devoted to a discussion of issues pertaining to teaching. CFDE also sponsors the Teacher Scholars Program in which faculty members nominated by the deans of each school spend a year developing original programs to improve teaching and assist faculty members develop effective approaches to teaching. CFDE also arranges workshops on writing and composition and provides editorial assistance in preparing book manuscripts for publication.

Woodruff Leadership Academy: Each year, an RSPH faculty member or senior staff person is invited to join the Woodruff Leadership Academy. During the academic year, they join faculty and administrators from other schools and organizations that comprise the Woodruff Health Sciences Center in a continuing set of seminars and workshops on aspects of leadership, and collaborate on projects to apply those leadership skills. All members of the leadership academy are provided with a senior mentor to oversee their development in their respective roles.

Academic Leadership Program: Emory University solicits nominations from schools for faculty or staff to participate in a program that prepares them for administrative leadership in the university. The year-long program engages participants in the operation of the university and its policies and procedures. Skills useful for leadership roles are included in the training.

Professional Development Opportunities for Part-Time, Adjunct and Joint-Secondary Faculty

With some exceptions, faculty members with primary appointments in the RSPH (including part-time faculty) are eligible for all programs. Those holding adjunct faculty appointments are ineligible. Only tenure-track faculty members are eligible for University Research Funds.

c.   Description of formal procedures for evaluating faculty competence and performance.

The school's procedure for evaluating faculty competency begins with an initial review during the appointment process. Information provided in this section is supported by the RSPH *Appointment, Promotion and Tenure Guidelines* posted on the web at http://www.sph.emory.edu/cms/about/documents/2011%20RSPH%20APT%20Guidelines.pdf and in Appendix 1.5.a. An overview of the process is as follows:

Faculty Appointments
All faculty members are evaluated at the time of an initial appointment.   Following a search, department faculty must vote on whether to recommend an appointment. The department's recommendation, reflected in a letter from the chair, accompanies the dossier that is sent to the school's Appointments, Promotion and Tenure (APT) Committee. Contents of the dossier are listed in the *APT Guidelines.* (Departments recommend adjunct faculty appointments directly to the dean, and faculty appointments without tenure receive an expedited review by the APT Committee.)

The APT Committee reviews the dossier and makes its recommendation to the dean. In the case of appointments with a recommendation of tenure, the dossier and dean's recommendations are sent to the executive vice president for health affairs and, if approved, to the Office of the Provost. The faculty member's record is then reviewed by the President's Advisory Committee (PAC), a university-wide faculty group, which makes its recommendation to the president and provost. If the president and provost accept a recommendation to approve from the PAC, a recommendation is made to the Emory Board of Trustees.

Faculty appointments and promotions in nontenure positions (clinical and research track, associates, lecturers, etc.) generally follow the same procedures as tenure-track appointments and promotions except that the process ends with a decision by the school's dean, i.e., it is not reviewed outside the school. The dean has authority to make, at the request of departments, "administrative appointments" of faculty with unique qualifications, and those appointments do not require a formal search process.

(However, such appointments must be reviewed and approved by the university Equal Opportunity Programs Office.) The content of dossiers and certain aspects of evaluation may differ, as indicated in the APT Guidelines. Since nontenure-track appointments are annually renewable, the school must annually reappoint nontenure-track faculty members for a 1-year term.

To illustrate the process of faculty promotion and appointment, please see diagram 4.2c below:

Diagram 4.2c: Process of Faculty Promotion and Appointment
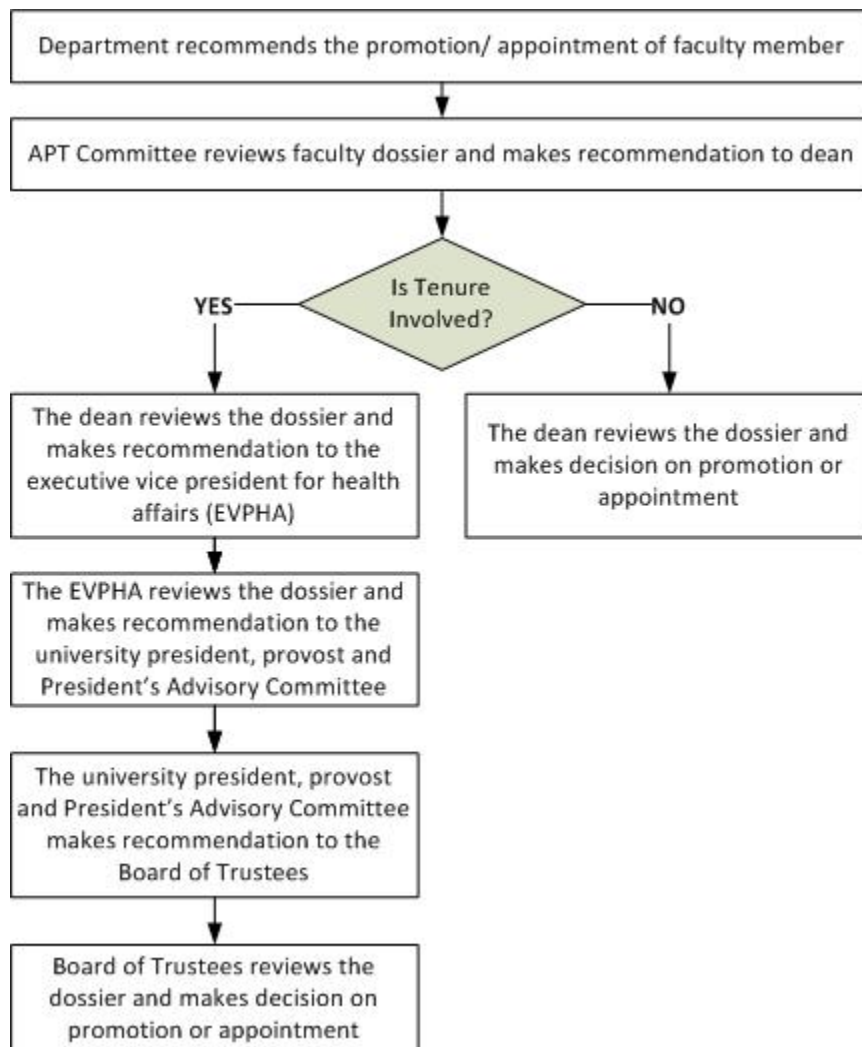
3-Year Evaluation of Tenure-Track Assistant Professors
Assistant professors hired in the tenure-track position receive a formal "mid-course" evaluation at the end of 3 years of service. Such faculty members submit a dossier to their department chair, reflecting their work for the initial years of their appointment. Senior faculty members review the dossier, and each contributes an assessment to the department chair. A composite assessment of achievement is written by the chair and submitted, with the dossier, to the school's Appointments, Promotion and Tenure Committee. Based on the committee's independent assessment of the faculty member's progress towards a promotion, the executive associate dean for academic affairs composes a letter to the department chair, which is shared with the faculty member. The letter includes the committee's assessment of progress and recommendations to the faculty member for improving his or her performance. Details describing the procedure and contents of the dossier are included in the *APT Guidelines.*

Faculty Promotions in Rank and Tenure

Summary of promotion and tenure process as well as appointments with tenure is as follows:

- Candidate prepares dossier of accomplishments in teaching, research and service
- Senior department faculty members decide whether to initiate a promotion process (if so…)
- Executive associate dean for academic affairs solicits six external evaluation letters
- Senior department faculty review dossier and external letters and decide whether to recommend promotion (and tenure) based on excellence or very good teaching, research and service (if so…)
- Department chair forwards dossier (with external letters) along with the department's letter of recommendation to the executive associate dean for academic affairs
- RSPH Appointments, Promotion and Tenure Committee reviews department recommendation and dossier and makes its recommendation to the dean
- If the dean accepts a positive recommendation for promotion and tenure, he forwards the dossier (including a record of the department and APT committee recommendations) with his own letter of recommendation through the executive vice president for health affairs (i.e., co-signed) to the office of the provost
- Provost refers the dossier and dean's letter to the President's Advisory Council for their assessment of whether the case for promotion (and tenure) is well documented
- President and provost consider the consultation of the PAC and if in support of the promotion (and tenure), make their recommendation to the Board of Trustees

Promotion and tenure require documented excellence in at least one of the three areas of teaching, research or service, and evidence of "very good" performance in the others. Also considered for tenure is the extent to which faculty are able to sustain external support for their programs of research or practice and their effort on those projects. The criteria and methods of assessment are included in the *APT Guidelines* and summarized below.

Criterion 1 – Teaching: One criterion for academic advancement is teaching, in all its diverse forms, including classroom instruction, continuing education, preparation of teaching-related materials, mentoring and advisement of students and individual thesis or dissertation supervision. An ad hoc committee on teaching developed specific guidelines for the assessment of excellence or very good performance in teaching, which are included in the APT Guidelines.

Criterion 2 – Research: A second criterion for promotion is original and creative research, defined as substantive generation of new knowledge. Excellence in research may be reflected in refereed publications, peer-reviewed research funding, etc., and must be evaluated as such by leading experts in the field. The guidelines for the assessment of excellence and very good research are included in the *APT Guidelines*.

Criterion 3 – Service: The final criterion is service or public health practice. Excellent service requires the documentation of practice-based activities that have a demonstrated substantial impact on the improvement of public health and/or the effectiveness of organizations and programs that deliver services to improve public health. The guidelines for the assessment of excellence and very good service were developed by an ad hoc committee on service and are reflected in the *APT Guidelines*.

Appointments or promotions with tenure require assessments from six experts who typically are senior faculty and leading scholars in the candidate's field. The evaluations are intended to be "arms-length" and thus the evaluators may not be collaborators or former mentors of the candidate. The external evaluators are given the dossier describing the candidate's accomplishments in teaching, service and research; the school's promotion criteria; the candidate's CV; representative publications; and a personal statement from the candidate describing his or her accomplishments. These evaluations are solicited by the executive associate dean for academic affairs based on a set of names recommended by the candidate, senior department faculty members and the chair.

Promotions are initiated and recommended by departments, then reviewed by the school's Appointments, Promotion and Tenure Committee, which makes its recommendation to the dean. If tenure is involved, the dean's recommendation with the full dossier must be sent to the Health Sciences Center for the approval of the executive vice president for health affairs and then to the Office of the Provost, where it is reviewed by the President's Advisory Committee (PAC). If the PAC believes that the case for promotion is adequately documented, the president and provost make their recommendation to the Board of Trustees for their decision. In the past, no recommendation for promotion in rank or tenure by the RSPH has been denied by the Woodruff Health Sciences Center or Emory University.

Faculty Annual Evaluations
Tenure-track faculty members are annually evaluated by chairs when they make recommendations for salary adjustments. All faculty members with tenure-track appointments provide annual reports to their chairs, normally each June, following a format provided by the school. (The Annual Report form is included in the Appendix 4.2.c.) Chairs transmit their assessment of performance to the faculty member in various ways, including individual meetings or letters.

