INSTRUCTIONS

For school:

1. This is the team's draft report based on the self-study and site visit. All of the text boxes are locked with the exception of the "School/program response" column.
2. Provide any substantive response to the team's findings in this column. While responses are not required for every criterion, you are encouraged to respond to non-compliant findings (i.e., partially met and not met).
3. Reference any supporting materials in your response in the applicable criterion, and include these materials as attachments to the email you will send to CEPH with your final response submission.
4. Factual corrections should not be submitted in this document; submit a separate document that lists any factual errors and provides corrections.
5. Submit your response to the team's draft report and supporting materials to submissions@ceph.org by the response deadline (communicated to you when you receive the draft report).
6. The Council will review the team's evidence, the school response, the final self-study, and supporting materials to make a final decision on each compliance finding. If applicable, the Council will provide its response in the last column of this report template.

Team's Draft Report

REVIEW FOR ACCREDITATION

OF THE

ROLLINS SCHOOL OF PUBLIC HEALTH

AT

EMORY UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
October 28-30, 2019

SITE VISIT TEAM:
LuAnn E. White, PhD, DABT – Chair
Dalana C. Johnson, MPH
Dennis L. Thombs, PhD, FAAHB
Patrick M. Vivier, MD, PhD

SITE VISIT COORDINATOR:
Mollie Mulvanity, MPH, CAE

CRITERIA:
Accreditation Criteria for Schools of Public Health & Public Health Programs, amended October 2016

Table of Contents

INTRODUCTION

Emory University was founded in 1836 as a private university affiliated with the United Methodist Church in Atlanta, GA. The university includes eight schools in addition to the Rollins School of Public Health (RSPH): Emory College of Arts and Sciences (undergraduate division), Oxford College (two-year undergraduate unit in Oxford, Georgia), James T. Laney School of Graduate Studies (LGS), Emory School of Medicine, Nell Hodgson Woodruff School of Nursing, Goizueta Business School, Emory School of Law, and Candler School of Theology. The university offers more than 30 degree programs from the associate's to doctoral levels and currently enrolls approximately 8,000 undergraduate students and over 6,000 graduate and professional students. The Southern Association of Colleges and Schools Commission on Colleges accredits the university, and Emory also holds accreditation from specialized accrediting agencies in fields including medicine, law, pharmacy, midwifery, physical therapy, theology, and teacher education.

The university has offered graduate public health degrees since 1975, and the university moved public health to its current status as a school in 1990. RSPH is located next door to the Centers for Disease Control and Prevention and has maintained strong linkages with CDC throughout its existence. The school includes six departments and the Executive MPH (EMPH) Program, which operates outside of the departmental structure, as well as 22 interdisciplinary centers. The school has nearly doubled in faculty size since 2000, currently employing approximately 200 full-time faculty, most of whom have some teaching responsibilities. The school places a strong priority on research, and extramurally-funded research has grown each year, currently averaging approximately $1 million per tenured or tenure-track faculty member. The school also has an endowment of over $100 million and has been expanding its physical space, including current planning to break ground on a new building in 2020.

The RSPH currently enrolls approximately 1,200 master's students; the vast majority (over 900) are enrolled in the campus-based MPH program, which offers 13 concentration areas. Approximately 150 students are enrolled in the school's EMPH program, which is offered in three concentrations, and over 100 are enrolled in the professional MSPH programs, which are offered in six concentration areas (one is currently dormant). The school enrolls approximately 600 new master's students each year, approximately 20% of whom are from outside the US. The RSPH currently enrolls approximately 180 PhD students in its six doctoral programs of study.

The unit has held CEPH accreditation since 1978, first as a program, then later as a school. The last accreditation review was in 2012 and resulted in an accreditation term of seven years with no interim reporting required. The school has completed interim reporting, based on annual report submissions, in 2014, 2015, and 2016. The Council accepted all interim reports.

Instructional Matrix - Degrees and Concentrations						
Master's Degrees	**Academic**	**Professional**	**Categorized as public health**	**Campus based**	**Executive**	**Distance based**
Behavioral Sciences & Health Education		MPH	X	MPH		
Biostatistics		MPH, MSPH	X	MPH, MSPH		
Public Health Informatics*		MSPH	X	MSPH		
Environmental Health		MPH	X	MPH		
Epidemiology		MPH, MSPH	X	MPH, MSPH		
Health Policy		MPH	X	MPH		
Health Care Management		MPH	X	MPH		
Health Services Research		MSPH	X	MSPH		
Global Health – Accelerated Program		MPH	X	MPH		
Global Health – Infectious Disease		MPH	X	MPH		
Global Health – Sexual Health, Reproductive Health, and Population Studies		MPH	X	MPH		
Global Health – Public Health Nutrition		MPH	X	MPH		
Global Health – Community Health and Development		MPH	X	MPH		
Applied Epidemiology		MPH	X		MPH	MPH
Applied Public Health Informatics		MPH	X		MPH	MPH
Prevention Science		MPH	X		MPH	MPH
Global Environmental Health		MPH	X	MPH		
Environmental Health and Epidemiology		MSPH	X	MSPH		
Global Epidemiology		MPH, MSPH	X	MPH, MSPH		
Doctoral Degrees	**Academic**	**Professional**				
Behavioral Sciences and Health Education	PhD		X	PhD		
Biostatistics	PhD		X	PhD		
Environmental Health Sciences	PhD		X	PhD		
Epidemiology	PhD		X	PhD		
Health Services Research and Health Policy	PhD		X	PhD		
Nutrition and Health Sciences	PhD		X	PhD		
Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)	**Academic**	**Professional**				

2nd Degree Area	Public Health Concentration						
Bioethics	Existing MPH			X	MPH-MA		
Business	Existing MPH			X	MPH-MBA		
Physician Assistant Program	Existing MPH			X	MPH-MMSC		
Physical Therapy Program	Existing MPH			X	MPH-DPT		
Nursing	Existing MPH			X	MPH-MSN		
Law	Existing MPH			X	MPH-JD MPH-JM		
Theology	Existing MPH			X	MPH-MTS MPH-MDiv		
PhD – Laney Graduate School	Existing MPH			X	MPH-PhD		
X*** - External Professional Degree	Existing MPH			X	MPH-X***		
Biostatistics bachelor's	Biostatistics			X	MSPH-BS MSPH-BA		
Environmental Health bachelor's	Environmental Health			X	MPH-BS		

* The Master of Science in Public Health-Public Health Informatics has been temporarily suspended for the incoming cohort 2019-2020 and will resume in fall 2020.

**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.

***Students enrolled in accredited professional schools other than Emory, including Medicine, Nursing, Law, Social Work, Veterinary Medicine, Osteopathy, Pharmacy, and Dentistry obtain an MPH in addition to their professional degree.

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Designates appropriate committees or individuals for decision making, implementation		The RSPH is led by a dean who oversees the academic, financial, and administrative functions of the school. The school has two major governing bodies that advise the dean: the Administrative Group (dean, executive associate and assistant deans) and the Leadership Group (department chairs, executive associate and assistant deans, executive MPH program director, and representatives of the Faculty Council, Rollins Student Government Association, and Doctoral Student Advisory Board. RSPH has a decentralized governance structure, with many functions vested in departments, e.g., curriculum development and initiation of faculty review for promotion and tenure. These recommendations flow up to school committees for review and then to the dean for final decisions. Seven committees share governance and advise the Leadership Group: • Faculty Council – assesses and recommends policies on professional life of faculty • Rollins Student Government Association – represents the interests of and recommends policies for Rollins MPH/MSPH students • Doctoral Student Advisory Board – represents doctoral students and promotes communications with school leaders	Click here to enter text.	
Faculty have opportunities for input in all of the following: • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities				
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program				

		• Appointments, Promotion and Tenure Committee (APT) – advises the deans on the merits of faculty promotion and tenure and appointment of faculty with tenure; assesses and recommends policies and procedures for faculty appointments and promotion • Education Committee – reviews and approves new course and academic programs at the master's level; assesses and recommends policies and procedures pertaining to student academic matters • Research Advisory Committee – assesses and recommends actions on policies for research activities, support, administration, collaboration and interdisciplinary research • Community and Diversity Committee – assesses the state of diversity and inclusion and recommends policies and procedures to strengthen the school's diversity and inclusion Other committees include the Academic Standards Committee, which hears appeals by student on decisions on dismissal and the Ad Hoc Honor/Conduct Committee, which considers allegations of conduct code violations Boards and Council with external stakeholders include the Dean's Council, which generates visibility of the school in the community and identifies resources to advance the school; the RSPH Alumni Association, which engages in activities to advance the school; and the Community Advisory Board, which shares observations on performance or recent school graduates, among other functions. Oversight of the MPH/MSPH curriculum and degree requirements is performed by the executive associate and		

		assistant deans for academic affairs. Departments establish degree requirements, and the Education Committee monitors the core curriculum. Doctoral degrees are awarded by the Laney Graduate School, and the PhD program requirements are determined by the departments. The Executive Council of the Laney Graduate School and RSPH, together, establish policy, review curricula, and evaluate PhD programs. Faculty in departments design the curriculum for MPH, MSPH, and PhD programs, and departmental curriculum committees review new courses or revisions in academic courses or programs. The departments periodically review the curricula for updates. The Education Committee reviews new courses or significant changes in MPH or MSPH curricula. The Laney Graduate School reviews and approves curriculum changes to doctoral programs. Faculty determine methods of assessments and grading rubrics for courses. The Education Committee determines academic standards, policies and processes for the MPH and MPSH. Doctoral programs establish policies and processes consistent by the Laney Graduate School, and the school's doctoral policies and processes are overseen by the Laney School's Executive Council, which includes RSPH representatives. The RSPH Leadership Group establishes admissions policies. The associate dean for admissions and student affairs and assistant dean for enrollment management and communications manage the recruitment and admission process. Doctoral admission decisions are made by program faculty, overseen by Laney Graduate School.		

		Doctoral student admission targets are negotiated between the school and the Laney Graduate School. Departments, with the permission of the dean, recruit faculty members. Tenured members of academic departments initially review and recommend faculty for promotion and tenure. The recommendations are sent to the dean who, if he approves, forwards to the provost through the executive vice president for health affairs. The APT committee advises the dean on the merits of faculty promotion and tenure and for faculty appointments with tenure. The associate dean for research facilitates and enhances the school's research programs by increasing faculty opportunities and capacities. The Research Advisory Committee assesses and recommends action on research policies and activities. The associate dean for public health practice oversees public health practice programs and service to the community and workforce. During discussions with RSPH faculty, they indicated that they routinely collaborate with faculty and schools across the university and serve on university-wide committees. Several RSPH faculty hold leadership roles on university committees. Changes in policies and procedures often arise from proposals from the faculty, which move through the necessary higher levels of approval as required. During the site visit, school leaders provided an example in which a group of clinical research track (CRT) faculty identified issues to improve the environment for those in their track. One of the changes made was to provide funds for		

		professional development for those in the CRT track, as well as the tenure track. The decentralized approach to decision making and change seems to work for the school, and faculty and staff cited the school's long-term dean's efforts to foster collaborative relationships and the highly qualified team of associate deans who keep abreast of issues in the school. Faculty, staff, and students said that the dean and administrators are extremely responsive to faculty and student petitions. Faculty regularly work together across departments and appointment tracks on issues and committees and have collegial relationships. Faculty from different departments consistently serve on thesis and dissertation committees and on departmental and school committees. Events such as the public health grand rounds and annual faculty retreat foster faculty interactions. New adjunct faculty teaching for the first time are assigned a departmental faculty member to orient and oversee their classroom performance. Faculty report that departments have robust mechanisms to support adjunct faculty and to involve them in faculty development and other teaching support services, e.g., instructional design, if they desire. A part-time faculty member serves on the Faculty Council and brings forward any issues regarding this group.		

A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have formal methods to participate in policy making & decision making		Students are represented throughout department and RSPH-wide committees. Student participation in committees at all relevant levels ensures that students have a formal process to participate in policy making and decision making. Students were involved in the preparation of the self-study through active membership in working group meetings that included faculty, alumni, and other stakeholders. Two students are members of honor code panels, and these panels always include students from different areas than the area of the student under review. Students are also involved in a monthly informal interaction with SPH dean. Groups of 10-12 students have lunch with the dean to discuss topics defined by the students attending the meeting. In addition, students are involved in the Dean's Council meetings whenever relevant topics are discussed. Students also shared details	Click here to enter text.	
Students engaged as members on decision-making bodies, where appropriate				

		about their participation on the dean's search team and regularly contributing to the hiring process by participating in interviews and providing their feedback on candidates. The Rollins Student Government Association (RSGA) is the governing body for students, and the RSGA president has a position on the SPH's Leadership Group. Over the past five years, students have chartered several new organizations to address the diverse needs of the student population.		

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Operates at highest level of organizational status & independence		The dean of the RSPH reports to both the executive vice president for health affairs and the university provost. The dean regularly meets with both. The reporting lines parallel those of the deans of medicine and nursing, the two other schools that constitute Emory's health sciences center. The school's autonomy is equivalent to that of all other Emory schools and colleges. Reviewers confirmed this autonomy and organizational structure during their meeting with the university president.	Click here to enter text.	

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Offers professional public health master's degree in at least three distinct concentrations		The school offers MPH degrees in 16 concentration areas and public health doctoral degrees in six concentration areas.	Click here to enter text.	
Offers public health doctoral degree programs in at least two distinct concentrations				

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a vision, mission statement, goals, statement of values		The self-study lists the school's mission, vision and goals. *RSPH Mission Statement:* The Rollins School of Public Health of Emory University impacts health and well-being through excellence in teaching, research, and the application of knowledge in partnership with domestic and global communities. *RSPH Vision Statement:* Ethically engage with domestic and global communities to achieve optimal population health, quality of life, and social justice.	Click here to enter text.	
Taken as a whole, guiding statements address instruction, scholarship, service				
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success				

Guiding statements reflect aspirations & respond to needs of intended service area(s)		*RSPH Values:* • Innovative scholarship that advances health and well-being • Cultural humility and inquiry-driven practice • Ethical engagement with domestic and global communities In addition to the mission, values and goals in the self-study, the ERF included the 2017-2022 strategic plan which provides more detailed statements and context for the mission, values, vision and goals. The strategic plan also defines indicators by which to measure progress toward a set of 22 measurable objectives. The strategic plan was created from input from faculty, staff, students, community partners, alumni, and other stakeholders, including iterative reviews as the plan was developed. The strategic plan outlines several goals with steps to achieve them. The strategic plan provides a framework for the school's goals and aspirations with measurable goals and objectives. The self-study lists four broad goals targeting education, research, service, and inclusion. *RSPH Goals:* Goal I: Educate individuals to become skilled professionals to advance the health and well- being of all communities Goal 2: Discover, disseminate, and apply public health science Goal 3: Build capacity for public health practice Goal 4: Sustain an inclusive, diverse academic community that fosters excellence in instruction,		
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes				

		research, and public health practice The most distinctive of the guiding statements presented in the self-study is the goal for inclusion and a diverse academic community, which is well integrated in actions and policies throughout the school's operations. The other goals listed in the self-study are quite broad as presented but are more informative when read in the fuller context of the strategic plan. The strategic plan provides sufficient guidance for leading the school, allocating resources, and guiding decision making.		

