



**THE OHIO STATE
UNIVERSITY**

COLLEGE OF PUBLIC HEALTH

<http://cph.osu.edu/>

Self-Study

**Submitted to the
Council on Education for Public Health**

September 16, 2016

INTRODUCTION

Public health began as a discipline in 1914 at The Ohio State University College of Medicine. As the discipline grew over several decades, it became a Division of Public Health emerging as an independent college in 2007. The College of Public Health is committed to the land grant mission of Ohio State as stated in the 1862 Morrill Act signed by President Lincoln "...to promote the liberal and practical education of the industrial classes in the ... professions in life." Our collective goal in the College of Public Health is to build sustainable partnerships with all of the colleges and academic units at The Ohio State University together with our partners in the community and government to improve public health and well-being for all of Ohio. We believe the lessons learned in Ohio from addressing our major public health challenges (see figure below) can be scaled to address similar challenges in the nation and around the world.

In 2016, *U.S. News & World Report* ranked Ohio State 19th of all Schools of Public Health, 12th among public Schools of Public Health; MHA program ranked 10th. The College of Public Health is organized by divisions and centers to support our programs in teaching and learning, research, outreach and engagement. As shown in our current [Strategic Plan \(2014-2017\)](#), the College is using its organizational structure to facilitate the entire university community to become engaged and to address the major public challenges in Ohio from infant mortality to cancer deaths to obesity.

Divisions

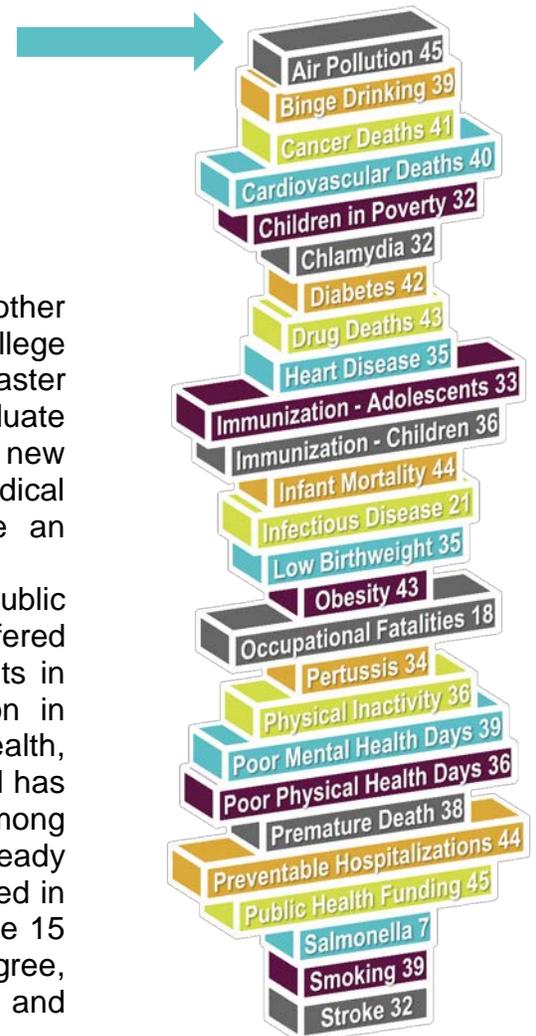
- Biostatistics
 - Environmental Health Sciences
 - Epidemiology
 - Health Behavior & Health Promotion
 - Health Services Management & Policy
- Centers:
- Center for Health Outcomes Policy and Education (HOPES)
 - Center for Public Health Practice (CPHP)
 - Center of Excellence in Regulatory Tobacco Science (NCI funded)

The College currently has 44 full-time faculty with another five faculty committed to join our college in 2016. The college offers a spectrum of academic opportunities including master (MPH, MHA, MS) and doctoral (PhD) degrees. In our graduate programs, the College of Public Health has developed new specializations since our last accreditation in biomedical informatics (MPH, MS). Our joint programs help create an unsurpassed learning environment at Ohio State.

In addition, an undergraduate bachelor of science in public health (BSPH) degree and two undergraduate minors are offered by the college. The college admitted its first BSPH students in 2012. It was launched with interdisciplinary specialization in public health sociology and environmental public health, partnering with the College of Arts and Sciences. The BSPH has proven to be exceedingly popular and highly competitive among the Ohio State undergraduate students with the college already achieving a milestone with 16 percent of our students enrolled in the honors program, the third highest percentage among the 15 colleges at Ohio State. Coinciding with the new BSPH degree, the new 3+2 program allows a student to earn a bachelor's and

How Does Ohio Stack Up?

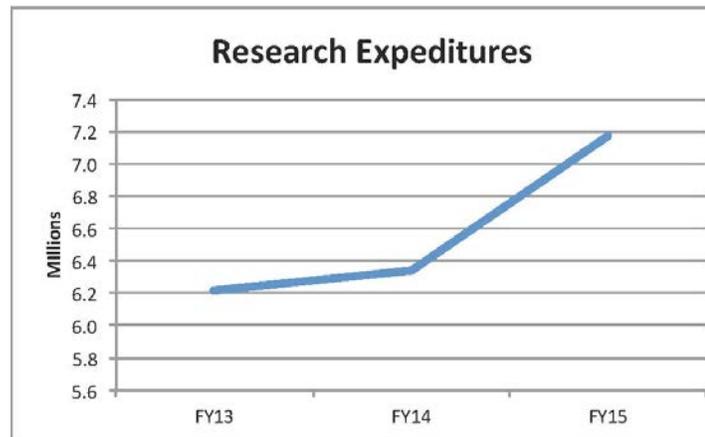
AmericasHealthRankings.org



master's degree in five years.

There were approximately 367 graduate students (75 MHA, 218 MPH, 25 MS, 49 PhD); 194 undergraduate BSPH students, and 228 undergraduate minor students; with approximately 125 graduate students and 80 undergraduate students graduated in 2015-16. The college has a network of more than 2700 alumni.

The College features a broad portfolio of basic and applied research activities addressing domestic and international issues. Our research productivity has significantly increased in recent years including an \$18 million NCI P50 award focused on tobacco research (2013). In addition, we have expanded our commitment to community service and research with the creation of a new associate dean position for community outreach and engagement in 2014. This office will enhance opportunities for service learning for our students as well as partner with communities across Ohio to assess public health needs and evaluate interventions. To that end, OSU Extension has jointly supported with us the recruitment of a new fulltime faculty member in the College in 2016 to build public health programs in Ohio through the county-based Extension offices.



The college is located in the state capital, which facilitates collaboration with the Ohio Department of Health, Ohio Environmental Protection Agency, Ohio Department of Job and Family Services and other state agencies as well as city and county organizations such as Columbus Public Health. The benefits of our geographic location greatly facilitate our goal to advance public health as part of the land grant mission of the University. Our student practice placements, workforce development, outreach centers and other public services provide opportunities for scholarly work in a community setting. Through these practices, the college supports The Ohio State University's vision for connecting with community partners.

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The self-study was a useful process to identify gaps in our programs that provided opportunities for discussions among students, staff, faculty and leadership to not only address the identified gaps, but as a result, to reframe our strategies and our expectations to more effectively advance public health. Additionally, we view that today the field of public health is changing dramatically to meet an ever growing burden of challenges in the nation and around the world. At the same time, we have opportunities to incorporate fundamentally new approaches to address these challenges. For example, as the College aspires to become more successful advancing public health, we see data analytics and population health management as fundamental to our future and to training the next generation of public health practitioners. We want our students to graduate with knowledge and skills that will prepare them for the challenges of the 21st century. Yes, this will include education and training in subjects such as data analytics, population health and global health but we will also embed in all of course work and experiential learning opportunities, the skills of management and leadership, group problem solving, and cultural competencies for working within diverse and inclusive environments that are so valuable to be effective in the workplace in accordance with our strategic plan. We will leverage the new [OSU Teaching and Learning Institute](#) created by President Michael Drake as part of his 2020 Vision.

The OSU College of Public Health is committed to the principle that public health is central to the OSU Land Grant mission and that it is our responsibility to bring the talent and commitment of entire University community to prepare the next generation of public health practitioners and to advance the public health of Ohio and beyond. We appreciate the time you are taking to learn about Ohio State's College of Public Health and its students as well as the local and international communities we serve.

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Glossary of Frequently Used Acronyms

APT	Appointment, Promotion and Tenure
ASC	Colleges of Arts and Sciences
BIO	Division of Biostatistics
CCTS	Center for Clinical and Translational Science
COG	College Outreach Group
CTS	Clinical Translational Science
CPH	College of Public Health
CPHP	Center for Public Health Practice
COM	College of Medicine
DL	Distance Learning
EHS	Division of Environmental Health Science
EPI	Division of Epidemiology
FPL	Faculty Professional Leave
FTE	Full-Time Equivalent
GIS	Graduate Interdisciplinary Specialization
GSC	Graduate Studies Committee
GTA	Graduate Teaching Assistant
HBHP	Division of Health Behavior and Health Promotion
HOPES	Center for Health Outcomes, Policy and Evaluation Studies
HRSA	Health Resources and Services Administration
HSMP	Division of Health Services, Management, and Policy
LEED	Leadership in Energy and Environmental Design
OAPSS	Office of Academic Programs and Student Services
ODH	Ohio Department of Health
OSCAR	Online Catalog/Circulation System
OSU	Ohio State University
OSUCCC	Ohio State University Comprehensive Cancer Center
OSU-CERTS	Ohio State University Center of Excellence in Regulatory Tobacco
POA	Pattern of Administration
PBA	Present Budget Allocation
PEP	Program for Experienced Professionals
PHPID	Public Health Preparedness for Infectious Disease
PHTC	Public Health Training Center
POA	Pattern of Administration
SEI	Student Evaluation of Instruction
SRA	Special Research Assignment
TIU	Tenure-Initiating Unit
USC	Undergraduate Studies Committee
VPH	Veterinary Public Health

1.0 THE SCHOOL OF PUBLIC HEALTH

CRITERION 1.1 MISSION

The school shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.

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

The **mission** of the College of Public Health at The Ohio State University is:

To protect and improve the health of the people of Ohio, the nation and the world. Through interdisciplinary research, we seek to understand the forces that affect public health and the delivery of health services. We prepare the next generation of public health practitioners, health care managers and scholars. Collaborating with government agencies and other partners, we develop solutions to current and emerging public health problems.

1.1.b. A statement of values that guides the school.

The College of Public Health has identified **five core values** that guide our decisions and operations:

- **Equity** - *We believe in the fundamental fairness of a healthy world. All people should have an environment that optimizes health, access to affordable and high-quality health care, awareness of personal choices for improving health, and opportunities to help improve the health of our communities.*
- **Ethics** - *We maintain high levels of academic and scientific integrity, conduct research that protects the rights and welfare of all study participants, and create an inclusive environment that supports our faculty, staff, students and constituents.*
- **Excellence** - *We pursue innovative research that is scientifically rigorous and relevant. We are committed to providing a high-quality learning experience and the tools to enable students to meet future challenges. We value dedicated service and leadership that helps individuals and communities live healthier lives.*
- **Diversity and Inclusion** - *We celebrate the richness that diversity brings to our society and work to create a welcoming culture that respects all forms of diversity. We are committed to increasing the diversity of our students, faculty, and staff and to equipping all our graduates to contribute effectively to a diverse public health workforce.*
- **One University and One College** - *We embrace the Ohio State value of “One University.” It establishes one comprehensive and flexible vision that will allow Ohio State to advance knowledge and serve neighboring communities for years to come. We also see ourselves as One College pursuing an integrated vision for public health and health services for all of Ohio and beyond.*

1.1 Mission

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

The *College of Public Health 2015-2017 Strategic Plan* is organized around five categories of major strategic goals, each with underlying initiatives, to pursue and achieve those goals, as shown in **Table 1.1.1**.

Table 1.1.1 Five Categories of Strategic Goals

A. Capacity Building
Strategic Goal A.1. Interdisciplinary Capacity Building: <i>Build and sustain high quality diverse core faculty and staff.</i>
Strategic Goal A.2. Interdisciplinary Capacity Building: <i>Establish and formalize <u>internal</u> partnerships to support an Ohio State public health faculty collaborative to integrate disciplines and expertise.</i>
B. Teaching and Learning
Strategic Goal B.1. Teaching and Learning: <i>Recruit, matriculate, retain and graduate high-quality and culturally-diverse students.</i>
Strategic Goal B.2. Teaching and Learning: <i>Enhance student life experiences at the College and the University.</i>
Strategic Goal B.3 Teaching and Learning: <i>Develop and update academic courses and programs that are contemporary, relevant and accessible.</i>
Strategic Goal B.4. Teaching and Learning: <i>Provide students with opportunities to participate in relevant hands-on public health activities in local, national and international settings.</i>
C. Research and Innovation
Strategic Goal C.1 Research and Innovation: <i>Demonstrate ongoing improvement of research productivity and performance.</i>
D. Outreach and Engagement
Strategic Goal D.1. Outreach and Engagement: <i>Serve on key external committees, sections, councils and Boards.</i>
Strategic Goal D.2. Outreach and Engagement: <i>Establish Ohio State as the preferred academic partner with other higher education institutions and health organizations locally, regionally, nationally and internationally.</i>
Strategic Goal D.3. Outreach and Engagement: <i>Formalize international engagement through University gateways and other international partners.</i>
E. Resources
Strategic Goal E.1. Resource Stewardship: <i>Ensure that faculty and staff members reflect a diverse culture.</i>
Strategic Goal E.2. Resource Stewardship: <i>Expand utilization of information technology.</i>
Strategic Goal E.3. Resource Stewardship: <i>Continue to support financial sustainability.</i>

1.1 Mission

1.1.d. A set of measurable objectives with quantifiable indicators related to each goal statement as provided in Criterion 1.1.c. In some cases, qualitative indicators may be used as appropriate.

The strategic goals under each of the five categories in the *College of Public Health 2015-2017 Strategic Plan* have specific initiatives (objectives) stated with either quantitative or qualitative outcome measures. Refer to **Table 1.1.2** for the categorized list of the relevant goals, initiatives and target outcomes.

Table 1.1.2 Outcome Measures and Targets for Major Strategic Goals and Initiatives

A. CAPACITY BUILDING
Strategic Goal A.1. Interdisciplinary Capacity Building: <i>Build and sustain high quality diverse core faculty and staff.</i>

Outcome Measure for A.1.1.		
Initiative: <i>Recruit, appoint promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.</i>		
Outcome Measure	Target 2017	
Number of core (primary) faculty members	50 Faculty Members	
Number of core (primary) staff members	60 Core Staff Members	
Percentages of underrepresented faculty and staff members based on race, ethnicity and gender	Representative of Ohio demographics:	
	Category	Percentage Population
	American Indian/Alaska Native alone	0.3%
	Asian alone	2.1%
	Black or African American alone	12.7%
	Hispanic or Latino	3.6%
	Native Hawaiian/Other Pacific Islander	0.1%
	Two of More Races	2.1%
	White alone, not Hispanic or Latino	79.8%
Female	51.0%	
Male	49.0%	

Outcome Measure for A.1.2.	
Initiative: <i>Formalize courtesy and joint faculty appointments with other Colleges at OSU. ("Courtesy" faculty appointments do not involve shared percentage of full-time equivalent (FTE) effort nor the corresponding salary and fringe support across the cooperative units as do "joint" faculty appointments.)</i>	
Outcome Measure	Target 2017
Number of active courtesy and joint appointments between the College and other Colleges w/in OSU to support interdisciplinary collaborative efforts	Appointments involving all 15 OSU Colleges

Strategic Goal A.2. Interdisciplinary Capacity Building: *Establish and formalize internal partnerships to support an Ohio State public health faculty collaborative to integrate disciplines and expertise.*

Outcome Measure for A. 2.1.

Initiative: *Identify and commit to development and implementation of applicable interdisciplinary programs, multidisciplinary research projects and team-based service activities. As one example, we would cooperatively develop “mosaic programs” integrating public health content relevant to the specialized interests of partnering academic units at Ohio State with new course development as well as the addition of public health certificates or dual degrees with an MPH or MHA.*

Outcome Measure	Target 2017
Numbers of course offerings supporting other units’ programs; GE courses; minor programs; dual and combined degree programs; and, academic certificate programs.	20 courses supporting other units 3 GE courses 4 minor programs 8 dual degree programs 4 combined degree programs 2 certificate programs

B. TEACHING & LEARNING

Strategic Goal B.1. Teaching and Learning: *Recruit, matriculate, retain and graduate high-quality and culturally-diverse students.*

Outcome Measure for B.1.1.

Initiative: *Expand student recruitment, and align the College’s marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.*

Outcome Measure	Target 2017																				
Number of graduate and undergraduate applications received	700 graduate degree applicants per year 130 graduate degree matriculates per year 250 undergraduate degree applicants per year 80 undergraduate matriculates per year																				
Diversity of applicant pool, based on race, ethnicity and gender	Representative of Ohio demographics: <table border="1"> <thead> <tr> <th>Category</th> <th>Percentage Population</th> </tr> </thead> <tbody> <tr> <td>American Indian/Alaska Native alone</td> <td>0.3%</td> </tr> <tr> <td>Asian alone</td> <td>2.1%</td> </tr> <tr> <td>Black or African American alone</td> <td>12.7%</td> </tr> <tr> <td>Hispanic or Latino</td> <td>3.6%</td> </tr> <tr> <td>Native Hawaiian/Other Pacific Islander</td> <td>0.1%</td> </tr> <tr> <td>Two of More Races</td> <td>2.1%</td> </tr> <tr> <td>White alone, not Hispanic or Latino</td> <td>79.8%</td> </tr> <tr> <td>Female</td> <td>51.0%</td> </tr> <tr> <td>Male</td> <td>49.0%</td> </tr> </tbody> </table>	Category	Percentage Population	American Indian/Alaska Native alone	0.3%	Asian alone	2.1%	Black or African American alone	12.7%	Hispanic or Latino	3.6%	Native Hawaiian/Other Pacific Islander	0.1%	Two of More Races	2.1%	White alone, not Hispanic or Latino	79.8%	Female	51.0%	Male	49.0%
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Female	51.0%																				
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Mean GPA of accepted graduate and undergraduate degree applicants	≥3.60/4.00 Average Graduate Applicant GPA ≥3.30/4.00 Average Undergrad Applicant GPA																				
Mean GRE scores of accepted graduate degree applicants	≥70 th Percentile Q and V Average scores of admitted graduate degree students																				
Mean ACT scores of accepted undergraduate applicants	≥30 Average scores of admitted undergraduate degree students																				

1.1 Mission

Outcome Measure	Target 2017
Graduation rates within College's time-to-degree limits	≥80% Students graduate within maximum time permitted for degree completion: BSPH = 5yr MPH = 5yr MHA = 6yr MS = 6yr PhD = 8yr
Graduates in applicable jobs or continued/advanced education	≥80% graduates

Strategic Goal B.2. Teaching and Learning: *Enhance student life experiences at the College and University.*

Outcome Measure for B.2.1. Initiative: <i>Increase the percentage of courses held in in Cunz Hall classrooms.</i>	
Outcome Measure	Target 2017
Courses scheduled and class sessions in Cunz Hall classroom spaces	100 class sessions and ≥50% of College's courses in Cunz Hall classrooms per semester

Outcome Measure for B.2.2. Initiative: <i>Survey students to evaluate the student experience from the point of pre-admission through graduation.</i>	
Outcome Measure	Target 2017
Percentage of Year1 graduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Year 1 Student Survey.	Among students who respond to the survey, ≥80% graduate students strongly agree/agree for each of the categories surveyed
Percentage of Year1 undergraduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Year 1 Student Survey.	Among students who respond to the survey, ≥80% undergraduate students strongly agree/agree for each of the categories surveyed
Percentage of graduating graduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Exit Graduating Student Survey.	Among students who respond to the survey, ≥80% graduate students strongly agree/agree for each of the categories surveyed
Percentage of graduating undergraduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Exit Graduating Student Survey.	Among students who respond to the survey, ≥80% undergraduate students strongly agree/agree for each of the categories surveyed
Student Evaluation of Instruction (SEI) survey scores	≥80% of the College's courses with SEI scores ≥4.0/5.0

Strategic Goal B.3. Teaching and Learning: Develop and update academic courses and programs that are contemporary, relevant and accessible.

Outcome Measure for B.3.1.

Initiative: Investigate the feasibility of integrated core curriculum; develop integrated core curriculum where ready.

Outcome Measure	Target 2017
Alignment of MPH with ASPPH <i>Framing the Future</i> report, societal needs, and applicable CEPH criteria	Implement more efficient structure and ensure effective and contemporary MPH professional degree core content.

Outcome Measure for B.3.2.

Initiative: Increase accessibility to courses and programs through distance learning (DL).

Outcome Measure	Target 2017
Distance Learning (DL) course modules	All core content available as DL accessible topic-specific modules
Quality of DL Modules and Courses	Meet QA/QC Standards as per Quality Matters™ process

Outcome Measure for B.3.3.

Initiative: Expand the 3+2 combined BSPH-master degree program in collaboration with other colleges or universities.

Outcome Measure	Target 2017
Number of joint (combined) 3+2 BSPH-master degree programs	Eight 3+2 BSPH-master degree programs

Outcome Measure for B.3.4.

Initiative: Revise MPH-PEP and MPH-HSMP to form a hybridized curriculum in Population Health Management, making the degree more accessible for working professionals; implement in fall 2017 for weekend plus distance learning delivery such as a certificate program in population health management for MPH or MHA.

Outcome Measure	Target 2017
Revised MPH-PEP w/ Population Health Management area of concentration	Full implementation SU 2017

Strategic Goal B.4. Teaching and Learning: Provide students with opportunities to participate in relevant hands-on public health activities in local, national and international settings.

Outcome Measure for B.4.1.

Initiative: Expand the global scholars program to support opportunities for students.

Outcome Measure	Target 2017
Number of Field Experiences in Global Health Courses/Sites	Five international sites per year 100 students per year

Outcome Measure for B.4.2. Initiative: <i>Sustain current relationships and build new ones with applicable agencies, organizations and industries to expand sites for student practicums and internships.</i>	
Outcome Measure	Target 2017
Number of Sites and Sectors Represented for Practicum/Internships	60 practicum/internship sites 10 sectors represented

C. RESEARCH and INNOVATION

Strategic Goal C.1. Research and Innovation: *Demonstrate ongoing improvement of research productivity and performance.*

Outcome Measure for C.1.1. Initiative: <i>Continually increase demonstration of research success based on receipt of competitive external grants and contracts, generation peer-reviewed publications, and national and international presentations.</i>	
Outcome Measure	Target FY2017
Peer-reviewed publications	100% applicable faculty published each year
Conference presentations	100% applicable faculty presented each year at national and international conferences
Grants and contract proposals submitted	80% applicable faculty submitting as PI and 100% submitting in any role per year
Grants and contracts funded	50% applicable faculty funded as PI and 100% funded in any role per year
Total research expenditures	\$9,000,000 (FY)
Direct Cost research expenditures	\$6,000,000 (FY)
IDC recovery	\$3,000,000 (FY) 50% on average
Number T32 Training grants	1 T32 training grant submitted out of CPH 2 Graduate Students Funded on OSU T32s 2 Postdocs funded on OSU T32s 10 of Faculty in Funded OSU Training Grants
Invention disclosures	1 Disclosure Submitted
Patents	1 Patent (2018)

D. OUTREACH and ENGAGEMENT

Strategic Goal D.1. Outreach and Engagement: *Serve on key external committees, sections, councils and Boards.*

Outcome Measure for D.1.1. Initiative: <i>Faculty involved with external organizations and representation on external committees, sections, councils, and Boards.</i>	
Outcome Measure	Target 2017
Faculty representation	100% faculty involved
Number organizations engaged	100
Cumulative outreach activities	200

1.1 Mission

Strategic Goal D.2. Outreach and Engagement: Establish Ohio State as the preferred academic partner with other higher education institutions and health organizations locally, regionally, nationally and internationally.

Outcome Measure for D.2.1.

Initiative: Utilize grants and contracts to provide public health organizations with technical assistance in organizational development, strategic planning, quality improvement and group facilitation.

Outcome Measure	Target 2017
Number of working professionals educated via Center for Public Health Practice	2,000 members of public health workforce
Number of DL Accessible Modules	50 modules or courses

Strategic Goal D.3. Outreach and Engagement: Formalize international engagement through University gateways and other international partners.

Outcome Measure for D.3.1.

Initiative: Establish at least one cooperative public health academic program with China and/or India gateway countries, or another, international partnering country.

Outcome Measure	Target 2017
Number collaborative international academic programs	At least one academic program developed and implemented.

Outcome Measure for D.3.2.

Initiative: Implement continuing education offerings within an international partner institution.

Outcome Measure	Target 2017
Number continuing education courses delivered to international partner	At least one classroom course and one Web-based course

Outcome Measure for D.3.3.

Initiative: Assist one international partner institution in developing an outreach/practice program.

Outcome Measure	Target 2017
Number international offices for workforce development and program coordination/delivery	Via active participation on the University's One Health group, formalize workforce development offices and programs in Addis Ababa and Gondar Ethiopia

Outcome Measure for D.3.4.

Initiative: Implement at least one joint outreach program or function in conjunction with another OSU health sciences college.

Outcome Measure	Target 2017
Number joint outreach programs	One joint program formalized and implemented

E. RESOURCES

Strategic Goal E.1. Resource Stewardship: Ensure that faculty and staff members reflect a diverse culture.

Outcome Measure for E.1.1.
Initiative: *Identify current and desired cultural conditions and practices that will enhance the College's abilities to achieve its strategic goals.*

Outcome Measure	Target 2017
Full Integration and Alignment of Diversity and Inclusion Committee Best Practices for a Diverse and Culturally Aware College Setting	Best practices and activities integrated into and aligned with all aspects of College's efforts to achieve and sustain racially and ethnically diverse and culturally aware/sensitive faculty, staff and student populations.
Diverse representation of faculty members in College	Representative Ohio Demographics
Diverse representation of staff members in College	Representative Ohio Demographics
Diverse representation of students in College	Representative Ohio Demographics
Completion of University diversity training	100% applicable faculty and staff members

Outcome Measure for E.1.2.
Initiative: *Require all faculty searches to have a diverse pool of applicants, including underrepresented minorities.*

Outcome Measure	Target 2017
Diversity of faculty and staff applicant pools	100% applicable searches

Outcome Measure for E.1.3.
Initiative: *Continue to recruit senior and mid-career faculty to maintain strength in key leadership positions in the College.*

Outcome Measure	Target 2017
New division chairs	2 new division chairs
Number Associate and Full-professor hires	Eight new senior and mid-career faculty hired since 2015

Outcome Measure for E.1.4.
Initiative: *Recruit highly qualified faculty to lead initiatives in global health and multicultural health.*

Outcome Measure	Target 2017
Number new hires with international and multicultural health experience	Six new faculty hired since 2015 with applicable experience

Strategic Goal E.2. Resource Stewardship: Expand utilization of information technology.

Outcome Measure for E.2.1.
Initiative: *Expand usage of technology and practices to improve efficiency and effectiveness of data collection, analysis, centralized archiving, and retrieval to more easily retrieve data and generate reports.*

Outcome Measure	Target 2017
Centralized College Data Collection and Retrieval Portal	Centralized portal established and implemented
College Data Subcommittees w/in Existing Committee Structures	Full Implementation of Data Subcommittees

Strategic Goal E.3. Resource Stewardship: *Continue to support financial sustainability.*

Outcome Measure for E.3.1.
Initiative: *Ensure enrollment growth in new and established academic programs based on the sums of credit hours generated for undergraduate student and graduate student enrollments each year.*

Outcome Measure	Target 2017
Total semester credits of enrollment	3% growth per year

Outcome Measure for E.3.2.
Initiative: *Secure new and ongoing development support for the College through enhanced alumni relations, major donor cultivation, and increased foundation and corporate fundraising activity. Funds reported in fiscal year totals include philanthropic gifts from individuals as well as grants, sponsorships, and contracts secured through foundations, corporations and other organizations to support research and other programming within the college. A portion of reported funds may also be reflected in research funding figures.*

Outcome Measure	Target 2017
Amount of funds secured per year	\$1,500,000. per year

Outcome Measure for E.3.3.
Initiative: *Increase student scholarships and fellowships via increased development and external grants.*

Outcome Measure	Target 2017
Amount of scholarship funds from development contributions per year for student tuition, stipend and/or travel.	\$100,000. per year

Outcome Measure for E.3.4.
Initiative: *Increase student assistantships and fellowships via increased development and external grants.*

Outcome Measure	Target 2017
Amount of funds from College per year for student assistantships (e.g. GTAs)	\$500,000. per year
Amount of funds from College per year for student Fellowships	\$225,000. per year

1.1.e. Description of the manner through which the mission, values, goals and objectives were developed, including a description of how various specific stakeholder groups were involved in their development.

The College’s [mission statement](#), [vision statement](#), [value statements](#), goals and objectives are based on a variety of relevant community needs and demands. The College’s mission aligns with the mission of The Ohio State University -- *The University is dedicated to:*

1.1 Mission

- *Creating and discovering knowledge to improve the well-being of our state, regional, national and global communities;*
- *Educating students through a comprehensive array of distinguished academic programs;*
- *Preparing a diverse student body to be leaders and engaged citizens;*
- *Fostering a culture of engagement and service.*

We understand that diversity and inclusion are essential components of our excellence.

Owing to internal and external dynamics of emerging needs and demands, the current strategic plan covers only a three year period (2015-2017) rather than the conventional five year period. The College considers current and anticipated future issues in the provision of relevant education and training to disseminate knowledge; the conduct of research to create new knowledge and better interpret existing knowledge; and the accomplishment of outreach and service to apply this knowledge and understand better communities and organizations. The three core categories of Teaching, Research, and Service in turn require capacity building and the marshaling of resources to ensure sustainment of interdisciplinary activities. The plan includes statements of the College's overall mission, the corresponding vision for present and future, and the values we hold as essential guiding principles.

The College undertakes substantive review and revision of foundational content for the strategic plan every three to five years. The College Dean leads this process, which initially involves the other members of the Executive Committee. Members of the Executive Committee also solicit input from key stakeholders, including faculty and staff members from their respective divisions or offices. Faculty and staff reviews, comments and edits are solicited via meetings, circulation of hard copy, and posting of electronic copy to produce the penultimate version of the plan. Key stakeholders, including the commissioner of the local health department, College alumni society leaders, and the medical director of the state department of health, also submit reviews, comments and edits via email.

Once the College's Executive Committee and faculty approve the penultimate version of the plan, it is submitted for review by the University Office for Academic Affairs, specifically the office for Academic and Strategic Planning led by Vice Provost Michael Boehm. The College considers and responds to the University-level review and finalizes the strategic plan, including mission statement, vision statement, values statement, goals and objectives. The *2015-17 Strategic Plan* reflects content from the process that was last conducted during calendar year 2014 through early 2015. There have been three reviews culminating with relatively substantive changes to the College's plan since the last CEPH review in 2009. The College addressed the Commentary from the last CEPH review for Criterion 1.1., and the plan now reflects improved and more distinguishable goals and initiatives with better quantitative metrics, as well as qualitative metrics, for outcomes.

1.1 Mission

In fall 2015, the College distributed the current strategic plan to the Dean's/College's External Advisory Committee for review, and members offered suggestions for making the plan stronger. Because this is a living document, the College incorporated the Committee's recommendations, for more measurable objectives into the 2016 plan.

1.1.f. *Description of how the mission, values, goals and objectives are made available to the school's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.*

Because strategic planning is viewed as an ongoing process, the College undertakes regular but less comprehensive annual reviews and revisions. This process may result in changes deemed necessary to further the strategic interests of the College and the University. The plan is always accessible, by way of a [link on the College's Web homepage](#) (scroll to bottom left of Web homepage) to share and for review and comment by the public and other stakeholder groups. As a living document the splan is adaptable to the needs and demands of our College and the communities that we serve.

Academic administrators and staff members collect qualitative and quantitative data throughout the year as well as at specific junctures in order to evaluate the College's efforts to meet its mission and other elements of the strategic plan. The College largely succeeds in collecting and organizing data. We recognize, however, the need for more consistent dissemination of data and/or data summaries to our stakeholder groups. Therefore we schedule specific times for College leaders to present summary information. Administrators, faculty and staff receive information via presentations and discussions during the College's Executive Committee meetings, faculty meetings (i.e. College; Division; Program), and staff (i.e. College; Units) meetings. Other committees, such as the Undergraduate and Graduate Studies Committees and Diversity and Inclusion Committee, also feature presentation and discussion of summary information in their meetings. In addition, the College posts some data summaries online. We share current copies of our strategic plan with government entities and partners, such as the Ohio Department of Health and Columbus Public Health; this keeps them apprised of the plan and initiates discussion of how we might better partner to improve public health in Ohio.

1.1.g. *Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses, and plans relating to this criterion.*

Assessment:

- The OSU College of Public Health meets Criterion 1.1.

1.1 Mission

Strengths:

- The College of Public Health has well-established and implemented Mission, Vision and Value statements embedded in its three year *2015-17 Strategic Plan* consisting of strategic goals, initiatives and corresponding metrics for targeted outcomes.
- The College of Public Health activities and functions continue to remain aligned with its established Mission and Vision statements and operate under a strong set of core values.
- The University's Office for Academic Affairs, via its Vice Provost for Academic and Strategic Planning, Dr. Michael Boehm, provides guidance and sets timelines for strategic planning among all units, including the College of Public Health. This process has improved over the years and the College of Public Health has continued to review, update and follow a well-defined plan.
- The process that was used to draft and finalize the plan included broad participation of various constituent groups. The planning processes have matured to reflect the growth of the College to date and anticipated expansion in the future. The College's strategic plan is accessible to all stakeholder groups and the general public via digital posting on its Website's Homepage.

Challenges/Weaknesses/Plans:

- As encouraged by the University administration, the College's *Strategic Plan* is a "living document" to be responsive to a changing academic landscape and to capitalize on new opportunities as they emerge to advance its mission. Each year the administration also requests from the College Dean a list of the Top 10 Goals for the next year. This can be a risk as each college variably adjusts their goals and objectives which may result in our College not being fully aware of the changes underway in our partnering colleges. To address this going forward, the College Executive Committee will now review annually the Top 10 Goals of each of the 15 colleges to help us better identify opportunities to advance public health in each of the other colleges at OSU. Dr. Michael Boehm, the Vice Provost for Academic and Strategic Planning, has approved our request to have access to the annually updated strategic goals of the other colleges for this purpose.

CRITERION 1.2 EVALUATION

The school shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the school's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the school must conduct an analytical self-study that analyzes performance against the accreditation criteria defined in this document.

1.2.a. Description of the evaluation processes used to monitor progress against objectives defined in Criterion 1.1.d including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole.

The Mission of the College and its *Strategic Plan* align, as expected and required, with the Mission of the University. The College engages in activities for the overall assessment process, including several evaluation components, that collect and use qualitative and quantitative data to determine if the outcome measures associated with specific goals and initiatives are progressing toward meeting or exceeding target metrics. Most of the goals and corresponding initiatives are relevant to or directly aligned with *Accreditation Criteria for Schools of Public Health 2011* by the Council on Education for Public Health (CEPH).

The College made its strategic planning process more formal and structured in 2007 in response to University requirements for campus-wide strategic planning. During its current CEPH accreditation cycle (2009-2016), the College has modified its strategic plan three times in response to University requests and administrative changes. The mission, vision, values and foundational goals remain essentially the same, even as modifications were made. In addition to responding to University directives, the plan was modified with a change of College leadership: Former Dean Dr. Stanley Lemeshow ended his second term and was succeeded by Dr. William Martin effective August 2013. In fact, owing to the emergence of new issues and the potential availability of additional resources, the University views strategic plans as living documents to be reviewed annually and edited as needed. Currently, plans are more often written for three year periods rather than the traditional five or even ten years.

Evaluation activities rely on both qualitative and quantitative productivity and performance measures. The qualitative and quantitative data collected and compiled align with specific goals and target metrics established by the College. In Criterion 1.1.c there is a list of the College's five categories of major strategic goals and associated measurable initiatives; outcome measures and targets are listed under Criterion 1.1.d. **Table 1.2.1** shown below lists and summarizes most of the College's evaluation components and means of evaluation for assessment.

Table 1.2.1 Evaluation Components of the Assessment Process

Evaluation Activity	Description
Administrator Performance Reviews	Each administrator completes a summary of administrative accomplishments initiated, conducted and/or completed during the prior calendar year. The Dean is responsible for all College activities and operations and reports to the Executive Vice President and Provost for overall academic matters and the Executive Vice President of Health Sciences for issues specific to the Health Science Colleges. The College Dean reviews the Associate Deans, Division Chairs and Center Directors, and applicable staff.
Faculty Performance Reviews	Faculty members complete a summary of teaching, research and service activities completed during the prior calendar year. Division Chairs review the faculty and applicable staff.
Staff Performance Reviews	Staff members, upon request, complete a summary of professional and/or support services and other activities conducted during the prior year. Supervisors or Directors review their respective staff.
Faculty Appointment, Promotion and Tenure	Annual performance evaluations of non-tenured tenure-track faculty members are conducted by Division Chairs and the eligible faculty with a summary from the Appointments, Promotion and Tenure Committee. Individual performance goals are aligned with the goals and objectives of the College's strategic plan and the University's Academic Plan. These reviews give Division Chairs an opportunity to evaluate how faculty performance impacts the college's strategic goals and objectives. Individual divisions also undertake a variety of planning and evaluation efforts that are internal to their operations, at the discretion of the faculty and Division Chair.
Diversity and Inclusion	The Diversity and Inclusion Committee conducts surveys and focus groups involving College faculty, staff and students periodically to evaluate perception of the overall College and University environment. The University also conducts a survey.
Course and Instructor Evaluations	Primary evaluation of courses is based on the University's <i>Student Evaluation of Instruction</i> (SEI) conducted each term for each didactic course taught. Peer evaluation is also conducted. For example, Division Chairs conduct in class evaluation of new probationary faculty members.

Evaluation Activity	Description
Curricular Reviews	<p>Applicable programs and Divisions as well as the College Graduate Studies Committee and Undergraduate Studies Committee review curricula annually and make revisions as justified and needed.</p> <p>The Committees review and approve courses and course syllabi. The College adopted a standard template for course syllabi. Core and program competencies are also reviewed and approved as part of curricula and course reviews and approvals.</p> <p>Student surveys and graduate student exit surveys also collect information relevant to curricular elements. Focus groups are conducted periodically as well.</p>
Applications, Admissions, Matriculations, Retentions and Graduations	<p>Prospective public health degree students submit their applications via the SOPHAS portal. Admission rubrics are used by the respective program admission committees to evaluate each applicant and inform the decision to recommend or deny admission. Data are compiled in University systems and spreadsheets recording information relevant to each category.</p>
Student Performance in Courses	<p>Evaluation components (i.e. exams; papers; presentations; problem sets; etc...) vary in each didactic course.</p>
Student and Process Performance in Practicums or other Practice Placement	<p>Students submit final reports and logs of activities. Both faculty advisor and practicum/site preceptor complete evaluations of the student performance. Effective spring semester 2016, the evaluation is accessible as an online rubric via Qualtrics™ survey for more efficient collection and compilation of data.</p>
Student and Process Performance in Capstones: Culminating Project, Thesis or Dissertation	<p>MPH Students submit a written Culminating Project to their Advisor and Second Reader and conduct an oral presentation. BSPH students who conduct a research project follow a similar process. All BSPH students complete logs of activities; their final work is presented via a poster presentation. MS and PhD students complete and submit a thesis or dissertation, respectively, to their Advisor and Committee. In addition, they conduct an oral presentation and defense.</p> <p>Effective spring semester 2016, the evaluation is accessible as an online rubric via Qualtrics™ survey for more efficient collection and compilation of data.</p>
Student Perceptions and Opinions	<p>Surveys are conducted annually of undergraduate and graduate students. Student input is also collected through regular course evaluations, focus groups and exit surveys of graduating students. This student input is used to enhance coursework and curriculum as well as operations and administration. In addition, students are asked to evaluate their practice placements and summer residencies.</p>
Graduate Perceptions and Opinions	<p>Exit Surveys are conducted for graduating students each term.</p>
Alumni	<p>Surveys are conducted every two to three years.</p>

Evaluation Activity	Description
Practicum Preceptors and Employers	Preceptors complete a survey evaluating each student assigned to their agency or organization. Employers are surveyed every two to three years.
Workforce Needs Assessments	Workforce needs assessments are conducted periodically by the College's Center for Public Health Practice. The Center uses both formal and informal approaches to determine the needs of Ohio's public health workforce. In addition, it conducts participant evaluations for each professional training event. These evaluation processes have guided programmatic decision making.
Budget and Finances	Resources are an essential component to ensure that operations of the College are sustained and that investments can be made relative to goals and expanded initiatives. An annual budget review process involving the Dean and the Assistant Dean for Finance and Administration is conducted by the University's Office of Business and Finance.

In addition to the evaluation activities summarized in Table 1.2.1 above, most of which are conducted at least annually, other evaluations ensure that the College Mission and its related and underlying elements are addressed. For example, the College Dean undergoes a five-year evaluation with input contributed by other administrators and faculty members. Other senior administrators in the College such as the Senior Associate Dean, Associate Deans, Division Chairs, and Center Directors are evaluated every four years using a similar process.

Evaluations and the associated data align with the strategic plan outcome measures and/or with criteria for accreditation by CEPH. When quantitative or qualitative measures identify less than favorable outcomes, College leaders focus their efforts on communicating the issue and seeing a remediation plan through to resolution.

Opportunities for involvement in evaluation include various College committee and faculty meetings, with and without facilitated discussion, student and graduate surveys, ad hoc committees for targeted sections of the plan, and invitations to appropriate parties to review the plan drafts. The University's Office of Academic Affairs reviews and approves the College's strategic plan and conducts its own annual review to evaluate the overall performance and productivity of the College.

Some evaluation data collection tools involve use of surveys. In general, the College is able to get relatively good survey response rates in excess of approximately 50%. However, one challenge is the low response rate for feedback solicited from alumni and employers. However, adequate response rates for current students and exiting graduates allows for assurance of what is working well and identification of items and areas for improvement.

1.2.b. Description of how the results of evaluation processes described in Criterion 1.2.a are monitored, analyzed, communicated and regularly used by managers responsible for enhancing the quality of programs and activities.

The assessment process for the College involves numerous evaluations relevant to its mission, values and other elements of the strategic plan. Attention is directed toward and input from applicable guidelines, criteria, and/or expectations from the University governing bodies (i.e. Office for Academic Affairs; Graduate School), the College governing bodies (i.e. Undergraduate and Graduate Studies Committees), and the accrediting bodies (i.e. CEPH; CAHME). The qualitative and quantitative data collected and analyzed confirm what is working well, identify issues in need of attention, and inform decision-making and planning.

The College conducts both formal and informal evaluation activities throughout each year. Administrators, faculty or staff present data and data summaries to committees and during faculty and staff meetings. For example, the College Dean has presented at the annual faculty and staff meeting to open the academic year as well as at the monthly faculty meetings. The Senior Associate Dean for Academic Affairs and the Associate Dean for Research regularly present summaries of their activities in their areas at various meetings. So too does the Associate Dean for Outreach and Engagement, a new position first appointed in 2015, who presents on service-related activities and community-based research. The College administrators provide similar overviews to the College's External Advisory Committee. Despite these efforts to share and communicate evaluation data from our overall assessment process this formal self-study process conducted over the past two years identified inconsistent sharing of evaluation data with relevant groups. This, however, has been improving. For one example, student survey data was shared with students at the returning student orientation prior to the 2015-2016 and 2016-17 academic years and this, plus other applicable information, are available on an accessible Website. This has become a standard practice.

1.2.c. Data regarding the school's performance on each measurable objective described in Criterion 1.1.d must be provided for each of the last three years. To the extent that these data duplicate those required under other criteria (e.g., 1.6, 1.7, 1.8, 2.7, 3.1, 3.2, 3.3, 4.1, and 4.3), the school should parenthetically identify the criteria where the data also appear. See CEPH Outcome Measures template.

Three years (2014-2016) of outcome measurement data and summaries for the categorized strategic goals and initiatives presented in Criterion 1.1 are presented in **Table 1.2.2**. The table includes all the goals, initiatives, target metrics, and qualitative and quantitative measures of outcomes previously identified in the discussion of the College's *2015-17 Strategic Plan* in Criteria 1.1.c. and 1.1.d.

Table 1.2.2 Composite Summary of the Five Categories (A. thru E.) of College of Public Health Strategic Goals, Initiatives, Outcome Measures and Targets for Period AY2014-15, AY2015-16, AY2016-17 (unless otherwise indicated)

A. CAPACITY BUILDING

Strategic Goal A.1. Interdisciplinary Capacity Building: *Build and sustain high quality diverse core faculty and staff.*

Outcome Measure for A.1.1.
Initiative: *Recruit, appoint promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of primary faculty members (headcount)	50 Faculty Members	Assistant = 18 Associate = 13 Full = 17 TenureTrack = 18 Non-TenureTrack = 5 Tenured = 25 Total = 48(47.15FTE)	Assistant = 19 Associate = 12 Full = 13 TenureTrack = 16 Non-TenureTrack = 5 Tenured = 23 Total = 44 (43.15FTE)	Assistant = 16 Associate = 13 Full = 15 TenureTrack = 12 Non-TenureTrack = 6 Tenured = 26 Total = 44(43.15FTE)	The numbers for total (+10%) and tenure-track (+50%) faculty members with primary appointment in the College have increased during the past three years. Additional tenure-track faculty searches are underway and five hires are anticipated by autumn semester 2017.
Percentage of underrepresented faculty members based on race, ethnicity and gender	Representative of Ohio demographics: Amer. Indian/ Alaskan Native 0.3% Asian 2.1% Black 12.7% Hispanic/Latino 3.6% Native Hawaiian/ Other Pacific 0.1% Two/More Race 2.1% White 79.8%	Asian 13%(n=6) Black 8%(n=4) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose0%(n=0) White 71%(n=34) Total Under-represented 29% (n=14)	Asian 13%(n=6) Black 6%(n=3) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose4%(n=2) White 70%(n=31) Total Under-represented 23-27% (N=13-15)	Asian 11%(n=5) Black 4%(n=2) Hispanic 2.5%(n=1) Two/ More Races 2.5%(n=1) Undisclose2.5%(n=1) White 77%(n=34) Total Under-represented 20-22% (n=9-12)	The data represent racial and ethnic categories reported by faculty members. No respondents indicated American Indian/Alaskan Native or Native Hawaiian/Other Pacific Islanders. Faculty racial and ethnic diversity has improved and mostly aligns with Ohio demographics, except for faculty members indicating Black/African American.

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
	Female 51% Male 49%	M = 46% F = 54%	M = 45% F = 55%	M = 45% F = 55%	However, the percentage at 8% has doubled during the past three years. Efforts will continue to attract and hire from underrepresented groups. Gender data are somewhat aligned with State demographics.
Number of staff members (headcount)	60 Staff Members	59	65	68	There has been some decline in total staff members but count remains close to target.
Percentage of underrepresented staff members based on race, ethnicity and gender	Representative of Ohio demographics: Amer. Indian/ Alaskan Native 0.3% Asian 2.1% Black 12.7% Hispanic/Latino 3.6% Native Hawaiian/ Other Pacific 0.1% Two/More Race 2.1% White 79.8% Female 51% Male 49%	Black 8%(n=5) Hispanic 2%(n=1) Two/More Races 2% (n=1) Undisclosed 2%(n=1) White 86%(n=51) Total Under-represented 12% (n=7) M = 25% F = 75%	Asian 5%(n=3) Black 8%(n=5) Hispanic 1.5%(n=1) Two/More Races 1.5% (n=1) Undisclosed 3%(n=2) White 82%(n=53) Total Under-represented 15-18% (n=10-12) M = 23% F = 77%	Asian 1.5%(n=1) Black 10%(n=7) Undisclosed 4.5%(n=3) White 84%(n=57) Total Under-represented 12% (n=8) M = 22% F = 78%	The data represent racial and ethnic categories reported by staff members. No respondents indicated American Indian/Alaskan Native or Native Hawaiian/Other Pacific Islanders. Staff racial and ethnic diversity has not improved and all reported underrepresented groups are below Ohio demographics. The highest underrepresented group reported by staff is for Black/African American at 8%. Efforts will continue to attract and hire staff members from under-represented groups.

Outcome Measure for A.1.2.

Initiative: *Formalize courtesy and joint faculty appointments with the other Colleges at OSU.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of active courtesy and joint appointments between the College and other Colleges w/in OSU to support interdisciplinary collaborative efforts	15 OSU Colleges	No. Courtesy Appointments = 65 No. Joint Appointments = 16 No. Fellows = 2 No. Affiliated = 1 No. Colleges = 12	No. Courtesy Appointments = 59 No. Joint Appointments = 12 No. Fellows = 1 No. Colleges = 11	No. Courtesy Appointments = 70 No. Joint Appointments = 8 No. Colleges = 12	There is evidence of strong cross-fertilization between the College and other colleges on campus based on formal courtesy and joint faculty appointments. These relationships contribute to capacity building and cooperative and collaborative efforts. At this point these relationships are established with 12 of the University's 15 colleges. The number of shared faculty appointments and colleges involved will likely increase with the newer faculty and the University Discovery Theme initiative. Also, these data do not reflect the collaborative efforts between and among faculty members and their respective colleges without formal/official faculty appointments.

Strategic Goal A.2. Interdisciplinary Capacity Building: *Establish and formalize internal partnerships to support an Ohio State public health faculty collaborative to integrate disciplines and expertise.*

Outcome Measures for A. 2.1.

Initiative: *Identify and commit to development and implementation of applicable interdisciplinary programs, multidisciplinary research projects and team-based service activities. As one example, we would cooperatively develop “mosaic programs” integrating public health content relevant to the specialized interests of partnering academic units at Ohio State with new course development as well as the addition of public health certificates or dual degrees with an MPH or MHA.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Numbers of course offerings supporting other units' programs; GE courses; minor programs; dual and combined degree programs; and, academic certificate programs.	20 courses supporting other units 3 GE courses 4 minor programs 8 dual degree programs 4 combined degree programs 2 certificate programs (beginning AY2016-17)	No. Courses Supporting Other Units = 17 No. GE Courses = 1 No. Minors Offered = 3 No. Dual Degree Programs = 3 No. Combined Degree Programs = 8 No. Certificates = one in development	No. Courses Supporting Other Units = 17 No. GE Courses = 1 No. Minors Offered = 2 No. Dual Degree Programs = 3 No. Combined Degree Programs = 8 No. Certificates = not applicable	No. Courses Supporting Other Units = 17 No. GE Courses = 1 No. Minors Offered = 2 No. Dual Degree Programs = 3 No. Combined Degree Programs = 9 No. Certificates = not applicable	The College has expanded the number of collaborative and cooperative courses and programs with other units relative to three years ago; however, increases have remained relatively flat. A fourth dual degree program is under review. Divisions and faculty members' via the Graduate and Undergraduate Studies Committees will set prioritized timeline to continue expanded collaborative and cooperative courses and programs to meet the target metrics.

B. TEACHING & LEARNING

Strategic Goal B.1. Teaching and Learning: *Recruit, matriculate, retain and graduate high-quality and culturally-diverse students.*

Outcome Measure for B.1.

Initiative: *Expand student recruitment, and align the College's marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.*

Outcome Measure	Target 2017	Cohort entering Au16-Su17* *Does not include SP17 or SU17	Cohort entering Au15-Su16	Cohort entering Au14-Su15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of graduate and undergraduate applications received	700 graduate degree applicants per year 130 graduate degree matriculates per year 250 undergraduate degree applicants per year 80 undergraduate degree matriculates per year	No. Graduate Applicants = 625 No. Graduate Matriculates =126 (will be higher when SU17 data are included) No. Undergraduate Applicants =129 No. Undergraduate Matriculates =111	No. Graduate Applicants = 644 No. Graduate Matriculates= 136 No. Undergraduate Applicants = 160 No. Undergraduate Matriculates =97	No. Graduate Applicants = 657 No. Graduate Matriculates=146 No. Undergraduate Applicants = 142 No. Undergraduate Matriculates =89	Number of applications for both graduate and undergraduate degree programs remained relatively flat, even declining to some extent for graduate programs, and remain below respective targets. Efforts will continue to attend recruitment fairs and other relevant events. There will be expanded efforts to recruit from smaller colleges from around the State as well as from within OSU. Not reported here are the percentages of applicants accepted each year, which remains relatively consistent at about 48%. The number of students who matriculate into the graduate and undergraduate programs meets/or exceeds target.
Diversity of applicant pool, based on race, ethnicity and gender	Representative of Ohio demographics: Female 51% Male 49% Amer. Indian/ Alaskan Native 0.3%	Underrepresented Graduate Degree Applicants = 44.9% Gender Graduate Degree Applicants M=34% F=66%	Underrepresented Graduate Degree Applicants = 46% Gender Graduate Degree Applicants M=32% F=68%	Underrepresented Graduate Degree Applicants = 45.2% Gender Graduate Degree Applicants M=35% F=65%	Compared to Ohio demographics which are used for the College's target metrics, applicant pools, admitted applicants, and matriculated students for both graduate and undergraduate degree

1.2 Evaluation

Outcome Measure	Target 2017	Cohort entering Au16-Su17* *Does not include SP17 or SU17	Cohort entering Au15-Su16	Cohort entering Au14-Su15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
	Asian 2.1% Black 12.7% Hispanic/Latino 3.6% Native Hawaiian/ Other Pacific 0.1% Two/More Race 2.1% White 79.8% Note: Total percentage underrepresented based on race and ethnicity = 20.2% Female 51% Male 49%	Underrepresented Graduate Degree Admits = 36.2% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.6% Gender Graduate Degree Matriculates M=20% F=80% ***** Underrepresented Undergrad Degree Applicants = 36% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 35% Gender Undergrad Degree Admits M= 23% F= 77% Underrepresented Undergrad Matriculate = 34% Gender Undergrad Degree Matriculates M= 22% F= 78%	Underrepresented Graduate Degree Admits = 36.3% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.7% Gender Graduate Degree Matriculates M=29% F=71% ***** Underrepresented Undergrad Degree Applicants = 29% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 22% F= 78% Underrepresented Undergrad Matriculate = 24% Gender Undergrad Degree Matriculates M= 22% F= 78%	Underrepresented Graduate Degree Admits = 29.5% Gender Graduate Degree Admits M=33% F=67% Underrepresented Graduate Matriculate = 25.3% Gender Graduate Degree Matriculates M=36% F=64% ***** Underrepresented Undergrad Degree Applicants = 26% Gender Undergrad Degree Applicants M= 15% F= 85% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 11% F= 89% Underrepresented Undergrad Matriculate = 23.5% Gender Undergrad Degree Matriculates M= 11% F= 89%	programs demonstrated sustained levels of diversity based on race and ethnicity.

Outcome Measure	Target 2017	Cohort entering Au16-Su17* *Does not include SP17 or SU17	Cohort entering Au15-Su16	Cohort entering Au14-Su15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
GPA of accepted graduate and undergraduate degree applicants	≥3.60/4.00 Average Graduate Applicant GPA ≥3.30/4.00 Average Undergraduate Applicant GPA	PhD = 3.49 MS = 3.45 MPH = 3.49 MHA = 3.55 BSPH = 3.39	PhD = 3.49 MS = 3.42 MPH = 3.47 MHA = 3.47 BSPH = 3.46	PhD = 3.35 MS = 3.36 MPH = 3.49 MHA = 3.47 BSPH = 3.42	Admitted graduate applicant mean GPAs ranged from 3.41-3.55/4.0, below target metric; however, undergraduate admitted applicant mean GPA of 3.39-3.46/4.0 exceeded target metric.
GRE scores of accepted graduate degree applicants	≥70 th Percentile Q and V Average scores of Admitted Graduate Degree Students	PhD = 66Q, 72V MS = 79Q, 68V MPH = 61Q, 70V MHA = 57Q, 68V	PhD = 72Q, 66V MS = 73Q, 71V MPH = 60Q, 67V MHA = 55Q, 67V	PhD = 60Q, 69V MS = 78Q, 75V MPH = 60Q, 67V MHA = 61Q, 67V	Admitted graduate applicant GRE (Q;V) scores ranged from 55-75 th percentile for Q, and, 66-70 th for V close to target metrics.
ACT scores of accepted undergraduate applicants	≥30 Average scores of Admitted Undergraduate Degree Students	BSPH: 28.3	BSPH = 27.8	BSPH = 27.1	Admitted undergraduate applicant ACT scores showed slight increase to 28.3 but below target metric. However, in line with University average
		Graduated 2015-2016	Graduated 2014-2015	Graduated 2013-2014	
Graduation rate within College's time-to-degree limits	≥80% Students Graduate within Maximum Time Permitted for Degree Completion: BSPH = 5yr MPH = 5yr MHA = 6yr MS = 6yr PhD = 8yr	PhD = 91% MS = 67% (2/3) MPH = 91% MHA = 96% BSPH=82%	PhD = 88% MS = 100% MPH = 83% MHA = 91% BSPH=98%	PhD = 50% (2/4) MS = 100% MPH = 84% MHA = 91% BSPH=IP	Percentage of students graduated from graduate degree programs within maximum 5 year period ranged from 91-96%, and exceeded minimum metric (except for 67% from MS since one of three original students left program and 3 is a very low denominator).
Graduates in applicable jobs or continued/advanced education	≥80% graduates	PhD =100% MS = 20%* MPH = 100% MHA = 92% BSPH=95% *only 1 of 5 students responded to survey	PhD = 100% MS = 50% (1 of 2)* MPH = 93% MHA = 95% BSPH=96% * effected by extremely low denominator	PhD = 100% MS = 100% MPH = 98% MHA = 100% BSPH=97%	Percentage of graduates from graduate and undergraduate programs who secured employment or continued advanced education ranged from 85-100% and exceeded the target metric (except for one of two grads from MS)

1.2 Evaluation

Strategic Goal B.2. Teaching and Learning: *Enhance student life experiences at the College and University.*

Outcome Measure for B.2.1.

Initiative: *Increase the percentage of courses held in in Cunz Hall classrooms.*

Outcome Measure	Target 2017	2016-17* (only AU16 data available)	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Courses scheduled in Cunz Hall classroom spaces	≥50% of College's courses in Cunz Hall classrooms	No. class sessions = 27/72 Percentage courses in Cunz = 37.5%	No. class sessions = 52/118 Percentage courses in Cunz = 44%	No. class sessions = 67/122 Percentage courses in Cunz = 55%	The percentage of classes held in Cunz Hall has been below the target metric and declining. The College continues to work with OSU central scheduling.

Outcome Measures for B.2.2.

Initiative: *Survey students to evaluate the student experience from the point of pre-admission through graduation.*

Outcome Measure	Target 2017	2015-16 138 surveyed/67 replied (48% response rate)	2014-15 133 surveyed/57 replied (42% response rate)	2013-14 141 surveyed/98 replied (67% response rate)	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Percentage of Year1 graduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Year 1 Student Survey.	Among students who respond to the survey, ≥80% graduate students strongly agree/agree for each of the categories surveyed	Curriculum PH Core = 97% Curriculum PH Specialization = 92% Curricula Plans indicate courses and requirements = 84% Course content	Curriculum PH Core = 94% Curriculum PH Specialization = 88% Curricula Plans indicate courses and requirements = 89% Course content	Curriculum PH Core = 88% Curriculum PH Specialization = 79% Curricula Plans indicate courses and requirements = 94% Course content is	For most of the survey categories, the Year 1 graduate students' reported percentages of strongly agree/agree for quality/satisfaction are consistently above the respective target metrics over three years. The reported percentage of Year 1 graduate students who indicated strongly agree/agree suggest that they are pleased with the public health core and specializations and

Outcome Measure	Target 2017	2015-16 138 surveyed/67 replied (48% response rate)	2014-15 133 surveyed/57 replied (42% response rate)	2013-14 141 surveyed/98 replied (67% response rate)	Summary of Outcomes for the 3-year Period and Relevant Action Plans
		<p>aligned w/ Course Learning Objectives =95%</p> <p>Course Objectives and Program Competencies listed in syllabi =n/a (inadvertently left off)</p> <p>Student Handbook = 83%</p> <p>OAPSS Staff Availability = 68%</p> <p>Faculty Advisement = 75%</p> <p>Classroom Comfort = 90%</p> <p>Computer Access = 86%</p> <p>Student Space = 79%</p> <p>Preparation for Jobs = 89%</p>	<p>aligned w/ Course Learning Objectives =93%</p> <p>Course Objectives and Program Competencies listed in syllabi =93%</p> <p>Student Handbook = 86%</p> <p>OAPSS Staff Availability = 74%</p> <p>Faculty Advisement = 89%</p> <p>Classroom Comfort = 86%</p> <p>Computer Access = 86%</p> <p>Student Space = 75%</p> <p>Preparation for Jobs = 86%</p>	<p>aligned w/ the Course Learning Objectives =82%</p> <p>Course Objectives and Program Competencies listed in syllabi =82%</p> <p>Student Handbook = 84%</p> <p>OAPSS Staff Availability = 70%</p> <p>Faculty Advisement = 73%</p> <p>Classroom Comfort = 81%</p> <p>Computer Access = 83%</p> <p>Student Space = 73%</p> <p>Preparation for Jobs = 72%</p>	<p>the related curriculum plans. They also feel that course content is aligned well with learning objectives and, in turn, objectives are aligned with the degree program competencies as shown in syllabi. There is also reported satisfaction with the Student hand-book.</p> <p>There is lower agreement, however, regarding availability of OAPSS staff and faculty advisement. The plan is to eventually increase staff, but during interim working toward improved efficiency and use of student workers to assist staff. Presentations have been conducted and guidelines shared with faculty members to work to improve the quality of student advisement.</p>

Outcome Measure	Target 2017	2015-16 187 surveyed/82 replied (43.8% response rate)	2014-2015 195 surveyed/79 replied (42% response rate)	2013-2014 125 surveyed/73 replied (58% response rate)	Summary of Outcomes for the 3-year Period and Relevant Action Plans
<p>Percentage of undergraduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Year 1 Student Survey.</p>	<p>Among students who respond to the survey, ≥80% undergraduate students strongly agree/agree for each of the categories surveyed</p>	<p>Curriculum PH =97%</p> <p>Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH=97%</p> <p>Curricula Plans, Accessible=95%</p> <p>Curricula Plans, Identify Needed Courses = 95%</p> <p>Curricula Plans, Identify Capstone Options = 70%</p> <p>OAPSS Staff Availability, Course Selection = 77%</p> <p>OAPSS Staff Availability, Career Advisement = 58%</p> <p>OAPSS Staff Help With, Course Selection = 64%</p> <p>OAPSS Staff Help With, Career Advisement = 36%</p> <p>OAPSS Staff Demonstrate Cultural Competency = 74%</p>	<p>Curriculum PH =100%</p> <p>Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH= 90%</p> <p>Curricula Plans, Accessible= 93 %</p> <p>Curricula Plans, Identify Needed Courses = 87%</p> <p>Curricula Plans, Identify Capstone Options = 81%</p> <p>OAPSS Staff Availability, Course Selection = 96%</p> <p>OAPSS Staff Availability, Career Advisement = 76%</p> <p>OAPSS Staff Help With, Course Selection = 81%</p> <p>OAPSS Staff Help With, Career Advisement = 47%</p> <p>OAPSS Staff Demonstrate Cultural Competency = 87%</p>	<p>Curriculum PH = 98%</p> <p>Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH=95%</p> <p>Curricula Plans, Accessible= 93%</p> <p>Curricula Plans, Identify Needed Courses = 92%</p> <p>Curricula Plans, Identify Capstone Options = 59%</p> <p>OAPSS Staff Availability, Course Selection = 92%</p> <p>OAPSS Staff Availability, Career Advisement = 67%</p> <p>OAPSS Staff Help With, Course Selection = 85%</p> <p>OAPSS Staff Help With, Career Advisement = 51%</p>	<p>For most of the survey categories, the Year 1 undergraduate students’ reported percentages of strongly agree/agree for quality/satisfaction are consistently above the respective target metrics over three years.</p> <p>The reported percentage of Year 1 undergraduate students who indicated strongly agree/agree suggest that they are pleased with the public health core and specializations and the related curriculum plans.</p> <p>There is lower agreement, however, regarding availability of OAPSS staff availability and career planning. The plan is to eventually increase staff, but during interim working toward improved efficiency and use of student workers to assist staff. Presentations have been conducted and guidelines shared with faculty members to work to improve the quality of student advisement, especially relative to career aspirations.</p>

Outcome Measure	Target	AU2015-SP2016 125 graduated/69 replied (55% response rate)	2014-2015 128 graduated/90 replied (0% response rate)	2013-2014 126 graduated	Summary of Outcomes for the 3-year Period and Relevant Action Plans
<p>Percentage of graduating graduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Exit Graduating Student Survey.</p>	<p>Among students who respond to the survey, ≥80% graduate students strongly agree/agree for each of the categories surveyed</p>	<p>Overall PH Curriculum = 90%</p> <p>Specialization, Curriculum =**</p> <p>Knowledge and Skills Prepare for Job/ Edu = 90%</p> <p>Identify Volunteer and Internships =**</p> <p>Help Focus Career Goals = 74%</p> <p>Meeting Expectations = 75%</p> <p>Promotes Cultural Competency = n/a**</p> <p>**Questions were not asked in 15-16 Survey because cooperative transition from College to the University centralized Exit Survey system inadvertently omitted. OAPSS has worked to correct this for future Exit Survey.</p>	<p>Overall PH Curriculum = 100%</p> <p>Specialization, Curriculum = 90%</p> <p>Knowledge and Skills Prepare for Job/ Edu = 85%</p> <p>Identify Volunteer and Internships = 70%</p> <p>Help Focus Career Goals = 56%</p> <p>Meeting Expectations = 72%</p> <p>Promotes Cultural Competency = 89%</p>	<p>Overall PH Curriculum = 98%</p> <p>Specialization, Curriculum = 95%</p> <p>Knowledge and Skills Prepare for Job/Edu = 75%</p> <p>Identify Volunteer and Internships = 52%</p> <p>Help Focus Career Goals = 64%</p> <p>Meeting Expectations = 83%</p>	<p>For most of the survey categories, the graduating graduate students’ reported percentages of strongly agree/agree for quality/satisfaction are consistently above the respective target metrics over three years.</p> <p>The reported percentage of the exiting graduate students who indicated strongly agree/agree suggest that they are pleased with the overall public health curricula and are prepared for employment or continued advanced education and training.</p> <p>There is lower agreement, however, regarding quality of career services available by the College or University. Survey and anecdotal data show that this is a consistent concern from current and exiting students. At the College-level, the plan is to eventually increase staff, but during interim working toward improved efficiency and use of student workers to assist staff to free some time that can be directed toward career services. In addition, efforts are reportedly expanding at the University-level to improve career services. Finally, efforts are underway to get faculty members more involved as part of their overall advisement activities.</p>

Outcome Measure	Target	AU2015-SU2016 74 students graduated/34 responses (46% response rate)	2014-2015 82 graduates/43 responses (52% response rate)	2013-2014 32 graduated/21 replied 65% response rate	Summary of Outcomes for the 3-year Period and Relevant Action Plans
<p>Percentage of graduating undergraduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Exit Graduating Student Survey.</p>	<p>Among students who respond to the survey, ≥80% undergraduate students strongly agree/agree for each of the categories surveyed</p>	<p>Relevance of core =89%</p> <p>Relevance of specialization = 66%</p> <p>Quality PH Faculty = 94%</p> <p>Quality Specialization Faculty = 89%</p> <p>Balance Theory and Practice = 74%</p> <p>Understanding Field PH = 91%</p> <p>Job, Graduate/ Professional School = 83%</p> <p>Help With Career Services = 49%</p> <p>Focus Career Goals =69%</p> <p>Met Overall Expectations =77%</p>	<p>Relevance of core = 89%</p> <p>Relevance of specialization = 45%</p> <p>Quality PH Faculty, = 97%</p> <p>Quality Specialization Faculty, = 84%</p> <p>Balance Theory and Practice = 55%</p> <p>Understanding Field PH = 100%</p> <p>Job, Graduate/ Professional School = 95%</p> <p>Help With Career Services = 50%</p> <p>Focus Career Goals = 68%</p> <p>Met Overall Expectations = 76%</p>	<p>Relevance of core = 95%</p> <p>Relevance of specialization = 68%</p> <p>Quality PH Faculty, = 95%</p> <p>Quality Specialization Faculty, = 89%</p> <p>Balance Theory and Practice = 68%</p> <p>Understanding Field PH = 100%</p> <p>Job, Graduate/ Professional School = 89%</p> <p>Help With Career Services = 68%</p> <p>Focus Career Goals = 79%</p> <p>Met Overall Expectations = 89%</p>	<p>For most of the survey categories, the graduating undergraduate students' reported percentages of strongly agree/agree for quality/satisfaction are consistently above the respective target metrics over three years.</p> <p>The reported percentage of exiting undergraduate students who indicated strongly agree/agree suggest that they are pleased with the overall public health curricula and are prepared for employment or continued advanced education and training.</p> <p>Consistent with other evaluations for both graduate and undergraduate students and graduates, there is lower agreement, however, regarding quality of career services available by the College or University.</p> <p>Survey and anecdotal data show that this is a consistent concern from current and exiting students. At the College-level, the plan is to eventually increase staff, but during interim working toward improved efficiency and use of student workers to assist staff to free some time that can be directed toward career services. In addition, efforts are reportedly expanding at the University-level to improve career services. Finally, efforts are</p>

Outcome Measure	Target	AU2015-SU2016 74 students graduated/34 responses (46% response rate)	2014-2015 82 graduates/43 responses (52% response rate)	2013-2014 32 graduated/21 replied 65% response rate	Summary of Outcomes for the 3-year Period and Relevant Action Plans
					underway to get faculty members more involved as part of their overall advisement activities.
Student Evaluation of Instruction (SEI) survey scores	≥80% of the College's courses with SEI scores ≥4.0/5.0	AU15=75% (n=40) SP16=78% (n=40) SU16=100% (n=6) Total 78%= (n=110)	AU14=78% (n=43) SP15=77% (n=44) SU15=75% (n=3) Total = 78% (n=116)	AU13=86% (n=44) SP14=74% (n=40) SU14=100% (n=4) Total=81% (n=109)	The average percentage of College courses/faculty receiving SEI evaluation scores ≥4.0/5.0 ranges from 78-81% over three years. Although not a perfect indicator, the SEI is the major evaluation tool used by the University. Accordingly, the College is working to improve quality of course management and teaching to improve the overall scores. The College has a full-time Instructional Designer and the University has a Center where faculty are directed to develop and/or improve course management and delivery skills.