Nontenure-track faculty members annually report their accomplishments in the same format as tenure-track faculty. Their annual reviews also follow the same process as tenure-track faculty. Certain nontenure-track faculty members who are working primarily under the supervision of a tenure-track faculty member, often a principal investigator on a research project, receive evaluations from the department chair that reflect the assessment of the supervising faculty member.

Department chairs and assistant and associate deans are evaluated by the dean.   At the start of the academic year, chairs and assistant/associate deans submit their goals and objectives. At the conclusion of the academic year, the dean assesses the performance of those individuals based on their goals and

objectives and recommends merit salary adjustments based on that assessment.

A growing concern within the leadership of the school is ensuring a productive research, teaching, and service environment for the growing number of junior faculty. To this end, many of the discussions during the fall 2011 Dean and Chairs retreat were focused on the opportunities and challenges of mentoring of junior faculty and how to better engage senior faculty in this process.

Dean's 5-Year Review
The provost and executive vice president for health affairs review the dean of the RSPH every 5 years. This evaluation normally includes a review of the school itself, as well as its leadership. The provost and executive vice president appoint a team of external evaluators (e.g., deans and leaders of other institutions). They also appoint a committee within the school to collect relevant background information and to write an assessment of the school's current strengths, weaknesses, opportunities and threats. The self-study and background information is provided to the external evaluators prior to a site visit. The appointed committee, in collaboration with the provost and executive vice president, organizes a series of meetings that become part of a site visit of 1 or 2 days.

Following the site visit, external evaluators report to the provost and executive vice president. The provost and executive vice president also solicit letters evaluating the dean from all faculty and administrators within the school, and the deans of other Emory schools. On the basis of this information and their own judgment, the executive vice president and provost may reappoint the dean for a period of 5 years or terminate the appointment. The document prepared for the most recent 5-year review of the dean and school along with the external evaluators' report is available in the resource room on site.

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d. Description of the processes used for student course evaluation and evaluation of teaching effectiveness.

Course Evaluation Process
At the end of each semester, students are requested to complete a web-based evaluation of each course. Teaching faculty set aside time during class sessions in the final weeks of the course for students to complete the online evaluation. (Prior to fall semester, 2011, students were asked to complete online evaluations outside of class but many classes had response rates of less than two-thirds of enrolled students. In fall semester, 2011, over two thirds of the students responded in 82% of the classes.)

Students rate the course and the instructor, each on 5-single item Likert scale developed by a faculty committee. Students are also asked for open-ended comments on what went well and what could be improved. The results are available for viewing on the web by the instructor, the department chair and executive associate dean for academic affairs. The mean scores from course evaluations are always available for student viewing; open-ended question responses are available only if 67% or more students complete the course evaluations. With the new methodology for completing the course evaluations, the likelihood of the availability of the open-ended comments will increase.

Faculty members are expected to review their evaluations and make adjustments to remedy any problems. The executive associate dean for academic affairs reviews all course evaluations and sends a written assessment to the department chair indicating any problems that may require an intervention. The executive associate dean for academic follows up with the chair to make sure those problems are remedied as necessary. Remedies may include assisting the faculty members to improve certain skills,

helping to better design the course, assigning the faculty member different courses or, in the case of adjunct faculty members, not inviting them back to teach.

Some faculty members supplement the school course evaluations with their own data collection. One department (BSHE) encourages its faculty to conduct mid-course evaluations and requires it of all instructors in their first semester of teaching. All CMPH courses have evaluations in the middle and at the end of the semester.

The school's course evaluation survey is included in Appendix 4.2.d.1. Course evaluations for the past 5 years and communications on the evaluations to each chair by the executive associate dean for academic affairs are in the resource room available on site. Table 4.2d reports the mean course evaluations on the course and instructor scales for the past three years.

Table 4.2d: Mean Scale Scores on Student Course Evaluations
(On a scale of 1 – 5 where 1 signifies a poor rating and 5 indicates excellence)

Mean Student Course Evaluation Scores						
	2008 - 2009		2009 - 2010		2010 - 2011	
	Fall	Spring	Fall	Spring	Fall	Spring
Courses	3.92	3.91	3.97	3.97	4.01	4.00
Instructors	4.07	4.09	4.16	4.17	4.17	4.16

Exit Survey
Graduating students are requested to complete an anonymous web-based survey at the time of graduation. The survey addresses any issues related to the quality of the academic program and support services. It also allows students to identify faculty members who were excellent resources as thesis advisors, classroom instructors, career advisors and mentors. Students are also asked to list particular strengths and weaknesses of the school for continued improvement of the program. The findings are shared with chairs and administrators and are also available to faculty, student services staff and the ADAPs. The findings enable the school to monitor its outcomes on goals and objectives. The exit survey is included in Appendix 4.2.d.2. Responses to both open- and closed-ended survey questions for the past 3 years are in the resource room available on site.

e. **Description of the emphasis given to community service activities in the promotion and tenure process.**

The *APT Guidelines* refer directly to excellence in service as a means of promotion and tenure. The guidelines indicate that excellence in service, a basis for promotion and the award of tenure, requires the documentation of practice-based activities that have a demonstrated substantial impact on the improvement of public health and/or the effectiveness or organizations and programs that deliver services to improve public health. The guidelines further state that the contributions should have a scholarly origin, in that they significantly advance knowledge or techniques in the field, should be disseminated in writing and be recognized by peers in the field of academic public health as significant and substantial. The *guidelines* require that all faculty be at least *very good* in service and define methods of measuring this level of performance.

The other two criteria for promotion may also involve community service. As the *APT Guidelines* indicate, teaching includes performance in continuing education, offering professional workshops, development of materials for training or instruction of the public health workforce through web-based instruction. Research includes the published evaluation, description and analysis of programs designed to promote the health of a community, policy analyses and assessments of scholarship with recommendations for practice.

While excellence in research has been the most common rationale for promotion, in the past 3 years two faculty members were also promoted to the rank of associate or full professor based on excellence in service, as evaluated by the school.

f. **Assessment of the extent to which this criterion is met**.

This criterion is met.

Strengths:
- Policies and procedures for the recruitment, appointment and promotion of qualified faculty are clearly articulated and consistent with the policies and procedures of the university.
- The school and university offer a number of programs to train and support the professional development and advancement of faculty.
- Faculty have developed guidelines enabling the assessment of teaching, research and service as they may merit promotion and tenure.
- All courses are evaluated by students, and department chairs and faculty are held accountable for monitoring quality and addressing identified problems.

Lessons Learned:
- The growth in numbers of tenure-track junior faculty opens the opportunity for senior faculty to assume the role of mentors for successful promotion and tenure.
- The ability to establish effective mentoring relationships and/or programs within the school and departments is challenging because the rapport between mentor and the mentee is not easily assigned nor matched.
- Setting aside protected time for completing courses evaluations increases the response rate, which in turn, increases students' access to information regarding the quality of the course.

4.3   Faculty and Staff Diversity

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

Required Documentation:

a. Summary demographic data on the school's faculty, showing at least gender and ethnicity; faculty numbers should be consistent with those shown in the table in 4.1.a. Data must be presented in table format.

Table 4.3.a describes the background of faculty by gender and race/ethnicity. As this chart presents faculty background on only two dimensions, it may underestimate the actual diversity by age, sexual preference, academic discipline, country of origin, religion, etc. For example, 31% of the tenured or tenure-track faculty were born or lived a portion of their lives in a country outside the United States and those with non-US origins hold appointments in every academic department.

Table 4.3a: Summary Demographic Data – Faculty (2010 – 2011)

Summary Demographic Data for Current Core and Other Faculty						
	Core Faculty		Other Faculty		TOTAL	
	#	%	#	%	#	%
# % Male	79	54.9%	66	54.1%	145	54.5%
# % African American Male	1	0.7%	1	0.8%	2	0.8%
# % Caucasian Male	54	37.5%	60	49.2%	114	42.9%
# % Hispanic/Latino Male	4	2.8%	3	2.5%	7	2.6%
# % Asian/Pacific Islander Male	20	13.9%	2	1.6%	22	8.3%
# % Native American/Alaska Native Male	0	0.0%	0	0.0%	0	0.0%
# % Unknown/Other Male	0	0.0%	0	0.0%	0	0.0%
# % International Male	0	0.0%	0	0.0%	0	0.0%
# % Female	65	45.1%	56	45.9%	121	45.5%
# % African American Female	4	2.8%	4	3.3%	8	3.0%
# % Caucasian Female	49	34.0%	49	40.2%	98	36.8%
# % Hispanic/Latina Female	2	1.4%	2	1.6%	4	1.5%
# % Asian/Pacific Islander Female	10	6.9%	1	0.8%	11	4.1%
# % Native American/Alaska Native Female	0	0.0%	0	0.0%	0	0.0%
# % Unknown/Other Female	0	0.0%	0	0.0%	0	0.0%
# % International Female	0	0.0%	0	0.0%	0	0.0%
TOTAL	144	100%	122	100%	266	100%

Of the 144 core faculty, 62% are on the tenure track and 38% hold non-tenure track lines. Among the 89 core tenure track faculty members, 64% are tenured and 36% are untenured. Gender and race/ethnicity are presented in the following 2 tables (Table 4.3a.i and Table 4.3a.ii), for each category, non-tenure track, tenured and untenured in the tenure track.

Table 4.3a.i: Core Faculty Rank by Gender

Gender	Faculty Rank			Totals
	Tenured	Untenured Tenure-Track	Non-tenure Track	
Female	21 (37% of 57)	18 (56% of 32)	26 (47% of 55)	65
Male	36 (63% of 57)	14 (44% of 32)	29 (53% of 55)	79
Total	57 (40% of 144)	32 (22% of 144)	55 (38% of 144)	144

Table 4.3a.i: Core Faculty Rank by Race/Ethnicity

Race/ Ethnicity	Faculty Rank			Totals
	Tenured	Untenured Tenure-Track	Non-tenure Track	
White	45 (79% of 57)	20 (63% of 32)	38 (69% of 55)	103
Hispanic	2 (4% of 57)	1 (3% of 32)	3 (5% of 55)	6
Black	3 (5% of 57)	0 (0% of 32)	2 (4% of 55)	5
Asian	7 (12% of 57)	11 (34% of 32)	12 (22% of 55)	30
Total	57 (40% of 144)	32 (22% of 144)	55 (38% of 144)	144

A larger proportion of females are untenured tenure-track faculty (56%) than tenured faculty (37%) and a larger proportion of Asians are untenured tenure-track faculty (34%) than tenured (12%), suggesting that the school will achieve greater diversity by gender and ethnicity among tenured faculty in the future. The same is not true, however, for Hispanic and African-American faculty members. It should be noted that during the current academic year, the school recruited an additional African-American faculty member at the associate professor level.

There has been a concerted effort to encourage long-term tenured associate professors, many of whom are women, to seek promotion to full professor. In the past three academic years eight tenure track faculty members received tenure and/or were promoted in rank with tenure. Of those, three (37.5%) were women and one was Asian.

b. **Summary demographic data on the school's staff, showing at least gender and ethnicity. Data must be presented in table format.**

Table 4.3.b. describes the background of staff by gender and race/ethnicity.