B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		The self-study presents graduation rate data for the MPH and MSPH degrees based on a maximum allowable time of five years to graduation and data for the PhD based on eight years to graduation. Based on these maximum allowable times, the school demonstrates 98% MPH graduation, 94% MSPH graduation, and 91% PhD graduation. Data on progression demonstrate consistency and stability in graduation rates over time. Cohorts of MPH and MSPH students surpass this criterion's threshold by the two-year mark, with 85% or more of each MPH cohort graduating within two years, despite the allowance of up to three additional years to complete the program of study. Similarly, data for PhD students indicate that most cohorts surpass this criterion's threshold by the fifth year of study,	Click here to enter text.	
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees				

		with three additional years allowed. Doctoral progression data indicates that students appear to be hitting appropriate milestones, with 38 students advanced to candidacy in the most recent academic year.		

B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The percentage of graduates who were either employed or were in continuing training exceeded the defined threshold of 80% each year across all degree programs For the MPH degree, the percentage of graduates who were employed or were continuing education training was 87% (81% employed, 6% in additional training) in 2016, 85% (78% employed, 7% in additional training) in 2017, and 82% (75% employed, 7% in additional training) in 2018. For the MSPH degree, the percentage of students who were employed or were continuing education training is 97% (74% employed, 23% in additional training) in 2016, 90% (64% employed, 26% in additional training) in 2017 and 90% (74% employed, 16% in additional training) in 2018. For the PhD degree, the percentage of students who were employed or were continuing education training is 100% (74% employed, 26% in training) in 2016, 100% (80% employed, 20% in training) in 2017, and 88% (74% employed, 14% in training) in 2018.	Click here to enter text.	
Chooses methods explicitly designed to minimize number of students with unknown outcomes				
Achieves rates of at least 80% employment or enrollment in further education for each public health degree				

		The school has a sophisticated online platform in place for collecting post-graduation status data from the graduates of master's programs. This system was implemented in 2018, replacing an in-house online platform. The system includes automated reminders until the graduate responds. The results are impressive, with very few graduates remaining in the unknown category. Of the 1,456 graduates of the MPH program included in the reporting period, only 17 were in the unknown category. Of the 117 graduates of the MSPH program, only one was in the unknown category. The post-graduation data for doctoral students is collected by a combination of self-report of graduates and information obtained from dissertation advisors. The school plans to expand the online platform to include graduates of the doctoral programs. This will be done to supplement rather than replace the existing approach, which has been very effective, with only four of the 88 doctoral graduates in the unknown category during the reporting years. During the site visit, students, alumni, and community partners highlighted the strength of career services, networking opportunities, and professional development. This not only included structured mentoring and career preparation but also a clothing swap to be sure that students have appropriate professional clothing for interviews.		

B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		The school collects data annually from students who graduated three and five years earlier. The Office of Career Development (OCD) sends an electronic survey. The survey solicits information including current city of residence, and employment status or status of additional education, as well as detailed questions about students' preparation and perceptions of workforce needs. The most recent survey available for review at the time of the self-study was administered in fall 2018 and received 225 responses, which were fairly evenly split from 2013 and 2015 graduates. While the 225 responses constitute only a 24% response rate, they provide a sufficiently rich and robust data source. The survey asks students whether their coursework provided them with the competencies and skills for working in public health, and 87% strongly agreed or agreed that they were prepared. The survey lists the 10 competencies that were in place at the time of these students' enrollment and asks students whether they attained and were able to apply each. Students gave the highest scores for attainment and application to the competencies related to ethics and lifelong learning and the lowest scores to global issues and epidemiology, though all scores were above 3.5 on a five-point Likert	Click here to enter text.	
Documents & regularly examines its methodology & outcomes to ensure useful data				
Data address alumni perceptions of success in achieving competencies				
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements				

		scale, indicating strong agreement that students were prepared and ready to apply the skills. The survey asks students to answer the question “What skills prepared you for the job you currently have?” This question is framed as distinct from questions associated with their competency sets. Choices include proposal and grant writing, data management, public speaking, and quantitative and qualitative data collection and analysis, among other areas. The highest scores were for quantitative data analysis, teamwork, data management, research, and project management. The survey lists the eight competency domains presented in the current accreditation curricula, which correspond to the current curriculum, rather than the curriculum these students completed. The survey asks students how important they perceive each of the eight domains to be for job readiness in public health. Responses indicate that graduates perceive all domains as important, with scores above 4.2 on a five-point Likert scale. The highest (i.e., perceived as most important) domain was communication, and the lowest-scoring domain was policy. In response to an open-ended question about additional skills graduates would have appreciated, responses addressed an array of areas, though many focused on program or project management and applied or skill-based opportunities. The survey provides ample opportunities for open-ended responses. Faculty and staff noted that data from the survey has already informed both schoolwide and departmental retreats.		

		OCD staff review and update the survey regularly, as evidenced in the recent survey, which straddles the transition between the school's old and current MPH curricula. Staff are attentive to survey design and strive to increase the amount of useful information available for analysis. In addition to the substantial findings from the OCD survey, most departments and degree programs also collect data regularly from alumni in less structured, more flexible ways that provide access to just-in-time information when curricular changes are being considered or for other reasons. Faculty provided a number of specific examples of discipline-specific insights that they had gained from discussions with alumni.		

B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success		The self-study document presents a number of key measures for each goal: Goal 1: Educate individuals to become skilled professionals – the measures include the proportion of students graduating within three years; employment rates of recent	Click here to enter text.	

Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined responsible parties & cycles for review		master's and doctoral graduates; and alumni self-assessments of competencies achieved. Goal 2: Discover, disseminate and apply public health science – the measures include amount and increase in federal sponsored awards; amount and increase of foundation and non-federal awards; total/per capita faculty publications; mean h-index for faculty by rank; and percent of faculty participation in consultation and service. Goal 3: Build capacity for public heath practice – the measures include number of alumni and positions; number of continuing education programs and enrolled students; mean number of hours student engage in APE experiences; and number of partnerships with outside agencies to support APE. Goal 4: Sustain an inclusive, diverse academic community – the measures include the proportion of faculty by gender and racial/ethnic background; faculty satisfaction with work environment; proportion of students by racial/ethnic background; and mean scores on course evaluation reflecting student perceptions of classroom climate. The indicators, while independent of each other, align with the mission and goals, and provide a range of information about the goals. Data on indicators are compiled into separate reports that can be used for assessment by the respective committees or administrative offices. The goals and indicators provide data for a variety of uses. Although it was difficult to discern a systematic evaluation plan from the		

		documentation in the self-study, RSPH seems to function in well-organized and reflective ways making use of available data. In addition to the measures in the self-study, the dashboard in the ERF contains a table with measurable indicators for teaching research and service. The dashboard measures track trends and are regularly used by the dean, associate deans, and department chairs. Many of the evaluation measures listed in the self-study are process-oriented, and the data dashboard provides a useful supplement. Following the change in CEPH accreditation criteria in 2016, the faculty conducted an extensive curriculum review and identified places in the curriculum where the new competencies were addressed or the course could be updated to include a competency. It is too soon to see the impact of these changes on student success, but the discussions with faculty and students indicate that the updates and revisions took place with substantial input from faculty, alumni and other external stakeholders and that the school has measures in place to track progress and course correct when needed. The minutes and reports in the ERF were consistent with the descriptions in the self- study, documenting processes to review and discuss evaluation data.		

B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		Many of the changes result from issues initially identified by faculty or students at the program or department level. Faculty and students provided several examples of issues they noted and solutions they proposed to school administrators. The administration has been receptive and responsive to proposals, including adopting solutions proposed at more "grassroots" levels. The school has demonstrated it is willing to change when issues arise. The executive associate and assistant deans for academic affairs compile the evaluation data needed to create the dashboard. The process for translating evaluation findings into programmatic plans and changes occurs in the school's standing committees or administrative offices. The self-study and site visit elicited a number of examples of using evaluation findings. Examples of findings and actions include changes in specific practices and tactics to guide recruitment of underrepresented minority applicants for the MPH and doctoral programs, which were based on a review of longitudinal data on inquiries, recruitment, admissions, and enrollment. Additionally, the school has made a number of changes in its support for and policies relating to CRT faculty; these changes arose directly from data indicating concerns from faculty in this appointment track. Finally, the school has instituted a series of approaches to respond to student feedback relating to class size in MPH core classes. The school continues to evaluate the effectiveness of these	Click here to enter text.	
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)				

		interventions, which include adding online sections of core courses as an option for on-campus students, integrating new pedagogical techniques in larger classes to foster engagement, and hiring additional teaching assistants.		

C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		The school has adequate resources to carry out its mission, fulfill its goals, and sustain its degree offerings. In 2018-19, the school's total budget was $158,552,636, with expenses of $150,707,494. The school generates revenue from four primary sources: tuition from MPH/MSPH enrollment; indirect cost recovery from grants and contracts; endowment and gift funds and discretionary funds held for faculty; and other university support. In recent years, the school's budget has grown considerably, primarily because of substantial increases in tuition and fees, grants/contracts, endowment payout, and gifts. All MPH and MSPH tuition flows directly to the school. All indirect cost charges also flow to the school. However, the university extracts funds from the school's budget to cover facility and central administrative costs. The budgets of academic departments within the school are based on the amount of MPH and MSPH tuition and indirect costs produced by the unit. The Laney Graduate School enrolls RSPH students in the university's doctoral programs. Doctoral students do not pay tuition. For the first two years of the program, new	Click here to enter text.	
Financial support appears sufficiently stable at time of site visit				

		doctoral students receive an annual stipend; the 2019-20 stipend amount was $31,000. The RSPH shares the cost of stipends with the graduate school. For subsequent years of study, student support may come from research grants, dissertation awards, internal fellowships, teaching, and departmental funds. The salaries of tenure-track faculty are guaranteed for the first two to three years of their appointments. Subsequently, these faculty members are expected to cover two-thirds of their annual salary through external research or service funding. Tenured faculty are also expected to cover two-thirds of their salary through externally-sponsored research. In most cases, the salaries of CRT faculty are covered through externally-funded research projects as well. The salaries of CRT faculty are not guaranteed and will depend upon their appointment length and available funds. The annual effort of this latter group of faculty could be reduced if funds are not available. All new faculty searches require permission from the dean's office. A business plan explaining how the new faculty member will be supported is required. In many cases, support for additional faculty members is associated with the hiring of new department chairs who negotiate startup packages. When tenure-track searches are conducted, the school submits a strategic hiring plan for approval from the Provost's Office. Funding for operational costs, student support, and faculty development are paid for by the four primary sources of revenue identified above. For example, endowment funds pay for student merit scholarships and the Global Field		

		Experience Financial Award. Departments provide faculty members with $1,000 toward their professional development (e.g., travel funds) each year. All indirect cost expenditures return to the school. Some of these funds are used to pay for research administration costs within the school. Taken together, departments in the school receive about 20% of the indirect cost expenditures received by the school. Distribution of these funds to specific departments is based on the proportion generated by each department's faculty. Departmental administration costs are covered by these funds. There is no school-wide policy for distribution of indirect cost recovery to faculty. Department chairs have discretion in how these funds are distributed to faculty principal investigators. Distribution may involve negotiation between the chair and a faculty member.		

C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
School employs at least 21 PIF; or program employs at least 3 PIF		The self-study documents 173 primary instructional faculty and provides evidence of at least three PIF for concentration areas with one degree level and four PIF for concentration areas that offer master's and doctoral degrees. No double-counting of PIF across concentrations is necessary, as the school has more qualified faculty than required for each of the 21 concentration areas depicted	Click here to enter text.	
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable				

Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable		in the school's instructional matrix. The self-study also documents 124 individuals who have regular instructional responsibility but do not meet this criterion's definition of PIF. FTE allocations for the non-PIF are calculated consistently based on human resources records. Faculty support a current student population of approximately 1,200 master's students and 180 doctoral students. Data indicate that advising loads are generally low, allowing for ample student access. The average ratio for general and career advising is 7:1 at the master's level and 2:1 at the doctoral level. Ratios do vary based on program-specific issues. For example, all EMPH students in a given concentration are assigned to the same individual, so the faculty advisor for the prevention sciences EMPH has an advising load of 106 students. As discussed in Criterion H1, these variable advising practices appear to be effective, and EMPH students, including those who met with site visitors, report high satisfaction with the level of support from their advisors. In addition to the faculty advisors assigned to all students, students also receive advising support from professional staff: each department and the EMPH program have one to two academic staff members dedicated to master's students and one supporting doctoral students. Similar trends hold for advising ratios for MPH students in their integrative learning experiences. The average is 5:1, with a maximum of 41 students supervised. The 41-student experience is a capstone course; all students in that course receive additional advising for their theses		
Ratios for general advising & career counseling are appropriate for degree level & type				
Ratios for MPH ILE are appropriate for degree level & nature of assignment				
Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable				
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable				
Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)				
Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities)				

		from an assigned faculty member. The average ratio for PhD dissertation supervision is 1:1. The school presents exit survey data from 2019 graduates to document student perceptions of class size and its relationship to quality of learning, as well as perceptions of faculty availability. Eighty-five percent of graduates agreed or strongly agreed that class size was conducive to learning, and 92% of students agreed or strongly agreed that faculty provided adequate support and were available. Open-ended comments in the exit survey document both negative and positive perceptions of faculty availability. A number of respondents indicated that class sizes were too large, particularly for MPH core classes, or that the MPH as a whole enrolled too many students for the school's existing resources. They cited possible strains on physical infrastructure (classrooms not big enough) and community connections (internship availability). Other respondents praised faculty members' willingness to support, engage with, and mentor students. The self-study notes that the school has taken a number of steps to reduce class size, including offering additional sections and offering core courses online as well as on campus. Data from fall 2019 indicate the largest class sections for the foundational classes in epidemiology (maximum section size of 169), biostatistics (maximum section size of 180), and environmental health (maximum section size of 212). Faculty, students, and alumni discussed what they perceive as successful strategies to ensure quality instruction in these larger classes. Examples include breaking students into stable, small groups with whom they work all semester for problem-solving and discussion in class and using clickers to keep students		

		engaged, among others. The epidemiology and biostatistics classes break into lab sections, with each led by a doctoral student and an advanced master's student teaching assistant, and other classes have breakout discussion sections weekly, with a similar structure. The school conducts midpoint and final course evaluations to monitor student perceptions of instructional effectiveness, and these large courses often receive similar ratings to the school's 25-person courses. During the site visit, school leaders spoke candidly of MPH class size as an ongoing area for attention. Adding online sections of foundational classes continues to be a major initiative. School leaders deliberately capped the class size for the initial online foundational course offerings to ensure that both faculty and students had adequate instructional and technical support for the new offerings. They plan to scale up the online offerings in the future, which will create additional capacity and reduce pressure on the campus-based classes.		