Strategic Goal B.3. Teaching and Learning: Develop and update academic courses and programs that are contemporary, relevant and accessible.

Outcome Measures for B.3.1.

Initiative: Investigate the feasibility of integrated core curriculum; develop integrated core curriculum where ready.

Outcome Measure	Target 2017	2015-16	2014-15	2013-14	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Alignment of MPH with ASPPH <i>Framing the Future</i> report, societal needs, and applicable CEPH criteria	Implement more efficient structure and ensure effective and contemporary MPH professional degree core content.	Complete new structure and plan for delivery; reviews and approvals via College GSC, College faculty, OSU Graduate School and OSU OAA.	Truncated MPH core competencies. Begin formal discussions and development of more efficient and effective structure and delivery of MPH core content.	Reviewed ASPPH <i>Framing the Future Report MPH for 21st Century</i> . Mapped core curriculum to identify potential overlap and confirm topics.	This initiative remains ongoing work in progress with formal and informal discussions. New CEPH criteria expected during Au2016 will be considered and may influence ultimate plan.

Outcome Measures for B.3.2.

Initiative: Increase accessibility to courses and programs through distance learning (DL).

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of distance learning (DL) course modules and courses	All core content available as DL accessible topic-specific modules	Five DL courses (three core courses) for MPH and two for BSPH degree programs.	DL version of additional MPH core course; one undergraduate course	Hybridized courses for MPH-PEP; DL versions of two MPH core courses	The University defines a course as "distance-based" if >75% of content is delivered on-line either synchronously or asynchronously. There is a University goal to expand accessibility to course and programs via distance education. The College is slowly and deliberately expanding development of distance learning courses. It takes much time to do this well. However, there has been

1.2 Evaluation

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
					progress and target metric will likely be met in 2017.
Quality of DL Modules and Courses	Meet QA/QC Standards as per Quality Matters™ process	Fully implement Quality Matters™ QA/QC program	Increase baseline involvement with OSU Office for Distance Education and eLearning (ODEE)	Hired new Instructional Designer Margaret Murphy, MEd	The Quality Matters™ program was implemented at the University during the past year and adopted by the College. The Instructional Designer is leading this effort and working with the Senior Associate Dean to incorporate into assessment process for both distance and classroom-based courses.

Outcome Measures for B.3.3.
Initiative: *Expand the 3+2 combined BSPH-master degree program in collaboration with other colleges or universities.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of joint 3+2 BSPH-master degree programs	Eight 3+2 BSPH-master degree programs	Expansion will likely continue during calendar year 2017 (see Summary in last column)	One Bachelor Dalian Medical University-OSU MPH curricula	Four BSPH-MPH curricula	Five 3+2 combined degree programs were established. Efforts to expand have stalled to some degree while the existing programs are evaluated to ensure that there is a distinction between scope and depth and overall rigor between under-graduate courses and graduate courses. Focus group data involving seven students suggests that this has been achieved. Attention continues to focus on this and expansion of the number of programs will likely continue during 2017.

Outcome Measures for B.3.4.

1.2 Evaluation

Initiative: *Revise MPH-PEP and MPH-HSMP to form a hybridized curriculum in Population Health Management, making the degree more accessible for working professionals; implement in fall 2017 for weekend plus distance learning delivery such as a certificate program in population health management for MPH or MHA.*

Outcome Measure	Target 2017	2016-17	2014-15	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Revised MPH-PEP curriculum launched	Full implementation beginning SU 2017	Develop new courses and map to competencies; begin marketing curriculum plans via College Website and targeted mailings; collaborate with College of Business among others and complete new hires of applicable faculty full-time equivalents (1-2FTE) and staff (0.5FTE)	Proposal developed for revised MPH-PEP with areas of concentration in <i>Public Health Leadership and Organizations</i> ; and, <i>Population Health Management</i> , approved by College GSC and faculty; submitted to OSU Graduate School and OAA. New faculty member hired to assist with implementation and delivery.	Formed and charged workgroup in AU2013; applicable reviews and focus groups conducted; revised competencies developed; areas of concentrations discussed and drafted	This effort continues to evolve and will result in modifications to the existing competencies and curriculum for the current MPH-Program for Experienced Professionals. The current core is the same, but the plan is for implementing the revised area of concentration consisting of some new/modified courses beginning summer 2017 through spring 2018.

Strategic Goal B.4. Teaching and Learning: Provide students with opportunities to participate in relevant hands-on public health activities in local, national and international settings.

Outcome Measures for B.4.1.

Initiative: *Expand the global scholars program to support opportunities for students.*

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number Field Experience in Global Health Courses/Sites	Five international sites	No. Field Experience in Global Health Sites = 4 (India; China; Japan; Finland/ Estonia)	No. Field Experience in Global Health Sites = 3 (India; China; Japan)	No. Field Experience in Global Health Sites = 2 (India; China)	The College has four formal courses designated as <i>Field Experience in Global Public Health</i> . These faculty-led courses, coordinated by the University Office for International Affairs, provide a combination of classroom and international travel and have been well-received by students. There are other less formal opportunities for public health students to engage in international activities with faculty members (e.g. OSU One Health East Africa), but the goal is to build more of these formal courses over time.

Outcome Measures for B.4.2.

Initiative: *Sustain current relationships and build new ones with applicable agencies, organizations and industries to expand sites for student practicums and internships.*

Outcome Measure	Target 2017	2015-16	2014-15	2013-14	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of sites and sectors represented for practicum.	60 sites 10 sectors	Total Students: 80 Total Sites = 40 Total Sectors =10	Total Students = 80 Total Sites = 43 Total Sectors = 10	Total Students = 77 Total Sites = 39 Total Sectors = 9	The College has demonstrated access for student placement at numerous sites across different sectors. Efforts to expand continue.

1.2 Evaluation

C. RESEARCH and INNOVATION

Strategic Goal C.1. Research and Innovation: *Demonstrate ongoing improvement of research productivity and performance.*

Outcome Measures for C.1.1.

Initiative: *Continually increase demonstration of research success based on receipt of competitive external grants and contracts, generation of peer-reviewed publications, and national and international presentations.*

Outcome Measure	Target 2017	2016	2015	FY2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Peer-Reviewed Publications	100% applicable faculty published each year	Total Publications = 155 Percentage Faculty Publishing = 86%	Total Publications = 247 Percentage Faculty Publishing = 95%	Total Publications = 236 Percentage Faculty Publishing = 89%	Applicable faculty refers to those faculty members who are expected to publish, which represents the majority of the College's primary faculty members. Although the number of publications remains relatively high, the percentage of faculty publishing ranges from 89-95% for the three year period which is below the target metric. Faculty performance plans will continue to set goal.
Conference Presentations	100% applicable faculty presented each year at national and international conferences	Total Presentations = 107 Percentage Faculty Presenting = 68%	Total Presentations = 145 Percentage Faculty Presenting = 86%	Total Presentations = 164 Percentage Faculty Presenting = 86%	The number of presentations remains relatively high, but the percentage of faculty presenting ranges from 68-86% for the three year period which is below the target metric. Faculty performance plans will continue to set goal.

1.2 Evaluation

Outcome Measure	Target 2017	2016	2015	FY2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Grants and Contract Proposals Submitted	80% applicable faculty submitting as PI and 100% submitting in any role per year	Total Proposals Submitted =142 \$74,659,035 Percentage Faculty Submitting as PI = 75% Any Role = 82%	Total Proposals Submitted = 200 \$52,874,099(FY) Percentage Faculty Submitting as PI = 60% Any Role = 71%	Total Proposals Submitted = 155 \$34,004,112(FY) Percentage Faculty Submitting as PI = 62% Any Role = 81%	The Research Office has expanded services to facilitate and enhance the quality and number of proposals submitted by faculty members for external funding. For example, there are more opportunities for proposal writing workshops as well as improved process internal and external peer review of proposals prior to formal submission.
Grants and Contracts Funded	50% applicable faculty funded as PI and 100% funded in any role per year	Total Awards No. = 107 Funding = \$8,091,228 Percentage Faculty Funded: as PI = 36% Any Role = 64%	Total Awards No. = 128 Funding= \$5,856,293 Percentage Faculty Funded: as PI = 38% Any Role = 56%	Total Awards No. = 117 Funding= \$8,113,097 Percentage Faculty Funded: as PI = 34% Any Role = 55%	
Total Research Expenditures	\$9,000,000 (FY)	Total Expenditures = \$6,618,962	Total Expenditures = \$7,175,779 (FY)	Total Expenditures = \$6,339,766 (FY)	
Direct Cost Research Expenditures	\$6,000,000 (FY)	Total DC Expenses = \$4,767,733	Total Recovered = \$5,162,478 (FY) 39% on average	Total Recovered = \$4,712,421 (FY) 35% on average	
IDC Recovery	\$3,000,000 (FY) 50% on average	Total Recovered = \$1,851,230 39% on average	Total Recovered = \$2,013,301 (FY) 39% on average	Total Recovered = \$1,627,345 (FY) 35% on average	
T32 Training Grants	1 T32 training grant submitted 1 T32 Training grant funded (2018) 2 Graduate students funded on OSU T32s 2 Postdocs funded on OSU T32s 10 of Faculty participating in funded OSU training grants	Total T32 Proposals Submitted = 0 Number of T32s Funded = 0 Graduate Students Funded on OSU T32s = 1 Postdocs Funded on OSU T32s = 1 Faculty Participating in OSU T32s = 5	Total T32 Proposals Submitted = 0 Number T32s Funded = 0 Graduate Students Funded on OSU T32s = 1 Postdocs Funded on OSU T32s = 1 Faculty Participating in OSU T32s = 5	Total T32 Proposals Submitted = 0 Number T32s Funded = 0 Graduate Students Funded on OSU T32s = 1 Postdocs Funded on OSU T32s = 1 Faculty Participating in OSU T32s = 5	

1.2 Evaluation

Outcome Measure	Target 2017	2016	2015	FY2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Invention Disclosures	1 Disclosure submitted	Total Disclosures Submitted = 1	Total Disclosures Submitted = 0	Total Disclosures Submitted = 0	
Patents	1 Patent (2018)	Total Patents Awarded = 0	Total Patents Awarded = 0	Total Patents Awarded = 0	

D. OUTREACH & ENGAGEMENT

Strategic Goal D.1. Outreach and Engagement: Serve on key external committees, sections, councils and Boards.

Outcome Measures for D.1.1.
Initiative: Faculty involved with external organizations and representation on external committees, sections, councils, and Boards.

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Faculty representation	100% faculty involved	90% (43 of 48)	93% (41 of 44)	90% (38 of 42)	Positive progress toward target.
Number organizations	100	134	123	117	
Cumulative activities	200	182	163	155	

Strategic Goal D.2. Outreach and Engagement: Establish Ohio State as the preferred academic partner with other higher education institutions and health organizations locally, regionally, nationally and internationally.

Outcome Measures for D.2.1.

Initiative: Utilize grants and contracts to provide public health organizations with technical assistance in organizational development, strategic planning, quality improvement and group facilitation.

Outcome Measure	Target 2017	2016 (To Date)	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number of working professionals educated via Center for Public Health Practice	2,000 professionals	Total Number = 1,955 Summer Enrollees = 136	Total Number = 2,586 Summer Enrollees = 149	Total Number = 3,629 Summer Enrollees = 134	Positive outreach relative to number of working professionals training.
Number of DL Accessible Modules	50 modules or courses	DL modules = 12 No. Accessed = 12	DL Modules = 15 No. Accessed = 15	DL Modules = 27 No. Accessed = 27	

Strategic Goal: Outreach and Engagement D.3. Formalize international engagement through University gateways and other international partners.

Outcome Measures for D.3.1.

Initiative: Establish at least one cooperative public health academic program with China and/or India gateway countries, or another, international partnering country.

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number collaborative international academic programs	At least one academic program developed and implemented.	Implement program	Review and approval OSU OAA. Formal MOU with Dalian Medical University.	Met with delegation from Dalian Medical University (DMU) and introduced them to College's 3+2 BSPH-MPH model. Drafted similar 4+2 for PH	

1.2 Evaluation

				Bachelor degree (DMU) w/ MPH (OSU). Reviewed and approvals via College and OSU Graduate School.	
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Outcome Measures for D.3.2.
Initiative: *Implement continuing education offerings within an international partner institution.*

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number continuing education courses delivered to international partner	At least one classroom course and one Web-based course		Hybrid Environmental and Occupational Health course developed and taught in Gondar, Ethiopia for merging professionals and working professionals. NIH Fogarty grant deliverable. Grant received by NIH for eCapacity to develop courses.	Environmental Health and Occupational Health courses developed and taught in Addis Ababa, Ethiopia for merging professionals and working professionals. NIH Fogarty grant deliverable.	

Outcome Measures for D.3.3.

Initiative: Assist one international partner institution in developing an outreach/practice program.

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number international offices for workforce development and program coordination/delivery	Formalized workforce development offices and programs in Addis Ababa and Gondar serving as model for East Africa	Collaborative CDC funding awarded for period 2016-2020 for the OSU One Health East Africa project. Staff will be present on consistent basis in Ethiopia. This plus an NIH Fogarty supplement for eLearning project are related to capacity building/workforce development	Grant proposal for OSU-East Africa workforce development capacity building plan and process submitted to CDC; Co-host outreach administrator Fulbright Scholar from Gondar. NIH Fogarty supplement awarded for eLearning project.	Meetings with Addis Ababa University regarding workforce development plan	Progress continues toward having a consistent presence and ongoing contribution toward establishing a model for workforce development in Ethiopia and eventually other East Africa countries.

Outcome Measures for D.3.4.

Initiative: Implement at least one joint outreach program or function in conjunction with another OSU health science college.

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number joint outreach programs	One joint program formalized and implemented	The collaborative projects associated with the CDC and NIH funding mentioned in prior initiative has formalized the program and full implementation continues to evolve.	College participated as major contributor on three grant proposals to expand and sustain the OSU One Health East Africa partnership	College of Public Health major partner with other OSU Health Sciences Colleges for OSU East Africa One Health collaborative	The University has seven health science colleges. The College is consistently and formally collaborating with the Colleges of Veterinary Medicine, Medicine and Nursing via the One Health projects currently funded in part by NIH and CDC. However, the collaboration extends beyond these to other colleges as well who participate in the One Health initiative.

1.2 Evaluation

E. RESOURCES

Strategic Goal E.1. Resource Stewardship: Ensure that faculty and staff members reflect a diverse culture.

Outcome Measures for E.1.1.

Initiative: *Identify current and desired cultural conditions that will enhance the College's abilities to achieve its strategic goals.* (Also refer to Outcome measures for A.1.1 and B.1.1)

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Full Integration and Alignment of Diversity and Inclusion Committee Best Practices for a Diverse and Culturally Aware College Setting	Best practices and activities integrated into and aligned with all aspects of College's efforts to achieve and sustain racially and ethnically diverse and culturally aware/sensitive faculty, staff and student populations.		Committee developed <i>Diversity and Inclusion Plan</i> requested from all Colleges by the University Provost addressing diversity and inclusion. Sponsored College's Diversity Summit.	Committee established new goals relative to faculty, staff and student recruitment to enhance existing practices. Conducted activities toward improving cultural awareness and competency. Sponsored College's Diversity Summit.	The Diversity and Inclusion Committee continues to contribute positively to strengthening the culture and practices within the college among faculty, staff and students.
Diverse representation of faculty on committee	Representative Ohio Demographics		White: 75% (n=6) Black: 25% (n=2) Female: 63% (n=5) Male: 37% (n=3)	White: 86% (n=6) Black: 14% (n=1) Female: 72% (n=5) Male: 28% (n=2)	The remains evidence of diverse representation of faculty, staff, students and alumni actively serving on the College's Diversity and Inclusion Committee. The Committee remains very active with plan for 2016-17 to increase interactions and communications
Diverse representation of staff on committee	Representative Ohio Demographics		White: 83% (n=5) Black: 17% (n=1) Female: 100% (n=6)	White: 83% (n=5) Black: 17% (n=1) Female: 100% (n=6) Male: 0% (n=0)	

1.2 Evaluation

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Diverse representation of alumni on committee	Representative Ohio Demographics		Black: 100% (n=1) Female: 100% (n=1)	Black: 100% (n=1) Female: 100% (n=1)	with the Executive Committee.
Diverse representation of students on committee	Representative Ohio Demographics		Black: 80% (n=4) Hispanic: 20% (n=1) White: 0% Female: 60% (n=3) Male: 40% (n=2)	White: 40% (n=2) Black: 60% (n=3) Female: 60% (n=3) Male: 40% (n=2)	
Completion of University diversity training	100% Applicable Faculty and Staff Members	We can only report qualitatively that most faculty and some staff members have completed the University diversity training. It is a mandate by the University that members of search committees complete training. To improve access to diversity training (and other types of employee trainings) the University has recently created on-line trainings through a system called BuckeyeLearn. Trainings are now available for areas such as HIPAA, PCI compliance, Security and Lab Safety, and Diversity and Inclusion. Additional trainings will be deployed in the near future. BuckeyeLearn has the ability to send out reminders, schedule reoccurring trainings and incorporate directly into onboarding workflow. There is also a mechanism to track successful completion of the trainings and our Information Systems and HR Offices will be responsible monitoring compliance.			

Outcome Measures for E.1.2.

Initiative: *Require all faculty searches to have a diverse pool of applicants, including underrepresented minorities.*

Outcome Measure	Target 2017	2015-16 Hires	2014-15 Hires	2013-14 Hires	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Diversity of faculty applicant pools	100% applicable searches	17 Applicants Female 35% (n=6) Male 65% (n=11) Black 6% (n=1) Asian 12% (n=2) White 70% (n=12) Unknown 12% (n=2)* 3 Hired** Female 67% (n=2)	31 Applicants Female 45% (n=14) Male 48% (n=15) Unknown 7% (n=2)* Black 3% (n=1) Asian 23% (n=7) Hispanic 6% (n=2) White 42% (n=13) Unknown 26% (n=8)*	145 Applicants Female 47% (n=53) Male 49% (n=71) Unknown 14% (n=21)* Black 7% (n=11) Asian 28% (n=40) Hispanic .5% (n=1) White 36% (n=52) Two or More Races	While percentages of total underrepresented groups have improved, efforts will continue to attempt to attract an even more diverse applicant pool from among all groups.

Outcome Measure	Target 2017	2015-16 Hires	2014-15 Hires	2013-14 Hires	Summary of Outcomes for the 3-year Period and Relevant Action Plans
		Male 33% (n=1) Black 33% (n=1) White 67% (n=2)	1 Hired Female 100% (n=1) White 100% (n=1)	1% (n=2) International 2.5% (n=3) Unknown 25% (n=36)* 9 Hired Female 40% (n=4) Male 60% (n=5) Black 20% (n=2) Asian 10% (n=1) Two or More Races 10% (n=1) White 60% (n=5)	
<p>*EEL form not returned **Applicant pool does not include 4 additional hires for 2015-16 (3 male, 1 female; 1 Black, 2 Asian, 1 Hispanic). Records were not kept correctly by new staff member. This person is no longer with the College. Appropriate procedures were reviewed with all staff who assist with the search process. Note: Diversity data for faculty search applicant pools were not available for the 2016-17 new hires. The University implemented a new online response process that applicants were unable to access. The College has now transitioned to using the Academic Jobs Online Service which collects and provides these data.</p>					

Outcome Measures for E.1.3.
Initiative: Continue to recruit senior and mid-career faculty to maintain strength in key leadership positions in the College.

Outcome Measure	Target 2017	2016-17 Hires	2015-16 Hires	2014-15 Hires	Summary of Outcomes for the 3-year Period and Relevant Action Plans
New division chairs	2 new division chairs	K. Archer, PhD Chair, Division Biostatistics (Jul'16)	Wm. Miller, MD, PhD Chair, Division of Epidemiology (Mar'16)	Neither Chair vacancy were filled for Environmental Health or Epidemiology	The College has had three vacancies for Division Chair positions and two were filled: Biostatistics and Epidemiology. The Chair search for Environmental Health remains open.
Number Associate and Full-professor hires	Eight new senior and mid-career faculty hired since 2014	1 Professor/Chair 3 Asst. Professors	1 Professor/Chair 3 Asst. Professors	1 Asst. Professor <u>Note: During 2013-14</u>	The College has managed to replace faculty positions vacated due to retirements and attrition, as well as,

1.2 Evaluation

Outcome Measure	Target 2017	2016-17 Hires	2015-16 Hires	2014-15 Hires	Summary of Outcomes for the 3-year Period and Relevant Action Plans
				1 Professor/Dean 3 Assoc. Professor 6 Asst. Professor	hire additional faculty members.

Outcome Measures for E.1.4.
Initiative: *Recruit highly qualified faculty to lead initiatives in global health and multicultural health.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Number new hires with international and multicultural health experience	Five new faculty hired	Wm. Miller, MD, PhD Chair/Prof, Epidemiology M. Weir, PhD Assist. Prof. Environ Health	F. Adetona, PhD Assist. Prof. Environ Health A.Felix, PhD Assist. Prof. Epidemiology	In 2013-14 appointed Qinghua Sun, MD, PhD Assistant Dean for Global Public Health (Note: During 2013 hired others with strong international PH experience: William martin, MD, Maria Gallo, PhD	The number of faculty with applicable past and active international experience in public health contuse to increase. This aligns with University and College goal to continue expansion of outreach to international regions.

Strategic Goal E.2. Resource Stewardship: *Expand utilization of information technology.*

Outcome Measures for E.2.1.

Initiative: *Expand usage of technology and practices to improve efficiency and effectiveness of data collection, analysis, centralized archiving, and retrieval to more easily retrieve data and generate reports.*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Centralized College Data Collection and Retrieval Portal	Centralized portal established and implemented January 2017		Proposed improvement and conversion to centralized approach. Approved by College's Executive Committee	Data collected by distinct units w/in College	For years College administrators, faculty and staff have encountered barriers to consistently efficient and effective collection and/or retrieval of data. While improvements have been observed at both the University- and College-levels, planning for improvements is underway. The first step is to increase consolidation and centralization of the various categories of data and the related summaries. The related step, is to expand the scope of faculty and staff involved and responsible by establishing Data Subcommittees within the applicable Committees and Offices within the College. In relation, the College is exploring the need for a person to centrally coordinate.
College Data Subcommittees	Full implementation January 2017	Develop subcommittee structure w/in select Committees and Offices	Identified need for enhanced efficiency	—	

Strategic Goal E.3. Resource Stewardship: *Continue to support financial sustainability.*

Outcome Measures for E.3.1.

Initiative: *Ensure enrollment growth in new and established academic programs based on the sums of credit hours generated for undergraduate student and graduate student enrollments each year.*

Outcome Measure	Target 2017	FY 2016	FY 2015	FY 2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Total semester credits of enrollment	3% growth per year	<p>Total Credits = 13,407 (+5.9%)</p> <p>Undergraduate Credits = 5,989 (+13.8%)</p> <p>Graduate Credits = 7,418 (<+1%)</p>	<p>Total Credits = 12,659 (+8.5%)</p> <p>Undergraduate Credits = 5,263 (+17.5%)</p> <p>Graduate Credits = 7,396 (+2.8%)</p>	<p>Total Credits = 11,672</p> <p>Undergraduate Credits = 4,478</p> <p>Graduate Credits = 7,194</p>	<p>There has been significant increase in the enrollments based on total semester credits. The increase in both total and undergraduate credits has exceeded the target metric of 3% annual growth, but this is not observed for graduate credits which remain relatively flat.</p> <p>The majority of graduate enrollments are due to the MPH degree. Prospective students have their choice of seven MPH programs in the State, including one at another accredited school of public health. Graduate credits have remained relatively flat or shown modest increase over the past several years which may be an influence of the other choices for students.</p>

Outcome Measures for E.3.2.

Initiative: *Secure new and ongoing development support for the College through enhanced alumni relations, major donor cultivation, and increased foundation and corporate fundraising activity. Funds reported in fiscal year totals include philanthropic gifts from individuals as well as grants, sponsorships, and contracts secured through foundations, corporations and other organizations to support research and other programming within the college. A portion of reported funds may also be reflected in research funding figures.*

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Amount of funds secured per year	\$1,500,000	Total funds = \$1,500,000	Total funds = \$1,556,688.	Total funds = \$2,186,232.	Development funds vary annually and remain close to target metric. However, the plan is to expand efforts to attract development funds.

Outcome Measures for E.3.3.

Initiative: *Increase student scholarships and fellowships via increased development and external grants.*

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Scholarship funds from development contributions per year for student tuition, stipend and/or travel.	\$100,000. per year	Total funds = \$90,000	Total funds = \$87,036.	Total funds = \$67,800	Scholarship funds from development have gradually increased but remain below target. The College's position for development is currently vacant.

Outcome Measures for E.3.4.**Initiative:** *Increase student assistantships and fellowships via increased development and external grants.*

Outcome Measure	Target 2017	2016	2015	2014	Summary of Outcomes for the 3-year Period and Relevant Action Plans
Funds from College per year for student assistantships (e.g. GTAs)	\$500,000. per year	Total funds = \$486,192 No. PhD Students Funded = 16	Total funds = \$433,811. No. PhD Students Funded = 14.5	Total funds = \$399,686 No. PhD Students Funded = 14	Funds from the College for support of graduate teaching assistantships and fellowships have increased but remain below target metrics at this point. The College continues to identify approaches to substantially increase funding for doctoral students.
Funds from College per year for student Fellowships	\$225,000. per year	Total funds = \$205,000 No. PhD Students Funded = 1	Total funds = \$195,320. No. PhD Students Funded = 5	Total funds = \$115,215 No. PhD Students Funded = 3	

1.2.d. *Description of the manner in which the self-study document was developed, including effective opportunity for input by important school constituents, administrative staff, faculty, students, alumni and representatives of the public health community.*

The evaluation elements summarized in Table 1.2.1 contribute to a practice of assessment and self-study each year involving various administrators, faculty, staff, students and/or stakeholders internal and/or external to the College. Discussions regarding the self-study began in late 2013 and the formal self-study process for this extended accreditation by CEPH was launched in August 2014.

Dr. Michael Bisesi, Senior Associate Dean for Academic Affairs formed and has led the College's workgroup that has been actively involved in this effort. The process involved College administrators, faculty and staff. Table 1.2.3 shows the composition of the workgroup established in fall 2014. The workgroup leveraged the structure of existing committees and offices within the College. Individuals and groups with major responsibility for developing and reviewing content were assigned to each criterion.

Major review committees for the workgroup included the Executive Committee, Diversity and Inclusion Committee, Graduate Studies Committee, and Undergraduate Studies Committee. Offices that participated included Academic Programs and Student Services, Information Systems, and Research. Since the College is relatively small, almost everyone was involved to some degree in providing necessary information, in the form of data and/or narrative, to prepare the self-study document following the CEPH accreditation criteria template. However, key faculty and staff members, which composed the workgroup, were involved as primary authors/co-authors of applicable criteria-based sections. Administrators, faculty, staff and students from the College and alumni and community stakeholder groups outside of the University were also invited to be involved via Web-based access (Box; Web homepage) for reviews and comments of draft and preliminary self-study documents. The College did not formally engage the External Advisory Committee preparation of the document; however, components of the self-study draft were discussed during the fall 2015 telemeeting with them as well as some components during the on-campus spring 2016 meeting.

The first complete draft of the self-study was completed in January 2016 and reviewed internally by faculty and staff members, and, by three external paid consultants: Dr. Susan Allen (University of Washington), Dr. Kathy Miner (Emory University) and Dr. James Yeager (Johns Hopkins University). As mentioned, the College posted a link to the draft self-study and subsequently again for the preliminary self-study on its Website homepage and invited all undergraduate and graduate students as well as several health departments and other key members/stakeholders in the community and state to comment. These stakeholders were also asked to complete a short on-line questionnaire. In addition, the stakeholders were informed that they can share comments directly with CEPH.

Table 1.2.3 College of Public Health Workgroup Structure for CEPH Self-Study Process

Criterion	Topic for Each Criterion	CEPH Criteria 2011 PageNo.	Primary Lead Individuals Assigned for Providing, Drafting and Finalizing Content
1.0	The School of Public Health		
1.1	Mission (and Strategic Plan)	p. 3	Martin/Bisesi
1.2	Evaluation	p. 4	Bisesi/Droesch/Roberts/ExCom
1.3	Institutional Environment	p. 5	Florentine/Martin
1.4	Organization & Administration	p. 6	Martin/Bisesi
1.5	Governance	p. 7	Bisesi/Martin
1.6	Fiscal Resources	p. 8	Florentine
1.7	Faculty & Other Resources	p. 9	Bisesi/Roberts/Shymanski/Watts
1.8	Diversity	p. 11	Pearsol
2.0	Instructional Programs		
2.1	Degree Offerings	p. 13	Bisesi/Droesch
2.2	Program Length	p. 15	Bisesi/Droesch
2.3	Public Health Core Knowledge	p. 16	Bisesi/Katz
2.4	Practical Skills	p. 16	Williams/Droesch
2.5	Culminating Experience	p. 18	Bisesi/Katz
2.6	Required Competencies	p. 18	Bisesi/Chairs/Program Faculty
2.7	Assessment Procedures	p. 20	Bisesi/Kaye/Ferketich/Murphy
2.8	Other Grad Professional Degree	p. 21	Robbins
2.9	Bachelor Degree Public Health	p. 22	Kaye/Bisesi/Seiber
2.10	Other Bachelor's Degrees	p. 23	NA
2.11	Academic Degrees	p. 23	Bisesi/Katz
2.12	Doctoral Degrees	p. 24	Bisesi/Katz
2.13	Joint Degrees	p. 26	Droesch/Bisesi
2.14	Distance Education/Exec Degree	p. 26	Love/Andridge/Murphy
3.0	Creation, Application, Advance Knowledge		
3.1	Research	p. 28	Renick/Weghorst
3.2	Service	p. 29	Salsberry/Roberts
3.3	Workforce Development	p. 30	Sever/Wapner
4.0	Faculty, Staff & Students		
4.1	Faculty Qualifications	p. 32	Roberts/Bisesi
4.2	Faculty Policies & Procedures	p. 33	Florentine/Tanenbaum
4.3	Student Recruitment/Admission	p. 33	Droesch/Bullock
4.4	Advising & Career Counseling	p. 34	Williams/Droesch
Appendices	Electronic eResource File	-	Roberts/Droesch/Newhouse
Document	Final Edit	-	Bisesi/Tanenbaum/Roberts

1.2.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 1.2.

1.2 Evaluation

Strengths:

- The College continually works to improve the efficiency and effectiveness of its evaluations associated with the assessment process. The College continuously involves a broad array of internal and external constituents in improving planning and evaluation activities.
- The continuous efforts of the College to improve and strengthen overall assessment activities aligns well with efforts at the University-level to require, assess and use meaningful strategic plans, as well as efforts by the Office for Academic Affairs and the Graduate School to utilize assessment data.

Challenges/Weaknesses/Plans:

- One especially relevant challenge is a relatively low response rate for feedback solicited from alumni and employers. However, adequate response rates for current students and exiting graduates allows for affirmation of what is working well and identification of items and areas for improvement. The College will increase use of assembled focus groups as a more consistent, additional mode to conduct evaluations and collect data.
- This formal self-study over the past two years identified as a weakness the inconsistent sharing of evaluation data with relevant groups. This, however, has been improved over the past two years by increasing dissemination of relevant data summaries to faculty, staff and students. The plan moving forward to continually improve involves forming new College Data Subcommittees within key committees and offices to help add more formal structure and shared responsibility for components of the College's assessment process, including evaluation data collection and reporting. Full implementation will begin January 2017.

CRITERION 1.3 INSTITUTIONAL ENVIRONMENT

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

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

The Ohio State University was established as a land grant institution in 1870. As the State's leading comprehensive teaching and research university, the University combines a responsibility for the advancement and dissemination of knowledge with a long history of public service.

Ohio State University has the second largest single-campus enrollment in the country, with approximately 59,000 students in 15 colleges on its Columbus campus, and a total enrollment of over 64,000 including the regional campuses located in Lima, Marion, Newark, Mansfield and Wooster, Ohio. The University's student population includes over 10,000 graduate students and more than 3,000 professional students. There are more than 4,000 regular faculty (tenure track, clinical, and research) and approximately 23,000 staff. There are 239 undergraduate bachelor degrees, 148 master degrees, 7 professional degrees, and 114 doctoral degree programs. The total annual budget for FY16, including the Health System, exceeds \$6.1 billion.

The main campus is located in Columbus, the state capital and geographic center of the State. The Columbus metropolitan area covers 10 counties and includes over 1.9 million residents. Ohio State is the second-largest employer (State government is the first) in a diversified local economy that draws on a strong base including finance, manufacturing, agribusiness and health care.

The Higher Learning Commission of the North Central Association of Colleges and Schools (NCACS) reaccredited the university in September 2007, effective for ten years. The next NCACS site visit for reaccreditation review is scheduled for 2017.

In addition to accreditation as a school by the Council on Education for Public Health (CEPH), the College of Public Health also has a Master of Health Administration (MHA) program accredited by the Commission on Accreditation of Healthcare Management Education (CAHME). The next extended accreditation site visits for both CEPH and CAHME occur during October and November 2016, respectively.

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

Each of the 15 colleges at Ohio State University has a lead dean who reports directly to the Executive Vice President and Provost for Academic Affairs, who in turn, reports directly to the President. Among the 15 colleges, there are the seven health sciences colleges (HSCs), including Public Health, Dentistry, Medicine, Nursing, Optometry, Pharmacy, and Veterinary Medicine. The HSCs constitute the most comprehensive constellation of academic health-related colleges located on a single campus in the United States. The HSCs as well as the Wexner Medical Center are led by the Executive Vice President of Health Sciences. The Dean is responsible for all College activities and operations and reports to the Executive Vice President and Provost for overall academic matters and to the Executive Vice President of Health Sciences for issues specific to the HSCs. The Executive Vice President of Health Sciences, like the Executive Vice President and Provost for Academic Affairs, report directly to the University President. The organizational chart for the Office of Academic Affairs, **Figure 1.3.1**, shows the relationship of the College of Public Health to other colleges in the health sciences and the overall university.

There was a change in the University presidency in summer 2013 when Dr. Gordon Gee stepped down and was replaced with interim president Dr. Joseph Alutto for one year. Effective July 2014, new university president Dr. Michael Drake began his tenure as the 15th president of Ohio State University. The organizational chart for the executive University leadership is provided as **Figure 1.3.2** and indicates the relationship of the Executive Vice President and Provost to the President and Board of Trustees.

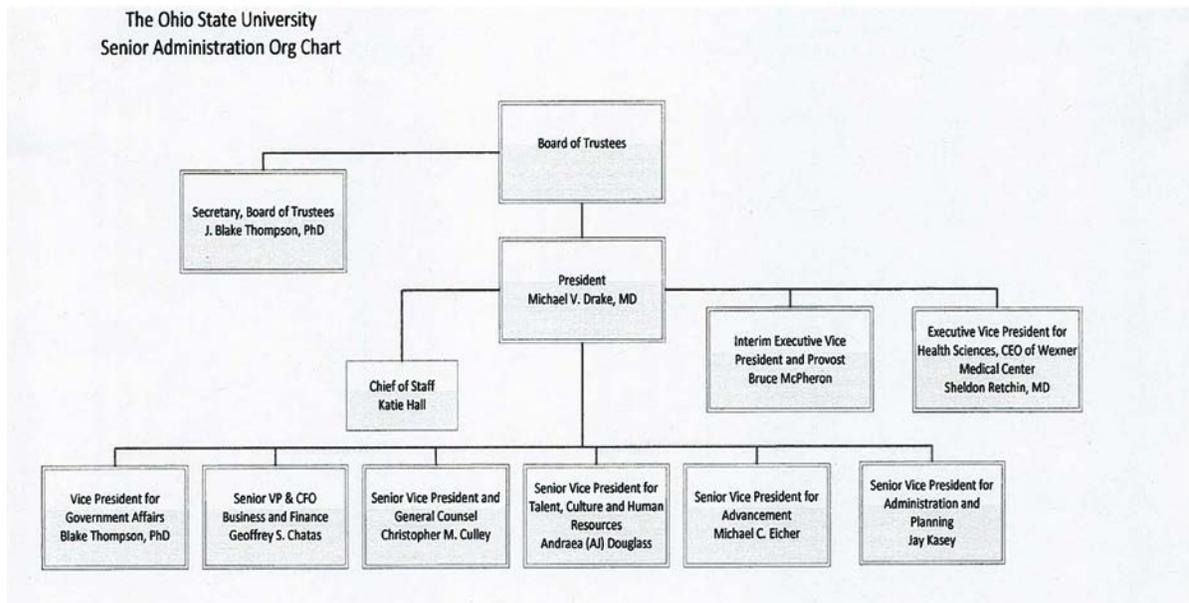


Figure 1.3.1 Reporting Structure of the Health Sciences Colleges

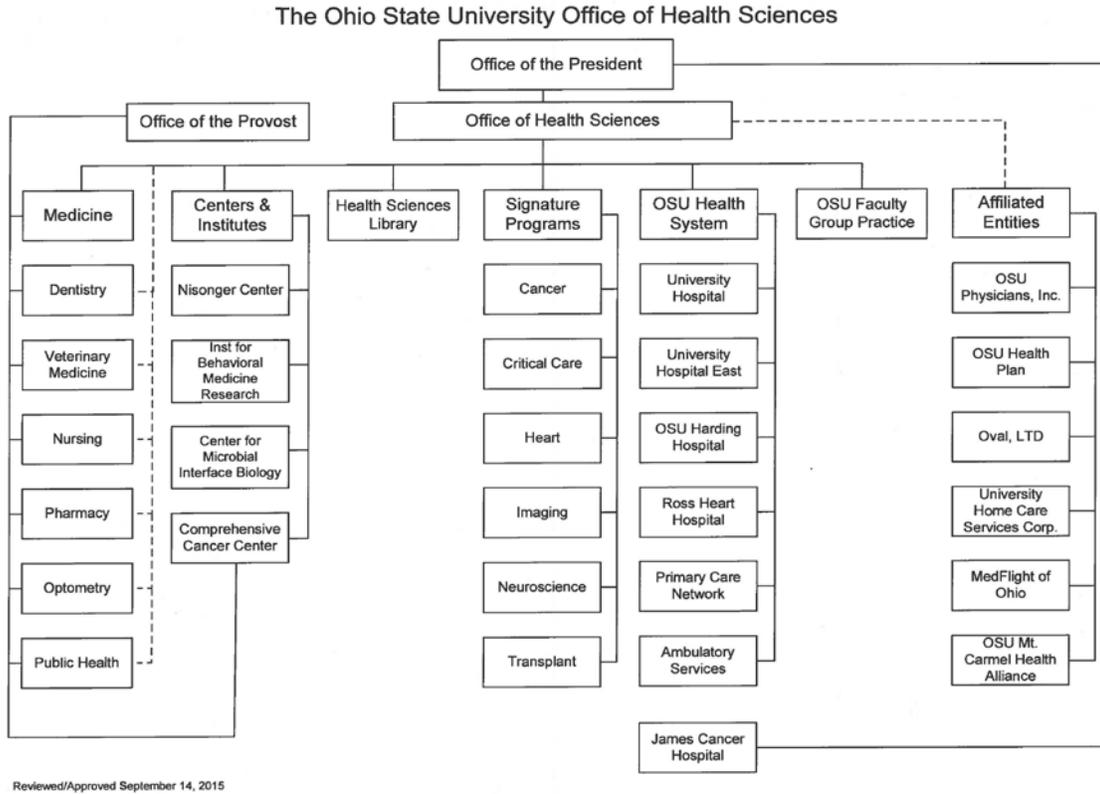


Figure 1.3.2 University Senior Leadership Structure

1.3.c. Description of the school’s level of autonomy and authority regarding the following:

- **budgetary authority and decisions relating to resource allocation**
- **lines of accountability, including access to higher-level university officials**
- **personnel recruitment, selection and advancement, including faculty and staff**
- **academic standards and polices, including establishment and oversight of curricula**

Budgetary Authority and Decisions Relating to Resource Allocation

The College of Public Health is the Tenure Initiating Unit (TIU) and thus, within the University, it functions as both a College and a single department. The budgetary authority of the College is entirely with the Dean and it is his responsibility to support the College’s five Divisions, the two Centers, and support service offices to accomplish the goals and initiatives of its strategic plan and meet expectations sated in its mission. Each year, the Dean reviews the budgetary needs of the College with

the Executive Committee (associate deans, division chairs and senior staff) to determine needed adjustments as programs continue to develop and/or change.

Currently, the University collects centrally the funds that are generated from tuition, legislative appropriations channeled through the Ohio Board of Regents as instructional subsidy, and indirect cost recoveries from applicable externally funded grants and contracts. Each college has a base budget that was initially established by the Office of Academic Affairs during fiscal year 2004. This base budget took into account the historical tuition, subsidy, and indirect cost recoveries generated by each unit and the cost of running the unit. The funds in the base budget are called general funds or present budget allocation (PBA). Each year the university increases or decreases the amount of general funds for each college based on changes in tuition and subsidy, which are affected by shifts in enrollment (credit hours) and changes in indirect cost recoveries within each college. The current full indirect cost rate negotiated with the federal government is 54%. University taxes and assessments are applied to any new funds received based on these changes. General funds can also be increased from special appropriations such as the Discovery Theme initiative or separate negotiations. General funds are used primarily to pay the salary and benefits of the faculty, selected other personnel, and some of the College's operating expenses. Additional revenue is available from release time generated through grants and contracts, other direct costs on research grants and contracts, conference and registration fees, and gifts.

The University's budget model allows for a great deal of flexibility at the college level. This flexibility puts most financial decisions affecting academic programs and strategic initiatives within the college. This budget practice is also supportive of units that are poised for significant growth in student enrollment and research activity. The university recognizes, however, that the current budget process is complicated and cumbersome, and it is currently under consideration for modification. The University is considering a restructuring of the distribution of the institution's general funds budget to improve its support and reward of academic units for their contribution to the mission for excellence in teaching, scholarship, and public service. One of the primary concerns with the current budget model has been its impact on the incentives for collaborative and interdisciplinary efforts.

Lines of Accountability, Including Access to Higher-Level University Officials

As indicated in Figure 1.3.2 above, the Dean of the College of Public Health reports directly to the Executive Vice President and Provost, who serves as the chief academic officer for all instructional and faculty affairs, as well as to the Executive Vice President of Health Sciences for issues specific to the health science colleges. Both Executive Vice President positions report to the President of the University, and the President is responsible to the University Board of Trustees.

According to the rules of the University, the responsibility of the Dean of the College of Public Health is that of "providing active leadership in the promotion, direction and

support of educational and research activities of the University, in the maintenance of a high level of morale among the faculty, and in the encouragement of the spirit of learning among the students. In addition the Dean has general administrative responsibility for the program of the college, subject to the approval of the President and the Board of Trustees.” The Dean does abide, however, by the principle of faculty governance as outlined in the College’s *Pattern of Administration* and as required by University rules. Depending on the nature of the decision, the Dean may confer with the entire faculty or with the College’s Executive Committee. The Executive Committee is comprised of the College Dean, the Senior Associate Dean for Academic Affairs, the Associate Dean for Research, the Associate Dean for Outreach and Engagement, the Assistant Dean for Finance and Administration, and the Chairs of the respective Divisions.

All the college deans within the University are members of the Council of Deans convened by the Executive Vice President and Provost. The Council, which also includes the Senior Vice President for Business and Finance and the Senior Vice President for Research, Vice Provosts and other principal administrative officers and directors of the regional campuses, serves as an advisory council to the president.

The dean of each of the seven health sciences colleges serves on the Health Science Deans Cluster, chaired by Dr. Karla Zadnik, Dean of the College of Optometry. The cluster is the primary body for reviewing issues affecting the units within the health sciences colleges, forming partnerships and collaborations for action by multiple colleges, and advocating for the shared interests of the health sciences in the university.

The faculty of the College of Public Health elects one senator to represent the College at the University Senate. The Dean is also an ex officio member of the University Senate.

Personnel Recruitment, Selection and Advancement, Including Faculty/Staff

In general, the college has substantial latitude for recruitment, selection, and advancement of personnel within the framework established by the University and applicable State laws and the constraints of the College budget. Policies and procedures for faculty recruitment, selection and advancement are outlined in the College’s *Appointment, Promotions and Tenure Criteria and Procedures* document. Details are also provided in Criterion 1.5.a. Professional staff policies and procedures are governed by the University’s Office of Human Resources (information can be found at <http://hr.osu.edu/policy>). Support staff (civil service) are governed by the Ohio Revised Code (information can be found at <http://hr.osu.edu/Policy/CCS/index.aspx>).

The College establishes faculty and staff positions in accordance with College and University policies and procedures (and state civil service rules, where applicable). We must use official university titles, but can assign “working” titles as appropriate.

Policies and procedures for hiring faculty and granting of tenure are outlined in the College's *Appointment, Promotions and Tenure Criteria and Procedures* document.

The College Dean has the authority to organize internally and make appointments to meet the strategic needs of the college. The College of Public Health is organized into divisions, centers, and programs. The college is the tenure initiating unit (i.e., tenure resides in the College, not in a specific division). Criterion 1.4. has additional information on the organization of the College.

Academic Standards/Policies, Including Establishment/Oversight of Curricula

The University empowers its faculty with the primary responsibility for the academic program development, implementation, and review. Any proposals for new programs, major policies, etc., or significant changes in existing programs or policies must be approved by the faculty within the College. All graduate degrees, curricula, and courses offered by the College of Public Health are under the administrative oversight of the Graduate School. Therefore, admissions, curriculum, student academic performance, matters relating to graduate education, and graduation follow guidelines and policies established by the Graduate School. The primary relationship between any graduate program in the University and the Graduate School is conducted through the respective college's or academic unit's Graduate Studies Committee. Voting members of the College's Graduate Studies Committee are faculty members representing each public health program/specialization and graduate students. For governance of the undergraduate degree and minors, curricula and courses, there is a corresponding Undergraduate Studies Committee also consisting of representative faculty members and undergraduate students. The Senior Associate Dean for Academic Affairs and the Director of the Office for Academic Programs and Student Services serve as ex officio members on each of these two committees. The Chairpersons of the respective committees work very closely with the Senior Associate Dean for Academic Affairs.

In the College of Public Health, the Graduate Studies Committee and the Undergraduate Studies Committee receive, or may initiate, proposals for new or changed degrees, programs, courses and applicable policies. If it is a relatively minor or non-substantive item or change, the applicable committee may take final action. However, if the proposal would create or modify in any important or substantive way an academic program, the applicable committee must take the matter to the faculty for review and approval. The Graduate School permits graduate programs to make some routine decisions without further review. However, for major changes, including the creation of new courses and curricula, the action of the college must be reviewed and approved by the Graduate School and the University Office of Academic Affairs. In very major decisions such as the creation of a degree or the restructuring of a degree, the University Senate must approve the proposal. In the case of creating a degree that did not previously exist at the University, the Board of Trustees and the Ohio Department of Higher Education (former Board of Regents) must approve the proposal.

Both the Graduate School and the College's Graduate Studies Committee have some oversight responsibility for the academic programs and the progress of students. The Graduate School monitors those requirements that are uniform for all graduate students (e.g., the minimum grade average and the time limit on the PhD after admission to candidacy), while the graduate studies committee is more concerned with the content of programs and the monitoring of student progress with respect to the specific requirements of our programs. Guidelines and policies for undergraduate education fall directly under the University Office of Academic Affairs.

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

The core governance guidelines and policies for graduate and undergraduate degree programs are similar, if not identical, for all colleges within the University. There is no evidence that the College of Public Health is treated differently from other colleges with respect to the processes above. One major difference, however, is that the size of the College of Public Health is relatively small in comparison to most of the other colleges in the University. As a result, extra effort is needed at times to ensure there is adequate attention to requests and related support.

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

This is not applicable to the College of Public Health.

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

This is not applicable to the College of Public Health.

1.3.g. *Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.*

Assessment:

- The OSU College of Public Health meets Criterion 1.3.

Strengths:

- The Dean of the College of Public Health reports directly to the University's Executive Vice President and Provost, representing the same level of report as all the other colleges.

- The College, as part of the Health Sciences Colleges, participates in this academic cluster where it may pursue collaborative and interdisciplinary efforts and advocate for its interests. In relation to the cluster, the College Dean reports directly to the Executive Vice President of Health Sciences.
- The College has excellent visibility among other academic units on campus and engages in mutually beneficial cooperative and collaborative activities.

Challenges/Weaknesses:

- The College's relatively small, but growing, size can be a disadvantage in the context of the University campus with the second largest enrollment in the country. At times, this still requires some extra effort to gain support for strategic initiatives, however, this is continually improving and not a barrier to progress.

CRITERION 1.4 ORGANIZATION AND ADMINISTRATION

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

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

The College of Public Health administrative structure is shown in **Figure 1.4.1**.

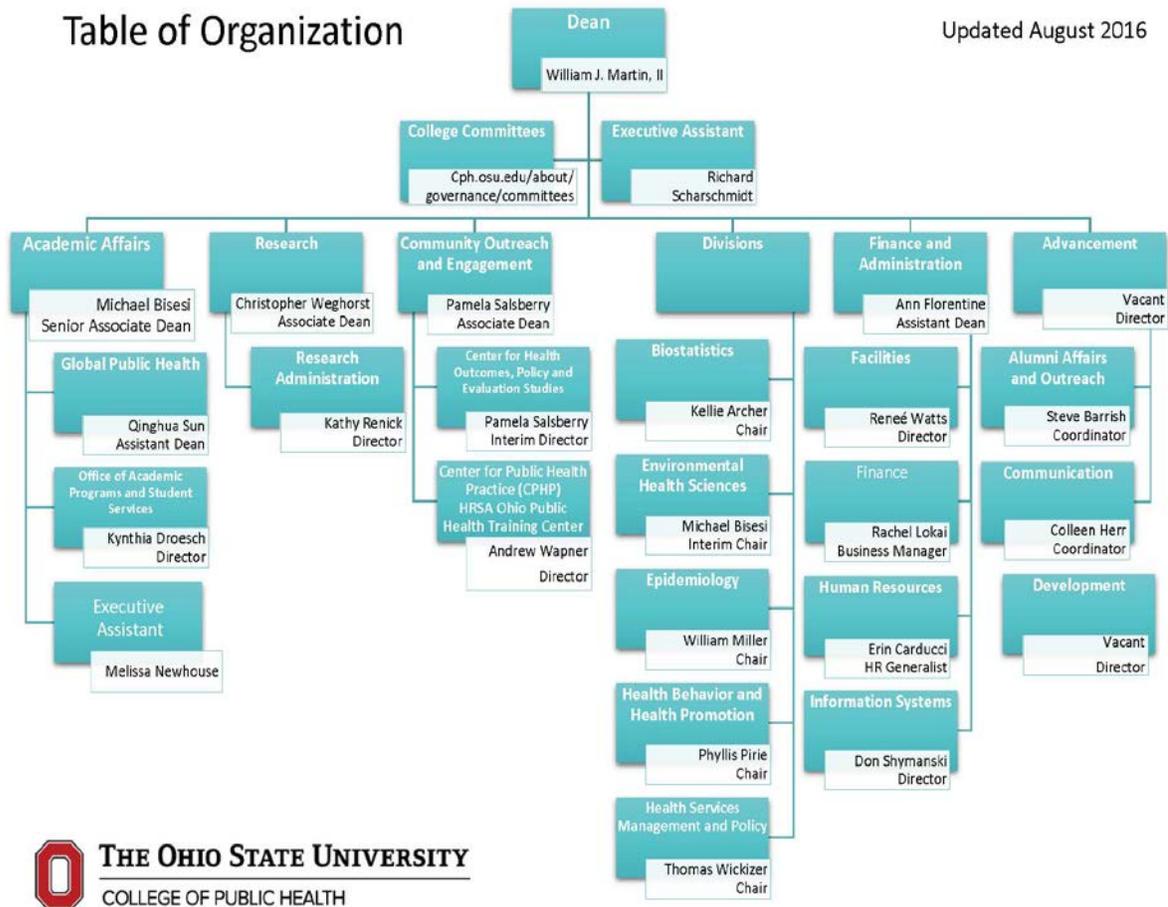
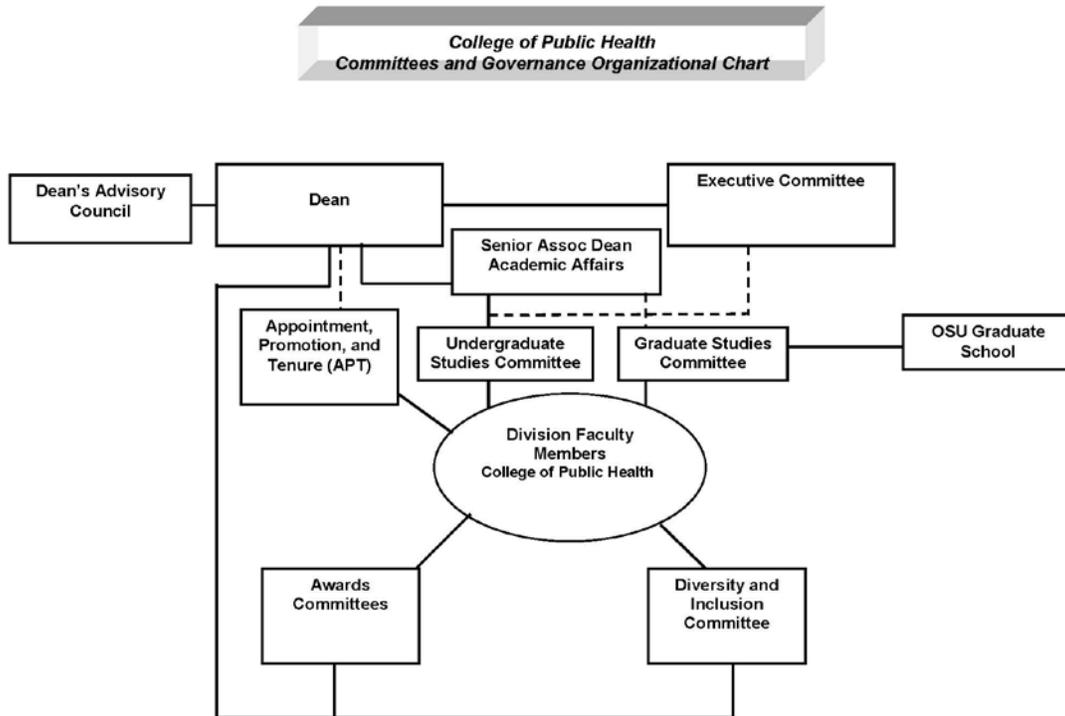


Figure 1.4.1. College of Public Health Administrative Structure

Figure 1.4.2 shows the College’s Committee structure, including those for governance.



Revised 5/9/16

Figure 1.4.2. College of Public Health Committee Structure

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

A brief description is included below for each of the positions and units included in the College’s organizational chart. Additional details concerning roles, responsibilities and appointment procedures are found in the College’s *Pattern of Administration* (pp. 7-13) located in the **eResource File** and online at:

<https://cph.osu.edu/sites/default/files/docs/2014-12-10AmendedPatternofAdministrationCPH.pdf>

The **Dean** is responsible for all College activities and operations and reports to the Executive Vice President and Provost for overall academic matters and to the Executive Vice President of Health Sciences for issues specific to the health science colleges. The Board of Trustees appoints the College Dean upon recommendation by the President for a five-year term subject to an annual performance review. Dr. William J. Martin II was appointed effective August 2013.

The Office of the Dean includes the Senior Associate Dean for Academic Affairs, the Associate Dean for Research, the Associate Dean for Outreach and Engagement, the Assistant Dean for Finance and Administration, and the Assistant Dean for Global Public Health. The individuals occupying these positions are appointed by the Dean. The associate dean and the assistant dean positions are appointed for renewable four year terms. The other assistant dean is a professional staff position renewable annually.

The **Senior Associate Dean for Academic Affairs**, Dr. Michael Bisesi, oversees the College's academic programs and curriculum, working with the division chairs and faculty and the graduate studies committee to implement and monitor these programs. He supervises the Director of the Office of Academic Programs and Student Services and serves as the lead for accreditation activities including development of the self-study. He is also asked to contribute to administrative activities beyond academic affairs. He serves as a liaison with the Association of Schools and Programs of Public Health (ASPPH) for matters concerning academic affairs.

The **Associate Dean for Research**, Dr. Christopher Weghorst, promotes research opportunities in the college, with particular attention to collaborative and interdisciplinary research. The activities include supervision of staff in the college's Office of Research Administration, liaison with the University's other college research deans, and liaison with ASPPH on matters concerning research activities.

The **Associate Dean for Outreach and Engagement**, Dr. Pamela Salsberry, is responsible for activities external to the university to establish and strengthen cooperative and collaborative linkages. This is a new position effective July 2015. The College's centers administratively fall under this position. In addition, Dr. Salisbury assists junior faculty in establishing productive mentorship relationships relative to teaching and research activities.

The **Assistant Dean for Finance and Administration**, Ms. Ann Florentine, serves as the senior fiscal and human resources officer of the college and assists the dean in preparing and operating within a college budget. In addition, the assistant dean for finance and administration assists in supervising the supporting staff of the College and works with the Divisions in faculty recruitment and the preparation of letters of offer.

The **Assistant Dean for Global Public Health**, Dr. Qinghua Sun, is responsible for coordinating academic, research and service activities applicable to international sites, such as the University gateways to China, India and Turkey, as well as other activities in areas such as Africa. This position reports to the Senior Associate Dean for Academic Affairs.

The **Chairs** of the respective five Divisions in the College are appointed by the Dean and serve terms of four years. Currently, three of the five Chairs are interim

positions. The current Chairs are: Dr. Rodney Sturdivant, Interim Chair of Biostatistics; Dr. Michael Bisesi, Interim Chair of Environmental Health Sciences; Dr. Phyllis Pirie, Interim Chair of Epidemiology and Chair of Health Behavior and Health Promotion; and, Dr. Thomas Wickizer, Chair of Health Services Management and Policy. Effective March 1, 2016, Dr. William Miller came to the College and is the new Chair for the Division of Epidemiology. The duties of the chair include leadership in planning, implementing, and evaluating the division's academic program, faculty recruitment, faculty evaluation, and management of resources.

There are two **Centers** in the College: the Center for Health Outcomes, Policy and Evaluation Studies (HOPES) and the Center for Public Health Practice (CPHP). Each Center is led by a Director appointed by the Dean. Dr. Allard Dembe, Director HOPES; and, effective November 2015, Dr. Andrew Wapner, Director CPHP. Additional information regarding HOPES is found in Criterion 3.1.b., and, for CPHP under Criterion 3.3.

Some faculty members are appointed by the Dean as Directors to either oversee a focused initiative or an academic program. The College's academic program Directors include, Dr. Gail Kaye, Director of Undergraduate Studies, Dr. Julie Robbins, Director of the MHA Program, and Dr. Randi Love, Director of the MPH-Program for Experienced Professionals. The duties include, but are not limited to, coordinating activities regarding admissions, degree program curricula, advisement, assessment, and scheduling.