Table 4.3.b: Summary Demographic Data – Staff* (2010 – 2011)

Summary Demographic Data for Full-Time Staff*		
	Full-Time Staff (#)	TOTAL
# % Male	60	19%
# % African American Male	20	6.4%
# % Caucasian Male	29	9.2%
# % Hispanic/Latino Male	5	1.6%
# % Asian/Pacific Islander Male	5	1.6%
# % Native American/Alaska Native Male	0	0.0%
# % Unknown/Other Male	1	0.3%
# % International Male	0	0.0%
# % Female	255	81%
# % African American Female	87	27.6%
# % Caucasian Female	133	42.2%
# % Hispanic/Latina Female	7	2.2%
# % Asian/Pacific Islander Female	24	7.6%
# % Native American/Alaska Native Female	2	0.6%
# % Unknown/Other Female	2	0.6%
# % International Female	0	0.0%
TOTAL	315	100%

* Staff is defined as those individuals not defined as students or faculty.

c. Description of policies and procedures regarding the school's commitment to providing equitable opportunities without regard to age, gender, race, disability, sexual orientation, religion or national origin.

Policies and procedures about the school's commitment to equitable opportunities are stated in the *Emory University Human Resources Policies and Procedures Manual,* available on site and on the web at http://policies.emory.edu/. Emory University's Office of Equal Opportunities Program (EOP) administers and oversees compliance with the policies and procedures, monitoring all faculty searches. The RSPH, as discussed in Section 1.3, follows university procedures related to personnel issues.

d. Description of recruitment and retention efforts used to attract and retain a diverse faculty and staff, along with information about how these efforts are evaluated and refined over time.

The RSPH applies policies and procedures adopted by the university to ensure access, equality and inclusion among a diverse population of students, faculty and staff. Emory's Department of Human Resources monitors and reports to the school on the impact of its policies about staff appointments, as does the Office of Equal Opportunities Program on faculty recruitment and advancement.

The Office of the Provost, through its Faculty of Distinction Program, assists schools in recruiting exceptional faculty members with a fund that may be used to supplement school resources. This includes resources to assist in recruiting faculty who add to the diversity of the university community. The RSPH has successfully obtained some of those resources over the past 3 years in its recruitment of faculty members. The Office of the Dean will also assist departments in the recruitment of exceptional faculty, particularly if they contribute to the diversity of the school.

The RSPH has several opportunities for staff development. Emory provides a courtesy scholarship program that allows faculty and staff employed more than one year to take up to 5 credits per semester at no cost. The Emory Human Resources offers a number of learning opportunities including open enrollment classes, customized workshops, performance consulting and facilitation services. A complete listing is available in the resource room.

In addition to these instructional opportunities, staff participate regularly in national meetings such and APHA and ASPH. Staff are also sent for specialized training to acquire necessary skill. For example Information Technology staff attend week-long courses to learn specific software. Many staff also take advantage of the large number of seminars and lectures that are held within the School.

e.	**Description of efforts, other than recruitment and retention of core faculty, through which the school seeks to establish and maintain an environment that supports diversity.**

Under the direction of the senior vice provost for community and diversity, the Office of Community and Diversity oversees a number of offices and programs that contribute to making Emory University a diverse and inclusive campus for faculty, students and staff. The office works primarily in four areas:

- Center for Women at Emory (CWE) promotes gender equity throughout the university by providing resources and skill-building opportunities. Examples of programs and services at the Center include fellowships and scholarships to support scholarship on women and gender and its application, leadership preparation and practical education seminars related to women's financial, spiritual and mental wellbeing.
- Office of Disability Services (ODS) assists qualified students, faculty and staff in obtaining equal access and reasonable accommodation. It focuses on campus access and barrier removal, educational accommodations, assistive technology, resources and advocacy, ADA compliance, mobility and transportation, residential life accommodations, workplace accommodations and outreach educational programs.
- Office of Equal Opportunity Programs (EOP) protects historical, legal and ethical principles of openness and nondiscrimination while advancing a broad vision of inclusion. EOP develops and distributes Emory's Affirmative Action Plan, designs and delivers programs to promote diversity and inclusion throughout the university, upholds Emory's Equal Opportunity Discriminatory Harassment Policy and monitors Emory's hiring process and procedures designed to support access, equity and inclusion.
- Office of University-Community Partnerships (OUCP) is a centralized resource for integrating Emory's teaching and research activities with service that benefits the Atlanta community and beyond. It provides teaching and research mini grants, faculty development and training workshops, technical assistance and project development and supports graduate teaching and research fellows. OUCP provides resources to the RSPH to engage students in community programs as part of classroom activities and in field practica and volunteer involvement.

Three Presidential Commissions oversee and advise the university administration on the status of categories of faculty, staff and students on campus and the need for programs to assure access, inclusion and equality. RSPH faculty members serve on these commissions.

- The President's Commission on the Status of Race and Ethnicity serves as a forum for discussion and analysis of issues of race and ethnicity on campus and of national import; develops and supports programs and activities that enhance the presence of persons of color and strengthen the community of color at Emory; gathers data; and conducts studies and recommends actions that improve the representation, development and success of people of color in the Emory community.
- The President's Commission on the Status of Women identifies and researches issues that pertain to gender equity at the university; conveys information about resources, policies and programs relating to women's issues; develops and supports education and awareness programs related to women and gender; and advocates for recommendations to improve the quality of life of women faculty, staff and students.
- The President's Commission on Sexuality, Gender Diversity, and Queer Equality advises the President on matters of sexuality, gender diversity and queer equality; serves as a catalyst for the development of intentional university initiatives that support and engage sexual and gender diversity and queer equality; identifies, researches and communicates issues and opportunities pertaining to queer communities at Emory; and recommends actions within the university that will improve the quality of life and full inclusion of queer individuals and communities.

In 2008, Emory created an institution-wide initiative, Race and Difference. It is collaborating with schools and departments, using resources allocated by the Office of the Provost, to recruit faculty members who contribute to the scholarship of race and difference. It offers seed grants to faculty members to support research exploring the intersection of race and difference and sponsors programs and seminars on related topics.

The Laney Graduate School (LGS) provides "Diversity Scholarships" for outstanding students from underrepresented minority backgrounds who are enrolled in doctoral studies. Doctoral programs, including those in public health, receive additional stipends from the LGS to support students from underrepresented minority backgrounds.   This initiative is intended to contribute to the diversity of professionals with doctoral training in the field.

f. Identification of outcome measures by which the school may evaluate its success in achieving a diverse faculty and staff, along with data regarding the performance of the school against those measures for each of the last three years.

The school uses two outcome measures to monitor its progress toward achieving a demographically diverse faculty (see Table 4.3f). These measures are:
- Monitoring the overall number of minority and female faculty members and those who hold leadership positions; and
- Benchmarking the RSPH demographic diversity with Emory University and other major academic universities

Table 4.3f: Outcome Measures Used to Evaluate its Success in Achieving a Diverse Faculty and Staff

Outcome Measures Used to Evaluate its Success in Achieving a Diverse Faculty and Staff				
GOAL & OBJECTIVE (from Matrix 1.2)	**OUTCOME MEASURE**	**YEAR 1** 2008-2009	**YEAR 2** 2009-2010	**YEAR 3** 2010-2011
Goal IV: Objective D: Attract and retain a faculty and staff with diverse backgrounds	Proportion of minority faculty members	20%	25%	20%
	Proportion of women faculty members	46%	45%	47%
	Proportion of minority staff members	43%	49%	49%

<u>Monitoring the Number of Minority and Female Faculty Members, and Those in Leadership Positions</u>
As shown in Table 4.3a and above in 4.3f, the proportion of African American, Asian, Hispanic and female full-time and part-time faculty members have remained relatively stable during a 3-year period of faculty growth, in spite of efforts to recruit a higher proportion of nonwhite and female faculty members. As of September 2011, 2 of the 15 department chairs and senior administrators (dean, associate or assistant dean) were minority faculty members, and 6 were women. See Appendix 4.3.f.

<u>Benchmarking the RSPH Demographic Diversity with Emory University and Other Major Academic Universities</u>
Ideally, the school would like to benchmark the diversity of its faculty against other accredited schools of public health and the Association of Schools of Public Health, but comparable data are not available. Nevertheless, the RSPH is able to compare the ethnic and gender composition of its full-time tenure and nontenure-track faculty with faculty in Emory University and all US institutions of higher education.

Overall, Table 4.3f.i indicates that at present, the RSPH has a higher proportion of female faculty members but a lower proportion of African-American faculty members than Emory University as a whole and is roughly comparable to the most recent figures for all US higher education provided by the Department of Education.

Table 4.3f.i: Comparison of the Composition of Full-Time Faculty in the RSPH with Full-Time Faculty at Emory University and all US Faculty in Higher Education

	RSPH All Full-Time Faculty	Emory University All Full-Time Faculty	Full-Time Faculty at US Universities
Year: 2008-2009	**N = 149**	**N = 3239**	**N = 691,588***
% Female	46%	40%	42%
% African-American	5%	7%	6%
% Non-white	15%	20%	17%
Year: 2009-2010	**N = 154**	**N = 3325**	**N = 712,919****
% Female	45%	40%	43%
% African-American	5%	7%	6%
% Non-white	20%	21%	18%
Year: 2010-2011	**N = 167**	**N = 3328**	*******
% Female	47%	40%	
% African-American	4%	7%	
% Non-white	22%	22%	

* Source: US Department of Education (DOE), fall 2007 (the DOE did not collect data for fall 2008)
** Source: US Department of Education (DOE), fall 2009 (most recently available data)
*** No data available from the US Department of Education for fall 2010

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g. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school recruits, retains and promotes a relatively diverse faculty and staff who work in a setting with policies and procedures that assure equitable opportunities.
- Women are well represented on the faculty. There has been a concerted effort to encourage long-term tenured associate professors, many of whom are women, to seek promotion to full professor.

Lessons Learned:
- The proportion of faculty members from under-represented minorities should be higher.
- In a global environment, diversity takes on additional meaning. Nearly one-third of the tenured or tenure track faculty originate from outside the US and hold appointments in every department, an aspect of diversity that adds to the richness of our academic environment.

4.4   Student Recruitment and Admissions

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

Required Documentation:

a.   Description of the school's recruitment policies and procedures.

The school seeks students with qualities that include the motivation and ability to achieve in a graduate academic program, along with a firm commitment to public health, as evidenced by their interests, backgrounds and experiences. The school attempts to reach a wide audience of prospective students in its recruitment efforts and adheres to Emory University's Affirmative Action and Equal Opportunity policies in all its recruitment activities. The RSPH recruits and admits qualified students regardless of race, ethnicity, religion, sex, sexual orientation, national origin, age, disability or veteran's status.

Department chairs, in consultation with the school's administration, set annual "enrollment targets" for the numbers of MPH/MSPH students each department desires. The enrollment targets are based on the capacity of the current faculty complement to provide quality instruction and the qualifications of the applicant pool.