C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals		The school has 417 staff members who fully support all operations. In addition, the school employs 450 to 500 graduate students as teaching and research assistants each year. A number of operations such as research administration and services, career advising, and IT support are carried out by staff within the school. School faculty, staff, and students also rely on staff resources	Click here to enter text.	
Staff & other personnel resources appear sufficiently stable				

		outside the school, offered by the university, such as library services. The staff is a clear school strength. Retention rates of the school's staff are good, and the school benefits from stability and expertise accumulated over time. The number of staff supporting faculty has grown considerably in recent years because of the growth in funded research activity. Overall, the staff allow the school to fulfill its stated mission and goals.		

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		Currently, the SPH has adequate physical space to support student needs and the school's mission. The SPH has increased total physical space since 2010 across two buildings. Full-time faculty have private offices, and some part-time faculty share office space. Faculty and staff also have access to laboratories as necessary for work responsibilities. In addition, RSPH staff have access to office space in private, open, or hoteling space depending on whether or not the staff use weekly teleworking options as implemented in several working units. In addition, the SPH provides five additional off-site spaces for research staff. Since 2010, the SPH has significantly increased classroom and conference space. There are 19 classrooms that accommodate from 12-125 students and two auditoriums.	Click here to enter text.	
Physical resources appear sufficiently stable				

		Both buildings used by the SPH offer shared spaces for students to access 24 hours a day with security card access. Students have access to small group study rooms, a video conference room, quiet study rooms, and impromptu study and meeting space. Students also have access to 60 computers for RSPH students. Faculty and students also have dramatically increased access to laboratory research facilities in recent years. There are over 180 workstations, large fume hoods, instrumentation rooms, tissue culture rooms, and gas, electrical, and other services for laboratories. The RSPH also has cold and warm room storage facilities. Although large class size is an ongoing challenge for the program and some students complain about class size for certain classes, student interviews during the site visit indicated that large classes are not a problem. The RSPH has plans to add a third building to increase the space available for current students and projected growth.		

C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources , including personnel, for students & faculty		The university provides an extensive array of tools for teaching, research, and professional training. Most of these tools are available to faculty, staff and students. For	Click here to enter text.	

Adequate IT resources, including tech assistance for students & faculty		example, the course reserves system allows faculty members to place course materials online or have them available as print copies in the library. Online course materials are available via Canvas, the university's learning management system. The Emory Center for Digital Scholarship supports students, faculty, and staff in the development of digital projects and publications. Other electronic resources are available through the discoverE and eJournal systems. Students and faculty can request technical assistance through Service Now – a ticket system for securing help with computer resources. The school has a telephone service and a "walk-up" service area to speak with a technician. The school IT unit supports 24/7 emergency response services. Classroom and AV systems are fully supported. Library resources are extensive and provide a broad array of capabilities and services to support students, faculty, and staff. Within the school, IT staff have significant funding to provide many school-wide software licenses and base technology resources for students, faculty, and staff. Faculty and students who met with site visitors believe that IT resources are adequate for supporting the school and its educational programs.		
Library & IT resources appear sufficiently stable				

D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		Students in the MPH and MSPH programs complete courses designed to cover the foundational public health knowledge areas. The course sequence is different for students in the on-campus programs versus students in the EMPH. A common component is that students in both the on-campus and EMPH programs gain four foundational knowledge areas (1, 2, 4 and 5) from the same online Introduction to Public Health Course (PUBH 500). All students must complete PUBH 500 prior to the first semester so they have this grounding prior to subsequent coursework. Grounding in the eight remaining foundational knowledge areas occurs through a series of core courses aligned with traditional public health disciplines. For the on-campus programs, there are course options for each foundational knowledge area. One is required for students majoring in that area. The other two options are for students not majoring in that area, including an in-person and an online course option. For the EMPH programs, all students complete the same courses to satisfy the foundational knowledge requirements. There is flexibility in when students complete the remaining foundational knowledge courses. The school is currently evaluating the scheduling and sequencing of the core courses to identify potential areas for better alignment. A review of the course syllabi, supplemented by a discussion with core course faculty, provided evidence to confirm didactic coverage of the learning objectives for all	Click here to enter text.	

		of the foundational knowledge areas. The D1 worksheet presents reviewers' findings.		

D1 Worksheet

Foundational Knowledge	**Yes/CNV**
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		This criterion is met. The school addresses the foundational competencies for MPH and MSPH students through a series of six required two-credit classes and two required zero-credit classes. These include courses in biostatistics, epidemiology, health systems, social and behavioral science, environmental health, global health, and interprofessional skills, and an introduction to public health course. Students concentrating in each disciplinary area take a more advanced class in their home concentration than the introductory class completed by other students. The EMPH concentrations have their own set of required courses that are distinct from the on-campus concentrations. Site visitors reviewed self-study documentation and associated syllabi and validated that all students are assessed on each of the 22 foundational competencies, as noted in the D2 worksheet.	Click here to enter text.	

D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to the breadth of settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	Yes
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes
4. Interpret results of data analysis for public health research, policy or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & societal levels	Yes
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design or implementation of public health policies or programs	Yes
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	Yes
11. Select methods to evaluate public health programs	Yes
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics & evidence	Yes
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply principles of leadership, governance & management, which include creating a vision, empowering others, fostering collaboration & guiding decision making	Yes
17. Apply negotiation & mediation skills to address organizational or community challenges	Yes
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	Yes
21. Perform effectively on interprofessional teams	Yes
22. Apply systems thinking tools to a public health issue	Yes

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		This criterion is met. Each of the MPH and MSPH concentrations, including those that cross departments and disciplines, has a well-defined set of competencies. Some disciplinary areas, such as the informatics degrees, draw on published professional competency sets, but most have been developed and refined by the school's faculty and staff. In many cases, the school defines more than the minimum of five required competencies for a concentration area to acknowledge and accommodate overlap between concentration areas in the name of interdisciplinarity. Therefore, site visitors validated the formulation of each competency set holistically, ensuring appropriate distinction between concentrations and definition in each concentration area, while noting areas of overlap. Site visitors also validated appropriate assessment activities for all competencies, as presented in the D4 worksheet.	Click here to enter text.	
Assesses all students at least once on their ability to demonstrate each concentration competency				
If applicable, covers & assesses defined competencies for a specific credential (eg, CHES, MCHES)	NA			

		During the site visit, faculty spoke of the iterative processes undertaken during the self-study process to define competencies and assessments. Students who met with site visitors were uniformly familiar with competencies. They noted that competencies are consistently presented on syllabi, and many students noted that faculty highlight competencies again during class sessions. One student noted that she finds the competency framework useful, as it allows her to succinctly articulate her knowledge and skills and prepares her for job interviews with examples of work she has produced that demonstrates her skills and abilities.		

D4 Worksheet

MPH in Behavioral Sciences and Health Education (BSHE) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
1. Analyze public health history for perspective on current health problems.	Yes	Yes
2. Apply the socioecological framework or other theories to examine public health research.	Yes	Yes
3. Select study designs to plan health promotion research.	Yes	Yes
4. Select valid and reliable instruments to measure variables in public health research.	Yes	Yes
5. Synthesize a range of multidisciplinary scientific literature to generate a research question.	Yes	Yes
6. Use behavioral and social science theories to guide data analysis that examines health outcomes for specific populations.	Yes	Yes
7. Engage stakeholders to inform a community assessment or evaluation.	Yes	Yes
8. Apply qualitative or quantitative methods in public health research or practice.	Yes	Yes
9. Implement an evaluation plan to assess public health programs.	Yes	Yes
10. Describe ethical principles relevant to public health research or practice.	Yes	Yes

MPH in Biostatistics and Bioinformatics (BIOS) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
1. Identify statistical issues in contemporary public health problems.	Yes	Yes
2. Perform power and sample size calculations to assist in the design of clinical or observational studies.	Yes	Yes
3. Use statistical software for advanced data management.	Yes	Yes
4. Analyze continuous data using linear regression models and discrete data using generalized linear models.	Yes	Yes
5. Analyze right-censored data with time-to-event regression models.	Yes	Yes
6. Analyze correlated data (longitudinal and multilevel) using mixed effect and marginal models.	Yes	Yes
7. Explain fundamental concepts of probability and inference used in statistical methodology.	Yes	Yes

MSPH in Biostatistics and Bioinformatics (BIOS) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Six shared MPH Biostatistics and Bioinformatics competencies (#1-6), plus the following:		
1. Assess the impacts of assumptions in advanced statistical analysis using probability and statistical theory.	Yes	Yes
2. Apply concepts in probability and statistical theory to define performance or extend basic statistical analysis techniques.	Yes	Yes
3. Assess technical accuracy and performance of advanced analytic methods.	Yes	Yes

MPH in Environmental Health (EH) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Explain major environmental risks to human health ranging from the local to global scale.	Yes	Yes
2. Apply the principles of exposure science to characterize environmental exposures.	Yes	Yes
3. Describe how the principles of toxicology can be used to assess health effects of environmental exposure.	Yes	Yes
4. Apply the principles of epidemiology to assess health effects of environmental exposures.	Yes	Yes
5. Explain major policy issues in environmental health.	Yes	Yes
6. Evaluate the risks posed by environmental hazards using risk assessment methods.	Yes	Yes

MPH in Global Environmental Health (GEH) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
Five shared MPH Environmental Health competencies (#1-5), plus the following:		
1. Use qualitative and quantitative data sources to assess global health outcomes or risk factors, including temporal trends such as past or current patterns, as well as projected future trends, and distribution by socioeconomic or demographic predictors.	Yes	Yes
2. Exhibit professional values that demonstrate diplomacy, commitment to social justice or health equity, or respect for the unique cultures, values, roles or responsibilities or expertise represented by other professions, communities or groups working in global health.	Yes	Yes
3. Apply ethical reasoning to the design, implementation or evaluation of global health programs, policies or practice.	Yes	Yes
4. Describe select causes or consequences of health inequities within or across contexts.	Yes	Yes
5. Apply quantitative or qualitative methods to inform the design or implementation of global health research or practice.	Yes	Yes

MSPH in Environmental Health and Epidemiology (EH-EPI) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Five shared MPH Environmental Health competencies (#1-5), plus the following:		
1. Formulate an environmental epidemiology research question and study aims.	Yes	Yes
2. Appraise the strengths, limitations, and differences and similarities of various study designs with respect to given research questions.	Yes	Yes
3. Calculate and interpret basic design-specific measures of association and their standard errors.	Yes	Yes
4. Critique epidemiologic results in a causal framework.	Yes	Yes
5. Describe distributions of morbidity, mortality, and risk factors in terms of magnitude, time, place, and population.	Yes	Yes

MPH in Epidemiology Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
1. Formulate a research question and study aims.	Yes	Yes
2. Differentiate among the strengths, limitations, and differences and similarities of various study designs.	Yes	Yes
3. Calculate and interpret basic design-specific measures of association and their standard errors.	Yes	Yes
4. Differentiate among design-specific sources and types of systematic error.	Yes	Yes
5. Differentiate between the main types of effect modification and the methods of recognizing and accounting for it.	Yes	Yes
6. Describe distributions of morbidity, mortality and risk factors in terms of magnitude, time, place, and population.	Yes	Yes
7. Utilize statistical software to conduct epidemiological analysis.	Yes	Yes
8. Interpret epidemiologic results in a causal framework.	Yes	Yes
9. Prepare a written report of advanced epidemiologic information.	Yes	Yes

MSPH in Epidemiology Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Four shared MPH Epidemiology competencies (#1, 3, 5, 6), plus the following:		
1. Appraise the strengths, limitations, and differences and similarities of various study designs with respect to given research questions.	Yes	Yes
2. Assess impact of different design-specific types of systematic error.	Yes	Yes
3. Utilize advanced statistical programming in performing epidemiological analysis.	Yes	Yes
4. Critique epidemiologic results in a causal framework.	Yes	Yes
5. Write a manuscript to report the results of an epidemiologic study in a written scientific report that is suitable for submission for publication in a peer reviewed journal.	Yes	Yes

MPH in Global Epidemiology Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Eight shared MPH Epidemiology competencies (#1-8), plus the following:		
1. Use qualitative and quantitative data sources to assess global health outcomes or risk factors, including temporal trends such as past or current patterns, as well as projected future trends, and distribution by socioeconomic or demographic predictors.	Yes	Yes
2. Demonstrate reflexivity or humility regarding power, privilege, culture or professional paradigms, acknowledging strengths, limitations, biases, or influence.	Yes	Yes
3. Exhibit professional values that demonstrate diplomacy, commitment to social justice or health equity, or respect for the unique cultures, values, roles or responsibilities or expertise represented by other professions, communities or groups working in global health.	Yes	Yes
4. Apply ethical reasoning to the design, implementation or evaluation of global health programs, policies or practice.	Yes	Yes
5. Describe select causes or consequences of health inequities within or across contexts.	Yes	Yes
6. Prepare a written report of advanced epidemiologic information on a topic relevant to global and/or underserved populations in a written scientific report.	Yes	Yes

MSPH in Global Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
Four shared MPH Epidemiology competencies (#1, 3, 5, 6); four shared MSPH Epidemiology competencies (#2, 4, 7, 8); five shared MPH Global Epidemiology (#1-5) plus the following:		
1. Write a manuscript to report the results of an epidemiologic study on a topic relevant to global and/or underserved populations in a written scientific report that is suitable for submission for publication in a peer reviewed journal.	Yes	Yes

MPH in Global Health - Accelerated Program (GH-A) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Use qualitative and quantitative data sources to assess global health outcomes and risk factors, including temporal trends such as past and current patterns as well as projected future trends, and distribution by socioeconomic and demographic predictors.	Yes	Yes
2. Demonstrate reflexivity or humility regarding power, privilege, culture or professional paradigms, acknowledging strengths, limitations, biases, or influence.	Yes	Yes
3. Exhibit professional values that demonstrate diplomacy, commitment to social justice or health equity, or respect for the unique cultures, values, roles or responsibilities or expertise represented by other professions, communities or groups working in global health.	Yes	Yes
4. Apply ethical reasoning to the design, implementation or evaluation of global health programs, policies or practice.	Yes	Yes
5. Describe select causes or consequences of health inequities within or across contexts.	Yes	Yes
6. Apply qualitative or quantitative methods to inform the design or implementation of global health research or practice.	Yes	Yes

