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October 20, 2011

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Dear Ms. Gaare Bernheim:

On behalf of the Council on Education for Public Health, I am pleased to advise you that the CEPH Board of Councilors acted at its October 13-15, 2011 meeting to accredit the MPH Program at the University of Virginia for a seven-year term, extending to December 31, 2018.

We are enclosing a copy of the Council's final accreditation report. The report is also being transmitted to the chief executive officer of your university as the Council's official report. This is identical to the team's report that you received prior to our meeting.

I would call your attention to the disclosure provisions in our adopted procedures. The program is expected to make its official accreditation report available to the public on request 60 days following the accreditation decision. The program may make the report (with the final self-study) available in full on its website, or it must clearly indicate on the website how to request a copy of either document. You may append a written response whenever you distribute the report. The official report also will be available on request from CEPH after 60 days, but it is our intent to refer all initial requests to you. If you provide this office with a copy of a written response by November 30, 2011, we will be pleased to append it whenever we respond to a request for the report. Please note that this response is optional. See p. 26 of the [Accreditation Procedures, amended June 2010](#) for additional information.

We would also like to remind you that whenever an accredited school or program undergoes a substantive change, it is obligated to provide written notification to CEPH of the intended change. Substantive changes are defined in the procedures manual, but generally include offering a new degree, adding or discontinuing an area of specialization, offering a degree program in a different format or at a distant site and making major revisions to the curricular requirements. Additional information about substantive changes is available on our [website](#).

We appreciated the many courtesies and helpfulness extended to the site visit team.

Sincerely,

Stephen W. Wyatt, DMD, MPH
President

Enclosure

cc: CEPH Councilors

**Council on Education for Public Health
Adopted on October 15, 2011**

REVIEW FOR ACCREDITATION
OF THE
MASTER OF PUBLIC HEALTH PROGRAM
AT THE
UNIVERSITY OF VIRGINIA

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
May 5 – 6, 2011

SITE VISIT TEAM:
David A. Pearson, PhD, MPH, Chair
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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH), the recognized accrediting body for public health schools and programs, regarding the MPH program at the University of Virginia (UVa). The report assesses the program's compliance with the *Accreditation Criteria for Public Health Programs, amended June 2005*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in May 2011 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, faculty, students, alumni and community representatives, and to verify information in the self-study document by reviewing materials provided on site in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

The MPH program is housed in the Department of Public Health Sciences (DPHS) in the School of Medicine (SOM), and the MPH degree is formally awarded by the Graduate School of Arts and Sciences (GSAS). UVa was founded in 1819 by Thomas Jefferson and the university's first class began in 1825, with 68 students and a faculty of eight. Today the university consists of 11 schools and offers 51 bachelor's degrees in 47 fields, 84 masters degrees in 67 fields, six educational specialist degrees, two first-professional degrees (law and medicine) and 57 doctoral degrees in 55 fields. UVa enrolls 21,000 students: approximately 56% of the student body is women and 26% is minority.

The UVa Board of Visitors approved establishment of the MPH degree in January 2003, and the State Council for Higher Education for Virginia approved the MPH degree April 14, 2003. Graduates of the program are employed in state and county government, non-profit agencies, healthcare and law.

The program was first accredited in June 2006, for a three-year term with the potential to extend the term by an additional two years based on interim reporting. In 2008, the Council accepted an interim report and granted the two-year extension of accreditation. This is the program's first review for re-accreditation.

Characteristics of a Public Health Program

To be considered eligible for accreditation review by CEPH, a public health program shall demonstrate the following characteristics:

- a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.
- b. The program and its faculty shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.
- c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.
- d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.
- e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the program shall offer the Master of Public Health (MPH) degree.
- f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the UVa MPH program. UVa is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools and the UVa MPH program has the same rights, privileges and status as other professional programs in the university. All MPH degrees offered by the program are structured with an ecological perspective. The newly established MPH/MPP degree; multidisciplinary faculty; and strong commitment to public service are evidence of the program's aims to promote multidisciplinary collaboration and foster professional public health values. The program currently receives funding from various sources, including state appropriations, university funds and research activities, and the resources are sufficient to support the program's offerings. The program continues to develop and implement new evaluation methods to ensure the professional preparation of its graduates. The program's faculty emphasize the importance of student knowledge and talent with the collaborative nature of the university and surrounding communities.

1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

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

This criterion is met. The program has a mission statement encompassing the three aspects of public health education: instruction, research and community service. The mission statement is as follows:

The mission of the University of Virginia (UVa) MPH program is to provide an interdisciplinary academic environment where students develop comprehensive public health knowledge, skills and professional values; where students identify and pursue individualized education and professional goals in research and practice; and where faculty and students collaborate with community partners on public health research and serve the community through public health interventions.

The mission statement results from an interactive process that involves comments invited from the faculty, staff and Strategic Planning Committee. The mission and goals are reviewed annually as part of the annual report by the Community Advisory Committee. The mission statement is disseminated through print materials such as MPH program brochures, recruitment materials and the MPH program website.

Goals are in place for each major function: instruction, research and service, and provide a context for the program's activities. The goals reflect a strong commitment towards instruction that employs interdisciplinary approaches; to allow faculty to explore diverse interests; to provide students with a rigorous education; and to ensure that students attain knowledge and competencies in the core disciplines of public health. The research goal reflects an academic environment that encourages and enables faculty, students and collaborating public health organizations to conduct research at the forefront of science and practice. Instructional goals offer students a variety of public health opportunities through coursework in their specialty tracks, field placements and culminating experiences to best prepare them for roles in the public health workforce. The MPH program also outlines a commitment to continually improve the health of populations by providing service and consultation to public health agencies and organizations at the local, state, national and international levels. A series of objectives quantify and support the goal statements.

The current values of the MPH program were developed by the Executive Committee. Values were carefully reviewed and vetted by the Faculty Curriculum Committee, the department and the Community Advisory Committee. The MPH program is guided by the following public health values:

- Excellence in instruction, research and service
- Health equity through community collaboration and advocacy
- Cultural humility
- Professional integrity and stewardship
- Teamwork, collaboration and cooperation
- Continuous quality improvement

Site visitors clarified some minor inconsistencies in language as it relates to the quantifiable areas of the objectives, such as wording inconsistencies in regards to measures of “at least 50%” compared to “over 50%.” After further inquiry during the site visit site visitors determined that the rubric in section 1.2 in the self-study is the most up-to-date and is therefore correct.

1.2 Evaluation and Planning.

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

This criterion is met. Evaluation and planning is built into the MPH program as a whole. The program has a structured evaluation and planning process that involves two approaches—a continuous review each year, and a comprehensive five-year evaluation cycle. The annual review involves ongoing collection of data and monitoring throughout the year, resulting in an Annual Evaluation Report that is reviewed by the Program Evaluation Committee and subsequently by the Faculty Curriculum Committee and the Community Advisory Committee. The MPH Executive Committee, in consultation with the MPH director develops an action plan based on the resulting recommendations.

The five-year evaluation cycle enables a systematic approach to both evaluation and planning involving review of the program’s mission, goals, objectives and competencies. During this phased process, comprehensive input is obtained from primary faculty and others who teach core courses, the Faculty Curriculum Committee, the MPH Executive Committee, the Community Advisory Committee, students, faculty who teach elective courses and field placement preceptors, among others. Program revisions follow a typical academic process of review and implementation involving the program director, division directors, department chair and dean.

During the site visit, program faculty (core and affiliated) provided various examples of the program’s use of evaluation and planning processes to assess program performance, develop and implement changes and evaluate subsequent outcomes. Examples included changes in course content, the creation of new courses and the designation of a field placement coordinator. A significant example described in the self-study and further explained during the site visit is “Pathways,” a successful program developed by a faculty member to address the challenge of recruiting minority students.

The self-study included an extensive table showing outcome measures, targets and achievements over the previous three consecutive academic years along with stated targets to be achieved by 2010. Of the over 50 measurable objective targets for 2010, only about 15% were not met. Faculty stated that a primary reason for not meeting these targets is that they are viewed more as aspirations than specific targets. The program has specific plans to address reasons why targets were not met and felt comfortable in stating that positive process will be made.

The program provided a comprehensive self-study document; the self-study was conducted during the period from the summer of 2009 through December 2010. Development of the self-study was primarily the work of the MPH Executive Committee that constituted themselves as the Self-Study Workgroup. This group obtained input from the Program Evaluation Committee, the entire DPHS faculty, the Community Advisory Committee, students, alumni and faculty.

1.3 Institutional Environment.

The program shall be an integral part of an accredited institution of higher education.

This criterion is met. The University of Virginia (UVA) is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. The university has been accredited since 1904. The university was founded by Thomas Jefferson in 1819 with the purpose of educating citizens in practical affairs and public service. The university offers a number of undergraduate, masters and doctoral programs across 11 schools. Figure 1 presents the UVA Organizational Structure.