Organization of Recruitment Activities

Recruitment of MPH/MSPH students is under the supervision of the RSPH associate dean for admission and student affairs. The Office of Admissions and Student Services staff oversees the recruitment and admission process and also provides assistance to students from outside the US. The assistant/associate directors of academic programs (ADAPs) work collaboratively with the Office of Admissions and Student Services to provide departmental support for recruitment and admission activities.

The school participates in the Schools of Public Health Application Service (SOPHAS), a central application for accredited schools of public health. (The associate dean for admission and student affairs has been a national leader in the development and implementation of SOPHAS.) Prospective students may learn about the school through a variety of options including walk-in requests, information sessions and web-based and emailed requests for information. Prospective MPH/MSPH students may request an Admission Guide through a web-based form. Prospective student contacts are tracked through the student information system, PeopleSoft.   Recruitment material, including a DVD, is distributed to prospective students at information sessions and fairs and is also available on the website at: http://www.sph.emory.edu/cms/prospective_students/media/promoting_video.html.

Doctoral programs initiate their own recruitment efforts under the direction of each department's director of graduate studies (DGS). Doctoral programs reside in the Laney Graduate School, which provides funding for recruitment materials and campus visits by prospective students.

Recruitment Activities
Information Sessions and Off Campus Recruitment: The Office of Admissions and Student Services participates in recruitment fairs and campus information sessions throughout the year (see http://www.sph.emory.edu/cms/prospective_students/admin_events_archive.html). In addition, some departments recruit at meetings associated with their specialties, e.g., American Public Health

Association, Society of Public Health Education and National Environmental Health Association. RSPH also hosts monthly information sessions providing an overview of the school, a panel session with key staff and students, and a tour highlighting the key student resources of the RSPH Complex. See: http://www.sph.emory.edu/cms/prospective_students/admissions/visiting_campus.html

RSPH sponsors two major recruitment events on campus each year – an Open House in the fall for prospective students and Visit Emory! in the spring, for accepted applicants.

Open House: The fall Open House, which attracts more than 200 attendees, is designed to stimulate interest in public health, and specifically in the RSPH programs, among prospective students. The school advertises the event via its website and sends invitations to area colleges and universities and to students who have requested application information. The day-long Saturday program includes speakers on public health, employment opportunities in public health and the school's degree programs. Students have an opportunity to meet with RSPH students, faculty and the assistant/associate director of academic programs (ADAP) from any area of study in which they have an interest. In 2009 and 2010, the school received grant funding through the Association for Schools of Public Health and the Centers for Disease Control and Prevention to support the Open House, and expanded the event's focus by inviting pre-health advisors from undergraduate programs across the country to learn about the field of public health. The event was titled, *Destination Public Health.*

Visit Emory!: Each spring, the school hosts *Visit Emory!* for all applicants who have been accepted for admission to the school to assist them in making a decision about whether to enroll at RSPH. All interested individuals are welcome to attend this annual 2-day event held on a Thursday and Friday. This program focuses on the school and its academic programs, as well as its setting within Emory University and the value of its proximity to the Centers for Disease Control and Prevention, American Cancer Society, CARE, and health agencies at the federal, state and local levels. Prospective students have an opportunity to meet with school administrators, faculty, department/program ADAPs and current students to learn about curricular and to explore research opportunities. Tours of campus, local residential options and the CDC Global Odyssey Museum are a few of the activities offered during the event. The dean and department chairs invite all merit scholarship finalists to a reception in an effort to recruit the top candidates to the school during Visit Emory!

Rollins Student Ambassadors and Campus Visits: In addition to these events, the Rollins Student Ambassadors, coordinated by the associate director for recruitment, offer tours of campus to prospective students. The Student Ambassadors are also available throughout the year to answer prospective students' questions via phone, email or the Student Ambassador Facebook page. Some department ADAPs also sponsor Facebook pages where student government department representatives answer prospective students' questions.

Interest in RSPH programs continues to increase. Table 4.4a shows an increase in attendance at each of the school's major recruitment events.

Table 4.4a: Attendance at Recent Open House and Visit Emory! Day Events

Number of Attendees		
Academic Year	**Open House (Fall)**	***Visit Emory!* (Spring)**
2008-2009	155	265
2009-2010	169	335
2010-2011	211	351

b. Statement of admissions policies and procedures.

Application

Decisions to admit are made by faculty in the department to which the student applies. Departments normally admit applicants starting in the fall semester. Applicants use the SOPHAS (School of Public Health Application Service) application. The deadline for the receipt of the completed application and all required supporting documents for fall semester is early January (in 2012, January 10). The deadline for students applying to the CMPH program is April or May. Applicants are admitted on a space-available basis after the deadline. SOPHAS charges an application fee of $115 for the first application and $40 for each additional application.

Required application components include:
- Application form
- Narrative essay
- Two official transcripts from each post-secondary institution attended
- Two letters of recommendation
- Graduate-level entrance examination score report when required by the department (normally the Graduate Record Examination)

Additional International Requirements
- Official TOEFL or IELTS Scores
- Official Transcript Evaluation by World Education Services or comparable agency
- Financial Certificate and Financial Verification Process (required upon admission)
- Visa Information Sheet (required upon admission)

Admission Requirements for the MPH/MSPH Programs

Minimum requirements for admission include the following:
- Satisfactory completion of a 4-year baccalaureate degree or its equivalent
- Strong interest in a public health career and demonstrated involvement in public health or comparable activities
- Minimum undergraduate grade point average (GPA) of 3.0
- Graduate Record Examination (GRE) scores
  - Applicants who have completed doctoral-level degrees at U.S. Institutions are not required to submit GRE scores. Test score requirements by degree program are listed on the Emory-RSPH profile within the SOPHAS website at http://www.sophas.org/schools/emory.cfm. Departments participating in dual-degree programs accept entrance examinations required by the other degree program in lieu of the GRE.
  - Minimum scores desired vary by department and are considered in the context of the complete application.

Desirable attributes:
- Work or academic experience in the health field is highly desirable but not required
- Preference is given to students who have advanced training and applied experience

The program encourages applications from international students who are proficient in speaking, reading, writing and understanding the English language. All applicants whose native language is not English are required to take the Test of English as a Foreign Language (TOEFL) and to earn a minimum score of 79 - 80 on the internet-based exam. The International English Testing System (IELTS) may be accepted in lieu of the TOEFL exam. International applicants must submit Financial Certification forms ensuring that they have available funds to pay tuition and living expenses.

Admissions Decisions for the MPH/MSPH Programs
Weekly electronic mailings of applications are received from SOPHAS, loaded into the PeopleSoft database, reconciled for complete information and forwarded to the selected department for review. Each department has a process by which the faculty (typically as members of a committee) review applications and the department makes admission decisions. If a department rejects an applicant and the applicant has indicated a second preference, the application materials are forwarded to the second department. When an admission decision is made, the department forwards the information to the associate dean for admissions and student affairs who formally notifies the student of the outcome. Applicants who apply by the deadline are normally informed of their admissions status within 4-6 weeks of receipt of the application.

Scholarship Awards for MPH/MSPH Applicants
The school allocates a limited amount of merit scholarship support for master's level applicants. Available scholarships are listed in the school's catalog. Departments rank their most academically qualified applicants and forward them to the executive associate dean for academic affairs, normally by mid-February. An ad hoc committee with representation from each department ranks this pool. Merit scholarships are awarded to those most highly ranked until the budget is expended. Additional need-based grants are assigned by the Emory University Office of Financial Aid and are reflected in the financial aid package of students who apply for this support. The Emory University Office of Financial Aid also oversees the awarding of student loans and, in collaboration with the RSPH Office of Enrollment Services, awards school-based work program funding through the Rollins School of Public Health Practical Experience Program.

Six special RSPH programs provide scholarship support to students from outside the United States:

- *The Hubert H. Humphrey Fellowship Program* is a Fulbright Scholars Program sponsored by the US State Department which brings mid-career professionals from developing countries to the US for a year of professional development and academic studies. RSPH is one of only two schools of public health to receive this distinction. The RSPH is the only program focusing on HIV/AIDS in the Humphrey Fellowship Program.

- *The William Foege Fellowship Program* was established in 2003 by the Bill and Melinda Gates Foundation to honor the global health contributions of Dr. William H. Foege.   Scholars are nominated by Atlanta-based public health agencies from a pool of individuals in developing countries who have demonstrated the potential for public health leadership in their home countries.

- *The Edmund S. Muskie/Freedom Support Act Graduate Fellowship Program* is a US State Department-funded program that provides citizens of Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russia, Tajikistan, Turkmenistan, Ukraine and Uzbekistan with the opportunity to pursue graduate study at the master's level in the United States.

- *The John E. Fogerty AIDS International Training and Research Program* builds multi-disciplinary biomedical and behavioral research capacity for the prevention of HIV/AIDS-related infections and for the integration of prevention with therapy and care for those adults and children affected by HIV/AIDS in the collaborating country. Collaborating countries for Rollins School of Public Health are Mexico, Republic of Georgia, Armenia and Vietnam.

- *The Fulbright Program for Foreign Students* is sponsored by the US State Department and brings citizens of foreign countries to the United States for master's degree study at US universities. Many foreign Fulbright grantees are early-career professionals who will return to take leadership positions in their home countries, often working at universities or in government service.

- *The King Abdullah bin Abdul-Aziz Al Saud fellowship program* began in fall 2011. The goal of the fellowship program is to build public health human capacity in the Kingdom of Saudi Arabia by providing masters of public health training for Saudi Ministry of Health students at the Rollins School of Public Health.

The school provides support to students through several other collaborative programs:

- The *Yellow Ribbon GI Education Enhancement Program* is a provision of the Post 9/11 Veterans Educational Assistance Act of 2008. The Rollins School of Public Health of Emory University offers opportunities for financial assistance for two (2) post 9/11 veterans and their dependents.

- The school also offers half-tuition scholarships to medical students entering the *MD/MPH program* and partial scholarships to students entering the MPH or MSPH program while enrolled in Emory-related medical residency programs and the *Preventive Medicine Residency Program* at the Centers for Disease Control and Prevention. In 2010-11, students in *Emory University Health Sciences* dual degree programs, including nursing, physician assistant and physical therapy, were also offered partial scholarship support.

- *Paul D. Coverdell Peace Corps Fellowships* offer returning Peace Corps Volunteers scholarship support and an assistantship working with community organizations serving refugee populations in the Atlanta area. Those selected as Peace Corps Fellows also mentor Masters International students (students anticipating enrolling in the Peace Corps following completion of their studies) through a weekly seminar.

- RSPH will provide a one-time educational award match in the amount of $5,000 per student, for 1-5 graduates of *Americorps* who are admitted to the MPH or MSPH degree program. In exchange students develop leadership and community development skills by facilitating service opportunities for RSPH students. This program is advised by the Director of Leadership and Community Engaged Learning.