MPH in Global Health – Infectious Diseases (GH-ID) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Six shared MPH Global Health Accelerated Program competencies (#1-6), plus the following:		
1. Apply principles of infectious disease epidemiology, laboratory detection or clinical characteristics to identify specific infectious pathogens or diseases.	Yes	Yes
2. Interpret the geographic or demographic distributions, and morbidities or mortality of major infections in the US or globally.	Yes	Yes
3. Discuss strategies to prevent and control infectious diseases.	Yes	Yes
4. Explain the environmental, behavioral or social factors that contribute to the emergence, re-emergence, or persistence of infectious diseases.	Yes	Yes
5. Explore approaches for developing and maintaining surveillance for infectious diseases.	Yes	Yes

MPH in Sexual Reproductive Health and Population Studies (GH-SRPS) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Six shared MPH Global Health Accelerated Program competencies (#1-6), plus the following:		
1. Critique current sexual and reproductive or population health policies or programs.	Yes	Yes
2. Discern the quality or appropriateness of data sources to measure sexual and reproductive health or population issues.	Yes	Yes
3. Apply methods to measure fertility, its regulation, mortality, or migration.	Yes	Yes
4. Develop a policy or project to address a sexual and reproductive health or population problem.	Yes	Yes
5. Propose recommendations to address fertility, its regulation, mortality or migration.	Yes	Yes

MPH in Global Health – Public Health Nutrition (PHN) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Six shared MPH Global Health Accelerated Program competencies (#1-6), plus the following:		
1. Describe the magnitude, distribution and trends of nutrition problems in populations.	Yes	Yes
2. Assess the nutritional status of individuals using anthropometric, diet and biochemical methods.	Yes	Yes
3. Evaluate the causes and consequences of malnutrition.	Yes	Yes
4. Evaluate the efficacy or effectiveness of nutrition programs or policies.	Yes	Yes
5. Propose innovative approaches to address nutrition problems.	Yes	Yes

MPH in Community Health and Development (GH-CHD) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Six shared MPH Global Health Accelerated Program competencies (#1-6), plus the following:		
1. Evaluate health needs and assets of communities to promote social justice or social and behavioral change.	Yes	Yes
2. Apply principles of community-based projects to address common goals for health and development with local, national and international counterparts.	Yes	Yes
3. Develop frameworks or approaches to monitor and evaluate program goals, objectives, targets or operations.	Yes	Yes
4. Apply the tools of financial management in public, nonprofit organizations, or community organizations.	Yes	Yes
5. Assess management challenges in public, nonprofit organizations or community organizations.	Yes	Yes

MPH in Health Policy and Management – Health Policy (HPM-HP) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Describe how the organization and financing of health services influence access, quality and cost	Yes	Yes
2. Apply management principles to planning, organizing, leading and controlling health care enterprises.	Yes	Yes
3. Apply skills in financial accounting to healthcare administration decisions.	Yes	Yes
4. Apply principles of health economics in analyzing the behavior of healthcare market stakeholders.	Yes	Yes
5. Conduct economic evaluations of health services.	Yes	Yes
6. Utilize public finance theory to assess the efficiency and equity of proposals to reform the financing and delivery of healthcare services.	Yes	Yes
7. Incorporate legal principles of public health law in the assessment of health policies.	Yes	Yes
8. Prepare health policy briefings suitable for the range of policy stakeholders involved with the formulation and implementation of a health policy under consideration at the national, state, and local level.	Yes	Yes
9. Employ quantitative analytic tools to assess health care needs and services in population based research.	Yes	Yes
10. Apply the tools of policy analysis to make quantitative predictions about the impact of policy changes.	Yes	Yes
11. Communicate evidence-based alternatives for public health policies, both in writing and through oral presentation.	Yes	Yes

MPH in Health Policy and Management – Health Care Management (HPM-HCM) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Four shared MPH Health Policy competencies (#1-4), plus the following:		
1. Apply analytic tools and theories to guide the management of financial assets in healthcare organizations.	Yes	Yes
2. Incorporate human resources management principles in administering healthcare organizations.	Yes	Yes
3. Apply marketing concepts in the design of health services.	Yes	Yes
4. Incorporate legal principles in the administration and/or management of health care services.	Yes	Yes
5. Develop a proposal to reflect different aspects of supervisory-level general management responsibilities in a health services delivery organization.	Yes	Yes
6. Execute both an operations management and a strategic management analysis in the role of a health services consultant.	Yes	Yes

MSPH in Health Policy and Management - Health Services Research (HPM-HSR) Concentration Competencies	**Comp statement acceptable as written? Yes/No**	**Comp taught and assessed? Yes/CNV**
Four shared MPH Health Policy competencies (#1, 4, 5, 6) plus the following:		
1. Conceptualize a theoretically grounded original research project.	Yes	Yes
2. Analyze an original research question using quantitative methods.	Yes	Yes
3. Interpret findings from an original research investigation, identifying strengths and limitation of the analytic approach.	Yes	Yes
4. Conduct a scientific presentation and communicate key steps of an original research investigation.	Yes	Yes
5. Function as a team collaborator in the development and/or execution of an original health services research investigation.	Yes	Yes

MPH in Applied Epidemiology (EMPH-AEPI) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Describe distributions of morbidity, mortality and risk factors.	Yes	Yes
2. Apply basic principles of public health surveillance in the practice of public health.	Yes	Yes
3. Identify key sources of data for epidemiologic purposes.	Yes	Yes
5. Differentiate among the strengths and limitations of various study designs.	Yes	Yes
6. Calculate and interpret basic design-specific measures of association and their standard errors	Yes	Yes
7. Conduct basic epidemiologic research using multivariable models (e.g., linear, logistic, Cox, Poisson regression).	Yes	Yes
8. Interpret individual published epidemiologic studies in which major epidemiologic study designs are used.	Yes	Yes
9. Utilize statistical programming packages in preparing scientific reports.	Yes	Yes
10. Communicate epidemiologic information in a written scientific report.	Yes	Yes
11. Recognize potential ethical issues in epidemiologic studies.	Yes	Yes

MPH in Prevention Science (EMPH-PRS) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply behavioral theories across systems levels of the socio-ecological framework in addressing public health issues.	Yes	Yes
2. Assess the effects of public health interventions or programs.	Yes	Yes
3. Develop materials to address real world public health problems.	Yes	Yes
4. Apply educational theory or instructional design models to the development of workforce training.	Yes	Yes
5. Evaluate ethical considerations for public health interventions.	Yes	Yes
6. Incorporate the use of public health informatics in professional practice.	Yes	Yes
7. Incorporate research design or program planning skills in the development of grant proposals.	Yes	Yes

MPH in Applied Public Health Informatics (EMPH-APHI) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Support development of strategic direction for public health informatics within the enterprise.	Yes	Yes
2. Participate in development of knowledge management tools for the enterprise.	Yes	Yes
3. Use informatics standards.	Yes	Yes
4. Ensure that data needs of a project or program stakeholders are met.	Yes	Yes
5. Support information system development that meets public health program needs.	Yes	Yes
6. Manage IT operations related to project or program (for public health agencies with internal IT operations).	Yes	Yes
7. Monitor IT operations managed by external organizations.	Yes	Yes
8. Communicate with cross-disciplinary leaders or team members.	Yes	Yes
9. Evaluate information systems or applications.	Yes	Yes
10. Participate in applied public health informatics research for new insights or innovative solutions to health problems.	Yes	Yes
11. Contribute to development of public health information systems that are interoperable with other relevant information systems.	Yes	Yes
12. Support use of informatics to integrate clinical health, environmental risk or population health.	Yes	Yes
13. Evaluate solutions that ensure confidentiality, security, and integrity while maximizing availability of information for public health.	Yes	Yes
14. Conduct education or training in public health informatics.	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
All MPH students produce at least 2 work products that are meaningful to an organization in appropriate applied practice settings		The RSPH has specific requirements for the MPH applied practice experience (APE). Students may begin the APE after completion of nine credit hours and before mid-April of the year of graduation. In order for students to successfully complete the applied practice experience, the school requires students to complete a minimum of 200 hours through an internship-like placement at one or two public health organizations, demonstrate attainment of the foundational competencies and concentration competencies selected by the student, and complete at least two projects that benefit the applied practice organization. Additionally, students must enter and track all required information and documents in the school's electronic portal. Faculty and staff assist students and encourage them to think about the best experiences for their interests and career goals. Students self-select the competencies required for the applied practice experience from the foundational and concentration competencies. The APE advisor must confirm or approve prior to placement that the applied practice experience meets the student's selected foundational and concentration competencies. In addition, at the completion of the applied practice experience(s), the submitted deliverables must reflect the attainment of at least three foundational competencies and two concentration competencies.	Click here to enter text.	
Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies				
All students demonstrate at least 5 competencies, at least 3 of which are foundational				

		The RSPH offers extensive assistance to help students with their searches for the best experience. Students who met with site visitors described assistance from the SPH network and various connections that help guide them towards the best choice for projects that adequately align with their chosen foundational competencies and concentration competencies. Student interviews revealed examples of how APE advisors are hands-on in ensuring that experiences are structured so that competencies are met. One student explained that after her initial submission, her APE advisor instructed her to make specific revisions to her planned deliverables prior to beginning the APE. The student worked closely with the APE advisor to revise her overall APE plan and ultimately received approval. The applied practice student handbook includes a link to a website that lists ideas for students to begin their search. In addition, students have options for work study positions that may grow into applied practice experiences through the Rollins Earn and Learn program, which provides the student compensation. The SPH is actively working to ensure each student has access to an Earn and Learn opportunity. The school requires that the work product or deliverables are mutually beneficial to the student and the community partner, as explained in the applied practice student handbook. Recently, students from the SPH have completed applied practice experiences with a variety of non-governmental organizations including Save the Children, Manatt Health, Surfrider Clean water, and WaterAid. Students have also		

		completed their applied practice experiences at government agencies, including the Substance Abuse and Mental Health Services Administration and Cleveland Department of Health. Site visitors reviewed samples of student work and found them to be high quality and appropriate demonstrations of competencies. Products included a partnership field manual for improving reproductive health services through community-provider collaboration, memos summarizing ongoing healthcare litigation, and briefings for organizational staff on top-polling Democratic candidates' positions on health issues. Based on the examples provided and the onsite interviews, the projects reflect meaningful contributions to the organizations and are beneficial for student development. Students completing the EMPH follow a slightly different process. EMPH students typically have multiple APE experiences, follow a detailed advising process throughout their experiences, and complete incremental and midpoint evaluations and reflections throughout the experience. The field supervisor evaluation is required for the student's successful completion of the APE. In addition to the field supervisor, the APE advisor reviews and approves the final student deliverables and attainment of foundational and concentration competencies using a SPH portal designated for the process. The APE advisor also reviews the field supervisor evaluation to ensure that the		

		objectives and products were achieved and are mutually beneficial.		

D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students complete project explicitly designed to demonstrate synthesis of foundational & concentration competencies		Students in all MPH and MSPH programs either complete a thesis or a capstone project as the ILE. The concentration-specific requirements for the thesis or capstone project are clearly articulated in the concentration-specific ILE guidelines. Thesis projects are generally hypothesis-driven research but can take another form, such as a deliverable for an organization. The capstone option varies by concentration. Examples of products include a synthesis of the literature, a fundable grant proposal, and analysis of public health data. For all ILEs, there are specific deliverable requirements that are generally tied to courses, with satisfactory completion of the course as part of the ILE requirements. Some concentrations have additional requirements, such as oral thesis defense or a presentation (poster, etc.). The ILE is	Click here to enter text.	
Project occurs at or near end of program of study				
Students produce a high-quality written product				
Faculty reviews student project & validates demonstration & synthesis of specific competencies				

		assessed by a faculty member, and possibly additional other mentors, with written policies on who can fill these roles. The assessment is documented in ILE progress reports, as well as the grading for the associated courses. The ILE guidelines provide clear instructions on the process and deliverables, including required skills for the ILE. The syllabi for the ILE courses also include specific foundational and concentration specific competencies that are integrated in the ILE process. The thesis guidelines indicate that advisors and students work together to identify competencies. It is clear from the extremely detailed ILE guidelines, processes, course syllabi, and final products that the ILE process is competency driven with clear mentorship and multi-level assessment. This criterion requires that "Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals." In some concentrations the students are able to select competencies for the ILE. In others, there is a designated set of competencies defined by the program that govern all capstone experiences. Even where students do not select the competencies, it is clear that there is consultation as well as active engagement between faculty and students on the specifics of the ILE and how the experience meets the competencies. Site visitors reviewed samples of student work; documents indicate that students are undertaking high quality work that requires synthesis of competencies. Examples include grant proposals and papers examining public health issues such as "Workforce Allocation Optimization" in a global health context and "Real-Time Decision Making in the		

		Centers for Disease Control and Prevention's (CDC) Infectious Disease Emergency Responses." The deliverables address appropriate public health topics and are frequently grounded in the needs of specific public health organizations. During the site visit, students, faculty, alumni, community partners, and employers all were enthusiastic about the strength of the ILE, including the mentoring opportunities with both school faculty and partner organizations. Students clearly have a high quality, integrative learning experience with mentorship and structure in place to support the experience. The school's processes and documentation ensure consistently high-quality experiences across the school's large student body.		

D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D12. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		Students must complete at least 42 semester credit hours for the MPH degree. For the MSPH degree, students must complete at least 48 semester credit hours. In dual degree programs, students must complete at least 42 hours but as many as 10 hours in public health relevant elective courses can count towards the MPH degree. Advisors and the school's academic affairs staff validate external courses for appropriateness. The university relies on the Carnegie Unit definition of a semester hour, in which one credit is associated with one contact hour per week during the semester.	Click here to enter text.	