The **Dean's Advisory Council** serves as an external advisory group to the College. The Council is composed of a variety of members from outside the University. The Deans Advisory Council is regularly scheduled to meet twice a year (once as face to face meeting and once as a "virtual meeting.")

1.4.c. *Description of the manner in which interdisciplinary coordination, cooperation and collaboration occur and support public health learning, research and service.*

The College's *Strategic Plan* emphasizes the importance of interdisciplinary coordination, cooperation and collaboration, and fosters ties among public health and related disciplines. There are interdisciplinary collaborations involving faculty, staff and students, including efforts in research, community outreach, teaching and workforce development.

As initiatives under goals for capacity building, the College strives to have faculty collaborators from other units in the University by means of joint and courtesy appointments, and/or, as co-investigators on grants. These faculty are primarily involved in serving as content experts and lecturers for courses and as research collaborators. Joint appointments of faculty are used to more formally build collaborative partnerships with other colleges within the university and to attract highly competitive faculty to the college. Currently, paid CPH faculty joint

appointment arrangements are in place with the College of Medicine, College of Veterinary Medicine, and the College of Food, Agricultural and Environmental Sciences. Courtesy appointments without salary include many other academic units.

The College participates in cooperative and collaborative academic programs such as interdisciplinary specializations led by the College and involving other units, including Colleges of Arts and Sciences (BSPH specializations in Public Health Sociology and Environmental Public Health), Medicine (MPH specializations in Biomedical Informatics and Clinical Translational Science), and Veterinary Medicine (MPH specialization in Veterinary Public Health).

The College promotes multidisciplinary study by offering dual and combined degree programs. The increasing complexity of public health and health services delivery has led many public health students to combine their graduate degree program with study in another complementary area. Joint degree options with the MPH and MHA include law, medicine, nursing, pharmacy, social work, business and public policy.

The College is involved in graduate interdisciplinary specialization (GIS) programs. The GIS in Global Health involves faculty from all of the Health Sciences Colleges and was originally funded by an NIH Fogarty International Center Global Health Grant. This GIS represents a multidisciplinary training and research effort to promote and unify the university's efforts to improve global health. The College has further academic involvement with other units under the Survey Methods and Obesity Science GIS programs.

The College participates in the University's One Health initiative, which primarily involves the Colleges of Veterinary Medicine, Nursing and Public Health, but also includes most of the other colleges at Ohio State. This effort also originated in a collaborative and successful proposal for funding by an NIH Fogarty International Center grant.

College faculty play a role in the University's Public Health Preparedness for Infectious Disease (PHPID) program. This Targeted Investment in Excellence initiative involves faculty in six colleges. Its mission is to protect public health by minimizing animal-to-human, environmental, and food-borne infectious disease threats through innovative interdisciplinary research.

The Ohio State University Comprehensive Cancer Center (OSUCCC) is a network of seven interdisciplinary programs comprising more than 250 members from 12 of the 18 colleges at OSU as well as affiliated institutions, including the Nationwide Children's Hospital and the Cincinnati Children's Hospital Medical Center. The College was awarded an \$18 million NCI P50 grant to create the Center of Excellence in Regulatory Tobacco Science (CERTS) in September 2013. This is a partnership the FDA that is highly integrated with the University's James Cancer Center and several other colleges.

Other activities include involvement with the Ohio State-East Africa One Health Initiative, funded in part by an NIH Fogarty grant. A more recent collaborative effort sees the College as an active participant and cooperative unit for the University Discovery Theme initiative.

The college has an active collaborative relationship with the Ohio Department of Health and Columbus Public Health, as well as many other local health departments. Our Center for Public Health Practice routinely collaborates with public health practitioners across the state. The Center also collaborates with universities within the State, including Case Western Reserve University, the Northeast Ohio College of Medicine and Pharmacy and the University of Toledo. In addition, the Center makes the College a partner in the Region V Public Health Training Collaborative, which includes University of Illinois as lead, University of Indiana, University of Michigan, University of Minnesota, and University of Wisconsin.

The College has other cooperative and collaborative relationships and research and teaching activities involving international partners. Faculty members are involved in work in Africa, China, India and Japan.

1.4.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 1.4.

Strengths:

- The College has established functional areas of responsibility to perform efficiently and effectively with roles and accountabilities clearly defined for administrators, faculty and staff.
- The College has developed a very cooperative interdisciplinary environment in which collaboration is strongly encouraged and supported internally and externally, as well as domestically and internationally. Indeed, the College subscribes to the *One University* approach.

Challenges/Weaknesses/Plans:

- During the past four years, at any given time, two to three of five Division Chair leadership positions in the College were interim. However, the position for Epidemiology was filled by William Miller, MD, MPH, PhD effective March 1, 2016, and, for Biostatistics by Kellie Archer, PhD effective July 1, 2016. A search remains open for Chair of Environmental Health Sciences, a position currently held by Interim Chair Michael Bisesi, PhD, REHS, CIH who also serves as Senior Associate Dean for Academic Affairs.

CRITERION 1.5 GOVERNANCE

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

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

Table 1.5.1 lists and summarizes the roles of major standing committees, including major governance committees, in the College of Public Health. The standing committees for the College are:

- Executive Committee
- Dean's Advisory Council
- Appointment, Promotion, and Tenure Committee
- Graduate Studies Committee
- Undergraduate Studies Committee
- Public Health Honors Committee
- Diversity and Inclusion Committee
- Space Committee
- Awards Committees (Public Health Awards; Employee of the Year; Excellence in Teaching)

Each standing committee includes a staff member from the College who is responsible for ensuring that the minutes of the committee are produced and filed. In addition, some committees include student representatives as appropriate. Detailed descriptions for these committees are found in the College's *Pattern of Administration* (pp. 13-19) located in the **eResource File** and online at <https://cph.osu.edu/sites/default/files/docs/2014-12-10AmendedPatternofAdministrationCPH.pdf>

Other committees include those required by the University that must be established when the need arises. Two committees have this designation within the College:

- College Investigations Committee
- Salary Appeals Committee

In addition, there are additional committees for each of the following interdisciplinary degrees or specializations:

- BSPH specializations with Arts and Sciences (Environmental Public Health; Public Health Sociology)
- MPH specializations with Medicine (Biomedical Informatics; Clinical Translation Science) and Veterinary Medicine (Veterinary Public Health)
- PhD degree with Arts and Sciences

Note that the interdisciplinary PhD degree has an independent collaborative Graduate Studies Committee; the interdisciplinary MPH specializations are governed by the College’s Graduate Studies Committee; and, the interdisciplinary BSPH specializations are governed by the College’s Undergraduate Studies Committee.

Ad hoc committees are formed for specific purposes and time periods with membership appointed based on the needs of the committee. Examples of ad hoc committees include Division Chair and Faculty Search Committees and Curriculum Review Committees. Administrative committees may be formed by the Dean or other College administrators as needed. Currently, the active ad hoc committees include:

- Environmental Health Sciences Division Chair Search Committee
- Open Faculty Search Committees
- Discovery Theme Faculty Search Committees

Table 1.5.1 Standing Committees, Responsibilities and Current Members

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
<p>Executive Committee</p> <ul style="list-style-type: none"> • Dean • Senior Associate Dean Academic Affairs • Associate Dean Research • Associate Dean Outreach & Engagement • Assistant Dean Finance • Division Chairs 	<p>The Committee Advises the College Dean regarding the following:</p> <ul style="list-style-type: none"> • developing a budget for the College; • establishing the agenda for College faculty meetings; • administrative matters brought forward and assist in developing, interpreting, and implementing guidelines of the College; • committee appointments and memberships; • strategic planning and opportunities for the College. 	<p>William Martin II, MD Dean Michael Bisesi, PhD Senior Associate Dean, Academic Affairs Chair (interim), Division Environmental Health Science Christopher Weghorst, PhD Associate Dean, Research Pamela Salsberry, PhD Associate Dean, Outreach and Engagement Ann Florentine Assistant Dean, Finance Phyllis Pirie, PhD Chair, Division Health Behavior Health Promotion William Miller, MD, PhD Chair, Division Epidemiology Kellie Archer, PhD Chair, Division Biostatistics Thomas Wickizer, PhD Chair, Division Health Services Management and Policy</p>
<p>Dean’s Advisory Council</p> <ul style="list-style-type: none"> • Professionals external to the University from public health, health care, and academe 	<ul style="list-style-type: none"> • Counsel the Dean on policies and programs pertaining to teaching, research and outreach at the college. • Foster a communication link between public health practice sectors and the academic research and teaching communities within the college. 	<p>David S. Wilkes, M.D., Dean, University of Virginia School of Medicine Jacob A. Gayle, PhD, Vice President of Medtronic Philanthropy Nick Baird, MD, Chief Executive Officer US Healthiest Bill Considine, Chief Executive Officer and President, Akron Children’s Hospital Barbara Brandt, President, Philanthropic Consulting Services</p>

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
	<ul style="list-style-type: none"> • Represent the college to the public, public health and healthcare provider constituencies. <p>Raise awareness of the College of Public Health's mission and objectives.</p>	<p>Randy Wykoff, MD, MPH & TM, Dean East Tennessee State University College of Public Health</p> <p>Marie Lynn Miranda, PhD, Dean and Professor School of Natural Resources and Environment, University of Michigan</p> <p>Vikas Kapil, PhD, Chief Medical Officer & Associate Director for Science, Center for Global Health, CDC</p> <p>Bernard Goldstein, MD, Emeritus Professor and Emeritus Dean, University of Pittsburgh Graduate School of Public Health</p> <p>Teresa Long, MD, Health Commissioner, Columbus Public Health</p> <p>Karen Hughes, Chief (retired) Division of Family and Community Health Services, Ohio Department of Health</p> <p>Patricia Gabbe, MD, Clinical Professor of Pediatrics, Wexner Medical Center</p> <p>R. Edward Howell, Professor, former VP and CEO, University of Virginia Medical Center</p>
<p>Appointment, Promotion and Tenure Committee</p> <ul style="list-style-type: none"> • One tenured faculty member from each of the College's five Divisions 	<p>The Committee operates in accordance with the Appointment, Promotion and Tenure Document approved by the College faculty and the University Office of Academic Affairs on matters involving appointment, promotion and tenure of College faculty (Note: The College, not the Divisions, is the tenure initiating unit)</p>	<p>Sandra Tanenbaum, PhD Committee Chair and Faculty Representative (Health Services Management and Policy)</p> <p>Randall Harris, MD, PhD Faculty Representative (Epidemiology)</p> <p>Mira Katz, PhD Faculty Representative (Health Behavior Health Promotion)</p> <p>Jiyoung Lee, PhD Faculty Representative (Environmental Health Sciences)</p> <p>Stanley Lemeshow, PhD Faculty Representative (Biostatistics)</p>
<p>Graduate Studies Committee</p> <ul style="list-style-type: none"> • One faculty member from each of the College's five Divisions and core degree specializations • One faculty member from each of the College's non-core degree specialization • One graduate student representative for each of the degrees • Senior Associate Dean, Academic Affairs(ex officio) 	<p>The Committee, in collaboration with the Senior Associate Dean for Academic Affairs, concerns itself primarily with policy issues regarding the direction of graduate academic programs in the College. The Graduate Studies Committee may create subcommittees or other structures and delegate portions of its activity to them, while retaining the final responsibility.</p>	<p>Sharon Schweikhart, PhD Committee Chair and Faculty Representative (Health Services Management and Policy)</p> <p>Michael Bisesi, PhD Ex officio Member (Senior Associate Dean, Academic Affairs)</p> <p>Thomas Albani, MPH Student Representative (PhD Programs)</p> <p>Sarah Anderson, PhD Faculty Representative (Epidemiology)</p> <p>Chloe Beverly, Student Representative (MS Programs)</p> <p>Philip Binkley, MD, MPH Faculty Representative</p>

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
<ul style="list-style-type: none"> Director, Office for Academic Programs and Student Services (ex officio) 	<p>Responsibilities include, but are not limited to:</p> <ul style="list-style-type: none"> reviewing and making recommendations to the faculty about major program structure and policy decisions (e.g. major changes in degree requirements or the designation of concentrations within the College for which degrees may be obtained; courses and syllabi) promoting growth and excellence in graduate education, and visibility of the College nationally and internationally; selecting students for fellowships and scholarship opportunities; coordinating student recruitment efforts <p>review graduate student complaints</p>	<p>(MPH-CTS Program) Cindy Clouner, Student Representative (MPH-PEP Program) Kynthia Droesch, MSEd Ex officio Member (Director, Office Academic Programs and Student Services) Courtney Hebert, PhD Faculty Representative (MPH/MS-BMI Programs) Armando Hoet, DVM, PhD Faculty Representative (MPH-VPH Program) Randi Love, PhD Faculty Representative (MPH-PEP Program) Olivia Moskaluk, Student Representative (MHA Program) Julie Robbins, PhD Faculty Representative (MHA Program) Abigail Shoben, PhD Faculty Representative (Biostatistics) Qinghua Sun, MD, PhD Faculty Representative (Environmental Health Sciences) Marissa White, Student Representative (MPH Programs)</p>
<p>Undergraduate Studies Committee</p> <ul style="list-style-type: none"> One faculty member from each of the College's five Divisions Director, Undergraduate Studies One undergraduate student representative for each of the two BSPH degree specializations Senior Associate Dean, Academic Affairs(ex officio) Director, Office for Academic Programs and Student Services (ex officio) 	<p>The Committee, in collaboration with the Senior Associate Dean for Academic Affairs, concerns itself primarily with policy issues regarding the direction of undergraduate academic programs and courses in the College. This specifically includes the BSPH degree with interdisciplinary specializations, the undergraduate minor, and also public health General Education (GE) courses, as well as general oversight of combined graduate/undergraduate programs (e.g., 3+2). The Undergraduate Studies Committee may create subcommittees or other structures and delegate portions of its activity to them, while retaining the</p>	<p>Eric Seiber, PhD Committee Chair and Faculty Representative (Health Services Management and Policy) Michael Bisesi, PhD Ex officio Member (Senior Associate Dean, Academic Affairs) Bilen Berhane Student Representative (BSPH Programs) Kynthia Droesch, MSEd Ex officio Member (Director, Office Academic Programs and Student Services) Ashley Felix, PhD Faculty Representative (Epidemiology) Rachel Besse Student Representative (BSPH Programs) Gail Kaye, PhD Director Undergraduate Studies and Faculty Representative (Health Behavior Health Promotion) Rebecca Andridge, PhD Faculty Representative (Biostatistics) Qinghua Sun, MD, PhD</p>

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
	final responsibility. Responsibilities include, but are not limited to: <ul style="list-style-type: none"> • reviewing and making recommendations to the faculty about program structure and policy decisions (e.g. major changes in degree requirements or the designation of interdisciplinary specializations; courses and syllabi); • establishing and coordinating policy in areas having College-wide impact, including: courses shared by more than one degree program as requirements; approval of new undergraduate courses or substantive changes to existing courses; development of sources of student support and establishment of guidelines for its allocation; • monitoring student progress and recommend actions to the College as necessary; • reviewing student petitions and act or make recommendations; • promoting growth and excellence in undergraduate graduate education, and visibility of the College internally, nationally and internationally; • cooperating with the BSPH committee on coordination of student recruitment efforts. 	Faculty Representative (Environmental Health Sciences)
Diversity and Inclusion Committee <ul style="list-style-type: none"> • One faculty member from each of the College’s five Divisions and core degree 	Responsibilities include, <ul style="list-style-type: none"> • promoting a culture of diversity within the College; • advising the Dean on 	Joanne Pearsol, MA Committee Co-Chair and Staff Representative Marcel Yotebieng, MD, PhD Committee Co-Chair and Faculty

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
<p>specializations</p> <ul style="list-style-type: none"> • One additional appointed staff or faculty member • Three students, one alumnus and one community member • In addition to the required membership, any faculty or staff member also may join the Committee, provided that the number of representatives does not exceed two persons per unit 	<p>activities that will promote a culture of acceptance within the College and support student growth relative to cultural competence, elimination of health disparities, and reduction of the impact of social determinants of health (Activities may include implementation of communication strategies, workshops, periodic surveys, presentations and educational initiatives);</p> <ul style="list-style-type: none"> • coordinating activities with the Office of Diversity and Inclusion, Diversity Officers Working Group, Wexner Medical Center Diversity Council, and Multicultural Public Health Student Association, as appropriate to meet responsibilities; • monitoring implementation of the College's Diversity and Inclusion Plan. 	<p>Representative (Epidemiology) Kierra Barnett Student Representative (BSPH Programs) Natalie Brooks Student Representative (BSPH Programs) Ann Florentine Administrative Representative John Bullock, MA Staff Representative (OAPSS) Allard Dembe, PhD Faculty Representative (Health Services Management and Policy) Darryl Hood, PhD Faculty Representative (Environmental Health Science) Elizabeth Hope Staff Representative (Health Services Management and Policy) Anton Johnson Student Representative (Health Services Management and Policy) Jessica Jolly, MPH Alumni Representative Julie Jones Staff Representative (Health Behavior health Promotion) Elizabeth Klein, PhD Faculty Representative (Health Behavior Health Promotion) Randi Love, PhD Faculty Representative Jonathan Robinson Student Representative (BSPH Programs) Pamela Salsberry, PhD Administrative Representative (Outreach and Engagement) Eric Seiber, PhD Faculty Representative (Health Services Management and Policy) Greg Rempala, PhD Faculty Representative (Biostatistics) Colleen Herr, Staff Representative (Communications) Kristin Howard, Staff Support</p>
<p>Public Health Honors Committee</p> <ul style="list-style-type: none"> • Three faculty members selected from the College of Public Health and two from the College of Arts and Sciences 	<p>Responsibilities include:</p> <ul style="list-style-type: none"> • reviewing and approving applications to the Honors programs and Honors contracts for students in the Honors program; • establishing criteria for 	<p>Rebecca Andridge, PhD Co-Director, BSPH Honors Program and Faculty Representative (Biostatistics) Amy Ferketich, PhD Co-Director, BSPH Honors Program and Faculty Representative</p>

Committees and Required Composition	Statement of Charge/ Responsibilities	Members
	honors courses and honors versions of existing courses and to approve courses for honors use; <ul style="list-style-type: none"> • monitoring student progress and oversee standards of academic attainment leading to “Honors in Public Health” and “Distinction” designations; • awarding undergraduate research scholarships to Public Health students. 	(Epidemiology) Amy Acton, MD Faculty Representative (Health Services Management and Policy) Ibaraki Motomu Faculty Representative (School of Earth Sciences) Andrew Martin, PhD Faculty Representative (Department of Sociology)
Awards Committees <ul style="list-style-type: none"> • Past winners plus other members appointed by the Dean 		Named Annually

1.5.b. Description of the school’s governance and committee structure’s roles and responsibilities relating to the following:

- **general school policy development**
- **planning and evaluation**
- **budget and resource allocation**
- **student recruitment, admission and award of degrees**
- **faculty recruitment, retention, promotion and tenure**
- **academic standards and polices, including curriculum development**
- **research and service expectations and policies**

General School Policy Development

The College of Public Health, not its individual Divisions, is the tenure-initiating unit (TIU) within the University. At Ohio State University the principal document outlining the governance of a tenure-initiating unit is the *Pattern of Administration* (POA). It supplements the *Rules of the University Faculty* and other policies and procedures of the University to which the College and its faculty are subject. University rules, policies and procedures, and changes in them, take precedence over the College’s POA.

The College’s POA specifies the rights and responsibilities of the faculty and administration. It guarantees faculty and administration the prerogatives needed to assure the integrity of college programs and accomplish the College’s strategic plan. The POA establishes a single, college-wide administrative, governance, and committee structure that creates a formal opportunity for faculty input on all major decisions affecting the College. Staff and students as well have roles contributing to

policy- and decision-making for the College. They are represented throughout the College's committee structure.

The College's faculty members consider all matters of general importance following initial consideration by the Executive Committee or one of the applicable standing committees. In addition, topics for consideration may be initiated by the faculty, staff and students. The College Dean, Executive Committee, Division Chairs, and standing committees act on matters of a more specific nature consistent with their authority as outlined in the POA.

Planning and Evaluation

Several groups are involved with planning and include faculty, staff, students and external constituents. This occurs at all levels including programs, Divisions, and committees. The Dean, along with the College's Executive Committee, has the final responsibility for planning. College planning follows governance structures as per the POA and is guided by its 2015-2017 *Strategic Plan*. The plan has the approval of the Executive Vice President and Provost, and is one of the measures used to evaluate College Deans. The extensive process used to develop and refine the Strategic Plan is discussed in Criterion 1.2. In addition to the overall strategic planning process, the activity of planning takes place in every organized entity within the College, including standing committees, Divisions, Centers (i.e., Health Outcomes Policy Evaluation and Services; Public Health Practice), Offices (i.e., Academic Programs and Student Services; Research; Information Services; External Relations) and special ad hoc groups.

There are specified qualitative and quantitative metrics for the initiatives under each goal in the College's *Strategic Plan*. Evaluation includes ongoing collection of data and tracking of outcomes annually. In addition, administrators, faculty and staff prepare and submit annual goals that reflect initiatives under the Strategic Plan. Annual performance reviews are conducted to measure accomplishments.

As a result of this self-study, however, a need has been identified to gather annual summative evaluation data through a more structured, centralized and efficient process. Beginning in academic year 2015-16, annual summative reports following a prescribed format will be collected via Qualtrics™ surveys from each of the College's Committees, Divisions, Centers, Offices and other applicable ad hoc groups. These data and summaries will be housed in a more accessible format and location. Although data from these groups has been collected, available and used already as evaluation components of the assessment process, the College will benefit from a more centralized approach for data collection, archiving, reporting and accessing. Indeed, collecting these data electronically using survey templates will enhance data compilation and preparation of summative reports.

Budget and Resource Allocation

The Dean and Assistant Dean for Finance and Administration have primary responsibility for budgeting and resource allocation within the college. Faculty and central support staff salaries are administered at the college level. Operating budgets are decentralized. The annual budget process begins when the Dean and Assistant Dean meet with each Division Chair in the spring or early summer to discuss resource needs in each Division. The Assistant Dean also meets with each Associate Dean and other College units regarding the budget needs for their areas and responsibilities. The Dean and Assistant Dean for Finance and Administration then prepare a college-wide budget that balances needs and reflects priorities identified by the Executive Committee and in alignment with goals and initiatives in the Strategic Plan. The Dean then submits a final budget to the University Executive Vice President and Provost. Each division and strategic area within the college (academics, research, student services, communications, information technology, and development) receives an operating budget each year and is held accountable for the spending. Distribution of funds generated from release time included in faculty grants and contracts is guided by the Pattern of Administration and provides funds for faculty for research, travel, publication costs and other items allowable by the University. More detailed information regarding the College budget and finances is described in Criterion 1.6.

Student Recruitment, Admission and Award of Degrees

The Office for Academic Affairs and Student Services, Undergraduate and Graduate Studies Committees, and Office of External Relations (Communications) are involved cooperatively with student recruitment, admission and award of degrees. For example, this office includes communications and assists with developing hardcopy program recruitment brochures, and, managing Website content. Admission of students, tracking performance, and clearing for graduation are a primary responsibility under Academic Affairs, which includes the Office for Academic Programs and Student Services. Criteria for admission, retention and graduation meet or exceed criteria set by the University Office for Academic Affairs and the Graduate School. The Division and Program faculty representatives who serve on the Undergraduate and Graduate Studies Committees and the Division Chairs work cooperatively with the Office for Academic Programs and Student Services and the Senior Associate Dean for Academic Affairs to oversee the processes involved. In relation, the College's Office of Academic Programs and Student Affairs works with faculty and staff advisers of students to monitor the progress and performance of students and certify that they have completed the necessary requirements and are eligible to be awarded a degree.

The professional and academic graduate degree programs offered by the College of Public Health are designated by the University as graduate degrees and conferred by the University through its Graduate School. Commencement ceremonies occur at the end of autumn, spring and summer semesters. Criterion 4.3 provides

additional information regarding student recruitment, admissions, retention and graduation.

Faculty Recruitment, Retention, Promotion and Tenure

The College of Public Health reports directly to the University's Executive Vice President and Provost for all faculty recruitment, selection, and promotion and tenure decisions. As stated previously, the College is a tenure-initiating unit (TIU) within the University. That is, faculty members are tenured at the college level, not in a specific division or program. According to the University Faculty Rules, under the Office for Academic Affairs, each TIU is responsible for establishing criteria for appointment, reappointment, promotion and tenure that are consistent with the TIU mission, and for ensuring that every faculty appointment, reappointment, promotion and tenure recommendation is consistent with that mission and the criteria. Both the criteria and the review procedures of the TIU are subject to approval by the Vice Provost for Faculty Affairs and the Executive Vice President and Provost.

In the College of Public Health, the Dean, Division Chairs, College faculty, and its standing Appointments, Promotion, and Tenure Committee share joint responsibility for faculty recruitment, appointment, and reviews for promotion and tenure. The College follows its *Appointments, Promotion, and Tenure Criteria and Procedures*.

The University follows the principle that the decisions concerning appointment, promotion, and tenure should reside primarily with the TIU. Because the college is a single TIU, all decisions concerning appointment, reappointment, promotion, and tenure are voted on by the entire eligible faculty (defined as the regular faculty at or above the proposed rank of the candidate). The faculty vote as a recommendation is transmitted to the Dean for final decision. The candidate's information/dossier, the Dean's decision and the record of the College faculty vote is sent to the Vice Provost for Faculty Affairs and Executive Vice President and Provost. The Vice Provost for Faculty Affairs and Executive Vice President and Provost make an independent assessment based on the candidate's dossier and external and internal letters of evaluation. If the final decision on promotion or promotion and tenure cases differ from the peer recommendation, the executive vice president and provost must explain in writing to the College why the recommendation was judged not to be supported by the evidence. Negative decisions by the Executive Vice President and Provost are final; positive decisions are forwarded to the University Board of Trustees for approval.

Academic Standards and Policies

The major aspects of College policy and procedure for academics have already been discussed in Criterion 1.3.c. As noted there, the primary responsibility lies with the College's respective Undergraduate and Graduate Studies Committees. Undergraduate programs, courses, policies and procedures must meet criteria under the University Office for Academic Affairs. Graduate programs, courses, policies and

procedures must also meet criteria under the Graduate School.

The College has the option to establish requirements that are more stringent than the University requires for either undergraduate and graduate programs provided they are consistent with the overall policy and procedure framework established at the applicable University- or Graduate School levels. For example, the College recommended, through approval by its Undergraduate Studies Committee and by the College faculty, more stringent admission and retention criteria for its undergraduate degree program. Also, the Graduate Studies Committee recommended, and the College faculty approved, a more stringent policy with respect to expected grade performance in required courses and the grades necessary to progress to the next level in some course sequences.

Research and Service Expectations and Policies

Every tenure-track and tenured faculty member is expected to engage in research and service activities. These activities are rewarded directly through the annual review and merit salary increase process, which primarily involves the Division Chairs and the Dean. They are also important factors in determining whether or not a faculty member is recommended for promotion and/or tenure, as outlined in the College's *Appointments, Promotion, and Tenure Criteria and Procedures*. The College's Associate Dean for Research and Division Chairs have primary responsibility for encouraging and supporting faculty and student research. The Associate Dean for Outreach and Community Engagement and Division Chairs are responsible for promoting faculty service activities and community-based research development. The College's Center for Public Health Practice is a major contributor to service activities.

1.5.c. A copy of the school's bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the school.

As described at the beginning of Criterion 1.5.b above, the University accepts the College's *Pattern of Administration* (POA) document to be the "constitution" of the College. College POAs are reviewed and approved by the Executive Vice President and Provost for consistency and alignment with the University policies and procedures. The POA is subject to continuing revision and must be reviewed and either revised or reaffirmed within twelve months of appointment or reappointment of the dean.

The College's current POA was revised during academic year 2013-14 following the appointment (effective August 2103) of Dr. William Martin as Dean. Revision and reviews involved College administration, faculty, and staff, and was approved by the faculty during June 2014 and by the University Office for Academic Affairs during October 2014.

Additional documents include several handbooks, which are more relevant to policies and procedures affecting students. Official statements regarding degree requirements, core and program competencies, and related information are found in the College's *Undergraduate Student Handbook* and its *Graduate Student Handbook*. Individual degree program curriculum guides are posted on the College's website at cph.osu.edu.

The College's *Graduate Student Handbook* is a supplement and extension of the University *Graduate School Handbook*, which sets out the general policies and procedures for all graduate programs and students at the University. All three handbooks as well as other documents mentioned are found in the **eResource File** and electronically via the links that follow:

- *2015-16 College of Public Health Undergraduate Student Handbook*
<http://cph.osu.edu/sites/default/files/students/docs/BSPH%20Handbook.pdf>
- *2015-16 College of Public Health Graduate Student Handbook*
<https://cph.osu.edu/students/graduate/handbooks/graduate-student-handbook>
- *2015-16 Graduate Student Handbook (OSU Graduate School)*
<http://www.gradsch.ohio-state.edu/graduate-school-handbook1.html>

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

The College of Public Health is exceptionally well represented by faculty, staff and students on committees throughout the University. **Table 1.5.2** lists major University committees outside the College on which the college faculty, staff or students serve as members.

Table 1.5.2 Faculty Memberships on University Committees

University Committee	Faculty Members
Undergraduate Research Advisory Committee	Acton, Amy
Health Sciences Library Advisory Committee	Acton, Amy
Health Sciences Academy	Acton, Amy
Second Year Transformational Program	Acton, Amy
Institute for Teaching and Learning (Faculty Mentor)	Andridge, Rebecca
President 's and Provost's Teaching and Learning Initiative, Faculty Advisory Council	Andridge, Rebecca
Learning Management System Evaluation Committee	Andridge, Rebecca
Learning Management System Advisory Committee	Andridge, Rebecca
Academic Programs Advisory Council (Past Chair)	Bisesi, Michael
Antimicrobial Resistance Workgroup	Bisesi, Michael
Discovery Theme Leadership – Infectious Disease	Bisesi, Michael
Discovery Theme Leadership – Sustainability Science	Bisesi, Michael
Global Water Institute Advisory Board	Bisesi, Michael

University Committee	Faculty Members
Subsurface Energy Resource Center	Bisesi, Michael
Public Health Preparedness Infectious Disease ExCom	Bisesi, Michael
Graduate School Assessment Committee	Ferketich, Amy
Cancer Control Program Grant Review Committee, OSU Comprehensive Cancer Center	Ferketich, Amy
Undergraduate Research Office Denman Advisory Committee	Ferketich, Amy
Honors Collegium "Pre-Health" Interest Group	Ferketich, Amy
Medicine and the Arts, Board Member	Foraker, Randi
Search Comm., Data Analytics-Working Group (Discovery Theme)	Foraker, Randi
Cancer Control, Clinical Scientific Review Committee, OSU Comprehensive Cancer Center, Reviewer	Foraker, Randi
Center for Clinical and Translational Science, Community Engagement Internal Research Advisory Committee for OSU, Member	Gallo, Maria
Antimicrobial Resistance Workgroup	Bisesi, Michael
Human Subjects Internal Review Board (Cancer Protocols)	Harris, Randy
University Health Plan Oversight Committee	Harris, Randy
OSU Group on Health Equity	Hood, Darryl
University's 2016 Fellowship Review Committee	Hood, Darryl
Review Committee for Graduate Enrichment Fellowships, OSU Graduate School, Member	Katz, Mira
Pelotonia Student Fellowship Review Committee, OSU Comprehensive Cancer Center	Katz, Mira
Cancer Control, Clinical Scientific Review Committee, OSU Comprehensive Cancer Center, Reviewer	Katz, Mira
OSU Critical Difference for Women Coca Cola Research Grants for Women	Katz, Mira
Center for Clinical and Translational Science (CCTS), Community Engagement Internal Research Advisory Committee for OSU	Katz, Mira
Health & Wellness Committee	Kaye, Gail
Student Life Task Force on Nutrition	Kaye, Gail
Evaluation Committee , Tobacco-Free Campus Initiative	Klein, Elizabeth
Nursing, Pharmacy & Public Health Cohort for the Faculty Information System Migration	Klein, Elizabeth
International Affairs Faculty Council	Lee, Jiyoung
Global Water Initiative Advisory Board	Lee, Jiyoung
Environmental Science Graduate Studies Committee	Lee, Jiyoung
Discovery Theme-Food and Agricultural Transformation Faculty Team	Lee, Jiyoung
Discovery Theme-Sustainable and Resilient Economy Working Group	Lee, Jiyoung
Albert Schweitzer Fellowship Program, Advisory Board	Love, Randi
Oversight Committee for OSU's Center for Human Resource Research	Lu, Bo
Council of Deans	Martin, William
Discovery Theme Leadership – Data Analytics	Martin, William
International Affairs Committee	Martin, William

University Committee	Faculty Members
Center for Clinical and Translational Science Executive Committee	Martin, William
Outcomes Research and Clinical Effectiveness Steering Committee (co Vice-Chair	Martin, William
University Senate	Martin, William
College of Medicine Dean Search Committee	Martin, William
Evaluation of Central Administrators, Wayne Carlson Committee	Martin, William
National Academic of Medicine	Martin, William
Pandemic Executive Advisory Committee, Co-Chair	Martin, William
Global Humanitarian Outreach Committee	Martin, William
Star House Oversight Committee	Martin, William
PHPID Steering Committee	Norris, Alison
CMIB Symposium Steering Committee	Norris, Alison
Decision Sciences Collaborative	Norris, Alison
the Ohio State Interdisciplinary PhD Program in Nutrition (OSUN) Graduate Studies Committee	Olivo-Marston, Susan
Comprehensive Cancer Center Intramural Research Program, Grant Reviewer	Pennell, Michael
Conflict of Interest Advisory Committee	Pirie, Phyllis
Executive Committee, Center for Pharmacogenomics	Rempala, Grzegorz
Mathematical Biosciences Institute, Deputy Director	Rempala, Grzegorz
Faculty Advisory Board, Translational Data Analytics Initiative	Rempala, Grzegorz
Search Committee for Vice Provost for Outreach and Engagement, Office of the Provost	Salsberry, Pamela
Planning Committee, Center for Ethics and Human Values	Salsberry, Pamela
Chair, Data Planning, Subcommittee for Community Engagement Council	Salsberry, Pamela
Community Engagement Council	Salsberry, Pamela
Comprehensive Cancer Center Intramural Research Program, Grant Reviewer	Salsberry, Pamela
Faculty Council	Schweikhart, Sharon
Committee on Academic Misconduct	Schweikhart, Sharon
Senate Steering Committee	Schweikhart, Sharon
Faculty Compensation and Benefits Committee	Seiber, Eric
Health Plan Oversight Committee	Seiber, Eric
Senate Fiscal Committee Benefits Task Force	Seiber, Eric
Fulbright School Program Faculty Advisory Committee	Seiber, Eric
University Graduate Fellowship Committee	Sun, Qinghua
University International Affairs Committee	Sun, Qinghua
University Senate	Schweikhart, Sharon
Health Science Administration Committee Engagement Committee	Wapner, Andy
University Laboratory Safety Committee	Weghorst, Chris
College Research Officers Committee	Weghorst, Chris
Center for African Studies, Board Member	Yotebieng, Marcel

1.5.e. Description of student roles in governance, including any formal student organizations.

Student participation in College governance is both strongly encouraged and formally specified in the College's *Pattern of Administration*. The formal roles include attendance and participation at designated College and Division meetings and on standing and ad hoc committees. For example, key College governance committees, the Undergraduate Studies Committee and the Graduate Studies Committee, include student representatives. Unless otherwise specified in the *Pattern of Administration*, student attendees are non-voting.

Students may organize themselves as they deem appropriate, in a general student organization or in program-specific organizations. Ohio State's student organizations must register on an annual basis and be supported by a faculty or staff advisor to be eligible to access university resources. College of Public Health student organizations include:

- Association of Future Health Care Executives: organization for graduate students pursuing degrees in fields of study such as healthcare administration, public health, business, law and medicine. Members are exposed to an array of events each semester including those that promote diversity awareness, community service, and professional development and networking.
- Buckeyes for Public Health (B4PH): College of Public Health undergraduate student organization. Its primary goal is to bring students together and provide students with professional development opportunities to facilitate success in the public health workforce. During a retreat in fall 2015, organization members identified student needs and outlined solutions to address these needs. As a result, the organization welcomes all Public Health students (major, minor, undergraduate and graduate) as members. The organization executive board has also started working with the college's Advancement team and alumni societies to plan joint career development and service learning events.
- College Diabetes Network (CDN): strives to empower and improve the lives of all Ohio State students living with Type 1 diabetes through peer support and access to information and resources. More information in [this news story](#).
- [ENCompass](#): undergraduate student organization dedicated to bridging the gap between medical and social care. Poor health can be exacerbated by many factors, and by addressing needs indirectly related to medical care, students hope to improve patients' overall health and decrease hospital readmission rates. Volunteers connect clients to the many existing resources in Columbus, addressing issues ranging from food insecurity and homelessness to lack of supplemental medical care.
- Multicultural Public Health Student Association (MPHSA): aims to assist public health and health administration students to become culturally competent through educational and empowering activities that lead to the overall enhancement of each student's public health knowledge and practice. This organization hosts an annual "Diversity in Public Health Summit" featuring national speakers and engaging college, university, and community leaders. More about the 2016 summit and the theme "Homelessness: Giving a Voice to an Underserved Population" may be viewed [with this link](#).

- Partners in Health Engage (PIH Engage): network of community organizers across the country working together to advance the right to health. The group works to bring essential resources to the life-saving work of Partners in Health, to advocate for policies that enable national governments to build functioning health systems and to educate the public on global health equity. PIH Engage at Ohio State is a group of undergraduate and graduate students who work towards these purposes specifically at Ohio State and with its affiliates, the people of Columbus, and Congressional Representatives.
- Student Ambassadors for Public Health (SAPH): SAPH assists prospective students in learning more about the College of Public Health by aiding with College events such as orientation, career fairs, open house/information sessions, and MHA interview days. Ambassadors hone their communication and presentation skills, develop relationships with faculty, staff and students across the college and university, and gain experience in event and program planning and management.
- Veterinary Public Health Club: aims to increase public health awareness through lectures, wet labs and tours that advocate participation in global and public health as well as increase understanding of the field. They also provide opportunities that encourage communication and networking between veterinarians, public health officials and students.

The student organizations have elected officers and develop their own programming, including professional development events, service opportunities, and social gatherings, some of which are done jointly with the college's Advancement Office. Students in the College of Public Health also have been active in governance in the larger university, particularly in the Undergraduate Student Government and on the Council of Graduate Students.

In addition to the student role in course and instructor evaluations every term as well as annual completion of surveys and participation on focus groups, there are many other structured opportunities for student input. Perhaps most significant is the active student membership on the Undergraduate and the Graduate Studies Committees. These committees are charged with contributing to all aspects of undergraduate and graduate education programs in the College.

1.5.f. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 1.5.

Strengths:

- Formal policies and procedures at the University- and College-levels are explicit and contribute to College operations to implement the strategic plan and fulfill its mission.
- The College *Pattern of Administration* was developed and is reviewed and revised through a highly participatory process. This document, in turn, creates administrative and governance structures and processes that ensure faculty--and when applicable, staff and student--input on major decisions affecting the College, University and/or their stakeholders.

- Faculty, staff and students have formal roles in governance established in the pattern of administration as well as many other opportunities for involvement in evaluation and program improvement.

Challenges/Weaknesses/Plans:

- The relatively small size of the College and protected time for new tenure-track faculty during their probationary period frequently creates a need to rely on several faculty members for multiple roles on College and University committees and workgroups. As the number of faculty members in the College continues to increase, at least for the immediate future through 2017, there is a coinciding need to relook at distributions of workloads especially relative to teaching and service among all faculty.

CRITERION 1.6 RESOURCES

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

1.6.a. Description of the budgetary and allocation processes, including all sources of funding supportive of the instruction, research and service activities. This description should include as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact the fiscal resources available to the school.

The College's sources of funds includes two main areas of funds. The first is general funds consisting of tuition, state instructional subsidy, indirect cost recovery on sponsored projects plus special allocations. The second is non-general fund sources such as earnings accounts (sales and services), contracts, intra-university transfers for items such as funds for seed grants and initiatives, gifts (development), interest from endowments, and sponsored research (direct costs). The University primarily follows a decentralized budgeting model that is similar to a RCM (Responsibility Center Management) process. Within this model, each college is provided a general funds base budget that takes into account the historical tuition, subsidy, and indirect cost recoveries generated by each unit, and the cost of running the unit. In addition, funds might be added to the general funds for items such as start-up packages for new deans or University-wide initiatives that align with the academic goals of the University. University assessments for central services are deducted from the amount provided to each college. Each fiscal year general funds are adjusted based on the marginal increase or decrease of instructional credit hours taught and indirect costs generated through research.

The inflationary growth in tuition and state subsidy (funds from the state for teaching) is also distributed based on the total credit hours taught. For indirect cost recovery on sponsored external grants and contracts, 100% of annual marginal changes, minus a small amount that is held back for the libraries, are allocated directly back to the College. This model works relatively well for units like the College of Public Health that experience increases in undergraduate and graduate student enrollments and external funding on grants and contracts. External grants and contracts awarded to faculty members provide direct costs under their control and indirect costs toward the College budget. For non-general fund sources such as earnings operations, development gifts, and grants and contracts, each college has direct discretion on the management of these resources. Colleges are expected to balance revenues and expenses from all sources. Surpluses each year allow for funding start-up packages for faculty recruits and for new initiatives in the College. Criterion 1.3.c. provides more detail concerning the procedures by which the

university allocates these resources to the College.

1.6.b. A clearly formulated school budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. This information must be presented in table format as appropriate to the school. See CEPH Data Template 1.6.1.

Table 1.6.1 summarizes the College's sources and expenditures over the past four fiscal years (FY2013-2016) and includes a projected budget for FY2017. FY2016 is the most recent complete fiscal year covering the period July 1, 2015 through June 30, 2016. The College's total revenue in FY2016 was approximately \$16.3 million and is estimated to be approximately \$18.7M during this current fiscal year. Sources of funds are divided into broad categories: general funds (see Criteria 1.3c and 1.6.a), earnings accounts (sales and services), contracts, university transfers, gifts, endowment interest and sponsored research (direct costs). Release time generated by faculty is included in sponsored research. General funds accounted for approximately 60 percent of the College's total revenue in FY2016. These funds have increased due to greater registered student credit hours and indirect costs generated by the College. In addition, the College was successful in securing additional funds for the Dean's start-up package (FY2014) and faculty salary and benefits from the University via the interdisciplinary competitive proposal-based Ohio State University Discovery Theme Initiative.

General funds cash contributions represent one-time cash allocations by the university that do not become part of the continuing general funds. Examples are cash for such items as faculty start-up packages, support for research, and seminars or events.

Funds generated through contracts, university transfers, gift, endowment interest and sponsored research must be used for a specific purpose designated by the sponsoring unit, agency or individual. Sponsored research as shown in the budget includes direct costs only. Indirect costs are part of the general funds. Funds set aside for faculty start-up packages and one-time strategic initiatives are held in reserves for their stated uses.

Table 1.6.2 shows the actual amount of tuition and fees, state subsidy and indirect cost recoveries generated by the College during FY2013-FY2016 with an estimate for FY2017. There are taxes and assessments charged on these each year before they become part of the general funds. Because of the historical element of the base budget determination and additional funds added to general funds for special initiatives, these amounts do not correspond exactly to any item in the revenue sources, and are shown for information only.

The majority of the expenditures and disbursements are for faculty and staff salaries and fringe benefits (more than 76% percent during FY2016). The increases in

faculty and staff salaries and benefits are consistent with the growth of the educational and research mission. The College has also been able to increase student support through graduate associateships, scholarships and fellowships.

Table 1.6.1 Sources of Funds and Expenditures by Major Category

	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017 (projected)
Source of Funds	July 1, 2012 - June 30, 2013	July 1, 2013 - June 30, 2014	July 1, 2014 - June 30, 2015	July 1, 2015 - June 30, 2016	July 1, 2016 - June 30, 2017
Continuing General Funds ¹	7,162,710	7,884,454	9,151,628	9,782,079	10,433,000
General Funds Cash	1,839,702	293,923	747,732	854,358	1,800,000
Earnings	104,189	126,635	95,081	79,283	95,500
Contracts	3,960	46,798	22,865	18,789	21,200
Net Intra Univ Transfers	106,360	284,535	675,118	520,525	714,000
Gifts	164,946	142,605	77,387	82,017	90,000
Endowment Interest	127,429	128,313	131,561	179,873	200,000
Sponsored Res.- direct costs	4,665,026	4,712,421	5,162,478	4,767,733	5,300,000
Total Sources	14,174,322	13,619,684	16,063,850	16,284,657	18,653,700
Expenditures					
Faculty Salaries & Benefits	5,927,742	6,756,884	6,960,703	7,206,396	9,289,725
Staff Salaries & Benefits	3,782,337	3,826,424	4,821,865	4,914,823	4,897,982
Operations	394,224	408,947	668,478	698,795	730,000
Equipment	250,198	193,026	78,629	55,704	126,000
Travel	343,141	315,532	401,942	377,390	385,000
Student Support	1,314,474	1,410,856	1,457,926	1,649,940	1,700,000
Research Subcontracts	524,034	555,805	492,527	529,682	450,000
Research-Incentives/Human Subjects Payments	30,452	19,851	397,573	506,209	400,000
Total Expense	12,566,602	13,487,325	15,279,643	15,938,939	17,978,707
Surplus/(Deficit)	1,607,720	132,359	784,207	345,718	674,993

¹ Continuing General Funds are net University funds from tuition and fees generated, subsidy allocation, and indirect costs generated by the College plus strategic investments provided by the University less various taxes and other assessments charged by the University.

Table 1.6.2 Actual Tuition and Fees, Subsidy, and Indirect Costs Generated by the College. These are included in Continuing General Funds.

	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017 (projected)
Tuition and Subsidy –Undergraduate	887,783	1,470,149	2,554,917	3,483,314	4,019,488
Tuition and Subsidy - Graduate	7,676,103	8,499,047	9,538,252	9,636,539	9,900,758
Indirect Cost Recovery	1,545,611	1,627,345	2,013,301	1,850,230	2,000,000

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

Criterion 1.6.c. is not applicable to the College of Public Health.

1.6.d. Identification of measurable objectives by which the school assesses the adequacy of its fiscal resources, along with data regarding the school’s performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

The College of Public Health’s fiscal resources are sufficient to fulfill the missions, goals and expected outcomes. In addition to the line items in Tables 1.6.1 and 1.6.2 above, the College targets increases in other indicators of financial growth and stability as shown in **Table 1.6.3**. The data are displayed in fiscal year format, as this is how the expenditures and research data are collected and recorded at the University.

Table 1.6.3 Outcome Measures for Fiscal Resources

Outcome Measures for E.3.1.				
<i>Initiative: Ensure enrollment growth in new and established academic programs based on the sums of credit hours generated for undergraduate student and graduate student enrollments each year.</i>				
Outcome Measure	Target 2017	FY2016	FY2015	FY2014
Increased credit hours	3% growth per year	Total Credits = 13,407 (+5.9%) Undergraduate Credits = 5,989 Graduate Credits = 7,418	Total Credits = 12,659(+8.5%) Undergraduate Credits = 5,263 Graduate Credits = 7,396	Total Credits = 11,672 Undergraduate Credits = 4,478 Graduate Credits = 7,194
Outcome Measures for E.3.3.				
<i>Initiative: Increase student scholarships and fellowships via increased development and external grants.</i>				

Outcome Measure	Target 2017	FY2016	FY2015	FY2014
Scholarship funds from development contributions per year for student tuition, stipend and/or travel.	\$100,000	Total funds = \$90,000	Total funds = \$87,036.	Total funds = \$67,800
Table Outcome Measures for E.3.4.				
Initiative: <i>Increase student assistantships and fellowships via increased development and external grants.</i>				
Outcome Measure	Target 2017	FY2016	FY2015	FY2014
Funds from College per year for student assistantships (e.g. GTAs)	\$500,000. per year	Total funds = 486,192 No. PhD Students Funded = 16	Total funds = \$433,811. No. PhD Students Funded = 14.5	Total funds = \$399,686 No. PhD Students Funded = 14
Funds from College per year for student Fellowships	\$240,000 per year	Total funds = \$205,000 No. PhD Students Funded = 0	Total funds = \$195,320. No. PhD Students Funded = 5	Total funds = \$115,215 No. PhD Students Funded = 3

1.6.e. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The College of Public Health meets Criterion 1.6.

Strengths:

- Growth in the number of credit hours taught in the College and indirect costs recovery from grants and contracts has provided a significant increase in general funds. Evaluation of the College finances by the University has demonstrated fiscal stability.

Challenges/Weaknesses/Plans:

- Faculty salary recovery from external grants and contracts has declined to some extent and securing funding remains a challenge.
- The College relies on revenue from tuition and subsidy received based on total graduate and undergraduate credits of student enrollment each year. A decline in registered credits could adversely affect the budget. The College will continue to explore and identify expanded sources of revenue and the related effort needed to attain increased funding.

CRITERION 1.7 FACULTY and OTHER RESOURCES

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

1.7.a. A concise statement or chart defining the number (headcount) of primary faculty in each of the five core public health knowledge areas employed by the school for each of the last three years. See CEPH Data Template 1.7.1

The structure of the College of Public Health consists of five Divisions aligned with the respective five core knowledge areas of public health. The College, not the Divisions, is the tenure initiating unit and primary decision maker for appointments, promotions and tenure of its faculty members. Accordingly, primary faculty members are those with the majority of their full-time equivalent (FTE) effort in the College of Public Health. At the start of the 2016-17 academic year, the College has 48 primary (core) faculty members. Most (n=45; 94%) of the primary faculty members have 1.0 (100%) FTE appointments in the College; and, the three with joint appointments and lower FTE range from 0.70-0.75 (70-75%) FTE. The total is 47.15 FTE primary faculty members. Refer to **Table 1.7.1** below for the headcount of the primary faculty members for each of the five core knowledge areas of public health.

Table 1.7.1 Number Primary Faculty for Academic Years 2014-15 to 2016-17

Five Core Knowledge Areas of Public Health	2014-15	2015-16	2016-17
Biostatistics (MPH, MS, PhD)	7 (7.0 FTE)	8 ¹ (8.0 FTE)	9 ³ (9.0 FTE)
Environmental Health Sciences (BSPH, MPH, MS, PhD)	6 ¹ (5.7 FTE)	8 ¹ (7.7 FTE)	9 ¹ (8.7 FTE)
Epidemiology (MPH, MS, PhD)	10 ¹ (9.7 FTE)	11 ² (10.7 FTE)	12 (11.7 FTE)
Health Behavior/Health Promotion (MPH, PhD)	8 (8.0 FTE)	6 (6.0 FTE)	7 (7.0 FTE)
Health Services Management and Policy (MPH, MHA, PhD)	10 (9.75 FTE)	11 (10.75 FTE)	12 (11.75 FTE)
TOTALS	41 (40.15 FTE)	44 (43.15 FTE)	48 (47.15 FTE)

¹Interim Chair

²New permanent chair effective March 1, 2016

³New permanent chair effective July 1, 2016

1.7.b. A table delineating the number of faculty, students and SFRs, organized by department or specialty area, or other organizational unit as appropriate for the school, for each of the last three years (calendar or academic years) prior to the site visit. Data must be presented in a table format (see CEPH Data template 1.7.2) and include at least the following information: a) headcount of primary faculty (primary faculty are those with primary appointment in the school of public health), b) FTE conversion of faculty based on % time appointment to the school, c) headcount of other faculty (adjunct, part-time secondary appointments, etc.), d) FTE conversion of other faculty based on estimate of commitment, e) total headcount of primary faculty plus other (non-primary) faculty, f) total FTE of primary faculty and other (non-primary) faculty, g) headcount of students by department or program area, h) FTE conversion of students, based on definition of full-time as nine or more credits per semester, i) student FTE divided by primary faculty FTE, and j) student FTE divided by total faculty FTE, including other faculty. All schools must provide data for a), b), and i) and may provide data for c), d) and j) depending on whether the school intends to include the contributions of other faculty in its FTE calculations. Note: CEPH does not specify the manner in which FTE faculty must be calculated, so the school should explain its method in a footnote to this table. In addition, FTE data in this table must match FTE data presented in Criteria 4.1.a (CEPH Template 4.1.1) and 4.1.b (CEPH Template 4.1.2)

Refer to Tables 1.7.2a, 1.7.2b and 1.7.2c below for the number (headcount and FTE) of the College's primary and other faculty members and students. At the start of the 2016-17 academic year, the College has 48 (47.15 FTE) primary faculty members plus 46 (7.86 FTE) other supporting faculty members. The FTE for other supporting faculty members is based on 0.125 FTE per course equivalent based on a University formula 8 courses per 9-mo for 100% effort. (NOTE: This is a conservative calculation since the College's *Pattern of Administration* and workload guidelines reflect expectations of 4 to 6 courses per 9-month academic year depending on type of appointment, and fewer courses, based on external funding and service. Accordingly, 0.25 to 0.17 FTE per course may reflect a more accurate value. In addition, the FTEs shown in the table for these other faculty members does not reflect their time contributions and percent effort supporting public health student projects/research and service contributions.

Refer to Tables 4.1.1, 4.1.2a and 4.1.2b under Criterion 4.1 for lists of primary and other supporting faculty members, respectively. A third table, is also included there as Table 4.1.3 showing list of additional faculty with various types of appointments who also provide support for the professional and academic public health programs, however, they were not involved in teaching didactic courses for the College during the 2015-16 academic year. Indeed, all those listed as other or additional faculty members positively contribute to the College and its programs and students in various ways and times beyond what is captured as FTE values or incorporated into the College's total faculty FTE.

Table 1.7.2(a) Academic Year 2016-17 Faculty, Students and Student/Faculty Ratios by Core and other Specializations

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
UNDERGRADUATE PROGRAMS										
Environmental Public Health (BSPH)	7	7	5	1.3	12	8.3	65	150.25	21	18
Public Health Sociology (BSPH)	6	6	7	1.1	13	8.1	161	158.91	26	20
GRADUATE PROGRAMS										
Biomedical Informatics (MPH, MS)	5	5	12	2	17	7	13	11.87	2	2
Biostatistics (MPH, MS, PhD)	9	9	1	0.125	10	9.125	16	14.75	2	2
Clinical Translational Science (MPH)	5	5	2	0.25	7	5.25	10	8.62	2	2
Environmental Health (MPH, MS, PhD)	9	8.7	2	0.425	11	9.125	18	17.25	2	2
Epidemiology (MPH, MS, PhD)	12	11.7	1	0.15	13	11.85	70	68.5	6	6
Health Behavior Health Promotion (MPH, PhD)	7	7	0	0	7	7	45	43.25	6	6
Health Services Mgmt and Policy (MPH, MHA, PhD)	12	11.75	3	0.375	15	13.125	75	74.68	6	6
Program for Exper Professionals (MPH)	5	5	2	0.375	7	5.375	50	38	8	7

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Veterinary Public Health (MPH)	5	5	6	1.1	11	6.1	53	49.62	10	8

Table 1.7.2(b) Academic Year 2015-16 Faculty, Students and Student/Faculty Ratios by Core and other Specializations

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
UNDERGRADUATE PROGRAMS										
Environmental Public Health (BSPH)	5	5	5	1.3	10	6.3	51	50.83	10	8
Public Health Sociology (BSPH)	5	5	7	1.1	12	6.1	148	145.3	29	24
GRADUATE PROGRAMS										
Biomedical Informatics (MPH, MS)	5	5	8	2	13	7	18	14.75	3	2
Biostatistics (MPH, MS, PhD)	8	8	1	0.125	9	8.125	13	12.13	2	2
Clinical Translational Science (MPH)	5	5	1	0.25	6	5.25	16	15.75	3	3
Environmental Health (MPH, MS, PhD)	8	7.7	2	0.125	10	7.825	19	18.13	2	2
Epidemiology (MPH, MS, PhD)	11	10.7	1	0.15	12	10.85	56	55.88	5	5

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Health Behavior Health Promotion (MPH, PhD)	6	6	0	0	6	6	59	56.5	9	9
Health Services Mgmt and Policy (MPH, MHA, PhD)	11	10.75	3	0.375	14	11.125	146	142.25	13	13
Program for Exper Professionals (MPH)	5	5	2	0.375	7	5.375	53	39	8	7
Veterinary Public Health (MPH)	5	5	6	1.1	11	6.1	45	41.63	8	7

Table 1.7.2(c) Academic Year 2014-15 Faculty, Students and Student/Faculty Ratios by Core and other Specializations

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
UNDERGRADUATE PROGRAMS										
Environmental Public Health (BSPH)	5	5	5	1.3	10	6.3	43	42.5	9	7
Public Health Sociology (BSPH)	5	5	7	1.1	12	6.1	150	147.83	30	24
GRADUATE PROGRAMS										
Biomedical Informatics (MPH, MS)	5	5	8	2	13	7	5	11.75	2	2
Biostatistics (MPH, MS, PhD)	8	8	1	0.125	9	8.125	10	9.25	1	1

	HC Primary Faculty	FTE ¹ Primary Faculty	HC Other Faculty	FTE ² Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE ³ Students	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
Clinical Translational Science (MPH)	5	5	1	0.25	6	5.25	14	10.3	2	2
Environmental Health (MPH, MS, PhD)	6	6	2	0.250	8	6.25	25	23.75	4	4
Epidemiology (MPH, MS, PhD)	9	8.75	1	0.15	10	8.9	54	43.37	5	5
Health Behavior Health Promotion (MPH, PhD)	5	5	0	0	5	5	63	58.62	12	12
Health Services Mgmt and Policy (MPH, MHA, PhD)	11	10.75	3	0.375	14	11.125	90	87.62	8	8
Program for Exper Professionals (MPH)	5	5	2	0.375	7	5.375	55	40.18	8	7
Veterinary Public Health (MPH)	5	5	6	1.1	11	6.1	39	35.75	7	6

¹FTE Primary Faculty = College of Public Health is the Tenure Initiating Unit (TIU)

²FTE Other Faculty = 0.125 FTE per course equivalent based on University formula 8 courses per 9-mo for 100% effort. The FTEs shown in the table for other Faculty, however, does not reflect their time contributions supporting student projects/research and service contributions.

³FTE Graduate Students = 1 student taking 8 or more semester-credits per semester (for the purposes of this report, even PhD students who are post-candidacy (at Ohio State, post-candidacy students are considered full-time at 3 hours) will be counted as 1 student taking 8 or more semester credits per semester.

In February and May report, undergraduate students were not included in the report. For this September report, FTE Undergraduate students = 1 student taking 12 or more semester credits per semester

Key:

HC = Head Count

Primary = Full-time faculty who support the teaching programs—see CEPH [FAQ on Required Faculty Resources](#) for definition

FTE = Full-time-equivalent

Other = Adjunct, part-time and secondary faculty

Total = Primary + Other SFR = Student/Faculty Ratio

1.7.c. A concise statement or chart defining the headcount and FTE of non-faculty, non-student personnel (administration and staff).

Refer to **Tables 1.7.3** and **1.7.4** for summaries of the number of non-faculty staff and other administrative personnel. The table does not include professional staff working as post-doctoral researchers

Table 1.7.3 Administrative and Support Staff

Support Area	Staff Member	Position	FTE
Academic Programs and Student Services	Kynthia Droesch, MSEd	Director	1.00
	TBN	Office Associate	1.00
	John Bullock, MEd	Undergraduate Coord Recruitment/Admissions	1.00
	Todd Thobe, MEd	Recruitment and Admissions	1.00
	Heather Kerr, MA	Academic Advisor and Staff Assistant	1.00
	Lisa Ann Mayhugh, MA (until 9/30/16)	Program Manager	1.00
	Guy Smalley, MPH	Academic Advisor and Staff Assistant	1.00
	Dawn Williams, MEd	Assistant Director	1.00
Administration and Finance	Ann Florentine	Assistant Dean of Finance and Administration	1.00
	Rachel Lokai	Business Manager	1.00
	Melissa Newhouse	Executive Assistant to the Associate Deans	1.00
	Rich Scharschmidt, MA	Executive Assistant to the Dean	1.00
Divisions	Kristen Howard, MPP	Biostatistics Division Coordinator	1.00
	Erin Strawser	Environmental Health Division Coordinator	1.00
	Lynn Higginbotham	Epidemiology Division Coordinator	1.00
	Julie Jones	Health Behavior and Promotion Division Coordinator	1.00
	Elizabeth Hope	Health Services Mgt Pol Division Coordinator	1.00
External Relations, Communications and Development	TBN	Director of External Relations	1.00
	Steve Barrish	Alumni Affairs and Outreach Coordinator	1.00
	Colleen Herr	Communications Coordinator	1.00
	Leanda Rix, MA	Director of Development	1.00
Facilities	Renee Watts	Facilities Manager	1.00
Human Resources	Erin Carducci	Human Resources Generalist	1.00

1.7 Faculty and Other Resources

Support Area	Staff Member	Position	FTE
	Joanne Pearsol, MA	Talent Management and Professional Development	.25
Information Systems	Donald Shymanski	Director of Information Systems	1.00
	Zach Heil	Systems Specialist	1.00
	Felicia Mehl, MLIS	Web Developer	1.00
	Margaret Murphy, MEd	Instructional Development Specialist	1.00
	Michael Sabatino	Systems Manager	1.00
Research	Katherine Renick, MS, CRA (until 9/30/16)	Director, Research Administrative Services	1.00
	Valerie Delmonico	Grants and Contracts Specialist	1.00
	Scot Erbe	Research Administrator	1.00
Subtotal Administrative and Support Staff			31.25

Table 1.7.4 Research and Project Staff

Support Area	Staff Member	Position	FTE
Biostatistics, Center of Excellence in Regulatory Tobacco Science	Alice Hinton	Clinical Research Data Manager	1.00
Center for Health Outcomes, Policy and Evaluation Services (HOPEs)	Lauren Phelps, MPA	Research Specialist	.80
	Kenny Steinman, PhD	Research Specialist	1.00
Center for Public Health Practice (CPHP)	Joanne Pearsol, MA	Associate Director	.50
	Melissa Sever, MPH	Senior Program Manager	1.00
Environmental Health Sciences	Tom Knobloch, PhD	Research Scientist	1.00
	Steve Oghumu, PhD	Research Scientist	1.00
	Zhang, Tongwen	Research Assistant	1.00
Epidemiology	Brittney Keller, MPH	Program Manager	1.00
Health Behavior and Health Promotion	Dale Kiss	Program Manager	1.00
	Sarah Krygowski, MPH	Program Manager	1.00
	Julianna Nemeth, PhD	Program Manager	.80
	Tiffany Thompson, PhD	Program Manager	1.00
	Amy Wermert, MPH	Program Manager	.50
Subtotal Research and Project Staff FTE			12.60
Total Administrative/Support and Research/Project Staff FTE			43.85

1.7.d. Description of the space available to the school for various purposes (offices, classrooms, common space for student uses, etc.) by location

Cunz Hall was originally constructed in 1969 for another unit on campus. However, the building was acquired by the College and underwent extensive demolition, renovation and expansion resulting in new offices, conference rooms, student convening areas, student workspaces, breakrooms, classrooms, computer labs, and research and teaching wet laboratories.

1.7 Faculty and Other Resources

During August 2011, the College of Public Health moved into the newly renovated and modernized Cunz Hall. The approximate \$24 million project was funded through \$18 million in state capital funds and \$6 million in College of Public Health funds. The College is the sole occupant of the building. This represented the first time in the College's relatively short history that faculty and staff were housed in a single location. Despite sole occupancy of the building, the classroom spaces on the first floor are part of the University classroom pool, thus used by units including but other than only the College of Public Health.

The College is undertaking a feasibility study to review space efficiencies. The project team consists of a project manager from the University's Facilities Design and Construction group, a contracted architect and the College's leadership team. The study will address the planned future growth of the college. The study timeline is June-September 2016.

The University incorporates Leadership in Energy and Environmental Design (LEED) design standards within each new or renovated building on campus. The Cunz Hall renovation project was ideal for certification and represented the first LEED-certified renovation project on campus with wet laboratories. The building received silver-level LEED certification. Many items qualified the project and building for LEED points, such as tying the building into the University's chilled water loop, reuse of the precast concrete panels, construction waste management, and incorporating various elements to enhance indoor environmental quality. A profile of the major categories of spaces within Cunz Hall are summarized in **Table 1.7.5** below.