Application and Admission to Graduate School Programs (Doctoral Programs)
Students apply to doctoral programs through the Laney Graduate School. Each RSPH department
(director of graduate studies and faculty members) selects the students for admission to its doctoral
programs on the basis of an applicant's prior academic record, standardized test scores (Graduate
Record Examination), professional plans, recommendations from others familiar with the applicant's
work and the availability of an appropriate course of study.

**c. Examples of recruitment materials and other publications and advertising that describe, at a
minimum, academic calendars, grading, and the academic offerings of the school. If a school does
not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree
requirements as the official representation of the school. In addition, references to website
addresses may be included.**

A web-based catalog is available at
http://www.sph.emory.edu/cms/academic_programs/rsph_catalog.html . The recruitment DVD and
examples of other recruitment materials are available on site in the resource room. A wide range of
information is also available on the school's website at www.sph.emory.edu.

**d. Quantitative information on the number of applicants, acceptances and enrollment, by program
area, for each of the last three years. Data must be presented in table format.**

The number of applications continues to increase each year. The total number of applications increased
30% from 2008 to 2011. The total number of new enrollments has increased 28% for the same period.

**Table 4.4d: Quantitative Information on Applicants, Acceptances, and Enrollments,
by Program Area for the last 3 years**

Quantitative Information on Applicants, Acceptances, and Enrollments by Program Area[1], 2008 – 2011				
		Academic Year 2008 to 2009	Academic Year 2009 to 2010	Academic Year 2010 to 2011
Biostatistics – MPH	Applied	25	26	30
	Accepted	6	14	11
	Enrolled	0	4	6
Biostatistics – MSPH	Applied	24	22	32
	Accepted	14	21	25
	Enrolled	2	7	7
Public Health Informatics – MSPH	Applied	2	7	7
	Accepted	1	5	5
	Enrolled	1	3	2
Behavioral Sciences and Health Education – MPH	Applied	294	307	399
	Accepted	221	218	274
	Enrolled	75	92	82
Environmental Health – MPH	Applied	57	61	108
	Accepted	30	41	63
	Enrolled	8	9	15

Quantitative Information on Applicants, Acceptances, and Enrollments by Program Area[1], 2008 – 2011		Academic Year 2008 to 2009	Academic Year 2009 to 2010	Academic Year 2010 to 2011
Environmental Health/Epidemiology – MSPH	Applied	20	15	15
	Accepted	7	8	4
	Enrolled	4	3	3
Global Environmental Health – MPH	Applied	64	46	75
	Accepted	31	35	45
	Enrolled	11	15	19
Epidemiology – MPH	Applied	288	306	348
	Accepted	164	164	184
	Enrolled	56	48	56
Epidemiology – MSPH	Applied	25	34	46
	Accepted	16	22	28
	Enrolled	1	6	8
Global Epidemiology – MPH	Applied	124	151	159
	Accepted	60	82	67
	Enrolled	12	30	27
Global Epidemiology – MSPH	Applied	18	21	23
	Accepted	10	14	12
	Enrolled	2	1	4
Health Policy and Management – MPH	Applied	278	331	342
	Accepted	232	259	244
	Enrolled	72	70	80
Health Policy/Health Services Research – MSPH	Applied	9	17	22
	Accepted	8	11	14
	Enrolled	5	7	4
Global Health - MPH	Applied	515	563	593
	Accepted	254	331	280
	Enrolled	73	99	95
Public Nutrition - MSPH	Applied	22	24	29
	Accepted	7	13	10
	Enrolled	0	3	4
Applied Epidemiology - MPH	Applied	24	18	23
	Accepted	17	16	18
	Enrolled	13	8	12
Healthcare Outcomes – MPH	Applied	18	15	19
	Accepted	14	14	15
	Enrolled	9	8	10
Prevention Science - MPH	Applied	26	48	44
	Accepted	20	43	37
	Enrolled	13	25	23
Applied Public Health Informatics – MPH[2]	Applied	n/a	n/a	n/a
	Accepted	n/a	n/a	n/a
	Enrolled	n/a	n/a	n/a

Quantitative Information on Applicants, Acceptances, and Enrollments by Program Area[1], 2008 – 2011		Academic Year 2008 to 2009	Academic Year 2009 to 2010	Academic Year 2010 to 2011
Behavioral Sciences and Health Education – PhD	Applied	52	41	49
	Accepted	7	6	8
	Enrolled	1	4	4
Biostatistics– PhD	Applied	63	79	123
	Accepted	14	13	15
	Enrolled	8	6	6
Epidemiology – PhD	Applied	66	92	118
	Accepted	16	13	23
	Enrolled	9	8	14
Environmental Health Sciences – PhD[3]	Applied	n/a	n/a	n/a
	Accepted	n/a	n/a	n/a
	Enrolled	n/a	n/a	n/a
Health Services Research and Health Policy - PhD	Applied	38	45	65
	Accepted	7	8	4
	Enrolled	3	3	3

[1] Specialty area is defined as each degree and area of specialization contained in the instructional matrix
[2] Applied Public Health Informatics – MPH admitted its first class of students in fall 2011
[3] Environmental Health Sciences – PhD admitted its first class of students in fall 2011

Accepted applicants are asked to indicate reasons for declining or accepting RSPH's offer of admission. Financial reasons and scholarship offers from other schools are the top reasons indicated for deciding to attend another school. The top five schools that students chose to attend are Johns Hopkins, Columbia, Michigan, the University of North Carolina – Chapel Hill, and Harvard.

Table 4.4d.i: Accepted Applicant Reasons for Declining Offer of Admission

Accepted Applicant Reasons for Declining Offer of Admission, 2008 – 2011	Academic Year 2008 to 2009	Academic Year 2009 to 2010	Academic Year 2010 to 2011
Different Academic Objective	22	35	38
Attending Another School	324	330	355
Financial Reasons	68	89	72
Geographic Locations Not Favorable	36	32	37
More Timely Decision from Another School	12	5	11
Applied as a Dual Degree and Was Not Admitted	1	7	4
Received Scholarship at Another School	52	47	57

Accepted applicants were also asked to indicate the reasons they decided to enroll at RSPH. Scholarship is one such reason and the number of students who indicated scholarship received has increased 76% from 2009 to 2011. This is a result of the school's efforts to increase the number and types of awards offered to incoming students. Other reasons for choosing to enroll at RSPH include dual degree and distance program options.

Table 4.4d.ii: Accepted Applicant Reasons for Enrolling at RSPH

Accepted Applicant Reasons for Enrolling at RSPH, 2008 – 2011			
	Academic Year 2008 to 2009	Academic Year 2009 to 2010	Academic Year 2010 to 2011
Cost Comparison	80	74	99
Faculty Interest/Research Specialties	143	163	175
Geographic Reasons	187	175	72
Opportunities for International Experience	207	201	229
Partnerships/Collaborations	330	329	371
Personal Contact with Faculty/Staff	62	71	77
Research/Work Experience Offered	251	256	291
Scholarship Received	29	30	51
School/Class Size	46	53	59
School's Reputation	315	321	378
Topics/Concentrations Offered	238	238	262

e. **Quantitative information on the number of students enrolled in each specialty area identified in the instructional matrix, including headcounts of full- and part-time students and a full-time-equivalent conversion, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any program or specialization. Data must be presented in table format.**

RSPH continues to attract students to all its degree programs, with increased growth in programs with a global focus. Doctoral programs also continue to enroll students across disciplines.

Table 4.4e: Total Students Enrolled in each Degree Program (Area of Specialization)
Identified in Instructional Matrix for each of the last 3 years

Students Enrolled in Each Degree Program by Area of Specialization, 2008 - 2011									
	2008-2009			2009-2010			2010-2011		
Degree Conferred - Specialization	HC FT	HC PT	FTE	HC FT	HC PT	FTE	HC FT	HC PT	FTE
Traditional Master Degrees (degree conferred) -- Specialization									
MPH – Behavioral Sciences and/or Health Education*	154	6	156.2	151	6	154.1	161	8	166
MPH – Biostatistics	3	0	3	3	1	3.8	9	1	9.6
MS – Biostatistics**	5	1	5.6	1	0	1	0	0	0
MSPH – Biostatistics or Public Health Informatics	9	4	11.4	10	5	12.8	16	5	18.9
MPH – Environmental Health or Global Environmental Health	49	5	51.4	44	4	46.3	58	5	60.8
MSPH – Environmental Health and Epidemiology	7	1	7.6	6	1	6.4	6	1	6.6

Students Enrolled in Each Degree Program by Area of Specialization, 2008 - 2011									
	2008-2009			2009-2010			2010-2011		
Degree Conferred - Specialization	HC FT	HC PT	FTE	HC FT	HC PT	FTE	HC FT	HC PT	FTE
MPH – Epidemiology or Global Epidemiology	119	10	125	151	10	156.9	174	11	180.1
MSPH – Epidemiology or Global Epidemiology	10	1	10.8	14	0	14	19	0	19
MPH – Health Policy or Health Management	115	6	118.7	125	5	128.3	135	3	136.8
MSPH – Health Policy and Health Services Research	11	0	11	11	0	11	11	0	11
MPH – Global Health (Infectious Diseases; Community Health and Development; Public Nutrition; or Reproductive Health and Population Studies)	149	6	152.7	160	5	163	163	4	165.4
MSPH – Global Health in Public Nutrition	0	0	0	2	0	2	6	0	6
Career MPH (Distance-based master of public health) (degree conferred) – Specialization ***									
MPH – Applied Epidemiology	3	19	14.3	1	19	11.9	2	29	19.2
MPH – Healthcare Outcomes	5	25	19.4	6	30	21.7	5	33	22.6
MPH – Prevention Science	8	51	37.4	11	57	44.0	9	56	42.3
MPH – Public Health Informatics	Enrolled first class in 2011-2012								
Doctoral Degrees (degree conferred) – Specialization									
PhD – Behavioral Sciences and Health Education	16	0	16	18	0	18	18	0	18
PhD – Biostatistics	31	0	31	33	0	33	33	0	33
PhD – Environmental Health Sciences	Enrolled first class in 2011-2012								
PhD – Epidemiology	37	0	37	38	0	38	45	0	45
PhD – Health Services Research and Health Policy	11	0	11	14	0	14	14	0	14

NOTE: Degree conferred refers to MPH, MSPH, PhD.   FT = Full-time students (9 credit units or more per
Specialization refers to biostatistics,   semester)
epidemiology, health education, etc.   PT = Part-time students
HC = Head Count   FTE = Full-time equivalent students

*   The registrar currently does not code students by their concentration within academic programs (e.g., it does not indicate whether a student is concentrating in "behavioral sciences" and/or "health education" within the Department of Behavioral Sciences and Health Education or in the "policy" or "management " concentration within the Department of Health Policy and Management). Consequently, some of the enrollment numbers are for more than one degree concentration (specialization).

**   Students are not recruited to enroll in Master of Science degree programs offered by the RSPH. When students in the PhD programs are unable to complete the program, departments may recommend that the Laney Graduate School award a terminal Master of Science Degree on the basis of completed work.