D15. DRPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D16. BACHELOR'S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines specific assessment activity for each of the foundational public health learning objectives (see worksheet for detail)		In collaboration with Emory's Laney Graduate School, the Rollins School of Public Health offers six PhD programs: Behavioral Sciences and Health Education (BSHE), Biostatistics (BIOS), Environmental Health Sciences (EHS), Epidemiology (EPI), Health Services Research and Health Policy (HSRHP), and Nutrition and Health Sciences (NHS). The school ensures that all PhD students demonstrate the 12 foundational public health learning objectives by requiring them to complete PUBH 700: Introduction to Public Health. Numerous school leaders collaborated to design the course, after consultation with the Laney Graduate School. This course was offered for the first time in the summer and fall semesters of 2019. For those PhD students who have previously completed a CEPH-accredited master's degree, this requirement is waived. Reviewers validated that PUBH 700 covers all 12 public health foundational learning objectives, as noted in the D18-1 worksheet. The course is graded on an S/U basis. It is not credit bearing. The course is delivered partially	Click here to enter text.	
Depth of instruction in 12 learning objectives is equivalent to 3-semester-credit course				
Defines competencies for each concentration. Competencies articulate an appropriate depth of knowledge & skill for degree level				
Assesses all students at least once on their ability to demonstrate each concentration competency				
Curriculum addresses scientific & analytic approaches to discovery & translation of public health knowledge in the context of a population health framework				

Instruction in scientific & analytic approaches is at least equivalent to a 3-semester-credit course		online during the summer prior to official matriculation in the PhD program and then is completed on campus in the fall of the PhD students' first semester. The course consists of three modules. Assessment of competency attainment is largely done by organized and structured discussion posts and writing projects. Based on a review of the course syllabus and discussion with faculty onsite, the course content appears to be equivalent to a standard three-credit hour graduate course. The school defines four to six concentration competencies for each of its PhD programs and appropriately maps each competency to a corresponding assessment. The concentration competencies for all six programs have adequate depth and sophistication for the PhD degree in these areas, as noted in the D18-2 worksheet. The school requires that all PhD students receive instruction in scientific and analytic approaches that is equivalent to at least one three-credit course. For example, BSHE students complete BSHE 728 (Advanced Statistical Methods in the Behavioral Sciences); BIOS students complete BIOS 709 (Generalized Linear Models); and EHS students take EHS 710 (Advanced Laboratory and Field Methods in Exposure Science). The school's PhD students must successfully defend a dissertation to graduate. Each program area has developed specific dissertation approval and submission procedures. In addition, the Laney Graduate school has specific requirements for candidacy and dissertation completion. The school's standard is that a student's dissertation must make a new contribution to the		
Students produce an appropriately advanced research project at or near end of program				
Students have opportunities to engage in research at appropriate level				
Curriculum includes doctoral-level, advanced coursework that distinguishes program from master's-level study				

		knowledge base of a particular field of study or must present a new interpretation of existing knowledge. Overall, the advancement to candidacy and dissertation requirements are traditional and of sufficient rigor. The school provides an abundance of research opportunities for their PhD students. From the beginning of their programs, PhD students are involved in faculty research teams. In all PhD programs, students are expected to have at least one publication prior to graduation. Some of the PhD programs see eight to 12 publications by the time of graduation. An initial review of the required coursework listed in the self-study document suggested potential concern about the depth of available advanced-level coursework in EPI, HSRHP, and NHS, raising questions as to whether the PhD program is sufficiently distinguishable from the MPH/MSPH curriculum. During the site visit, however, the directors of the PhD programs clarified that all doctoral students must complete additional advanced-level courses by advisement; though these courses are not required of all students, the school's faculty base and doctoral student body size allows the school to offer ample doctoral-level courses. Additionally, students in some doctoral programs, such as HSRHP, complete doctoral-level coursework in other Emory departments, such as political science. Prior to matriculation, all PhD students complete an individual development plan that identifies all courses to be completed in their course of study. These plans are based on each student's prior academic preparation and career aspirations and include courses that go beyond those identified in the self-study as "required" for a particular PhD program.		

		In addition, during on-site discussion, reviewers learned that the progress of all PhD students are evaluated on an annual basis, and faculty and staff provide specific feedback to each student to ensure appropriate progress to graduation.		

D18-1 Worksheet

Foundational Knowledge	**Yes/CNV**
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (eg, One Health)	Yes

D18-2 Worksheet

PhD in Behavioral Sciences and Health Education (BSHE) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Design theoretically-informed interventions that operate at multiple levels to prevent disease, reduce health risks, or improve quality of life.	Yes	Yes
2. Develop original research questions and describe research designs and advanced statistical analysis plans to address those research questions.	Yes	Yes
3. Conduct original, theoretically-informed research directly related to the social sciences, behavioral sciences and/or health education in the context of public health.	Yes	Yes
4. Develop the skills needed to teach students about public health content.	Yes	Yes
5. Apply principles of ethical conduct to public health research.	Yes	Yes

PhD in Biostatistics (BIOS) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Conduct independent research in the application of biostatistics.	Yes	Yes
2. Develop and assess new statistical theory as needed.	Yes	Yes
3. Develop and assess new statistical methods to address a broad range of complex biomedical or public health problems.	Yes	Yes
4. Conduct complex statistical analyses for a broad range of applications.	Yes	Yes
5. Teach statistical theory or methodology at multiple levels.	Yes	Yes

PhD in Environmental Health Sciences (EHS) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply advanced methods for assessing human exposures to environmental agents.	Yes	Yes
2. Explain the actions of environmental exposures on human health via cellular and molecular processes, including risk factors that can modify these actions.	Yes	Yes
3. Apply epidemiologic and risk assessment methods to describe the risks associated with exposure to environmental agents.	Yes	Yes
4. Conduct a novel research project that addresses key challenges in environmental health sciences.	Yes	Yes

PhD in Epidemiology (EPI) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Evaluate epidemiologic research.	Yes	Yes
2. Formulate an epidemiologic research question that addresses a gap in the literature.	Yes	Yes
3. Develop an epidemiologic research study addressing a gap in the literature.	Yes	Yes
4. Conduct independent research using epidemiologic methods.	Yes	Yes
5. Communicate the results of epidemiologic research to a scientific audience.	Yes	Yes

PhD in Health Services Research and Health Policy (HSRHP) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Describe major problems in health services and policy that are currently the subject of empirical investigations.	Yes	Yes
2. Apply economic or political science concepts, theories and methods to the framing and analysis of research questions in health services and policy.	Yes	Yes
3. Apply advanced economics or political science methods to relevant research questions in health services and policy.	Yes	Yes
4. Communicate concepts and methods of health services and health policy research to students, professionals, and other stakeholders.	Yes	Yes
5. Conduct a health services or health policy research investigation suitable for peer-reviewed publication as an independent researcher.	Yes	Yes
6. Function as an interdisciplinary team collaborator in the design and conducting of a health services or health policy research investigation.	Yes	Yes

PhD in Nutrition and Health Sciences (NHS) Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply the fundamentals of nutrition science including methods of nutrition assessment.	Yes	Yes
2. Evaluate scholarly work, programs and interventions including work completed by peers in nutrition health sciences.	Yes	Yes
3. Conduct independent research using appropriate research design and methods in the field of nutrition.	Yes	Yes
4. Communicate current knowledge about key concepts in human nutrition science to students and peers.	Yes	Yes
5. Develop the skills needed to teach students about nutritional science and health.	Yes	Yes

D19. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Instructional methods support regular & substantive interaction between & among students & the instructor		The SPH outlines three degree programs offered through distance education. The EMPH offers tracks in applied epidemiology, applied public health informatics, and prevention science. The SPH requires at least three years of work experience for entrance into the EPMH program and reviews candidates closely to ensure that the program is a good fit for their career goals. The school uses a hybrid approach for the EMPH to provide the convenience and benefits of distance learning and the interactivity of face-to-face instruction. This approach is described as highly interactive and based on adult learning educational principles and theories. Students complete intensive on-campus sessions but complete most of the program online in both synchronous and asynchronous experiences. The school's decision to offer distance education is based on the needs of working public health professionals and other potential students with the interest in pursuing a public health degree who may not be able to attend the campus-based program. The distance learning component of the SPH was initially implemented based on the needs of CDC employees who were seeking an MPH degree to support their work. The SPH was one of the first institutions to offer a fully online MPH degree program.	Click here to enter text.	
Curriculum is guided by clearly articulated learning outcomes that are rigorously evaluated				
Curriculum is subject to the same quality control processes as other degree programs in the university				
Curriculum includes planned & evaluated learning experiences that are responsive to the needs of online learners				
Provides necessary administrative, information technology & student/faculty support services				
Ongoing effort to evaluate academic effectiveness & make program improvements				
Processes in place to confirm student identity & to notify students of privacy rights and of any projected charges associated with identity verification				

		EMPH students have the full benefit of support from all of the school's offices. For example, distance learning students have access to academic advising, technology support, applied practice experience advisement, library access, and additional support. The school offers a specific student manual for distance learning students. For IT support, the EMPH employs an instructional designer for faculty to help develop online courses. Throughout the semester, instructional support is provided to assist with monitoring the course sites for logistical questions, and students are able to receive quick resolution to any technology or logistical issues. Educational outcomes are evaluated using the same biennial assessment of educational outcomes process completed by all RSPH departments; though the EMPH is not housed in a department, its operations mirror those of the departments in many ways. The biennial assessment includes definition of desired outcomes, description of assessment strategies, selected findings, and documented use of the findings. The requirements for the distance education degree and the traditional degree are the same, though EMPH course offerings are specifically designed for the student population and delivery method. The SPH uses the same methods across all departments with the SPH to assess academic rigor. Each EMPH course is monitored by faculty, an instructional designer, and the EMPH deputy director. If the faculty-student interaction is not meeting the program's standards, the instructional designer will facilitate adjustments, and the deputy		

		director will contact faculty. In addition, the EMPH uses data collected through several surveys of faculty and students to assess program effectiveness. For validation of student identity, the hybrid delivery approach means that students meet regularly with faculty in face-to-face format. In addition, students meet with advisors and peers and are well known to school faculty and staff. Finally, the system used for online education is password protected and requires university credentials to log on. The self-study described the details of a five-year assessment of the EMPH. The data revealed students were struggling with the APE and thesis and found the program too long. As a result, the EMPH was overhauled with fewer required credit hours and built-in new support and options for the APE and ILE. EMPH classes are smaller than the corresponding on-campus courses with no more than 14 students in one section. There is a high degree of student interaction with faculty, and students feel very engaged in class. When students or faculty are not responsive to any discussion question, the instructional designer will inform the professor. The program identifies challenges with student financial needs as the most pressing current concern for the EMPH program. The RSPH continues to work to improve the accessibility of financial resources.		

E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		The school has 173 primary instructional faculty who teach and supervise students. All of these faculty members have full-time appointments (1.0 FTE) in the school. A review of their CVs indicate that they are well qualified and that their education and experience is aligned with degree offerings and appropriate for the degree level. The school also has 124 non-primary instructional faculty members. These faculty consist of three groups: 1) those whose primary academic appointment is in the school, but is less than full time (n = 23); 2) those who taught (or co-taught) at least one course during the 2018-2019 academic year (n = 84); and 3) Emory faculty from other schools in the university who advise students in the Nutritional and Health Sciences interdepartmental doctoral program (n = 17). A review of their CVs indicate that they are well qualified and that their education and experience align with degree offerings and appropriate for the degree level. Virtually all primary and non-primary instructional faculty have terminal degrees in their area of study. Among the tenure-track and tenured faculty, there appears to be an appropriate number of faculty at each rank for adequately supporting the degree offerings. A large proportion of the non-primary instructional faculty are employed in senior positions at the CDC or in private industry, providing for	Click here to enter text.	
Faculty education & experience is appropriate for the degree level (eg, bachelor's, master's) & nature of program (eg, research, practice)				

		opportunities to bring real world experiences into the classroom. During the site visit, students indicated that the faculty are diverse with respect to academic disciplines, training, backgrounds, and professional experience. They believed that the diversity of faculty skills was important for meeting their educational needs.		

E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		The school successfully integrates perspectives from the field of practice. Over one-third of primary instructional faculty have had significant experience working in public health agencies or organizations. This includes full-time employment prior to the university as well as Interagency Personnel Agreements that allow for ongoing part-time employment by agencies such as the CDC while remaining employed by the university. In addition, the school's faculty reported performing an estimated 873 consultations or episodes of technical assistance to health or public health entities in the last three years. Examples of faculty engagement include a faculty member who works as an epidemiology consultant with the Fulton County Board of Health and another faculty member who has more than a six-year engagement with the CDC. The school also benefits from the important public health practice organizations located in Atlanta, including the CDC, CARE USA, and the American Cancer Society. This	Click here to enter text.	
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels				
Regularly involves practitioners in instruction through variety of methods & types of affiliation				

		presents important opportunities to engage practice-based adjunct and affiliated faculty who serve as course instructors or guest lecturers. During the 2018-2019 academic year, 89 courses were either partially or fully taught by practice partners. Additional courses incorporate practice-based guest lecturers, practitioners as resources for class projects, or involve practitioners in evaluating student projects. An example given during the site visit was the former head of the Ebola response team at the CDC, who gave a guest lecture in a global health course prior to leaving for Africa to work in the field. He then continued to Skype with the class from the field throughout the semester. Practice-based faculty serve on school committees such as the Faculty Council, the alumni association and the Community Advisory Board. Students also benefit from practice-based mentors through paid employment in practice settings while enrolled and miscellaneous professional development opportunities, both of which the school directly facilitates. The self-study indicates that over 124 public health professionals mentored 131 students during the 2018-2019 academic year. Another approach to the integration of practice-based perspectives are classes that integrate a community-based component through service learning. Examples include BSHE 524: Community Assessment, which includes students performing an asset and needs assessment for a public health program, agency or organization.		

		During the site visit, the enthusiasm and investment of practice partners to work with students was impressive. They clearly see themselves engaged in partnership with the school, taking seriously their responsibilities to educate students and seeing the benefit of student engagement in the work of their organizations. Similarly, school-based faculty provided strong examples of how their work in public health practice sites positively impacted the educational experience. One faculty member noted that her contemporaneous employment in a public health agency provides a "rich set of cases in real world applications," rather than using fictional case studies.		