Table 1.7.5 Profile of Major Spaces for the College of Public Health in Cunz Hall

Spaces	Number	Total Area (ft ²)
Administrative and Faculty Offices	77	9214
Staff Offices (includes open staff spaces)	36	6511
Open Workspaces for Students	63	3024
Classrooms	4	5858
Computer Classrooms/Laboratories	2	1500
Research/Instructional Wet Laboratories	12	7633
Breakrooms with Sink/MW Oven/Refrigerator	3	225
Student Convening Areas with Tables/Chairs	3	5214

Externally to campus, the College is also conveniently located to other off-campus resources and is near downtown Columbus, Ohio, the geographic center of the State and home to the Ohio Department of Health, Ohio Department of Job and Family Services, Franklin County Health Department, Columbus Public Health, Ohio Hospital Association, Ohio Environmental Protection Agency, Ohio Emergency Management Agency, Ohio Department of Public Safety, and the Ohio Board of Regents. The College's proximity to these agencies creates significant opportunities for collaboration, student placement, and service. Also, Columbus is Ohio's largest city and its capital, which gives the college unique access to numerous and diverse public health agencies, hospitals, and health systems, all of which are viewed as potential partners, funding sources, and practice placement sites.

1.7.e. A concise description of the laboratory space and description of the kind, quantity and special features or special equipment.

The wet laboratory space consisting of approximately 7,600 ft² in Cunz Hall is located on the 4th (top) floor adjacent to the Division of Environmental Health Sciences. This space adjacent to the laboratory locations consists of faculty and staff offices, graduate student workstations, a student convening/study area, a break room, and restroom. In addition, student lockers are available and assigned. In relation, there are a teaching/field prep lab with autoclave; cold room; weigh room; and equipment areas throughout. The wet laboratories have equipment for safely storing, handling, using and disposing biological and chemical agents, including applicable biological and chemical hoods, applicable field and analytical instruments, appropriate gases and vacuum, and emergency eyewash/shower stations. The mechanical HVAC systems run independently from the rest of the building to ensure no cross contamination can occur and to provide optimum air changes for the labs. The labs have modern Energy Star[™] equipment.

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

The College's computing facilities have expanded over the years to accommodate the increasing technology needs of the department. A dedicated server room in Cunz Hall was built to house all the web, file, backup, digital, print, networking and security based services for the College. The entire department is part of an independent CPH domain/network that facilitates file/prINTER sharing to increase collaboration and provide a secure environment for all CPH faculty, staff and students. The CPH network/domain is essential to help meet the security compliance (ISCR) and Business Continuity/Disaster recovery requirements set forth by the University.

The College has two dedicated computer classrooms/laboratories in Cunz Hall located on the 2nd and 3rd floors. The two rooms are reserved primarily for student/teaching use and are accessible to the College's students 24/7 throughout the year. There are a few periods each week that some courses (e.g., Biostatistics) rely on computer software that is installed in the lab. Each room has 30 desktop computers, high-capacity printers and other audio/visual technology to help supplement the learning environment. In addition to these student computing rooms, several of the student workspaces have desktop computers and access to CPH resources. In addition, the entire campus utilizes wireless technology for computer access to the internet and other computer applications.

All faculty and staff are provided with a desktop and/or notebook computer loaded with essential and any special software that will be utilized here in CPH. In addition,

1.7 Faculty and Other Resources

each faculty, staff and student has access to a personal storage space located on our central file server. All data stored in this location is secured to specific users, backed up nightly and in compliance with disaster recovery/business continuity. Faculty and staff have access to these files remotely via SSH/SFTP/RDP access. Remote access to e-mail is also available via the web-based version of Outlook exchange.

The College has an Information Systems office located on the 3rd floor of Cunz Hall. Full-time staff include: Director Donald Shymanski, a systems manager, a web/database specialist, a system analyst, and one part-time student employee. All faculty/staff/students have access to e-mail/phone contact for support issues, including emergency on call, 24/7/365, support and service for severe issues (i.e., server outage). The Information Systems office utilizes help desk software to track all requests by faculty, staff and students.

Additional computer resources are available on campus at other locations. Distance learning is facilitated via a learning course management system known locally as "Carmen," which allows faculty to post student accessible materials (i.e., notes; readings; problem sets), facilitate discussions/dialogue. A university-wide file sharing service also is available through our cloud storage solution, Box. The College also has various affiliates that have access to central computing tools, such as Carmen/Box, to assist faculty/staff/students with any issues related to these services. In addition, the University offers computer hardware and software for purchase at reduced rates via campus agreements with various industries.

1.7.g. A concise description of library/information resources available for school use, including a description of library capacity to provide digital (electronic) content, access mechanisms, training opportunities and document delivery services.

The Thompson Library, the Moritz Law Library, and the Prior Health Sciences Library have a combined collection size of nearly 6 million volumes and regularly receive approximately 100,000 serial titles. Each library provides access to an online catalog/circulation system (OSCAR), as well as to indexes, abstracts, and bibliographies pertinent to its subject area(s). The University is part of OhioLINK, a consortium of the libraries of 121 Ohio colleges and universities and the State Library of Ohio. Any faculty, staff or student may request a book from any of the consortium libraries. The book will be delivered to the library of choice within 3 business days. The OSU libraries have access to over 400 electronic research databases, 81,000 e-books, and 20 million electronic journal articles. Librarians familiar with the subject areas and expert in associated research techniques are available for consultation.

All of the services available electronically within the libraries, including access to research databases and electronic journals, also are available to students and faculty from remote locations with an off-campus sign-in procedure. In addition, the

libraries offer text and video tutorials as well as one-on-one research tutoring for students and a range of instructional services for faculty and teaching staff on course-related instruction, online learning resources, and grants and awards.

1.7.h. A concise statement of any other resources not mentioned above, if applicable.

The College has service-based resources in Cunz Hall. These include an Office for Academic Programs and Student Services (OAPSS) on the first floor. Eight professional staff members are located in the office suite which serves as a hub for managing most student services involving recruitment, admissions, undergraduate and some graduate student advisement, registration, tracking, practicum placement, career services, and graduation. The staff members are very accessible to students and faculty.

Other service-based resources include offices for Human Resources, Finance, and Research all located on the second floor. A staff member responsible for facility operations/maintenance has an office also on the second floor. Finally, Information Systems has an office suite on the third floor and houses staff for managing office, meeting room and classroom technology.

1.7.i. Identification of measureable objectives through which the school assesses the adequacy of its resources, along with data regarding the school's performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

The College has the necessary number of faculty members with appropriate and complementary qualifications to support its mission and meet CEPH requirements. However, the College continues to be actively engaged in quantitative and qualitative capacity building activities for continued expansion of faculty and staff members for expanded collaborative academic and research activities. Activities to achieve this involve additional new hires as well as increased interdisciplinary faculty appointments with other units on campus. The University's Discovery Theme initiative has added to College resources to achieve these goals and target outcomes. Refer to **Table 1.7.6** below. The College has been successful at recruiting assistant professors and promoting faculty to the associate and full professor levels. It is important to note that in 2015, two full professors retired due to changes in the State pension system. Thus, our full professor numbers decreased slightly. Given recent promotions and efforts to recruit senior level faculty, the target of 50 full-time faculty members, with about 60% more senior faculty, should be reached by 2017. Staff needs for the College have grown largely because of our expansion of academic programs, which require staff to help with administrative activities. The College is currently evaluating additional non-research staff support, especially for the expanding undergraduate program. Success in receiving external funding for research has allowed the College to hire additional research support staff

serving as program managers, interviewers, and lab-based researchers.

Table 1.7.6 Outcome Measures for Faculty and Staff Capacity Building

Category A - Capacity Building:				
Strategic Goal A.1. Interdisciplinary Capacity Building: <i>Build and sustain high quality diverse core faculty and staff.</i>				
Outcome Measures for A.1.1.				
Initiative: <i>Recruit, appoint promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.</i>				
Outcome Measure	Target 2017	2016-17	2015-16	2014-15
Number of primary faculty (headcount)	50 Faculty Members	Assistant = 18 Associate = 13 Full = 17 TenureTrack = 18 NonTenureTrack = 5 Tenured = 25 Total = 48(47.15FTE)	Assistant = 19 Associate = 12 Full = 13 TenureTrack = 16 NonTenureTrack = 5 Tenured = 23 Total = 44(43.15FTE)	Assistant = 16 Associate = 13 Full = 15 TenureTrack = 12 NonTenureTrack = 6 Tenured = 26 Total = 44(43.15FTE)
Number of staff (headcount)	60 Staff Members	59	65	68
Outcome Measures for A.1.2.				
Initiative: <i>Formalize courtesy and joint faculty appointments with other Colleges at OSU.</i>				
Outcome Measure	Target 2017	2016-17	2015-16	2014-15
Number of active courtesy/joint appointments between the College/Other Colleges w/in OSU to support interdiscipline collaboration	15 OSU Colleges	No. Courtesy Appointments = 65 No. Joint Appointments = 16 No. Fellows = 2 No. Affiliated = 1 No. Colleges = 12	No. Courtesy Appointments = 59 No. Joint Appointments = 12 No. Fellows = 1 No. Colleges = 11	No. Courtesy Appointments = 70 No. Joint Appointments = 8 No. Colleges = 12
Outcome Measures for E.1.3.				
Initiative: <i>Continue to recruit senior and mid-career faculty to maintain strength in key leadership positions in the College.</i>				
Outcome Measure	Target 2017	2016-17 Hires	2015-16 Hires	2014-15 Hires
New division chairs	2 new division chairs	K. Archer, PhD Chair, Division Biostatistics (Jul'16)	Wm. Miller, MD, PhD Chair, Division of Epidemiology (Mar'16)	Neither Chair vacancy were filled for Environmental Health or Epidemiology
Number Associate and Full-professor hires	Eight new senior and mid-career faculty hired since 2014	1 Professor/Chair 3 Asst. Professors	1 Professor/Chair 3 Asst. Professors	1 Asst. Professor <u>Note: During 2013-14</u> 1 Professor/Dean 3 Assoc. Professor 6 Asst. Professor

Outcome Measures for E.1.4.				
Initiative: <i>Recruit highly qualified faculty to lead initiatives in global health and multicultural health.</i>				
Outcome Measure	Target 2017	2016-17	2015-16	2014-15
Number new hires with international and multicultural health experience	Five new faculty hired	Wm. Miller, MD, PhD Chair/Prof, Epidemiology M. Weir, PhD Assist. Prof. Environ Health	F. Adetona, PhD Assist. Prof. Environ Health A. Felix, PhD Assist. Prof. Epidemiology	Appointed Qinghua Sun, MD, PhD Assistant Dean for Global Public Health (Note: During 2013 hired others with strong international PH experience: Wm. Martin, MD M. Gallo, PhD

Inherent to these capacity building activities, is the goal to achieve and sustain representative racial and ethnic diversity among both faculty and staff members (refer to Table 1.8.3 under Criterion 1.8). Also refer to Criterion 1.6 Tables 1.6.1 through 1.6.3 for summary of financial resources.

1.7.j. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 1.7.

Strengths:

- The College has the resources necessary to fulfill its mission and the instructional, research, and service objectives as outlined in its *Strategic Plan*.
- The College has a recently renovated modern dedicated building and space that provides a single, centralized location for its faculty, staff and students.
- The University’s Discovery Theme initiative continues to serve as a financial resource to supplement salaries, benefits and start-up packages for new faculty hires, which contribute to the quantitative and qualitative growth of the College and the University.

Challenges/Weaknesses/Plans:

- Although the College has several classrooms within its building, Cunz Hall, they are part of the University classroom pool. Accordingly, many of the College’s courses are not offered in Cunz Hall since the University Registrar’s Office schedules them in other buildings. This is due primarily to University efforts to align course enrollment size with the most applicable classroom capacity.
- Although the College currently has sufficient staffing, predicting, maintaining and acquiring necessary staff support in concert with expansion of faculty numbers, programs and students requires constant attention to ensure that the College can efficiently and effectively operate and sustain high quality services and experiences. The College will continue to explore and identify areas for improved efficiency and staff needs.

1.7 Faculty and Other Resources

CRITERION 1.8 DIVERSITY

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

- 1.8.a. A written plan and/or policies demonstrating systematic incorporation of diversity within the school. Required elements include the following:**
- i. Description of the school's underrepresented populations, including a rationale for the designation.***
 - ii. A list of goals for achieving diversity and cultural competence within the school, and a description of how diversity-related goals are consistent with the University's mission, strategic plan and other initiatives on diversity as applicable.***
 - iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the school should also document its commitment to maintaining/using these Policies.***
 - iv. Policies that support a climate for working and learning in a diverse setting.***
 - v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.***
 - vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.***
 - vii. Policies and plans to recruit, develop, promote and retain a diverse staff.***
 - viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.***
 - ix. Regular evaluation of the effectiveness of the above-listed measures.***
-

i. Description of the school's underrepresented populations, including a rationale for the designation.

The College's primary, but not exclusive, designations of underrepresented populations are based on race and ethnicity. Gender is considered and tracked as well. The College broadly seeks qualified applicants for student, staff and faculty positions to increase the likelihood of achieving and sustaining demographic diversity. The rationale is based on the preference to assemble students, staff and faculty members who represent the demographics of the communities and populations they serve. Although many will serve beyond the State's borders, the demographics for Ohio are used for reference comparisons.

The State of Ohio has a population of approximately 11.6 million people. According to the U.S. Census, White, non-Hispanic or Latino, represents about 80% of this

population and the balance, or approximately 20%, are other racial groups. A summary of race, ethnicity, and gender follows in **Table 1.8.1** below.

Table 1.8.1 Demographics of Ohio Based on Race, Ethnicity and Gender¹

Category	Percentage of Ohio's Population
American Indian and Alaska Native alone	0.3%
Asian alone	2.1%
Black or African American alone	12.7%
Hispanic or Latino ²	3.6%
Native Hawaiian and Other Pacific Islander	0.1%
Two of More Races	2.1%
White	79.8%
Female	51.0%
Male	49.0%

¹ U.S. Census Bureau (2015) <http://quickfacts.census.gov/qfd/states/39000.html> (reflects update 12/1/15)

² Hispanics may be of any race, so also are included in applicable race categories.

The policy and practice for marketing to and recruiting faculty and staff candidates for available positions involves broad outreach and in some cases targeted efforts to ensure that qualified and interested people are invited to apply. A similar approach is used for marketing to and recruiting students. The College aspires to fill faculty and staff positions and student seats to achieve and sustain a demographic profile that is in relative alignment with most or all demographic categories summarized above.

ii. A list of goals for achieving diversity and cultural competence within the school, and a description of how diversity-related goals are consistent with the University's mission, strategic plan and other initiatives on diversity as applicable.

Efforts to improve and sustain diverse profiles of faculty, staff and students remains not only a College goal, but an overarching goal for the University. The policy of the University is that discrimination against any individual for reasons of race, color, creed, religion, sexual orientation, national origin, sex, age, disability, or Vietnam-era veteran status is specifically prohibited. Accordingly, equal access to employment opportunities, admissions, educational programs, and all other University activities is extended to all persons. The University promotes equal opportunity through a positive and continuing affirmative action program.

The College's *2015-17 Strategic Plan* continues to reflect goals and initiatives to address diversity among faculty, staff and student populations. In addition, the College's Diversity and Inclusion Committee developed and submitted a document entitled *2015 – 2016 Diversity and Inclusion Action Plan & Assessment for the College of Public Health* to the Provost for review. The applicable goals, initiatives, and outcome measures from the strategic plan are shown in **Table 1.8.2** below.

Table 1.8.2 Applicable Faculty, Staff and Student Diversity Goals, Initiatives and Outcome Measures from the College’s Strategic Plan

<p>Category A - Capacity Building: Strategic Goal A.1. Interdisciplinary Capacity Building: <i>Build and sustain high quality diverse core faculty and staff.</i> Outcome Measures for A.1.1. Initiative: <i>Recruit, appoint, promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.</i></p>	
Outcome Measure	Target 2017
Percentage of underrepresented faculty and staff based on race, ethnicity and gender	Representative of Ohio demographics (see Table 1.8.1 above)
<p>Category B - Teaching and Learning: Strategic Goal B.1. Teaching and Learning: <i>Recruit, matriculate, retain and graduate high-quality and culturally-diverse students.</i> Outcome Measures for B.1.1. Initiative: <i>Expand student recruitment, and align the College’s marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.</i></p>	
Outcome Measure	Target 2017
Applicant pool reflecting racial, ethnic and gender diversity	Representative of Ohio demographics (see Table 1.8.1 above)
<p>Category E - Resources: Strategic Goal E.1. Resource Stewardship: Ensure that faculty and staff members reflect a diverse culture. Outcome Measures for E.1.1. Initiative: <i>Identify current and desired cultural conditions that will enhance the College’s abilities to achieve its strategic goals.</i></p>	
Outcome Measure	Target 2017
Full Integration and Alignment of University Office of Diversity and Inclusion and College’s Committee Best Practices for a Diverse and Culturally Aware College Setting	Best practices and activities integrated into and aligned with all aspects of College’s efforts to achieve and sustain racially and ethnically diverse and culturally aware/sensitive faculty, staff and students.
Diverse representation of faculty members in College	Representative of Ohio Demographics (see Table 1.8.1 above)
Diverse representation of staff members in College	Representative of Ohio Demographics (see Table 1.8.1 above)
Completion of University diversity training	100% Applicable Faculty and Staff
<p>Outcome Measures for E.1.2. Initiative: <i>Require all faculty searches to have a diverse pool of applicants, including underrepresented minorities.</i></p>	
Outcome Measure	Target 2017
Diversity of faculty and staff applicant pools	100% applicable searches

The College has achieved improved outcomes relative to improving the racial and ethnic diversity of its faculty and staff members in the past few years. This has coincided with increased numbers of faculty and staff positions available in the College. Data show that there is greater improvement in faculty than staff diversity. Though gender has not been identified as the primary focus for the College,

compared to racial and ethnic diversity, it is indeed a category of focus. For example, there has been some historic disparity within leadership positions, that is, relatively few females in the leadership roles. However, the College has experienced positive movement toward appointing more women in leadership positions (i.e. deans; chairpersons; directors). For examples, a female was hired for the relatively new position, Associate Dean for Outreach and Engagement; and, a female replaced a male, who retired, as the new Division Chair for Biostatistics.

Despite expanded efforts and improving diversity of faculty and staff members, we have not fully achieved our goal of meeting or exceeding the demographics for the State relative to all applicable underrepresented racial and ethnic groups. The College remains committed to improving this performance, and works with a variety of resources (such as the Office of Diversity and Inclusion) on campus.

We have demonstrated better success in attracting a diverse pool of applicants for our academic programs. Admission, matriculation and graduation data remain favorable relative to racial and ethnic diversity of students in our programs. An example of this is shown later under **Table 1.8.3** under this criterion.

iii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the school should also document its commitment to maintaining/using these Policies.

The Ohio State University maintains policies addressing discrimination and harassment (i.e. Affirmative Action, Equal Employment Opportunity & Non-Discrimination/Harassment, 1.10) that govern the activities of the College and its personnel. The policy states, *“The Ohio State University is committed to building and maintaining a diverse community to reflect human diversity and to improve opportunities for all. The University is committed to equal opportunity, affirmative action, and eliminating discrimination. This commitment is both a moral imperative consistent with an intellectual community that celebrates individual differences and diversity, as well as a matter of law.”*

Ohio State does not discriminate on the basis of age, ancestry, color, disability, gender identity or expression, genetic information, HIV/AIDS status, military status, national origin, race, religion, sex, sexual orientation, protected veteran status, or any other bases under the law, in its activities programs, admission, and employment.

The College remains committed to maintaining these policies through our recruitment practices, including a requirement that faculty serving on search committees attend diversity training.

iv. Policies that support a climate for working and learning in a diverse setting.

The University provides strong human resources, policy, and organizational

guidance and infrastructure to support diversity across campus. Accordingly, the College does not have formalized policies that address the same issues. It does, however, have an expressed commitment to diversity, as well as initiatives and practices that support the University's expectations and directions.

Indeed, diversity is one of the College's four core values: *We celebrate the richness that diversity brings to our society and work to create a welcoming culture that respects all forms of diversity. We are committed to increasing the diversity of our students, faculty, and staff and to equipping all our graduates to contribute effectively to a diverse public health workforce.*

The commitment to diversity is further illustrated through the work of the College's Diversity and Inclusion Committee (formerly the Diversity Enhancement Committee), first established in 2004 to assist with the development and implementation of a diversity plan for the College. The committee consists of faculty, staff, and students and is charged with monitoring the College's Diversity and Inclusion Plan (see *2015 – 2016 Diversity and Inclusion Action Plan & Assessment for the College of Public Health in the e-Resource file*).

Through renewed planning efforts during the 2013-2014 academic year, the Committee established a unique vision, mission, and philosophy statement before embarking on strategic planning actions.

Revisions to the College's *Pattern of Administration* (p. 18) in 2014 resulted in the following changes to the membership and responsibilities of the committee:

- Changed the name of the group from Diversity Enhancement Committee to Diversity and Inclusion Committee to align more directly with the other devoted offices and initiatives across campus;
- Increased the student representation on the committee from one to three
- Elaborated on responsibilities to include "support student growth relative to cultural competence, elimination of health disparities and reduction of the impact of social determinants of health;" and,
- Explicitly added expectations regarding coordination with the University's Office of Diversity and Inclusion, Diversity Officers Working Group, Wexner Medical Center Diversity Council, and Multicultural Public Health Student Association.

During the committee's 2014 planning process, four core priorities and associated objectives were identified, and efforts are focused here. Priority areas and associated objectives for expansion and/or improvement are:

- **Faculty and Staff Recruitment:** adopt newly instituted University supported faculty search practices focusing on achieving diverse applicant pools; provide training for staff who support searches; create guidance documents to support search practices; engage all faculty in recruitment practices; engage in research activities that address diversity.
- **Student Recruitment:** Involve all faculty and staff in messaging and activities to recruit diverse students; involve student ambassadors in recruitment messaging; develop applicant review documentation to guide admissions of underrepresented populations.
- **Curricula and Student Experience:** Develop curricular resources for faculty; conduct forum for faculty sharing of diversity-related resources and experiences for classroom use; institutionalize graduate and undergraduate service learning as annual offering; integrate diversity activities into new student orientation; support annual Diversity Summit (sponsored

- by the Multicultural Public Health Student Association).
- **Culture, Awareness and Environment:** Annually conduct building accessibility audit; fully integrate diversity focused actions into formal and informal policies, standards and protocols; annually host Open Doors training for faculty, staff, and students; annually sponsor 'embracing diversity in public health photo contest; annually sponsor student, faculty, staff participation in Diversity Leadership Summit.
- **Assessment and Administration:** Define underrepresented populations for recruitment; assess how committee and faculty may support one another in recruitment and diversity-related coursework; biannually assess diversity climate within College; establish common budget and reporting schedules.

These priorities will serve to inform activities through 2017. Diversity and Inclusion Committee activities, when applicable, are reported at monthly College faculty meetings, at each division meeting, and at least twice a year to the Executive Committee.

v. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.

The College's curricula include competencies, course content and other activities to ensure coverage of diversity and cultural considerations in public health. These competencies are reviewed and developed with primary input from the Graduate and Undergraduate Studies Committees and the College's Diversity and Inclusion Committee. For examples, a core competency for undergraduate programs is *identify genetic, social, political, cultural, behavioral, socioeconomic, demographic and ethical factors and relationships to domestic and international public health issues and determinants of health*. A core competency for graduate programs is *develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served*.

Course topics and assignments (e.g., readings) as well as other academic experiences and extracurricular activities directly or indirectly align with these core competencies. Examples of content directly related are topics and assignments that include social determinants of health and environmental justice which are featured in several courses, including the core courses. See the **eResource File** for examples of topics and readings in syllabi.

Although not formally part of College curricula, the student Multicultural Public Health Association sponsors educational programs of various kinds. Most notable is the *Diversity in Public Health Summit*, an annual day-long conference focusing on some aspect of diversity for professionals, students, faculty and staff. The event has grown annually since its initiation; it is supported by the college as well as other units across campus. There were over 150 attendees at the most recent event held during April 2016.

vi. Policies and plans to recruit, develop, promote and retain a diverse faculty.

The College operates in accordance with diversity policy set at the University level. The Office of Academic Affairs requires that recruitment and selection of faculty be guided by a commitment to diversity. All searches must entail focused efforts to achieve a pool of highly qualified candidates including members of underrepresented groups. Every search committee must name an Affirmative Action/Diversity Advocate to oversee its actions and alignment with affirmative action principles, and searches are required to employ specialized and nontraditional advertising activities. The University has several additional resources that either provide general guidance for or focus solely on the recruitment of underrepresented populations including a published Guide to Effective Searches (see **eResource File**), Recruiting Diverse Faculty training guide, and an exclusive web page sponsored by [The Women's Place](#).

The College's strategic plan further states the expectation that all faculty searches will result in a diverse candidate pool. Additionally, the College's *Appointments, Promotion, and Tenure Criteria and Procedures* document affirms our commitment to the University's diversity policy and echoes the strategic plan in this regard. In 2015, the Associate Dean for Research, who chairs the open faculty search process, attended training for recruitment of diverse faculty sponsored by the University Office of Diversity and Inclusion. The entire faculty received a one-hour version of this training during a regular faculty meeting. The commitment to diversity has been emphatically highlighted by the Dean when setting forth the charge to the search committees.

The College is committed to the success of all new faculty, and the Director of Faculty Development oversees mentoring, education, development, and support of junior faculty in relation to the promotion and tenure process. Responsibilities are outlined in the College's *Pattern of Administration*. In 2015, the College's new-hire mentoring program was restructured to actively engage these faculty, their division chairs and the executive committee in the selection of three mentors with similar backgrounds and/or research interests. These mentors are drawn from across the University community, and work with the new hires at least through the probationary period for tenure-track assistant professors. The Director of Faculty Development also hosts group meetings for junior faculty each semester to discuss topical issues and meets individually to provide informal consultation as needed.

The College's Diversity and Inclusion Committee has reinforced a continued College and University priority to recruit underrepresented faculty and staff. See section IV. above for a summary of activities in this area.

vii. Policies and plans to recruit, develop, promote and retain a diverse staff.

The College is directed by the human resources policies of the University. Regarding staff, the Office of Human Resources Recruitment and Selection Policy 4.1 requires

that recruitment activities be guided by an overall commitment to diversity and that position advertisement efforts will reach the broadest and most diverse pool possible. The College's *Strategic Plan* echoes this expectation.

viii. Policies and plans to recruit, admit, retain and graduate a diverse student body.

The University handles primary recruitment efforts for undergraduate students; the College handles graduate student recruitment, in some cases collaboratively with the other Health Sciences Colleges. The College's strategic plan addresses the recruitment, retention and graduation of high-quality and culturally-diverse students, which is to be accomplished through alignment with the University's Office of Enrollment Services' efforts to boost racial, ethnic, geographic and economic diversity. In addition, the Diversity and Inclusion Committee (DIC) has reinforced College efforts to recruit underrepresented applicants and students. Specifically, the Committee's 2015-2017 goals and objectives focus on engaging all faculty and staff, as well as student ambassadors, in recruitment messaging and activities, developing applicant review guidance specific to the College, and establishing a minority student scholarship.

Both undergraduate and graduate degree programs have specific thresholds (i.e. GPA; standardized exam scores; etc.) for admission of applicants. However, admission at the undergraduate level in particular takes a more holistic approach, considering applicants' other attributes, experiences and interests. Faculty applicant reviewers at the graduate level are also encouraged to consider applicants holistically.

In 2014, the College joined with the other six health sciences colleges and the School of Health and Rehabilitation Sciences to create a joint student diversity recruitment brochure. The brochure was updated in 2016.

https://issuu.com/publichealthbuckeyes/docs/healthsci-divbroch-2016_web

The College participates in the Graduate/Professional Student Recruitment Initiative sponsored by the University's Office of Diversity and Inclusion. This program supports prospective students from underrepresented populations as they participate in a three-day visit to campus. In 2015, members from the Diversity and Inclusion Committee were more actively engaged in planning and implementing these activities than they had been in the past; although only a relatively small number of students participate, the numbers of both applicants (10) and attendees (8) doubled from the previous year.

In 2015, the Office of Academic Programs and Student Services visited historically black Colleges and universities, as well as several institutions located in Appalachian areas, to establish and strengthen relationships and potential pathways for future students. Other recruitment/retention efforts include:

- Diversity related materials are provided to prospective and admitted students during campus visits

- An introduction to the diversity emphasis within the College, the Diversity and Inclusion Committee, and the Multicultural Public Health Student Association is made at the new student orientation for both graduate and undergraduate students
- A diversity perspective overview was included as part of the application review training for faculty for the first time in 2015
- For the first time in 2015, the College's Diversity and Inclusion Committee faculty members made phone calls to admitted underrepresented students to officially welcome them to the College and answer outstanding questions about the College
- College materials were distributed at the annual Compact for Faculty Diversity, attended by a Diversity and Inclusion Committee member
- Admitted students (2016) received invitations to the Diversity in Public Health Summit (sponsored by the Multicultural Public Health Student Association) and a more intimate informal reception with faculty and staff
- The commitment to diversity and highlights of diversity-related activities are featured on the College's website

While there are not presently formal retention and graduation plans for diverse students specifically, there are activities that support overall retention and graduation. Examples include:

- First year MHA students are matched with alumni mentors
- First year Epidemiology students are matched with second year student mentors
- Advising and/or faculty outreach is conducted for students identified as being at risk academically
- Student surveys are conducted for both undergraduate and graduate students to gather input to inform changes needed to enhance retention
- An MHA diversity scholarship for second year students is awarded
- Nomination and enrollment of students in the University's diversity-focused Graduate Enrichment Fellowship program
- Undergraduate students participate in degree planning
- Application of the degree audit tool, which allows students to monitor their own progress
- An early application deadline, allowing advisory ample time to review applications and conduct early outreach as needed
- Application of the continuous enrollment plan for doctoral candidates to allow monitoring and early identification of risk of non-graduation

ix. Regular evaluation of the effectiveness of the above-listed measures.

An expectation to achieve and sustain an acceptable representation of racially and ethnically diverse faculty, staff and student populations informs the goals and practices of the College and its Diversity and Inclusion Committee. The College administration, in conjunction with the Committee, defines specific diversity-related outcome measures and collects and compiles relevant data from applicant pools existing faculty, staff and student populations in the College.

The College updates and reviews the ongoing census of faculty, staff and students relative to a variety of characteristics, including race and ethnicity. Although these data were collected and recorded when searches were conducted and new hires made, prior to the self-study these data were not available in an easy to access list or summary for faculty and staff, nor were the data reported regularly. This has been

improved for the past two years. An expectation to achieve and sustain an acceptable representation of racially and ethnically diverse faculty, staff and student populations informs the goals and practices of the College and its Diversity and Inclusion Committee. The College administration, in conjunction with the Committee, defines specific diversity-related outcome measures and collects and compiles relevant data from applicant pools existing faculty, staff and student populations in the College.

Prior to 2016, the diversity climate within the college was regularly assessed every three years. For the first time in 2016, diversity climate questions were added to the annual survey of first year undergraduate and graduate students. This will provide more regular data upon which to measure success. The Committee reviewed the results in the spring 2016 and will oversee focus groups to help illuminate the survey findings. (See the ERF for results of the 2016 survey and most recent round of focus groups, completed in 2014.) Review of climate data is to occur each year and will be used to inform goals and activities. Diversity-focused activities of the college (including the Diversity and Inclusion Committee) are tracked, however, there is opportunity and need to expand evaluation of efforts as part of our overall assessment process.

1.8.b. Evidence that shows the plan or Policies are being implemented.
Examples may include mission/goals/objectives that reference diversity or cultural competence, syllabi and other course materials, lists of student experiences demonstrating diverse setting, records and statistics on faculty, staff and student recruitment, admission and retention.

Data demonstrating relatively positive outcomes reflective of the College's efforts to achieve and sustain diverse faculty, staff and students are shown in Criterion 1.8.e. below. Excerpts of goals and initiatives from the *Strategic Plan* were listed under Criterion 1.8.a.(ii) above and in Criterion 1.1. Other documents, including an inventory of the demographics related to several faculty searches and course syllabi, are available in the eResource File.

1.8.c. Description of how the diversity plan or policies were developed, including an explanation of the constituent groups involved.

In the 2013-2014 academic year, the College Diversity and Inclusion Committee created a unique mission, vision, and philosophy focused on diversity. Members included faculty, staff and graduate students. Activities for that academic year were planned with input from an initial brainstorm exercise, from diversity officers representing other health sciences colleges and the University Office of Diversity and Inclusion, and from the previous year's diversity climate survey. The Committee conducted focus groups with College students, staff, and faculty in the summer of 2014 (see summary in the ERF) to gather additional data about the diversity climate,

and those results were used in tandem with the previously considered inputs to complete more a more comprehensive plan through 2017.

In addition to these efforts, the human resources practices of the College follow University diversity policies. A review of and update to search and hiring documentation was conducted by human resources administrators with input from the Diversity and Inclusion Committee. In addition to enhancing efforts relative to searches and hiring practices, efforts remain robust relative to attracting diverse degree applicant pools to increase probability of diverse admissions and enrollments (refer to Criterion 4.3; and, Criterion 1.8.e. below).

1.8.d. *Description of how the plan or policies are monitored, how the plan is used by the school and how often the plan is reviewed.*

The College's strategic plan continues to address explicitly the goal of achieving and sustaining diversity. Although plans are generally made for three- to five-year periods, they are reviewed at least annually. The College undertakes efforts on a continuous basis, and outcomes demonstrate improvement over time. Improvement may be linked in part to a strengthening of the Diversity and Inclusion Committee itself beginning in 2012. The Committee engages in ongoing discussion, updates, and reporting of activities based on its own work plan; a more complete review is conducted at the end of the academic year.

1.8.e. *Identification of measurable objectives by which the school may evaluate its success in achieving a diverse complement of faculty, staff and students, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Data template 1.8.1. At a minimum, the school must include four objectives, at least two of which relate to race/ethnicity. Measurable objectives must align with the school's definition of underrepresented populations in Criterion 1.8.a.*

During the 2009 CEPH self-study review, faculty and staff diversity was "met with commentary". The concerns focused on relatively low percentages of underrepresented racial and ethnic groups and the College's efforts to improve diversity. The total numbers and diversity of faculty, staff and students undergoes annual change and, overall, there have been improvements since the 2009 review. In general, the composition of the College indicates modest increases in diversity. The overall percentages of underrepresented populations among faculty (32.6%), staff (17.9%), and students (24.2%) have improved over the last three years. Total percentages of underrepresented populations for faculty and students are improving relative to aligning with Ohio demographics, but percentages for staff fall below. Indeed, overall, the College has achieved creating a climate that appreciates diversity. The Diversity and Inclusion Committee has a renewed focus and the members are all truly interested in the mission of the Committee and work actively to

achieve its goals. There is a regular update at all College and Division faculty meetings and diversity is a point of discussion at many faculty meetings (outside of the Diversity Committee update). While not listed in the table, it should be noted that there are several faculty who do research on health disparities; thus, this topic is also of professional interest to many in the College. Table 1.8.3 below provides a summary of the relevant goals, initiatives, targets and outcome measurements associated with diversity. While the data in the table suggest that the College is attracting applications from women and underrepresented groups, the College continues to work on this outcome. Ideally, a higher number of applications should be received from applicants who identify as Black or African American. The College needs to improve its efforts to do more targeted recruitment in order to increase diversity in the application pool.

Table 1.8.3 Outcome Measures for Faculty, Staff, Student and Committee Diversity Based on Race, Ethnicity and Gender

Outcome Measures for A.1.1.
Initiative: *Recruit, appoint promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.*

Outcome Measure	Target 2017	2016-17 (n=48)	2015-16 (n = 44)	2014-15 (n = 44)
Diversity of faculty based on race/ ethnicity/ gender	Representative of Ohio demographic http://www.census.gov/quickfacts/map/INC110213/39	Asian 13%(n=6) Black 8%(n=4) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose0%(n=0) White 71%(n=34) Total Under-represented 29% (n=14) M = 46% F = 54%	Asian 13%(n=6) Black 6%(n=3) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose(n=0) White 70%(n=31) Total Under-represented 23-27% (N=13-15) M = 45% F = 55%	Asian 11%(n=5) Black 4%(n=2) Hispanic 2.5%(n=1) Two/ More Races 2.5%(n=1) Undisclose2.5%(n=1) White 77%(n=34) Total Under-represented 20-22% (n=9-12) M = 45% F = 55%
Outcome Measure	Target 2017	2016-17 (n = 59)	2015-16 (n = 67)	2014-15 (n = 68)
Diversity of staff based on race/ ethnicity/ gender	Representative of Ohio demographic	Asian 13%(n=6) Black 8%(n=4) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose0%(n=0) White 71%(n=34) Total Under-represented 29% (n=14) M = 46% F = 54%	Asian 13%(n=6) Black 6%(n=3) Hispanic 4%(n=2) Two/More Races 4%(n=2) Undisclose4%(n=2) White 70%(n=31) Total Under-represented 23-27% (N=13-15) M = 45% F = 55%	Asian 11%(n=5) Black 4%(n=2) Hispanic 2.5%(n=1) Two/ More Races 2.5%(n=1) Undisclose2.5%(n=1) White 77%(n=34) Total Under-represented 20-22% (n=9-12) M = 45% F = 55%

Outcome Measures for B.1.1.

Initiative: *Expand student recruitment, and align the College's marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.*

Outcome Measure	Target 2017	Cohort entering Au16-Su17* *Does not include SP17 or SU17	Cohort entering Au15-Su16	Cohort entering Au14-Su15
Number of graduate and undergrad applications received	700 graduate applicants per year 130 graduate matriculates per year 250 undergrad applicants per year 80 undergrad matriculates per year	No. Graduate Applicants = 625 No. Graduate Matriculates =126 (will be higher when SU17 data are included) No. Undergraduate Applicants =129 No. Undergraduate Matriculates =111	No. Graduate Applicants = 644 No. Graduate Matriculates= 136 No. Undergraduate Applicants = 160 No. Undergraduate Matriculates =97	No. Graduate Applicants = 657 No. Graduate Matriculates=146 No. Undergraduate Applicants = 142 No. Undergraduate Matriculates =89
Diversity of applicant pool, based on race/ethnicity/gender	Representative of Ohio demographics: Female 51% Male 49% Amer. Indian/Alaskan Native 0.3% Asian 2.1% Black 12.7% Hispanic/Latino 3.6% Native Hawaiian/Other Pacific 0.1% Two/More Race 2.1% White 79.8% Note: Total percentage underrepresented based on race/ethnicity = 20.2% Female 51% Male 49%	Underrepresented Graduate Degree Applicants = 44.9% Gender Graduate Degree Applicants M=34% F=66% Underrepresented Graduate Degree Admits = 36.2% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.6% Gender Graduate Degree Matriculates M=20% F=80% ***** Underrepresented Undergrad Degree Applicants = 36% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 35% Gender Undergrad Degree Admits M= 23% F= 77% Underrepresented Undergrad Matriculate = 34% Gender Undergrad Degree Matriculates M= 22% F= 78%	Underrepresented Graduate Degree Applicants = 46% Gender Graduate Degree Applicants M=32% F=68% Underrepresented Graduate Degree Admits = 36.3% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.7% Gender Graduate Degree Matriculates M=29% F=71% ***** Underrepresented Undergrad Degree Applicants = 29% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 22% F= 78% Underrepresented Undergrad Matriculate = 24% Gender Undergrad Degree Matriculates M= 22% F= 78%	Underrepresented Graduate Degree Applicants = 45.2% Gender Graduate Degree Applicants M=35% F=65% Underrepresented Graduate Degree Admits = 29.5% Gender Graduate Degree Admits M=33% F=67% Underrepresented Graduate Matriculate = 25.3% Gender Graduate Degree Matriculates M=36% F=64% ***** Underrepresented Undergrad Degree Applicants = 26% Gender Undergrad Degree Applicants M= 15% F= 85% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 11% F= 89% Underrepresented Undergrad Matriculate = 23.5% Gender Undergrad Degree Matriculates M= 11% F= 89%

Outcome Measures for E.1.1.
Initiative: *Identify current and desired cultural conditions that will enhance the College's abilities to achieve its strategic goals.(Also refer to Outcome measures for A.1.1 and B.1.1)*

Outcome Measure	Target 2017	2016-17	2015-16	2014-15
Diversity of faculty on committee	Representative Ohio Demographics	White: 67% (n=4) Black: 33% (n=2) Female: 33% (n=2) Male: 67% (n=4)	White: 75% (n=6) Black: 25% (n=2) Female: 63% (n=5) Male: 37% (n=3)	White: 86% (n=6) Black: 14% (n=1) Female: 72% (n=5) Male: 28% (n=2)
Diversity of staff on committee	Representative Ohio Demographics	White: 83% (n=5) Black: 17% (n=1) Female: 83% (n=5) Male: 17% (n=1)	White: 83% (n=5) Black: 17% (n=1) Female: 100% (n=6)	White: 83% (n=5) Black: 17% (n=1) Female: 100% (n=6) Male: 0% (n=0)
Diversity of alumni on committee	Representative Ohio Demographics	Black: 100% (n=1) Female: 100% (n=1)	Black: 100% (n=1) Female: 100% (n=1)	Black: 100% (n=1) Female: 100% (n=1)
Diversity of students on committee	Representative Ohio Demographics	White: 0% (n=0) Black: 100% (n=3) Female: 67% (n=2) Male: 33% (n=1)	Black: 80% (n=4) Hispanic: 20% (n=1) White: 0% Female: 60% (n=3) Male: 40% (n=2)	White: 40% (n=2) Black: 60% (n=3) Female: 60% (n=3) Male: 40% (n=2)

Outcome Measures for E.1.2.
Initiative: *Require all faculty searches to have a diverse pool of applicants, including underrepresented minorities.*

Outcome Measure	Target 2017	2015-16 Hires ¹	2014-15 Hires	2013-14 Hires
Diversity of faculty applicant pools	100% applicable searches	17 Applicants: <u>Gender</u> Female 35% (n=6) Male 65% (n=11) <u>Ethnicity</u> Black 6% (n=1) Asian 12% (n=2) White 70% (n=12) Unknown 12% (n=2)* 3 Hired:** <u>Gender</u> Female 67% (n=2) Male 33% (n=1) <u>Ethnicity</u> Black 33% (n=1) White 67% (n=2)	31 Applicants: <u>Gender</u> Female 45% (n=14) Male 48% (n=15) Unknown 7% (n=2)* <u>Ethnicity</u> Black 3% (n=1) Asian 23% (n=7) Hispanic 6% (n=2) White 42% (n=13) Unknown 26% (n=8)* 1 Hired: <u>Gender</u> Female 100% (n=1) <u>Ethnicity</u> White 100% (n=1)	145 Applicants: Female 47% (n=53) Male 49% (n=71) Unknown 14% (n=21)* <u>Ethnicity:</u> Black 7% (n=11) Asian 28% (n=40) Hispanic .5% (n=1) White 36% (n=52) Two or More Races 1% (n=2) International 2.5% (n=3) Unknown 25% (n=36)* 9 Hired: <u>Gender</u> Female 40% (n=4) Male 60% (n=5) <u>Ethnicity</u> Black 20% (n=2)

Outcome Measure	Target 2017	2015-16 Hires ¹	2014-15 Hires	2013-14 Hires
				Asian 10% (n=1) Two or More Races 10% (n=1) White 60% (n=5)
<p>*EEL form not returned **Applicant pool data does not include 4 additional hires for 2015-16 (3 male, 1 female; 1 Black, 2 Asian, 1 Hispanic). Records were not kept correctly by new staff member. This person is no longer with the College. Appropriate procedures were reviewed with all staff who assist with the search process. ¹ Diversity data for faculty search applicant pools were not available for the 2016-17 new hires. The University implemented a new online response process that applicants were unable to access. The College has now transitioned to using the Academic Jobs Online Service which collects and provides these data.</p>				

1.8.f. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 1.8.

Strengths:

- The College, in alignment with the University, has a strong commitment to diversity among and for its faculty, staff and students.
- The College has continued to demonstrate efforts and positive qualitative and quantitative outcomes relative to racially and ethnically diverse degree program applicants, offers for admission, and matriculation/enrollment of undergraduate and graduate students.
- The number and percentage of faculty members in the College who represent underrepresented racial and ethnic groups has increased.
- The number of staff members in the College who represent underrepresented racial and ethnic groups has increased.
- There are established University and College policies, goals and initiatives supporting diversity.
- The College Diversity and Inclusion Committee has provided structure and documentation to many of the College’s initiatives related to diversity.
- The Multicultural Public Health Student Association brings added focus to issues of diversity, inclusion, equity, and disparity among the student population.

Challenges/Weaknesses/Plans:

- The College has not achieved the desired level of some specific racial and ethnic groups among its faculty and staff.
- There is a need consistently to integrate representatives and recommendations from the Diversity and Inclusion Committee into College recruitment efforts for students, staff and faculty and other initiatives initiated by the administration or individual units.
- Comprehensive evaluation of the spectrum of diversity-related actions and activities is needed.

- The action plan includes focusing time and discussions involving the Diversity and Inclusion Committee with the Executive Committee during the 2016 autumn semester. The goal is to identify the best ways to more fully integrate the overall College's and Committee's plans and actions. Early in the semester, the committee will review its plan and progress in light of this overall need, and with a focus on evaluation in mind. Specific action steps will be identified for and incorporated into the 2016-2017 best practices.

2.0 INSTRUCTIONAL PROGRAMS

CRITERION 2.1 DEGREE OFFERINGS

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

2.1.a. An instructional matrix presenting all of the school's degree programs and areas of specialization. If multiple areas of specialization are available within departments or academic units shown on the matrix, these should be included. The matrix should distinguish between professional degrees, other professional degrees and academic degrees at the graduate level, should distinguish baccalaureate public health degrees from other baccalaureate degrees. The matrix must identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.1.

The College of Public Health offers two professional graduate degrees, the Master of Public Health (MPH) and the Master of Health Administration (MHA). The Master of Public Health (MPH) degree is offered with specializations in Biomedical Informatics, Biostatistics, Clinical Translational Science, Environmental Health Sciences, Epidemiology, Health Behavior and Health Promotion, Health Services Management and Policy, Veterinary Public Health, and a generalist Program for Experienced Professionals.

The College offers a Bachelor of Science in Public Health (BSPH) academic undergraduate degree with two interdisciplinary specializations: Environmental Public Health, and, Public Health Sociology. The Environmental Public Health and the Public Health Sociology specializations represent unique and strategic blends of public health courses (College of Public Health) and earth science and sociology courses (College of Arts & Sciences), respectively. The College also offers the Master of Science (MS) academic graduate degree with four specializations: Biostatistics, Biomedical Informatics, Environmental Health Sciences, and Epidemiology. In addition, the Doctor of Philosophy (PhD) academic graduate degree is offered with four specializations: Environmental Health Sciences, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy. An interdisciplinary PhD in Biostatistics is jointly administered by the College of Public Health (CPH) and the College of Arts and Sciences' Statistics Department.

In addition to the individual degrees discussed above, the College cooperates and collaborates with other units on campus to offer joint degrees. For joint degrees, the

2.1 Degree Offerings

University distinguishes between combined degrees (a graduate degree and a professional degree) and dual degrees (two graduate degrees, or, an undergraduate plus graduate degree). Listed here are only the combined and dual degrees for which there are formal programs established. Students may petition the Graduate Schools and virtually any two units within the University for other combined and dual degree options on a case-by-case basis. **Table 2.1.1** shows a list of all degrees and specializations offered by the College of Public Health.

Table 2.1.1 Professional and Academic Degrees Offered by the College

Degrees and Specializations	Academic	Professional
Bachelor Degrees:		
Interdisciplinary Environmental Public Health Specialization	BSPH	-
Interdisciplinary Public Health Sociology Specialization	BSPH	-
Master Degrees:		
Biostatistics	MS	MPH
Environmental Health Sciences	MS	MPH
Epidemiology	MS	MPH
Health Behavior and Health Promotion	-	MPH
Health Services Management and Policy	-	MPH, MHA
Interdisciplinary Biomedical Informatics	MS	MPH
Interdisciplinary Clinical Translational Science	-	MPH
Interdisciplinary Veterinary Public Health	-	MPH
Program for Experienced Professionals	-	MPH
Doctoral Degrees:		
Environmental Health Sciences	PhD	-
Epidemiology	PhD	-
Health Behavior and Health Promotion	PhD	-
Health Services Management and Policy	PhD	-
Interdisciplinary Doctoral Degree (Colleges Public Health and Arts & Sciences):		
Biostatistics	PhD	
Joint Degrees (Dual and Combined Degrees):		
(1) Combined Graduate and Professional Degrees		
College of Law	-	MHA/JD
College of Medicine	-	MPH/MD
College of Medicine	-	MHA/MD
College of Veterinary Medicine	-	MPH/DVM
(2) Dual Graduate Degrees		
College of Business		MHA/MBA
College of Public Policy	MPA	MHA
College of Social Work		MPH/MSW
(3) Dual Bachelor and Master Degrees		
Division of Environmental Health Sciences	BSPH	MPH
Division of Epidemiology	BSPH	MPH
Division of Health Behavior and Health Promotion	BSPH	MPH
College of Veterinary Medicine	BSPH	MPH

The College also offers two undergraduate minors: Global Public Health and Epidemiology. In addition, the College participates collaboratively with the other Health Sciences Colleges in offering a Graduate Interdisciplinary Specialization in Global Health that can be completed by graduate students in addition to their primary declared specialization. The College also has criteria that permit students

within a single degree program to complete dual specializations (e.g., an MPH degree with dual specializations in Biostatistics and Epidemiology).

2.1.b. The school bulletin or other official publication, which describes all curricula offered by the school for all degree programs identified in the instructional matrix, including a list of required courses and their course descriptions. The school bulletin or other official publication may be online, with appropriate links noted.

Ohio State discontinued the print publication of degree program bulletins in 2003. However, electronic access for listings of both University and College courses is available:

- Course Offerings Catalog 2016-17 (University)
http://registrar.osu.edu/scheduling/SchedulingContent/2015_2016_course_bulletin.pdf
- College of Public Health Course List
<http://cph.osu.edu/sites/default/files/students/docs/College%20of%20Public%20Health%20Course%20Bulletin%202015-2016.pdf>

The official statement of degree requirements and related information is found in the *College of Public Health Undergraduate Student Handbook*, the *College of Public Health Graduate Student Handbook*, and, individual degree program curriculum guides all posted to the College's Website <http://cph.osu.edu/> and found in the **eResource File**. Curriculum guides for the MPH professional degree specializations are also included in the **eResource File** under folder for Criterion 2.1.

The College's *Graduate Student Handbook* is a supplement to and extension of the University's *Graduate Student Handbook*, which has the established baseline general policies and procedures for graduate programs and students at Ohio State.

Most students now seek this information electronically, in part, because the online versions are more likely to incorporate the latest updated information. Sites for the most essential information include the following:

- *2016-17 College of Public Health Undergraduate Student Handbook*
<http://cph.osu.edu/sites/default/files/students/docs/15-16%20BSPH%20Handbook.pdf>
- *2016-17 College of Public Health Graduate Student Handbook*
<https://cph.osu.edu/sites/default/files/students/docs/2015-2016%20CPH%20Graduate%20Student%20Handbook.pdf>
- *2016-17 Graduate Student Handbook (OSU Graduate School)*
<http://www.gradsch.ohio-state.edu/Depo/PDF/Handbook.pdf>

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

Assessment:

- The OSU College of Public Health meets Criterion 2.1.

Strengths:

- The College has degree programs with specializations in all the required areas as well as additional programs important to its mission.
- Increased interest in public health from diverse constituencies throughout the University has led to many opportunities for collaboration, including interdisciplinary, dual, and combined degree programs.

Challenges/Weaknesses/Plans:

- Enrollments for some degree program specializations are lower than desired. This may reflect recruitment efforts that market all public health programs together. The College is exploring approaches to conduct some recruitment activities focused on specific specializations.

CRITERION 2.2 PROGRAM LENGTH

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

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

Effective fall 2012, the University converted from a quarter-based to a semester-based calendar and credit hour system. The University calendar distinguishes periods within the year for course delivery as autumn semester, spring semester, and summer term. Autumn and spring semesters each consist of 14-weeks of scheduled classes plus a week for scheduled final exams. The summer term compresses this into 12-weeks, with an option to compress courses further into four to eight week periods.

The University follows the Ohio Department of Higher Education guidelines for defining required classroom or equivalent instruction time: one semester credit equals 750 minutes of instruction per 14-week autumn or fall semester and 12-week summer term. In addition, time for outside study or homework is expected to be about twice the instruction time per week. Most courses required for the respective curricula within the College of Public Health are three semester credits each, which is equivalent to approximately 2,250 minutes of instruction time per course per semester or term.

Courses or modules offered in a nontraditional format, such as distance learning, require an equivalent amount of instruction time and assignments. The College has a full-time Instructional Developer, Margaret Murphy, MEd, who assists faculty with converting conventional classroom modules into distance learning modules. The College requires that any course proposed for teaching in any format that results in other than the traditional number of classroom hours must be specifically reviewed by the Undergraduate Studies Committee or Graduate Studies Committee for the adequacy of the compensatory activities and requirements. Academic credits from professional degree programs (e.g., Law; Medicine; Veterinary Medicine) proposed by students for inclusion in a public health graduate degree program, typically as an elective, must be reviewed for equivalency and approved by the appropriate division in the College of Public Health, the College's Graduate Studies Committee, and the Graduate School.

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

Both the MPH (including all eight specializations) and the more general MPH Program for Experienced Professionals require a minimum of 45 to 48 graduate semester credits. All students must complete the specified minimum number of credits for the respective specialization to earn the MPH professional graduate degree. Graduate credit reductions are not given for prior experience. Limited transfer credit from prior graduate work at other universities is possible pending review and approval by the College and the Graduate School, and must be equivalent to work at Ohio State University. Accepted transfer credit is most typically applied to elective course credits and may not exceed 20% of the credits required to earn the degree. Transfer of credits for core courses requires that the transfer courses are completed from a CEPH-accredited school or program.

The Graduate School at Ohio State University permits students to pursue joint degree programs. A combined degree program involves one graduate degree (e.g. professional MPH) and one clinical professional degree or undergraduate degree (e.g., MD; BSPH). A dual degree program involves completing two graduate degrees (e.g., MPH and MBA). Although there are unique features of the various combined and dual degree programs, the basic principle is that the student must apply to each degree program separately and be admitted to each. If a student applies to two degree programs and is admitted to only one, the student has the option to pursue that degree alone. Admission to any graduate or professional degree does not create the presumption of admission to other degree programs, since the admission criteria and competition may differ.

2.2.c. Information about the number of professional public health master's degrees awarded for fewer than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.

None of the professional or academic degrees offered can be earned with fewer than 42 credits. Indeed, depending on the specialization, the curricula for the MPH degree requires 45 to 48 credits. All graduates of the professional as well as the academic degree programs meet the minimum number of credits required. Students in combined (professional and graduate degrees, or undergraduate and graduate degrees) or dual (two graduate degrees,) programs may be permitted to count some overlapping credits toward both degrees, as explained in Criterion 2.11. This is done most often by applying courses from one program to meet elective course credits in the other program. The amount of such credit must be approved by the program, Graduate Studies Committee of the College and the Graduate School. In any case, the total number of credit hours applied to each degree must meet or exceed the stated minimum.

2.2.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.2.

Strengths:

- The required minimum 45-48 semester credits for the MPH professional graduate degree program offered by the College exceeds the minimum 42 semester credits. All graduates meet or exceed the minimum semester credit requirements at the time of graduation and exceptions are not granted for prior experience.

Challenges/Weaknesses:

- No challenges or weaknesses were identified.

CRITERION 2.3 PUBLIC HEALTH CORE KNOWLEDGE

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

2.3.a. Identification of the means by which the school assures that all professional degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program. See CEPH Data Template 2.3.1.

The MPH professional graduate degree curricula for the respective specializations incorporate public health core content mainly, but not exclusively, via five graduate courses required for all MPH students. The intent is to ensure that a broad foundation of public health education is provided, in alignment with core competencies. This foundation is universal to all the College's students graduating from the MPH degree program regardless of specialization.

The College developed the core courses by first establishing core competencies, then aligning course topics and objectives. Please refer to **Table 2.3.1** for the core course listing. For some of the specializations, an advanced version of the core course is offered for those students pursuing that specialization. For example, MPH students pursuing a degree with specialization in Environmental Health complete the core course PUBHEHS6315, Advanced Environmental Health, instead of PUBHEHS6310, Principles of Environmental Health, which is required for the other MPH degree specializations. In addition, to assist in registration, some of the core courses for the MPH Program for Experienced Professionals, which meets on weekends, uses a different numeric code for the last two numbers (e.g., 05 or 09 instead of 10). However, for these courses, the content and learning objectives are aligned with the same core competencies.

Table 2.3.1 Required Courses Addressing Public Health Core Knowledge Areas for the MPH Degree Specializations

Core Knowledge Areas	Course Numbers and Titles¹	Credits
Biostatistics	PUBHBIO 6210 Design/Analysis Studies in Health Sciences	3
Environmental Health Sciences	PUBHEHS 6310 Principles of Environmental Health Science	3
	PUBHEHS 6315 Advanced Environmental Health Science	3
Epidemiology	PUBHEPI 6410 Principles of Epidemiology	3
	PUBHEPI 6430 Epidemiology I and Lab	4
Social/Behavioral Sciences	PUBHHBP 6510 Preventing Disease/Promoting Health	3
Health Services Administration	PUBHHMP 6610 Introduction Health Care Organization	3
	PUBHHMP 6609 Health Care Org for Experienced Prof	3
	PUBHHMP 6611 Health Care Organization	3

¹List does not include the core courses required for the undergraduate BSPH academic degree.

The ten public health core competencies developed and adopted by the College and aligned with and addressed by the core courses follow:

1. Apply appropriate descriptive and inferential **statistical** techniques to public health data and interpret results of statistical analyses in the context of public health research and evaluation
2. Apply foundational principles of **environmental health science** to categorize sources and types of contaminants, matrices involved, pathways for and modes of exposure, associated health effects and societal issues, approaches to control, and major regulations
3. Apply **epidemiologic** principles to investigate the distribution of risk factors and disease in the population to improve public health
4. Apply evidence-based concepts of **health behavior and health promotion** to the design of public health messages and strategies
5. Discuss the major components of the U.S. health care system and be able to apply their understanding to examine **health policy and health program** issues
6. Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities
7. Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served
8. Apply the core functions of assessment, policy development, and assurance in the analysis of global public health problems and their solutions
9. Apply basic principles of ethical analysis to issues of public health practice and policy
10. Collaborate with multidisciplinary groups to recognize and evaluate public health issues and develop strategies for intervention

Each core course is taught by faculty members from the College Division that represents the core discipline. Matrices showing mapping of core competencies with core and specialization courses are in the **eResource File** for this criterion. Students must meet the specific academic performance expected in each core course as outlined in the *Student Handbook*. Course descriptions are provided via the electronic link below and included in all course syllabi also available in the **eResource File**.

- College of Public Health Courses:
<https://cph.osu.edu/sites/default/files/students/docs/College%20of%20Public%20Health%20Course%20Catalog.master.pdf>
- University Course Catalog Search:
https://courses.osu.edu/psp/csosuct/EMPLOYEE/PUB/c/COMMUNITY_ACCESS.OSR_CAT_SRCH.GBL

The College undertakes efforts to ensure that all applicable MPH professional graduate degree students are exposed academically to the required core content and evaluated accordingly. First, the academic administration reviews respective degree curricula and students' plans of study to guarantee inclusion of the required core courses. In addition, the respective Division and Program faculty members and the College's Graduate Studies Committee members review and approve each MPH degree core course syllabus to ensure that all topics and assignments are relevant to the applicable core competencies. Responsible faculty also map each course against a matrix to exhibit core course delivery and teaching modes (e.g., lecture, case-based, etc.) and student assignments and evaluation (e.g., readings, problem sets, exams, papers, etc.).

The core course knowledge areas are common for all students in each respective MPH professional graduate degree specialization offered by the College. Many of the other required and elective courses for each professional degree, regardless of specialization, also reinforce and strengthen the five core knowledge areas.

2.3.b. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.3.

Strengths:

- All students in the MPH professional graduate degree specializations complete a core course in each of the five areas of knowledge basic to public health.
- Public health core knowledge and related competencies are also aligned with several required public health specialization courses and capstone experiences, as well as some elective courses, in addition to the core courses.
- Faculty members from the respective core disciplines teach all core courses.

Challenges/Weaknesses/Plan:

- Results from a recent focus group involving students who completed both the undergraduate core courses for the BSPH degree and graduate core courses for the MPH degree indicated that there was undesirable overlap in some content, especially in the respective environmental health core courses PUBHEHS3310 and PUBHEHS6310. The Division made changes to the courses to address this problem. On the other hand, the same group reported as expected, that the rigor of the graduate-level core courses was greater than that of the undergraduate courses. The College will continue to monitor these issues via student surveys, student focus groups (i.e. 3+2 BSPH-MPH combined degree students), and faculty discussions to evaluate efforts to ensure there is negligible/minimal unnecessary redundancy between and among required undergraduate- and graduate-level courses and ensure that they differ in rigor appropriately to their level (i.e. 3000-level vs. 6000-level courses).

CRITERION 2.4 PRACTICAL SKILLS

All graduate professional degree public health 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.

2.4.a. Description of the school's policies and procedures regarding practice experiences, including the following:

(i) Selection of sites

(ii) Methods for approving preceptors

(iii) Opportunities for orientation and support of preceptors

(iv) Approaches for faculty supervision of students

(v) Means of evaluating student performance

(vi) Means of evaluating practice placement sites and preceptor qualifications

(vii) Criteria for waiving, altering or reducing the experience, if applicable

(i) Selection of sites

The College requires a formal practice placement (practicum) experience for all students in the MPH professional graduate degree program. For MPH students, a total of two graduate credits are earned for the practicum. A student's practicum experience must involve at least 120 hours, but most involve a higher number of hours. For example, during the period 2013-2015 the typical practicum averaged about 135 hours. Most students complete more than the minimum of 120 hours for a practicum. The College discussed the need for increasing the required minimum for the MPH degree to provide a broader experience for students to acquire and apply knowledge and skills. However, the Graduate Studies Committee decided not to implement changes at this time since the College's requirement is consistent with many top tier MPH programs in other accredited schools of public health and competencies are being met. In addition, the MPH students are not limited to the minimum number of practicum hours nor a single practicum experience. This topic will be revisited during 2017.

MPH students are active participants in arrangements for the practicum. In addition, the College's Office of Academic Programs and Student Services assists students in locating appropriate field sites and provides support throughout the experience. Students also consult with their advisors and other applicable faculty and staff. Staff promote practicum opportunities through the weekly student newsletter as well as the "Buckeye Careers Network" – a university system where employers can post internship, practicum, and job opportunities for students. Students are also encouraged to reach out to organizations on their own for opportunities, however these practicum experiences must be approved by their faculty advisor.

MPH students are encouraged to complete their practicum between the first and

2.4 Practical Skills

second academic years during summer term to allow maximum flexibility relative to time and location. However, the practicum can be completed during any term. Although most practicum experiences involve a single site, students have the option of completing a series of rotations at different sites, provided the experiences meet the required competencies and minimum time requirement. Students rarely use this option since most prefer a practicum with a single site. A brief description of the policies and procedures is included in this section of the self-study, with complete information available in the *College of Public Health Practicum Student Handbook*. A copy of the handbook is located in the **eResource File** for this criterion and it is available online at:

- *College of Public Health Practicum Student Handbook*
<http://cph.osu.edu/students/graduate/handbooks/cph-practicum-student-handbook>

The primary criterion for the selection of practice placement sites is the availability of appropriate professional public health practitioners willing to serve as preceptors and guide students through suitable projects or other applied experiences. Once an organization and qualified practitioner/preceptor are identified, other factors are considered, such as accessibility to the site (e.g., time and transportation) and the extent to which students will be able to have a high-quality experience in public health practice.

Traditional MPH students choose a practice placement consistent with their area of specialization. Although students in the MPH Program for Experienced Professionals (MPH-PEP) do not have a formal specialization, they are encouraged to select a practice placement in their primary area of interest. Traditional MPH students are generally not permitted to begin a practice placement until they have completed the equivalent of two semesters of full-time study, though exceptions may be granted pending approval by faculty advisors and the Assistant Director of the Office of Academic Programs and Student Services. The MPH-PEP students complete at least 20 semester credits, including all five of the core courses, before enrolling in a practice placement. The practice placement process for all MPH students is administered by the Office for Academic Programs and Student Services (OAPSS). The Assistant Director, Dawn Williams, MEd administratively directs and oversees all MPH practice placement assignments and also provides students with information on potential employment opportunities.