*** Unlike the traditional program, full-time students in the CMPH program are those who take 6 or more hours of coursework. Part-time students take less than 6 hours.

f. Identification of outcome measures by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures for each of the last three years.

The school uses four indicators of its success in enrolling a qualified student body in its MPH/MSPH Programs:

- Acceptance rate
- Mean undergraduate grade point average
- Mean Graduate Record Examination score (for those who take them)
- Proportion of students choosing RSPH over another "top 10" school to which they were admitted

Individually, each indicator is not fully satisfactory as a measure of the quality of the student body but the indicators are, collectively, suggestive. The proportion of students graduating within 5 years and employment data are presented in Criteria 2.7.

Acceptance Rate
Prospective MPH/MSPH students apply for admission to individual departments. The application form allows students to indicate up to three departmental preferences on their applications. If an applicant's primary departmental choice rejects their application, the application is automatically referred to and reviewed by their secondary departmental choice. If an application is wait-listed by the primary departmental choice, the applicant is notified of the decision to waitlist and the application is forwarded to the second-choice department for review. The school calculates its acceptance rate based on the percent of MPH/MSPH applications accepted by a department.

Table 4.4f.i reports the school's acceptance rate for MPH/MSPH candidates for the past 3 academic years. Enrollment targets set during the school's annual planning process may impact acceptance rates. [There has been a continuing increase in the number of applicants to the Rollins School of Public Health over the past 4 years. This is also reflected in a decline in the proportion of applicants accepted. Compared to the other top ten ranked schools as rated by *US News and World Report*, the Rollins School of Public Health is slightly higher in its acceptance rates.]

Table 4.4f: Acceptance and Matriculation

Academic Year	Applications	% Accepted	*% (of Accepted) Matriculated*
Fall 2008	2051	56%	33%
Fall 2009	2270	60%	34%
Fall 2010	2671	52%	35%
Fall 2011	2871	51%	36%

Grade Point Average
Over the past four years, undergraduate grade point average of applicants maintained around 3.38. GPA was higher for accepted applicants averaging around 3.46 for the past few years. For matriculated students, average undergraduate GPA has been consistently high.

Table 4.4f.i: Mean Undergraduate GPA: All Students

Academic Year	Applicants	Accepted	*Matriculated*
Fall 2008	3.38	3.45	3.37
Fall 2009	3.39	3.46	3.40
Fall 2010	3.38	3.46	3.39
Fall 2011	3.38	3.47	3.40

Mean GRE Scores

The mean GRE scores of matriculated students on the verbal and quantitative sections remained consistent between 2008 - 2011. RSPH scores are slightly higher than the average GRE score (499 V, 624 Q) reported in SOPHAS Cycle Four Applicant Analysis for all SOPHAS applicants reporting GRE test scores.

Table 4.4f.ii: Mean GRE Scores: All Students

Academic Year		Applicants	Accepted	Matriculated
Fall, 2008	Quantitative	649	675	655
	Verbal	537	561	538
	Analytical Writing	4.44	4.57	4.47
	Analytic	638	672	715
Fall 2009	Quantitative	650	675	653
	Verbal	543	559	536
	Analytical Writing	4.33	4.45	4.34
	Analytic	598	667	630
Fall 2010	Quantitative	653	684	668
	Verbal	544	566	552
	Analytical Writing	4.28	4.42	4.37
	Analytic	n/a	n/a	n/a

Recruitment Success in Doctoral Programs

Outcome measures indicating successful enrollment of students in doctoral programs are primarily mean GRE examination scores. The mean GRE scores for doctoral students entering each doctoral program for the past 3 years are as follows:

Table 4.4f.iii: Mean Cumulative GRE Test Scores for PhD Enrollees

Year entering	Behavioral Sciences and Health Education	Biostatistics and Bioinformatics	Environ- mental Health*	Epidemiology	Health Services Research and Health Policy	All Emory PhD Programs
2009	1193	1237	----	1393	1443	1302
2010	1285	1330	----	1350	1343	1303
2011	1303	1377	1237	1429	1403	1308

* Enrolled first class in 2011-2012

The mean aggregate GRE scores of entering doctoral students in public health programs are roughly comparable to those entering the 26 other doctoral programs at Emory University.

g. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The admissions and recruitment policies and procedures enable the school to locate and select qualified individuals who will develop competence for careers in public health.
- The applicant pool continues to increase in size, enabling the school to be more selective.

Lessons Learned:
- The school does not currently record, in its central records, the number of students in department program concentrations (e.g., students in the behavioral sciences vs. health education tracks within the Department of Behavioral Sciences and Health Education), although those data are maintained by individual departments. The school is considering collecting that information for its central records.
- The student body is interested in an increasingly diverse curriculum.

4.5 Student Diversity

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

Required Documentation. The self-study document should include the following:

| a. | Description of policies, procedures and plans to achieve a diverse student population. |

The school adheres to the Emory University Equal Opportunity Policy, the Emory University Affirmative Action Policy and the Americans with Disabilities Act, all of which are described in the school's catalog and admission guide.

While there is no admissions target for underrepresented minorities, the school does recruit at several historically black colleges and universities (see section 4.5b), encourages applications, and does not discriminate in its admission decisions. Neither the school nor individual departments factor minority status into the admissions decisions. Nevertheless, among students enrolled in 2010-2011, 11.8% are African-American. The proportion of African-American enrollment in the RSPH is higher than the average proportion of African-American students (10.6%), in all schools of public health, according to recent data from the Association of Schools of Public Health.

RSPH admits students regardless of financial need and attempts to recruit students through several different types of need-based scholarship programs (noted in section 4.4).

Through the Career MPH program, RSPH recruits students who may be employed in the public health workforce but who may not have advanced degrees. In 2011, the average age of the entering Career MPH student was 36 with the range from 23 – 58 years of age. Scholarship opportunities such as the Hearst Fellowship, provides partial tuition for those who live in rural areas of the southeast with preference given to those working with disadvantaged populations.

With the increase in faculty whose research areas focus on special populations, the school is attracting students whose interests and backgrounds are also diverse.

| b. | Description of recruitment efforts used to attract a diverse student body, along with information about how these efforts are evaluated and refined over time. |

The associate director for recruitment attends several events throughout the year targeting minority populations. As a member of SOPHAS, the school is represented at numerous minority recruitment fairs across the country and attracts students globally through international fellowship programs. Specifically, the Rollins School of Public Health attends the Morehouse Public Health Awareness Conference, the Spelman College Health Careers Program and the Atlanta University Center Consortium Graduate Fair. See Appendix 4.5.b for a list of recruitment activities. The school also hosts programs for the Gates Millennium Scholars and supports travel stipends of underrepresented groups to attend the annual Open House event, Destination Public Health

Student organizations at the Rollins School of Public Health seek to recruit a diverse student body during the Visit Emory! event for admitted applicants. The Association for Black Public Health Students and Health Organization for Latin America (HOLA) sponsor a joint event for students interested in health disparities among African-American and Latino populations and provide information about their organizations at the Visit Emory! Student Organization Fair.

The School of Public Health Application Service (SOPHAS) Advisory Council and partner schools also recruit minority applicants at national conferences throughout the year.

International scholars are attracted to the school because of its unique location and supportive environment. In fall 2011, 18% of MPH/MSPH students came from outside the United States with China, India and Nigeria representing the top three countries enrolled. This represents a 54% increase from 2009.

RSPH admits students regardless of financial need. Approximately 79% of all enrolled students in 2009-2010 received aid. In the same year, 93% of those who applied for aid were determined need-eligible and provided some type of financial support through loans, need-based scholarships or the Rollins Practical Experience Program.

Several scholarship sources serve to recruit students with financial need. The Lettie Pate Whitehead tuition scholarships are given annually to over 25 women from southern states. Additionally, the university awards the Lupton Jones and Ivory Henson scholarships which also provide funding based upon demonstrated financial need. To receive these awards, students must be need-eligible as determined by the Free Application for Student Aid (FAFSA) and meet minimum university criteria.

Started in 2010, the RSPH Practical Experience Program provides funding through a work-study model in which need-based aid awarded by RSPH is matched by local public health agencies or internal research/university programs. Students gain valuable work experience while earning up to $4000 per academic year to supplement education costs.

Public Health Traineeships, funded through HRSA and the US Public Health Service are awarded to support areas of critical shortage in public health. Currently, these areas are biostatistics, environmental and occupational health and epidemiology.

RSPH Merit Scholarships are awarded to top students. The criteria for selection of merit scholars, in addition to leadership and service to others, includes the "potential contribution to the rich exchange of ideas and viewpoints that should characterize a diverse student body." (An Essential Guide to Graduate Admissions: A Policy Statement, Council of Graduate Schools, 2005).

Each recruitment event is coded in the student administration system, OPUS. Students are asked to complete an information card and tracked to assess yield in applicants, admits and enrollees from these events. Student satisfaction surveys are collected from the Visit Emory! event and used to enhance the program each year. Student Services staff conducted a short employer evaluation in 2010 and are working with career services staff to implement a comprehensive program evaluation for the 2011-2012 cycle of the RSPH Practical Experience Program.

c. **Quantitative information on the demographic characteristics of the student body, including data on applicants and admissions, for each of the last three years. Data must be presented in table format.**

Table 4.5.c. Demographic Characteristics of Student Body for Academic Years '08, '09 & '10

Demographic Characteristics of Student Body for Academic Years '08, '09 & '10							
		2008		2009		2010	
		M	F	M	F	M	F
African American	Applied	37	172	44	205	52	224
	Accepted	20	87	18	106	19	96
	Enrolled	10	34	7	53	12	41
Caucasian	Applied	126	549	134	595	160	590
	Accepted	92	439	94	486	122	451
	Enrolled	38	150	41	186	55	186
Hispanic/Latino	Applied	10	47	5	35	13	57
	Accepted	6	27	3	26	7	43
	Enrolled	1	12	1	11	3	15
Asian Pacific Islander	Applied	35	130	67	161	68	202
	Accepted	28	106	51	129	47	143
	Enrolled	6	40	20	42	11	50
Native American/Alaska Native	Applied	0	2	0	3	1	2
	Accepted	0	2	0	2	0	2
	Enrolled	0	1	0	0	0	2
Hawaiian	Applied	N/A	N/A	0	0	0	1
	Accepted	N/A	N/A	0	0	0	1
	Enrolled	N/A	N/A	0	0	0	0
Multi-ethnic	Applied	0	1	5	6	6	25
	Accepted	0	0	3	3	6	19
	Enrolled	0	0	1	1	2	5
Unknown/Other	Applied	30	153	44	142	60	240
	Accepted	19	96	34	105	41	150
	Enrolled	7	20	8	21	8	34
International	Applied	146	225	182	251	178	294
	Accepted	89	129	108	145	84	142
	Enrolled	26	33	23	44	18	43
TOTAL	Applied	384	1279	481	1397	538	1641
	Accepted	254	886	311	1002	326	1047
	Enrolled	89	290	101	358	109	376

d. Identification of measures by which the school may evaluate its success in achieving a demographically diverse student body, along with data regarding the school's performance against these measures for each of the last three years.