The MPH degree at UVA was approved by the State Council of Higher Education for Virginia in 2003. The MPH degree is awarded formally by the Graduate School of Arts and Sciences (GSAS) and the MPH program is housed in the Department of Public Health Sciences (DPHS) in the School of Medicine (SOM). Figure 2 presents the Organizational Structure of the SOM. In addition to the MPH program the DPHS includes the Division of Biostatistics; Division of Patient Outcomes, Policy and Epidemiological Research; Division of Biomedical Informatics; and Division of Translational Research and Applied Statistics. The DPHS is headed by a chair who reports directly to the vice-president and dean of the School of Medicine. The chair directs the MPH program.

The president is the university's chief executive and academic officer, and has responsibility for the operation of the university in conformity with the purposes and policies determined by the Board of Visitors. The executive vice president and provost is charged by the Board of Visitors and president with overseeing education, research and public service in the college and GSAS, the other schools of the university, the university libraries and museums and other academically related units of the university. The vice president and dean of the SOM is the chief academic and administrative officer of the SOM and

is appointed by the vice president and provost with approval of the university president, rector and Visitors of the University.

The budgetary process at UVA is a year-long development process that involves all units, departments and administrative offices. A key factor in the process is that schools and departments are encouraged to fully utilize their available resources to meet the priorities that have been identified in the university's strategic planning efforts. The process culminates in the Board of Visitors reviewing and approving the annual budget for the university. Once the annual budget has been approved, vice-presidents, deans and directors of major units of the university have the flexibility to re-allocate available funds to their highest priority program requirements.

The dean of the SOM provides approval for the initiation of any search process for new faculty. Personnel recruitment is initiated at the department level, with the development of a job description and the establishment of a search committee. The SOM department chairs are responsible for the recruitment, management, compensation and retention of faculty in regard to the SOM strategic plans and multiple missions of the institution.

The vice-president and provost of the university provide faculty policies in the university's Faculty Handbook. All eleven schools publish policies for promotion and tenure decisions and for renewal of term appointments that apply to each school.

The MPH degree is awarded through GSAS; therefore the MPH academic standards and policies follow the rigorous guidelines of GSAS and are published in the official university GSAS Graduate Record. Per GSAS policies the procedure for adding, deleting or changing courses begins with the Faculty Curriculum Committee in DPHS. The Faculty Committee accepts proposals from faculty and generates proposals, which include detailed course descriptions with course goals and readings. After consideration and approval, the proposals are then submitted for departmental review. After review by other department faculty and Department Chair approval, the proposals are sent to GSAS. All additions, deletions or course changes must be submitted to the GSAS assistant dean of graduate programs or Committee on Educational Policy and the Curriculum (CEPC). The CEPC meets each month, September through May, and forwards its recommendations to the Faculty of Arts and Sciences. It is only when the full faculty approves additions, deletions or changes that they appear in the Graduate Record.

Figure 1. University of Virginia Organizational Structure

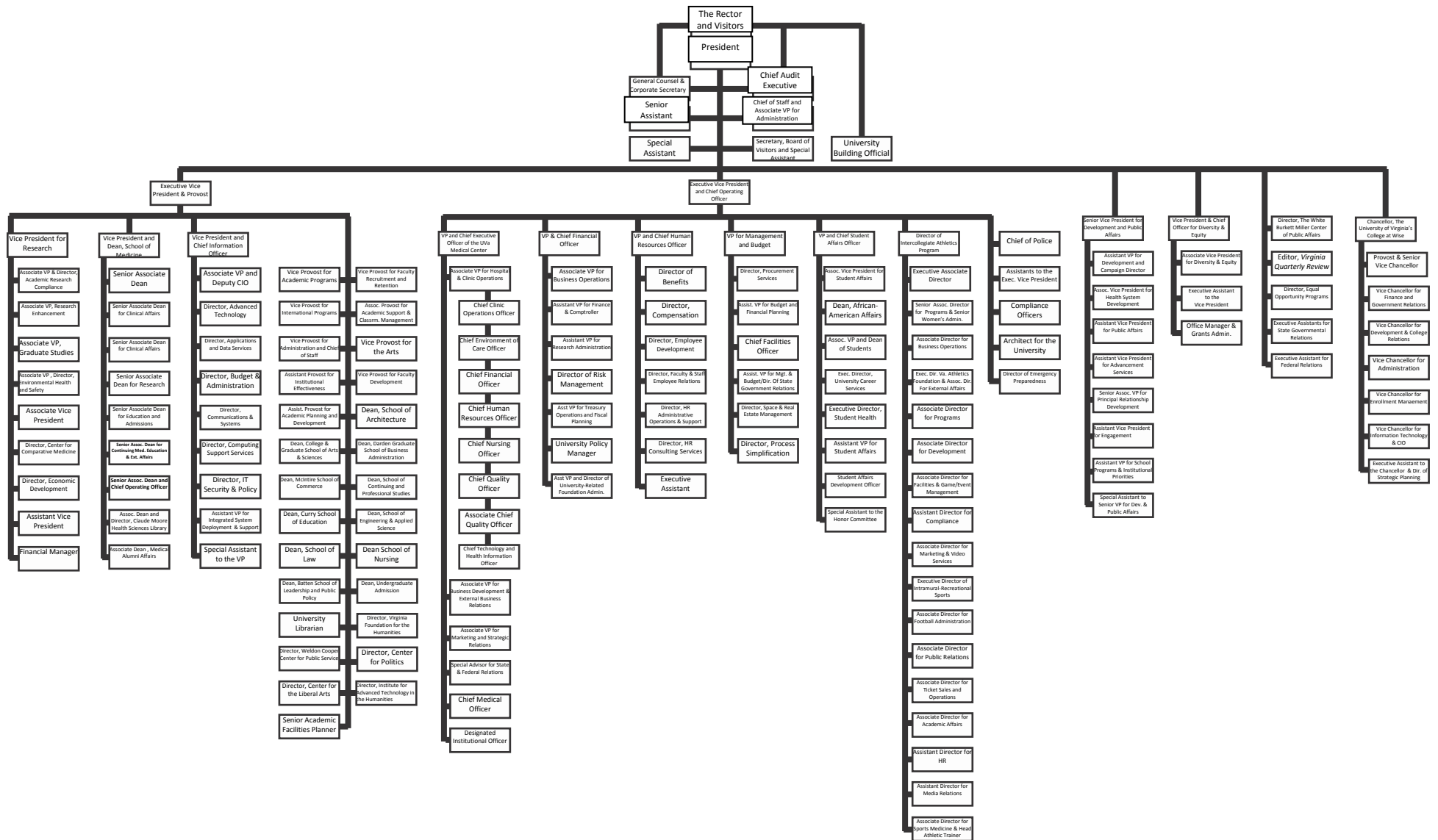
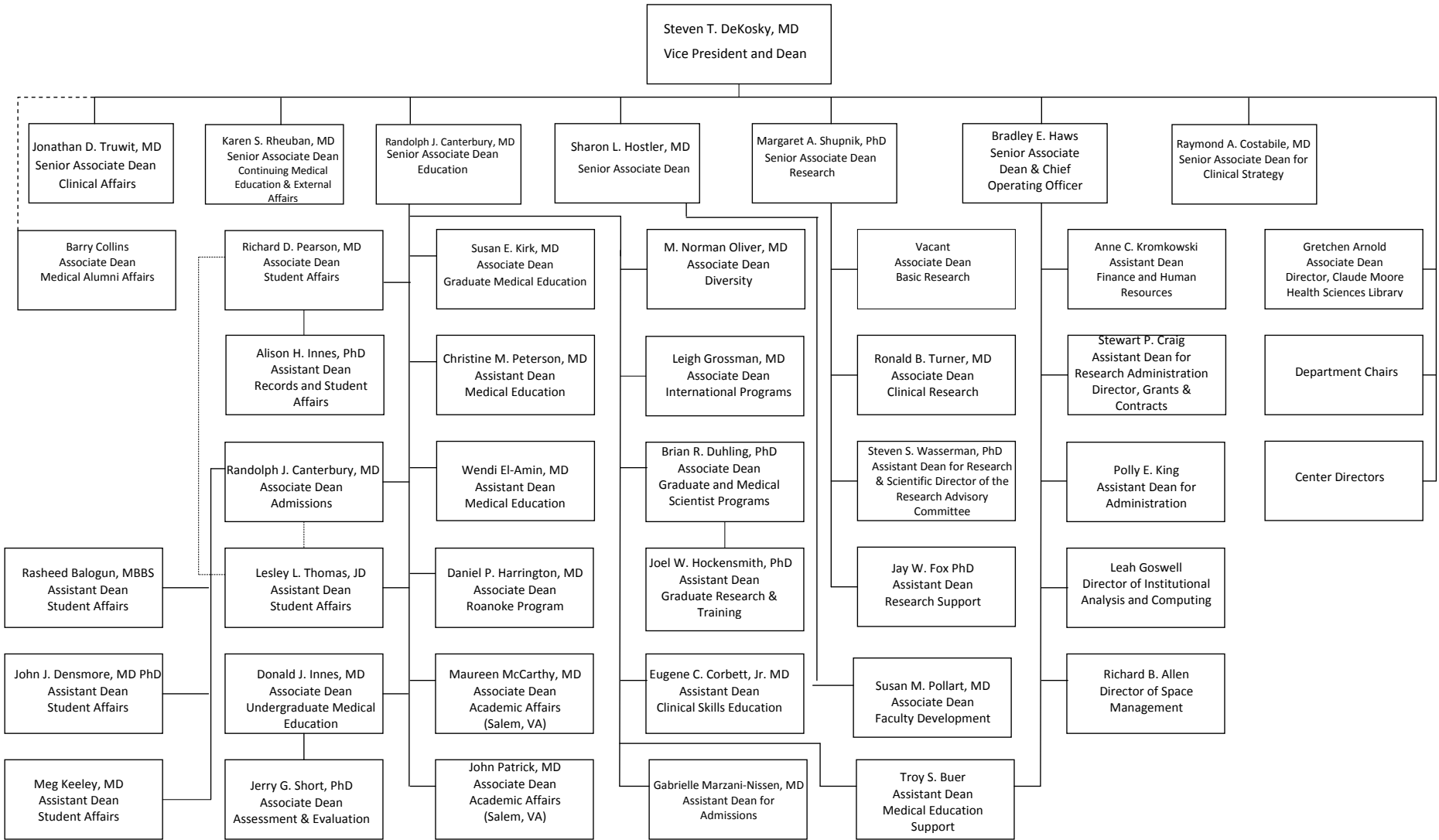