(ii) Methods for approving preceptors

The College has established long-standing relationships with many preceptors and organizations. In addition, each year new MPH practice placement preceptors are identified by the faculty based on their professional knowledge and personal contact with practitioners in the field, by students, and by OAPSS staff through an established network of relationships. Organizations are invited to provide descriptions of possible placement opportunities and preceptors. Regardless of how they are identified, all preceptors are reviewed carefully by OAPSS to assure that each student has an appropriate preceptor.

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The policies and procedures associated with the MPH degree practice placements are under the overall supervision of the Graduate Studies Committee, with implementation and operations handled by the Office of Academic Programs and Student Services (OAPSS). OAPSS assists students in identifying organizations and preceptors, works with faculty to assure that there is a learning agreement approved by both the preceptor and the faculty advisor, and follows up with all parties to assure that the student and the experience are thoroughly evaluated. The criteria for placement focus on the nature of the site, a qualified preceptor, and an experience aligned with two or more competencies.

(iii) Opportunities for orientation and support of preceptors

The OAPSS supports its preceptors in several ways. Some of the ways include providing them with a copy of the program's *Preceptor Handbook*, and a preceptor checklist, at the start of each semester they are working with students. This ensures that they are aware of all of the rules and regulations as it pertains to the practicum. In addition, throughout the students practicum experience the Assistant Director corresponds at least three times via email throughout the semester to remind preceptor of important dates as well as to ask if there are any issues, questions, concerns. A Webinar was also created to support new and returning preceptors. The Webinar was a collaboration with the College's Center for Public Health Practice, the University of Pittsburgh College of Public Health and Drexel University College of Public Health. The title was *Practice in Action* and the program had the following objectives:

1. List the expectations of an effective preceptor relative to the relationship between:
 - the academic institution and preceptor (interactions, reporting, etc.); and,
 - the student and preceptor.
2. Identify elements of an effective project relative to
 - theme, breadth, scope, and product; and,
 - real world examples.
3. Discuss common requirements of student practice placements relative to
 - hours required;
 - when/where projects usually occur; and,
 - compensation.

In addition to the Webinar, the College also created a digital video about the practicum process to educate current and potential preceptors on practicum-related items. The video is available online:

- College Video MPH Practicum:
<http://media.cph.ohio-state.edu/articulate/OAPSS/MPHPracticumOrientation/MPHPOFinal.html>

(iv) Approaches for faculty supervision of students

A faculty advisor with input from site preceptors develops and approves the learning agreement and also participates in evaluation of the practice placement. To

2.4 Practical Skills

establish a practicum, the faculty advisor discusses the specifics of the placement with the student, clarifies academic requirements, and delineates roles between adviser and preceptor. The faculty advisor role varies depending upon the nature of the practice placement and its location.

(v) Means of evaluating student performance

For the MPH practicum, the faculty advisor grades the student with input from the preceptor. Students are graded using *satisfactory* (S) or *unsatisfactory* (U) for their performance during their practicum. The minimum criteria for a student to earn a satisfactory grade for the practicum includes submission of a learning agreement, a log of activities, a final report, and positive evaluations from both the preceptor and the faculty advisor. Practicum evaluation forms are used for advisors and preceptors to assess the students and for students to evaluate their practicum experience. However, the Graduate Studies Committee developed and approved a new rubric for implementation during the 2015-16 academic year to collect a broader spectrum of information to better and more comprehensively examine the overall practicum experiences. In addition, access to evaluation forms is now improved from using emailed writeable files (pdf) to an online evaluation survey using Qualtrics™ software. Refer to the **eResource File** for this criterion for copies of the practicum rubric and evaluation forms.

(vi) Means of evaluating practice placement sites and preceptor qualifications

In order for an organization to qualify as an MPH practice placement site, it must be engaged in applicable public health work and activities. Students must align their objectives relative to both the specific activities associated with a site and a subset of applicable program competencies. Furthermore, the site must have qualified preceptors willing to work with MPH professional graduate degree students for a mutually beneficial experience. The qualifications and expectations of a preceptor include:

- expertise in the project area(s) assigned to the student;
- experience within the organization;
- time to supervise the student and facilitate learning;
- willingness to provide constructive feedback to the student;
- ability to provide support for the student's professional growth and development; and,
- ability to model appropriate behavior and attitudes.

(vii) Criteria for waiving, altering or reducing the experience, if applicable

MPH degree practicum experiences are never waived. Students are encouraged to complete practicum experiences at organizations or agencies external to the University. The College does not promote completion of practicum experiences within the College, except if for a Center that has outreach activity. Some students complete practicums at other units in the University, such as the Ohio State

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University Wexner Medical Center.

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

Lists of organizations and agencies and other relevant information regarding student practice placements for academic years 2013-14 through 2015-16 are located in the **eResource File** under this criterion. Student practice placements involve multiple sites and organizations and include sectors such as government agencies, health departments, industry, and health care.

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

During the past three years no MPH degree students have received a waiver of the practice experience. However, two students within the last three years who earned the MPH degree completed practicums in the College of Public Health, rather than a different unit from within the University or an external organization or agency. Instead, the two students completed applied research with two faculty members from the Division of Environmental Health Sciences serving as preceptors. These students were originally admitted as PhD students in Environmental Health Science and after matriculation requested to also complete the requirements for the MPH degree while completing the PhD curriculum. They each completed specialized field-/lab-based work that provided excellent practical experience applicable to their public health specializations. Nonetheless, the College does encourage or promote completion of practicum experiences exclusively from within the unit. These two cases occurred without being identified before completion.

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

Criterion 2.4.d is not applicable to the College of Public Health.

2.4.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.4.

Strengths:

- The College has established an excellent network of practice placement sites.
- The College primarily via its Office for Academic Programs and Student

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Services, but also with help from faculty members, offers very good support for helping students identify practice placement sites.

Challenges/Weaknesses/Plan:

- Growth in enrollment, especially with the addition of the BSPH degree, contributes to an increased workload placing students and monitoring student progress.
- More students are expressing interest in international placements, which are difficult to finance; however, some funds are available via the College and University.
- Most MPH professional degree students have completed the minimum number of course credits before beginning a practicum, however, due to timing of opportunities, some MPH-PEP degree students do not have the minimum 20 credits completed before beginning a practicum.
- There was an identified “leak” in the practicum placement process based on the two students who completed field- and laboratory-based practicums with faculty mentors in the College. Moving forward, faculty and applicable staff have been reminded not to approve these type of experiences to fulfill the MPH practicum experience requirements.

CRITERION 2.5 CULMINATING EXPERIENCE

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

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

The MPH professional graduate degree program requires a culminating experience under one of two options. One is the completion of a hypothesis-driven research-based thesis. This rarely chosen option may be encouraged for some qualified students who eventually intend to pursue a PhD degree. Most students, however, choose a scholarly alternative to the traditional research thesis. For MPH students, this is a culminating project, which may vary depending upon the student's field of specialization. Each specialization has created a set of guidelines for the culminating project. Samples of projects are available in the **eResource File** for this criterion. The options within the culminating project guidelines are not uniform across specializations, but include these typical choices:

- **Applied Research Project:** This is typically less formally structured than a traditional thesis and usually on a smaller scale or more preliminary in nature. It can also include program evaluations or similar practice-oriented research.
- **Grant Proposal:** This option can be either a proposal for a public health program or for a research project. Many MPH-PEP students select this option, partly because they are employed in settings in which one of these products may be immediately useful to employers.
- **Critical Literature Review:** Where this is permitted, the objective is for the student to master a body of literature and identify important issues and shortcomings.
- **Policy Analysis:** Principally for students in health services management and policy, this option requires students to critically analyze a policy proposal or to examine an area of policy interest and analyze the options for dealing with it.
- **Original Case Study:** Again primarily intended for health services management and policy students, this option requires the student to evaluate a decision or operational situation and prepare a critical analysis as a guide for improvement.

Culminating projects for the MPH degree require a formal oral or poster presentation, typically to the student's examination committee, which consists of the student's faculty advisor and one or two additional faculty members. In addition, there is a formal question and answer period involving the student and the primary

2.5 Culminating Experience

faculty advisor and another faculty member as a second reader. The final grade, based on the project, presentation, and question and answer period, is indicated by satisfactory (S) or unsatisfactory (U) and is reported to the Graduate School. During 2015, the College Graduate Studies Committee developed and approved an online rubric to more uniformly and consistently evaluate the culminating projects in alignment with select competencies. This was used in spring 2016 and determined to be another useful evaluation tool as part of the student learning component of the College's overall assessment process. The rubric has since been modified to further improve. A copy of the combined MPH culminating project, MS thesis and PhD dissertation rubric is located in the **eResource File**. Examples of culminating projects from each specialization are also located there.

MHA students complete the course PUBHHMP7631, Strategic Management and Program Development, as a culminating experience. This course is offered during the final semester of the program and requires that students complete a written business plan—developed for an actual health care organization— and an oral defense to peers, faculty and practitioners. Capstone projects require students to integrate content from their previous coursework, conduct extensive research, apply analytic and decision tools, and communicate effectively through a presentation and written deliverable. Project presentations are evaluated using a common evaluation tool.

2.5.b. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.5.

Strengths:

- All students complete a culminating experience, with options/variations approved by the Divisions and Programs overseeing the specializations.
- All culminating experiences align with select core and specialization-specific competencies.

Challenges/Weaknesses/Plan:

- Advising culminating experiences requires a substantial time commitment from faculty members to advise individual students and ensure that the student has a positive experience. During 2015-16, the College Graduate Studies Committee developed and approved criteria for group-based approaches with distinct subprojects for each student member to increase efficiency, but also foster cooperative group activity with each individual accountable for specific role.
- The format for culminating project proposals and final written projects was often inconsistent among students and specializations. During 2015-16, the College Graduate Studies Committee developed and approved more uniform formats for the proposals and final projects.

2.5 Culminating Experience

CRITERION 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. The school must identify competencies for graduate professional public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).

2.6.a. Identification of a set of core competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the school (e.g. one set each BSPH, MPH, DrPH).

Degree Program Core and Specialization Competencies

The respective curricula for the College's degrees and specializations were designed based on a set of competencies for each. The CEPH review conducted in 2009 determined that the College had only partially met the required competencies criterion. The review focused on the need to improve the competencies for the graduate degree programs and to restate learning objectives for some courses using more measurable action verbs rather than "know" or "understand." Using Bloom's taxonomy for guidance, College faculty members revised the competencies and learning objectives, which were then approved by the College's Graduate Studies Committee. A letter and document reflecting the revisions was submitted to CEPH as required in fall 2010 and subsequently approved by the Accreditation Council.

The public health degree program competencies are formally reviewed periodically, for example, during the University's quarter-to-semester calendar and credit hour system when courses and curricula needed to be adjusted in 2012. Most of the competencies listed below for the respective degrees and specializations, however, reflect the CEPH-approved competencies. There are some exceptions as needed where one or more competencies for a specialization was added/deleted/modified to ensure improved clarity and/or relevance to contemporary needs for the curricular content in relation to the profession, for examples. The most substantive change occurred a year ago when the College via its Graduate Studies Committee truncated the core competencies for the Master of Public Health (MPH) degree program. The respective core and specialization competencies for all the College's degree programs are listed in the pages that follow.

Core Competencies for the Bachelor of Science in Public Health

The Bachelor of Science in Public Health (BSPH) undergraduate degree curricula for the respective specializations are based on sets of core and specialized competencies. The BSPH degree offers two specializations that include the following **core competencies** . . . *All graduates of the BSPH degree program will be prepared to:*

1. summarize the historic milestones in public health;
2. compare and contrast examples of major domestic and international public health issues;
3. discuss approaches and strategies to identify, respond to and intervene with attempt to resolve common public health issues;
4. identify political, cultural, behavioral and socioeconomic factors related to global public health issues; and,
5. apply the fundamental principles of the five core disciplines of public health (biostatistics; environmental health; epidemiology; health administration; health behavior/promotion) to domestic and international population issues.

Core Competencies for the Master of Public Health

The Master of Public Health (MPH) professional graduate degree program offers eight specializations, plus, the Program for Experienced Professionals. **Core competencies** for all MPH follow . . . *All graduates of the MPH degree program will be prepared to:*

1. apply appropriate descriptive and inferential statistical techniques to public health data and interpret results of statistical analyses in the context of public health research and evaluation;
2. apply foundational principles of environmental health science to categorize sources and types of contaminants, matrices involved, pathways for and modes of exposure, associated health effects and societal issues, approaches to control, and major regulations;
3. apply epidemiologic principles to investigate the distribution of risk factors and disease in the population to improve public health;
4. apply evidence-based concepts of health behavior and health promotion to the design of public health messages and strategies;
5. discuss the major components of the U.S. health care system and be able to apply their understanding to examine health policy and health program issues;
6. demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities;
7. develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served;
8. apply the core functions of assessment, policy development, and assurance in the analysis of global public health problems and their solutions;
9. apply basic principles of ethical analysis to issues of public health practice and policy; and,
10. collaborate with multidisciplinary groups to recognize and evaluate public health issues and develop strategies for intervention

2.6.b. Identification of a set of competencies for each concentration, major or specialization (depending on the terminology used by the school) identified in the instructional matrix. The school must identify competencies for all degrees, including graduate public health professional degrees, graduate academic degrees, graduate other professional degrees, as well as baccalaureate public health degrees and other bachelor's degrees.

Bachelor of Science in Public Health (BSPH) Academic Degree

Goal: *BSPH degree graduates will have the knowledge and skills for: (1) early career, entry-level positions in public health agencies and other public or private organizations; and, (2) advanced study in graduate and professional degree programs.*

BSPH Degree Specialization in Environmental Public Health (collaborative with College of Arts & Sciences) - *In addition to the public health core competencies, graduates of the BSPH degree program with interdisciplinary specialization in **Environmental Public Health** will be prepared to:*

1. apply principles of math, chemistry, biology to applied science of environmental public health;
2. summarize major sources, hazardous agents, conditions, and other exposure factors that contribute to environmentally-related human diseases;
3. describe how quality of environmental media (air/ water/soil/food) are adversely affected by contamination from chemical, biological and physical agents;
4. apply theory to environmental public health issues identified within indoor/outdoor and occupational/non-occupational settings;
5. calculate, analyze and interpret fundamental statistical, epidemiological, and environmental monitoring/surveillance, and risk assessment data;
6. summarize management and technical measures and approaches that control human exposure to environmental contaminants;
7. identify regulations, policies, standards and guidelines applicable to the quality of air, water, soil and food and the prevention of environmentally-related human exposures and diseases;
8. write and communicate applicable scientific and technical summaries; and,

BSPH Degree Specialization in Public Health Sociology (collaborative with College of Arts and Sciences) - *In addition to the public health core competencies, graduates of the BSPH degree program with interdisciplinary specialization in **Public Health Sociology** will be prepared to:*

1. develop quantitative awareness of the multiple-scale, and multiple interactions that characterize public health problems;
2. summarize major factors that contribute to human disease and compromised quality of life.
3. apply theory to public health issues identified within contemporary society;
4. summarize issues of social inequality and environmental justice;
5. calculate, analyze and interpret fundamental statistical and epidemiological data;
6. communicate ideas and results that solve community-based public health problems;
7. summarize intervention and disease prevention strategies to sustain and improve quality of life;
8. write and communicate applicable case summaries;
9. seek employment for entry-level position and/or apply for advanced education and training in public health or related health discipline.

2.6 Required Competencies

Master of Public Health (MPH) Professional Degree

Goal: *MPH graduates will have the knowledge and skills for general and specialized applied public health practice, both in the public sector and in private sector careers related to population-based health.*

MPH Degree Specialization in Biostatistics - *Upon graduation, a successful student with an MPH degree specialization in Biostatistics should be able to:*

1. critique scientific research articles and assess the appropriateness of statistical applications involved;
2. describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met;
3. develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences; apply appropriate statistical techniques for analyzing public health-related data with specific characteristics;
4. collaborate with investigators in the design and analysis of data for public health related research;
5. describe basic concepts of probability, random variation and commonly used statistical probability distributions; and,
6. use standard statistical software for both data management and data analysis

MPH Degree Specialization in Biomedical Informatics (collaborative with College of Medicine) - *Upon graduation, a successful student with an MPH degree specialization in Biomedical Informatics should be able to:*

1. compare and contrast types of major domestic and international public health issues, including sources/causes of infectious/chronic diseases, transmission, risk factors, morbidity and mortality;
2. discuss various approaches/strategies for identification, response and intervention to address and attempt to resolve common public health issues;
3. identify genetic, social, political, cultural, behavioral, socioeconomic, demographic and ethical factors and relationships to domestic and international public health issues and determinants of health;
4. access data sources (e.g., databases) commonly used for biomedical informatics;
5. discuss core biomedical informatics theories, methods, and practice areas from individual and population-based perspectives;
6. interpret applicable research articles; and,
7. apply principles of ethics for professional practice and responsible conduct of research.

MPH Degree Specialization in Clinical Translational Science (collaborative with College of Medicine) - *Upon graduation, a successful student with an MPH degree specialization in Clinical translational Science should be able to:*

1. design a clinical investigation relevant to the student's field of clinical specialty, including the definition of study aims and objectives and the creation of an appropriate study design;
2. identify and employ data collection strategies and instruments appropriate to the student's field of clinical specialty;
3. select appropriate methods for the analysis of clinical research data;
4. collaboratively prepare a grant application to seek funding for a clinical investigation project;
5. use decision analysis and relevant evaluation methods to examine issues of appropriate implementation of treatments or technologies;
6. recognize ethical issues that are likely to arise in clinical investigations and the procedures for handling them appropriately;
7. apply ethical principles to the conduct of clinical investigations, with special emphasis on protection of research subjects; and,
8. prepare a manuscript suitable for publication and/or for reporting to a sponsor on the conduct and results of a clinical investigation.

2.6 Required Competencies

MPH Degree Specialization in Environmental Health Sciences - Upon graduation, a successful student with an MPH degree specialization in Environmental Health should be able to:

1. explain the significance of the community and workplace environment to public health;
2. outline the health challenges that natural and anthropogenic contaminants in the environment can pose to population health;
3. compare the fate, transport, and human uptake of chemical and biological agents;
4. explain the physiological factors that influence human exposure and the uptake of chemical and biological environmental agents;
5. critique and conduct human risk assessments;
6. identify and explain individual (e.g., genetic, physiologic and psychosocial) and community (e.g., social, built, economic, race) susceptibility factors that heighten the risk for populations for adverse health outcomes from environmental hazards;
7. define, recognize, and explain environmental justice and its significance as a public health issue;
8. use various risk management and risk communication approaches for environmental hazards;
9. summarize the underlying mechanisms of toxicity resulting from exposure to environmental agents;
10. describe federal and state regulatory programs, guidelines and authorities relevant to environmental and occupational health;
11. access state, federal, and local resources for assessing environmental and occupational health;
12. work with other public health disciplines (e.g., nurses, physicians, veterinarians, epidemiologists, biostatisticians) to address environmental and occupational health concerns.
13. compare the principle components and influencing factors in the exposure continuum from source to disease; and,
14. determine the role of exposure assessment in environmental and occupational health.

MPH Degree Specialization in Epidemiology - Upon graduation, a successful student with an MPH degree specialization in Epidemiology should be able to:

1. design a survey to examine a public health problem or for use in an epidemiologic investigation;
2. choose the correct analysis for data obtained from an epidemiologic investigation, including data from surveys, matched and unmatched case-control studies, cohort studies, and clinical trials;
3. analyze and interpret data obtained from an epidemiologic investigation, including data from surveys, matched and unmatched case-control studies, cohort studies, and clinical trials;
4. assess confounding and effect modification in data from an epidemiologic investigation;
5. demonstrate familiarity with the basic content and issues in at least two substantive areas of application in epidemiology (e.g., cardiovascular epidemiology, cancer epidemiology, chronic disease epidemiology, infectious disease epidemiology, injury epidemiology);
6. identify the natural histories of major types of disease and their relevance to epidemiologic investigations;
7. use appropriate computer software for the management and analysis of epidemiologic data;

MPH Degree Specialization in Health Behavior and Health Promotion - Upon graduation, a successful student with an MPH degree specialization in Health Promotion and Health Behavior should be able to:

1. explain the history, scope, and philosophical basis of public health education;
2. critically assess the evidence linking behavioral and psychosocial factors to health and illness;
3. apply behavioral and social science theory to the development and implementation of health promotion and disease prevention programs at multiple targets and different levels of intervention (intrapersonal, interpersonal, and community);
4. critically assess the scientific literature describing health promotion interventions;
5. assess and summarize the health-related needs and resources of a defined community;
6. identify mechanisms to secure funding, manage and administer health promotion and disease prevention programs so as to ensure optimal program delivery;
7. design and carry out process evaluation for the improvement of health promotion programs;

2.6 Required Competencies

8. collaboratively design and carry out outcome evaluations of health promotion programs;
9. apply ethical principles to the planning and evaluation of social and behavioral change efforts;
10. demonstrate cultural competency when planning health promotion and disease prevention activities;
11. recognize the importance of health literacy in creating and/or evaluating health promotion and disease prevention materials;
12. explain how health promotion efforts enable communities to influence their own well-being;
13. anticipate challenges and opportunities in working collaboratively with communities; and,
14. advocate for social and behavioral science intervention and policies.

MPH Degree Specialization in Health Services Management and Policy - *Upon graduation, a successful student with an MPH degree specialization in Health Services Management and Policy should be able to:*

1. summarize public policy processes related to health care, including the creation and implementation of policy and the political aspects of policy;
2. describe the types of health care financing methods used by state and federal agencies and private organizations and their implications for health services access, quality and cost;
3. describe the organization, governance, and management structure of typical public and private health care delivery systems in the U.S.;
4. apply techniques of budgeting and financial analysis related to health care delivery and public health programs;
5. apply organizational theories and management principles appropriate for managing in health care delivery and public health settings;
6. identify key principles involved in leading and sustaining organizational change;
7. apply basic principles of ethical analysis to issues related to management and health policy in communities and organizational settings;
8. use relevant economic principles to analyze the structure, management, and performance of organizations and the health system; and,
9. communicate effectively with diverse constituencies, both within and external to health services organizations.

MPH Degree Program for Experienced Professionals - *Upon graduation, a successful student with an MPH Program for Experienced Professionals should be able to:*

1. discuss key themes and events in the history and development of public health.
2. apply basic management concepts to plan, organize, lead, and motivate workers in a public health setting;
3. demonstrate team-building, negotiation, and conflict management skills;
4. design and implement process and outcome evaluations of public health interventions;
5. develop and present a budget for a public health program;
6. participate effectively in the public and organizational policy process, including the creation and implementation of policy and the political aspects of policy;
7. communicate effectively with a variety of constituencies, internal and external to the organization or agency, and serve as an advocate for public health;
8. collaborate with diverse partners to accomplish organizational and community goals;
9. conduct simple analyses with an appropriate statistical data analysis package; and,
10. maintain values that are appropriate and relevant to the profession and to the communities and settings in which they work.

MPH Degree Specialization in Veterinary Public Health (collaborative with College of Veterinary Medicine)- *Upon graduation, a successful student with an MPH degree specialization in Veterinary Public Health should be able to:*

1. describe common zoonotic and foodborne infectious diseases, with respect to their etiology and epidemiology especially those classified as reportable, bioterrorism threats, or have a major impact on public health and/or agriculture;
2. identify the major pathways for transmission of zoonotic agents and foodborne hazards to humans, as well as the reservoirs for many common pathogens;
3. use methods and instruments for collecting and transporting valid and reliable samples, determine the appropriate diagnostic technique for human, animal, arthropod, food product, and/or environmental specimens, and provide an accurate interpretation of the results;
4. identify methods and programs utilized to prevent, control and/or eradicate zoonotic and foodborne diseases, including pre- and post-harvest intervention programs;
5. evaluate the integrity of emergency preparedness programs, including biosecurity, biocontainment, and natural disaster response plans;
6. review and apply methods for planning, initiating and conducting case and outbreak investigations of zoonotic and foodborne diseases;
7. recognize applicable regulations and laws governing zoonotic diseases, food safety and security, or foreign animal diseases, and the agencies with authority to enforce these laws;
8. define the role of epidemiology in maintaining human and animal health; and identify strategies in the design and conduct of surveillance, monitoring, and epidemiological studies that assess the prevalence and distribution of zoonotic and foodborne diseases;
9. identify the strengths and limitations of different study designs (e.g., limitations of data sources, importance of observations and interrelationships) and recognize how to apply this information when collecting and analyzing epidemiological data;
10. apply appropriate statistical methods and procedures to analyze and interpret public health and veterinary related data;
11. analyze approaches for assessing and controlling environmental and biological agents and strategies for reducing risks to human and animal health, especially in agricultural settings.
12. critically evaluate and interpret technical and confidential case reports, scientific publications, and different sources of information;
13. prepare summaries, reports and presentations covering important veterinary public health related topics to different target audiences;
14. conduct comprehensive literature reviews of the scientific evidence related to a veterinary public health issue, concern, or intervention;
15. collaborate and network within interdisciplinary groups to identify, evaluate, and communicate veterinary public health concerns; and,
16. use individual, team, and organizational learning opportunities for personal and professional development.

Master of Health Administration (MHA) Professional Degree

Goal: *MHA graduates will have the knowledge and skills for management and policy positions in health services careers.*

Upon graduation, a successful student with an MHA degree specialization in Health Administration should be able to do the following:

1. **Organizational Management.** Assess opportunities to improve health services organizations through application of organizational theories and organization development principles
2. **Organizational Structure and Governance.** Analyze how organizational and environmental factors shape the structure of health care organizations and the roles, responsibilities and influence of governing bodies.
3. **Workforce and Organizational Development.** Apply methods and techniques for organizational, employee, and professional staff development that ensure a diverse and high performing work force.

2.6 Required Competencies

4. Operations Assessment and Improvement. Use systems-thinking and analytic methods to assess operations performance and improve organizational processes.
5. Clinical Quality Assessment and improvement. Apply principles of quality improvement in the context of clinical performance.
6. Information Technology Management and Assessment. Analyze the value, risks and opportunities of information technology and associated data for improving performance of health organizations and the broader health system.
7. Strategic and Business Planning. Perform environmental, market, and community needs analyses, develop strategic alternatives, formulate strategic goals, and develop programs, business plans, and implementation strategies to support goal achievement.
8. Financial Management. Explain financial and accounting information, prepare and manage budgets, and evaluate investment decisions.
9. Economic Analysis. Analyze and apply economic theory and concepts for decision-making.
10. Health Care Issues and Trends. Explain important issues in health care, including circumstances causing major changes and reform in U.S. health care delivery.
11. Health Policy. Describe the public policy process related to health care, including the creation and implementation of policy and the political aspects of policy and articulate the impact on the delivery of health services.
12. Health Care Legal Principles. Recognize legal issues that may arise in health care delivery and business settings and respond appropriately
13. Population Health. Use epidemiological, market, patient outcome, and organizational performance data to improve quality, and manage financial and other risks associated with defined populations.
14. Leadership and Change Management. Develop effective leadership approaches to communicate a vision, motivate stakeholders, build consensus, and lead organizational change efforts.
15. Impact and Influence. Shape opinions, processes, or outcomes through example, persuasive communication, or use of informal power
16. Professional Development. Demonstrate a commitment to continuous learning and self-improvement through reflection, goal setting, self-assessment, and the cultivation of professional networks.
17. Collaboration and Working in Teams. Work cooperatively with others, create, participate on, and lead teams, including inter-professional.
18. Personal and Professional Ethics. Adhere to ethical business principles and exhibit ethical behaviors; fulfill one's commitments.
19. Critical Thinking. Evaluate a situation, issue, or idea by understanding and challenging assumptions, considering competing points of view, and anticipating potential effects within and beyond the health care system.
20. Written and Verbal Communication Skills. Speak and write in a clear, logical manner and prepare effective business communications.
21. Quantitative Skills. Analyze data and interpret quantitative information for organization decision making.
22. Project Management. Design, plan, implement, and assess projects and develop appropriate timelines related to performance, structure and outcomes.
23. Performance Measurement. Identify and use data within organizations to improve performance.
24. Problem-Solving and Decision-Making. Use multiple methods and sources to seek comprehensive information, generate creative new solutions—or adapt previous solutions—and apply structured decision-making techniques and tools to address health care questions

Master of Science (MS) MS Academic Degree

Goal: *MS graduates will have the knowledge and skills to participate in basic and applied research and have the foundation to enter into a research-oriented career.*

The Master of Science (MS) degree is currently offered in Biomedical Informatics, Biostatistics, Environmental Health Sciences, and Epidemiology. Students in the MS degree program are expected to meet public health competencies required for the MPH degree in their area of specialization, but not necessarily all those oriented primarily to core professional practice. In addition, given the academic nature of the MS degree, *upon graduation, successful students are expected to be able to:*

1. read the scientific literature in the student's field and critique the methods and results;
2. conduct literature reviews to evaluate the state of the science regarding specific topics;
3. identify an unanswered research question, formulate a hypothesis, and design a research study;
4. write a research proposal;
5. conduct a research study;
6. evaluate research data and prepare a report summarizing the data, interpreting the statistical results, and presenting the findings, limitations and conclusions; and,
7. present and explain the study's purpose, methods, results and conclusions to an informed audience.

Doctor of Philosophy (PhD) Academic Degree

Goal: *PhD graduates will have the knowledge and skills to design and conduct independent high quality research and communicate complex information in public health.*

The Doctor of Philosophy (PhD) degree offered solely by the College currently has specializations in Environmental Health Sciences, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy. Students in the PhD degree program are expected to meet public health competencies required for the MPH degree in their area of specialization and at an advanced level, but not necessarily those oriented primarily to core professional practice. In addition, given the advanced academic nature of the PhD degree, *upon graduation, successful students are expected to be able to:*

1. conduct thorough literature reviews to summarize and evaluate the state of the science regarding new topics in the student's general area or specialization;
2. identify gaps in that literature and formulate research questions designed to address those gaps;
3. formulate hypotheses and design a research study using the appropriate research methods and approaches;
4. prepare a research proposal to address the research question, with particular attention to study design; subject selection; measurement of variables; methods for sample size determination, data collection, data management and data analysis; and interpretation of results;
5. apply relevant theories and conceptual models to inform and ground research and data analysis.
6. conduct a research study;
7. analyze research data and prepare a publishable manuscript summarizing the results and interpreting the findings; and,
8. communicate orally and in writing a research study's purpose, methods, results and conclusions to an informed audience.

2.6 Required Competencies

The College also offers an interdisciplinary PhD in Biostatistics in collaboration with the College of Arts and Sciences' Department of Statistics. This program is administered through the joint Biostatistics Faculty and its own Graduate Studies Committee, including faculty members from both CPH's Division of Biostatistics and the Statistics Department. *Upon graduation, successful students are expected to be able to:*

1. understand the theoretical foundations of statistical methods;
2. critique general scientific research articles and assess the appropriateness of the statistical applications and methodology involved;
3. work effectively and collaboratively in a team on a biological or health-related scientific question;
4. design biological or health-related research studies and construct and implement statistical analysis plans appropriate for such studies;
5. communicate the results of statistical analyses to statistical and non-statistical audiences;
6. conduct thorough literature reviews to summarize, evaluate and critique the state of the science regarding new topics in the student's general area of specialization;
7. identify gaps in that literature and formulate research questions designed to address those gaps; and,
8. carry out a research project that makes a contribution to biostatistical methodology and/or practice.

2.6.c. A matrix that identifies the learning experiences (e.g. specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies in Criteria 2.6.a. and 2.6b. are met. If these are common across the school, a single matrix for each program will suffice. If they vary, sufficient information must be provided to assess compliance by each degree and concentration. See CEPH Data Template 2.6.1.

To document alignment of core and specialization as well as degree-specific competencies with all components of the respective curricula, numerous matrices were developed and mapping was conducted. The categories of these matrices for mapping follow:

- Core Courses vs. Core and Specialization Competencies
- Specialization Courses vs. Core and Specialization Competencies
- Core and Specialization Courses vs. Course Delivery and Student Evaluation Modes
- Course Topics vs. Core and Specialization Competencies
- Course Learning Objectives vs. Core and Specialization Competencies
- Core and Specialization Competencies vs. Student Evaluation Modes

The respective matrices showing the mapping and demonstrating alignment are located in the **eResource File** for this criterion.

The professional and academic degree curricula consist of didactic and laboratory courses as well as capstone experience, such as practicum, scholarly project, research thesis, or research dissertation. These curricula are designed to deliver content and provide experiences that allow students to meet the core and

specialization competencies of their programs. Faculty establish learning objectives aligned with these competencies for the required core and specialization courses. Each didactic course requires a syllabus standardized by the College that includes the course description, course learning objectives, and the applicable degree program competencies. Instructors specify course topics, readings, assignments, etc. and align these with the course learning objectives. The syllabus for each course is reviewed, revised and approved at program and Division faculty meetings and at either the Undergraduate or Graduate Studies Committees before it is released to the University curriculum portal. The Senior Associate Dean for Academic Affairs in the College and various committees at the University level (depending on the type of course) then review the syllabus. The University's Office of Academic Affairs and the University Registrar issue final approval. This approval process can take as much as one year to complete and ensures that students are well-informed regarding curricular requirements, course purpose, course learning objectives, course content, and program competencies. To this end, the syllabus clearly states assignments and other modes of assessment (e.g., problem sets, case studies, presentations, exams, practicum, etc.) and the respective weighting toward a final grade.

Beyond these activities, the MHA program measures student competency through a self-assessment that is implemented at four points – prior to starting the program, at the end of the first year, at the end of the summer residency (practice placement) and then upon graduation. At the program level, these results are used by the program director and faculty to identify improvement opportunities and inform dialogue regarding the curriculum. Recognizing the limitation of self-assessment, the program has developed a more robust process to assess individual competency attainment at the course-level and in the practice-placements.

2.6.d. An analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of the observations and analysis, such changes should be described.

A review of the matrices and mapped parameters demonstrate that degree program competencies are aligned with the academic components (i.e. courses; capstones) of respective curricula, and all competencies are addressed by one or more of the components. In relation, all competencies are linked to several evaluation modes within didactic courses and the other curricular requirements. Course syllabi include lists of core and specialization competencies that course topics and objectives align.

During phases of the self-study process, the College determined that its MPH professional degree core competencies for the five core knowledge areas of public health were somewhat redundant and that the number of competencies should be reduced. During 2014, faculty mapped the core course topics and learning objectives to confirm that all competencies were addressed and to determine if there was excessive overlap between or among the core courses. The College's Graduate Studies Committee took up the issue of redundancy among competencies

and led the effort to modify them. These changes to the MPH degree core competencies were approved by the College effective September 2015. Some changes were also made to the respective curricula for the MPH-PEP and MHA degree programs based on emerging changes in population health and health care. Formal implementation of the changes to the MPH-PEP degree program will occur in summer 2017.

2.6.e. Description of the manner in which competencies are developed, used and made available to students.

The professional and academic degree programs developed and offered by the College of Public Health are aligned with the respective Missions of the University and the College. There is a primary overarching goal for the MPH and MHA professional degree programs, as well as for each of the BSPH, MS, and PhD academic degree programs. The respective goal for each professional and academic program constitutes what graduates will be prepared to do at the time of graduation by virtue of the cumulative knowledge and skill acquired while they completed all curricular requirements.

In addition to the respective degree goals, the College establishes and communicates program core and specialization competencies for each undergraduate and graduate degree and designated specialization. The core and specialization competencies also reference the knowledge, skills and attitudes students should have, and what they should be prepared to do at the time of graduation. The competencies, however, are more detailed and specific than the respective overall degree program goals.

The primary, but not sole, sources of the core and specialization competencies for the professional and academic degrees is the Association of Schools and Programs of Public Health and the applicable accreditation organizations (i.e., CEPH; CAHME). Competency specification is also influenced by other sources, including related professional organizations (e.g., Institute of Medicine, Council on Linkages, etc.); interactions with external stakeholders, such as employers, students, and alumni; and relevant governmental standards or professional guidelines and practices. The respective goals and competencies are organized by the degrees and specializations presented earlier in this section.

College faculty members, through their respective Divisions and Programs, review the competencies to ensure they remain relevant to current and emerging needs and issues. Changes are formally approved by the College's Undergraduate Studies Committee for the BSPH degree and the Graduate Studies Committee for the professional and academic graduate degrees. Both Committees have a broad mix of faculty and student representation for reviews, recommendations and approvals.

The College undertook its most substantial reviews of and changes to the core and specialization competencies for the graduate-level professional and academic

2.6 Required Competencies

degrees during the period 2009-2010. This occurred in response to the 2009 CEPH accreditation review which advised that competencies be more clearly stated. The CEPH Accreditation Council reviewed and approved these changes, which were submitted in a 2010 report. The College carefully reviewed core and specialization competencies again during the period 2010 to 2012, when the College modified its degree curricula in response to a State mandate for universities to convert from a quarter- to a semester-based calendar. At that time there were only very minor modifications to some competencies.

New competencies were developed when the BSPH degree and the Biomedical Informatics specializations for the MPH and MS degrees were established. These, too, were reviewed and approved by the CEPH Accreditation Council following College submission of substantive change reports. When the College's self-study process for the 2016 CEPH extended accreditation review was formally initiated in 2014, faculty again made a comprehensive review of competencies. This effort led to the substantive change of graduate-level core competencies implemented in 2015. The faculty had concluded that there were too many core competencies and that they were too specific. Accordingly, the number of core competencies was reduced to ten, combining what were originally more numerous core and cross-cutting competencies. This effort was positively reinforced in the July 2015 CEPH workshop where it was noted that fewer and more succinctly stated core competencies were preferable.

All required core and specialization-specific course syllabi for the College's professional and academic degrees include the applicable core and specialization competencies. Faculty and staff first direct students to the competencies listed in the student handbook during orientation at the start of their degree programs; this is repeated throughout their matriculation. The competencies covered in each course are listed on the syllabus and faculty make it clear to students that course topics and learning objectives, as well as other program elements such as the practicum and culminating projects, are aligned with specific core and specialization competencies.

As part of the College's overall self-study, it has acknowledged the more dramatic changes recommended in individual *Framing the Future* reports from the ASPPH workgroups. The Senior Associate Dean was a member of the ASPPH workgroup for the MPH and is leading this effort. In addition, it has identified benefits to increasing interdisciplinary programs with other units at the University in accordance with the College's *2015-2017 Strategic Plan*. For example, although existing MPH degree core and specialization competencies align relatively well with much of *Framing the Future : A Master of Public Health Degree for the 21st Century*, the College has begun to consider efforts to promote stronger alignment, continuous quality improvement, and altered core curriculum structure and delivery. However, given the timing of the current self-study for submission to and review by CEPH during 2016, additional substantive changes will not likely be implemented until the period 2017 through 2019.

2.6.f. Description of the manner in which the school periodically assesses changing practice or research needs and uses this information to establish the competencies for its educational programs.

An overarching goal for the College's professional and academic degrees and minor programs is to ensure that competencies, courses and curricula are aligned with current and emergent issues identified through informal and formal needs assessments. The College faculty ensures that the competencies and related curricula for each degree and specialization reflect the skills and knowledge required to qualify students for entry into the workforce and/or advanced education and training. The BSPH, MPH and MHA degree programs focus primarily, but not exclusively, on the needs for applied practice. The MS and PhD programs are more closely aligned with current and emerging research needs. The College ensures this concordance with the field through both informal and formal activities. For example, faculty familiarize themselves with current issues and prioritized topics at relevant governmental regulatory and funding organizations (e.g. CDC; NIH) and professional associations (e.g. ASPPH; discipline-specific associations). Various internal stakeholders (e.g., via student annual surveys and graduate exit surveys) as well as external stakeholders (e.g., via needs assessment data gathered by the Center for Public Health Practice) also contribute to this process.

2.6.g. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans concerning this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.6.

Strengths:

- An ongoing iterative process involving faculty, students and others influences development and revision of core and specialization competencies for the College's professional and academic degree programs.
- The content of all course syllabi and the rubrics for capstone experiences (i.e., practicums; projects) are designed to demonstrate a relationship to select core and specialization competencies.

Challenges/Weaknesses/Plans:

- The process is not perfect and some faculty members struggle remembering to keep syllabi updated with all current competencies. Discussions and release of resources to improve are ongoing.
- The College has begun formal discussions regarding changes to competencies and curricula for some of the degree programs in view of reports such as ASPPH *Framing the Future*, the need to better prepare students for future needs and demands, as well as, anticipated changes to CEPH criteria likely released during 2016.

2.6 Required Competencies

CRITERION 2.7 ASSESSMENT PROCEDURES

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

2.7.a. Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for attaining competency attainment in practice or research, as applicable, and in culminating experiences.

Overall College Assessment

The College's overall assessment process uses various evaluation tools and covers administrative, programmatic and student focused components. Administrative and programmatic assessment focuses on various activities and initiatives and the outcome measures used to gauge associated impacts and effectiveness. The student focused assessment encompasses general admission, retention, graduation, and post-graduation related activities, as well as, much emphasis on activities associated with student learning.

The process involves collecting, organizing, interpreting, summarizing and reporting quantitative and qualitative outcome measurement data relative to various goals and initiatives established by the College. In turn, these outcome measurement data, generated from the respective evaluation approaches and efforts, are compared to established target metrics.

Most of the goals, initiatives and target metrics are directly from the College's *Strategic Plan*. Many of the target metrics associated with the goals and initiatives are aspirational and, accordingly, not all comparisons of outcome measures to the applicable target metrics are used as indications of success or failure to achieve. Instead, these data are important to help guide and measure the progress and/or affirm the status of the College relative to its overall mission. However, some target metrics must be met (or exceeded) since they are based, for example, on University and College policies (i.e. faculty appointment, promotion and tenure; admission and graduation requirements) and other established policies and criteria (i.e. CEPH and CAHME accreditations).

Regardless of target metrics being categorized as aspirational or mandatory, when outcome measurement data do not meet the metrics action plans are established by appropriate units within the College to determine and summarize what needs to be conducted, continued and/or adjusted to eventually sustain meeting achievable metrics. Examples of units that are involved include, but are not limited to, Divisions and program groups/committees; other College-level committees such as Executive, Graduate Studies, Undergraduate Studies, and Diversity and Inclusion Committees;

2.7 Assessment Procedures

and, various offices such as the Office for Research and the Office for Academic Programs and Student Services. Thus, the assessment process includes a variety of groups and a coordinated cycle of activities for the purposes of quality assurance, quality improvement, and quality control. Table 1.2.2 in Criterion 1.2 represents a composite of the majority of the College's major goals, initiatives, target metrics and outcome measures.

Student Assessment

Student assessment is a major component of the College's overall assessment process. The stepwise student assessment component involves developing, adopting and implementing:

- admission, retention and graduation policies and criteria;
- degree program curricula aligned with knowledge-, skill-, and/or attitude-based student learning outcomes in the form of program competencies, as listed in Criteria 2.3 and 2.6;
- evaluation tools for direct and indirect measures of both qualitative and quantitative data, as listed in Table 2.7.1;
- schedules, guidelines and/or policies for conducting the evaluations to collect data, organizing/analyzing/interpreting the data, and, summarizing/reporting/sharing the data; and,
- identifying challenges, weaknesses and/or indicators that competencies and other expectations are not being met to the extent required or expected.

Table 2.7.1 Direct and Indirect Measures for Evaluation and Assessment¹

Direct Measures	Indirect Measures
<ul style="list-style-type: none"> • Case Studies • Problem Sets • Presentations (oral and poster) • Papers • Quizzes • Exams (written and oral) • Portfolios • Cumulative Course Performance • Capstone Practice Rubric • Capstone Project, Thesis, Dissertation Rubric 	<ul style="list-style-type: none"> • Admission Rubrics and Summaries • Survey Year 1 Students • Survey Graduating Students • Survey Alumni • Survey Preceptors/Employers • Focus Groups Preceptors • Time-to-Degree • Retention and Graduation Rates • Employment and Continued Advanced Education

¹Numerous survey forms, evaluation forms, rubrics, and matrices used for assessment activities are located in the eResource file.

Student Admission, Retention and Graduation

Student assessment involves numerous evaluation tools, and the process begins with faculty review and approval of applications for admission into the undergraduate and graduate degree programs. Faculty admission committee members use admission rubrics to summarize applicant credentials, including prior education and

performance. At a minimum, applicants' undergraduate preparation must be deemed acceptable based on completion of a bachelor degree with required foundational courses, as well as, positive letters of recommendation and an acceptable applicant letter of interest. Applicants must also meet minimum grade point average (GPA) and applicable standardized test (e.g., GRE, TOEFL) scores.

Faculty and staff advise and track matriculated students through their respective undergraduate and graduate degree program curricula to ensure that they meet all retention and graduation requirements. Enrolled undergraduate students are expected to maintain a minimum GPA of 2.8/4.0. Graduate students are expected to earn grades of B or better for didactic courses and "S" for research courses (i.e., culminating project, thesis, dissertation). A minimum GPA of 3.0/4.0 is required to remain in good academic standing and to graduate. Reports are run by the Office for Academic Programs and Students Services to review undergraduate and graduate student performance at least annually., The College's Undergraduate Studies Committee, Graduate Studies Committee, and respective Division Chairs as well as the Senior Associate Dean for Academic Affairs also monitor student performance.

Program and Course Development with Foundation for Assessment

Curricula, consisting of didactic and laboratory courses plus a capstone experience, such as, practicum, internship, research experience, field experience (study abroad), scholarly project, research thesis, or research dissertation are designed to deliver content and provide experiences that allow students to meet all requisite competencies. Faculty members establish learning objectives for required core and specialization courses, and these also align with the degree program competencies.

Each didactic course requires a syllabus standardized by the College that includes the course description, course learning objectives, specific degree program competencies, and schedule of topics and assignments. Instructors specify the course topics, readings, assignments, etc. and align them with the course learning objectives. The syllabus for each course is reviewed, revised and approved at the College's program- and Division-levels, as well as either the Undergraduate or Graduate Studies Committee before release to the Graduate School (graduate-level courses and curricula) and OAA (both undergraduate- and graduate-level courses and curricula) through the University's electronic curriculum portal. The process required for development and approval of syllabi ensures that students are well-informed regarding curricular requirements, course purpose, course learning objectives, course content, and program competencies. The College website features required courses addressed to core and specialization competencies. Further, syllabi clearly describe the assignments and other modes of student evaluation for assessment of competency.

Student Performance in Didactic and Capstone Courses

Each element of the respective degree program curricula requires evaluation tools for determining if students have achieved their learning objectives. Faculty and others deliver curricular teaching and learning content through a combination of didactic and capstone (e.g., scholarly/research; practicum) courses. The College maps the courses for each curriculum against required degree program competencies using matrices to document that students are exposed to the essential information and experiences to achieve the knowledge, skills and attitudes required at the time of graduation. Each course contributes to students' acquisition of the necessary knowledge, skills and attitudes for professional practice or continuing studies. The collective course learning objectives comport with the degree program competencies.

The specific modes and criteria for evaluating student performance in didactic courses are stated in the respective syllabi. Various modes are used and left mostly to the discretion of the course directors. However, program, Division, and Undergraduate Studies and Graduate Studies Committees also provide input when syllabi are reviewed and approved.

Fewer, more specific modes, are used for measuring performance of students in capstone courses. Undergraduate pre-Capstone students complete assessments (quizzes, CITI training, resume reviews, etc.) to ensure their readiness to pursue Capstone experiences. Student practicum experiences (MPH) and internship/research/field experiences (BSPH) require a learning agreement showing the specific objectives and related applicable competencies that will be addressed. Student performance is evaluated based on a completed log plus a report (MPH) or poster (BSPH). In addition, overall performance is documented by the preceptor/supervisor from the practicum organization/site (BSPH; MPH). For the capstone research courses (i.e., culminating project, thesis, dissertation), students are evaluated based on the document (i.e., poster, paper, thesis, dissertation), presentation and examination/defense. Graduate faculty members' also evaluate doctoral students based on PhD qualifying and candidacy exams.

Relative to capstones for their respective degree programs, students are evaluated as part of the assessment process, as follows:

- BSPH students: when they complete either a practicum, a research project or a field experience.
- MPH students: when they complete the culminating project and related presentation, and, the practicum.
- MS students: when they complete the thesis, oral presentation and defense.
- Doctoral students: when they complete the dissertation, oral presentation, and defense.

To further improve the assessment process, the College via its Graduate Studies Committee developed two additional evaluation tools in the form of rubrics for

(i) MPH Culminating Projects, MS Theses, and PhD Dissertations; and, (ii) MPH Practicum. The purpose of these rubrics, implemented in spring 2016, is to further document and improve faculty advisor and research committee evaluations of competency-based student performance in the required capstone components (i.e. project; practicum) of respective degree curricula. In relation, the student assessment process was expanded to include summative data reflective of outcome measures from the respective rubrics in alignment with select competencies.

Student Performance in Online/Hybrid Courses

Plan for Improved Assessment of Student Learning

The College of Public Health utilizes Carmen (Canvas), the University-approved learning management system (LMS), to support all distance education. There are several tools within Carmen (Canvas) that can be employed to collect data on student achievement of competencies and mastery of concepts.

As the University transitions to this new LMS, the College of Public Health is developing a process that will allow the administration and faculty to take full advantage of the data on student progress that Carmen (Canvas) automatically collects. The goal is to establish a standardized way to track students' progress as measured by pedagogical goals or desired outcomes. Mapping this alignment will allow faculty to improve and expand direct measurement student competency achievement at the course assignment level, and will provide improved valuable insight into the effectiveness of a course as a whole in helping students achieve learning goals. Steps in the process include:

- use the Outcomes tool in Carmen (canvas) to create learning outcomes
- align these outcomes with rubrics
- link rubrics to assignments
- grade assignment using rubrics
- review grading information and data related to student's level of mastery for those outcomes.
- determine current, calculated levels of mastery at which each student resides for each learning outcome.
- identify the specific skills or concepts students are mastering or not.

Training on how to do these tasks will be provided to all faculty late fall 2016 and/or early spring 2017.

Exit, Alumni and Employer Surveys

The College conducts undergraduate and graduate student exit surveys, alumni surveys and employer surveys to determine perceptions about meeting curricular requirements and/or competencies and work-related preparation and performance. Survey forms are located in the **eResource File**.

Use of Assessment Data

Assessment measures the performance and success of students, but also of the programs and related operations. The College uses the data on an ongoing basis to affirm what is working well and to improve matters of justifiable concern. Staff present annual summaries of data from undergraduate and graduate student reviews and various surveys to College administrators, faculty and staff. As part of this self-study, the College determined that the distribution of assessment results must be expanded and shared with students who do not serve on College committees. This practice was first implemented in August 2015 during orientation for continuing students. The appropriate program, Division and/or Committee members address data indicating shortcomings. The Senior Associate Dean for Academic Affairs and/or the Undergraduate Studies, Undergraduate/BSPH Program, and Graduate Studies Committee Chairs typically facilitate discussion to establish an action plan and timeline to address the issue.

The University has also implemented efforts to address and improve student assessment at both undergraduate and graduate levels. During 2014, the College was selected as one of 11 units from the University to participate in a pilot project focused on program assessment. This project continues to evolve at the University level, and more recently a new data compilation and tracking software (TracDat[®]) has been implemented for use by all units. For the first time, TracDat[®] will be used to report the Undergraduate Annual Assessment for 2015 – 2016.

2.7.b. Identification of outcomes that serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees (including bachelor's, master's and doctoral degrees) for each of the last three years. See CEPH Data templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined for this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of degree, includes fewer than 80% of the graduates at any level who can be located, an explanation must be provided.

The College uses various evaluation tools, and data collected are assessed. These data include important measures regarding graduation of qualified students and time-to-degree. **Tables 2.7.2 thru 2.7.6** summarize the percentages of students graduating and time-to-degree. During the 2009 CEPH self-study review cycle the College received “partially met” for this Criterion specifically due to concern for not consistently meeting the time-to-degree percentage for the time period reported. As requested, a letter was submitted to CEPH in 2011 demonstrating that this concern had been adequately resolved. Annual reporting data and the data reported here reflect consistent graduation rates within the required time-to-degree periods.

2.7 Assessment Procedures

Table 2.7.2 Students in BSPH Degree, By Cohorts Entering Between 2012-2016

Academic Year		2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
2012-2013	# of students admitted	59				
	# of students withdrew, dropped, etc	5				
	# students graduated	0				
	Cumulative graduation rate	0%				
	Cumulative attrition rate	8%				
2013-2014	# Students continuing and new at beginning	54	91			
	# of students withdrew, dropped, etc	0	4			
	# students graduated	26	6			
	Cumulative graduation rate	44%	7%			
	Cumulative attrition rate	8%	4%			
2014-2015	# Students continuing and new at beginning	28	81	89		
	# of students withdrew, dropped, etc	0	3	3		
	# students graduated	21	44	17		
	Cumulative graduation rate	80%	55%	19%		
	Cumulative attrition rate	8%	8%	3%		
2015-2016	# Students continuing and new at beginning	7	34	69	97	
	# of students withdrew, dropped, etc	0	1		6	
	# students graduated	6	25	35	11	
	Cumulative graduation rate	98%	82%	60%	11%	
	Cumulative attrition rate	8%	9%	3%	6%	
2016-2017	# Students continuing and new at beginning**	1	8	34	80	111
	# of students withdrew, dropped, etc					
	# students graduated					
	Cumulative graduation rate					
	Cumulative attrition rate					

**As of 5th day of Autumn Semester 2016

Table 2.7.3 Students in MPH Degree, By Cohorts Entering Between 2012-2016

Academic Year		2010-2011 cohort	2011 - 2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
2010-2011	# of students admitted	98						
	# of students withdrew, dropped, etc	3						
	# students graduated	4						
	Cumulative graduation rate	4%						
	Cumulative attrition rate	3%						
2011-2012^	# Students continuing and new at beginning	91	103					
	# of students withdrew, dropped, etc	4	0					
	# students graduated	49	5					
	Cumulative graduation rate	54%	5%					
	Cumulative attrition rate	7%	0%					
2012-2013^	# Students continuing and new at beginning	38	98	81				
	# of students withdrew, dropped, etc	2	0	0				
	# students graduated	15	48	1				
	Cumulative graduation rate	69%	51%	1%				
	Cumulative attrition rate	9%	0%	0%				
2013-2014^	# Students continuing and new at beginning	21	50	80	104			
	# of students withdrew, dropped, etc	2	0	0	1			
	# students graduated	10	22	41	0			
	Cumulative graduation rate	80%	73%	51%	0%			
	Cumulative attrition rate	11%	0%	0%	1%			
2014-2015^^	# Students continuing and new at beginning	9	28	39	103	92		
	# of students withdrew,	0	0	0	0	0		

Academic Year		2010-2011 cohort	2011 - 2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
	dropped, etc							
	# students graduated	6	14	13	51	0		
	Cumulative graduation rate	86%	86%	68%	50%	0%		
	Cumulative attrition rate	11%	0%	0%	1%	0%		
2015-2016	# Students continuing and new at beginning	3	14	26	52	92	77	
	# of students withdrew, dropped, etc	0	4	1	1	1	1	
	# students graduated	1	3	7	27	43	2	
	Cumulative graduation rate	91%	89%	76%	75%	47%	3%	
	Cumulative attrition rate	11%	4%	1%	2%	1%	1%	
2016-2017	# Students continuing and new at beginning**	n/a	7	18	24	48	74	83
	# of students withdrew, dropped, etc							
	# students graduated							
	Cumulative graduation rate							
	Cumulative attrition rate							

**As of 5th day of Autumn Semester 2016

^AU11-SU14 - in May report, students that were listed as withdrawing or dropping out, only one officially notified CPH that they were withdrawing. The others took a leave of absence, but can return to complete their degree

^AU14-SU15 change in report submitted from May 2016 is that 2 students were admitted to one program, but continued in another, and were inadvertently counted twice. In addition, of the students that were listed as withdrawing or dropping out, only one officially notified CPH that they were withdrawing. The others took a leave of absence, but can return to complete their degree.

Table 2.7.4 Students in MS Degree, By Cohorts Entering Between 2012-2016

Academic Year		2010-2011 cohort	2011- 2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017
2010-2011	# of students admitted	3						
	# of students withdrew, dropped, etc	1						
	# students graduated	0						
	Cumulative graduation rate	0%						
	Cumulative attrition rate	33%						
2011-2012^	# Students continuing and new at beginning	2	8					
	# of students withdrew, dropped, etc	0	0					
	# students graduated	2	1					
	Cumulative graduation rate	67%	13%					
	Cumulative attrition rate	33%	0%					
2012-2013^	# Students continuing and new at beginning		7	12				
	# of students withdrew, dropped, etc		0	0				
	# students graduated		4	1				
	Cumulative graduation rate		63%	8%				
	Cumulative attrition rate		0%	0%				
2013-2014^	# Students continuing and new at beginning		3	11	4			
	# of students withdrew, dropped, etc		0	0	0			
	# students graduated		1	6	0			
	Cumulative graduation rate		75%	58%	0%			
	Cumulative attrition rate		0%	0%	0%			
2014-2015^	# Students continuing and new at beginning		2	5	4	6		
	# of students withdrew, dropped, etc		0	0	0	0		
	# students graduated		1	1	0	1		
	Cumulative graduation rate		88%	67%	0%	17%		
	Cumulative attrition rate		0%	0%	50%	0%		
2015-2016	# Students continuing and new at beginning		1	4	4	5	18	

Academic Year		2010-2011 cohort	2011- 2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017
	# of students withdrew, dropped, etc		0	0	0	0	1	
	# students graduated		0	0	1	1	3	
	Cumulative graduation rate		88%	67%	25%	33%	17%	
	Cumulative attrition rate		0%	0%	0%	0%	6%	
2016-2017	# Students continuing and new at beginning**	n/a	1	4	3	4	14	1
	# of students withdrew, dropped, etc							
	# students graduated							
	Cumulative graduation rate							
	Cumulative attrition rate							

**As of 5th day of Autumn Semester 2016

^AU11-SU14 - in May report, students that were listed as withdrawing or dropping out did not officially notify CPH that they were leaving the program. They still have 5 years to complete their degree, so this September report has been updated to reflect this information.

Table 2.7.5 Students in MHA Degree, By Cohorts Entering Between 2012-2016

Academic Year		2009- 2010 cohort	2010-2011 cohort	2011-2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
2009-2010	# of students admitted	28							
	# of students withdrew, dropped, etc	1							
	# students graduated	1							
	Cumulative graduation rate	4%							
	Cumulative attrition rate	4%							
2010-2011	# Students continuing and new at beginning	26	31						
	# of students withdrew, dropped, etc	0	1						
	# students graduated	21	0						
	Cumulative graduation rate	79%	0%						
	Cumulative attrition rate	4%	3%						
2011-2012	# Students continuing and new at beginning	5	30	32					
	# of students withdrew, dropped, etc	0	0	2					
	# students graduated	4	24	0					
	Cumulative graduation rate	93%	77%	0%					
	Cumulative attrition rate	4%	3%	6%					
2012-2013	# Students continuing and new at beginning	1	6	30	23				
	# of students withdrew, dropped, etc	0	0	0	1				
	# students graduated	1	3	29	0				
	Cumulative graduation rate	96%	87%	91%	0%				
	Cumulative attrition rate	4%	3%	6%	4%				
2013-2014	# Students continuing and new at beginning		3	1	22	36			
	# of students withdrew, dropped, etc		0	0	0	1			
	# students graduated		2	0	14	0			
	Cumulative graduation rate		94%	91%	61%	0%			
	Cumulative attrition rate		3%	6%	4%	3%			
2014-2015	# Students continuing and		1	1	8	35	33		

Academic Year		2009- 2010 cohort	2010-2011 cohort	2011-2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
	new at beginning								
	# of students withdrew, dropped, etc		0	0	0	0	1		
	# students graduated		1	0	8	23	0		
	Cumulative graduation rate		97%	91%	96%	64%	0%		
	Cumulative attrition rate		3%	6%	4%	3%	3%		
2015-2016	# Students continuing and new at beginning			1		12	32	32	
	# of students withdrew, dropped, etc			0		0	0	0	
	# students graduated			0		9	27	0	
	Cumulative graduation rate			91%		89%	82%	0%	
	Cumulative attrition rate			6%		3%	3%	0%	
2016-2017	# Students continuing and new at beginning**					3	5	32	26
	# of students withdrew, dropped, etc								
	# students graduated								
	Cumulative graduation rate								
	Cumulative attrition rate								

**As of 5th day of Autumn Semester 2016

Table 2.7.6 Students in PhD Degree, By Cohorts Entering Between 2008-2016

Academic Year		2008-2009 cohort	2009-2010 cohort	2010-2011 cohort	2011-2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
2008-2009	# of students continuing and new at beginning	17								
	# of students withdrew, dropped, etc	1								
	# students graduated	0								
	Cumulative graduation rate	0%								
	Cumulative attrition rate	6%								
2009-2010	# of students continuing and new at beginning	16	11							
	# of students withdrew, dropped, etc	0	1							
	# students graduated	0	0							
	Cumulative graduation rate	0%	0%							
	Cumulative attrition rate	6%	9%							
2010-2011	# Students continuing and new at beginning	16	10	13						
	# of students withdrew, dropped, etc	0	0	0						
	# students graduated	3	0	1						
	Cumulative graduation rate	18%	0%	8%						
	Cumulative attrition rate	6%	9%	0%						
2011-2012	# Students continuing and new at beginning	13	10	12	14					
	# of students withdrew, dropped, etc	0	0	0	0					
	# students graduated	2	1	1	0					
	Cumulative graduation rate	29%	9%	15%	0%					
	Cumulative attrition rate	6%	9%	0%	0%					
2012-2013	# Students continuing and new at beginning	11	9	11	14	15				
	# of students withdrew, dropped, etc	1	0	0	1	1				
	# students graduated	3	2	2	0	0				
	Cumulative graduation rate	47%	27%	31%	0%	0%				
	Cumulative attrition rate	12%	9%	0%	7%	7%				

Academic Year		2008-2009 cohort	2009-2010 cohort	2010-2011 cohort	2011-2012 cohort	2012-2013 cohort	2013-2014 cohort	2014-2015 cohort	2015-2016 cohort	2016-2017 cohort
2013-2014	# Students continuing and new at beginning	7	7	9	13	14	10			
	# of students withdrew, dropped, etc	0	0	0	0	1	0			
	# students graduated	5	4	3	0	0	0			
	Cumulative graduation rate	76%	64%	54%	0%	0%	0%			
	Cumulative attrition rate	12%	9%	0%	7%	13%	0%			
2014-2015	# Students continuing and new at beginning	2	3	6	13	13	10	9		
	# of students withdrew, dropped, etc	0	0	0	1	0	0	0		
	# students graduated	0	0	4	2	1	0	0		
	Cumulative graduation rate	76%	64%	85%	14%	7%	0%	0%		
	Cumulative attrition rate	12%	9%	0%	14%	13%	0%	0%		
2015-2016	# Students continuing and new at beginning	2	3	2	10	12	10	9	6	
	# of students withdrew, dropped, etc	0	0	1	0	0	0	1	0	
	# students graduated	2	3	1	6	4	0	0	0	
	Cumulative graduation rate	88%	91%	92%	57%	33%	0%	0%	0%	
	Cumulative attrition rate	12%	9%	8%	14%	13%	0%	11%	0%	
2016-2017	# Students continuing and new at beginning**	n/a	n/a	n/a	4	8	10	8	6	17
	# of students withdrew, dropped, etc									
	# students graduated									
	Cumulative graduation rate									
	Cumulative attrition rate									

* As of 5th day of Autumn Semester 2016

Students entered: The number of newly matriculated students enrolled in this degree in a cohort year. Students who transfer into this degree from another degree within the school or program should be retrospectively added to the cohort.

Students withdrew, dropped, etc.*: The number of students from the entering cohort who, through official notice or failure to enroll, resigned from the program before completing the degree.

Students graduated: The number of students from the entering cohort who successfully completed the requirements for graduation.

Students continuing at beginning of this school year: The number of students from the entering cohort who remained enrolled after subtracting out those who graduated and those who withdrew.

Cumulative graduation rate: Students who withdraw from the program (through official notice or failure to enroll) should be counted in the denominator of this calculation. Students who transfer to another degree within the school or program should not be counted in the denominator for the original degree. They should be retrospectively added to the entering enrollment number of the degree they transferred into.

Another outcome measure is graduates' employment within 12 months of graduation and/or continuation of academic education. For academic year 2013-14 the percentage of graduates who reported that they had applicable employment or were continuing their education met the criteria. For academic year 2014-15 some of the percentages are below the criteria, but data collection continues for the full 12 months after graduation. Refer to summary of data in **Tables 2.7.7 thru 2.7.9**.

2.7.c. An explanation of the methods used to collect job placement data and of graduates' response rates to these data collection efforts. The school must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collecting employment data.