The RSPH uses three criteria to measure, monitor and benchmark the diversity of its student body. These measures are (1) the proportion of all minority students enrolled in the school, (2) the proportion of students accepted and matriculated from different racial and ethnic groups and (3) the proportion of minority students admitted to the RSPH relative to the proportion of minority students in the population of undergraduates in US universities.

RSPH uses the proportions of African Americans and all minority students enrolled in other accredited schools of public health, as reported by the Association of Schools of Public Health, as one benchmark of its diversity. Table 4.5d compares the most recently available data from ASPH (academic year 2009-2010) with the RSPH for academic years 2009-2010 and 2010-2011. The table indicates that the proportion of entering minority students in the RSPH is comparable to the average across the other 43 schools of public health.

Table 4.5d: Entering Class Proportion of Minority and African-American Students
Accredited Schools of Public Health and RSPH

	2009 - 2010		2010 - 2011	
	ASPH All Accredited Schools	**RSPH**	**ASPH All Accredited Schools**	**RSPH**
% Minority	34.2	33.7	No longer reported by ASPH*	No longer reported by ASPH*
% African American	11.2	14.7	10.6	11.8

* In 2010-2011, ASPH reported proportions for individual minority groups, not for the total
    proportion of minority students, as they had in previous years.

The school also monitors the proportion of students accepted and matriculated from different ethnic groups. The proportion of African-American students who matriculate is significantly higher each year than the proportion of all students who matriculate. In the most recent year, 44.8% of accepted African-American students chose to matriculate compared to 34.2% of all students. This suggests that the school is able to attract minority students, especially African-American applicants, when accepted.

Finally, RSPH monitors the diversity of students admitted to the RSPH relative to the potential pool of applicants, as measured by the diversity of undergraduate students enrolled in US universities reported in the *Chronicle of Higher Education*. In the 2010-11 academic class, 11.8 % of the students admitted to RSPH were African-American, 29% were minorities, and over 78% were female. For comparison purposes, African-Americans accounted for 13.5%, all minorities 33.2%, and female students 52.4% of all US undergraduate students in 2010, according to the most recent data from the *Chronicle of Higher Education,* available in the resource room on site.

While not specifically monitored annually, the school has a diverse student body by age, educational background and geography. Students in the fall 2011 entering class ranged in age from 21 to 58; came

from 26 states and 41 countries; and 15% had already completed either doctoral or master's degrees. The significant international diversity at Rollins School of Public Health occurs in part because Rollins School of Public Health is a host institution to six competitively selected fellowships, as described in Section 4.4b.

**e. Assessment of the extent to which this criterion is met.**

This criterion is met.

Strengths:
- Application, admission and degree-granting requirements are applied equitably.
- The Rollins School of Public matriculates a diverse population of students from across the U.S. and around the globe.
- The school matriculates a high proportion of accepted African-American students.

Lessons Learned:
- The school's student population diverse by age, state and country of residence, aspects of diversity not captured in the student demographic tables.
- The CMPH program enrolls a cohort of older students, most of whom are employed, which is a demographic different than the traditional program.
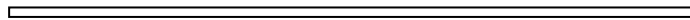
4.6   Advising and Career Counseling

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

Required Documentation:

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a.   Description of the advising and career counseling services, including sample orientation materials such as student handbooks.

Student advisement takes place in multiple places within the school, starting with recruitment and admissions through the Office of Admissions and Student Services, to departmental expertise and advisement on curriculum and research, and through advisement on practice-based experiences and career development through the Office of Career Services.   The Student Leadership Team, comprised of representatives from each core area of advisement, seeks to enhance the student experience by ensuring consistent, cohesive communication with prospective and current students on process, policies and curriculum requirements. An overview of each responsible unit and their advisement functions follows.

School Units responsible for Advisement

Office of Admissions and Student Services Advisement and Counseling
The associate dean for admission and student affairs oversees the Office of Admissions and Student Services (OASS). The mission of the OASS is to advance the public health profession through the recruitment and development of engaged scholars. The OASS oversees most school-wide functions pertaining to student support, including Recruitment and Admissions, Orientation, Community-Engaged Learning, Enrollment Services (Registrar and Financial Aid), the RSPH Practical Experience Program and Student Affairs.

Departmental Expertise and Advisement
Students are advised within departments by the assigned faculty advisor, related faculty and the ADAP(s). As the first point of student contact from recruitment through graduation, the ADAP works closely with faculty in the department to advise students.

Office of Career Services Advisement and Counseling
The mission of the Office of Career Services is provide education, resources and knowledge through personal advising and programming to collaborate in the professional success of RSPH students and alumni to empower the future leaders of public health service.

The office consists of five full-time and two part-time staff members. The director of the Office of Career Services oversees student advisement, the events and programs, recruitment activities and maintains the relationships necessary to fuel the Career Services department. The director reports to the executive associate dean for finance and administration. Two additional career advisors directly coach students and assist in program planning and implementation. The Office is also supported by a business analyst, a program coordinator and Career Services Ambassadors, which are student volunteers.

Advisement Services offered throughout the school

As the first point of contact for many students, students frequently seek advice and direction through the Office of Admissions and Student Services. All international issues such as visa requests, English as a Second Language, and student language evaluations are coordinated in the OASS. This office also advises the Executive Board of the Student Government Association. Department ADAPs coordinate their activities with the personnel in Student Services via the Student Leadership Team, which plans and coordinates registration, annual events, academic advisement and student-related services.

Students can also review or obtain information about school-wide academic requirements, support services and administrative policies through the *Student Handbook called Clifton Notes*, available online at [http://www.sph.emory.edu/cms/current_students/documents/Clifton_Notes_2011.pdf], and on site. Some departments provide students with a separate handbook, although most also place information on the department's website. The full set of information is in the resource room on site

Office of Admissions and Student Services
The spectrum of advisement services offered by the Office of Admissions and Student Services are described in detail in Appendix 4.6.a.1., and include:
- Recruitment and Admissions
- Student Orientation
- Enrollment Services
- International Student Affairs
- Community-Engaged Learning
- Student Leadership

Faculty Advisement
All entering MPH/MSPH students are assigned to a full-time faculty member in the student's academic department who serves as their academic faculty advisor. Department assistant/associate directors of academic programs (ADAP) will change the assignment of academic advisors at the request of students.

Because of their unique needs, Career MPH students are advised by their track's associate director and the program's associate director for academic programs (ADAP) until they begin their thesis. Students are encouraged to consult with their faculty advisors about academic and career-related concerns.

Departments in which MPH/MSPH students write a thesis or choose a special study project assign a faculty member (often the student's choice) as the chair of the thesis or special study project committee. This may be someone other than the initially assigned department faculty advisor.

Many students are also employed by faculty members as research or teaching assistants. Adjunct faculty members may also serve on thesis or special study project committees and, in some departments, they are formally recognized as "field advisors" for student theses and special study projects. Adjunct faculty members regularly serve as site supervisors for students during their practica field experiences.

Staff Advisement: Assistant/Associate Directors for Academic Programs
In addition to faculty advisors within each department, all departments have one or more associate/assistant directors for academic programs (ADAP). This staff person, typically masters-trained, is knowledgeable about the academic requirements of the school and the department and

provides advisement to students and faculty on course enrollment and other school-related activities. The ADAP, along with the faculty advisor, may assist the student in arranging for the practicum experience and finding an appropriate thesis or special studies project and advisor. ADAPs work across the school as a team, coordinated by the associate dean for admission and student affairs in scheduling courses, the admissions process, student recruitment and alumni events. ADAPs monitor student progress from the point of admission through graduation and beyond, serving as advocates based on individual student needs.

Office of Career Services

To complement the classroom instruction, the Office of Career Services provides consultation, training and advisement services for students to prepare them for public health practice and locate practicum opportunities.

Consultation: The RSPH Office of Career Services helps current students and recent alumni find careers in public health. The Office provides assistance to students and alumni during the career process, including identifying career goals and developing tangible skills such as interviewing and networking techniques. The Office provides multiple resources to students, both electronically and in-person, including one-on-one consultations services for resumes, covers letters and interviewing skills.

Table 4.6a: Volume of Consultations Visits by Student Types

Visit Volume	2008-2009	2009-2010	2010-2011
Overall Visits *	1683	1683	1817
Student Visits	1429	1492	1560 (521 unduplicated students)
Alumni Visits	165	149	194 (98 unduplicated alumni)
Prospective Students	33	39	63

*The number of consultations for 2010-2011 is lower than 2009-2010 due to fluctuations in staff available to provide services.

Table 4.6a.i: Number of Consultations by Type of Consultation with Students on Career Advice

Types of Consultations	2008-2009	2009-2010	2010-2011*
Resume/Cover letter	548	1128	793
Mock interview/Interview skills	136	212	178
Career coaching	434	565	539
Internship/fellowship/volunteer	260	291	215
Job search	174	214	296
Business cards	85	71	111
Total	1637	2481	2132

Events and Programs: Workshops and programs help build successful professional skills. Mock Interview and Networking Nights provide students with the opportunity to practice their interviewing skills and gain feedback as they network with community partners and alumni. The Professional Development Series, regularly scheduled presentations throughout the year, enable students to casually interact with professionals from the field of public health.

The Office of Career Services facilitates a yearlong mentoring program with over 110 alumni and public health professionals designed to foster a strong sense of community and alumni ties, as well as helping current students to begin building a professional network. Mentors provide guidance, expertise and insight into their field; attempting to give the students a clearer perspective of their potential career options.

In addition to skill-building programs, the career services team also coordinates two annual Opportunity Fairs (latest program available on site in the resource room) during which over 50 employers visit the campus to interview and recruit students. A variety of organizations, including federal, state and local health agencies, for-profit companies and nonprofit organizations are represented. Closely tied to the Opportunity Fairs is on-campus recruiting. Organizations such as CDC's Public Health Prevention Service, PricewaterhouseCoopers and ICF International participate in annual on-campus recruiting.

Table 4.6a.ii: Career Services Event Types Contact Summary, 2010-2011

Events	# of Events	Attendance
Opportunities Fair - Fall 2010	1	Total Organizations- 48 Students- 360
Opportunities Fair - Spring 2011	1	Total Organizations- 50 Students- 274
Employer Presentation	27	832
Prep Sessions	13	672
Special Event	10	890
Workshop on Resume	5	152
Professional Development Series	8	269
Other Workshop	6	394
Grand Total	**71**	**3843 ***

* Student Attendance

In alternate years, the Office of Career Services hosts a Washington, DC, Study Tour in collaboration with the University of Puerto Rico (UPR) that allows 25 students the opportunity to travel to Washington DC, interact with public health officials in the capitol, network with alumni and gain knowledge about current happenings in the field. Students are provided the opportunity to interact with public health leaders and alumni working in nonprofits, government and for-profit organizations.

At the end of the academic year, the Office of Career Services hosts a reception called Public Health in Action. The event includes the presentation of awards to exceptional adjunct faculty, preceptors and students, whose practica are selected for descriptions in poster presentations. This event is designed to recognize achievements in public health practice and ties between the Rollins School of Public Health and its community partners.