Figure 2. University of Virginia School of Medicine Organizational Structure



1.4 Organization and Administration.

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

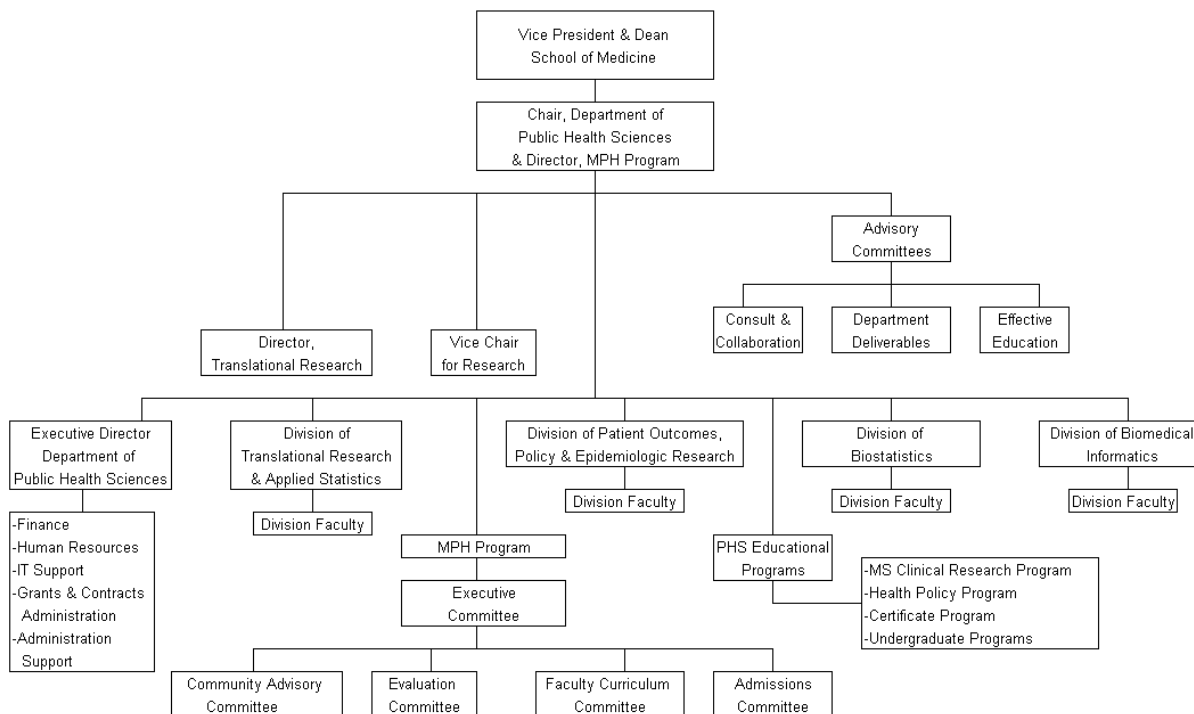
This criterion is met. Figure 3 shows the organizational chart of the DPHS. The MPH program director also serves as the chair of the DPHS. The MPH program director/DPHS chair is responsible for all financial decisions (budgets, allocation of funds to division faculty and staff and approval of expenditures); evaluating annually the performance of division directors and reviewing and approving the evaluations of DPHS faculty; establishing strategic goals for the department and approving division goals; approving all faculty hires; overseeing all academic and fiscal matters for the MPH program and other departmental educational initiatives; and chairing the department's advisory committees (Consult and Collaboration, Department Deliverables and Effective Education).

Departmental division directors report directly to the MPH program director/DPHS chair. Departmental division directors are responsible, for establishing division goals to contribute to the department's mission and overall strategic goals; mentoring and evaluating performance of division faculty; allocating division faculty to meet departmental educational and research need; formulating and recommending to the Chair funding priorities and requirements for the division; and keeping track of the promotion and tenure schedule and mentoring faculty.

Interdisciplinary work is part of the program's foundation, and its organization draws upon interdisciplinary collaboration; program faculty represent a wide range of disciplinary backgrounds, and core course instructors have training and experience in a variety of areas including public health, medicine, law, ethics, management, informatics, mental health, health policy, health promotion, health behavior, health services research, epidemiology, and statistics, among others.

The program has identified a comprehensive set of university and medical school guidelines that support its operation under principles that guarantee fair and ethical dealings and policies are readily available to faculty and students. These guidelines include a developed student grievance policy. No student grievances have been filed during the past three years. Students are introduced to professional ethics at the first day of orientation to the MPH program. Ethics are explicitly stated in the program's cross-cutting competencies and public health professional ethics are included in the public health competency self-assessment (ICAPP) that all MPH students complete three times during the MPH program. One of the most historic and respected traditions for fair and ethical dealings is the UVa Honor Code established in 1842.

Figure 3. UVa MPH Program Organizational Structure



1.5 Governance.

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

This criterion is met. The MPH program has developed and implemented a structure providing for an effective governance process. The program director has overall leadership and responsibility for all typical aspects of program administration. The program functions with five major committees: Executive Committee, Community Advisory Committee, Evaluation Committee, Faculty Curriculum Committee and Admissions Committee. Students are members of all committees except the MPH Executive Committee and participate in the consensus process. Students also participate in faculty searches via the interview process.

The MPH Executive Committee consists of six program faculty members and meets weekly; under the direction of the program director, it has oversight responsibility for the program’s four other major committees. The MPH Executive Committee has the following responsibilities: 1) coordinating overall planning; 2) evaluating academic policies, including student public health competencies, class sizes, admission activities and enrollment policies, field placement sites and culminating experience projects; 3)

monitoring student issues regarding admission and degree completion; 4) responding to special student circumstances (eg, performance issues); 5) functioning as a self-study workshop; and 6) reviewing opportunities to collaborate with other university departments and schools to enrich public health research and teaching in the MPH program.

The Community Advisory Committee meets each semester and consists of representatives from several community health organizations, program faculty and students. It provides guidance to strengthen the program activities that benefit the community. The Faculty Curriculum Committee meets each semester to evaluate MPH courses and programs of study and to ensure that the curriculum meets the needs of the practice community. The committee consists of all faculty who teach courses in the MPH program; a subcommittee meets with student representatives to obtain student feedback and input.

The Admissions Committee, which meets each semester, reviews and makes recommendations regarding student recruitment and admissions policies and procedures. The Program Evaluation Committee meets each semester and plans continuous measurement of MPH processes and outcomes.

In addition to these major and formal committees, the program has an ad hoc Continuing Education Committee that meets monthly and recommends outreach, reviews needs assessment data and is informed by the Community Advisory Committee. It coordinates the MPH program's workforce development efforts.

Program faculty currently hold or have held membership on various university and medical school committees, enabling the public health program to have visibility with both the medical school and the university. Examples include membership on the medical school's Promotion and Tenure Committee, the Institutional Review Board, and the university's Faculty Senate, among others. In addition, program faculty frequently participate as members of university faculty search committees

1.6 Resources.

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

This criterion is met. The DPHS provides financial support for faculty teaching and mentoring, research program administration, office and classroom space, computers, telephone and postage, office supplies and all incidental expenses related to the MPH program. The SOM dean, DPHS/MPH program director in consultation with the department's division directors, develop the budget each year for the DPHS. The budgetary process begins with the state legislature. There are three major sources of funds: 1) state appropriations, 2) other university funds and 3) research activities.