E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Systems in place to document that all faculty are current in areas of instructional responsibility		The school has clear systems in place to document faculty currency in instructional responsibilities and pedagogical methods, as well to monitor the ongoing effectiveness of instruction. Prior to assigning a faculty member to a course, departments assure that the instructor has appropriate training and/or experience. Generally, this includes doctoral-level training in the field of instruction. The school has formal systems in place to monitor and approve course instructors. This includes identifying when there is not a match between a terminal degree and the course topic, with an assessment and documentation of the justification for the teaching assignment. Only 11	Click here to enter text.	
Systems in place to document that all faculty are current in pedagogical methods				
Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction				
Supports professional development & advancement in instructional effectiveness for all faculty				

Tracks indicators that provide meaningful information related to instructional quality		justifications were required during the 2018-2019 academic year. Systems are also in place for evaluating teaching quality. All primary instructional faculty submit annual reports for review by their department chairs, who discuss overall performance of teaching effectiveness and suggest any indicated remedies. Generally, non-primary faculty receive feedback from the director of the program in which they teach; the evaluation is based on student course evaluations and/or observations when possible. Instructional effectiveness is assessed both by student and peer evaluations. Both primary and non-primary faculty receive teaching evaluations from students though an online course evaluation system. Completion of course evaluations is highly encouraged but not required. If the response rates for course evaluations are 66% or higher, the scores are available online to all faculty as well as the student body. Approximately one-third of courses meet the 66% response rate. If the response rate is lower than 66%, the scores are only available to the faculty member, the director of the program, the department chair, and the executive and assistant deans for academic affairs. Peer evaluations and feedback are available on request through two university entities: the Center for Faculty Development and Excellence and the Office of Evidence Based Learning. Other resources for support of continuous quality improvement in instruction include one-on-one consultations and training programs, including Summer Teaching Intensive workshops to build teaching skills, trainings on fostering inclusive classrooms training, and training on integrating technology into		

		classroom instruction. There are also small grant programs for course development, particularly in the area of engaged learning. Teaching portfolios are required as part of the promotion process. This includes faculty members completing a narrative of their philosophy and approach to teaching, student course evaluation results, peer teaching evaluation results, representative course syllabi, and other support materials (such as student support letters). Data presented on mean student course evaluation scores for 500-level courses (master's-level) for 2016-2019 show high levels of student satisfaction. The mean ratings for instructors ranged from 4.29 to 4.36 on a scale of 1-5. The mean course ratings ranged from 4.09 to 4.19. During the site visit, students were enthusiastic about the quality of instruction in the school and the dedication of the faculty to their educational experience. The faculty were also clearly enthusiastic about the educational programs and were committed to assuring quality of the educational experience for students. An example that emerged during the visit was the commitment to mid-course assessments and, where needed, interventions that could include adding a more senior instructor to help with the course if indicated. Site visitors also heard about systems to assure that new faculty are prepared to teach. For core courses, this would typically include having the new faculty member shadow the more experienced instructor in the year before taking over the course.		

		The self-study describes the school's approach and progress along several relevant indicators over the last three years. The school has examined and strengthened its process for annual reviews to ensure faculty currency. The school has seen stable and positive ratings of instructional quality by students, as reflected in course evaluations, and the school has increased the service learning opportunities available for students. Clear systems are in place for the evaluation of teaching and there are opportunities for faculty to develop their teaching approaches. There is also a culture of being committed to providing a quality educational experience in all courses. Student ratings for courses and faculty are highly positive and their appreciation for the quality of instruction was evident during the site visit.		

E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		Research is one of the principal missions of the school as stated in its goal to "discover, disseminate, and apply public health science." The Blue Ridge Institute for Medical Research ranked the school sixth in NIH funding among schools of public health. Sponsored research has grown significantly over the past nine years, with a total	Click here to enter text.	
Faculty are involved in research & scholarly activity, whether funded or unfunded				

Type & extent of faculty research aligns with mission & types of degrees offered		of $107,840,421 in the 2018-2019 academic year. Almost all full-time faculty are engaged in scholarly research. Full-time, tenure-track faculty normally maintain research programs that fund two-thirds to three-quarters of their 12-month salaries. The university and school have policies in place to support research, including pilot research funding, mentorship of junior faculty, and interdisciplinary centers to encourage faculty collaboration in research. The school has an Office of Research to support the school's research mission. Research is an important component of the promotion process. In addition, the school tracks research-related outcome measures, including the percent of faculty participating in research activities (the 90% target has been met for the past three academic years), total research funding (target of $134,177,078 has not been met yet, but the total research funding has ranged from $107,840,421 and $131,546,155 annually for the past three academic years), and number of grant submissions (target of 622 has not been reached but the range has been from 575 to 593). The school often attempts to align faculty teaching with research expertise. Faculty also commonly give guest lecturers on their research in colleagues' classes. There are also opportunities for students to become involved in faculty research. The Rollins Earn and Learn program provides funding for master'-level students to work in a variety of relevant settings, including participating in faculty research. There are also paid and unpaid graduate research assistantships.		
Faculty integrate their own experiences with scholarly activities into instructional activities				
Students have opportunities for involvement in faculty research & scholarly activities				
Tracks measures that are meaningful and demonstrate success in research and scholarly activities				

		The school has set ambitious, aspirational, research-related goals, and while they are not always met, there are impressive results in all tracked areas. The strong research portfolio also adds to the educational experience for students.		

E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		All faculty are expected to contribute to extramural service in a capacity appropriate to their job roles. Faculty members are allowed up to one day to per week to engage in professional activities. In addition to the time allowed for professional service, the RSPH supports faculty to participate in service activities to gain a national reputation as leaders in their fields. In addition, the school prioritizes maintaining relationships with federal, state and local health departments and non-government public health organizations to ensure that opportunities for extramural service activity are regularly available to faculty. Faculty are required to report service activities for promotion opportunities. One of the primary instructional faculty members leads a research initiative in collaboration with the Greater Atlanta Breast Cancer Task Force that also involves significant service roles. Her role is to direct the activities of the task force, refine messaging around mortality disparities, and facilitate the acquisition of resources to support the future activities of the task force. Master's-level research assistants have performed literature	Click here to enter text.	
Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means				
Tracks indicators that provide meaningful information related to extramural service				

		reviews and assisted in preparing data for community-level dissemination. Doctoral-level students accompany this professor to all meetings, help to oversee task force analysis, and report outcomes to the group. A faculty member who teaches a public health preparedness course works with the Fulton county board of health. As a result, she has incorporated service projects into her classes, such as involving students in creating the county's plan in advance of hosting the Super Bowl. Student involvement in a health service program for Mexican nationals is led by another faculty member in the Department of Global Health, which includes opportunities for multiple work-study students each year. The self-study and site visit elicited numerous examples of this nature that demonstrate faculty members' engagement in service activities and the corresponding linkages available for students. The self-study provides information on the school's self-defined indicators of success: • Percent of primary instructional faculty participating in extramural activities: over the past three years 100% of primary instructional faculty have participated in some form of professional or community based extramural service. • Number of faculty-student service collaborations: The SPH lists a number of courses over the last		

		three years that facilitate this involvement, including courses in community assessment, program evaluation, correctional health care, maternal and child health leadership, food security, and community transformation. • Number of community-based service projects: over the last three years, the RSPH has slightly increased the number of service projects completed as percentage of the total number of funding awards from 15% (58/385) in 2016-2017 to 18% (74/409) during the 2018-2019 academic year.		

F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		The school has three significant committees of external stakeholders who provide regular feedback on a variety of topics. The Dean's Council includes community, business, and philanthropic leaders. This group primarily serves as a venue to introduce leaders to the school and serves as a venue for individuals who have supported the school through philanthropy. This group meets twice a year and typically hears presentations from faculty and discusses current public health issues and issues relevant to the school's development.	Click here to enter text.	
Ensures that constituents provide regular feedback on all of these: • student outcomes • curriculum • overall planning processes • self-study process				

Defines methods designed to provide useful information & regularly examines methods		The Community Advisory Board (CAB) includes past, current, and prospective employers of graduates, as well as internship supervisors and representatives of the local and regional public health workforce. CAB meetings involve topical discussions and presentations, and the CAB provides a connection to the school to facilitate internships, mentorship relationships, and future employment. The Alumni Association carries out its work through the Alumni Board, a 15-member body that advises the school, works to build the alumni community, assists with student recruitment, and offers professional development to current students and alumni. Current members include both recent and more distant graduates from a variety of the school's degree programs. All of these groups contribute to providing feedback on curriculum, student outcomes, and school planning. The OCD, in conjunction with students in a course on community assessment, undertook a significant study of employers and alumni in 2017. The study involved surveys and key informant interviews and captured data from approximately 130 employers and 150 alumni. The school provided the data summary and conclusions to site visitors, and reviewers noted that this effort produced a rich and detailed data set with actionable information. OCD has shared the results with a variety of stakeholders, including faculty, school leaders, and various components of the school's governance structure. The school is currently working to address several of the recommendations, which included ensuring that students		
Regularly reviews findings from constituent feedback				

		have more practical, professional experience prior to graduation, better preparing students in professional development skills, and increasing opportunities for and exposure to cross-disciplinary or other external collaborations. Employers cited evidence-based approaches, interprofessional skills, and communication as the most important domains of preparation. All three of the groups mentioned above play roles in the school's ongoing planning and curricular development. Each body has faculty and staff as liaisons and/or ex officio members, and these faculty and staff are responsible for bringing information to the Leadership Group, Education Committee, and other bodies. The school's Self-Study Committee, which met monthly over the course of a year, included faculty, students, staff, alumni, and community partners from a variety of organizations across sectors that employ alumni and host internships. Meetings involved facilitated discussions of drafts of various sections as they were drafted and revised. This committee began its work with a comprehensive review and discussion of the school's guiding statements. The committee's recommendations were adopted by the Leadership Committee in 2018. A number of Self-Study Committee members who are alumni, APE supervisors, and employers attended the site visit and described the process to reviewers. They noted that the committee had met regularly over an extended period of time for structured, detailed discussions. The committee used a primary-secondary reviewer format for each discussion that one participant likened to a grant review process. Each review team mixed faculty and/or students with external participants. A committee member		

		described the discussion process as robust, saying that "no stone was unturned" by the end of their process.		

F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Makes community & professional service opportunities available to all students		The self-study indicates that the school introduces students to service, community engagement, and professional development activities through six signature programs. These programs are an attempt to collectively reflect the school's values in preparing students for ethical community engagement seeking to promote social justice and eliminate health disparities. Many of these programs offer opportunities that contribute to students' professional advancement in the field. Each of the six programs is briefly described below. The Humanitarian Emergencies Research Team (HERT) is co-sponsored by the CDC's Emergency Response and Recovery Branch and Emory University through the Center for Humanitarian Emergencies. HERT includes students from public health, nursing, and medicine. They participate in one or more student-led projects that focus on humanitarian emergencies worldwide; participate in a journal club devoted to current humanitarian challenges; maintain the GEB Pinboard, which visualizes the location of global humanitarian emergencies; and engage in efforts to increase public awareness about humanitarian crises locally and nationally.	Click here to enter text.	
Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field				

		The Global Field Experience (GFE) program provides grants to students to apply knowledge they have acquired in the classroom to low-resource or high-disparity settings around the globe. With assistance from faculty and staff, students identify field sites where they can collaborate with local organizations such as CARE, World Vision, and Save the Children. Student proposals are reviewed by faculty. About 50-80 awards are funded each year. In most cases, these projects take place in the summer. Since 1992, more than 1,000 students have carried out projects in over 70 countries. GFE opportunities may be used to fulfill APE requirements or may be separate endeavors. The Rollins Earn and Learn (REAL) program provides MPH/MSPH students opportunities for paid, part-time experiences in public health at federal, state, and county agencies, as well as nonprofit and for-profit organizations in the Atlanta metropolitan area. Since the program began, REAL has placed students with almost 150 community partners. The cost of employing students is split by the school and partner agencies and organizations. A total of 561 first- and second-year master's students accepted REAL awards in 2018-19. The Region IV Public Health Training Center is located at the school. The Center provides public health skills-based trainings and workshops and supports student field placements through its Pathways to Practice Scholars program. In this latter program, MPH/MSPH students can gain practical public health work experience. An important aim of the program is to assist students in gaining an appreciation for working in underserved areas. Students receive a $3,500 stipend to work in organizations in one of eight states in the region.		

		Rollins-teer Day is part of the school's annual fall orientation. On this day, students volunteer in Atlanta organizations that address poverty, homelessness, disease prevention, and environmental health. The aim is to emphasize the school's mission focused on community service and to orient students to opportunities in the Atlanta metropolitan area. More than 5,500 students have worked with over 65 area organizations on Rollins-teer Day over the past 12 years. The Student Outbreak Response Team (SORT) is a collaborative effort involving the school and the CDC. At this time, over 50 students from all academic programs participate in SORT. The mission of the student organization is to provide real-world experience and training in infectious disease outbreak investigation and emergency preparedness and response. SORT contributed over 3,200 total hours of effort to public health preparedness activities in 2016-17. During the site visit, students also highlighted the many service opportunities available through the school's student-led organizations. In addition to the Rollins Student Government Organization, the school sponsors approximately 20 student groups, including the Association of Black Public Health Students, Queer/Trans* Collaborative at Rollins, and Emory Mental Health Alliance.		

F3. ASSESSMENT OF THE COMMUNITY'S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a professional community or communities of interest & the rationale for this choice		The school has a variety of professional communities of interest that encompass local and regional public health workers, as well as global communities. The school identifies different strategies to identify needs for its various communities of interest, and all needs assessments are thorough and well-documented. As a participant in the Region IV Public Health Training Center (PHTC), school faculty and staff conduct regular needs assessment for governmental public health workers in and eight-state region. The PHTC has used a mixed-methods approach to gather information from all of the states in the region. Needs assessment methods involved both primary and secondary data collection and analysis, and data have been collected at least twice in all states since the center's inception in 2014. Top training and skill development needs include data analytics, systems thinking, change management, persuasive communications, health informatics, preparedness, infectious disease, behavioral health, and health equity. The school also hosts the Emory Centers for Training and Technical Assistance. This entity provides training and technical assistance to organizations and conducts context-specific needs assessment for clients. For example, the centers have recently worked with the South Dakota Tobacco Control Program to develop yearly trainings for grantees. Center staff developed and	Click here to enter text.	
Periodically assesses the professional development needs of individuals in priority community or communities				

		deployed a survey to assess grantee needs and met regularly with program staff. The school's funded Prevention Research Center efforts connect faculty, staff, and students with rural communities in the state to assess training needs. A faculty member who met with site visitors spoke of this outreach as often reaching corners of the state that are not well-served by the training opportunities that are often centralized in the Atlanta area. The school also draws data on public health workforce needs from its CAB, through structured discussions at its meetings, and through faculty contacts with colleagues in public health agencies and organizations. For instance, conversations with CDC staff indicated a need for training on group randomized trials, which faculty have delivered.		

F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		The school offers trainings that respond to the needs identified through all of the methods described in Criterion F3. Trainings include brief webinars, in-person and distance-based full day skill-building sessions, and a Leadership Institute. In response to the PHTC-identified needs, center faculty and staff delivered a training titled *Effective Communication Skills for the Public Health Professional* to 135 participants across seven offerings to state and district	Click here to enter text.	

		health department staff. A leadership webinar series for governmental public health workers offered more than 10 different sessions, each of which drew between 100 and 350 participants. The self-study lists numerous other PHTC offerings that have drawn significant participation. The self-study provides several examples of trainings offered in response to needs identified through faculty contacts with colleagues. For example, a faculty member developed a set of trainings in qualitative research for workers in foundations and non-profit organizations; over the last five years, this effort has produced over 60 workshops for over 800 public health professionals. The school offers two certificate programs aimed at non-degree-seeking public health workforce members; the needs assessment for these offerings has evolved from ongoing conversations with workforce partners. The certificates in quantitative methods and public health informatics for leadership enrolled five workforce members at the time of the site visit.		