The College of Public Health Office of Academic Programs and Student Services (OAPSS) use several approaches to gather employment information from graduates between the last semester of enrollment and one year post-graduation. The University fields an exit survey to graduating students to obtain information about their educational experiences and post-graduation plans, but this survey is not sent out after graduation. The Assistant Director of OAPSS follows up with non-respondents three months post-graduation, again at six months post-graduation, and a finally at one year post-graduation. Students who have responded to the initial survey do not get re-surveyed. Their data are collected and recorded. OAPSS also attempts to obtain missing data through a student's faculty advisor and social media sites such as LinkedIn and Facebook. OAPSS also utilizes the University's alumni database system to locate missing information.

2.7.d. In fields for which there is certification of professional competence and data are available from the certifying agency, data on performance of the school's graduates on these national examinations for each of the last three years.

The College of Public Health does not offer degree programs that require mandatory certification or licensure. Some graduates voluntarily pursue certification through the National Board of Public Health Examiners and earn the Certification in Public Health credential. Other students, such as Health Behavior and Health Promotion graduates, take the Certified Health Education Specialist (CHES) examination. Others, such as Environmental Health graduates, take the Registered Sanitarian (RS) and/or Registered Environmental Health Specialist (REHS) examinations. The College does not have meaningful data to determine accurate percentage of graduates who have earned one or more of these credentials.

Table 2.7.7 Summary of Graduates' Employment or Continuation with Education 2013-14

Degree Conferred – BSPH 31 responses out of 32 graduates (97% response rate)	
Employed -13/31	42%
Continuing education/training (not employed)- 17/31	55%
Actively seeking employment -1/32	3%
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	97%
Degree Conferred – MPH 78 responses out of 82 graduates (95% response rate)	
Employed -66/78	85%
Continuing education/training (not employed) 10/78	13%
Actively seeking employment- 2/78	2%
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	98%
Degree Conferred – MS 10 responses out of 10 graduates (100% response rate)	
Employed -8/10	80%
Continuing education/training (not employed)-2/10	20%
Actively seeking employment	
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	100%
Degree Conferred – MHA 20 responses out of 20 graduates (100% response rate)	
Employed =20/20	100%
Continuing education/training (not employed)	
Actively seeking employment	
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	100%
Degree Conferred – PhD 12 responses out of 12 graduates (100% response rate)	
Employed =12/12	100%
Continuing education/training (not employed)	
Actively seeking employment	
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	100%

Graduates may take up to 12 months to secure employment or pursue further education/training after degree completion.

Table 2.7.8 Summary of Graduates' Employment or Continuation with Education 2014-15
 (Data collection still in progress since <12 months since graduation)

Degree Conferred – BSPH 60 responses out of 84 graduates (71% response rate)	
Employed - 40/60	66%
Continuing education/training (not employed) – 18/60	30%
Actively seeking employment – 1/60	2%
Not seeking (not employed and not continuing education/training, by choice) – 1/60	2%
Total Respondents Employed or Continued Education	96%
Degree Conferred – MPH 70 responses out of 85 graduates (82% response rate)	
Employed - 55/70	78%
Continuing education/training (not employed) - 10/70	15%
Actively seeking employment - 2/70	3%
Not seeking (not employed and not continuing education/training, by choice) - 3/85	4%
Total Respondents Employed or Continued Education	93%
Degree Conferred – MS 2 responses out of 3 graduates (67% response rate)	
Employed - 1/2	50%
Continuing education/training (not employed) - 1/2	50%
Actively seeking employment - 0/3	0%
Not seeking (not employed and not continuing education/training, by choice) - 0/3	0%
Total Respondents Employed or Continued Education	100%
Degree Conferred – MHA 29 responses out of 31 graduates (94% response rate)	
Employed – 26/29	90%
Continuing education/training (not employed) - 1/29	5%
Actively seeking employment- 0/29	0%
Not seeking (not employed and not continuing education/training, by choice) - 2/29	5%
Total Respondents Employed or Continued Education	95%
Degree Conferred – PhD 7 responses out of 7 graduates (100% response rate)	
Employed – 4/7	57%
Continuing education/training (not employed) - 3/7	43%
Actively seeking employment - 0/7	0%
Not seeking (not employed and not continuing education/training, by choice) - 0/7	0%
Total Respondents Employed or Continued Education	100%

Graduates may take up to 12 months to secure employment or pursue further education/training after degree completion.

Table 2.7.9 Summary of Graduates' Employment or Continuation with Education 2015-16

Degree Conferred – BSPH 42 responses out of 73 graduates (57% response rate)	
Employed =28/42	66%
Continuing education/training (not employed) =12/42	29%
Actively seeking employment =	
Not seeking (not employed and not continuing education/training, by choice) =	
Unknown	
Total Respondents Employed or Continued Education	95%
Degree Conferred – MPH 39 responses out of 54 graduates (72% response rate)	
Employed =34/39	87%
Continuing education/training (not employed) = 5/39	13%
Actively seeking employment =	
Not seeking (not employed and not continuing education/training, by choice)	
Total Respondents Employed or Continued Education	100%
Degree Conferred – MS 1 response out of 5 graduates (2% response rate)	
Employed -1 reported 4 did not respond to survey	20%
Continuing education/training (not employed) -0/5	0%
Actively seeking employment	
Not seeking (not employed and not continuing education/training, by choice) 4/5	80%
Unknown -	
Total Respondents Employed or Continued Education	20%*
Degree Conferred – MHA 34 responses out of 37 graduates (92% response rate)	
Employed – 34/37	92%
Continuing education/training (not employed) -0/37	0
Actively seeking employment- 3/37	
Not seeking (not employed and not continuing education/training, by choice) -	
Unknown -	8%
Total Respondents Employed or Continued Education	92%
Degree Conferred – PhD 9 responses out of 11 graduates (82% response rate)	
Employed – 9/9	100%
Continuing education/training (not employed) -0/100	0%
Actively seeking employment	
Not seeking (not employed and not continuing education/training, by choice) -	
Unknown -	
Total Respondents Employed or Continued Education	100%

*Graduates may take up to 12 months to secure employment or pursue further education/training after degree completion.

* Response rate includes students that responded to survey's as well as information obtained from Linked IN

* Information current as of 9.12.16

2.7.e. Data and analysis regarding the ability of the school's graduates to perform competencies in an employment setting, including information from periodic assessments of alumni, employers and other stakeholders. Methods for such assessments may include key informant interviews, surveys, focus groups and documented discussions.

The Office of Academic Programs and Student Services systematically collects data from practice placement preceptors on performance in the practice setting, as well as surveys of alumni concerning their self-perception of readiness for practice. Overall, results of the College's survey of graduates at the time of graduation and up to one year post-graduation for the period 2012 through 2015 suggest program strength relative to meeting the program competencies that provide necessary knowledge and skills for competence in public health.

Faculty and staff also obtain feedback from employers in multiple ways, including anecdotal impressions gained during regular interactions as well as more formal processes. We do not have a regular periodic survey of employers, in part because of the reluctance of employers to participate in what some consider to be a violation of privacy in their evaluation of employees. However, we have developed a very general survey that we use to collect basic feedback anonymously. A summary reflecting some of these are presented in **Table 2.7.10**, **Table 2.7.11a** and **Table 2.7.11b**

Table 2.7.10 Graduates – Program and Preparation for Employment or Advanced Education (Response Rates 42-67%)

Strategic Goal B.2. Teaching and Learning: Enhance student life experiences at the College and University.			
Outcome Measures for B.2.2.			
Initiative: Survey students to evaluate the student experience from the point of pre-admission through graduation.			
Outcome Measures	2016	2015	2014
Percentage of graduate-level graduates Indicating Strongly Agree/Agree with quality/satisfaction indicators on Exit Graduating Student Survey	Overall PH Curriculum =90%	Overall PH Curriculum = 100%	Overall PH Curriculum = 98%
	Specialization, Curriculum **	Specialization, Curriculum = 90%	Specialization, Curriculum = 95%
	Knowledge and Skills Prepare for Job/Graduate Ed = 90%	Knowledge and Skills Prepare for Job/Graduate Ed = 85%	Knowledge and Skills Prepare for Job/Graduate Ed = 75%
	Identify Volunteer and Internships**	Identify Volunteer and Internships = 70%	Identify Volunteer and Internships = 52%
	Meeting Expectations =75%	Meeting Expectations = 72%	Meeting Expectations = 83%
	2016	2015	2014
Percentage of undergraduate-level graduates Indicating Strongly Agree/Agree with quality/satisfaction indicators on Exit Graduating Student Survey	Overall PH Curriculum=94%	Overall PH Curriculum = 97%	Overall PH Curriculum = 95%
	Specialization, Curriculum = 89%	Specialization, Curriculum = 84%	Specialization, Curriculum = 89%
	Knowledge and Skills Prepare for Job/Graduate Ed = 83%	Knowledge and Skills Prepare for Job/Graduate Ed = 95%	Knowledge and Skills Prepare for Job/Graduate Ed = 89%
	Identify Volunteer and Internships**	Identify Volunteer and Internships**	Identify Volunteer and Internships**
	Meeting Expectations = 77%	Meeting Expectations = 76%	Meeting Expectations = 89%

**Questions were not asked in 15-16 Survey because cooperative transition from College to the University centralized Exit Survey system inadvertently omitted. OAPSS has worked to correct this for future Exit Survey.

A limitation to the employer survey and the reported data shown below is that the employment position responsibilities may not align well with the full scope of competencies. Accordingly, this may account for the levels of agreement reported. The College Dean’s External Advisory Committee recommended that we convene many employers and collect data via a focus group discussion. In relation, the survey needs to be improved to collected higher resolution responses.

Table 2.7.11a Employers – Quality of Graduates (Compilation 2013-2015; N=19)

General Evaluation	Survey Score (x/5.0)
Overall competence of employee in their practice field	4.7
Knowledge of public health	4.4
Problem Solving/Critical thinking	4.7
Professional/Work Ethic	4.6
Ability to understand and use technical information	4.7
Effectiveness of program in preparing graduates	4.4
Likelihood of hiring future graduates	4.5

Table 2.11b Employers – Quality of Graduates (2016; N=17)

General Evaluation	Agree	Neutral	Disagree
Please rate the following:-The OSU MPH program is effective in preparing graduates to meet the needs of your organization	88%	6%	6%
The OSU MPH program is effective in preparing graduates to meet the needs of the communities served.	82%	12%	6%
If an applicable position is available, is there likelihood of hiring future graduates from the OSU MPH program.	88%	12%	0%
MPH Core Competencies	Agree	Neutral	Disagree
Apply appropriate descriptive and inferential statistical techniques to public health data and interpret results of statistical analyses in the context of public health research and evaluation.	82%	12%	6%
Apply foundational principals of environmental health science to categorize sources and types of contaminants, matrices involved, pathways for and modes of exposure, associated health effects and societal issues, approaches to control, and major regulations.	53%	47%	6%
Apply epidemiological principals to investigate the distribution of risk factors and disease in the population to improve public health.	82%	18%	0%
Apply evidence-based concepts of health behavior and health promotion to the design of public health messages and strategies	76%	18%	6%
Discuss the major components of the U.S. Health care system and be able to apply their understanding to examine health policy and health program issues.	29%	64%	6%
Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.	88%	12%	0%
Develop public health programs and strategies responsive to the diverse cultural values and traditions for the communities being served.	65%	35%	0%
Apply the core functions of assessment, policy development, and assurance in the analysis of global public health problems and their solutions.	64%	35%	0%
Apply basic principles of ethical analysis to issues of public health practice and policy.	82%	18%	0%
Collaborate with multidisciplinary groups to recognize and evaluate public health issues and develop strategies for intervention	82%	18%	0%

2.7.f. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weakness and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.7.

Strengths:

- The College of Public Health has a formal assessment process that includes evaluation tools and approaches and expected outcome measures focused on admissions; program competencies, course topics, and learning objectives; classroom and capstone experiences; retention; graduation (time-to-degree); and placement.
- Preceptor evaluations of students are positive for performance in the practicum. Students are well-prepared for the challenges of practice at the time of the practicum.
- Program retentions are high and expectations/criteria for the respective degrees' time-to-degree are met.
- Survey data shows that exiting graduates and alumni are positive in their self-assessment of readiness for practice and that they are securing relevant employment and/or pursuing advanced education and training.

Challenges/Weaknesses/Plans:

- It continues to be challenging to obtain good survey response rates from employers, beyond capstone preceptors, so as to achieve a more robust measure of employer assessment of graduates. The plan moving forward is to continue surveys, but include regularly scheduled and well-facilitated employer focus group discussions.
- Assessment of student learning consists of several evaluation tools and process elements which contribute to generation of very good quantitative and qualitative data. However, the College aspires to collect higher resolution measurements of student performance/proficiency on course elements shown to be aligned with core and specialization and degree-specific competencies. One plan to help improve is the major addition to the process, for launch in spring 2017, using the University's new learning management system Canvas™ as a tool. By spring semester 2017, all faculty members in the College will be using this new platform, adopted by the University during autumn 2016, whether it be to support face-to-face classroom instruction or deliver a course entirely via distance. The level of use varies depending on the amount of content used to support instruction and the tools used to assess student learning. As the College transitions to the new LMS it will simultaneously be increasing the number of student assessments done in Canvas™ through tools such as Quizzes and Assignments which, as mentioned above, allow instructors to align select competencies to specific learning and evaluation activities and better gauge student mastery. The College will use this information to monitor both how the class as a whole and individual students are performing with more details than the current process uses. Canvas™ allows for reports detailing how rubrics and artifacts are aligned with a specific competency. Outcome statistics are available for entire courses, course sections, individual artifacts or individual students. Requiring all courses to assess students using Canvas as an additional tool will help instructors and administrators evaluate the student proficiency as it relates to the competencies described in Criterion 2.6.

CRITERION 2.8 OTHER GRADUATE PROFESSIONAL DEGREES

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

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

The other professional master degree offered by the College in addition to the MPH degree is the Master of Health Administration (MHA) degree. The MHA degree requires a minimum of 60 graduate credits. All students must complete the specified minimum number of credits and all program requirements to earn the MHA professional graduate degree. Graduate credit reductions are not given for prior experience. The MHA degree curriculum guide is located in the **eResource File** for this criterion. The competencies for the MHA degree are listed under Criterion 2.6.b.

MHA students typically satisfy a practice placement requirement through a summer administrative residency placement in which a student works closely with a leadership-level preceptor in a healthcare organization. The administrative residency typically is completed between the first and second year of the MHA program. MHA students are not enrolled for course credit during this time; however, they are expected to meet at least the same minimum 120 hour time requirement. Although the focus and priorities of each host organization may be slightly different, students are asked to work on projects that develop the following MHA competencies: strategic and business planning; operations assessment and improvement; financial management; project management; and, written and verbal communication. Students work with their preceptors at the start of the summer to set goals related to each competency. At the end of the residency, preceptors evaluate students' performance relative to each of the competencies using a standard rubric.

The MHA degree program is fully accredited by the Council on Academic Health Management Education (CAHME). The program also is conducting a self-study and preparing a document for submission during September and site visit during November, 2016.

2.8.b. Identification of the manner in which these curricula assure that students acquire a public health orientation. If this means is common across these other professional degree programs, it needs to be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program.

The required 60 credit curriculum to earn the MHA professional graduate degree includes 13.5 graduate credits of didactic courses and content in the five core areas

2.8 Other Graduate Professional Degrees

of public health, as follows: PUBHBIO6210 Biostatistics (3 credits), PUBHEHS6300 Principles of Environmental Health (1.5 credits), PUBHEPI6410 Epidemiology, PUBHBHP 6510 Preventing Disease and Promoting Health Through Behavioral Science (3 credits), and PUBHHMP 6611 Health Care Organization (3 credits). The credits for the Environmental Health Sciences is lower; otherwise, the core is the same as that required for the MPH professional graduate degree and the respective specializations.

2.8.c. Assessment of the extent this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The College of Public Health meets Criterion 2.8.

Strengths:

- The MHA professional graduate degree program is fully accredited by CAHME and was ranked 10th among other programs in the country by the *U.S. News and World Reports* in 2015.

Challenges/Weaknesses:

- No major challenges or weaknesses were identified.

CRITERION 2.9 BACHELOR'S DEGREES IN PUBLIC HEALTH

If the school also offers baccalaureate degrees in public health, they shall include the following elements:

Required coursework in Public Health Core Knowledge: Students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

Elective Public Health Coursework: In addition to the required public health core knowledge courses, students must complete additional public health-related courses. Public-health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: Students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor's degree at the parent university. The experience may be tailored to students' expected post-baccalaureate goals (e.g., graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

2.9.a. Identification of all bachelor-level majors offered by the school. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

The Bachelor of Science in Public Health (BSPH) degree was implemented effective autumn semester 2012. The BSPH degree has two specializations: Environmental Public Health and Public Health Sociology. Currently, approximately 110 new BSPH majors matriculate into the program each year. The program has grown nearly 100% since its inception (see **Table 2.9.1**).

Table 2.9.1 BSPH Degree and Undergraduate Minor Program Enrollments Since 2012

Year	New BSPH Majors	New BSPH Majors Who Were Pre-majors	Total BSPH Majors	Total BSPH Pre-Majors	Total Undergrad Minors	Total BSPH Honors Students
Au 2012	59	Non-Option	59	89	81	16
Au 2013	91	68	143	63	97	26
Au 2014	89	67	190	65	126	42
Au 2015	97	65	187	91	225	48
Au 2016	111	73	231	88	233	41

The respective curricula for the BSPH degree specializations consist of University-required General Education (GE) courses that account for approximately 50% of the minimum 121 semester credits needed to earn the degree, core courses (18 credits), specialization courses, elective courses, and a capstone experience. Through the capstone experience, BSPH students learn critical elements of public health practice and research and engage in professional development opportunities to prepare them for the workplace and/or to apply to graduate or professional school. Capstone experiences are developed based upon the expected post-baccalaureate goals of the student. Options for the capstone requirement include: field experience in global public health, internship, or undergraduate research. The BSPH degree curriculum guides for the two specializations are located in the **eResource File** for this criterion.

The BSPH program is offered primarily, but not exclusively, as a foundation and pipeline into advanced education and training at the graduate or professional degree levels. However, students who do not want to continue advanced education and training immediately, or perhaps not at all, have the preparation for employment with the earned BSPH degree.

Six undergraduate core courses are required for the BSPH academic undergraduate degree to ensure that a broad foundation of public health education is provided to all students pursuing the degree regardless of the specialization chosen (see **Table 2.9.2**). The undergraduate core courses were each developed by first establishing core competencies, then aligning course topics and objectives. Although the undergraduate core courses are similar in title and some topic-specific content to the MPH professional graduate degree core courses, the scope and depth of content and assignments differ.

Table 2.9.2 Core Public Health Knowledge for the BSPH Degree

Core Knowledge Area	Course Number and Title	Credits
General/Interdisciplinary	PUBHLTH2010 Introduction to Global Public Health	3
Biostatistics	PUBHBIO2210 Biostatistics for Public Health Research	3
Environmental Health	PUBHEHS3310 Concepts Global Environmental Health	3
Epidemiology	PUBHEPI2410 Introduction to Epidemiology	3
Social/Behavioral Sciences	PUBHHBP3510 Role of Behavior in Public Health	3
Health Services Administration	PUBHHMP4650 US and International Health Care	3

2.9 Bachelor's Degrees in Public Health

Each core course is taught by faculty members from the Division associated with the core discipline. Students must meet the specific academic performance expected in each core course as outlined in the *Student Handbook*. Course syllabi are available in the **eResource file**.

All BSPH majors are required to comply with the policy on admissions and retention. These standards were created by the College and approved by the Office of Academic Affairs. The standards require a term and cumulative GPA of 2.8 and a grade of C- or higher for all courses that comprise the major. Accordingly, academic performance of all majors is reviewed each semester. Students who do not meet these criteria are placed on Program Action. Program Action definitions are found in section VII of the BSPH Handbook in the eResource file

All BSPH pre-majors (students affiliated with the College of Public Health, but have not yet been admitted to the major) are required to comply with the Academic Sanctions for pre-major students. Accordingly, academic performance of all pre majors is reviewed each semester. Students who do not meet these criteria are eligible for Program Standing. Program Standing definitions are found in section VII of the BSPH Handbook in the eResource file.

The College of Public Health also offers an Undergraduate Honors program to students who have been admitted to the College Honors program. Students may be admitted to the Honors program three different ways:

Incoming freshmen who meet the University's standards for admissions to the general Honors program at Ohio State and have indicated they want to earn a BSPH degree will be admitted to the BSPH Honors program. Current Ohio State University students (with honors status) who transfer into the College of Public Health from other Ohio State academic units do not need to apply to the College of Public Health Honors program. However, they will need to meet with a College of Public Health undergraduate academic advisor during the same term they transferred into the BSPH major or pre-major to complete an Honors Contract in order to retain their Honors status.

BSPH majors and pre-majors who are not Ohio State Honors students but wish to join the College of Public Health Undergraduate Honors program are required to complete a minimum of 15 OSU credit hours and have a minimum cumulative GPA of 3.4 or higher.

Regardless of the method of admission to the Honors program, Honors students complete an Honors contract (a contract outlining method for completing College of Public Health Honors requirements), and an Honors Capstone Project Application. Honors students also must complete specific criteria in order for their Honors status to be maintained. They must maintain a cumulative GPA of 3.4, complete a minimum of 6 Honors courses, upper division (defined as 3000 level or higher) or

graduate-level courses over the first two years of study, and complete an Honors capstone experience.

Each year, an academic advisor in the Office for Academic Programs and Student Services (OAPSS) reviews the academic record of each Honors student and shares the status of the student record with the Two Honors Co-Directors and the Honors committee at an Honors Committee meeting.

2.9.b. *Description of specific support or resources available in the school for the bachelor's degree programs.*

The College of Public Health offers the BSPH degree program and provides the primary administrative oversight relative to admissions, retention and graduation. However, the two specializations under the BSPH degree were designed and implemented cooperatively in collaboration with the College of Arts and Sciences. The College of Public Health has a Director of Undergraduate Studies, Dr. Gail Kaye, who has primary responsibility for managing and leading the program. There are faculty who assist her as the Program Coordinators for the two respective specializations. Dr. Motomu Ibaraki is the Program Coordinator for Environmental Public Health and Dr. Cynthia Colen is the Program Coordinator for Public Health Sociology.

The three faculty members with administrative roles mentioned above, plus faculty members from the other Divisions in the College, constitute the faculty members on the BSPH Degree Committee. Since the degree program is interdisciplinary, it is not administratively housed under a specific Division, but instead works via the interdisciplinary cross-functional BSPH Committee. In addition to faculty members, the Committee includes representatives from the OAPSS, and an academic advisor from the Department of Sociology.

The BSPH Committee continuously monitors and assesses program elements critical for optimal functioning, including: recruitment, admissions, advisement, curricula, academic progress, honors, capstone, student group activities/ student experience, graduation activities and approval, infrastructure and communications, alumni recruitment and functions, and program review and assessment. Throughout the academic year, meetings are held monthly to evaluate progress towards identified goals and to address other program issues and concerns. Annual program debriefings are held whereby program accomplishments are noted, data (i.e. admissions statistics; diversity metrics; graduation and attrition rates; annual student survey data) reviewed, quality improvement and growth opportunities are identified, and annual goals are set.

Findings from the annual debriefings are used to compile the Annual University Assessment. The Annual University Assessment includes an extensive reporting, review and evaluation of the following key components.

- Annual student performance on all courses supporting each of the core and specialization competencies,
- Structure, function and performance of committees supporting the BSPH degree program
- Recruitment, admissions, advisement, retention and graduation statistics, policies and practices
- Relevance of program competencies and educational objectives
- Inclusion of learning objectives and methods for evaluating student performance in course syllabi
- Alignment of course learning objectives and methods for evaluating student performance with program competencies

The annual assessment also requires documentation of program goals for each of these key areas.

Concerns requiring development of new policies (i.e. Program Action; Admission requirements), adjustments to current policy, and curricular additions and changes (governance) are referred to the College's Undergraduate Studies Committee. The Undergraduate Studies Committee is part of the College's centralized governance process, with faculty representation from each Division within the College.

The College's Office of Academic Programs and Student Services has two undergraduate advisors, Guy Smalley, MPH (academic advisor) and Heather Kerr, MEd (academic/career advisor). In addition to advisement, Mr. Smalley and Ms. Kerr perform other key functions to support the BSPH degree program, as listed below:

Guy Smalley

Academic Advisor
Admissions Administration
Graduation Certification
Program Action

Heather Kerr

Academic Advisor
Career Advisor
Honors Student Academic Advisor
Athletes Academic Advisor
Capstone Administration
Academic Minors Administration

The College supports two academic undergraduate minors in 1) Global Public Health (209 students); and, 2) Epidemiology (16 students; new 2015-16). Both undergraduate advisors support advisement and administrative functions and procedures for minors as well.

2.9.c. Identification of required and elective public health courses for the bachelor's degree(s). Note: The school must demonstrate in Criterion 2.6.c. that courses are connected to identified competencies (i.e., required and elective public health courses must be listed in the competency matrix in Criterion 2.6.d.).

There are two interdisciplinary specializations for the BSPH academic degree program. The **eResource File** for this criterion contains the curriculum guides showing all the courses required for the Environmental Public Health specialization and the Public Health Sociology specialization. In addition, the **eResource File** has matrices showing the BSPH curricula mapped against the core competencies and the competencies for the two respective specializations. This information is also located in the eResource file.

Every undergraduate student at The Ohio State University has to complete General Education (GE) coursework, but the specific requirements vary from college to college. BSPH degree students are required to complete between 66-74 credit hours of GE coursework. The core, specialization, major electives and capstone courses comprise the remainder of the respective curricula for BSPH degree specializations.

2.9.d. A description of the school policies and procedures regarding the capstone experience.

The goal of the undergraduate public health capstone is to provide BSPH students with opportunities to apply public health principles outside of a typical classroom setting to build on the didactic public health coursework. To facilitate this goal, a professional and career development program for undergraduates has been developed aimed at preparing students for applied experiences in partnering agencies, global field experiences, and research. The goal is to prepare students who are responsible, collaborative and ethical participants in the capstone. Training begins upon entry into the program with development of four-year plans (academic and career) and resumes. During their tenure, students are advised to attain three volunteer experiences to explore career interests and to participate in career development events.

All students enroll in a 1 credit capstone preparation class, PUBHLTH 3180; they learn/practice skills to secure capstone placements and transition to the world of work and/or apply for graduate or professional school. Faculty and staff assist students with securing Capstone placements that are consistent with their career objectives and area of specialization. Formal presentations describing their placements (organization, description of BSPH program competencies addressed, relevance of proposed experience to public health) are required and graded. Students must pass this class before proceeding to their capstone experience. During the capstone, students maintain activity and reflection logs and meet with faculty to discuss skills learned and insights attained. A final poster session is held each semester whereby students present their experiences via poster format (summary of experience, key competencies, transferrable skills, impact on career development, future plans) to faculty, preceptors, staff and fellow students.

Earning credit for the capstone requirement is limited to the student's last three semesters before completing their degree requirements. This allows the student to integrate more classroom learning during the capstone experience.

Students have the following choices regarding completion of the capstone requirement, and each student must complete one experience as part of the curricular requirements to graduate:

- Field Experience in Global Public Health: PUBHLTH 3189.XX
- Internship (minimum of 120 hours): PUBHLTH 3191
- Undergraduate Research: PUBHLTH 3999

Students enrolled in the BSPH Honors program have to complete an Honors version of one of the capstone requirements or they may choose to complete an Honors Thesis.

At the beginning of the BSPH program, organizations with the desire and capacity to host students on a continuous basis (sustainable partners) were sought out and retained. Throughout the growth of the program, other sponsoring agencies have participated in the BSPH program. OAPSS staff communicate with each sponsoring agency prior to students beginning their Capstone experience, to confirm the student's placement (via a learning agreement) and to answer other questions as needed. A Preceptor Guidebook is provided to each new sponsoring agency, which includes the following information: Program Overview & Academic Requirements; Roles & Expectations of Host Site/Preceptor; Roles and Expectations of OSU/Student; BSPH Competencies; Preceptor Checklist; Preceptor Evaluation. Once on-boarded, communications with sponsoring agencies occurs during the capstone experience on an as needed basis. Preceptors from sponsoring agencies complete final evaluations of student performance.

During year three of the program, 5 focus groups (n = 18) were held to evaluate student performance in their respective capstone experiences. Preceptors' comments were very complimentary; students were noted to be consistently well prepared and professional; preceptors asked to receive more in the future. Opportunities for improvement were noted (i.e., helping students learn how to write professional emails, executive summaries, cover letters, etc.) and programmatic changes were made to address noted concerns.

To evaluate the possible impact of the BSPH career and professional development initiative, an evaluation of resumes of pre-capstone students (enrolled in the pre-capstone class) was conducted. Students revise and submit their most current resume as an assignment for the pre-capstone class. Of the 31 students enrolled in class, 29 (96%) of these student's resumes were reviewed to identify the average months of work experience prior to the Capstone, and the number of these months that were related to public health. On average, students attained 69 months (range 9 – 268 months), of work experience of which 24.8 months (range 0 – 276) were public health related. Excluding 3 students with more than 200 months of work experience, average work experience was 53 months (range 9 – 112) of which 14 months (range 0 – 44) were public health related.

To evaluate the impact of the career development component of the pre-capstone class, a pre/post assessment of student's self-assessment of career-related skills was also conducted. All students (n = 43, 100%) completed both the pre and posttest. Significant positive changes were found for interviewing, job search, and resume writing skills as well as understanding of ethical research practices and overall preparedness for the capstone experience. These pre- and post-assessments continue as a component of the pre-capstone class.

Capstone expectations, policies and procedures are provided in the Undergraduate Student Handbook (pp. 22 – 24) and on the College's Website:

<https://cph.osu.edu/students/undergraduate/capstone>.

2.9.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The College of Public Health meets Criterion 2.9.

Strengths:

- The College's BSPH degree program ensures that all students receive a strong foundational core in public health via the required six core courses. The required and elective courses for each of the two specializations build off the core and expand the scope and depth of knowledge appropriate for an undergraduate program.
- Results from a student focus group consisting of dual BSPH-MPH degree students (n = 7) indicated that they think that the graduate-level courses have more rigor. This is the goal by design. There was one comment that the undergraduate- and graduate-level environmental health core courses were somewhat similar. This comment was consistent with what had already been identified by the Division of Environmental Health Sciences. This issue has been resolved.
- Culminating experience opportunities and requirements for the BSPH academic degree program are appropriate for an undergraduate degree program.
- Preceptor evaluations of students who have opted to complete a practicum have been very favorable.
- Alumni have reported appreciation for the strong public health education that has prepared them well for graduate study elsewhere.

Challenges/Weaknesses/Plans:

- Although surveys from students and graduates reflect mostly favorable evaluations of the BSPH degree and the two interdisciplinary specializations, work is continuing to ensure that required courses offered from other units are viewed as valuable to the curriculum as the public health courses.

- The BSPH Program has increased 100% since its inception; undergraduate students represent 44% of the college student population (does not include pre-majors). To continue to provide ongoing quality academic programming, commensurate growth in administrative and staff support will be needed.
- Students have expressed a desire for more contact with staff and faculty members throughout the College. However, until this academic year (2016-2017), the BSPH Committee did not include representation from all Divisions within the College of Public Health. Commencing this academic year, all Divisions are represented. Expanding the membership of this Committee to include representatives from each Division can facilitate greater faculty and staff engagement to assist with meeting the growing administrative and student demands.
- Results from three student focus groups consisting of students from both BSPH degree specializations (total n = 13) indicated that they were very satisfied with the curricula noting courses spanned a broad range of topics, were engaging (good activities) and facilitated learning (vs memorizing facts). Challenges noted include: redundant information across courses; cannot pursue specializations; some classes lacked public health application of content (Sociology specialization); no EHAC accreditation (limited internship/employment opportunities); limited number of research opportunities. A number of initiatives have been launched to address noted concerns. New Sociology faculty have been on-boarded to teach several of the courses where redundancies have been noted; a clearer delineation between course goals, and objectives, and teaching methods has been and is being pursued. A list of instructors who include a public health focus in their courses has been created for use by advisors. A different strategy for organizing coursework to meet program competencies while reducing course redundancies has been developed. New 'course clusters' have been proposed whereby students would either select at least 1 – 2 course per cluster (generalist focus) or take several courses in a specific cluster (specialization). Program components needed to fulfill EHAC accreditation will be identified and a plan for pursuing this accreditation is being developed for the 2016-2017 academic year. Also, to increase undergraduate research opportunities a faculty workshop aimed at demonstrating models for including undergraduates in research endeavors is being developed

CRITERION 2.10 OTHER BACHELOR'S DEGREES

2.10.a. If the school also offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

Criterion 2.10 does not apply. The College of Public Health does not offer any other baccalaureate programs besides the Bachelor of Science in Public Health (BSPH) degree program summarized in Criterion 2.9.

CRITERION 2.11 ACADEMIC DEGREES

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

2.11.a. Identification of all graduate academic degree programs, by degree and area of specialization. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

Academic graduate degree programs in the College of Public Health consist of specialized curricula leading to the Master of Science (MS) and the Doctor of Philosophy (PhD) degrees. The MS academic graduate degree offers four specializations: Biomedical Informatics, Biostatistics, Environmental Health, and Epidemiology. The College's PhD academic graduate degree offers four specializations: Environmental Health, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy. In addition to these academic degree programs, the College collaborates with the Department of Statistics in the College of Arts and Sciences to offer an interdisciplinary PhD degree in Biostatistics. Curriculum guides and relevant matrices are located in the **eResource File** for this criterion.

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

The College considers biostatistics and epidemiology as the primary sub-core of the common core of public health. These courses are incorporated into the curricula across all specializations of its MS and PhD academic graduate degree programs. The curricula for these specializations for the MS and PhD academic graduate degree programs also incorporate other public health courses that cover various general and applied public health topics relevant to and appropriate for each specialization. The coverage is not as comprehensive or broad as that provided via the core curriculum required for the MPH professional graduate degree specializations, but each MS or PhD specialization requires at least six credits of the core course content. **Table 2.11.1** below shows a general matrix of the categories of public health courses from among the five core areas of public health that are required for each MS and PhD degree specialization. In addition, substantial public health content is delivered in select courses required for the respective MS and PhD degree specializations. Curriculum guides and matrices mapping public health core and specialization competencies with the respective academic degree curricula are located in the Appendix for this criterion. Additional matrices of required courses for

these degree specializations mapping individual topics and objectives with specific public health competencies are available in the eResource file.

Table 2.11.1 Public Health Content from Among the Five Core Areas of Public Health Required¹ for the MS and PhD Degree Specializations

Degree and Specialization	Biostatistics Core Course	Epidemiology Core Course	Environmental Health Core Course	Health Behavior Core Course	Health Admin Core Course
MS – Biostatistics	X	X			
MS – Biomedical Informatics	X	X			
MS – Environmental Health	X	X	X		
MS – Epidemiology	X	X			
PhD – Environmental Health	X	X	X		
PhD – Epidemiology	X	X			
PhD – Health Behavior	X	X		X	
PhD – Health Administration	X	X			X

¹Table does not include other public health courses taken as required and elective courses or to fulfill other curricular requirements (e.g. PhD minor)

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

Due to the higher research orientation of the MS degree, the culminating experience required for each of the specializations is a hypothesis-driven master’s thesis. The Graduate School permits students to petition the Division overseeing the specialization for permission to pursue the MS degree under a non-thesis option; however, no students have pursued this option. Indeed, the College does not support this alternative, and students not interested in conducting and completing thesis research would be encouraged to pursue an MPH rather than an MS degree.

The culminating experience for the PhD degree specializations is a hypothesis-driven doctoral dissertation. Neither the Graduate School nor the College offers an alternative non-dissertation option.

2.11.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.11.

Strengths:

- The combination of both core and specialization courses plus an applied research experience for the respective curricula for the MS and PhD academic graduate degrees provide content to ensure students receive sufficient public health orientation.
- Culminating experiences in the form of the MS thesis and PhD dissertation requirements for the academic graduate degrees are rigorous and appropriate for the research-oriented curricula.

Challenges/Weaknesses/Plan:

- The number of MS and PhD students matriculating into the College of Public Health has declined to some extent. Since graduate students seeking PhD degrees add to the overall quality of the student body mix, efforts have been implemented to combine funding from University, College and faculty sources to offer more robust fellowships and assistantships for PhD students.

CRITERION 2.12 DOCTORAL DEGREES

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

2.12.a. Identification of all doctoral programs offered by the school, by degree and area of specialization. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

As indicated in Criteria 2.1, 2.10, and 2.11 the PhD in public health is offered in four areas of specialization: Environmental Health Science, Epidemiology, Health Behavior and Health Promotion, and Health Services Management and Policy. Effective fall 2008, the College's former PhD in public health with a specialization in Biostatistics became a collaborative interdisciplinary program with the College of Arts and Sciences' Department of Statistics. This Biostatistics PhD program offers students expanded options for coursework and the possibility of pursuing two tracks, a methodology track or a public health track. This program is administered through the joint Biostatistics Graduate Faculty and its own Graduate Studies Committee, which includes faculty members from both CPH's Division of Biostatistics and the Statistics Department. All PhD degree programs currently have active students, and all have had past graduates.

2.12.b. Description of specific support and resources available to doctoral students including traineeships, mentoring opportunities, etc.

Each of the PhD degree specializations has a sufficient number of qualified faculty members with graduate faculty "P" status under the Graduate School so they can serve as mentors and major research advisors for the doctoral students. During the 2009 CEPH self-study review this criterion was "met with commentary". One concern focused on the high proportion of junior, assistant professor-level faculty serving as mentors for PhD students. This is no longer a concern since approximately 60% of the primary faculty are now tenured with rank of associate or full professor. The other concern was related to the number of specialized doctoral (i.e. 7000- and 8000-level) courses. This too has improved due to the growth of the number of faculty members qualified to develop and deliver these courses.

Other resources beyond personnel increased funding from the College and combining with funding from the University, Divisions and faculty grants to offer more robust fellowships and research and teaching assistantships for doctoral students. Amount and quality of space has also improved. Cunz Hall is the exclusive home of the College of Public Health. Spaces beyond classrooms include computer laboratories, wet research laboratories, a teaching laboratory and assigned open desk areas. Through University Libraries, doctoral students have access to a large number and broad selection of applicable hardcopy as well as electronic copies of

reference books and journals.

Some of the PhD degree program applicants and students are eligible for fellowships from the University and College and/or assistantships funded by the College, Division or faculty members. Assistantships are typically either Graduate Research Assistantships (GRA) or Graduate Teaching Assistantships (GTA).

2.12.c. Data on student progression through each of the school’s doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program.

Table 2.12.1 below presents data for each PhD academic degree specialization for active students during the 2016-17 academic year.

Table 2.12.1 Doctoral student data

	Biostatistics*	Environmental Health	Epidemiology	Health Behavior/ Promotion	Health Service Mgt. and Policy
Number newly admitted 2016-17	0	2	10	2	3
Number currently enrolled (total)	7	11	25	7	7
Number completed coursework 2015-16	7	11	25	7	7
Number advanced to candidacy 2015-16	0	1	0	0	0

*Students in the Public Health track of the Interdisciplinary program

The number of PhD applicants matriculating into the College has been inconsistent and shows some decline over the past five years.

2.12.d. Identification of specific coursework, for each degree, that is aimed at doctoral-level education.

The PhD degree specializations within the College require a minimum of 80-90 semester credits beyond the baccalaureate to earn the doctoral degree. The curriculum may include a maximum of 20 credits for dissertation research. Master’s and doctoral-level graduate students are permitted to enroll in courses ranging from 5000- to 8000-level. The majority of the PhD degree courses are at the 7000- and 8000-levels, which are designed to have higher-level content appropriate for PhD students. PhD students complete the higher-level courses designed primarily for doctoral study in the form of required didactic and seminar courses for the specialization, interdisciplinary courses required for a declared minor, and elective

courses. Curriculum guides for the doctoral academic degree specializations and matrices mapping curricula with public health competencies are in the eResource File for prior **Criterion 2.11**.

2.12.e. *Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this program.*

Assessment:

- The OSU College of Public Health meets Criterion 2.12.

Strengths:

- The PhD academic graduate degree program in public health is offered in more than the required minimum of three core disciplines.
- The quality of the applicant pool has been improving for the PhD degree specializations.

Challenges/Weaknesses:

- The number of PhD students matriculating into the College of Public Health has declined during the past few years. Other University units have also experienced some decline, which results in part from insufficient levels of financial support. The College has made efforts to combine funding from University, College, Division and faculty sources to offer more robust fellowships and assistantships to prospective PhD students.

CRITERION 2.13 JOINT DEGREES

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

2.13.a. Identification of joint degree programs offered by the school. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

The College cooperates and collaborates with other units on campus to offer “joint” degrees. For joint degrees, the University distinguishes between “combined degrees” (a graduate degree and a professional degree, or, a graduate degree and an undergraduate degree) and “dual degrees” (two graduate degrees,). Please note that although the MPH degree is a professional degree, the Graduate School at Ohio State University classifies it as a graduate degree for purposes of governance.

There are several pre-arranged combined and dual degree programs with the College of Public Health and other colleges at Ohio State. Listed here are only the joint combined and dual degrees for which there are formal programs established. Via the Graduate School and two other cooperative units within the University, students may petition for other combined and dual degree options on a case-by-case basis.

These pre-arranged programs have been carefully reviewed and planned out by faculty members in both colleges involved. Respective curricula, including overlap of coursework, determination of practicum/residency requirements, and culminating projects are outlined carefully for these programs. However, there are occasions when students from other programs that do not have an established pre-arranged dual and combined degree program express interest in earning a dual or combined degree in Public Health. The College works with the students and faculty and staff members in those respective units to explore if a joint degree program is feasible for the student and the programs involved. Students interested in pursuing a non-pre-established program have to be proactive in maintaining open lines of communication with faculty and staff in both colleges as there are nuances with a joint degree that differ from when a student is pursuing just one degree.

Effective autumn semester 2014, the College implemented its first joint undergraduate with graduate degree curricula, referred to as the 3+2 program. Qualified students may complete a combined undergraduate/graduate degree program via a 5-year (3+2) Model: Years 1, 2 and 3 involve undergraduate courses; Year 4 is a combination of undergraduate courses plus graduate courses. Between 12-16 graduate credits can count toward the bachelor degree. The sum of the graduate credits for the completed designated graduate courses completed counts toward the master degree program.

Students who are interested in the combined degree program work with an undergraduate advisor early on, so they complete a pre-application and will have the appropriate coursework completed before starting the 3+2 degree program. During their third year of undergraduate work towards the BSPH, students who are interested in the combined degree program apply to the MPH program in the College of Public Health. After admission to the MPH program, students apply to the 3+2 combined degree program. This involves completing the Graduate School's combined degree approval form and submitting that form to the Undergraduate Studies Committee Chair and the Graduate Studies Committee Chair. If all requirements are met, the Chairs will sign and forward the form to the Graduate School for final approval.

A list of the College's combined and dual joint degrees currently established are listed in Table 2.1.1 under Criterion 2.1.a, and in **Table 2.13.1** below.

Table 2.13.1 Joint Combined and Dual Degrees¹

	Academic	Professional ²
Combined Graduate and Professional Degrees:		
College of Public Health and College of Law	-	MHA/JD
College of Public Health and College of Medicine	-	MPH/MD
College of Public Health and College of Medicine	-	MHA/MD
College of Public Health and College of Veterinary Medicine	-	MPH/DVM
Dual Graduate Degrees:		
College of Public Health and College of Business	-	MHA/MBA
College of Public Health and College of Public Policy	MPA	MHA
College of Public Health and College of Social Work		MPH/MSW
Combined Bachelor and Master Degrees		
Division of Environmental Health Sciences	BSPH	MPH
Division of Epidemiology	BSPH	MPH
Division of Health Behavior and Health Promotion	BSPH	MPH
College of Veterinary Medicine	BSPH	MPH

¹ This table does not reflect the "one-off" combined or dual degree programs that are student initiated, not initiated by programs/college.

² Ohio State Graduate School classifies MPH and MHA as "graduate" degrees, but they are listed here as professional degrees

2.13.b. A list and description of how each joint degree program differs from the standard degree program. The school must explain the rationale for any credit sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.

Admissions Process

Students in joint degree programs must meet the admission requirements of, and be admitted to, both programs. Applications are reviewed in the same manner as all MPH and MHA degree applicants, with special attention to applicants' personal statements, which are helpful in assessing whether interests are consistent with the

goals of the respective programs. Students interested in a combined or dual degree program involving the MPH degree must use the SOPHAS application for the Public Health portion of the admissions process.

Advising and Planning

The College of Public Health is careful to maintain the integrity of the MPH and MHA professional degree programs when they are pursued as part of a joint combined or dual degree program. Students pursuing joint degree programs must meet all the requirements for both degrees, though they may be allowed to double count some courses. Required credits to earn the MPH or MHA professional degrees are maintained as part the curricula for a joint degree with other degree programs. The most common way in which credits overlap is to use some of the required courses in one degree program to satisfy elective credits in the other.

Students in joint degree programs must follow the Graduate School rules regarding dual and combined degrees. The Graduate School imposes a limit on the number of credits that may be applied to both curricula for a joint degree, and each unit overseeing the joint degree programs must approve the use of courses from another program in meeting the curricular requirements. Accordingly, prior to beginning enrollment in the program, students are advised to meet with applicable faculty and staff members in the units involved to complete necessary Graduate School paperwork as well as discuss the curriculum in depth. Course sequencing may also be discussed as students have to pay careful attention to planned coursework and timing.

In the case of combined programs, the Graduate School must approve the use of professional (i.e., MD, JD) course credits to apply toward a graduate degree. For that reason, the College has established formal programs with the professional colleges offering the degrees most often combined with the MPH or MHA degrees.

Graduation

For students pursuing a joint degree involving the MPH degree, there must be two members from each College on the advisory committee and engaged with managing the capstone experiences (i.e., culminating project or thesis). The Graduate School requires all students to apply for graduation. Students in joint degree programs have to apply to graduate for each of the two degree programs. For the combined degree program, the student must be sure to enroll in 3 *graduate* credits the term of graduation.

A summary of the major characteristics of each joint combined and dual degree program appears in **Table 2.13.2** below. Curriculum plans for the respective joint combined and dual degree programs are located in the eResource file.

Table 2.13.2 Summary of Total Credits Required and Credit Overlap of Joint Degrees

Combined Graduate and Professional Degrees	Total Credits Required	Maximum Overlap Credits
MHA/JD	127	21
MPH-CTS/MD	247	7
MHA/MD	262	10.5
MPH-VPH/DVM	211	12
Dual Graduate Degrees¹		
MHA/MBA	93	30
MHA/MPA	87.5	30
MPH-HBHP/MSW	91	19
Combined Bachelor and Master Degrees		
BSPH-EPH/MPH-EPH	158	12
BSPH-EPH/MPH-EPI	161	15
BSPH-EPH/MPH-VPH	155	12
BSPH-SOC/MPH-EPI	152	16
BSPH-SOC/MPH-HBHP	146	15

¹Ohio State Graduate School classifies MPH and MHA as “graduate” professional degrees

2.13.c. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.13.

Strengths:

- The University encourages interdisciplinary programs, including joint degrees.
- The College’s joint degree programs require that the MPH and MHA professional degrees meet all requirements for the individual degree programs.

Challenges/Weaknesses/Plan:

- The number of students enrolled in joint degree programs is below desired levels. Efforts to expand marketing the public degree programs within the University, as well as the 3+2 BSPH-MPH joint degree within the College, is part of the current marketing and enrollment plan.

CRITERION 2.14 DISTANCE EDUCATION OR EXECUTIVE DEGREES

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

2.14.a. Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

The College of Public Health offers one program in a non-traditional format: the 45 credit MPH degree Program for Experience Professionals (MPH-PEP). The MPH-PEP program is delivered via both on-site and online courses. The MPH-PEP program maximizes learning opportunities for working professionals who have minimal time to spend in physical classrooms or who do not live within the Central Ohio region.

2.14.b. Description of the distance education or executive degree programs, including an explanation of the model or methods used, the school's rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the school, and the manner in which it evaluates the educational outcomes, as well as the format and methodologies.

The 45 credit curriculum for the MPH-PEP program is similar to the traditional MPH

degree programs. However, MPH-PEP students do not specialize, other than through independent study opportunities and their choices for the practicum and culminating experience. However, effective summer 2017, MPH-PEP students will have the opportunity to declare an area of concentration in either Public Health Leadership and Organization or Population Health Management.

The MPH-PEP program aligns with the mission of the College, has a curriculum aligned with clearly articulated program competencies, has evaluation components as part of a robust assessment process, is subject to the same quality control as other programs, and provides opportunities for scholarly projects, research and/or practicum experiences.

The MPH-PEP degree provides practicum experiences that are influenced by and responsive to the characteristics, constraints and needs of the working adults enrolled. For example, the students are permitted to complete practice placements within their own organizations provided the unit and/or content is clearly distinguishable from their normal work duties. However, students are encouraged to seek opportunities outside their own organizations to gain experience in a variety of public health settings. Regardless of site chosen, this flexibility in placement is one of the highlights of the program.

All online and hybrid courses use the University-approved learning management system (LMS), Canvas™, to deliver content. This is the same platform that is available for on-site courses for distributing course materials, and thus students do not have to log into a separate system to view materials for courses offered in different modes. At a minimum, every course in the MPH-PEP program has a syllabus accessible via the University's online learning management system (Canvas™), though the all of the courses host a substantial proportion of their content, regardless of face-to-face classroom sessions or distance modes, on the Canvas LMS.

Of the required public health core courses for the MPH-PEP degree, three are currently offered fully online (PUBHBIO 6210 – Biostatistics; PUBHEPI 6410 – Epidemiology; PUBHHBP 7532 – Program Evaluation in Public Health). A fourth core course, PUBH6310 – Environmental Health, will be offered via distance mode in spring 2017. The structure of these courses vary, for example, PUBHEPI 6410 has weekly synchronous meetings while PUBHBIO 6210 does not, but all three deliver all course materials through the University-approved learning management system. For all three existing core courses offered via distance mode, asynchronous lectures are recorded using lecture-capture software that may include slide presentation, voice narration, and video recording. Lectures are then published and stored on the Colleg's secure media server, and links to recordings are inserted or embedded into the LMS site for each course. Transcripts of recorded audio are provided for accessibility for most courses. Additional materials such as readings, practice exercises, video recordings of sample problems being solved, external videos, etc. are also used to supplement recorded lectures. Students, faculty, and

teaching assistants communicate asynchronously through a variety of mechanisms including email, discussion boards, and course announcements on Canvas™. In addition, real-time communication is facilitated through Adobe Connect (web-conferencing software) for synchronous weekly meetings, office hours, and review sessions.

The majority of the remaining required didactic courses for the MPH-PEP degree are offered through a hybrid format to accommodate working professionals. Each semester-long course has monthly on-site, synchronous one-day sessions (6-8 hours) that are held on campus on Friday afternoons or Saturdays. Asynchronous and synchronous on-line modules for each class supplement these on-site meetings.

The College has one full-time instructional designer who provides one-on-one assistance for faculty developing hybrid and online courses and conducts several training sessions per year on relevant distance-learning topics. She also provides technical support for the LMS to students as needed.

The MPH-PEP program is the first and oldest MPH program offered in Ohio and dates back to 1990. It was originally delivered only via weekend classroom sessions and now has content supplemented using on-line delivery. This hybridized program combines learning both online and in a classroom and maximizes learning opportunities for working professionals who have minimal time to spend in physical classrooms. Holding classes on designated dates and supplementing about 50% of total didactic content with on-line content increases accessibility. Indeed, a workforce development needs assessment that involved surveying public health professionals from throughout Ohio showed that lack of access (i.e., time, distance) was one barrier obstructing pursuit of additional education and training.

When the program began there were relatively few options of this kind, especially in Ohio, and students were drawn from a multi-state area. In recent years, with six additional MPH degree programs in Ohio, including others that are accessible via hybrid and fully online delivery modes, applicants interested in an MPH degree have more options to consider where to apply. Partly because of the growth of alternative choices throughout the State, the number of applications for and matriculation into the MPH-PEP degree program declined. The College's desire to continue to be responsive to needs among the Ohio workforce the focus on a regional student base remains. Indeed, this is quite consistent with the College's Mission, and makes a very effective complement to our other workforce development activities offered through the College's Center for Public Health Practice. What is needed is a more accessible MPH-PEP degree, and the College's *2015-2017 Strategic Plan* includes a goal to convert the program to a full distance-learning mode by 2018.

Administrative and student support services are the same for the MPH-PEP program as they are for the other degree programs offered by the College. Additional technical support for students enrolled in online courses is available through both the College's Information Systems Office and the University's Office of Distance Education and eLearning.

The College already has strong and diverse evaluation tools in place as part of its overall assessment process. All online and hybrid courses undergo the same process of course approval as on-site courses, and when the delivery mode of a course section changes (e.g., implementation of an online section of an existing course) the syllabus must be approved by the College's Undergraduate or Graduate Studies Committee. Courses that are taught in multiple formats (e.g., one online section and one on-site section) have the same course learning objectives and content. Student evaluations for both online and on-site courses are conducted using the same system.

As use of distance learning modes increases the College is simultaneously implementing the Quality Matters™ Evaluation process that has been adopted by OSU (<https://odee.osu.edu/quality-matters>). Quality Matters™ is a inter-institutional organization that aims to improve online education through the use of a QM rubric against which hybrid and online courses can be evaluated. This process will be added to an already robust assessment process and applied to the College's courses regardless of mode of delivery (i.e., classroom; hybrid; fully distance learning).

Evaluation of student learning in the MPH-PEP hybrid and online courses is similar to that in the on-site courses. This includes the use of exams, quizzes, problem sets, papers, projects, and online discussion boards. Students have access to course grades and other feedback through an online grade book that is part of the learning management system.

2.14.c. *Description of the processes that the school uses to verify that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.*

Students admitted to the Ohio State University are issued a unique username and password that grants them access to various web-based resources. A shibboleth front end that talks to the university LDAP (directory) server, authenticates each student, creates a unique session and allows access to approved content/resources. The university enforces a strict/strong password policy with reset intervals every 180 days. This adheres to the university security policies and helps to ensure each student identity is protected and secure. In addition, in online courses students are required to sign an honor pledge on examinations. For example, for an online exam (delivered through Canvas) a student would be prompted with: *"I pledge on my honor that I have neither given nor received unauthorized aid on this examination. Typing my name in this box serves as an electronic signature of this pledge."*

2.14.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 2.14.

Strengths:

- The MPH Program for Experienced Professionals was developed to be a flexible program for professionals and, through increased access to online and hybrid course delivery options, is becoming more accessible for working adults to pursue an advanced degree in public health.
- The College, in alignment with University, plans to convert the MPH-PEP degree to a more accessible fully online program by 2018 to broaden reach to professionals across the state and country without other means for accessing national-recognized advanced degree programs.
- The addition of the University's new Quality Matters™ program as another evaluation component to the College's already comprehensive assessment process will help to ensure that course and program quality and integrity are sustained.

Challenges/Weaknesses:

- Growth of competing MPH degree programs in Ohio --there are now seven programs total-- has resulted in a decrease in the number of applicants and matriculants from all regions of the State
- Converting course content modules and courses delivered via conventional classroom modes to high quality distance learning courses for degree program delivery requires additional faculty time and effort, outside of the traditional faculty teaching responsibilities.
- OSU will be transitioning learning management systems in the next year. All courses on the current system will need to be moved to or redesigned to fit the new system, increasing course development time for both new and existing courses.
- Faculty will need to be trained on the University's new Quality Matters™ program in order to understand the Quality Matters™ rubric and its application to online course design.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE

CRITERION 3.1 RESEARCH

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

3.1.a. Description of the school's research activities, including policies, procedures and practices that support research and scholarly activities.

Development and dissemination of new knowledge via research is one of the major measures of excellence for the College of Public Health (CPH) and The Ohio State University (OSU). Indeed, research productivity and performance influences the College's ability to attract top quality faculty and excellent students. Fulfilling a major goal set by University leadership, OSU is now in the highest tier of public research universities in the country. The College strives to be among the national leaders in public health research, education, and service. Towards that end, research awards to the College over the past three years have totaled nearly \$20M. Similarly, research expenditures for the college have increased from \$6.2M in FY13 to \$7.2M in FY15. Over the past decade, the indirect cost recovery has increased from \$0.5M in FY05 to over \$2M in FY15. The average indirect cost rate has also increased from 20% to nearly 40% to date, reflecting a higher percentage of federally funded grants in our research portfolio. While the College's financial research metrics peaked in FY10, research expenditures have remained strong since then, exceeding \$7M in FY15, an increase of 33% over FY07 levels.

The CPH Office of Research

The Office of Research was established to encourage, facilitate and support the research efforts of CPH faculty and staff, as well as associated Centers and Divisions, to successfully accomplish the research goals of the College. The Office of Research is currently led by the Associate Dean for Research, Dr. Christopher Weghorst, who was appointed by the Dean in October of 2013. The Office is staffed by a Director of Research Administrative Services, Katherine Renick, MS, CRA; a research administrator, Scot Erbe; and a grants and contracts specialist, Valerie Delmonico. The Office's staff and administrators serve as primary liaisons between the College and the University Office of Sponsored Programs. College researchers consult the Office of Research grants staff when planning a proposal submission and then work closely with the Office throughout the period of the sponsored project. Research services provided by and administered through the College's Office of Research include:

- **Pre-Award Support**
 - Identifying and publicizing funding opportunities.
 - Developing budgets and assisting with drafting budget justifications.

- Completing the Authorization to Seek Off-Campus Funding (ePA-005), including coordinating questions surrounding sharing of award and expenditure credit, indirect cost rates, and cost sharing.
 - Identifying and helping to obtain required supporting documents for proposals such as biosketches, letters of support, and subaward documents.
 - Preparing forms and formatting the contents of the proposal (abstract, images, tables and appendices) to ensure compliance with sponsor requirements.
 - Serving as a liaison between the University Sponsored Program Officer (SPO) and the faculty for just-in-time requests, award negotiations, revising budgets and responding to funding cuts as requested by the sponsor.
- **Post-Award Support**
 - Assisting with all paperwork requirements to establish the project in the university system, appoint personnel, and monitor project financial records and reporting.
 - Completing personnel expenditures transfers as needed to ensure faculty and staff effort is properly charged to the project.
 - Arranging consultant and subaward agreements.
 - Working with faculty, research staff, and division coordinators to assist with procurement of supplies and materials.
 - Advising faculty on allowable costs and budget latitude.
 - Helping faculty complete progress (non-competing renewals) and final reports.
 - Facilitating compliance activities such as effort certification, conflict of interest certification, and training in protection of human and animal subjects.
- **Laboratory Health and Safety and Regulatory Compliance Support**
 - Implementing and providing training on University Environmental Health and Safety policies and guidelines.
 - Maintaining safety records for laboratory based personnel.
 - Assisting with annual and semi-annual laboratory inspections.
 - Assisting with laboratory equipment maintenance, operations and repair issues.

Special Office of Research Initiatives to Promote Research

In addition to the services listed above, the College's Office of Research has several supplemental activities and services designed to advance the research goals of the College. These special initiatives coordinated by the Office of Research include:

- ***Funding for Research Proposal Reviews*** – In an effort to increase the competitiveness of research proposals submitted by College faculty, the Office of Research provides opportunities and funding for external reviews. Currently, faculty have two options for the external review of a research proposal: 1) a Traditional (NIH-style) Review of a near final draft or 2) an In-depth Pink/Red Team Review of a developing proposal. *Traditional Reviews* are provided by individual subject matter experts from external institutions that are suggested by either the faculty member's division chair or by the faculty member themselves. The Office of Research manages the process, making contact with potential reviewers and communicating expectations for brief written critiques outlining the strengths, weaknesses and scientific and technical merits of the proposal. *In-depth Pink/Red Team Reviews* are typically more comprehensive, providing several rounds of interactive sessions of review and feedback from multiple perspectives. The Office of Research has vetted two external consulting firms

that are able to provide this more intensive level of review. These consulting firms typically create an external review team, comprised of experts focused on 1) the discipline-specific content, 2) institution-specific funding mechanisms, and 3) overall grantsmanship that work directly with the faculty member. While significantly more costly than a traditional review, the Office of Research develops a collaborative funding strategy between the Office, the faculty member and the faculty's division chair to cover the costs. In general, faculty wanting to take advantage of the external review program are encouraged to contact the Office of Research early in the process so that adequate time is available for the review and subsequent revision of the research plan.

- **Dean's Discovery Fund** – In an effort to facilitate innovative and high impact research, the College offers seed grant funding to early career faculty (assistant and associate professors) and mentor teams that enable them to develop preliminary data for highly competitive R01 or equivalent research proposals. The competitive seed grant program is offered annually and proposals are evaluated by both internal and external reviewers. Since its establishment in 2014, the College has awarded five Deans Discovery Fund grants ranging from \$10,000 to \$31,000 and totaling \$106,000.
- **Collaborative Postdoctoral Researcher Program** – This program is primarily designed to 1) foster new interdisciplinary collaborations between CPH faculty and faculty in other OSU units, 2) addresses targeted areas of research opportunity and 3) provide a mechanism for developing and cross-training postdoctoral researchers. A secondary objective is to develop a track record of postdoctoral training by CPH faculty that can be reported as supporting evidence in the submission of a future College-based, NIH T32 training grant proposal. The two-year postdoctoral positions are co-funded equally by the College and partnering OSU unit at the current NIH postdoc salary scale. College faculty are encouraged to consider the targeted areas of research opportunity that are outlined in the College's Strategic Plan and pursue a collaborative relationship with a faculty member from another OSU unit. It is expected that a pre-identified or future postdoctoral candidate will serve as a bridge and liaison between two OSU college faculty groups by working on a research topic that is mutually beneficial to all participants. The collaborative postdoctoral researcher is offered annually and proposals are evaluated by both internal and external reviewers. Since its establishment in 2014, the College has awarded four collaborative groups a postdoctoral researcher position via this novel mechanism.
- **Faculty Development Seminars** – The Office of Research routinely offers training opportunities in topical areas relevant to faculty research. Past events have included a day-long grant writing seminar and shorter sessions on talking to program officials, the new NIH biosketch, MyNCBI and SciENcv, IRB processes and procedures, citation managers, systematic reviews, career development awards, data use agreements, external review options, and corporate and foundation relations.

College Initiatives to Promote Research

- ***Funding for Special Research Assignments and Faculty Professional Leave*** – The College has a competitive review process in place to award and fund faculty professional leave. These mechanisms release the faculty member from traditional assignments and provide a period of uninterrupted time for professional development, research and scholarship. By way of example, Dr. Sarah Anderson is completing a one-year professional leave that allowed her to work closely with three large international longitudinal cohorts, to better understand the determinants of obesity and health across the life course. Dr. Bo Lu recently completed a one semester leave, collaborating with a colleague at the University of Pennsylvania to combine propensity score methods with Bayesian nonparametric methods to better estimate heterogeneous treatment effects.
- ***Financial Incentives for Research Productivity*** - The College also provides incentives for faculty members to pursue sponsored research opportunities. The faculty workload policy in the College's *Pattern of Administration* includes an incentive plan with two principal elements. Faculty members who meet targeted levels of salary support are eligible to receive special discretionary funds to support their research. These targets are based on appointment type (rather than rank) and are currently set at 33% for 9-month faculty and 50% for 12-month faculty. In addition, the policy creates the possibility of one-time bonuses for especially significant achievements.

Research Policies and Procedures

University-Wide Policies: University-wide policies governing many aspects of the research enterprise of OSU are available on the web:

- Proposal development policies: <http://osp.osu.edu/development/>
- Project administration policies: <http://osp.osu.edu/administration/>
- Human subjects research protocols: <http://orrrp.osu.edu/irb/>
- Animal research protocols: <http://orrrp.osu.edu/iacuc/>
- Institutional Biosafety Committee: <http://orrrp.osu.edu/ibc/>
- Conflict of Interest: <http://orc.osu.edu/regulations-policies/coi/>
- Effort Certification: <http://rf.osu.edu/e-cert/index.cfm>
- Intellectual property: <https://tco.osu.edu/tools-resources/intellectual-property/>

The University also has mechanisms available to promote faculty scholarship and training. These mechanisms, faculty professional leave (FPL) and special research assignment (SRA), are intended to provide faculty release time to focus on acquiring new skills, methodologies and training with other scholars, either within the university or extramurally. Since 2009, four faculty members have been granted a SRA and one faculty member has completed a FPL.

College-Specific Policies: The College primarily follows University policies and procedures in research, implementing them in ways that fit the situation of the College. General policy areas that are also monitored at the College level include project approval routing (the authorization to seek off-campus funding), verification of eligibility to serve as a principal investigator, cost sharing agreements, facilities and administrative costs, and human and animal subjects requirements.