Since the MPH program’s finances and budgets are embedded in DPHS, the MPH program does not require separate income statements or other financial reports. Table 1 shows an estimate of funds and expenditures directly linked to the MPH program for the last three years.

Table 1. Estimated Sources of Funds and Expenditures by Major Category Directly Linked to MPH Program				
Source of Funds	Expenditure Category	FY09 (\$)	FY10 (\$)	FY11 (\$)
State Appropriation (MPH Addendum)	Faculty Effort	338,000	443,213	718,528
State Appropriation and University Funds (Public Health Sciences Budget and School of Medicine, Graduate School Arts & Sciences)	Faculty Effort	459,000	459,000	459,000
State Appropriation and University Funds (Public Health Sciences Budget and School of Medicine, Graduate School Arts & Sciences)	Administration, staff support	512,015	512,015	512,015
State Appropriation and University Funds (in-kind contribution)	Faculty Effort	230,000	239,334	309,334
Total		1,539,015	1,653,562	1,998,877

As shown in the self-study document, and verified at the site visit, the state appropriation MPH addendum has increased over 100% over the past three years from \$338,000 to over \$718,500. Senior university officials plus senior medical school administrators stated that they are highly supportive of the program. The dean of the medical school stated that the “program is unique and highly valued.”

Faculty resources are sufficient to meet the stated mission of the program and the CEPH standard for adequacy of faculty. The MPH program has 43 core faculty and a SFR of 3.3 for the Research in Practice concentration and a SFR of 1.6 for the Health Policy, Law and Ethics concentration. Of particular interest is the interdisciplinary mix of faculty. Faculty, students, alumni plus the senior medical school and university administrators view the interdisciplinary mix of faculty as a strength. Faculty collaboration with other units of the medical school and university was obvious to the site visitors.

Faculty and staff office space is adequate, as is conference and classroom space. The DPHS recently received additional space from the medical school dean. Regarding computers and servers, students and faculty interviewed during the site visit indicated that they were adequate to their needs. Similarly, students and faculty indicated that library resources and services are exceptional for both faculty and students. Site visitors learned that the librarian educates all MPH students regarding public health journal articles, bibliographies and public health terms.

The program works with a wide array of community partners that include local and state health departments, community-based organizations, schools, and health care facilities which provide resources for instruction, research and services. The strong relationships between the program and community public health agencies and organizations is viewed by faculty, students, alumni plus senior medical school and university officials as a program strength.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Master of Public Health Degree.

The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional masters degree. The program may offer a generalist MPH degree or an MPH with areas of specialization. The program, depending upon how it defines the unit of accreditation, may offer other degrees, professional and academic, if consistent with its mission and resources.

This criterion is met. The program currently offers two MPH concentrations. Table 2 presents the program’s degree offerings. A review of curriculum requirements shows an appropriate depth and level of required coursework in each concentration.

The program currently offers three dual-degrees: a MPH and Juris Doctorate (JD) degree granted from the School of Law; a MPH and Doctor of Medicine (MD) degree granted from School of Medicine; and a MPH and Master of Business Administration (MBA) granted from the Darden School of Business. The recently developed MPH and Master of Public Policy degree granted from the Frank Batten School of Leadership and Public Policy will admit its first students in fall 2012.

Table 2. Degrees Offered		
	Academic	Professional
Masters Degrees		
Research in Practice		MPH
Health Policy, Law and Ethics		MPH
Dual/Joint Degrees		
School of Law		MPH/JD
School Medicine		MPH/MD
School of Business		MPH/MBA
School of Public Policy*		MPH/MPP

*The MPH/MPP dual-degree program plans to admit the first dual degree students to the Frank Batten School of Leadership and Public Policy beginning in fall 2011. Students will likely begin as full-time MPP students and are not expected to matriculate as full-time MPH students until fall 2012.

Site visitors clarified that PHS 7000 – Introduction to Biostatistics is a three credit class that originally was a four credit class when it included a portion of a data analysis software course. This software course is now a separate one credit class which students have three options to choose from to meet this required

course. Site visitors also clarified that PHS 7180 – The Practice of Public Health is a one credit course that during the spring semester carries the course number 7181.

2.2 Program Length.

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

This criterion is met. The program of study for the MPH degree requires 42 credit hours for completion. The MPH degree consists of the following requirements: 20 credits of public health core courses, 12 credits of concentration-specific courses, three credits of practicum experience, three credits of culminating experience and four credits of electives.

Over the last three years, no MPH degrees were awarded for fewer than 42 credit hours of coursework.

Most courses are three teaching hours per week (50 minute hours) for a total of 15 weeks during the fall and spring semesters. This equates to a classroom time of two hours and 30 minutes per week for 15 weeks or 37.5 teaching contact hours/credit or 112.5 hours/course.

The MPH program has a policy not to accept any transfer credits from students that have been earned at other institutions to apply to the degree requirements of the MPH program at UVa. Site visitors learned that there has been only one exception to the policy for a student who transferred into the UVa MPH program in spring 2008 and graduated in summer 2009. The exception was viewed as a special case because of the individual's public health real-world experience, professional commitments to the local community's health and strong endorsement from the local health department director. The student was allowed to transfer nine credits (three courses) from another institution: Principles of Epidemiology, Introduction to Public Health and Statistical Methods I. A rigorous review process was conducted for acceptance of these credits. First, the MPH director reviewed the syllabi and requirements for the three courses to ensure academic rigor and alignment with the MPH program's introductory courses in these disciplines. Second, the MPH director wrote a letter of support to the GSAS associate dean. Third, the GSAS associate dean granted permission of the transfer of the credits. The student was still required to take second-level epidemiology and biostatistics courses from the UVa program and, thus, did take courses in the five core disciplines of public health while in the MPH program at UVa.

Site visitors learned that students with less public health experience, predominately those who enter directly from undergraduate coursework, are required to enroll and complete four course credits that do not count towards the 42 credit required credits for the MPH program. The four credits consist of two classes: Introduction to Research Methods (3 credits) and Community Engagement in Research and Policy (1 credit). The need for students to complete these four credits is reviewed on a case-by-case

basis. The site visit team also learned that students via their acceptance letters to the MPH program are highly encouraged to complete a free on-line statistics class before starting their first semester.

2.3 Public Health Core Knowledge.

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

This criterion is met with commentary. Students enrolled in the MPH program are required to complete five core courses and three required courses regardless of concentration. The core courses address core knowledge in public health and total 15 credits. These courses are the following:

- PHS 7010 Fundamentals of Epidemiology
- PHS 7000 Introduction to Biostatistics
- PHS 7380 Environmental Health: Principles and Practice
- PHS 7610 Health Promotion and Health Behavior
- PHS 7100 Health Care Policy and Management

The three required courses are PHS 7180 The Practice of Public Health, PHS 7050 Public Health Law, Ethics and Policy and a Data Analysis Software Course for a total of five credits. Students are allowed to choose from three options for the software class: PHS 6600 Quantitative Data Analysis in Public Health, PHS 7175 Geographic Analysis in Public Health and PHS 7170 Introduction to SAS.

No waivers are given for core courses due to the importance of public health knowledge that is found in the core courses and that every MPH student should attain to complete the program and retain for their career in public health.

The commentary refers to the basic public health knowledge area of health services administration. This knowledge area consists of “planning, organization, administration, management, evaluation and policy analysis of health and public health programs.” PHS 7100 Health Care Policy and Management was identified as meeting this requirement, but, according to its syllabus, it examines “the evolution of the US health care system from a health policy and health values perspective.” Of interest is PHS 7470 Management and Quality in Health Care Organizations an elective course that, according to its syllabus, provides students with “...major components and techniques of management for health care organizations including public health.” The content of this course appears to be more in line with the required knowledge area than PHS 7100.

2.4 Practical Skills.

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

This criterion is met. The MPH program requires a competency-based experience that places students in a practice-based situation. Sites for practicum experiences include local and state health departments, other state and federal agencies, international agencies and non-profits. Students must have completed at least one semester of course work before beginning the practicum and be enrolled in or have completed PHS 7180: The Practice of Public Health. MPH students regardless of concentration are required to complete a 200 hour (three credit) practicum experience. The course number for the practicum is PHS 8900. No students receive waivers for the practicum experience.

The MPH practicum is overseen and coordinated by the assistant director for field placements and culminating experiences who was hired in 2009. The field experience is individually tailored to students and requires much preparatory work before beginning the placement, including exploration of placement options through service projects, meetings with other public health staff and university faculty attendance at presentations and meetings of community and professional organizations and meetings with the assistant director to explore service and placement options with community partners and other organizations.