G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines appropriate priority population(s)		The self-study document identifies underrepresented minorities (URMs,) with an emphasis on Black/African	Click here to enter text.	

Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals		Americans and Latinos as the priority populations for faculty, staff and students. These populations were selected because of persistent health inequities, to build a more diverse educational experience, and to recognize the population and history of Atlanta in the Civil Rights Movement. One of the four goals of RSPH is to "sustain an inclusive, diverse academic community that fosters excellence in instruction, research, and public health practice." RSPH identified two related diversity and cultural competence goals: 1) Increase representation of Black/African American faculty, staff and students and 2) Increase representation of Latino faculty, staff, and students. RSPH establishes benchmarks based on ASPPH data. The RSPH benchmark for Black/African American and Latino faculty is close to the ASPPH number, since schools of public health draw from common pool of faculty. The benchmark for Black/African American students is double the ASPPH number for master's students and 5% higher for doctoral students, which accounts for the demographics of the school's surrounding area. The benchmark for Latino masters and doctoral student is slightly below the ASPPH number, even though Atlanta has a substantial and growing Latino population, and recognizes the need for gradual improvement from past levels. The data in the school's dashboard indicates slight progress in recent years. The dashboard shows an increase in Black/African American faculty from 4.5% in 2014-15 to 6% in 2018-19; and Latino faculty from 3.5% to 4% for these same years.		
Learning environment prepares students with broad competencies regarding diversity & cultural competence				
Identifies strategies and actions that create and maintain a culturally competent environment				
Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)				
Practices support recruitment, retention, graduation of diverse students, with attention to priority population(s)				
Regularly collects & reviews quantitative & qualitative data & uses data to inform & adjust strategies				
Perceptions of climate regarding diversity & cultural competence are positive				

		The self-study lists several strategies for activities to increase URM representation on the faculty. These include intentional recruitment and outreach, wherein chairs identify promising URM faculty for recruitment; requiring open searches using Emory's Affirmative Action/Equal Employment Opportunity guidelines; and requiring implicit bias training of all members of search committees. RSPH also uses availability analyses from the AAU data exchange to indicate where the school's faculty composition is less than the available of URM faculty candidates and target those areas for change. Also, the school uses Emory University Faculty Distinction funds for start-up packages to attract diverse candidates. Staff from the Office of Admissions reported that they actively monitor URM admission by department to identify possible concerns and address them. They also indicated that they have studied the use of GRE scores and relationship to student performance. They noted that GRE may not be a suitable monitor for URM admissions, as the GRE is often viewed as a barrier to potential URM applicants and has not been shown to correlate with performance in MPH programs. The self-study and discussions with staff provided evidence of many activities to recruit and enroll URM students. These include special events aimed at attracting URM students, such as minority recruitment fairs, specific URM recruitment sessions, and direct outreach to Historically Black Colleges and Universities and Hispanic serving institutions, especially those in Atlanta. Fellowships from the Laney Graduate School for Centennial Scholars Fellowship are used to recruit URM doctoral students.		

		RSPH has policies and procedures for ensuring a diverse candidate pool for staff positions. RSPH has taken steps to create and maintain a culturally competent and inclusive environment. RSPH created a schoolwide standing Community and Diversity Committee which works to actively foster a diversity community of inclusion and equity. Discussions with faculty and staff indicated that the school's Leadership Team works to create an inclusive culture and cited the appointment of URM faculty to visible, key leadership positions in the school. RSPH has been responsive to student suggestions to create and maintain a culturally competent environment and has made this a priority. Students from a recent MPH/MSPH cohort (2016) developed a detailed Diversity and Inclusion Strategic Plan that challenged RSPH to have an explicit, systematic, and timely approach to addressing issues of diversity and social equity in the campus's social and academic climate. Discussions during the site visit noted that while the priority populations are African American and Latino faculty, staff and students, many of the school's efforts have also aimed to address LGBTQ+ and women's initiatives. The Faculty Council undertook a salary review process to address gender inequities in compensation. RSPH conducted climate surveys in 2014-15 and again in 2017-18. Although these surveys elicited both strengths and suggestions for improvement, the climate surveys did not show improvements in numeric scores, despite the school's efforts. School leaders and faculty cited the		

		subjective nature of the surveys and noted that broader changes in national conversations, such as the Me Too movement, may have influenced these survey results. Nonetheless, school leaders intend to continue to monitor data on student, faculty, and staff perceptions of the environment. The faculty and staff indicted they were looking for better measures to assess progress toward their goals beyond numbers and statistics, which are not always indicative of the school's cultural climate and inclusive environment.		

H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment		Student advisement begins at the initial point of inquiry and continues to graduation. The school's core areas of advisement support are located in the Office of Admission and Student Services, the student's department or program, and the OCD. Led by an associate dean, the Office of Admission and Student Services oversees most school-wide functions associated with recruitment and admissions, orientation, community engaged learning, enrollment services, the REAL program, and student affairs. After admission, students are sent a series of communications directing them to an online admitted student portal. At this website, students can access support services and resources that are available from the Office of Admissions and Student Affairs, OCD, and the university. Thus, students can learn	Click here to enter text.	
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study				
Qualified individuals monitor student progress & identify and support those who may experience difficulty				
Orientation, including written guidance, is provided to all entering students				

		about support services available to them prior to matriculation. Academic departments and programs assign faculty advisors and staff directors to students. Staff assistant or associate directors support master's students within each academic department. Faculty advisor assignments are based on shared interests or background experiences, as communicated in the student's admissions materials. Students may request a change of faculty advisor. The staff directors advise students about their academic programs while working closely with department faculty, the Office of Admissions and Student Affairs, and the OCD. Students in programs of study pursuing a thesis select a faculty member to chair their thesis committee early in the program. The chair may not be the faculty member initially assigned as their faculty advisor. Initially, PhD students are assigned to a faculty advisor who shares similar interests. Later in their programs, PhD students may select a different faculty member to serve as dissertation advisor or as a member of their dissertation committee. The school's procedures ensure that students have access to engaged and knowledgeable advisors from the point of matriculation. During the site visit, advisors reported that they have an online dashboard for monitoring the progress of master's students in their programs. This information is used to identify students who may experience difficulty in progressing through their programs.		

		All new students attend an orientation program. For on-campus master's students, orientation takes place over five days before the first day of class. For orientation purposes, EMPH students participate in a two-week online orientation course, PRS 500D: Strategies and Resources for Online Learning. The orientation for new PhD students is conducted by the Laney Graduate School, the school, and faculty and staff in the six doctoral programs. During the site visit, student statements indicated high levels of satisfaction with academic advising. Included among these statements were praise for the support they receive in planning their practice experiences and competency attainment. Students indicated that both faculty and staff advisors were available and responsive to their questions, concerns, and life challenges. For the past three years, the school has used two online, self-report survey items to assess satisfaction with academic advising: 1) needs met by department-related services (e.g., academic advising, faculty) and 2) needs met by Student Services (e.g., enrollment services, registrar, admissions). Each year, 79% to 89% of the respondents agreed that their needs were met. Although these assessment efforts were relatively modest, they indicate overall student satisfaction with academic advising.		

H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & can provide career placement advice		Students and alumni all have access to the services offered by OCD, which includes support for interviewing and networking techniques, resume and cover letter consultation, and developing personal essays and elevator speeches. In addition, OCD staff offer a series of events for career advising including one-on-one appointments, mock interview events twice a year, career fairs twice a year, a special networking event each fall semester during orientation week, and a mentoring program. All career advising staff are qualified to work closely with MPH and PhD students on career and professional development. The director and most staff have MPH degrees and/or additional training and experience in counseling and related services. Career advising staff have an orientation schedule that is completed upon hiring and includes one-on-one training by experienced career advisors. New staff are monitored and receive ongoing training over the first six months. The self-study document explains the availability of career coaches to review student resumes and to discuss the student's career goals in public health. In addition, career coaches assist students with drafting cover letters, job searching, and connecting to networking opportunities. Career advising also includes offering information	Click here to enter text.	
Variety of resources & services are available to current students				
Variety of resources & services are available to alumni				

		sessions based on individual student needs. The sessions specifically address public health career pathways. The RSPH offers alumni career advising indefinitely. These services include refinement of interview skills, resume preparation, and networking skills. The self-study provides an example in which a career coach provided an alumnus with a list of contacts to help in the job search and guidance on improving the presentation of experience on his resume. Students who met with site visitors emphasize that it is necessary to be proactive to get what you want from the school's wealth of resources. Alumni mentioned the value in knowing that they can re-engage and use the formal services offered by the school. Specifically, students and alumni mentioned appreciating the clothing swap, mock interviews and resume review. Stakeholders, including employers, indicates that students appear well-prepared for interviews. The school collects career advising satisfaction data using the Graduate Outcomes and Exit Survey. The results of the survey indicate that the majority of students were satisfied with career advising over the last three years. The data for 2017-2018 suggested a dip in satisfaction, however the response rate was only 16% compared to 66% in 2018-2019.		

H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		The school has a comprehensive set of policies and procedures to handle student complaints and grievances. Relevant policies include the guidelines for Honor Code or Conduct Code violations and appeals, rules for appeal of grades, and the Student Grievance Procedure. The policies for student grievances are communicated through the website, the student listerv and at orientation. The associate director of programs and student services staff also advise students on the grievance process. The Honor Code process and the procedures for submitting a formal complaint are communicated throughout the RSPH catalog and are available online. Students have the opportunity to voice their concerns with the associate director of programs or another department official initially, and if the student desires to formalize the complaint outside the department, the student may submit the complaint to the associate dean of admissions and student affairs. The school expects all faculty and staff to be responsive to student concerns. Student interviews revealed that the student orientation is where students are informed of the complaint and grievance procedures, and students are familiar with their options.	Click here to enter text.	
Procedures are clearly articulated & communicated to students				
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel				
Designated administrators are charged with reviewing & resolving formal complaints				
All complaints are processed & documented				

		The SPH had recorded several grade appeals and two grievances over the past two years, including appeals for decisions of academic exclusion after four students were unable to raise their GPA above 2.70 and were excluded from the MPH program. The two formal grievances were related to concerns about specific faculty members, and both were resolved.		

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The RSPH has multiple recruiting activities, often beginning with data from the Association of Schools and Programs of Public health to identify prospective students across the country. The RSPH also participates in the Schools of Public Health Application Service to increase the applicant pool. In addition, the school participates in on-campus recruiting efforts, admission Information sessions, and sponsors Destination Public Health, a fall open house designed to stimulate interest in the public health programs. The SPH also has virtual recruitment fairs and several off-campus recruitment activities to recruit a diverse applicant pool such as the Atlanta University Center Graduate School Fair, Spelman College Health Careers Fair, and the National Hispanic Medical Association's Health Professional School Recruitment Event. The school outlines minimum requirements for admission into the MPH/MSPH programs, including completion of a baccalaureate degree, strong interest in a public health	Click here to enter text.	
Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers				
Tracks at least one measure that is meaningful and demonstrates success in enrolling a qualified student body				

		career, undergraduate grade point average of at least 3.0, and GRE or equivalent exam scores. Admissions decisions are made at the department level by faculty committees. Individuals may apply to multiple programs; if one department rejects an application, the application is then forwarded to the applicant's second and/or third choices for review. The departments then forward their decisions to the Office of Admissions. The doctoral program admissions process is completed through the RSPH and the university. Each doctoral program varies in its requirements and processes. Application requirements include some of the same requirements as the MPH/MSPH. However, doctoral students are also admitted based on alignment with faculty expertise, letters of recommendation, and the availability of an appropriate course of study. Master's degrees are not required for all doctoral programs. Although departments make the admission decision for doctoral students, the selection process is overseen by the Laney Graduate School. In addition, doctoral students receive stipends, therefore, admission decisions are also affected by the availability of funds to support the student during matriculation. The school is attracting well qualified candidates to the MPH/MSPH and doctoral degree programs, and the school has made a concerted effort to attract and enroll more URM students, noting that URM enrollment in MPH/MSPH programs has increased by 6% over three years. The SPH has also increased the number of Gates Millennial Scholars by 20% through recruitment efforts.		

		The RSPH selected two measures to gauge its success in enrolling a qualified student body. First, it tracks mean GPA for admitted students. The target is 3.5, and the school has not yet met the target, with a mean of 3.4 for each of the last three years, but the school continues to monitor this measure. Additionally, the school tracks the matriculation rate for returned Peace Corps Volunteers who are admitted, with a target of 50%. Performance on this measure has steadily increased over the last three years to 49% in the most recent year.		