Three important areas of policy for the College are the 1) allocation of award and expenditure credit because of the high volume of collaborative research, 2) the recovery of indirect costs, and 3) restrictions on the acceptance of tobacco funding:

- ***Award and Expenditure Credit*** – An important part of the authorization to seek off-campus funding (also known as the ePA-005 electronic form) is the allocation of award and expenditure credit. Award credit allocations reflect intellectual contributions to a project when faculty members from more than one unit are involved. The university uses award allocation as a metric to evaluate the productivity of the research enterprise across departments and colleges.

Expenditure credit reflects how various university resources would be utilized by the proposed study, and should correspond to how direct and indirect cost expenditures are allocated across departments, or divisions, if more than one unit is involved. Ultimately, the expenditure credit allocation determines how both indirect cost recovery and cost overruns are distributed or shared between participating units.

While award credit allocations are often equal to expenditure credit allocations, that is not always the case. Both percentages are negotiated by the participating units to reach a balance that is acceptable to all involved.

The College of Public Health expects and requires that all faculty involved in a sponsored project be listed on the ePA-005 and receive an appropriate portion of the award and expenditure credit commensurate with their degree of involvement/responsibility in the proposed project. Tenure-initiating units for PIs and co-Investigators must be listed even if the credit allocations are 0%.

- ***Recovery of Indirect Costs*** – Indirect costs are those costs associated with infrastructure that support the research enterprise of the College (e.g., buildings and their maintenance, libraries, and services such as grants management, human resources, information technology, etc.) that cannot be easily allocated to a specific project, yet are a real part of the cost of doing research. The University's approved institutional indirect cost rates are negotiated with the U.S. Department of Health and Human Services. There are separate Federally-approved rates for organized research (currently 54%), instruction (currently 52%), other sponsored activities (currently 38%) and off-campus programs (currently 26%).

It is important that indirect costs be recovered to the maximum extent possible in order to adequately support the research mission of the College. Investigators are encouraged to submit proposals that provide for full indirect cost recovery whenever possible. For proposals to non-Federal sponsors (e.g. foundations, state and local governments), the College will accept a rate lower than the university's Federally-negotiated rates if the sponsor's allowable indirect rate (or policy of not allowing indirect costs at all) is documented and applied to all applicants. Deviations from a sponsor's published rates are strongly discouraged; a faculty member may request that an exception be considered by the Associate Dean of Research if sufficient justification exists for such an exception.

- ***Policy Against Accepting Tobacco Money for Research*** – The OSU CPH will not accept funds directly from the tobacco industry. Further, any auxiliary, joint or adjunct faculty member who accepts such funding will immediately forfeit their faculty appointment in the College. The full policy is located online at <http://cph.osu.edu/about/governance/tobacco-funding-policy>.

3.1.b. *Description of current research undertaken in collaboration with local, state, national or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.*

College of Public Health researchers have extensive experience collaborating with health agencies at all levels, to protect and improve the health of the people of Ohio, the nation and the world. A summary of funding sources during the past three years is provided in **Table 3.1.1**. All of these externally funded grants have formal research agreements and contracts, which have been negotiated and approved by the University Office of Sponsored Programs.

College of Public Health-Based and -Associated Research Centers

Listed below are the College-based and College-associated Research Centers that account for a significant percentage of the community-based research activities. Representative research projects associated with each Center are also provided.

- ***Center for Health Outcomes, Policy and Evaluation Studies (HOPES)*** – The Center in The Ohio State University College of Public Health was established in 1994 to respond to the needs of health care policy decision makers at the local, state, and national levels through applied health services research. Our constituencies consist of state and local governments, federal agencies, health care delivery systems, health care industry (pharma, device-makers, insurers, etc.), employers, professional associations, foundations,

Table 3.1.1 Sources of Research Funding

Source	Agency	FY14	FY15	FY16
Federal	NIDDK	\$9,511	\$245,741	\$193,758
	NICHHD	\$608,067	\$23,945	\$804,696
	NIAID	\$114,375	\$114,375	\$16,940
	NIEHS	\$366,100	\$331,259	
	NCI	\$4,670,744	\$2,865,608	\$3,264,018
	NLM	\$74,244		\$104,886
	AHRQ			\$221,728
	CDC	\$271,650		
	NIOSH	\$442,540		
	HRSA	\$105,763	\$43,000	
	EPA	\$306,733		
	NSF	\$48,508	\$125,111	\$11,435
	National Energy Technology Lab			\$116,700
	State/Local	OH Bureau of Workers' Compensation		
OH Department of Health		\$132,925	\$301,238	\$37,500
OH Department of Higher Education				\$1,990,042
OH Department of Medicaid		\$30,800	\$208,018	\$77,193
OH Water Development Authority		\$81,700		\$109,971
OH Dept of Mental Hlth & Addiction Svcs			\$100,000	
City of Columbus				\$45,500
Lucas County Health Department		\$13,900		
Public Health - Dayton & Montgomery Cnty			\$19,800	\$26,686
Stark County Health Department		\$2,100	\$9,100	\$8,700
Universities		Mount Sinai	\$109,941	\$60,255
	University of Delaware		\$138,303	
	University of Illinois		\$94,999	\$98,292
	University of Kentucky	\$26,012	\$33,922	\$36,548
	University of Minnesota	\$20,341	\$25,033	\$39,581
	University of North Carolina		\$408,092	\$22,520
	Yeshiva University	\$17,296	\$23,573	\$18,511
Foundations	Academy Health		\$10,000	
	Assn State and Territorial Health Officials	\$7,000	\$8,240	
	Brigham & Women's Hospital	\$70,430	\$11,738	
	Cincinnati Children's Hospital		\$44,993	\$45,825
	Fred Hutchinson Cancer Research Center	\$56,780	\$28,124	\$49,288
	Greenwall Foundation		\$142,821	
	George Institute for Global Health			\$22,048
	Murdoch Children's Research Institute	\$53,543	\$99,209	\$30,000
	Nationwide Children's Hospital	\$100,146	\$56,451	\$52,887
	The Breast Cancer Research Foundation	\$24,000	\$25,000	\$25,000
	Robert Wood Johnson Foundation		\$74,043	
Industry	Ambassador Software Works	\$0	\$0	\$61,215
	Geosyntec Consultants, Inc.		\$8,226	
	United Technologies Aerospace Systems	\$17,500		

and community-based organizations. The scope of policy areas addressed by the Center for HOPES includes patient care improvement, health plan satisfaction, health care services for vulnerable populations, efficiency and effectiveness of health care delivery, public-sector health care financing, state health care reform initiatives, and evaluations of the community benefits derived from specific health care practices and programs. Along with this work, the Center for HOPES supported scientific inquiry and academic excellence by involving students in its research, hosting research seminars for the university and practice community, and sponsoring a doctoral research traineeship for study leading to the PhD degree. Recently the Center for HOPES completed a large evaluation study for the Ohio Department of Health (award CSP909514 in the amount of \$303,807) designed to assess the statewide impact of several programs including the creating healthy communities, early childhood obesity prevention, and injury prevention programs.

- ***Center of Excellence in Regulatory Tobacco Science (OSU-CERTS)*** – The Center is one of 14 funded Tobacco Centers of Regulatory Science (award P50CA180908 in the amount of \$18.9M) established in 2013 through a cooperative program between FDA and NIH. OSU-CERTS serves as a national leader in providing relevant scientific data to support regulatory decision-making and in training the next generation of tobacco regulatory scientists. The overall theme of OSU-CERTS is to understand the reasons for underlying tobacco-product preferences, especially dual and poly-use, and how these reasons influence use, toxic exposure and dependence/cessation, in an environment of ever-changing diverse types of tobacco products. This research program takes into account the biological, psychological, economic and public health implications associated with tobacco use and the industry's marketing of products to consumers. Eighteen scientists from six OSU colleges and the Comprehensive Cancer Center (OSU-CCC) compose the core of OSU-CERTS. In addition, there are collaborators from four other universities and organizations.

OSU-CERTS is comprised of four interrelated research projects, numerous pilot projects, one administrative supplement, and five resource cores. The research projects and pilot studies are as follows:

Project 1: Urban and Rural Male Youth Cohort Study of Tobacco Use (PI: Amy Ferketich, Professor in the Division of Epidemiology).

Project 2: Understanding Adolescent Trajectories, Exposures and Susceptibilities.

Project 3: Diversity of Tobacco Products Used and Purchased (PI: Mary Ellen Wewers, Professor Emerita in the Division of Health Behavior and Health Promotion).

Project 4: Comprehension of Health Risks in More and Less Arousing Affective Contexts.

Pilot: Comprehension of Health Risks in More and Less Arousing Affective Contexts: Appalachian Sample.

Pilot: Content Analysis and Legal Review of Online E-Cigarette Advertising from Manufacturers, Retailers and Affiliates (PI: Elizabeth Klein, Associate Professor in the Division of Health Behavior and Health Promotion).

Pilot: Effects of Electronic Nicotine Delivery Systems on the Oral Microbiome.

Pilot: Effects of Electronic Cigarette Use on the Human Lung.

Pilot: Using Functional Neuroimaging to Assess the Reward-Value of Flavored Tobacco Product Advertisements in Adolescents.

Supplement: Tailoring and interactivity website features and their impacts on smokers' knowledge (PI: Elizabeth Klein, Associate Professor in the Division of Health Behavior and Health Promotion).

In addition, five cores provide shared resources to investigators to assure the conduct of high-quality tobacco regulatory science. The Administrative Core fosters multidisciplinary and innovative research by promoting integration of the center's projects and cores, and promotes interaction between other funded P50 centers. The Recruitment, Survey and Retention Core provides a centralized resource for recruitment and selection of participants to all projects, assists with the design of data collection instruments and data intake, enhances retention of study participants, oversees data collection and data quality, and facilitates the flow of collected data to the Biostatistics and Data Resources core. The Biostatistics and Data Resources Core is a collaborative centralized resource of expertise in biostatistics and data processing, ensuring that statistical issues are addressed at all levels of investigation, maintaining data quality, accessibility, and security, and dissemination of resources and results through publications and data sharing. The Developmental and Pilot Research Core fosters exploration of new conceptual, methodological and collaborative tobacco regulatory science projects by funding pilot studies. And finally, the Research Training and Education Core promotes training of post-doctoral researchers, students and junior faculty in all aspects of tobacco regulatory science.

- **Center for Clinical and Translational Science (CCTS)** - The Ohio State University has a Clinical and Translational Science Award (CTSA) from the National Institutes of Health National Center for Advancing Translational Sciences. With this award, OSU has created the Center for Clinical and Translational Science (CCTS) to improve the quality of care for all patients in the community by developing a transformative clinical and translational science discipline that is at the core of the OSU academic culture. The goal of the CCTS is to speed the translation of new scientific discoveries to enhance patient outcomes. Dr. Allard Dembe leads evaluation for the CCTS, and Dr. Thomas Wickizer leads Comparative Effectiveness Research (CER) efforts for the CCTS. Dr. Alison Norris, Assistant Professor in the Division of

Epidemiology, was successful in competing for a KL2 career development award (KL2RR025754 in the amount of \$230,593) from the CCTS. Her project, “The role of decision making in sexual and reproductive health behaviors” implemented decision science theories and concepts through the development of a novel instrument to measure three aspects of decision-making: 1) affect, 2) relationship power, and 3) past experience among a cohort of women in Malawi.

3.1.c. A list of current research activity of all primary faculty identified in Criterion 4.1.a., including amount and source of funds for each of the last three years. These data must be presented in table format and include at least the following information organized by department, specialty area or other organizational unit as appropriate to the school: a) principal investigator, b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year’s award. See CEPH Data Template 3.1.1; only research funding reported here. Extramural funding for service or training/continuing education grants should be reported in Template 3.2.2 (funded service) or Template 3.3.1 (funded training/workforce development), respectively.

The research activities of College researchers for FY2014 to FY2016 are presented in **Tables 3.1.2a** (CPH faculty as PI) and **3.1.2b** (Non-CPH faculty as PI). Briefly, our faculty secured \$22,060,618 in external funding from federal, state, local and foundation sources from FY2014 through FY2016 (FY14 \$8,113,097; FY15 \$5,856,293; FY16 \$8,091,228). Expectations for faculty research are outlined in the College’s *Appointments, Promotion and Tenure (APT) Criteria and Procedures* document. Faculty are expected to obtain grants and contracts to support investigations of significant public health problems. While funds may be derived from a variety of sources, the competitiveness of the source and role of the faculty member are the major criteria for evaluating the research. Faculty tenure and promotion at all ranks is based in part on evidence of both a history of research excellence and the likelihood of continued future research excellence, as demonstrated by serving as principal investigator or co-principal investigator of externally-funded, peer-reviewed awards (specifically Federal sources such as NIH, CDC, NSF, EPA, DOD, or foundation sources such as Robert Wood Johnson Foundation or the American Cancer Society).

Table 3.1.2a Research Activity of Faculty – externally funded projects with a College of Public Health Principal Investigator

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
BIOSTATISTICS									
Informatic tools for predicting an ordinal response for high-dimensional data	Archer, Kellie (BIO)	National Library of Medicine, R01LM011169	7/1/2016 to 8/31/2017	\$104,886	\$0	\$0	\$104,886	N	N
International, prospective study of the association between exposure data and childhood cancer	Lemeshow, Stanley (BIO)	Murdoch Children’s Research Institute, M1300049/M1300750/ M1400725	2/1/2013 to 6/30/2015	\$275,335	\$76,490	\$141,727	\$0	N	N
Big data initiative	Lemeshow, Stanley (BIO)	George Institute for Global Health, PO 3593	7/1/2015 to 12/31/2015	\$22,048	\$0	\$0	\$22,048	N	N
Modeling patient satisfaction using variables included in the Ohio State medical center electronic medical records	Lemeshow, Stanley (BIO)	Ambassador Software Works	3/1/2015 to 12/31/2016	\$61,215	\$0	\$0	\$61,215	N	Y
Propensity score-based methods for CER using multilevel data: What works best when	Lu, Bo (BIO)	Cincinnati Children's Hospital Medical Center, 134697 (Prime: PCORI)	1/1/2015 to 12/31/2016	\$90,818	\$0	\$44,993	\$45,825	N	N
National study of undertriage of trauma patients	Lu, Bo (BIO)	Research Institute at Nationwide Children's Hospital, 938313 (Prime: AHRQ)	9/30/2013 to 9/29/2015	\$17,550	\$0	\$17,550	\$0	N	N
Causal inference for treatment effect using observational healthcare data with unequal sampling weights	Lu, Bo (BIO)	Agency for Healthcare Research & Quality	9/30/2015 to 7/31/2019	\$919,238	\$0	\$0	\$221,728	N	N
Statistical methods for analyzing antigen receptors data	Rempala, Grzegorz (BIO)	National Cancer Institute, R01CA152158	2/6/2013 to 4/30/2016	\$519,894	\$417,797	\$0	\$0	N	Y
RAPID-Stochastic Ebola modeling on dynamic contact networks	Rempala, Grzegorz (BIO)	NSF Division Mathematical Sciences, DMS-1513489	1/15/2015 to 12/31/2015	\$176,618	\$0	\$176,618	\$0	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
RCT for smoking cessation in medical schools	Shoben, Abigail (BIO)	University of Massachusetts Medical School, 6114210/RFS900196 (Prime: National Cancer Institute)	7/6/2009 to 5/31/2014	\$77,031	\$23,916	\$0	\$0	N	N
ENVIRONMENTAL HEALTH SCIENCES									
Exploring an epigenetic link for occupational woodsmoke exposure induced inflammatory response among wildland firefighters	Adetona, Olorunfemi (EHS)	University of Kentucky, 3200000109-16-036	7/1/2015 to 6/30/2016	\$11,999	\$0	\$0	\$11,999	N	N
Occupational exposure of structural firefighters and cancer risk	Adetona, Olorunfemi (EHS); Hood, Darryl (EHS); Olivo-Marston, Susan (EPI)	Ohio Bureau of Worker's Compensation, Agmt dated 6/20/16	6/1/2016 to 5/31/2018	\$267,882	\$0	\$0	\$267,882	N	Y
Ohio Public Health Training Center	Bisesi, Michael (EHS)	Health Resources & Services Administration, UB6HP20203	9/1/2010 to 8/31/2014	\$2,061,329	\$111,329	\$0	\$0	Y	Y
MEDTAPP Health Care Access	Bisesi, Michael (EHS)	Ohio Department of Medicaid, ODM201409	7/1/2013 to 6/30/2015	\$166,570	\$81,810	\$86,760	\$0	N	Y
Intergovernmental Personnel Act (IPA) assignment for the Immediately Dangerous to Life or Health (IDLH) project	Bisesi, Michael (EHS)	National Institute for Occupational Safety & Health, 13IPA1313351	8/5/2013 to 8/4/2014	\$18,499	\$18,499	\$0	\$0	N	N
Region V Public Health Training Center Collaborative	Bisesi, Michael (EHS)	University of Illinois, Agreement Dated 12/05/14 (Prime: Health Resources & Services Administration)	9/1/2014 to 8/31/2015	\$188,292	\$0	\$90,000	\$98,292	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Extreme event impacts on air quality and water quality with a changing global climate	Lee, Jiyoung (EHS)	Environmental Protection Agency, RD 83519201	6/1/2012 to 5/31/2016	\$748,902	\$479,271	\$0	\$0	N	Y
Microbial source tracking on San Diego water samples	Lee, Jiyoung (EHS)	Geosyntec Consultants, Inc., Project LA022824 (Prime: San Diego County)	12/11/2013 to 12/31/2014	\$8,226	\$0	\$8,226	\$0	Y	Y
Ecosystem services of wetlands for protecting microbial water quality of Ohio beaches from contamination sources	Lee, Jiyoung (EHS)	Ohio Water Development Authority, 6558	1/1/2014 to 6/30/2016	\$116,714	\$0	\$0	\$0	Y	Y
ArcGIS study of disease and water quality data	Lee, Jiyoung (EHS)	Ohio Department of Health, PREV-31253 (Prime: Centers for Disease Control & Prevention)	7/1/2014 to 8/31/2014	\$4,066	\$0	\$4,066	\$0	N	Y
Rapid and sensitive microcystin detection	Lee, Jiyoung (EHS)	Ohio Lake Erie Protection Fund, SG 472-2014	4/24/2014 to 11/1/2015	\$15,000	\$15,000	\$0	\$0	Y	Y
Ecosystem services of wetlands for protecting microbial water quality of Ohio beaches from contamination sources	Lee, Jiyoung (EHS)	Ohio Water Development Authority, 6558	1/1/2014 to 12/31/2015	\$116,714	\$116,714	\$0	\$0	Y	N
Microbial removal efficiency of airborne portable water system	Lee, Jiyoung (EHS)	United Technologies Aerospace Systems, Portable water filtration	2/18/2013 to 2/18/2016	\$35,000	\$17,500	\$0	\$0	N	Y
Paradigm shift in understanding the ecology of cyanobacteria and toxins: Virus-host dynamics in lakes	Lee, Jiyoung (EHS)	Ohio Water Development Authority, Agmt dated 1/4/16	1/4/2016 to 1/3/2019	\$157,101	\$0	\$0	\$157,101	Y	N
Air pollution on adiposity and vascular dysfunction: White or brown matters?	Sun, Qinghua (EHS)	National Institute of Environmental Health Sciences, R01ES018900	8/19/2011 to 3/31/2017	\$1,724,894	\$367,144	\$343,125	\$0	N	Y
Inhibition of rat oral carcinogenesis by dietary black raspberries	Weghorst, Christopher (EHS)	National Cancer Institute, R21CA175836	4/1/2013 to 3/31/2016	\$359,882	\$210,623	\$0	\$0	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Interactive Omics: Black raspberry metabolites and the oral microbiome in smokers	Weghorst, Christopher (EHS)	National Cancer Institute, U01CA188250	9/1/2014 to 8/31/2019	\$3,325,447	\$0	\$636,819	\$833,524	N	N
Inherited and somatic alterations of the TGF- β ligand and receptor complex in cervical cancer (Project 1 - Reducing Cervical Cancer in Appalachia)	Weghorst, Christopher (EHS)	National Cancer Institute, P50CA105632	5/1/2010 to 4/30/2016	\$1,196,565	\$223,745	\$180,438	\$0	Y	N
EPIDEMIOLOGY									
Epidemiology of parenting and childhood obesity	Anderson, Sarah (EPI)	National Institute Diabetes & Digestive & Kidney Diseases, R21DK104188	4/15/2015 to 3/31/2017	\$439,499	\$0	\$245,741	\$193,758	N	Y
Pharmacokinetic and pharmacodynamic (PK-PD) studies of cardiovascular drugs	Binkley, Philip (EPI)	University of Florida, UFDSP00010554 (Prime: FDA)	9/10/2014 to 8/31/2017	\$214,559	\$0	\$26,935	\$59,043	N	N
Urban and rural male youth cohort study of tobacco use (Project 1 - OSU Center of excellence in regulatory tobacco science)	Ferketich, Amy (EPI)	National Cancer Institute, P50CA180908	9/19/2013 to 8/31/2018	\$1,479,137	\$310,147	\$340,548	\$239,606	Y	N
Cultural influence on determinants of marital satisfaction	Ferketich, Amy (EPI)	University of Bonn, Agreement dated 11/05/2014 (Prime: German Research Foundation)	11/1/2014 to 10/31/2015	\$4,000	\$0	\$4,000	\$0	N	N
Stroke prevention in healthcare delivery environments	Foraker, Randi (EPI); Shoben, Abigail (BIO)	Pfizer, Inc., Grant ID 046214	1/1/2013 to 4/30/2015	\$473,540	\$0	\$0	\$0	N	Y
Promoting condom use among women in established relationships	Gallo, Maria (EPI)	National Institute of Child Health & Human Development, R01HD084637	6/1/2016 to 3/31/2021	\$1,643,485	\$0	\$0	\$258,454	Y	N
Editorship of "Sexually Transmitted Diseases"	Miller, William (EPI)	American Sexually Transmitted Disease Association	5/26/2016 to 5/25/2019	\$75,000	\$0	\$0	\$75,000	N	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Epidemiological and genetic predictors of postpartum mood disorders	Miller, William (EPI)	University of North Carolina, 5103869 (Prime: National Institute of Mental Health)	3/1/2016 to 3/31/2018	\$118,082	\$0	\$0	\$4,600	N	N
HPTN 074 Leadership	Miller, William (EPI)	Family Health International, PO16001927 (Prime: NIAID)	3/1/2016 to 11/30/2016	\$41,401	\$0	\$0	\$41,401	N	N
The effect of childhood and lifetime obesity and colon carcinogenesis	Olivo-Marston, Susan (EPI)	National Cancer Institute, K22CA140860	9/12/2011 to 8/31/2015	\$459,017	\$152,726	\$0	\$0	N	Y
CALGB - Chair support, cancer control and health outcomes committee	Paskett, Electra (EPI)	Brigham & Women's Hospital Inc, 105711 PEA (Prime: National Cancer Institute)	7/2/2010 to 7/31/2014	\$288,719	\$70,430	\$11,738	\$0	N	N
Patient navigation in cancer treatment clinical trials	Paskett, Electra (EPI)	Education Network to Advance Cancer Clinical Trials, Agreement dated 09/17/13	9/1/2013 to 3/31/2014	\$5,000	\$5,000	\$0	\$0	N	N
Women's health initiative cancer survivor cohort	Paskett, Electra (EPI), Pennell, Michael (BIO)	Fred Hutchinson Cancer Research Center, 801218 (Prime: National Cancer Institute)	2/15/2013 to 1/31/2016	\$706,268	\$298,840	\$148,020	\$259,408	N	N
Alliance NCORP research base - Clinical Trials	Paskett, Electra (EPI)	Mayo Foundation for Medical Education & Research, Agreement Dated 11/04/14 (Prime: National Cancer Institute)	8/1/2014 to 7/31/2015	\$190,305	\$0	\$88,580	\$101,725	N	N
Reducing cervical cancer in Appalachia	Paskett, Electra (EPI); Wewers, Mary Ellen (HBHP); Weghorst, Christopher (EHS); Katz, Mira (HBHP)	National Cancer Institute, P50CA105632	5/1/2010 to 4/30/2016	\$8,964,042	\$3,538,321	\$0	\$0	Y	Y
NU NEIGHBORS: A social science partnership to reduce cancer disparities, sustaining the region 5 BMaP partnership in minority biospecimen/biobanking	Paskett, Electra (EPI)	Northwestern University, 60032640 OSU (Prime: National Cancer Institute)	9/1/2013 to 8/31/2014	\$18,470	\$0	\$18,470	\$0	Y	N

Table 3.1.2A Research Activity of Faculty – externally funded projects with a College of Public Health Principal Investigator

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Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Salud y nutricion, armonia y bienestar	Paskett, Electra (EPI)	Ohio Commission on Minority Health, MHM 15-38	9/18/2014 to 4/30/2015	\$1,065	\$0	\$1,065	\$0	Y	N
Sister screen saver program	Paskett, Electra (EPI)	Susan G Komen Breast Cancer Foundation of Columbus, CGA(B)-2015-OH102-tOSU25-00006	4/1/2015 to 3/31/2016	\$54,153	\$0	\$54,153	\$0	Y	N
Way finder program	Paskett, Electra (EPI)	Susan G Komen Breast Cancer Foundation of Columbus, CGA(E)-2015-OH102-tOSU25-00002	4/1/2015 to 3/31/2017	\$199,939	\$0	\$199,939	\$0	Y	N
OSUCCC breast cancer screening & early detection program	Paskett, Electra (EPI)	Susan G Komen Breast Cancer Foundation of Columbus, CGA-2013-OH102-THJA25-00015 and CGA-2014-OH102-tOSU25-00008	4/1/2013 to 3/31/2015	\$127,553	\$76,892	\$50,661	\$0	Y	N
Breast cancer prevention through nutrition program (BCRF #6)	Paskett, Electra (EPI)	The Breast Cancer Research Foundation, LTR AGRMT DTD 10/02/2008	10/1/2006 to 9/30/2016	\$2,383,431	\$240,000	\$250,000	\$250,000	N	N
Appalachia community cancer network II - centers for reducing cancer disparities	Paskett, Electra (EPI), Mira Katz (HBHP)	University of Kentucky, 3048111939-15-046 UKY (Prime: National Cancer Institute U54)	9/1/2010 to 8/31/2016	\$1,525,214	\$216,763	\$282,680	\$204,579	Y	N
Comparative effectiveness of interventions to improve screening among rural women	Paskett, Electra (EPI)	National Cancer Institute, R01CA196243	8/13/2015 to 7/31/2020	\$3,164,059	\$0	\$0	\$656,180	Y	N
The Ohio State University breast cancer disparities research training program	Paskett, Electra (EPI)	Susan G Komen Breast Cancer Foundation, GTDR15334082	8/17/2015 to 8/16/2018	\$405,000	\$0	\$0	\$135,000	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Prospective observational evaluation of the association between the day 2 vancomycin exposure and failure rates among adult hospitalized patients with MRSA bloodstream infections - PROVIDE	Stevenson, Kurt (EPI)	Duke University, 6232-PROVIDE (Prime: National Institute of Allergy & Infectious Diseases)	12/1/2014 to 11/30/2019	\$4,500	\$0	\$4,500	\$0	N	N
Randomized controlled trial for the treatment of extensively drug-resistant gram-negative bacilli	Stevenson, Kurt (EPI)	Wayne State University, WSU14010 (Prime: National Institute of Allergy & Infectious Diseases)	4/15/2013 to 8/31/2016	\$326,023	\$303,170	\$22,853	\$0	N	N
Optimizing clinical use of Polymyxin B: teaching an old drug to treat superbugs	Stevenson, Kurt (EPI)	Wayne State University, WSU15099 (Prime: National Institute of Allergy & Infectious Diseases)	6/19/2015 to 5/31/2020	\$446,395	\$0	\$0	\$68,943	N	N
Conditional cash transfers to increase uptake of and retention of PMTCT services	Yotebieng, Marcel (EPI)	National Institute Child Health & Human Development, R01HD075171	8/3/2013 to 7/31/2015	\$608,067	\$608,067	\$0	\$0	Y	N
Long term outcomes of therapy in women initiated on lifelong ART because of pregnancy in DR Congo	Yotebieng, Marcel (EPI)	National Institute Child Health & Human Development, R01HD087993	6/1/2016 to 5/31/2021	\$2,811,400	\$0	\$0	\$576,354	Y	N
Central Africa leDEA	Yotebieng, Marcel (EPI)	Yeshiva University, 31536K (Prime: National Institutes of Health)	7/1/2013 to 6/30/2015	\$59,380	\$17,296	\$23,573	\$18,511	Y	N
HEALTH BEHAVIOR & HEALTH PROMOTION									
NU NEIGHBORS: A social science partnership to reduce cancer disparities	Katz, Mira (HBHP)	Northwestern University, 60032638 OSU	9/1/2014 to 8/31/2015	\$15,800	\$0	\$0	\$15,800	Y	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Campus based vending research	Kaye, Gail (HBHP)	Research Institute at Nationwide Children's Hospital, Agmt. dtd 10/9/09	10/8/2009 to 12/31/2015	\$239,526	\$68,436	\$34,218	\$0	N	Y
Health impact assessment: Alignment of affordable housing physical inspection policies in Ohio	Klein, Elizabeth (HBHP)	Ohio Housing Finance Agency, Agreement dated 1/4/12 (Prime: Pew Charitable Trusts)	1/1/2012 to 12/31/2013	\$80,422	\$26,597	\$0	\$0	Y	N
Health warning label impact on Appalachian tobacco users: An eye tracking study (Supplement to Tobacco cessation interventions with Ohio Appalachian smokers)	Klein, Elizabeth (HBHP); Ferketich, Amy (EPI); Shoben, Abigail (BIO); Wewers, Mary Ellen (HBHP)	National Cancer Institute, R01CA129771	9/1/2012 to 8/31/2014	\$1,070,254	\$480,239	\$0	\$0	Y	Y
Tailoring and interactivity website features and their impacts on smokers' knowledge (Supplement to OSU Center of excellence in regulatory tobacco science)	Klein, Elizabeth (HBHP); Foraker, Randi (EPI); Shoben, Abigail (BIO); Wewers, Mary Ellen (HBHP)	National Cancer Institute, P50CA180908	9/1/2015 to 8/31/16	\$299,569	\$0	\$0	\$299,569	N	Y
Children's health initiative: HPV vaccine research	McRee, Annie Laurie (HBHP)	Group Health Research Institute, 2014127662	3/1/2014 to 12/31/2014	\$7,462	\$0	\$7,462	\$0	N	N
Foundations for healthy living	Pirie, Phyllis (HBHP); Anderson, Sarah (EPI); Klein, Elizabeth (HBHP)	Centers for Disease Control & Prevention, U48DP001912	9/30/2010 to 9/29/2014	\$1,211,650	\$271,650	\$0	\$0	Y	Y
Assessing public education effectiveness in moving private well owners to test and treat water	Pirie, Phyllis (HBHP)	National Ground Water Association Inc, Agreement Dated 10/01/14 (Prime: Centers for Disease Control & Prevention)	10/1/2014 to 8/31/2015	\$23,984	\$0	\$23,984	\$0	N	N
Reaching a wider audience: Modifying NetWellness content and outreach	Pirie, Phyllis (HBHP)	National Library of Medicine, G08LM011075	9/1/2011 to 8/31/2014	\$280,328	\$87,346	\$0	\$0	N	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
OSU Center of excellence in regulatory tobacco science	Wewers, Mary Ellen (HBHP); Berman, Micah (HSMP); Ferketich, Amy (EPI); Klein, Elizabeth (HBHP); Lu, Bo (BIO); Nagaraja, Haikady (BIO); Paskett, Electra (EPI); Pirie, Phyllis (HBHP); Shoben, Abigail (BIO)	National Cancer Institute, P50CA180908	9/19/2013 to 8/31/2018	\$18,947,514	\$3,682,049	\$3,974,789	\$4,059,577	Y	Y
Diversity of tobacco products used and purchased (Project 3 - OSU Center of excellence in regulatory tobacco science)	Wewers, Mary Ellen (HBHP); Berman, Micah (HSMP)	National Cancer Institute, P50CA180908	9/19/2013 to 8/31/2018	\$3,248,343	\$431,387	\$794,555	\$781,579	Y	N
Tobacco cessation interventions with Ohio Appalachian smokers	Wewers, Mary Ellen (HBHP); Ferketich, Amy (EPI); Shoben, Abigail (BIO)	National Cancer Institute, R01CA129771	1/1/2010 to 12/31/2014	\$3,764,869	\$1,069,625	\$0	\$0	Y	Y
Social networks and tobacco use among Ohio Appalachian women (Project 2 -Reducing Cervical Cancer in Appalachia)	Wewers, Mary Ellen (HBHP)	National Cancer Institute, P50CA105632	5/1/2010 to 4/30/2016	\$900,747	\$157,841	\$182,767	\$0	Y	N
BCOG Center for Bio Behavioral Oncology Research Training	Wewers, Mary Ellen (HBHP)	Walther Cancer Institute, 141.01	7/1/2014 to 6/30/2015	\$35,578	\$35,578	\$0	\$0	N	Y
HEALTH SERVICES MANAGEMENT & POLICY									
Designing a comprehensive framework for the evaluation of tobacco product risks	Berman, Micah (HSMP)	National Cancer Institute, K07CA197221	4/1/2016 to 3/31/2021	\$819,914	\$0	\$0	\$159,780	N	N
A process for estimating the association of occupation and chronic disease	Dembe, Allard (HSMP); Shoben, Abigail (BIO)	National Institute for Occupational Safety & Health, R21OH010323	7/1/2012 to 6/30/2015	\$408,625	\$207,225	\$0	\$0	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Evaluation services for the creating healthy communities, early childhood obesity prevention and injury prevention programs	Dembe, Allard (HSMP); Anderson, Sarah (EPI); Ferketich, Amy (EPI); Klein, Elizabeth (HBHP); Wickizer, Thomas (HSMP)	Ohio Department of Health, CSP909514 (Prime: US Department of Health & Human Services)	5/29/2014 to 9/30/2015	\$303,807	\$44,185	\$259,622	\$0	Y	N
Prevention problem gambling	Dembe, Allard (HSMP)	Ohio Department of Mental Health & Addiction Services, 99-12506-GAMBL-P-15-1678	7/1/2014 to 6/30/2015	\$50,000	\$0	\$50,000	\$0	Y	N
Evaluation planning for youth-led prevention projects	Dembe, Allard (HSMP)	Ohio Department of Mental Health & Addiction Services, 99-12506-PREV-P-15-1666	7/1/2014 to 6/30/2015	\$50,000	\$0	\$50,000	\$0	Y	N
Improving care coordination for children with disabilities through an accountable care organization	Hilligoss, Phillip (HSMP)	University of North Carolina, 5100157 (Prime: PCORI)	9/1/2014 to 8/31/2017	\$408,092	\$0	\$408,092	\$0	N	N
Preventing breast cancer: Decisions and effects among women at elevated risk	Padamsee, Tasleem (HSMP)	National Cancer Institute, K01CA181547	9/16/2014 to 8/31/2019	\$575,400	\$0	\$115,080	\$115,080	N	Y
The military biomedical complex: How national security impacts military medicine and research	Parasidis, Efthimios (HSMP)	Greenwall Foundation, Agreement dated 7/10/2014	7/1/2014 to 6/30/2017	\$317,381	\$0	\$317,381	\$0	N	N
Opioid dosing guideline evaluation	Wickizer, Thomas (HSMP)	Ohio Department of Aging, AGE01-0000002405 (Prime: Centers for Medicare & Medicaid Services)	10/1/2013 to 6/30/2015	\$80,000	\$80,000	\$0	\$0	Y	N
Evaluation of the utilization and distributional effects of expanding Medicare coverage of preventive cancer screening under the Affordable Care Act	Xu, Yi (Wendy) (HSMP)	AcademyHealth, Agreement dated 12/01/2014	1/1/2015 to 12/31/2015	\$10,000	\$0	\$10,000	\$0	N	N

Table 3.1.2b Research Activity of Faculty – externally funded collaborative projects where the Principal Investigator is from another department									
Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
BIOSTATISTICS									
PQD6: Adipose as a contributing factor to cancer cachexia	Belury, Martha (Human Sciences); Andridge, Rebecca (BIO)	National Cancer Institute, R21CA185140	5/1/2014 to 4/30/2016	\$461,587	\$197,624	\$263,963	\$0	N	N
Myeloid KLF2 regulation mechanisms in rheumatoid arthritis	Das, Hiranmoy (Immunology); Shoben, Abigail (BIO)	National Institute of Arthritis, Musculoskeletal & Skin Diseases, R01AR068279	4/1/2016 to 3/31/2021	\$1,6945,000	\$0	\$0	\$338,800	N	N
Computer-based assessment of tumor microenvironment (TME) in follicular lymphoma	Gurcan, Metin (Biomedical Informatics); Pennell, Michael (BIO)	National Cancer Institute, R01CA134451	7/18/2014 to 5/31/2018	\$1,107,870	\$0	\$639,362	\$234,254	N	N
Breast cancer survivors cardiovascular risks: Treatment and behavioral influences	Kiecolt-Glaser, Janice (Behavioral Medicine Research); Andridge, Rebecca (BIO)	National Cancer Institute, R01CA186720	5/19/2014 to 4/30/2019	\$4,891,505	\$829,667	\$988,678	\$976,789	N	N
Fatigue, depression, and inflammation in cancer survivors: A prospective study	Kiecolt-Glaser, Janice (Behavioral Medicine Research); Lemeshow, Stanley (BIO)	National Cancer Institute, R01CA131029	3/1/2010 to 2/28/2015	\$2,396,853	\$261,316	\$0	\$0	N	N
Tobacco smoking and perturbations in the subgingival microbial ecosystem	Kumar, Purnima (Dentistry); Nagaraja, Haikady (BIO)	National Institute of Dental & Craniofacial Research, R01DE022579	4/13/2012 to 1/31/2017	\$1,891,000	\$381,250	\$381,250	\$381,250	N	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Effect of n-3 fatty acids and sugars on chemotherapy-induced cognitive deficits	Orchard, Tonya (Human Nutrition); Andridge, Rebecca (BIO)	National Cancer Institute, R01CA189947	7/1/2015 to 6/30/2019	\$2,150,010	\$0	\$0	\$1,130,148	N	N
Expression genetics in drug therapy	Sadee, Wolfgang (Pharmacology); Lemeshow, Stanley (BIO)	National Institute General Medical Sciences, U01GM092655	7/16/2010 to 6/30/2016	\$8,603,459	\$1,587,669	\$0	\$0	N	Y
Exercise stress cardiovascular magnetic resonance	Simonetti, Orlando (Cardiovascular Medicine); Pennell, Michael (BIO)	National Heart, Lung, and Blood Institute, R01HL102450	5/1/2010 to 4/30/2015	\$2,532,257	\$32,320	\$0	\$0	N	N
A skill-based RCT for physical activity using peer mentors	Smith, Lauren (Nursing); Shoben, Abigail (BIO)	National Institute Child Health & Human Development, R01HD080866	3/13/2015 to 2/28/2019	\$1,686,686	\$0	\$478,899	\$431,573	N	N
Spatial Analysis of Infant Mortality in Ohio: Tools to Support Evaluation and Program Development	Root, Elisabeth (Geography); Song, Chi (BIO); Salsberry, Pamela (HBHP)	Ohio Department of Medicaid, ODM201650	5/1/2016 to 6/30/2016	\$38,279	\$0	\$0	\$38,279	N	N
2015 Ohio Medicaid assessment survey (Federal)	Sahr, Timothy (Health Sciences Administration); Lu, Bo (BIO); Ferketich, Amy (EPI)	Ohio Department of Medicaid, ODM201407 (Prime: Centers for Medicare & Medicaid Services)	7/30/2014 to 6/30/2017	\$4,410,445	\$0	\$3,477,917	\$932,528	N	Y
2015 Ohio Medicaid assessment survey (State GRF/OHT funds)	Sahr, Timothy (Health Sciences Administration); Lu, Bo (BIO); Ferketich, Amy (EPI)	Ohio Department of Medicaid, ODM201407	7/30/2014 to 6/30/2017	\$1,714,082	\$0	\$1,356,801	\$357,281	N	Y

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Examining the impact of Ohio's Medicaid expansion: Health improvements for Ohio's women and children	Sahr, Timothy (Health Sciences Administration); Lu, Bo (BIO); Ferketich, Amy (EPI)	Ohio Department of Medicaid, ODM201434 (Prime: Centers for Disease Control & Prevention)	12/2/2013 to 6/30/2015	\$658,128	\$220,000	\$228,679	\$209,449	N	N
ENVIRONMENTAL HEALTH SCIENCES									
Bridging the gap in e-capacity for global health research and training in eastern Africa	Gebreyes, Wondwossen (Veterinary Preventive Medicine); Bisesi, Michael (EHS)	John E Fogarty International Center, R25TW009707	5/18/2015 to 4/30/2018	\$323,631	\$0	\$107,877	\$107,877	Y	N
Molecular epidemiology and key issues in foodborne pathogens in eastern Africa	Gebreyes, Wondwossen (Veterinary Preventive Medicine); Bisesi, Michael (EHS)	John E Fogarty International Center, D43TW008650	6/1/2010 to 5/31/2016	\$723,949	\$140,822	\$0	\$0	Y	N
Infant Mortality Research Partnership	Hawley, Joshua (Ohio Education Research Center); Hyder, Ayaz (EHS)	Ohio Dept of Medicaid, ODM201650	5/1/2016 to 6/30/2017	\$541,833	\$0	\$0	\$214,837	Y	N
Environmental triggers of cardiometabolic disease	Rajagopalan, Sanjay (Internal Medicine); Sun, Qinghua (EHS)	National Institute of Environmental Health Sciences, R01ES019616	2/4/2011 to 9/27/2013	\$1,245,554	\$30,804	\$0	\$0	N	N
Synergistic effects of obesity and air pollution on cardiac function	Wold, Loren (Nursing); Sun, Qinghua (EHS)	National Institute of Environmental Health Sciences, R01ES019923	12/19/2013 to 4/30/2016	\$1,100,716	\$0	\$651,791	\$381,311	N	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Harmful Algal Bloom Research Initiative	Winslow, Christopher (Center Lake Erie Research); Lee, Jiyoung (EHS); Weghorst, Christopher (EHS)	Ohio Department of Higher Education, Agmt dated 4/4/2016	4/1/2016 to 6/30/2018	\$2,000,000	\$0	\$0	\$2,000,000	Y	N
Optimizing disinfection for onsite and small community wastewater treatment	Mancl, Karen (Fodd, Agriculture & Biological Eng); Lee, Jiyoung (EHS)	Ohio Water Development Authority, 6296	11/29/2012 to 11/29/2017	\$133,523	\$0	\$0	\$0	N	Y
Surface water quality and ecosystem health with shale energy development	Toman, Elizabeth (School Environmental & Natural Res); Lee, Jiyoung (EHS)	US Geological Survey, G11AP20099	3/1/2014 to 2/29/2016	\$29,967	\$29,967	\$0	\$0	N	Y
Impacts of Climate Change on Public Health in the Great Lakes due to Harmful Algae Blooms	Martin, Jay (Evol, Ecology & Org Bio); Lee, Jiyoung (EHS)	National Oceanic & Atmospheric Administration, NA10OAR4170074	5/1/2012 to 4/30/2015	\$168,649	\$0	\$0	\$0	Y	Y
NPDES stormwater and Clintonville blueprint monitoring project	Martin, Jay (Evol, Ecology & Org Bio); Lee, Jiyoung (EHS)	City of Columbus, Agmt dated 3/3/2016	3/3/2016 to 12/31/2022	\$1,781,268	\$0	\$0	\$325,000	Y	N
EPIDEMIOLOGY									
Incretin-based tests for early diagnosis of diabetes in cats	Gilor, Chen (Veterinary Clinical Sciences); Bower, Julie (EPI)	Morris Animal Foundation, D15FE-303	10/01/2014 to 9/30/2016	\$91,909	\$0	\$40,911	\$50,998	N	N

Project Name	Principal Investigator & Department <i>(PI listed first, then Co-Is; CPH primary faculty are bolded)</i>	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N
Quality improvement project for the Ohio partners for smoke-free families maternal & child health program expansion	Crane, Dushka (Health Sciences Administration); Ferketich, Amy (EPI)	Ohio Department of Health, DOH01-0000037837	8/6/2014 to 6/30/2017	\$750,500	\$0	\$375,500	\$375,000	N	N
HEALTH BEHAVIOR & HEALTH PROMOTION									
MCH Research	Reiter, Paul (Cancer Prevention and Control); McRee, Annie Laurie (HBHP)	Health Resources & Services Administration, R40MC28313	4/1/2015 to 3/31/2016	\$100,000	\$0	\$100,000	\$0	N	N
Admin/Core: Models for tobacco product evaluation	Shields, Peter (Cancer Prevention and Control); Wewers, Mary Ellen (HBHP)	University of Minnesota, P002498101 (Prime: National Cancer Institute)	9/20/2012 to 8/31/2016	\$119,779	\$28,281	\$31,171	\$32,035	N	N
Project 4: Models for tobacco product evaluation	Shields, Peter (Cancer Prevention and Control); Wewers, Mary Ellen (HBHP)	University of Minnesota, P003398602 (Prime: National Cancer Institute)	9/20/2012 to 8/31/2016	\$1,304,955	\$262,298	\$326,441	\$533,404	N	N
Increasing HPV vaccine coverage among young adult gay and bisexual men	Reiter, Paul (Cancer Prevention and Control); Katz, Mira (HBHP); McRee, Annie Laurie (HBHP); Shoben, Abigail (BIO)	National Cancer Institute, R21CA194831	7/1/2015 to 6/30/2017	\$382,920	\$0	\$215,075	\$167,845	N	N

Initiative in population research	Casterline, John (Sociology); Salsberry, Pam (HBHP)	Nat Institute of Child Health & Human Development, R24HD058484	9/30/2014 to 8/31/2016	\$1,320,534	\$424,938	\$447,798	\$447,798	N	Y
HSMP									
Accountable care organizations: Testing their impact	McAlearney, Ann (Family Medicine); Hilligoss, Brian (HSMP); Xu, Wendy (HSMP)	The Robert Wood Johnson Foundation, 70677	3/15/2013 to 12/31/2015	\$400,000	\$199,884	\$200,116	\$0	N	N

3.1.d. Identification of measures by which the school may evaluate the success of its research activities, along with data regarding the school's performance against those measures for each of the last three years. For example, schools may track dollar amounts of research funding, significance of findings (e.g., citation references), extent of research translation (e.g., adoption by policy or statute), dissemination (e.g., publications in peer-reviewed publications, presentations at professional meetings) and other indicators. See CEPH Outcome Measures Template.

The outcome measures used to evaluate the success of our College research activities are displayed in **Table 3.1.3**. These measures include both research process outcomes (e.g., grant submissions), as well as those that measure the activity itself (e.g., research expenditures) and the results of research activity (e.g., publications). Target research expenditures were calculated based on data trends over the past three years. Nearly all of the faculty in the College are publishing in the peer-reviewed literature, as indicated by the data in the table. While the target is 100% and we have not yet achieved that target, it is important to note that the total number of publications is relatively high for a college this size. The College needs to continue to work on securing external research funding. The Research Office in the College is very active in sending out information to all College and specific individuals about RFAs at the NIH or other institutions that are applicable to the work done in the College. Additionally, the staff regularly put on workshops to discuss grant-related topics, such as the new NIH biosketch format and the new NIH proposal guidelines. These percentages should increase in upcoming years for at least two reasons. First, there is an improved faculty mentoring program for junior faculty. Second, as these new faculty are becoming more involved in collaborative efforts and research, they are positioning themselves to be PIs on proposals. Indirect cost recovery is obviously important for the College so that there are funds to support the infrastructure for continued grant submissions and research. The faculty are increasing the IDC recovery on their grants. However, the College administration does recognize that non-profits and state agencies will not fund work at a 50% IDC recovery and there are several faculty who receive these types of grants and contracts.

Table 3.1.3 Goal, Initiatives and Outcome Measures for Research

C. RESEARCH and INNOVATION				
Strategic Goal C.1. Research and Innovation: <i>Demonstrate ongoing improvement of research productivity and performance.</i>				
Outcome Measures for C.1.1.				
Initiative: <i>Continually increase demonstration of research success based on receipt of competitive external grants and contracts, generation of peer-reviewed publications, and national and international presentations.</i>				
Outcome Measure	Target 2017	2016	2015	2014
Peer-Reviewed Publications (CY)	100% applicable faculty published each year	Total Publications = 155 YTD Percentage Faculty Publishing = 86% YTD	Total Publications = 218 Percentage Faculty Publishing = 91%	Total Publications = 209 Percentage Faculty Publishing = 84%
Conference Presentations (CY)	100% applicable faculty presented each year at national and international conferences	Total Presentations = 107 YTD Percentage Faculty Presenting = 68% YTD	Total Presentations = 141 Percentage Faculty Presenting = 89%	Total Presentations = 148 Percentage Faculty Presenting = 89%
Grants and Contract Proposals Submitted (FY)	80% applicable faculty submitting as PI and 100% submitting in any role per year	Total Proposals Submitted = 142 \$74,659,035 Percentage Faculty Submitting: As PI = 75% Any Role = 82%	Total Proposals Submitted = 200 \$52,874,099 Percentage Faculty Submitting: As PI = 60% Any Role = 71%	Total Proposals Submitted = 155 \$34,004,112 Percentage Faculty Submitting: As PI = 62% Any Role = 81%
Grants and Contracts Funded (FY)	50% applicable faculty funded as PI and 100% funded in any role per year	Total Awards No. = 107 Funding = \$8,091,228 Percentage of Faculty Funded: As PI = 36% Any Role = 64%	Total Awards No. = 128 Funding = \$5,856,293 Percentage of Faculty Funded: As PI = 38% Any Role = 56%	Total Awards No. = 117 Funding = \$8,113,097 Percentage of Faculty Funded: As PI = 34% Any Role = 55%
Total Research Expenditures (FY)	\$9,000,000	Total Expenditures = \$6,618,962	Total Expenditures = \$7,175,779	Total Expenditures = \$6,339,766
Direct Cost Research Expenditures (FY)	\$6,000,000	Total DC Expenses = \$4,767,733	Total DC Expenses = \$5,162,478	Total DC Expenses = \$4,712,421
IDC Recovery (FY)	\$3,000,000 50% on average	Total Recovered = \$1,851,230 39% on average	Total Recovered = \$2,013,301 39% on average	Total Recovered = \$1,627,345 35% on average
T32 Training Grants (FY)	1 T32 grant submitted	Total T32 Proposals Submitted = 0	Total T32 Proposals Submitted = 0	Total T32 Proposals Submitted = 0

C. RESEARCH and INNOVATION				
Strategic Goal C.1. Research and Innovation: <i>Demonstrate ongoing improvement of research productivity and performance.</i>				
Outcome Measures for C.1.1.				
Initiative: <i>Continually increase demonstration of research success based on receipt of competitive external grants and contracts, generation of peer-reviewed publications, and national and international presentations.</i>				
Outcome Measure	Target 2017	2016	2015	2014
	1 T32 grant funded (2018)	Number of T32s Funded = 0	Number of T32s Funded = 0	Number of T32s Funded = 0
	2 Graduate students funded on OSU T32s	Graduate Students Funded on OSU T32s = 1	Graduate Students Funded on OSU T32s = 1	Graduate Students Funded on OSU T32s = 1
	2 Postdocs funded on OSU T32s	Postdocs Funded on OSU T32s = 1	Postdocs Funded on OSU T32s = 1	Postdocs Funded on OSU T32s = 1
	10 of Faculty participating in funded OSU training grants	Faculty Participating in OSU T32s = 5	Faculty Participating in OSU T32s = 5	Faculty Participating in OSU T32s = 5
Invention Disclosures (FY)	1 Disclosure submitted	Total Disclosures Submitted = 1	Total Disclosures Submitted = 0	Total Disclosures Submitted = 2
Patents (FY)	1 Patent (2018)	Total Patents Awarded = 0	Total Patents Awarded = 0	Total Patents Awarded = 0

3.1.e. Description of student involvement in research.

Students in the College have a variety of opportunities to be involved in research, the extent to which is primarily related to their specific degree program. For example, students pursuing the BSPH degree have a choice of completing a practicum (or similar experience) or a research project as a capstone. All MPH students complete both a practicum and a culminating project as required capstone experience. In addition, both BSPH and MPH students can get involved with research projects not related to capstone experiences. Students pursuing academic degrees via an MS or PhD must engage in more substantial research, which culminates in a thesis or dissertation, respectively. All students are encouraged to disseminate their research results via a variety of outlets throughout their tenure at the College, including University-sponsored research meetings, College-based research seminars, and professional conferences. All of the College's programs require students to engage in some type of presentation of their completed research-oriented capstone projects, culminating projects, theses, and dissertations. In many cases, student efforts in research result in co-authored publications and presentations with faculty members. Students also participate in funded research projects with faculty. Of the projects listed in Tables 3.1.2a and 3.1.2b above, 35% provided funding for students.

One example of College student research is the dissertation award received by doctoral student in the Division of Health Service Management and Policy from the Ohio Department of Mental Health and Addiction Services. This study, “The impact of funding on client satisfaction at community mental health agencies in Ohio,” was designed to aid the general understanding of factors which influence high-quality mental health services effectiveness and provide a baseline for the measure of client satisfaction prior to the expansion of Medicaid and managed care in Ohio.

A second example is a dissertation award received by doctoral student in the Division of Health Behavior and Health Promotion from the Research Institute at Nationwide Children’s Hospital (award # 5243IE in the amount of \$15,000). This study, titled “Infant safe sleep in Ohio: Where do prenatal care providers fit in?” is designed to identify the infant safe sleep-related knowledge, attitudes, and behaviors of prenatal health care providers in Ohio, and will also explore potential barriers to providing SIDS/infant safe sleep-related education in the obstetric clinic environment.

3.1.f. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 3.1.

Strengths:

- The College strongly supports research as evidenced by the Office of Research’s capacity to assist researchers with grants submission and management, the continuous implementation of new initiatives to promote research, a novel workload incentive program and generous professional leave policies,
- Total research expenditures are stable despite increased competition for diminished external funding.
- The research portfolio of the College continues to expand and is multidisciplinary and collaborative in nature.
- The research portfolio is aligned with the educational programs in the College.
- College research activities include community-based studies, many of which are associated with the College’s research centers.
- Students are actively engaged in research.

Challenges/Weaknesses/Plans:

- Federal funding opportunities have been constrained over the past few years. Other sources of research funding, such as foundations, are being explored.

- The ratio of research expenditures per faculty FTE may be negatively influenced by the College's commitment to increase faculty size with early career investigators during a period of diminished external funding.
- Tracking of specific outcomes such as awards, poster presentations, and publications by students participating in research. This will improve with full implementation of the embedded Data Subcommittee structure.
- Tracking of human subjects/IRB/data use agreement requirements and compliance for both faculty and students involved in research. This will improve with full implementation of the embedded Data Subcommittee structure.
- The lack of NIH training grants (F30, F31, T32). The plan is to increase pursuit of these sources of funding given the increased faculty size and opportunities to expand collaboration and pursue jointly with others within the University.

CRITERION 3.2 SERVICE

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

3.2.a. Description of the school's service activities, including policies, procedures and practices that support service. If the school has formal contracts or agreements with external agencies, these should be noted.

The College of Public Health is actively engaged in service activities, through its teaching, research and outreach mission. The College expects all faculty members and select staff members to be engaged in service. Service expectations, goals and initiatives, and/or policies are incorporated in various College documents, including its *Pattern of Administration, Appointments, Promotion and Tenure Criteria and Procedures*, and *Strategic Plans* (College and its Center for Public Health Practice).

Service is also explicitly included in the College's Vision statement and one of the stated Values, as follows:

- **Vision:** *We aspire to be a leader in research, education, and **service** related to public health and the delivery of health services, with local impact and global significance.*
- **Values:** *We value dedicated **service** and leadership that helps individuals and communities live healthier lives.*

The College categorizes service by internal activities at the College- and University-levels, and, external activities locally, statewide, nationally and internationally. The emphasis for this criterion is on predominately external service activities at all levels.

Applicable faculty members and their chairs document service activities in promotion and tenure files, and all faculty members and applicable staff members and their chairs and supervisors document service activities in the annual performance reviews for merit-based salary adjustments.

The extent and type of service often varies among faculty members depending on stage of their career. For example, probationary, early career faculty members typically, but not necessarily exclusively, engage in primarily professional service activities (e.g., paper reviews; national committees/workgroups), while more senior-level faculty members are more likely to participate in a broader spectrum of service activities. Faculty members and applicable staff members also assemble different portfolios of service activities based on their respective areas of expertise.

The University in general has a rich history of external service activities in all units throughout. In recent years, however, the University has acknowledged an increased responsibility to address service more formally given its Land Grant designation, as

well as its characterization as an Urban University. The University's *Strategic Plan*, therefore, now emphasizes more deliberately Outreach and Engagement, which is led by its Office for Outreach and Engagement. The University has been recognized as an "Engaged University" by the Carnegie Foundation for the Advancement of Teaching. The Carnegie Foundation advances a definition of service and engagement and that definition informs ongoing efforts within the College to clarify what is meant by service and engagement activities. The Carnegie Definition is:

"Community engagement describes collaboration between institutions of higher education and their larger communities (local, regional/state, national, global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity. The purpose of community engagement is the partnership of college and university knowledge and resources with those of the public and private sectors to:

- *enrich scholarship, research, and creative activity;*
- *enhance curriculum, teaching and learning;*
- *prepare educated, engaged citizens;*
- *strengthen democratic values and civic responsibility;*
- *address critical societal issues; and*
- *contribute to the public good."*

In response to this and other factors, the College has also chosen to improve and formalize external service activities. During the past year, the College Dean established a new position, Associate Dean for Outreach and Engagement and Dr. Pamela Salsberry was selected for this role. The responsibilities for this role are to:

- promote and facilitate opportunities for the College to engage in and impact communities in Ohio, across the country, and around the world;
- promote and facilitate service opportunities for faculty, staff and students in ways that serve the public including direct service to individuals, service on appropriate boards and task forces, and participation in community-based training activities;
- serve as liaison to University units and external constituencies such as health departments and health related organizations which are interested in partnering with the college;
- serve as a standing member of the College Diversity and Inclusion Committee; and,
- represent the Ohio State University College of Public Health in appropriate professional forums such as the ASPPH Associate Deans for Practice group.

With the appointment of an Associate Dean and the increased University emphasis on engagement, the College is working to align outreach and engagement activities with University initiatives. Salsberry is a member of the University's Community Engagement Council (CEC) that is developing a University-wide approach towards outreach and engagement. One of the key initiatives of this University committee is to complete an assessment of activities across the University as well as develop a

“scorecard” for tracking involvement. Salsberry is currently chairing the data committee of the CEC.

Faculty and staff are involved in a broad range of activities and a diverse set of organizations in their engagement with public health practice. A major way that the College engages with the practice world is through students efforts. Often that involvement overlaps with the supervision of students who are in communities completing various required and voluntary activities. Over the past three years the College has had a significant presence in local, state, and global public health organizations. To illustrate the breadth (across multiple sectors) and depth (large number of students in a few systems) of this involvement we summarize this involvement below. (Please note this is a conservative estimate as we continue to refine systems to capture these data accurately.)

- *Local Ohio Health Departments:* 36 total students, at the undergraduate and graduate (MPH) level, have been active in 9 local public health departments for over 5,600 hours.
- *State Health Department:* 12 students at the undergraduate and graduate (MPH) level, for over 1200 hours.
- *Other State departments:* 17 students at the undergraduate and graduate (MPH) level for over 2400 hours.
- *Federal Health-Related Departments:* 15 students at the undergraduate and graduate (MPH) level for over 2800 hours.
- *Health care systems:* 144 students at the undergraduate and graduate (MHA and MPH) level for over 14,000 hours.
 - This includes, Ohio Health, NCH, OSU Wexner System, Primary care networks, wellness centers, hospice and other.
- *Professional organizations, non-profits:* 83 students at the undergraduate and graduate (MHA and MPH) level for over 11,300 hours
- *University Based Opportunities:* 49 students at the undergraduate and graduate (MHA and MPH) level for over 5700 hours
- *Other:* 39 students at the undergraduate and graduate (MHA and MPH) level for over 5600 hours,

Many faculty, based upon their particular expertise, serve the state of Ohio through engagement with state agencies. Some of these efforts are reimbursed through contracts and/or grants, but the College’s efforts and impact far exceeds these defined contracts. For example:

- i) **Evaluation of the Ohio Medicaid Program:** Numerous faculty within the CPH are involved in multiple aspects of evaluating the Ohio Medicaid program. There is a core group of faculty who provide significant leadership to the Ohio Medicaid program by overseeing the Ohio Medicaid Assessment Survey and the Group 8 evaluation (evaluating Medicaid expansion in Ohio). While some of this is paid, there are many more hours spent in these activities. These efforts reflect a commitment by the CPH faculty to assist the state in

- designing a health insurance program that works best for the Medicaid insured populations and contribute broadly to a healthier Ohio.
- ii) Several CPH faculty are also involved with the Ohio Medicaid Program and the Ohio Department of Health in a new state initiative to explore ways to improve Ohio's infant mortality rates. Again, while some of these efforts are paid through contracts, the efforts of these core faculty go beyond these paid efforts to working directly with Medicaid to determine best practices for improved outcomes.

Furthermore, beginning with Autumn Semester, 2016 the College of Public Health is launching a new joint faculty position with the OSU Department of Extension. This partnership will expand the outreach and engagement opportunities for the College across the state in activities that will include students, faculty and staff.

Two College-level centers also provide services, including the Center for Public Health Practice (CPHP) and the Center for Health Outcomes, Policy and Evaluation Studies (HOPES). Effective November, 2015, both Centers report via their respective Directors to the College's Associate Dean for Outreach and Engagement. Operations and staff for both Centers are supported via a combination of both internal and external funding.

The Center for Public Health Practice, until recently led by Dr. Michael Bisesi for the past six-plus years, is now led by Dr. Andrew Wapner who was hired in November 2015. The Center for Public Health Practice engages primarily in service activities focused on improving the public health workforce and outcomes from related organizations. The voluntary public health accreditation movement has driven much of CPHP's organizational development initiatives over the past three years. From 2013-2015, CPHP had formal working relationships with over 35 local public health organizations, academia, and community partners, providing consultation, technical assistance and facilitation for activities such as community health assessments, community health improvement planning, agency strategic planning, quality improvement planning, and workforce development planning. Additionally, the CPHP takes a "teach as you go" approach to providing organizational development services, thereby increasing the internal capacity of the organization's workforce while providing technical assistance and services. Reaching a broader audience with accreditation support services involves templates for workforce development plans, quality improvement plans, and competency-based job descriptions, which were created by center staff in collaboration with local and state partners and have been used by local and state public health agencies throughout Ohio and nationally. Finally, the Center has provided services for some of Ohio's professional associations including facilitation of strategic planning processes for the Ohio Public Health Association and the Association of Ohio Health Commissioners, and professional development for the Ohio Society for Public Health Education. Additional service by CPHP staff includes: i) Serving on the planning committee for Ohio's Accreditation Learning Community (ALC); ii) Assisting Columbus Public Health with the development of an in-house Leadership University; iii) Developing a

Food Insecurity and Healthy Food Access Evidence Inventory for the Health Policy Institute of Ohio; and iv) Serving as mock Public Health Accreditation Board site reviewers for Ohio Department of Health (ODH) and several local public health agencies. CPHP has had contracts with over 20 local, state and national agencies over the last three years to support these service activities. Examples at the local level include several local health departments (e.g., Allen County, Defiance County General District, Holmes County), state (Ohio Department of Health, Ohio Department of Medicaid, Ohio Department of Aging) and national (CDC, National Library of Medicine, NIH Fogarty Center).

In June of 2016, the Center for Public Health Practice was funded through the Ohio Department of Higher Education to work with the Ohio Department of Health (ODH) to ensure Ohio's local public health departments can be accredited by the Public Health Accreditation Board (PHAB) by 2020, as required by Ohio law. Working closely with ODH, CPHP will assess accreditation readiness and will provide appropriate trainings and technical assistance to many of the state's 118 local public health agencies. To complete the project, CPHP is partnering with staff from the College's Center for Health Outcomes, Policy and Evaluation Studies (HOPES) to study the process, determinants and outcomes of accreditation. This information will be invaluable to state and local public health organizations across the country, as well as national partners such as PHAB and the National Association of County and City Health Officials.