Students work with the assistant director and faculty advisor, where appropriate, to identify practicum sites and choose a site preceptor. The assistant director and students review the Individual Competency and Professional Plan (ICAPP) form that students complete upon entry into the MPH program to help identify appropriate field placements. The ICAPP contains two parts. In Part One, students describe their educational and professional goals and plans; in Part Two, students complete a competency self-assessment. At the completion of the ICAPP students identify those competencies most important to them in their individual goals and professional development. In addition to the ICAPP, review students review their concentration-specific competencies and select from a list of other practice competences in planning and preparation of their field placement. Students perform a competency self-assessment on those competencies at the midpoint and end of the placement.

Once students choose sites, the assistant director and students work with the organizations to define the scope of work and schedule the placements. Students are required to write a work plan that describes the proposed placement, which is approved by the preceptor and assistant director. All of this information is recorded on the Field Placement Form. Students may choose practicum sites that have ongoing collaboration with the MPH program or they may be newly identified sites. Careful consideration is given to new sites since the assistant director assesses the level of interest in the organization for working with students, the availability of appropriate preceptors, the existence of defined projects or tasks, and the availability of space and resources for students. The assistant director visits new sites in person and for distant sites assesses appropriateness of organization and preceptor via phone. The program director and/or MPH Executive Committee reviews these new sites for final approval. If approved the assistant

director sends a letter confirming the placement to each site. Practicum sites that have ongoing collaborative relationships with the MPH program are monitored for the above mentioned requirements to ensure that they continue to meet them.

Preceptors, whether at old or new placement sites, must be professionals with the appropriate education, experience and expertise to oversee students. Newly identified preceptors are evaluated on these requirements by the assistant director, who meets them in person or contacts them via phone. If necessary, the assistant director consults with the program director and/or the MPH Executive Committee to determine the eligibility of potential preceptors.

Students are required to review the Professional Preparation Checklist with the assistant director before beginning the field placement. Items contained on this checklist include: appearance and dress; attendance and punctuality; confidentiality; computer and telephone usage; illegal drug and alcohol use and professional communication.

Supervision of students during the practicum experience is shared between the assistant director and site preceptors. The assistant director provides general supervision of the field placement, while site preceptors supervise the day-to-day performance of students.

The assistant director works closely with students and preceptors to monitor and evaluate field placements. The assistant director contacts both students and preceptors by phone or email within the first two weeks and at the midpoint of placements to assess satisfaction of both parties and to troubleshoot difficulties. For placements extending over longer periods, the assistant director contacts both parties every six to eight weeks. Throughout the practicum experience students and preceptors may request a meeting with the assistant director to discuss any difficulties that exist with the field experience, and, if necessary, this meeting may include the program director and/or the MPH Executive Committee.

Students are required to complete a weekly field placement journal that records their hours, activities and reflections of their field placement which should include ongoing reference to the identified competencies. These journals are submitted to the assistant director at the midpoint and end of the placement. Students use these logs to prepare the midpoint and final evaluations.

Students complete a midpoint evaluation which includes: a description of the tasks, duties and responsibilities that they have been engaged in at the practicum; a description of the benefits of their field experience; analysis of how the practicum experience could be improved; and completion of the field placement competency self-assessment. Students are encouraged to discuss their competency self-

assessment with their preceptors to focus on competencies that may need more attention. The midpoint evaluation is submitted to the assistant director in hard copy or electronically.

Both students and preceptors complete an evaluation of the field experience upon its completion. Students provide the following: a final description of the tasks, duties and responsibilities that they completed at the practicum; a description of the benefits of their field experience; an analysis of how their field experience could have been improved; and a final competency self-assessment. Preceptors complete the Field Placement Preceptor Evaluation Form which, records student performance and feedback on the field placement experience (ie, helpfulness to agency/organization, usefulness of end product and likelihood to request another student).

The assistant director grades students' completion of the practicum experience as "Satisfactory" or "Unsatisfactory" based on fulfillment of the hours, duties described on the Field Placement Form and the final evaluations by site preceptors. Per UVa policy, Satisfactory/Unsatisfactory grades are not included in the calculation of student grade point averages for transcripts.

During 2008 – 2010, students performed practicum experiences at 31 different organizations located inside and outside of the Commonwealth of Virginia. Preceptors spoke very positively about student practicum experiences and the high degree of professionalism, knowledge and dedication of the students. Students do not view the practicum experience merely as an academic requirement but an opportunity to unquestionably assist community organizations and the people living in the surrounding communities. One preceptor explained that the students involved in a project at an elderly low-income high-rise community had made so much of a connection and improvement for the residents that the residents provided a celebratory dinner for the students. Preceptors mentioned the high motivation of students and the ability of students to work within diverse populations and to be aware and practice components of cultural competency. Finally, a representative from the Virginia Department of Health mentioned that her agency regularly considers the availability of student practicum experiences when planning and staffing projects. Site visitors learned from students that their practicum experiences really have allowed them to gain experience in community health and to practice public health in real world settings, which have reinforced their knowledge of public health and expanded their knowledge and abilities to work in the field of public health.

Students enrolled in dual degree programs are required to complete a practicum experience in order to meet the 42-credit requirement of the MPH program. The procedures to identify and carry out a practicum experience for a dual-degree student are the same as a stand-alone MPH degree student. Students receive guidance from both faculty advisors in the dual degree programs.

2.5 Culminating Experience.

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

This criterion is met. The culminating experience in the MPH program has three components: 1) a masters project; 2) an oral presentation; and 3) a professional portfolio. Students in both concentrations of the MPH program are required to complete the culminating experience for a total of three credits toward the end of their degree program. The course number for the culminating experience is PHS 8930.

Students are expected to spend approximately 150 hours on the masters project component. The topic and project may or may not be directly related to their practicum experience. Students receive guidance, including a detailed timeline, and assistance from their faculty advisors and the assistant director who also assists students with the practicum experience. The assistant director conducts meetings every other week to review completion of the project, writing tips, data summarization and presentation tips and oral presentation skills. The masters project is carefully planned as it entails a topic of students' interest; fits students' ICAPP-identified professional competencies and goals; addresses a real world public health problem or issue; has a flexible format; and focuses on MPH concentration-specific competencies. Both the faculty advisor and the assistant director sign the Culminating Experience Form to indicate approval of the topic and format for the project. A standard masters project is a paper 25-40 pages in length that contains the following: title page, abstract, table of contents, introduction, background and literature review, methods, results, discussion, conclusion and recommendations, acknowledgments, references and appendices. For a project with a non-standard format, appropriate components and requirements are discussed with and approved by the assistant director before the project is approved. Students receive feedback on their masters project as needed and requested from faculty advisors, the assistant director, other faculty members or the site preceptor (when appropriate). A completed masters project is reviewed and assessed by a minimum of two faculty readers, using the Masters Project Grading Rubric. Students choose faculty readers which are in their concentration areas.

Students are required to present their masters projects at the Masters Presentation Day, held at the end of each semester for graduating students. These presentations are announced and open to all faculty and students. Students provide a 10-minute Power Point presentation followed by a 10-minute question and answer session with faculty and other students. Students are assessed by a minimum of two faculty reviewers, using the Oral Presentation Grading Rubric. Site visitors learned from the MPH program director that presentations are highly attended by faculty members and other MPH students.

The last component of the culminating experience, the professional portfolio, was just implemented in 2010-2011. Students are required to create a professional portfolio in either hard copy (ie, a folder or

binder) or web-based format. The portfolio must contain the following: a current curriculum vitae; a copy of the masters project; a copy of the oral presentation slides; other relevant papers and presentations completed during the MPH program; a description of the field placement and any service projects and a description of competencies, substantive areas of expertise, professional skills and career goals not described in the curriculum vitae. Student portfolios are not evaluated as a requirement for the MPH program, but are instead a tool for students to seek employment and educational advancement.

Students receive a pass/fail grade on the culminating experience by the assistant director based on the Masters Project Grading Rubric, Oral Presentation Grading Rubric and completion of the portfolio. Students complete a Culminating Experience Final Evaluation that includes a competency self-assessment.

Site visitors reviewed several masters projects and Power Point presentations. Projects showed rigorous scholarship, professionalism and creativity. Site visitors also viewed three professional portfolios that showed student accomplishment, individuality and attention to detail.

Students enrolled in dual-degree programs are required to complete a culminating experience in order to meet the 42 credit requirement of the MPH program. The procedures to identify and carry out a culminating experience for a dual-degree student are the same as a stand-alone MPH degree student. Students receive guidance from both faculty advisors in the dual degree programs.

2.6 Required Competencies.

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

This criterion is met. The program has defined core competencies for the MPH degree, and these competencies are linked to the program's required coursework. For each concentration area, there are also clearly documented competencies and clearly-identified methods to routinely evaluate that these competencies remain aligned with the needs of the public health workforce.

The MPH program director reviews all syllabi annually and ensures the competencies listed are appropriate and engrained into all courses.

Competencies were created using a variety of measures, including a workforce survey in which employers were queried on the competencies needed for students to transform into public health professionals. Faculty update their competencies for each course they teach annually during their annual review period with the MPH program director. Additionally, alumni are surveyed annually to ascertain the

competencies they most utilize in their day-to-day work, and these results help inform the updates made to the competencies as well as the creation of new classes as needed.