H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to describe educational offerings are publicly available		The school's online catalogs and bulletins are publicly available. The information at these websites is accurate with regard to academic calendar, admissions policies, grading policies, academic integrity standards, and degree completion requirements.	Click here to enter text.	
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements				
Advertising, promotional & recruitment materials contain accurate information				

AGENDA

MONDAY, OCTOBER 28, 2019

8:30 am **Site Visit Team Request for Additional Documents**

8:45 am **Site Visit Team Executive Session 2**

9:00 am **Break**

9:15 am **Guiding Statements and Evaluation**

Participants	Topics on which participants are prepared to answer team questions
James Curran, MD, MPH – Dean, Rollins School of Public Health **Kimberly Jacob Arriola, PhD, MPH** – Executive Associate Dean for Academic Affairs **Richard Levinson, PhD** – Professor Emeritus, Former Executive Associate Dean for Academic Affairs **Delia Lang, PhD, MPH** – Assistant Dean for Academic Affairs	*Guiding statements – process of development and review?*
Kimberly Jacob Arriola, PhD, MPH – Executive Associate Dean for Academic Affairs **Richard Levinson, PhD** – Professor Emeritus, Former Executive Associate Dean for Academic Affairs **Delia Lang, PhD, MPH** – Assistant Dean for Academic Affairs **Kara Robinson, MS, EdD** – Associate Dean for Admission and Student Affairs **Claudia Paez-Ellett, MPH** – Assistant Dean for Career Development **Kathryn H. Graves, MEd, MPH** – Senior Associate Dean for Advancement and Alumni Engagement **Prudence Goss, MA** – Assistant Dean for Admission and Student Services	*Evaluation processes – how does school collect and use input/data?*
Dean Surbey, MA, MBA – Executive Associate Dean for Administration and Finance **Kimberly Maune, MHA** – Associate Dean for Administration and Finance **Mark Conde, BA** – Assistant Dean for Information Services **Tiarra Lewis, MHRM** – Division Director for Human Resources	*Resources (personnel, physical, IT) – who determines sufficiency? Acts when additional resources are needed?*
Dean Surbey, MA, MBA – Executive Associate Dean for Administration and Finance **Kimberly Maune, MHA** – Associate Dean for Administration and Finance **James Curran, MD, MPH** – Dean	*Budget – who develops and makes decisions?*
Total participants: 11	

10:30 am **Break**

11:00 am **Curriculum 1 (MPH/MSPH – traditional and distance-education programs)**

Participants	Topics on which participants are prepared to answer team questions
Delia Lang, PhD, MPH – Assistant Dean for Academic Affairs **Dawn Comeau, PhD, MPH** – Research Associate Professor, MPH Program Director, Behavioral Sciences and Health Education **Elizabeth Reisinger Walker, PhD, MPH, MAT –** Research Assistant Professor, Assistant Director for Office of Evidence Based Learning, Behavioral Sciences and Health Education **Howard Chang, PhD** – Associate Professor, MPH Program Director, Biostatistics and Bioinformatics **Melissa Sherrer, MEd** – Associate Director for Academic Programs, Biostatistics and Bioinformatics **Jeremy Sarnat, ScD** – Associate Professor, MPH Program Director, Environmental Health **Ariadne Swichtenberg, MSW** – Associate Director for Academic Programs, Environmental Health **Lauren Christiansen-Lindquist, PhD, MPH** – Research Assistant Professor, MPH Program Director, Epidemiology **Jena Black, MA** – Director of Academic Affairs and Enrollment Operations **Juan Leon, PhD, MPH** – Associate Professor, MPH Program Co-Director, Global Health **Theresa Nash, MS** – Associate Director for Academic Programs, Global Health **Sarah Blake, PhD, MPH** – Research Assistant Professor, MPH Program Director, Health Policy and Management **Kathy Wollenzien, MEd** – Senior Associate Director for Academic Programs, Health Policy and Management **Laurie Gaydos, PhD, MPH** – Research Associate Professor, Deputy Director, Executive MPH Program **Moose Alperin, EdD, MPH** – Research Assistant Professor and Director, Executive MPH Program	*Foundational knowledge* *Foundational competencies – didactic coverage and assessment* *Concentration competencies – development, didactic coverage, and assessment*
Total participants: 15	

12:15 pm **Break & Lunch Set-up**

12:30 pm **Students**

Participants (school leadership not included)	Topics on which participants are prepared to answer team questions
Shawnee Bernstein – GH 2nd year student **Sabastian Berry** – HPM 2nd year student **Ghenet Besera –** BSHE PhD student **Tassia Drame** – GEH 2nd year student **Leanna Ehrlich** – GH 1st year student **Taylor German** – BSHE 2nd year student **Taylor Juretic** – HPM dual degree student **Madison Lee** – EH 1st year student **Jungeun Park** – BSHE 2nd year student **Xinyi Li (Lili)** – GLEPI 2nd year student **Inam Sakinah –** HPM 2nd year student **Angela Udongwo** – GH 2nd year student **Connor Van Meter** – EPI MSPH 2nd year student **Bryan Vu** – EH PhD student **Alice Williams** – GLEPI 2nd year student **Sam Saxena** – BSHE 2nd year student **Yuxian Sun** – BIOS 2nd year student **Cindy Breeden** – Executive MPH, Prevention Science **John Shorter** – Executive MPH, Applied Public Health Informatics	*Student engagement in school operations* *Curriculum (competencies, APE, ILE, etc.)* *Resources (physical, faculty/staff, IT)* *Involvement in scholarship and service* *Academic and career advising* *Diversity and cultural competence* *Complaint procedures*
Total participants: 19	

1:45 pm **Break**

2:00 pm **Curriculum 2 (APE and ILE – traditional and distance-education programs)**

Participants	Topics on which participants are prepared to answer team questions
Claudia Paez-Ellett, MPH – Assistant Dean for Career Development **LaDawna Jones-Rowell, MPH** – Associate Director and Career Coach **Heather Zesiger, PhD, MPH** – Senior Director for Student Engagement **Colin Talley, PhD** – Research Associate Professor, APE Advisor, Behavioral Sciences and Health Education **Lisa Elon, MPH** – Senior Associate, APE Advisor, Biostatistics and Bioinformatics	*Applied practice experiences*

Ghada Farhat, PhD, MPH – Research Associate Professor, APE Advisor, Global Health **Qiang Zhang, MD, MPH** – Associate Professor, APE Advisor, Environmental Health **Ann Do, MD, MPH** – Research Associate Professor, APE Advisor, Epidemiology **Kimberly Jacob Arriola, PhD, MPH** – Executive Associate Dean for Academic Affairs	
Colin Talley, PhD – Research Associate Professor, APE Advisor, Behavioral Sciences and Health Education **Ghada Farhat, PhD, MPH** – Research Associate Professor, APE Advisor, Global Health **Qiang Zhang, MD, MPH** – Associate Professor, APE Advisor, Environmental Health **Ann Do, MD, MPH** – Research Associate Professor, APE Advisor, Epidemiology **Sarah Blake, PhD** – Research Assistant Professor, MPH Program Director, Health Policy and Management **Dawn Comeau, PhD, MPH** – Research Associate Professor, MPH Program Director, Behavioral Sciences and Health Education **Lauren Christiansen-Lindquist, PhD, MPH** – Research Assistant Professor, MPH Program Director, Epidemiology **Laurie Gaydos, PhD, MPH** – Research Associate Professor, Deputy Director, Executive MPH Program **Paige Tolbert, PhD** – Professor and Chair, Environmental Health **Kathy Wollenzien, MEd** – Senior Associate Director for Academic Programs, Health Policy and Management	*Integrative learning experiences*
Total participants: 15	

3:15 pm **Break**

3:30 pm **Site Visit Team Executive Session 3**

5:00 pm **Adjourn**

TUESDAY, OCTOBER 29, 2019

8:15 am **University Leaders**

Participants	Topics on which participants are prepared to answer team questions
Claire Sterk, PhD – President, Emory University **Dwight McBride, PhD** –Provost, Executive Vice President for Academic Affairs, Emory University **Jonathan Lewin, MD** – Executive Vice President for Health Affairs, Executive Director of Woodruff Health Sciences Center, CEO and Chairman of the Board, Emory Healthcare **Cathryn Johnson, PhD** – Senior Associate Dean, Laney Graduate School	*School's position within larger institution* *Provision of school-level resources* *Institutional priorities*
Total participants: 4	

8:45 am **Break**

9:15 am **Curriculum 3 – Doctoral Programs**

Participants	Topics on which participants are prepared to answer team questions
Kimberly Jacob Arriola, PhD, MPH – Executive Associate Dean for Academic Affairs **Kelli Komro, PhD, MPH** – Professor, Director of Graduate Studies, Behavioral Sciences and Health Education **John Hanfelt, PhD –** Professor and Interim Chair, Biostatistics and Bioinformatics **Steve Qin, PhD** – Associate Professor, Director of Graduate Studies, Biostatistics and Bioinformatics **Angela Guinyard, BA** – PhD Program Administrator, Biostatistics and Bioinformatics **Stefanie Sarnat, ScD** – Associate Professor, Director of Graduate Studies, Environmental Health **Ariadne Swichtenberg,** MSW – PhD Program Administrator, Environmental Health **Shakira Suglia, ScD** – Associate Professor, Co-Director of Graduate Studies, Epidemiology **Allison Chamberlain, PhD** – Research Assistant Professor, Co-Director of Graduate Studies, Epidemiology **Jena Black, MA** – Director of Academic Affairs and Enrollment Operations **Jason Hockenberry, PhD** – Associate Professor, Director of Graduate Studies, Health Policy and Management **Kent Tolleson, BS** – PhD Program Administrator, Health Policy and Management **Usha Ramakrishnan, PhD** – Professor, Director of Graduate Studies, Nutrition and Health Sciences	*Academic public health degrees*
Total participants: 13	

10:30 am **Break**

10:45 pm **Instructional Effectiveness**

Participants	Topics on which participants are prepared to answer team questions
Colleen McBride, PhD – Professor and Chair, Behavioral Sciences and Health Education **Elizabeth Reisinger Walker, PhD, MPH, MAT –** Research Assistant Professor, Assistant Director for Office of Evidence Based Learning, Behavioral Sciences and Health Education **Paige Tolbert, PhD** – Professor and Chair, Environmental Health **Tim Lash, DSc** – Professor and Chair, Epidemiology **Carlos del Rio, MD** – Professor and Chair, Global Health **Kenneth Thorpe, PhD** – Professor and Chair, Health Policy and Management **Jeremy Sarnat, ScD** – Associate Professor, Environmental Health **Dabney Evans, PhD** – Research Associate Professor, MPH Program Co-Director, Global Health **Barry Ryan, PhD** – Professor, Environmental Health and Appointment, Promotion and Tenure Committee Chair **Delia Lang PhD, MPH** – Assistant Dean for Academic Affairs	*Currency in areas of instruction & pedagogical methods* *Scholarship and integration in instruction*
Moose Alperin, EdD, MPH – Research Assistant Professor and Director, Executive MPH Program **Linelle Blais, PhD** – Research Associate Professor, Behavioral Sciences and Health Education **Cam Escoffery, PhD, MPH –** Associate Professor, Behavioral Sciences and Health Education **Laura Lloyd, MPH –** Associate Director, Region IV PHTC **Allison Chamberlain, PhD –** Research Assistant Professor, Epidemiology	*Extramural service and integration in instruction* *Integration of practice perspectives* *Professional development of community*
Total participants: 15	

11:45 am **Break & Lunch Set-up**

12:00 pm **Stakeholder Feedback/Input**

Participants (school leadership not included)	**Topics on which participants are prepared to answer team questions**
<u>Alumni, Community Partners, Practicum Supervisors and Employers:</u> **Theresa Bailey, MPH** – Consultant, Deloitte USA **Lisa Carlson, MPH** – APHA President, Executive Administrator of Research Programs and Operations, School of Medicine, Emory University **Darren Collins, MPH –** Client Service Leader, Slalom Consulting **Yvette Daniels, JD** – Director of University Relations, Georgia Department of Public Health **Trinita Ervin, BA, CHC** – Founder and CEO, Ladybug Foundation for Girls **Stein Esser, MPH –** Senior Consultant, Booz Allen Hamilton **Katie Fahs, BA** –Intern, Fellowships and Volunteer Coordinator, CARE USA **Amanda Garcia-Williams, PhD, MPH** – Behavioral Scientist, Centers for Disease Control and Prevention **Renata Hilson, MPH** – Community Benefit Manager of Strategy and Evaluation, Kaiser Permanente **Keisha Hunt, MPH, PMP** – President and CEO, Metas Solutions **Cynthia Jorgensen, DrPH** – Lead Education, Communications, and Training Team, Division of Viral Hepatitis, Centers for Disease Control and Prevention **John Lisco, MPH** – Senior Director of Finance, Council of State and Territorial Epidemiologists **Barbara Massoudi, PhD, MPH** – Senior Advisor, Public Health Informatics Program, RTI International **Eric Pevzner, PhD, MPH** – Chief, Epidemiology Intelligence Service, Centers for Disease Control and Prevention **Dave Ross, ScD** – President and CEO, Taskforce for Global Health **Elizabeth Sprouse, MPH** – Founder, Double Lantern Informatics **Samantha Lie Tjauw, MPH, MBA –** Research Scientist, Georgia Tech Research Institute **Sarah Yoss, MPH** – Senior Program Associate, Design, Monitoring and Evaluation, Carter Center	*Involvement in school evaluation & assessment* *Perceptions of current students & school graduates* *Perceptions of curricular effectiveness* *Applied practice experiences* *Integration of practice perspectives* *School delivery of professional development opportunities*
Total participants: 18	

1:30 pm **Break**

2:00 pm **Strategies & Operations**

Participants	Topics on which participants are prepared to answer team questions
Karen Andes, PhD – Research Assistant Professor, Global Health and Chair, Community & Diversity Committee **Carol Henderson, PhD –** Vice Provost for Diversity and Inclusion, Emory University **Kara Robinson, MS, EdD** – Associate Dean for Admission and Student Affairs **Prudence Goss, MA** – Assistant Dean of Admission and Student Services **Joanne Amposta, MPH** – Assistant Director of Student Life and Engagement **Hannah Nicol, MEd** – Assistant Director of International Student Affairs and ESL **Jena Black, MA** – Director of Academic Affairs and Enrollment Operations **Taylor German, BA –** 2nd year MPH student, Behavioral Sciences and Health Education **Tiarra Lewis, MHRM** – Division Director for Human Resources	*Diversity and cultural competence – who develops the targets, who reviews the data and how are changes made based on the data?*
Kimberly Jacob Arriola, PhD, MPH – Executive Associate Dean for Academic Affairs **Kara Robinson, MS, EdD** – Associate Dean for Admission and Student Affairs **Prudence Goss, MA** – Assistant Dean of Admission and Student Services **Ivone Foisy, MA** – Senior Director of Admission and Recruitment **Brittany Romanson, MPH** – Director of Admission and Recruitment **Claudia Paez-Ellett, MPH** – Assistant Dean for Career Development **LaDawna Jones-Rowell, MPH** – Associate Director and Career Coach **Heather Zesiger, PhD, MPH** – Senior Director for Student Engagement	*Recruiting and admissions, including who chose the measures and why did they choose them* *Advising and career counseling, including who collects and reviews the data* *Staff operations* *Complaint procedures*
Total participants: 15	

3:00 pm **Break**

3:15 pm **Site Visit Team Executive Session 4**

4:30 pm **Adjourn**

WEDNESDAY, OCTOBER 30, 2019

8:15 am	**Site Visit Team Executive Session 5**
12:00 pm	**Site Visit Team Working Lunch**
1:00 pm	**Exit Briefing** James Curran, MD, MPH – Dean, Rollins School of Public Health Kimberly Jacob Arriola, PhD, MPH – Executive Associate Dean for Academic Affairs Richard Levinson, PhD – Professor Emeritus, Former Executive Associate Dean for Academic Affairs Delia Lang, PhD, MPH – Assistant Dean for Academic Affairs Kara Robinson, MS, EdD – Associate Dean for Admission and Student Affairs Claudia Paez-Ellett, MPH – Assistant Dean for Career Development Dean Surbey, MA, MBA – Executive Associate Dean for Administration and Finance Kimberly Maune, MHA – Associate Dean for Administration and Finance Kathryn Graves, MEd, MPH – Senior Associate Dean for Advancement and Alumni Engagement Mark Conde, BA – Assistant Dean for Information Services Tiarra Lewis, MHRM – Division Director for Human Resources
2:00 pm	**Team Departs**