Career Services Ambassadors (CSA) program offers students the opportunity to represent the school at various company networking and social events. The program also provides students with a forum for discussing academic programming, career development and planning.

A summary of major Career Services events is included in Appendix 4.6.a.2.

Career Services Advisory Group: This group facilitates better communication between the academic departments and Career Services, provides a mechanism for feedback from faculty, allows for promotion of Career Services events and programs, enhances faculty engagement in Career Services and delivers consistent messages about employment to students. This group is composed of the director of career services, the executive associate dean for administration and finance and representative faculty and academic staff from each department.

Community Advisory Board: As a way of maintaining up-to-date awareness of employment needs, the Office of Career Services coordinates the Community Advisory Board (CAB), composed of alumni and company representatives. Through conference calls and one face-to-face meeting each year, this group provides programmatic guidance and advice on employment opportunities and needs throughout the field of public health. In addition, alumni programs are designed to facilitate employment networking and preparation for entering public health practice.

Electronic Resources: The Office of Career Services also provides several electronic resources for students (See Appendix 4.6.a.3.) The office maintains a website, *The Public Health Employment Connection*, at [cfusion.sph.emory.edu], a resource of public health jobs used by all schools of public health and organizations to disseminate timely job openings in the field.

Job, Internship and Practicum Resource: The Office of Career Services is a repository for practicum opportunities and maintains a practicum database which is updated regularly. In addition, a jobs listserv to all students and interested alumni notifies participants of new opportunities as they become available. The listserv sends out announcements, recruitment activities and job openings to all students. Students can also utilize the Career Services website [http://www.sph.emory.edu/CAREER/] to locate event details, up-coming programs, information and a database of practicum, internship and fellowship opportunities.

For students looking for internship, fellowship and practical experience opportunities, the Rollins Opportunity Link, or ROL, also known as *Symplicity*, is available as a searchable database of [https://sph-emory-csm.symplicity.com/students/]. These opportunities range from volunteer opportunities, outside employment opportunities, such as federal internships and nonprofit organizations, as well as research experiences with faculty. The database is also used by multiple areas within the University system including Emory College and Alumni Career Services.

Model of Student Advisement with the RSPH

As mentioned above, the lifecycle of advisement for MPH/MSPH students spans from recruitment through graduation. Three core areas of advisement include student services, departmental expertise and advisement and career services.

Figure 4.6a: Student Advisement

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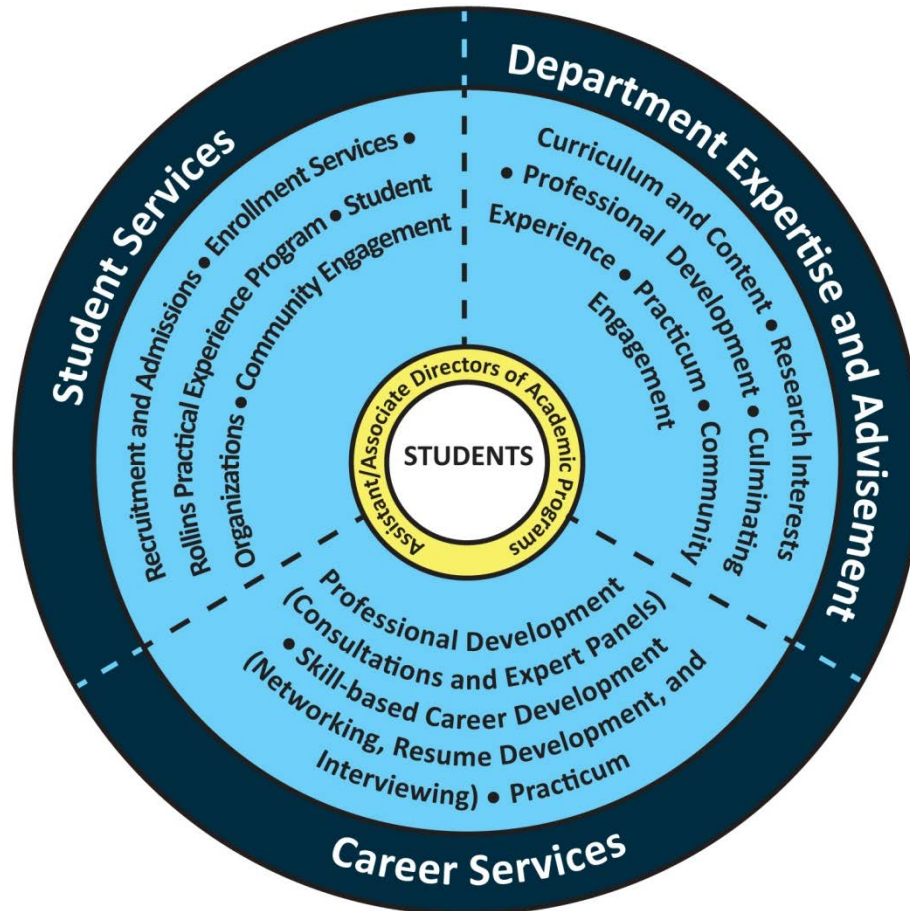
b. Description of the procedures by which students may communicate their concerns to school officials, including information about how these procedures are publicized and about the aggregate number of complaints submitted for each of the last three years.

Students have multiple platforms for communicating with the school and its officials.

Student Government Association (SGA)

The Student Government Association represents the interests of students. This organization allocates funds collected as a student activities fee to chartered student organizations. The SGA may also propose policies and procedures to the schools. Its president attends meetings of the school's Leadership Group where she or he may propose policies or programs and engage in discussions of related issues. Each department has a representative who is part of the executive committee of the SGA.

Communication opportunities facilitated by the SGA, include:

Input on Policy by Representation on School Committees: Students are represented on department and school committees and may provide input on the development of policies and procedures or other school functions through those avenues.

Lunches and Meetings with Senior Members of the School's Administrative Staff: The Student Government Association schedules lunches with the dean three or more times per semester. Any students may attend and the agenda is determined by those in attendance. Discussions involve the school or public health matters more generally.

The executive associate dean for administration and finance and department leads from Information Services, Career Services and Student Services meet with Student Government Association Executive Board and student departmental representatives to discuss operational and logistical matters once per semester.

The associate dean for admissions and student affairs meets monthly with the Student Government Association Executive Board to advise on student leadership strategies.

Communicating Student Grievances, Honor Code Appeals and Appeal of Grades
The document, *Clifton Notes for MPH/MSPH Students*, and the school catalog include information on academic policies and procedures and methods of communicating concerns to school authorities. There are various avenues or methods for communication.

Honor Code Appeal
The appeals process for an honor code decision is described in both the catalog and *Clifton Notes for MPH/MSPH* students. It is available on the web at:
http://www.sph.emory.edu/cms/current_students/enrollment_services/honor_code.html and
http://www.sph.emory.edu/cms/current_students/documents/Clifton_Notes_2011.pdf and in the resource room on site.

Appeal of Grades or Academic Evaluation
Procedures for appealing a course grade or other academic evaluation are included in the catalog and the *Clifton Notes for MPH/MSPH Students*. Students first present their concerns to the course instructor or project advisor and, if not satisfied with the response, may appeal to the department chair through the department's associate/assistant director for academic programs. The next step of appeal, if necessary, is the associate dean for academic affairs who may, in some cases, bring the case to the Academic Standards Committee for resolution. Included in this process are appeals related to academic exclusion (dismissal from school) following a period of probation.

Student Grievance Procedure
Procedures for submitting a complaint that are outside of the honor code or appeal of grades are included in the catalog and *Clifton Notes for MPH/MSPH Students*. Students should first present their concern to the assistant/associate director of academic programs (ADAPs) or other department official. The student may formally submit a complaint to the associate dean for admission and student affairs if not resolved satisfactorily within the department or if the complaint is outside the scope of the department.

Faculty and Staff
All faculty and staff are expected to be responsive to student concerns. Overseen by the executive associate dean for academic affairs, faculty members post office hours and are normally available through email communications. Student Services staff are expected to be regularly available to students.

Aggregate Complaints
Table 4.6b reports the number of Academic Appeals reaching the associate dean for academic affairs and number of Honor Code Appeals.

Table 4.6b: Student Appeals

Academic Year	Academic Appeals	Honor Code Appeals
2008 - 2009	0	2
2009 – 2010	1	0
2010 - 2011	1	1

c.   Information about student satisfaction with advising and career counseling services.

Overview of process for students to evaluate advising and career counseling services

Students evaluate support services in the school at the time of graduation through the exit survey, administered by the Office of Career Services. Findings are distributed to student services leaders, deans and department chairs who may use them as a guide to improving services and programs and measure the achievement of certain school objectives. Students are also surveyed 3, 6 and 11 months following graduation on their employment status and between 1 and 2 years following graduation to gather self-assessments of their competencies to practice and the training they received. Findings are shared with department chairs and school administrators.

Exit Survey findings
Table 4.6.c presents student evaluations of advising and career counseling in response to the school's exit survey over the past three years. (Advisement primarily pertains to assessment of the department ADAPs and career services but evaluations of other school support units are included.) Students generally agree the educational support units across the school have met their needs. Some students who did not utilize various school services, or were unaware of the offices providing those services, may have declined to agree with the statements on whether the various offices "met their needs."

Although students were generally pleased with the advisements received from the department ADAPs, they were less favorable about assistance from Career Services. The school realized that with increased enrollment, the Office of Career Services was inadequately staffed to meet rising demand and, over the past two years, added two FTEs and now have a set of advisors who predominantly hold MPH or MSPH degrees.

Table 4.6c: Proportion of Graduates Responding "Strongly Agree" or "Agree" on the Exit Survey

Event	2008 – 2009 N=210	2009 – 2010 N=209	2010 – 2011 N=252
The assistant/associate director for academic programs (ADAP) in my department provided me with effective support	84%	85%	85%
The ADAP in my department was available to meet my needs	85%	86%	87%
Student Services met my needs	64%	63%	77%
Enrollment Services met my needs	71%	60%	80%
Information Technology met my needs	70%	69%	77%
Career Services met my needs	55%	51%	57%*

*Analysis of the open ended question revealed scheduling difficulties as the most common reason for the dissatisfaction.

d. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths:
- The school offers students a clearly explained and accessible academic and career advising services.
- Student Services, Academic and Career Services units work collaboratively to support advisement and the student experience.
- Multiple channels exist for student communication of concern or satisfaction with school officials.
- Students are generally satisfied with the educational support units of the program.
- The school offers a large number and variety of career development activities to complement classroom instruction.

Lessons Learned:

- Due to the multiple ways in which students can receive academic and career advisement during their time at RSPH, the school decided to develop a student advisement model that outlines the location of each of these services. This model is posted in offices of student services, career services, and ADAPs.
- In response to student survey findings, the Office of Career Services created a Career Services Advisory Board of faculty to increase coordination feedback. In addition, to respond the increased requests for career advisement, including resume assistance and practicum placements, the office expanded and hired additional staff.