During the site visit students shared that at least one student sits on the various committees, including the competency committee and their voice influences the direction of the program. Additionally, students report that they notice a distinct difference in their Individual Competency and Professional Plan (ICAPP) results as they progress through the MPH program, with their levels of competency soaring over where they were upon enrollment.

2.7 Assessment Procedures.

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

This criterion is met with commentary. The program uses various methods of assessing student performance in individual classes: exams, midterms, finals, research papers, class presentations, participation, group projects and discussions. MPH students are required to maintain an overall grade point average of 3.0 (on a four-point scale). Students who fall below the 3.0 GPA and/or earn a grade lower than a B- in any course are placed on academic probation. The MPH Program Director meets with the MPH Executive Committee to review the student's record, make recommendations and assess the student's improvement plan. Each improvement plan is individualized according to student need. The MPH Program supports the student's efforts to return to good academic standing. A student who fails to bring the GPA to 3.0 by the end of the next semester is in jeopardy of being expelled from the MPH program. Site visitors learned that in the last three years no students have been placed on academic probation and no students have been expelled from the program.

Faculty advisors also monitor student progress. Students are assigned one of seven advisors at the time of admission. Faculty advisors provide key guidance regarding course selection to ensure that program requirements are met, core and concentration-specific competencies are satisfied and student expectations regarding educational goals are met.

The program assesses student progress in achieving competencies with a self-assessment at entry in the program, during coursework, during the practicum, with the final submission of the master's project, with the oral presentation of the master's project and through self-assessment of competencies completed at the conclusion of the culminating experience.

The self-study presents summaries of data on graduate employment for the years 2007 – 2010. The top three destinations for MPH graduates during this time period were further education, health care, and proprietary and nonprofit.

The MPH program does not track the data for students who complete the Certified Health Education Specialist Exam (CHES) since professional certification is not required for the two concentration areas of the MPH program at UVA.

Qualitative data (n=3) from employers which was attained in the summer of 2010 shows positive feedback. Employers were pleased with the skills that MPH graduates possess and believe that graduates are prepared to be employees in the field of public health.

The MPH program contacts graduates on a yearly basis and asks them to respond to a survey regarding their preparation and use of public health skills and suggestions for additions to the curriculum. In the fall of 2010, approximately 50% of alumni responded to the annual survey. 100% of respondents reported that the knowledge and skills gained in the MPH program prepared them well for their professional roles in the two years following graduation.

The self-study provides graduation rates for MPH students for the time period of 2007 – 2010. The MPH program allows students five years to complete the degree. Graduation rates for 2007 – 2008 for both concentrations was 100% and graduation rates for the research in practice concentration for 2009-2010 was 86% and 89% for the health policy, law and ethics concentration. The point of commentary refers to the graduation history for the MPH students which show a graduation rate of 75% for the research in practice concentration for the 2008 cohort. Site visitors learned that this cohort contained four individuals and one individual left the program to accept an assistant professor position in family medicine. Due to the small number of students in the cohort the graduation rate slipped below 80%. The graduation rate for the health policy, law and ethics concentration for the 2008 cohort was 80%.

2.8 Academic Degrees.

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

This criterion is not applicable.

2.9 Doctoral Degrees.

The program may offer doctoral degree programs, if consistent with its mission and resources.

This criterion is not applicable.

2.10 Joint Degrees.

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

This criterion is met. The program currently offers three dual-degrees, and a fourth dual-degree, the MPH/MPP, will be open to its first students in fall 2011. Students in all four dual-degree programs register for one year as full-time MPH students in the GSAS, and take most of their MPH courses during that year. Students then finish their remaining MPH coursework (generally three courses) during the following year, while they take courses for their other degree requirements.

The first degree is the MPH/JD degree in collaboration with the UVa School of Law. Currently there are two students in the MPH/JD program: one student began the program in fall 2008 and the other student in fall 2010. The MPH/JD program is a four-year program where students must meet the admission requirements for both degree programs and complete all degree requirements for the two degrees for a minimum of 110 credits. Students may choose to complete either MPH concentration and currently both MPH/JD students are completing the health policy, law and ethics concentration. MPH/JD students usually complete their full-time MPH coursework after their second year of law school. Dual-degree students complete their practicum experience and culminating experience directly after the completion of the MPH coursework. Twelve credits (four courses) can be counted toward both degrees for students in the health policy, law and ethics concentration. A list of identified specific courses that may be counted toward both degrees does not exist due to the individualized nature of the MPH/JD program. MPH/JD students have flexibility in determining which, if any, courses to petition to ask for permission to double-count. As MPH students, they are allowed to seek permission to take up to two courses (six credits) from other schools, including law. As law students, they are allowed to petition to take up to two courses (six credits) from other schools. Students seeking permission to take a law course as part of the MPH program and/or to double count a law course must confer with their faculty advisors and request permission from the MPH director and MPH Executive Committee. MPH/JD students are encouraged to consider the following courses, which are cross-listed courses in both programs that count for both degrees: LAW 7073/PHS 7050: Germs, Guns and Lead: Public Health Law and Ethics, LAW 7034/PHS 7034: Food and Drug Law, LAW 7080/PHS 7053: Health Law Survey and LAW 9146/PHS 7146: Global Health Law and Policy. Students are not limited to taking and/or double-counting the above listed courses and are encouraged to explore other course options in the law school that address their particular policy and law interests and career goals. However, all MPH/JD students must receive permission from the MPH director and MPH Executive Committee before enrolling and attending any course that they are seeking to take as part of the MPH program or double count as a law course.

The second degree is the MPH/MD degree in collaboration with the UVa School of Medicine. Currently there are 14 students in the MPH/MD program: four students began the program in fall 2009 and 10 students began the program in fall 2010. The MPH/MD program is a five-year program where students must meet the admission requirements for both degree programs and complete all degree requirements for the two degrees. Students may choose to complete either MPH concentration, and currently eight

students are completing the research in practice concentration and six students are completing the health policy, law and ethics concentration. MPH/MD students usually complete their full-time MPH coursework after their third year of medical school. Students complete their practicum experience and culminating experience directly after the completion of the MPH coursework. As part of the MPH degree, MPH/MD students take the following three courses for a total of eight credits for which the School of Medicine provides medical school elective credits that count toward the medical degree: PHS 8900 Practicum, 8930 Culminating Experience and PHS 8960 Independent Research.

The third degree is the MPH/MBA degree in collaboration with the UVa Darden School of Business. Currently there is one student in the MPH/MBA program who began the program in the fall of 2009. The MPH/MBA program is a three-year program where students must meet the admission requirements for both degree programs. MPH/MBA students are required to take all 42 MPH course credits for the MPH degree. The MPH program does not count any courses from the Darden School of Business as credits towards the MPH degree. However, for the MBA degree, students are required to take only 52.5 credit hours from the Darden School of Business, instead of the usual 60 credit hours, as the Darden School of Business provides credit toward the MBA degree for students who have completed MPH coursework. Students may choose to complete either the research in practice or health policy, law and ethics concentrations, and currently the one student is completing the health policy, law and ethics concentration. MPH/MBA students may begin either program first and complete the practicum experience and culminating experience requirements for the MPH degree directly after completion of the MPH coursework. Students are required to use their elective courses to develop depth in areas that reflect the dual degree educational objectives and career interests. MPH/MBA students must submit to the MBA/MPH Program Committee a program of study that outlines how the degree requirements of each school will be met. The program of study must present a rationale of how the dual degree educational objectives will be achieved and the sequence of courses.

The last degree is the MPH/MPP degree in collaboration with the Frank Batten School of Leadership and Public Policy. The MPH/MPP will potentially admit the first student beginning in fall 2011. Students will likely begin as full-time MPP students and are not expected to matriculate as full-time MPH students until fall 2012. The MPH/MPP program is a three-year program where students must meet the admission requirements for both degree programs and complete all degree requirements for the two degrees. Specific courses that may be counted towards both degrees have not been identified for the MPH/MPP program due to the individualized nature of the program. The possibility to double-count up to two courses (six credits) exists since all MPH students, including those not in a dual degree program, may take one or two MPP courses that count toward the MPH degree. Students are required to seek permission from the MPH director and/or MPH Executive Committee to take a MPP course as part of the MPH Program and/or to double-count one or two MPP courses as dual-degree students. There is

flexibility in MPP classes since they vary from year to year, and since the Frank Batten School of Leadership and Public Policy is new and growing, more courses are added each year, so students have numerous choices based on their educational goals.

The site visit team learned that the MPH program director individually reviews all class selections for both dual-degree students and stand alone students to ensure the appropriateness of elective selection and competency alignment. Several dual degree students (ie, MPH/MD) commented positively on the class sequencing and transition of coursework they found in their dual programs. In dual-degree programs, faculty report that they often co-teach classes and as a result, are able to ensure that public health competencies are covered comprehensively, leaving students with a well-rounded experience and skill set.

2.11 Distance Education or Executive Degree Programs.

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

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

The program shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

This criterion is met. The program has an active research effort with external funding from numerous sources, including federal and state governments and private foundations. The research effort is supported by the medical school's Office of Research, its Office of Grants and Contracts and the DPHS' operations and grants manager. In addition to these administrative contributions, the faculty described other approaches to supporting research such as a mentoring program for junior faculty and research progress reports at division and department meetings.

Over the past few years, indirect cost recovery from grants and contracts has increased from \$29,658 to \$180,000. Similarly, funds from grants and contracts have exceeded \$2 million consistently over the past

five years indicating significant research activity. The program has specific measurable objectives and targets for faculty research productivity. For example, the program has met its stated target of \$100,000 research dollars per faculty FTE over the past three years. Examples of other targets include: 1) over 50% of faculty will have at least one peer-reviewed publication each year and 2) 50% of faculty will have research funding. Over the past three years, the faculty has significantly exceeded these targets. It is noted that whereas a research productivity target is that 75% of faculty teaching in the MPH program are to present scholarly work at least once each calendar year, only about two-thirds met that goal in calendar year 2010.

A review of faculty curriculum vitae revealed that program faculty are productive researchers including junior faculty who have various manuscripts under review in peer-reviewed journals plus manuscripts in preparation. Another indication of faculty productivity is measured by the stated target where the average impact factor (frequency with which the average published article has been cited in a particular year or time period) of at least three has been considerably exceeded in each of the past few years.

As indicated in the self-study and verified during the site visit, program faculty have a seriousness of purpose about undertaking community-based research. This is evidenced by contributions of both faculty and students to the Virginia Department of Health (Community Cancer Prevention & Control Program); Thomas Jefferson Health District (community needs assessment, infant mortality project, mental health outcomes); and Southwest Virginia Health Authority (health disparities). It is also noted that many students have published in peer-reviewed journals, have submitted manuscripts for publications and are currently undertaking research projects. An additional measurement target of the program's research success is that at least 50% of faculty will offer students opportunities for research; this has been exceeded over the past few years.

3.2 Service.

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

This criterion is met. The commitment to service found in the MPH program is deeply rooted in the university's Jeffersonian tradition that emphasizes public leadership and service. In alignment with programmatic goal E, as stated in the self-study: "to work continually to improve the health of populations by providing service and consultation to public health agencies and organizations at the local, state, national and/or international level," both students and faculty have demonstrated a commitment to service. Each year students, lead by a faculty advisor, provide a variety of services to two or more community agencies. In doing so, they are able to apply their public health skills while furthering the health of their community.

Examples of agencies and tasks completed include Crescent Halls, in which students conducted a needs assessment of the senior citizen public housing community. Findings were presented to the Charlottesville Housing Authority where they were praised for being low-cost and high-impact. During site visitors' discussions with community agency members, stakeholders provided a clear description of the assessment as well as the evaluation process and indicated that the work of the students and faculty members was invaluable. The vice-mayor shared that the residents held a celebratory dinner in honor of the students, thanking them for their work and commenting on the diversity of the student body. At the Region Ten Community Services Board, students conducted a needs assessment and literature review and prepared policy documents and customer satisfaction surveys. Several other examples of community agencies and student service involvement were provided in the self-study. Students shared with site visitors their belief that the MPH program "is a collective individualized program with strong faculty that provides community-based real world experience." Students also stated that "the program is individualized, interdisciplinary and teaches students broad frameworks and critical thinking skills, leaving them well-equipped to address public health issues in the community."

Faculty service efforts are robust in nature and include service projects with the Virginia Department of Health, Virginia Public Health Association, National Institutes of Health Study Sections and American Public Health Association Statistics Section.

The MPH program has reported success in the goal on a variety of measures as outlined in the self-study, via outcome data collected through a variety of student, faculty and community surveys.

3.3 Workforce Development.

The program shall engage in activities that support the professional development of the public health workforce.

This criterion is met. The program actively contributes to workforce development through its partnerships with the Virginia Department of Health, Virginia Public Health Association and the Commonwealth Public Health Training Center. The program conducts regular needs assessments of the local workforce and provides a range of training opportunities to advance the profession. Through the Commonwealth Public Health Training Center the program is exposing youth to public health as a viable career and has created a certificate program using state-wide training conferences.

New courses are designed based upon a needs assessment with fieldwork proctors as well as through direct requests from groups with whom the faculty have developed professional partnerships. This training is provided in-kind by university faculty. During the meeting with the community partners, individuals from the local public health department shared that they received training in Microsoft Excel as well as Point in Time, statistical analysis and data collection techniques. Other agencies also reported

similar trainings as well as Microsoft Access, quality assurance and team development, using the new Myers-Briggs system. Community partners are also able to audit classes in the MPH program to help them develop their personal public health skills.

During the recent H1N1 outbreak, the Virginia Department of Health needed to form a response quickly and accurately. They called upon the MPH faculty and students to assist with training as well as to provide extra hands to help control the outbreak. Virginia Department of Health employees all commented that their relationship with the university and the MPH program along with the knowledge that they would receive a highly trained and qualified group of professionals who answer the call for help, make them feel confident in times they may need to expand the scope of their workforce quickly.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The program has a clearly defined, multidisciplinary faculty with well-defined qualifications and relevant backgrounds. Full-time faculty are recruited and selected based on academic preparation, teaching experience/potential, demonstrated research activity/potential and career experience. Part-time faculty are recruited and selected based on their academic preparation and experience in the practice community. The result is that MPH students have a balance between academic concepts and theory and applied practical experience. Students and faculty stated that this combination provides effective and meaningful learning experiences.

Of the 10, 100% full-time faculty, eight have doctoral degrees (four PhD, one DrS, one JD, two MD), one has a PhD in progress and one has an MA degree. Of these 10 full-time faculty members, one is a full professor, five are associate professors, three are assistant professors and one is a research assistant working on a PhD.

Of all 26 faculty members identified as primary faculty, 22 have doctoral degrees (15 PhD, four MD, two JD, one DrS, plus one PhD in progress); three faculty members have masters degrees. Of these 26 primary faculty members, seven are full professors, nine are associate professors, seven assistant professors, two are lecturers and one is a research assistant. Of the 16 secondary and adjunct faculty, 15 have doctoral degrees (10 PhD, three MD, and 2 JD); two have masters degrees.

Appendices to the self-study document contained a listing of the primary program faculty who have significant public health experience in the field of practice; evidence of this was obtained in a review of

faculty curricula vitae. Faculty integrate perspectives from the practice community through their participation in local, state and national public health conferences, plus their collaboration with public health practitioners via research and service projects. Further, perspectives from the field are integrated into the program via public health professionals who have secondary/adjunct appointments and teach program courses.

4.2 Faculty Policies and Procedures.

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

This criterion is met. All program policies, procedures and operating guidelines pertaining to the recruitment, appointment and promotion of faculty are governed by established university and medical school regulations. These policies and regulations are published and readily available to the faculty.

Faculty services (development, instructional support, etc) are comprehensive and open to all faculty, full-time and part-time. Program faculty have three opportunities for faculty development— at the university, the medical school and the MPH program. The university's vice provost for faculty development provides various opportunities. Examples include: 1) Teaching Resource Center; 2) Faculty Mentoring Incentive; 3) Institute for Faculty Development. The medical school's Office of Faculty Development has various leadership and mentoring programs among them are activities designed to support and provide new faculty with the skills necessary to facilitate a successful career in academia. The MPH program provides some funding for faculty to develop particular professional expertise as evidenced by recent support for one faculty member to attend a summer institute on social and behavioral health and health disparities at Johns Hopkins Bloomberg School of Public Health. It should also be noted that all university faculty have access to \$2,000 annually, after the first year of employment, which may be used for faculty development.

Full-time faculty are evaluated annually, as required by the medical school. Faculty self-assess their teaching performance, professional development, scholarly and research productivity, contributions to the university and their community and professional service. The division and/or program chair discusses these evaluations with each faculty member and sets goals and expectations for the upcoming year. Faculty from other departments of the medical school and from other units of the university are evaluated by their respective units.

Service is one of the three activities used to evaluate faculty for re-appointment and/or promotion. Service is viewed by the university to consist of activities benefiting the faculty member's profession, the community or the university. The self-study appendix contains a statement of the "MPH Service Policy" which describes efforts by both faculty and students. Examples of faculty and student service activities were described above in Criterion 3.2.

4.3 Faculty and Staff Diversity.

The program shall recruit, retain and promote a diverse faculty and staff, and shall offer equitable opportunities to qualified individuals regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met with commentary. As shown in the self-study document, 4% of core faculty are African American, 81% are Caucasian, 4% are Hispanic/Latino, and 11% are Asian/Pacific Islander. Similarly, of the six full-time staff members, 17% are African American, and 83% are Caucasian.

The commentary relates to the fact that the program recognizes that it has not met all of its outcome measures of program faculty and staff diversity. The program follows university policy on equal opportunity and affirmative action. Faculty in recruitment search committees must undergo an internal certification process that includes two training modules on the imperative for equal opportunity and affirmative action practices.

Regarding retention and promotion of faculty, the school of medicine has faculty development programs that focus on ways to identify and address explicit bias and cognitive errors in a leadership training program (Leadership in Academic Matters); five program faculty have completed this training. The medical school's Office of Diversity (the Associate Dean for Diversity has a secondary faculty appointment in the program) works with faculty to maintain an environment supportive of diversity.

4.4 Student Recruitment and Admissions.

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

This criterion is met. Utilizing a variety of recruitment events and strategies, the MPH program has succeeded in identifying individuals who are qualified for graduate-level education. Being an interdisciplinary program maximizes the opportunity to cross-pollinate other degree fields by offering dual-degrees JD, MBA, MD and MPP programs.

The DPHS is responsible for the recruitment and admission process into the MPH program. Through committee, they review each application and base decisions on the whole individual, not just on merit or GRE score; however the average GRE scores in the 2007-2008 and the 2008-2009 school years exceed 1300, with a slight dip in the average score in the 2009-2010 school year to just over 1000. Students demonstrate strong GPAs, test scores and the ability to succeed in graduate education.

The DPHS has also sought out other creative measures to attract students to the program. A handful of “5 year” students gain admission directly from their undergraduate programs at UVA. These students have demonstrated exceptional knowledge and skills and choose to take a selection of graduate level classes in the public health program while enrolled in their undergraduate programs. This provides these students with a taste of the public health field. Upon graduation, they are then able to apply for the MPH program and if accepted (which most are) they can carry the previously-completed units over to the graduate degree as long as they have not used those units to earn their undergraduate degree.

In an effort to recruit and retain students from under-represented groups, one faculty member helped to create the “Pathways” program, in which outreach is conducted to undergraduate students from historically under-represented groups. Upon admission students of under-represented groups have access to a “Pathways” advisor who provides additional coaching, support and advising throughout their time in the program. Four students identified themselves as “Pathways” students during a meeting with the site visit team. One student shared that she had not heard of public health until this program came to her school. Others commented that the program helped them in identifying their place in the program and the direction in which they wish to take their careers.

With approximately 33-65% of all applicants accepted and 20-25% of applicants actually enrolling in the program, class sizes remain small with a low faculty- to-student ratio. Faculty note the the leading reason why students opt to go elsewhere is the lack of scholarships and financial aid available in the department. This information is collected through phone calls one faculty member makes to each applicant to ask if they have any questions and if they would mind sharing why they decided not to enroll in the program.

4.5 Student Diversity.

Stated application, admission, and degree-granting requirements and regulations shall be applied equitably to individual applicants and students regardless of age, gender, race, disability, sexual orientation, religion or national origin.

This criterion is met. Policies and procedures governing student diversity are outlined and guided by the university. Separate policies and guidelines do not exist for the MPH program but are incorporated into the goals and objectives of the program, highlighting the program’s commitment to diversity and equity.

Through its “Pathways” program, the MPH program conducts outreach and mentoring to prospective students from historically under-represented groups to enroll in graduate level public health education. It provides opportunities for prospective students to be exposed to a wide array of public health issues, sparking interest in the field. During the 2009-2010 academic year the MPH program also received a grant from the Association for Teaching, Prevention and Research to build collaboration with Historically Black Colleges and Universities to create undergraduate curricula in public health issues and to speak

about public health and career opportunities with prospective students. This grant was responsible for the matriculation of nine new MPH students during that year.

When compared to census data for the area they serve, the program's student body closely resembles the population, with 50% of applicants being White, 17% Asian, 16% African American, 15% Other and 5% Hispanic.

Site visitors learned from preceptors that local residents of an elderly low income high rise community where MPH students frequently provide service activities were very pleased to see that so many African American students were enrolled in the MPH program and attending the university. Students shared with site visitors that they are "very grateful for the strength of the faculty, the versatility of the curriculum, the diversity of the student body and the involvement of the community in the public health program."

4.6 Advising and Career Counseling.

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

This criterion is met. The program provides a half-day orientation program at the start of each academic year. New MPH students have the opportunity to meet the MPH program director/department chair, the faculty and program staff. During orientation the following are reviewed: academic expectations, MPH program competencies, rules, procedures, library resources and university resources. Students have the opportunity to meet faculty and other students at a reception following the orientation. All students receive a copy of the Student Handbook, which includes an overview of the MPH program; organizational structure of the MPH program, curriculum overview, course descriptions, MPH program competencies, student grievance policies and university resources.

Students have access to the MPH program director/department chair, assistant director for field placements and culminating experiences, academic advisor, teaching faculty and field placement preceptor for advising to ensure their coursework is on track. Students are assigned one of seven academic advisors upon entry into the MPH program. Academic advisors are assigned based on student background, interests and concentration selection. Students in the "Pathways" program also meet with the "Pathways" advisor for support and consultation as needed. The satisfaction rate as measured in the student exit survey shows highly favorable scores, with satisfaction ranging from 4.7- to 5.0 on a 5.0 scale.

During the site visit, students unanimously identified the easy access to faculty as one of the top strengths of the program, along with the ability to tailor the program, their fieldwork and their culminating projects to their interests. Students and alumni both reported that the faculty were very helpful in

assisting them to identify interests and find opportunities for internships, service work or global projects that matched. Faculty also keep students and alumni informed of job openings in the community and tend to remember their specific interests, sending specific announcements tailored to their interests. Faculty work closely with the Virginia Public Health Association to conduct and participate in a career fair and tap into the strong connections they hold in the community to allow opportunities for networking, mentorship and jobs. MPH students have the opportunity to utilize the University Career Counseling Services Center which provides assistance with job interviewing skills, resume preparation and job search skills. Dual-degree program students also seek career services through their parent school.

The university has outlined procedures in place to provide students with a venue to file complaints or voice their concerns. The procedure starts with their professor, proceeds to their advisor, subsequently to the department chair and then can be escalated to the president of the university if needed.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

University of Virginia MPH Program

May 5 – 6, 2011

Thursday, May 5, 2011

- 8:00 am Site Visit Team Pick-Up from Hotel
Jeanita Richardson
- 8:30 am Site Visit Team Request for Additional Documents
Ruth Gaare Bernheim
Armando Bolmey
- 8 45 am Site Visit Team Review of Resource File
- 9:30 am Break
- 9:45 am Meeting with Program and Department Administration
Ruth Gaare Bernheim
Armando Bolmey
Tracey Brookman
Paige Hornsby
Aaron Pannone
Jeanita Richardson
- 10:45 am Break
- 11:00 am Meeting with Public Health Faculty (all)
Ralph Allan
James Childress
Mark Conaway
Jean Eby
Carolyn Engelhard
Thomas Guterbock
Paige Hornsby
Wendy Novikoff
Armando Bolmey
Rebecca Dillingham
Kelly Near
- 12:00 pm Break and Travel to Lunch
- 12:30 pm Lunch with Community Representatives, Employers and Preceptors
Musa Ansari
Elizabeth Davies
Gretchen Ellis
Warren Grupe
Nancy McLaren
Lilian Peake
Mary Sullivan
Erika Viccellio
Holly Edwards
Peggy Paviour
Tara Blackley
Jeff McDaniels
Eric Myers
- 1:40 pm Break and Travel Back to Meeting Room

2:00 pm Meeting with Public Health Faculty (all)
Wendy Cohn
James Harrison
Aaron Pannone
Jeanita Richardson
George Stukenborg
Tanya Wanchek
Kristen Wells
Gerry Learmonth
Tom Leonard
Lois Shepherd
Aaron Mills
Mimi Foster Riley

2:45 pm Break

3:00 pm Resource File Review and Executive Session

4:00 pm Meeting with Students and Alumni
Justin Halls
Kelsie Kelly
Jessica Leach
Gift Oboite
Lesakaye Holtham
Bridget Long
Moiria Smith
Nadia Huq
Matt Hitchcock
Jane Gurnick
Stephen Merrill
Bryan Long
Laura McLaughlin
Michael Marquardt
Chris Winstead-Derlega
Nicole Kelleher
David Chen
Yan Ge
Laurie Archibald
Benj Kozower
Edward Strickler
Emily Moore
Elizabeth Fenton
Amy Askew

5:00 pm Adjourn

Friday, May 6, 2011

8:00 am Site Visit Team Pick-Up from Hotel
Jeanita Richardson

8:30 am Meeting with University Provost
Arthur Garson, Jr.
J. Milton Adams

9:00 am Meeting with Deans School of Medicine
Steven T. DeKosky
Randolph J. Canterbury

9:30 am Break and Return to Meeting Room

9:45 am Executive Session and Report Preparation

11:30 am Working Lunch, Executive Session and Report Preparation

12:45 pm Exit Interview