The Center for HOPES conducts applied health and practice-based research studies to help public and private organizations evaluate clinical effectiveness, quality of care, costs of medical services, processes of care, and other investigations in the areas of health outcomes, policy, and evaluation. The programs have a direct and strong impact on health care in both the private and public sectors. Recent projects include program evaluation projects with Ohio Department of Health (e.g., safe sleep campaign), evaluation of the medical home model on health outcomes, and an evaluation of the Health of Ohio Women, Infant and Children over the last decade using the Ohio Medicaid Assessment survey. Currently we are engaged collaboratively with OSU Extension in an evaluation of the 4-H Youth Development Health Heroes. Additionally several faculty are involved in a large project to evaluate Ohio's Medicaid expansion. This project operates in cooperation with the Government Resource Center and with funding from the Ohio Department of Medicaid. The Center for HOPES is undergoing a search for a new director; Dr. Salsberry is serving as the interim Director. Over the coming year efforts to consolidate relationships between faculty groups, with state agencies (Health, Medicaid, Workman's Compensation) will continue.

Although not a center, another College unit was involved with providing coordinated service activities for approximately a decade until summer 2015 when funding ended. NetWellness, led by Dr. Phyllis Pirie, was a collaborative website, managed jointly by College faculty and staff members along with the University of Cincinnati and Case Western Reserve University. NetWellness provided the general public with

health-related information authored by faculty. The NetWellness mission was “improving the health of Ohioans and people worldwide through information that is scientifically sound, high quality and unbiased.” NetWellness contains over 50,000 pages of information and received more than 15 million hits a month from around the world. Content authors included faculty members from the College and many other units from throughout the University.

3.2.b. Description of the emphasis given to community and professional service activities in the promotion and tenure process.

The College’s *Appointments, Promotion and Tenure Criteria and Procedures* document was reviewed, modified and approved at the College and University levels during 2014-15. Although the past criteria included expectations for faculty members to engage in applicable and measureable service activities, the current document expands the scope and value of service for promotion and tenure. In addition, service criteria for annual performance reviews and merit-based salary increases align with the expectations for promotion. The University’s Vice Provost of Outreach and Engagement is also paying closer attention to the issue of faculty service. Applicable excerpts from the College’s APT document follow:

- **Tenure-Track Faculty: Promotion to Associate Professor with Tenure:** *Tenure and promotion are based on performance in teaching, research and service and a pattern of performance over the probationary period that yields a high degree of confidence that the candidate will continue to develop professionally. The awarding of tenure and promotion to the rank of Associate Professor must be based on convincing evidence that the faculty member has achieved excellence as a teacher, as a researcher and scholar, **and as one who provides effective service.** Evidence must also indicate that the faculty member can be expected to continue a program of high-quality teaching, research and scholarship that will increase in sophistication and service relevant to the mission of the College of Public Health.*
- **Tenure-track Faculty: Promotion to Professor with Tenure:** *Promotion to the rank of Professor must be based on convincing evidence that the faculty member has a sustained record of excellence in teaching, has developed and maintained a productive program of research and scholarship that is recognized nationally or internationally, **and has demonstrated significant leadership in service.** A faculty member ready for promotion to Professor should be a role model for faculty, for students, and for the profession.*
- **Clinical Faculty: Promotion to Associate Professor of Clinical Public Health:** *Promotion to Associate Professor of Clinical Public Health is based on convincing evidence that the faculty member has achieved excellence in teaching as demonstrated through contributions to advancing the teaching mission, and **service** or professional practice, and has contributed to the scholarly mission of the College. Evidence must also indicate that the faculty member can be expected to continue a program of high quality teaching, **service** or professional practice, and contributions to scholarship relevant to the mission of the College.*
- **Clinical Faculty: Promotion to Professor of Clinical Public Health:** *Promotion to Professor of Clinical Public Health must be based on convincing evidence that the faculty member has a sustained record of excellent teaching as demonstrated through innovative methods; recognition for excellence and leadership in **service** or professional practice, and has contributed regularly to the scholarly mission of the College.*

3.2.c. A list of the school's current service activities, including identification of the community, organization, agency or body for which the service was provided and the nature of the activity, over the last three years. See CEPH Data template 3.2.1 Projects presented in Criterion 3.1 should not be replicated here without distinction. Funded service activities may be reported in a separate table; see CEPH Data Template 3.2.2. Extramural funding for research or training/continuing education grants should be reported in Templates 3.1.1 (research) and 3.3.1 (funded workforce development), respectively.

Table 3.2.1 lists the service activities of 44 faculty members during the past three years. These activities are numerous and wide-ranging and include related professional service, as well as public community service on numerous boards and committees of non-profits, health departments, and other organizations. Service on policy-relevant boards occurs at the local (e.g., Pirie, Chronic Disease Prevention Advisory Board, Columbus Public Health Department), state (e.g., Berman, Steering Committee, Ohio Wellness and Prevention Network), and national (e.g., Foraker, Medical Advisory Board, American Heart Association) levels.

Furthermore, service activities may be undertaken by a student, staff, faculty partnership. One such example of a college-wide service initiative is the College of Public Health partnership with Columbus Public Health and the Ohio Department of Agriculture to offer a summertime farmers' market in downtown Columbus. The market is held one day a week for three weeks on the front lawn of Columbus Public Health, 240 Parsons Ave. Ohio farmers offer fresh fruits and vegetables, providing nutritious food options to residents of Columbus' downtown and East Side neighborhoods, areas known for having limited access to grocery stores. The College of Public Health supports the Farmers' Markets by providing student, staff and faculty volunteers. In 2015 the Market was able to serve 5827 participants. Staff are engaged in other engagement activities, including work with the Ohio Domestic Violence Network and working with students as advisers to key student outreach groups.

Table 3.2.2 details a wide ranging list of funded services activities that many faculty are involved in, including work with local, state and national public health agencies engaged in various aspects of public health practice.

Table 3.2.1 Service Activity of Faculty for the Period 2013-2016

Faculty member	Role	Organization	Activity or Project	Years
Acton, Amy	Advisory Council & Co-creator	ENCompass (Empowering Neighborhoods of Columbus)	Link clients to medical care and social services	2012-present
Acton, Amy		Health Sciences Academy	Near East Side Schools, PACT	2016
Acton, Amy	Member	City of Bexley	CHAT Committee (Health Advisory)	2016
Acton, Amy	Adviser	Buckeyes for Public Health	Many service activities, e.g., including Ronald McDonald House, Race for the Cure	2015
Adetona, Olorunfemi	Ad-hoc Reviewer	Multiple Peer-Reviewed Journals		2015-Present
Adetona, Olorunfemi	Ad-hoc Reviewer	National Environmental Research Council, United Kingdom	Grant Application Review	2016
Andridge, Rebecca	Member	ENAR 2015 Spring Meeting	Scientific Program Committee	2013-2014
Andridge, Rebecca	Member	Leadership Education in Neurodevelopment and Related Disabilities Program	External Advisory Board	2012-present
Andridge, Rebecca	Member	National Cancer Institute	Cancer Care Delivery Research Steering Committee	2015-present
Andridge, Rebecca	Associate Editor	<i>Journal of Official Statistics</i>		2012-present
Andridge, Rebecca	Associate Editor	<i>Journal of Survey Statistics and Methodology</i>		2016-present
Andridge, Rebecca	Ad Hoc Reviewer	Multiple Journals		2009-present
Andridge, Rebecca	Proposal Reviewer	Netherlands Organisation for Scientific Research (NWO)	Social Sciences Division	2009-present
Andridge, Rebecca	Associate Editor	Journal of Survey Statistics and Survey Methodology		2016-present
Archer, Kellie J.	Member	National Library of Medicine	Biomedical Library and Informatics Review Committee	2016-2018
Archer, Kellie J.	Statistical advisor	<i>Nature</i> Publishing Group	Statistical peer review	2016-2017
Archer, Kellie J.	Statistical advisor	<i>Radiology</i>	Statistical peer review	2016-2017
Archer, Kellie J.	Member	<i>Progress in Transplantation</i>	Editorial Board	2016-2017
Archer, Kellie J.	Peer Reviewer	National Institute of Diabetes and Digestive and Kidney Diseases	Various study sections	2016-2017
Archer, Kellie J.	Peer Reviewer	National Cancer Institute	Various study sections	2016-2017

Faculty member	Role	Organization	Activity or Project	Years
Berman, Micah	Peer Reviewer	American Association for Cancer Research/American Society of Clinical Oncology	E-Cigarette Policy Statement	2014
Berman, Micah	Member	American Lung Association	Regional Leadership Council	2013-present
Berman, Micah	Proposal Reviewer	APHA, Law Section	Program Committee	2012-present
Berman, Micah	Section Councillor and Communications Chair	APHA	Law Section	2014-present
Berman, Micah	Amicus Brief Co-Author	National Association of County and City Health Officials	NYC Regulation of Sugar-Sweetened Beverages	2007-present
Berman, Micah	Legal Consultant	Tobacco Control Legal Consortium		2007-present
Berman, Micah	Member	Health Policy Institute of Ohio	Prevention and Public Health Policy Advisory Group	2013-present
Berman, Micah	Member	Health Policy Institute of Ohio	Health Measurement Advisory Group	2014-present
Berman, Micah	Volunteer Consultant	Preventing Tobacco Addiction Foundation		2015-present
Berman, Micah	Co-Chair	Tobacco 21 Columbus		2015-present
Berman, Micah	Member	2014 Public Health Law Conference	Conference Planning Committee	2014
Berman, Micah	Public Testimony	Ohio Senate, Ohio House, Columbus Board of Health, and numerous city councils	Tobacco Policy	2014-present
Bisesi, Michael	Chair	Association of Schools and Programs of Public Health	Academic Section (former Associate Deans Academic Affairs)	2013-2014
Bisesi, Michael	Chair	Association of Schools and Programs of Public Health	Environmental and Occupational Health Council	2012-present
Bisesi, Michael	Chair	Health Resources and Services	National Network Public Health Training Centers	2011-2014
Bisesi, Michael	Chair	Ohio Public Health Association	Environmental Public Health Council	2013-present
Bisesi, Michael	Member	Association of Schools and Programs of Public Health	Interprofessional Education and Practice Committee	2013-2014
Bisesi, Michael	Member	Association of Schools and Programs of Public Health	Framing the Future "MPH Expert Panel"	2013-14
Bisesi, Michael	Member	CDC/NIOSH ERC/TPG	Grant Review Special Emphasis Panel	2014
Bisesi, Michael	Member	American Board of Industrial Hygiene Ethics	Review Committee	2013-present
Bisesi, Michael	Member	Ohio Emergency Management Agency	CBRNE Agent and Monitoring	2011-2014

Faculty member	Role	Organization	Activity or Project	Years
			Equipment Workgroup	
Bower, Julie	Member	Coronary Artery Risk Development in Young Adults Study	Psychosocial Working Group	2013-present
Bower, Julie	Abstract Reviewer	American Public Health Association, Physical Activity Section; Epidemiology Section	Program Committee	2014, 2016
Bower, Julie	Abstract Reviewer	American Diabetes Association	Scientific Sessions Meeting Planning Committee	2015
Bower, Julie	Abstract Reviewer	American Public Health Association, Epidemiology Section	Program Committee	2016
Bower, Julie	Abstract Reviewer	American Diabetes Association	Scientific Sessions Meeting Planning Committee	2016
Bower, Julie	Fellow	American Heart Association	Council on Epidemiology and Prevention	2016
Dembe, Allard	Voting Member	Assoc. of Univ. Programs in Healthcare Admin.	Governance Committee	2011-present
Dembe, Allard	Voting Member	NIH Clinical Translational Science Award	National Evaluation Key Function Committee	2013-2015
Dembe, Allard	Member	NIH Clinical Translational Science Award	National Clinical and Translational Research Definitions Work Group	2013-2015
Dembe, Allard	Voting Panel Member	CDC/NIOSH	Workers' Compensation Surveillance Special Emphasis Review Panel	2015
Dembe, Allard	Member	APHA	Occupational Health Section	2013-present
Dembe, Allard	Member	French National Research Agency	Grant Review Panel	2014
Dembe, Allard	Member	Ohio Public Health Association	Chronic Disease Network	2013-present
Dembe, Allard	Member and Evaluator Member	Ohio Early Childhood Health Network		2013-present
Dembe, Allard	Member	Ohio Department of Health	State Violence and Injury Prevention Program	2014-present
Dembe, Allard	Member	Ohio Department of Health	Dawn - Deaths prevented with Naxolone	2014-present
Felix, Ashley	Member	Women's Health Initiative	Cancer Scientific Interest Group	2015-present
Ferketich, Amy	Chair	American Public Health Association	Action Board	2013- 2014
Ferketich, Amy	Co-Chair	American Public Health Association	Joint Policy Committee	2013- 2014
Ferketich, Amy	Action Board	American Public Health Association	Executive Board	2013- 2014

Faculty member	Role	Organization	Activity or Project	Years
	Representative			
Ferketich, Amy	Representative	American Public Health Association	Governing Council	2013-2015
Ferketich, Amy	Chair (2014-2015), Member (2015-present)	Tobacco Center of Regulatory Science	Training Evaluation Workgroup	2014-2016
Ferketich, Amy	Member	National Network of State and Local Health Surveys	Organizing Committee	2011-present
Ferketich, Amy	Co-Chair	Center for Population Health and Health Disparities	Training and Career Development Workgroup	2011-2015
Foraker, Randi	Associate Editor	Generating Evidence and Methods to Improve Patient Outcomes (eGEMS)		2016-present
Foraker, Randi	Member	American Heart Association	Lifestyle and Epidemiology Behavior Change Committee	2015-present
Foraker, Randi	Member	American Heart Association	Medical Advisory Board	2015-present
Foraker, Randi	Fellow	American Heart Association	Council of Epidemiology and Prevention	2014-present
Foraker, Randi	Member	Jackson Heart Study	Stroke Working Group	2013-present
Foraker, Randi	Member	Women's Health Initiative	Cancer Scientific Interest Group and Heart Failure Working Group	2013-present
Foraker, Randi	Reviewer	Multiple Journals		2010-present
Gallo, Maria	Reviewer	Society for Family Planning	Large Grant Review Committee	2015-present
Gallo, Maria	Member	Society for Family Planning	Clinical Guidelines Subcommittee	2016
Gallo, Maria	Advisor	OSU Buck-I-SERV	Service trip to Nicaragua	2016
Gallo, Maria	Supervisor	Ohio Science Olympiad State Tournament	Disease Detectives	2015-2016
Gallo, Maria	Ad hoc reviewer	<i>Infectious Diseases/Obstetrics and Gynecology</i>	Editorial Board	2013-present
Harris, Randall	Member	Angiogenesis Foundation	Board of Directors	2008-2015
Harris, Randall	Member	National Institutes of Health	Working Group on Angiogenesis Research	2012-2015
Harris, Randall	Member	National Comprehensive Cancer Network	Breast Cancer Screening Guidelines Panel	2004-2015
Harris, Randall	Member	Advances in Breast Cancer Research	Editorial Board	2008-2015
Harris, Randall	Member	Encyclopedia of Cancer	Editorial Board	2008-2015
Harris, Randall	Member	International Journal of Molecular Medicine	Editorial Academy	1996-2015
Harris, Randall	Member	Research Journal of Aging	Editorial Board	2013-2015

Faculty member	Role	Organization	Activity or Project	Years
Harris, Randall	Member	World Journal of Clinical Oncology	Editorial Board	2013-2015
Hilligoss, Brian	Member	<i>Health Care Management Review</i>	Editorial Board	2016-2019
Hilligoss, Brian	Academic at Large	Academy of Management, Health Care Management Division	Executive Committee	2015-2016
Hilligoss, Brian	Ad Hoc Peer Reviewer	Multiple Journals		2011-present
Hood, Darryl B.	Member	US EPA	Science Advisory Board	2010-present
Hood, Darryl B.	Member	<i>Community Medicine</i>	Editorial Board	2014
Hood, Darryl B.	Member	<i>Environmental Disease</i>	Editorial Board	2016
Hood, Darryl B.	Member	Multiple Peer-Reviewed Journals		2013-Present
Hood, Darryl B.	Councilor	Toxicologists of African Origin	Executive Board	2013-Present
Hood, Darryl B.	Study Section Member	NIEHS	P30 Center Grant Review	2014-Present
Hood, Darryl B.	Speaker, SIG Member, Mentor	Society of Toxicology	PhD recruitment, Advisement, Plenary Session Speaker	2013-Present
Katz, Mira	Co-Chair	American Society of Preventive Oncology	Annual Scientific Meeting	2016
Katz, Mira	Member	ALLIANCE Cancer Cooperative Group	Health Disparities Committee	2013-present
Katz, Mira	Co-Chair	NIH Centers for Population Health and Health Disparities	Intervention Working Group	2012-2014
Katz, Mira	Vice-Chair	American Society of Preventive Oncology	Early Detection and Risk Prediction of Cancer Special Interest Group	2014-2016
Katz, Mira	Abstract Track Chair	Society of Behavioral Medicine	Population, Health Policy, and Advocacy Track, Annual Scientific Meetings	2012-2015
Katz, Mira	Grant Reviewer	National Institutes of Health		2010-2016
Katz, Mira	Chair	American Society of Preventive Oncology	Early Detection and Risk Prediction of Cancer Special Interest Group	2016
Katz, Mira	Chair	American Society of Preventive Oncology	Early Detection and Risk Prediction of Cancer Special Interest Group	2016
Katz, Mira	Abstract Reviewer	American Society of Preventive Oncology	2016 Annual Scientific Mtg	2016
Katz, Mira	Abstract Reviewer	Society of Behavioral Medicine	2015 Annual Scientific Mtg	2015
Kaye, Gail	Member	YMCA, Diabetes Prevention Program	Advisory Board	2013-present
Kaye, Gail	Member	Walk with A Doc	Advisory Board	2014-present
Kaye, Gail	Member	United States Fencing Association, Columbus Division	Advisory Board	2012-present
Klein, Elizabeth	Member	Ohio Dept. of Health	Smoke-free Multiunit Housing	2014-present

Faculty member	Role	Organization	Activity or Project	Years
			Working Group	
Klein, Elizabeth	Expert Witness	Ohio Senate	Criminal. Justice Committee (HB 144)	2014
Klein, Elizabeth	Member	Growing Healthy Kids	Steering Committee	2009-2014
Klein, Elizabeth	Expert Witness	Ohio Senate	Criminal. Justice Committee (HB 59)	2014
Klein, Elizabeth	Member	Columbus Public Health	Tobacco-free Collaborative	2015-present
Klein, Elizabeth	Chair	Tobacco Centers of Regulatory Science	Eye Tracking Workgroup	2014-present
Klein, Elizabeth	Associate Editor	<i>Tobacco Regulatory Science</i>	Editorial Board	2015-present
Lee, Jiyoung	Co-Chair	Lake Erie Initiative	Board of Regents	2014
Lee, Jiyoung	Member	Ohio Dept. of Health, Bureau of Environmental Health	Project Advisory Committee	2013-present
Lee, Jiyoung	Member	USDA NIFA	Grant Review Panel	2014
Lee, Jiyoung	Panel Member	Korean Women in Science and Engineering	Korea Federation of Women's Science and Technology Women's Forum	2014
Lee, Jiyoung	Member	City of Columbus	Food Protection Advisory Board	2012-present
Lee, Jiyoung	Reviewer	Midwestern Association of Graduate Schools Distinguished Thesis	Thesis competition review	2016
Lee, Jiyoung	Reviewer	University of Michigan	Grant review	2013
Lee, Jiyoung	Reviewer	Mississippi State University	Grant review	2016
Lee, Jiyoung	Organizer and Panel	Harmful Algal Blooms Workshop: Impacts on HABs on Human, Animal and Environmental Health	Organizer and Panel	2016
Lee, Jiyoung	Member	Journal of Microbiology	Editorial Board	2016-present
Lemeshow, Stanley	Member	City of Bexley Board of Health		2014-present
Lemeshow, Stanley	Associate Editor	<i>The Stata Journal</i>	Serving on Editorial Board	2001-present
Lemeshow, Stanley	Peer-Reviewer	Multiple Journals		2000-present
Lemeshow, Stanley	Expert Witness	Ohio Department of Medicaid	Review sampling methods of audits	2015-present
Love, Randi	Member	AIDS Resource Center of Ohio	Board of Directors	2013-2014
Love, Randi	Member	Neighborhood Services Ind.	Board of Directors	2014-2016
Love, Randi	Member	Amethyst Inc.	Board of Directors	2013-2015
Love, Randi	Member	Schweitzer Fellows	Advisory Board	2013-present
Love, Randi	Member	Outreach and Engagement	Advisory Board	2011-present

Faculty member	Role	Organization	Activity or Project	Years
Love, Randi	Member	Albert Schweitzer Fellowship Program	Advisory Board	2014-present
Lu, Bo	Member	Eastern North American Region (ENAR) of Int'l Biometric Society 2017 Spring Mtg	Program Committee	2016-present
Lu, Bo	Organizer	Eastern North American Region (ENAR) of Int'l Biometric Society 2016 Spring Mtg	Invited Session	2016
Lu, Bo	Organizer	Joint Statistical Meeting	Invited Session	2016
Lu, Bo	Organizer	Eastern North American Region (ENAR) of Int'l Biometric Society 2017 Spring Meeting	Invited Sessions	2016-present
Lu, Bo	Member	Stata Conference 2015	Scientific Committee	2015
Lu, Bo	Associate Editor	<i>Journal of Statistical Computation and Simulation</i>	Editorial Board	2011-present
Lu, Bo	Organizer	Eastern North American Region of International Biometric Society 2016 Spring Meeting	Invited session on "New Developments of Bayesian Methods for Causal Inference"	2016
Martin, William	Member	University of Chicago Center for Global Health	External Advisory Board	2015-present
Martin, William	Member	Moms2B	Advisory Committee	2015-present
Martin, William	Board Member	Godman Guild	Board of Directors	2015-present
Martin, William	Member	USAID	Technical Advisory Group	2012-present
Martin, William	Member	American Thoracic Society	Family and Patient Education Committee	2012-present
Martin, William	Ad-hoc Member	CDC	US-Indian Joint Working Group	2015-present
Norris, Alison	Advisors Circle	Health in Harmony, USA and Indonesia	Board of Directors	2015-present
Norris, Alison	Member	Health in Harmony, USA and Indonesia	Board of Directors	2008-2014
Norris, Alison	Mentor	FIRST LEGO League	Youth Robotics	2014-present
Norris, Allison	Organizer	St. Baldrick's Child Cancer Research Foundation	Fund Raising Event	2015-present
Norris, Alison	Member	Society of Family Planning	Research Grant Review Committee	2008-present
Olivo-Marston, Susan	Member	American Cancer Society	Review Committee for ACS-sponsored Seed Grants	2012-2014
Olivo-Marston, Susan	Peer reviewer	Multiple journals		2009-present
Padamsee, Tasleem	Member	Ohio AIDS Coalition	Development Team, Strategy to Eliminate HIV in Ohio	2016
Padamsee, Tasleem	Member	Equitas Health, State Strategy for Ending	Steering Committee	May 2016-

Faculty member	Role	Organization	Activity or Project	Years
		HIV Transmission in Ohio		2017
Padamsee, Tasleem	Discussant	Social Science History Association Annual Meeting	Politics on Health Policy Panel	2015
Padamsee, Tasleem	Reviewer	Multiple Journals		2015-present
Pennell, Michael	Associate Editor	<i>Lifetime Data Analysis</i>		2014-present
Pennell, Michael	Permanent Statistical Reviewer	Magnetic Resonance in Medicine		2013-2014
Pennell, Michael	Organizer	American Statistical Association	Topic Contributed Session at Joint Statistical Meetings	2014, 2016
Pennell, Michael	Reviewer	American Statistical Association, Section on Bayesian Statistical Science	2014 Student Paper Awards	2014
Pennell, Michael	Program Chair Elect	American Statistical Association, Risk Analysis Section	2015 Joint Statistical Meetings	2015
Pennell, Michael	Reviewer	American Statistical Association, Section on Risk Analysis	Student Paper Awards	2015-16
Pennell, Michael	Reviewer	American Statistical Association, Section on Risk Analysis	Student Paper Competition	2016
Pennell, Michael	Program Chair	American Statistical Association, Section on Risk Analysis	Joint Statistical Meetings	2015
Pennell, Michael	Subcommittee Member	U.S. Environmental Protection Agency	Chemical Safety Advisory Com. for 1-bromopropane	2016
Pirie, Phyllis	Member	Ohio Dept. of Health	Public Health and Health Services Block Grant Advisory Committee	2013-present
Pirie, Phyllis	Member	Columbus Public Health	Growing Healthy Kids Columbus Coalition	2013-present
Pirie, Phyllis	Member	Columbus Public Health	Chronic Disease Prevention Advisory Board	2014-present
Rempala, Grzegorz	Member	Frontiers in Systems Biology	Editorial Board	2012-present
Rempala, Grzegorz	Member	National Science Foundation, Division of Mathematical Sciences	Scientific Review Panel	2013-present
Rempala, Grzegorz	Deputy Director	Mathematical Biosciences Institute		2013-present
Rempala, Grzegorz	Member	National Institutes of Health, Center for Scientific Review	Kidney, Nutrition, Obesity, and Diabetes Study Section	2014-present
Rempala, Grzegorz	Member	Biomedical Advanced Research and Development Authority, US Dept. of Health and Human Services	Ebola Modeling Coordination Group	2015

Faculty member	Role	Organization	Activity or Project	Years
Rempala, Grzegorz	Member	Society for Industrial and Applied Mathematics	Life Sciences Committee	2012-present
Rempala, Grzegorz	Member	American Statistical Association	Biometrics Committee	2009-present
Robbins, Julie	Member	National Council on Administrative Fellowships	Oversight Committee; Standards and Compliance Sub-Committee	2014-present
Robbins, Julie	Member	Association of University Programs in Health Administration (AUPHA)	Finance Committee	2016
Robbins, Julie	Member	National Council on Administrative Fellowships	Advisory Committee and Standards Sub-Committee	2014-present
Robbins, Julie	Consultant	Greater Columbus Infant Mortality Task Force & CelebrateOne		2014-Present
Salsberry, Pamela	member	Drug Safe Worthington	Healthy Worthington Committee	2015-present
Salsberry, Pamela	Abstract Reviewer	Society of Longitudinal and Life Course Studies	Conference Committee	2011-present
Salsberry, Pamela	Member	Council for Advancement of Nursing Science	Quantitative Methods Subgroup	2013-2014
Salsberry, Pamela	Reviewer	NIH	Social Sciences and Population Studies Study Section	2013
Salsberry, Pamela	Reviewer	National Institute of Nursing Research	T32 STAR Proposals	2013
Schweikhart, Sharon	Past Chair	Association of University Programs in Health Administration	Board of Directors	2013-2014
Schweikhart, Sharon	Member	Journal of Medical Care Quality	Editorial Board	2007-present
Schweikhart, Sharon	Co-Chair	Annual Meeting of the Decision Sciences Institute	Health Care Track	2014
Schweikhart, Sharon	Member	Humana Well-Being Advisory Board of Columbus	Advisory Board	2015-present
Schweikhart, Sharon	Chair	Assoc. of Univ. Programs in Health Administration	Leadership Development Committee	2013-2014
Schweikhart, Sharon	Member	Assoc. of Univ. Programs in Health Administration	Health Administration and Policy Centralized Application Service Committee	2014-present
Schweikhart, Sharon	Member	Commission on Accreditation of Healthcare Management Education	Cerner Information Technology Program Award Committee	2015-present

Faculty member	Role	Organization	Activity or Project	Years
Schweikhart, Sharon	Member	Commission on Accreditation of Healthcare Management Education	Ascension Leadership Program Award Committee	2015-present
Schweikhart, Sharon	Presenter/Facilitator	Partners Achieving Community Transformation	Career Day, Columbus Public Schools' Health Science Academies	2016
Schweikhart, Sharon	Member	Assoc. of Univ. Programs in Health Administration	Health Administration and Policy Centralized Application Service	2013-present
Schweikhart, Sharon	Organizer	Lean Enterprise Institute & ThedaCare Center for Healthcare Value Lean Summit	Lean Healthcare Research Symposium	2015
Schweikhart, Sharon	Presenter/Facilitator	Columbus Department of Public Health	Public Health Camp	2014-present
Schweikhart, Sharon	Team Lead & Presenter/Facilitator	Health Professions Educations Summer Symposium	Professional Education	2016
Seiber, Eric	Member	Academic Health – State Interest Group	Executive Committee	2013-present
Seiber, Eric	Senior Research Scientist	Battelle Memorial Institute	Health Care Reform Proposals	2015-present
Seiber, Eric	Outside Advisor	Caresource	Launch New Research Group	2015-present
Seiber, Eric	Advisory Council Member	United Healthcare Community Plan		2014-present
Shoben, Abigail	Member	Society for Clinical Trials	Program Committee	2015-present
Shoben, Abigail	Member	Food and Drug Administration	Anesthetic and Analgesic Drug Products Advisory Committee	2015-present
Shoben, Abigail	Statistical Reviewer	Kidney International		2015-present
Shoben, Abigail	Member	NIH/National Institute of Diabetes and Digestive and Kidney Diseases Time Trial	Data and Safety Monitoring Board	2014-present
Shoben, Abigail	Ad hoc Reviewer	Multiple Journals		2013-present
Shoben, Abigail	JSM Docent	American Statistical Association		2014
Song, Chi	Reviewer	Multiple Journals		2012-present
Sun, Qinghua	Associate Editor	Life Sciences		2011-present
Sun, Qinghua	Academic Editor	PloS		2012-present
Sun, Qinghua	Member	Chinca Climate Change and Human Health	Advisory Committee	2012-present
Sun, Qinghua	Guest Editor	BioMed Research International		2014
Sun, Qinghua	Member	Multiple Editorial Boards		2010-present
Tanenbaum, Sandra	Editor	<i>Person-centered Healthcare: How to Practice and Teach PCH</i>	Section 7	2014
Tanenbaum, Sandra	Section Co-Editor	<i>Journal of Health Politics, Policy and Law</i>	“Active Voice”	2013-present

Faculty member	Role	Organization	Activity or Project	Years
Tanenbaum, Sandra	Regional Editor for the USA	<i>Journal of Evaluation in Clinical Practice</i>		2013-present
Tanenbaum, Sandra	Chair	Special Interest Group in Health Policy	European Society for Person-Centered Healthcare	2014-present
Wapner, Andrew	Member	<i>Ohio's Food and AgriCulture Vision for the Future</i>	Governance Committee	2016-preset
Wapner, Andrew	Co-Lead	Local Matters	Healthcare Committee	2015-present
Wapner, Andrew	Member	Ohio Dept. of Health	SHA/SHIP Advisory Comm.	2016
Wapner, Andrew	Consultant	Health Policy Institute of Ohio	Food Insecurity/Healthy Food Access Evidence-based Inventory Development	2016
Wapner, Andy	Advisory Committee Member	HPIO	Ohio State Health Assessment/State Health Improvement Plan Advisory Committee	2015-2016
Wapner, Andy	Developer	HPIO	Food Security Evidence Inventory and Policy Brief for use in state and local health improvement planning HPIO	2015-2016
Weghorst, Chris	Member	Association of Schools and Programs of Public Health	Research Section	2013-present
Weghorst, Chris	Reviewer	Multiple Journals		2013-present
Wickizer, Thomas	Member	Institute for Work and Health, Toronto, Canada	Scientific Advisory Committee	2012-2015
Wickizer, Thomas	Member	Workers' Compensation Research Institute, Boston, MA	Scientific Advisory Group	2012-2015
Wickizer, Thomas	Member	Columbus Village Connections Program	Member Advisory Group	2013-present
Wickizer, Thomas	Reviewer	Multiple Journals		2013-present
Wickizer, Thomas	Member	Ohio CareSource Managed Care Organization	Member Research Advisory Group	2015-present
Wickizer, Thomas	Member	Institute for Social Insurance		2014-present
Xu, Wendy Yi	Reviewer for Conference Abstract	International Health Economists Association World Congress		2015
Xu, Wendy Yi	Mentor for Presidential Scholar	Academy Health Annual Research Meeting		2014
Xu, Wendy Yi	Reviewer	AcademyHealth Annual Research Meeting	Medicare Theme	2016
Yotebieng, Marcel	Member	Epidemiology: Open Access	Editorial Board	2011-present

Faculty member	Role	Organization	Activity or Project	Years
Yotebieng, Marcel	Reviewer for Conferences Abstract	International AIDS Society Conferences		2010-present
Yotebieng, Marcel	Reviewer for Conferences Abstract	International Conference on AIDS and STIs in Africa (ICASA)		2011-present
Yotebieng, Marcel	Abstract mentor	International AIDS Society conferences		2015-present
Yotebieng, Marcel	Member	The Collaborative Initiative for Paediatric HIV Education and Research (CIPHER) of the International AIDS Society (IAS)	Advocacy and research promotion	2013-present
Yotebieng, Marcel	Ad Hoc Reviewer	Medical Research Counsel – Wellcome Trust		2011-present
Yotebieng, Marcel	Member	Maximin project	Board of Directors	2014-present
Yotebieng, Marcel	Consultant	International Union Against Tuberculosis and Lung Disease	TB challenge, DR Congo	2015-present
Yotebieng, Marcel	Themed Discussion Leader	Conference on Retroviruses and Opportunistic Infections (CROI)	Mind the Gaps: Optimizing the PMTCT Cascade	2016
Yotebieng, Marcel	Member	Center for African Studies (OSU)	Board of Directors	2014-present

Table 3.2.2 Funded Service

Project Name	Principal Investigator & Department	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community Based Y/N	Student Participation Y/N	Division
Assessment and assurance of public health accreditation readiness	Wapner, Andrew	Ohio Department of Higher Education, BOR01-0000004917	7/1/16 to 6/30/19	\$1,890,042	\$0	\$0	\$1,890,042	Y	Y	CPHP/HSMP
Ohio's Food and AgriCulture Vision for the Future: A collective impact strategy and research agenda for InFACT and Ohio Food System Partners	Wapner, Andrew	Ohio State University InFACT Discovery Theme, dtd 2/2016	6/1/16 to 12/31/18	\$30,000	\$0	\$0	\$30,000	Y	N	CPHP/HSMP
Community Health Improvement Planning (CHIP) Prioritization	Wapner, Andrew	Hocking County Health Department, dated 6/7/16	6/15/16 to 9/30/16	\$2,300	\$0	\$0	\$2,300	Y	N	CPHP/HSMP
CHIP Planning	Bisesi, Michael	Franklin County Public Health, dated 5/15/13	4/15/13 to 12/31/14	\$8,000	\$8,000	\$0	\$0	Y	N	CPHP/EHS
Service Prioritization	Wapner, Andrew	Williams County Health District, dated 2/1/16	2/1/16 to 6/30/16	\$4,100	\$0	\$0	\$4,100	Y	Y	CPHP/HSMP
Community health improvement plan (CHIP) implementation support	Bisesi, Michael	Public Health - Dayton Montgomery County, 16-090	7/1/15 to 12/31/16	\$24,992	\$0	\$0	\$24,992	Y	N	CPHP/EHS
CHA/CHIP	Wapner, Andrew	Scioto County Health Department, dated 12/1/15	12/1/15 to 6/30/16	\$10,000	\$0	\$0	\$10,000	Y	Y	CPHP/HSMP
Accreditation support, CHA, agency strategic planning	Wapner, Andrew	Ashland County General Health District Board of Health, and Ashland City Health District Board of Health, dated 11/2/15	11/2/15 to 4/1/16	\$3,500	\$0	\$0	\$3,500	Y	N	CPHP/HSMP
Mercer County Community Health Needs Assessment planning	Bisesi, Michael	The Strategy Team Ltd. dba Illuminology, dated 9/28/15	10/1/15 to 3/31/16	\$4,340	\$0	\$0	\$4,340	Y	Y	CPHP/EHS
Franklin County Community Health Assessment planning	Bisesi, Michael	The Strategy Team Ltd. dba Illuminology, dated 9/22/14	9/22/14 to 4/30/15	\$4,000	\$0	\$4,000	\$0	Y	Y	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Logan County Health District, Agreement dated 8/6/14	9/1/14 to 2/27/15	\$5,800	\$0	\$5,800	\$0	Y	N	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Delaware County General Health District, Agreement dated 7/29/14	9/2/14 to 10/3/14	\$1,500	\$0	\$1,500	\$0	Y	N	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Allen County Health Department, Agreement	5/1/14 to 8/31/14	\$7,900	\$0	\$7,900	\$0	Y	N	CPHP/EHS

		dated 5/1/14								
Accreditation Support, CHA, CHIP	Bisesi, Michael	Putnam County Health Department, Agreement dated 2/1/13	2/1/13 to 2/28/14	\$10,000	\$10,000	\$0	\$0	Y	N	CPHP/EHS
Community Health Assessment facilitation and planning	Bisesi, Michael	Licking County Health Department, Agreement dated 2/13/14	2/3/14 to 4/30/14	\$806	\$806	\$0	\$0	Y	N	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Defiance County General Health District, Agreement dated 2/24/14 (Prime: Centers for Disease Control & Prevention)	2/10/14 to 8/31/14	\$6,700	\$6,700	\$0	\$0	Y	N	CPHP/EHS
To support collaborative prevention of infant mortality in facilitating a process of reassessing the collaborative organizational structure, modes of function, and governance	Bisesi, Michael	Global Evaluation & Applied Research Solutions, Statement of Work dated 1/15/14	1/13/14 to 9/30/14	\$1,925	\$1,925	\$0	\$0	Y	N	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Holmes County Health District, Service agreement dtd 2/28/14 (Prime: Centers for Disease Control & Prevention)	2/1/14 to 12/19/14	\$7,000	\$7,000	\$0	\$0	Y	N	CPHP/EHS
Intergovernmental Personnel Act (IPA) assignment for the Immediately Dangerous to Life or Health (IDLH) project	Bisesi, Michael	National Institute for Occupational Safety & Health, 13IPA1313351	8/5/13 to 8/4/14	\$18,499	\$18,499	\$0	\$0	N	N	EHS
Agency strategic planning	Bisesi, Michael	Perry County Health Department, Agreement dated 7/1/13 (Prime: Centers for Disease Control & Prevention)	7/1/13 to 6/30/14	\$3,500	\$3,500	\$0	\$0	Y	N	CPHP/EHS
Agency strategic planning	Bisesi, Michael	Stark County Health Department, Agreement dated 2/12/14 (Prime: Centers for Disease Control & Prevention)	2/12/14 to 8/29/14	\$2,100	\$2,100	\$0	\$0	Y	N	CPHP/EHS
Phase 1: Evaluation and activity updates for the Ohio Childhood Injury Action Group	Bisesi, Michael	Stark County Health Department, Agreement dated 9/10/14 (Prime: Centers for Disease Control & Prevention)	9/11/14 to 12/31/14	\$9,100	\$0	\$9,100	\$0	Y	N	CPHP/EHS
Campus based vending research	Kaye, Gail	Research Institute at Nationwide Children's Hospital, Agreement	10/8/09 to 12/31/15	\$239,526	\$68,436	\$0	\$34,218	N	Y	HBHP

		dated 10/9/09								
Health impact assessment: Alignment of affordable housing physical inspection policies in Ohio	Klein, Elizabeth	Ohio Housing Finance Agency, Agreement dated 1/4/12 (Prime: Pew Charitable Trusts)	1/1/12 to 12/31/13	\$80,422	\$26,597	\$0	\$0	Y	N	HBHP
Foundations for healthy living	Pirie, Phyllis	Centers for Disease Control & Prevention, U48DP001912	9/30/10 to 9/29/14	\$1,211,650	\$271,650	\$0	\$0	Y	Y	HBHP
Assessing public education effectiveness in moving private well owners to test and treat water	Pirie, Phyllis	National Ground Water Association Inc, Agreement Dated 10/01/14 (Prime: Centers for Disease Control & Prevention)	10/1/14 to 8/31/15	\$23,984	\$0	\$23,984	\$0	N	N	HBHP
Reaching a wider audience: Modifying NetWellness content and outreach	Pirie, Phyllis	National Library of Medicine, G08LM011075	9/1/11 to 8/31/14	\$280,328	\$87,346	\$0	\$0	N	Y	HBHP
A process for estimating the association of occupation and chronic disease	Dembe, Allard	National Institute for Occupational Safety & Health, R21OH010323	7/1/12 to 6/30/15	\$408,625	\$207,225	\$0	\$0	N	N	HSMP
Evaluation services for the creating healthy communities, early childhood obesity prevention and injury prevention programs	Dembe, Allard	Ohio Department of Health, CSP909514 (Prime: US Department of Health & Human Services)	5/29/14 to 9/30/15	\$303,807	\$44,185	\$259,622	\$0	Y	N	HSMP
Prevention problem gambling	Dembe, Allard	Ohio Department of Mental Health & Addiction Services, 99-12506-GAMBL-P-15-1678	7/1/14 to 6/30/15	\$50,000	\$0	\$50,000	\$0	Y	N	HSMP
Evaluation planning for youth-led prevention projects	Dembe, Allard	Ohio Department of Mental Health & Addiction Services, 99-12506-PREV-P-15-1666	7/1/14 to 6/30/15	\$50,000	\$0	\$50,000	\$0	Y	N	HSMP
Improving care coordination for children with disabilities through an accountable care organization	Hilligoss, Phillip	University of North Carolina, 5100157 (Prime: PCORI)	9/1/14 to 8/31/17	\$408,092	\$0	\$408,092	\$0	N	N	HSMP
Opioid dosing guideline evaluation	Wickizer, Thomas	Ohio Department of Aging, AGE01-0000002405 (Prime: Centers for Medicare & Medicaid Services)	10/1/13 to 6/30/15	\$80,000	\$80,000	\$0	\$0	Y	N	HSMP

2015 Ohio Medicaid assessment survey (Federal)	Sahr, Timothy (Health Sciences); Lu, Bo; Ferketich, Amy	Ohio Department of Medicaid, ODM201407 (Prime: Centers for Medicare & Medicaid Services)	7/30/14 to 6/30/17	\$4,410,445	\$0	\$3,477,917	\$932,528	N	Y	BIO, EPI
2015 Ohio Medicaid assessment survey (State GRF/OHT funds)	Sahr, Timothy (Health Sciences); Lu, Bo; Ferketich, Amy	Ohio Department of Medicaid, ODM201407	7/30/14 to 6/30/17	\$1,7,14,082	\$0	\$1,356,801	\$357,281	N	Y	BIO, EPI
Examining the impact of Ohio's Medicaid expansion: Health improvements for Ohio's women and children	Sahr, Timothy (Health Sciences); Lu, Bo; Ferketich, Amy	Ohio Department of Medicaid, ODM201434 (Prime: Centers for Disease Control & Prevention)	12/2/13 to 6/30/15	\$658,128	\$220,000	\$228,679	\$209,449	N	N	BIO, EPI
Bridging the gap in e-capacity for global health research and training in eastern Africa	Gebreyes, Wondwossen (Veterinary Preventive Medicine); Bisesi, Michael	John E Fogarty International Center, R25TW009707	5/18/15 to 4/30/18	\$323,631	\$0	\$107,877	\$107,877	Y	N	EHS
Quality improvement project for the Ohio partners for smoke-free families maternal & child health program expansion	Crane, Dushka (Health Sciences); Ferketich, Amy	Ohio Department of Health, DOH01-0000037837	8/6/14 to 6/30/17	\$750,500	\$0	\$375,500	\$375,000	Y	N	EPI

3.2.d. Identification of the measures by which the school may evaluate the success of its service efforts, along with data regarding the school's performance against those measures for each of the last three years. See CEPH Outcomes Measures Template.

One of the five categories of goals and related initiatives in the College's 2015-17 Strategic Plan is Outreach and Engagement. **Table 3.2.3** below summarizes the major goal, initiative, target outcomes and data for 2014 and 2015. The percentage of faculty engaged in service activities, both professional and community, has increased. An impressive number of organizations are engaged, but there remains need to expand activities, especially relative to community service.

Table 3.2.3 Goal, Initiative and Outcome Measures for Service

D. OUTREACH & ENGAGEMENT				
Strategic Goal D.1. Outreach and Engagement: Serve on key external committees, sections, councils and Boards.				
Outcome Measures for D.1.1.				
Initiative: Faculty involved with external organizations and representation on external committees, sections, councils, and Boards.				
Outcome Measure	Target 2017	2016	2015	2014
Faculty representation	100% faculty involved	86%	79%	78%
Number organizations	100	103	106	110
Cumulative outreach activities	200	124	130	129

3.2.e. Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.

Students in the College of Public Health engage in service via many pathways, including courses, practicums, and culminating projects. In addition, students as individuals or in student groups (both inside and outside of the College of Public Health) engage in service activities. An example is the College's involvement with the Albert Schweitzer Fellowship Program. In 2010 a consortium of Ohio colleges came together (11 OSU Colleges, including the College of Public Health), two Colleges on the Ohio University campus in Athens, and one private institution, Trinity Lutheran Seminary) to form the Columbus-Athens Schweitzer Fellows Program. The College of Public Health has had 4 fellows in the past few years and one fellow in the current 2016-2017 academic year. The students work collaboratively with a local community agency and each Fellow designs and carries out a service project of at least 200 hours that addresses an unmet community health-related need. At least 125 of the 200 hours must be spent in direct, face-to-face contact with the population being served. Each Fellow works under the supervision of a Site Mentor from the

participating agency and with input from an Academic Mentor of the student's choice. Students have been involved in nutrition and wellness needs of underserved residents of Columbus' historic Franklinton neighborhood; addressing teen health literacy in the South Side of Columbus by facilitating weekly workshops and producing health-related radio segments for Youth Beat Radio; and working with the Centering Pregnancy Program.

Another example of student service occurs within the structure of a graduate-elective, Public Health in Action. This course is designed to provide student's an opportunity to participate in an organized service activity that is connected to specific learning outcomes and that meet identified community needs. The class starts with grounding in the research associated with the health issue, along with community mobilization and service learning principles. Students are required to complete 42 hours of field work. Examples of projects include: students assessment of the availability and affordability of healthy food sold in corner stores in several disenfranchised neighborhoods located in a large metropolitan area. Findings from the food survey served as a community assessment for the local United Way's 'Fresh Food Here' project resulting in increased availability of fresh foods in low income areas of the city. Students examined the provision of services to drug-using post-partum women and identified gaps in the continuum of care, leading to more efficient service delivery. Most recently, students researched the dynamics of poverty and engaged in field work with community partners serving residents in poverty (shelters, food banks, and community based programs). Four thousand hours of direct community service have been provided over the last eight years.

As noted above, student organizations offer another avenue for service for both student and faculty. Faculty and staff serves as advisers of these organizations and oversees diverse community projects. One example is EnCompass, an undergraduate student organization dedicated to bridging the gap between medical and social care. The goal of this organization is to design and provide services to fill this gap. Volunteers connect people to existing resources in Columbus, addressing issues ranging from food insecurity and homelessness to lack of supplemental medical care. A second example is the Multicultural Public Health Student Association (MPHSA). MPHSA aims to assist public health and health administration students to become culturally competent through a multitude of educational and a range of empowering activities that lead to the overall enhancement of each student's public health knowledge and practice.

Other key student organizations that have a service/engagement component include:

- Association of Future Health Care Executives (Dr. Julie Robbins advisor): A professional organization for graduate students pursuing degrees in fields of study such as healthcare administration, public health, business, law and medicine. Members are exposed to a vast array of events each quarter including events that promote diversity awareness, community service, professional development and networking.

- Buckeyes for Public Health (B4PH) (Dr. Amy Acton advisor): Has as its primary purpose of promoting all aspects of public health by empowering OSU students through opportunities for service, personal and professional development, and fellowship in the fields of local and global public health. Serve as a liaison to connect students with interdisciplinary organizations to receive hands-on experiences in the field.
- Buck-I-SERV: This is OSU's Alternative Break Program. Buck-I-SERV Alternative Breaks are weeklong, substance-free programs centered on community service and civic engagement. Buck-I-SERV is held during the university's breaks including winter (December/January), spring (March), and summer (May) breaks. Students will learn the importance of reflection, social justice, active citizenship, and civic engagement while gaining new perspectives through working in diverse environments. Since 2013, 96 public health students have been involved for a total of 3465 hours; 2 faculty members from the College of Public Health faculty have served as faculty advisors.

3.2.f. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 3.2.

Strengths:

- Service is expected and explicitly recognized in the College's Mission and Vision statements, *Pattern of Administration, Appointments, Promotion and Tenure Criteria and Procedures*, and *2015-17 Strategic Plan*.
- Individual faculty members, and faculty and staff groups are well-connected and actively involved in service to community agencies and organizations, and other professional organizations at local, state, regional, national and international levels.
- Qualitative and quantitative targets and metrics are established.

Challenges/Weaknesses/Plans:

- A system to capture and track the varied types of public/ community service and engagement by students, staff and faculty is needed; efforts to do this at the University and College level are in process. This will improve with full implementation of the Data Subcommittee structure.

CRITERION 3.3 WORKFORCE DEVELOPMENT

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

3.3.a. Description of the ways in which the school periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.

Center for Public Health Practice

As mentioned previously, the Center for Public Health Practice (CPHP or Center), formerly known as the Office for Workforce Development, is one of two centers within the College of Public Health and is central to the assessment and delivery of the College's continuing education initiatives. After almost 6.5 years of leadership by Dr. Michael Bisesi, who also serves as Senior Associate Dean of Academic Affairs and Interim Chair of Environmental Health Sciences, Dr. Andrew Wapner was recruited to be the Director and Assistant Professor in the Division of Health Services Management and Policy Division. Dr. Wapner is a pediatrician and public health specialist with more than five years of public health experience as a medical director at the Ohio Department of Health (ODH). He earned his MPH degree from Ohio State, and throughout his work at ODH he worked collaboratively with CPHP to develop continuing education opportunities, and participated in them as well. He has experience working with state health policy, healthcare and public health reform and will bring this experience to CPHP to ensure continuing education resources meet the changing needs in the communities we serve. The primary professional staff for the Center are the highly experienced Associate Director Joanne Pearsol, MA, MCHES (0.5FTE) and Senior Program Manager Melissa Sever, MPH, MCHES (0.9 FTE).

Since Dr. Wapner's arrival, CPHP has worked to update its strategic plan, revising the Center's mission, vision, and values and establishing a new set of strategic priorities. The proposed mission is *developing people and organizations to advance community health*. Its vision is *people working together to achieve a culture of health*. Priorities are aligned with the College's strategic plan and University goals and include: 1) catalyze community-centered and collaborative population health planning efforts, 2) develop the current and future population health workforce, and 3) establish the Center as a hub for faculty and practice connection and collaboration within the College and beyond. The strategic plan is expected to be reviewed and approved by the Executive Committee in the fall of 2016.

The CPHP has an impressive history relative to high-profile, federally-funded workforce development and continuing education initiatives. The CPHP has been funded through the Health Resources and Services Administration (HRSA) Public

Health Training Center (PHTC) program for more than 15 years. From 2000 through 2010, CPHP was funded as Co-PI for the joint Pennsylvania and Ohio Public Health Training Center. In 2010, funding was available to support single state PHTCs and CPHP was awarded funding to establish itself as the Ohio Public Health Training Center. During the period of 2010 – 2014, CPHP's former Director, Dr. Michael Bisesi, led the national leadership network of HRSA PHTCs (2011-2014) and Melissa Sever served as the lead Program Coordinator for the network (2012-2013) and established and led the Evaluation Special Interest Group (2011–2014). In 2014 HRSA changed the PHTC model and the funding structure to a regional one, supporting ten PHTCs nationally. In anticipation of this funding shift, the Center initiated and facilitated formal dialogue among the university PHTCs in Region V (Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin). The partners successfully pursued and were awarded funding as the HRSA Region V Great Lakes Public Health Training Collaborative in 2014. Due to its size, central location within the region, and history of workforce development initiatives, the University of Illinois at Chicago was identified as the lead site; CPHP serves as a Co-PI with involvement regionally and with primary focus in Ohio. Throughout these changes, CPHP has leveraged these cross-state and regional partnership to provide high-quality and relevant workforce development opportunities.

CPHP is now also funded through the Ohio Department of Higher Education to work with the Ohio Department of Health (ODH) to ensure Ohio's local public health workforce is adequately trained and equipped to support their agencies' efforts to become accredited by the Public Health Accreditation Board (PHAB) by 2020, as required by state law. Working closely with ODH, CPHP will assess accreditation readiness and workforce development training needs related to completing accreditation prerequisites and will provide appropriate trainings and technical assistance to many of the state's 118 local public health agencies. The project's goals are to have all local public health agencies determine their appropriate pathway to accreditation (either as a single agency or through shared services, merger, council of governments, etc.) and increase capacity within each agency to successfully complete the PHAB prerequisites. At the same time, CPHP will be working with ODH to better understand local public health workforce capacity and create opportunities for standardization of public health practice to ensure all Ohioans receive core public health services. To complete the project, CPHP is partnering with staff from the College's Center for Health Outcomes, Policy and Evaluation Studies (HOPES) to study the process, determinants and outcomes of accreditation. This information will be invaluable to state and local public health organizations across the country, as well as national partners such as PHAB and the National Association of County and City Health Officials.

Needs Assessment

The CPHP uses both informal and formal approaches to identify and prioritize the needs and demands of Ohio's public health workforce. Informal approaches include: tracking ongoing training requests; capturing current, emerging and anticipated

issues discussed in various committees, conferences, and media; and monitoring areas of emphasis from professional agencies, organizations and the literature. All training and course evaluations collect input from participants regarding course/content improvements and other topical areas of need. For several years CPHP also invited ongoing requests via a web-based comment form; however, this approach was not very productive.

Formal needs assessments involve use of electronic surveys and facilitated focus group discussions to generate primary needs assessment data. Formal needs assessments are conducted less frequently than informal assessments due to the cost (staffing and funding) to conduct. The most recent assessment, online and based on the Council on Linkages Core Competencies (COL), was conducted throughout 2010-2011 with mid-level managers at the Ohio Department of Health and 43 of Ohio's 123 local health departments (available in the eResource file). In all, over 1,700 public health practitioners were surveyed. The surveys identified Financial Planning and Management and Policy Development and Program Planning as two high- priority needs. In response, CPHP convened a group of local practice partners and ODH's Chief Financial Officer to develop online self-study modules and an in-depth blended learning course on financial management in public health. To date, more than 125 practitioners are enrolled in or have completed these course offerings. Additionally, the Center worked in partnership with ODH to bring a national policy curriculum, *Shaping Policy for Health*, to Ohio. Five courses from this series were offered, providing over 200 practitioners with in-depth training relative to advocacy and policy development. Two online policy related courses, *Ohio Policymaking Basics* and *Creating Opportunities for Healthy Communities*, were also developed in partnership with the Health Policy Institute of Ohio, ODH, and the College's former Prevention Research Center. These two online offerings have collectively trained nearly 1,000 practitioners in policy, systems, and environmental change to date. In addition to competency-based areas of interest, survey respondents indicated a need for more online (self-study and blended) course options that would provide flexibility in attendance and reduce the need for travel. In response, the Center expanded its online offerings (see above) and delivery capacity through an online learning management system, Adobe Connect webinar functionality, and Media Site lecture recording.

Two other online surveys, based on select U.S. Department of Homeland Security preparedness target capabilities, were conducted in collaboration with the Ohio Emergency Management Agency during the period 2011-2012. The focus of the surveys was to first determine the inventory of field monitoring and laboratory analytical instruments owned by or accessible to agencies and organizations throughout Ohio that would be engaged directly or indirectly with response to natural, intentional or accidental incidents or disasters involving chemical, biological, and radiological agents. A follow-up survey focused on determining the capacity relative to number and type of personnel educated and trained how to use the field and laboratory instruments. Inherent to both surveys, was the goal to identify any needs for increased instrumentation and/or access to the devices, and, gaps in

expertise that could be fulfilled via enhanced workforce development. While the surveys yielded a wealth of information, further work was discontinued due to funding cuts and stakeholder priority changes.

Focus groups are another means by which CPHP gathers needs assessment data. In 2014, the CPHP convened (electronically) stakeholders from local and state public health organizations to verify and/or identify current training needs. Top needs identified included: technology, communication, health equity, performance management, and leadership/management (report available in the eResource file). In response, CPHP included three courses addressing several of these topics as part of its 2015 Summer Program in Population Health: Place and Health Equity, Performance Management Systems for Public Health Agencies, and Personal Leadership in Public Health (the latter was cancelled due to low enrollment). The most recent focus group, conducted in 2015, addressed challenges and promising practices relative to the integration of public health and primary care to improve population health. Findings will be used to inform both academic and continuing education offerings within the College. At the time of this report, CPHP was actively involved in planning for an environmental health inquiry project which will be implemented in late 2016 and will gather information from environmental public health practitioners regarding scope of services and associated training needs. In addition, a comprehensive, competency-based needs assessment is planned as part of the national PHTC network; Ohio will be an active participant in this assessment which is anticipated to occur in 2017.

Despite the ongoing need for workforce development support, practitioner time away from work and lack of funding to support travel and education have become two common barriers to participation in training cited in many of the needs assessments. To improve access to continuing education, CPHP and the College are actively working to increase the number of distance-based learning opportunities; however, this requires significant staff and faculty time to develop. Furthermore, the College shares one full-time instructional designer to support both continuing education offerings and academic course delivery. Lack of funding presents a more difficult challenge. Both federal and state funding used to support public health workforce development has been significantly reduced or is no longer available. Line items that support staff attendance at conferences and training are being removed from local and state agency budgets and travel from government employees is increasingly limited. Reductions in overall funding for public health training centers has significantly impacted CPHP's ability to provide continuing education opportunities as well. In FY 2013-2014, CPHP funding was reduced by more than 80%, requiring CPHP to reduce staff and subsequently its course offerings. Despite these challenges, CPHP continues to assess the needs of its target audience, prioritize its course development and delivery efforts, and look for creative ways to address these barriers.

Below is a timeline of needs assessment activity (shaded cells) both completed and planned (2011-2017).

3.3 Workforce Development

Assessment Type	2011	2012	2013	2014	2015	2016	2017
Online, competency-based assessment	X	X					X
Focus groups				X	X	X	
Ongoing methods (evaluation feedback; literature, etc.)	X	X	X	X	X	X	X

All of these approaches, both informal and formal, have guided prioritization and decision making relative to the College's continuing education offerings.

3.3.b. A list of the continuing education programs, other than certificate programs, offered by the school, including number of participants served, for each of the last three years. Those programs offered in a distance learning format should be identified. Funded training/continuing education activities may be reported in a separate table. See CEPH Template 3.3.1 (optional template for funded workforce development activities). Only funded training/continuing education should be reported in 3.3.1.

The Center has received external funding for workforce develop activities. **Table 3.3.1** lists examples of funding for public health workforce development during the past three years. The Center offers non-academic, continuing education courses, modules, and events addressing a variety of workforce development topics. A listing is shown in **Table 3.3.2**. The modes of delivery include classroom, blended, asynchronous and synchronous distance learning, workshops, and conference presentations.

Despite national reductions in funding for workforce development during this time period, CPHP offered more than 50 courses/modules and provided training to more than 7,500 enrollees. Enrollees represented governmental public health, academia, primary care, and non-profit agencies in Ohio, across the United States, and internationally. Some of these learning opportunities were sponsored solely by CPHP and others were offered in partnership with other academic institutions and practice organizations (see Criterion 3.3.e). Many of the courses/modules were offered at no charge as part of required grant deliverables, others were offered for a fee or as part of the CPHP's contractual/fee-for-service work. One of the College's largest and most successful offerings is an annual on-campus *Summer Program in Population Health*. The Summer Program consists of 10-15 week-long, two-day and three-day courses and is attended by 130-140 public health, healthcare and other health-related practitioners annually. Table 3.2.2 below includes a *partial* list of some of the non-academic courses offered between 2013 and 2015 and includes the approximate number of participants who completed the offerings. (Courses with an asterisk* are online, distance-based offerings.)

Table 3.3.1 Funded Workforce Development

Project Name	Principal Investigator & Department	Funding Source	Funding Period Start/End	Amount Total Award	Amount FY2014	Amount FY2015	Amount FY2016	Community-Based Y/N	Student Participation Y/N	Division
Workforce development toolkit for state and territorial public health agencies: Phase 1	Bisesi, Michael	Association of State and Territorial Health Officials, 85-12001 (#240) (Prime: US Department of Health & Human Services)	1/4/2014 to 6/30/2014	\$7,000	\$7,000	\$0	\$0	N	N	CPHP/EHS
Workforce development toolkit for state and territorial public health agencies: Phase 2	Bisesi, Michael	Association of State and Territorial Health Officials, 85-10012 (#327) (Prime: US Department of Health & Human Services)	8/11/2014 to 1/31/2015	\$8,240	\$0	\$8,240	\$0	N	N	CPHP/EHS
Workforce development plan consultation	Bisesi, Michael	Allen County Health Department, Agreement dated 12/1/14 (Prime: Centers for Disease Control & Prevention)	12/1/2014 to 4/30/2015	\$10,600	\$0	\$10,600	\$0	Y	Y	CPHP/EHS
Workforce development consultation	Bisesi, Michael	Putnam County Health Department, Agreement dated 4/2/15	4/1/2015 to 9/29/2015	\$4,500	\$0	\$4,500	\$0	Y	Y	CPHP/EHS
QI and WFD plan development	Bisesi, Michael	Youngstown City Health District, Agreement dated 2/20/2014 (Prime: Centers for Disease Control & Prevention)	2/1/2014 to 8/31/2014	\$6,800	\$6,800	\$0	\$0	Y	Y	CPHP/EHS
Community Engagement and Facilitation Training	Bisesi, Michael	Clark County Combined Health District, dated 7/9/15	7/1/15 to 9/30/15	\$4,400	\$0	\$4,400	\$0	Y	N	CPHP/EHS
Continuous quality improvement training and technical assistance	Bisesi, Michael	Knox County Health Department, Agreement dated 3/27/14 (Prime: Centers for Disease Control & Prevention)	3/17/2014 to 12/19/2014	\$6,490	\$6,490	\$0	\$0	Y	N	CPHP/EHS

Continuous quality improvement training and technical assistance	Bisesi, Michael	Lucas County Health Department, Agreement dated 1/23/14 (Prime: Centers for Disease Control & Prevention)	12/9/2013 to 5/31/2014	\$13,900	\$13,900	\$0	\$0	Y	N	CPHP/EHS
Ohio Public Health Training Center	Bisesi, Michael	Health Resources & Services Administration, UB6HP20203	9/1/2010 to 8/31/2014	\$2,061,329	\$111,329	\$0	\$0	Y	Y	CPHP/EHS
Workforce Development and Quality Improvement Planning workshops	Bisesi, Michael	New Jersey Association County & City Health Officials, Agreement dated 6/23/14	6/20/2014 to 9/26/2014	\$8,400	\$8,400	\$0	\$0	Y	N	CPHP/EHS
Shaping Policy for Health workshops	Bisesi, Michael	Ohio Department of Health, ADMIN-20965 ADTS#58657 (Prime: Centers for Disease Control & Prevention)	5/29/2013 to 9/29/2013	\$88,740	\$88,740	\$0	\$0	N	N	CPHP/EHS
Mid America Regional Public Health Leadership Institute (MARPHLI) mentor training webinars	Bisesi, Michael	University of Illinois, P1097346	12/1/2014 to 8/15/2015	\$4,999	\$0	\$4,999	\$0	N	N	CPHP/EHS
Region V Public Health Training Center Collaborative	Bisesi, Michael	University of Illinois, Agreement Dated 12/05/14 (Prime: Health Resources & Services Administration)	9/1/2014 to 8/31/2016	\$188,292	\$0	\$90,000	\$98,292	Y	Y	CPHP/EHS
Continuous quality improvement training and technical assistance	Bisesi, Michael	Public Health - Dayton & Montgomery County, 14-244	10/1/2014 to 12/31/2015	\$19,800	\$0	\$19,800	\$0	Y	N	CPHP/EHS
Continuous quality improvement training and technical assistance	Bisesi, Michael	Seneca County General Health District, Agreement dated 4/1/15	4/1/2015 to 9/30/2015	\$5,900	\$0	\$5,900	\$0	Y	Y	CPHP/EHS
Continuous	Bisesi,	Williams County	2/15/2015 to	\$8,900	\$0	\$8,900	\$0	Y	N	CPHP/

quality improvement training and technical assistance	Michael	Health District, Agreement dated 3/13/15	9/30/2015							EHS
Continuous quality improvement training and technical assistance	Bisesi, Michael	Perry County Health Department, Agreement dated 02/23/2015	1/12/2015 to 8/31/2015	\$8,700	\$0	\$8,700	\$0	Y	N	CPHP/EHS
Obesity Training Modules	Wapner, Andy	OSU Extension (Funding from USDA) dated 4/15/16	4/15/16 to 08/31/16	\$6,884	\$0	\$0	\$6,884	N	N	CPHP/HSMP
ASTHO Public Health WINS	Wapner, Andy	Association of State and Territorial Health Officials, Agreement dated 05/26/2016	05/26/16 – 8/31/17	\$65,000	\$0	\$0	\$65,000	N	N	CPHP/HSMP
Region II PHTC QI Plan Development Webinars	Wapner, Andy	Columbia University, Agreement dated 02/01/16	02/01/16 – 07/31/16	\$4,300	\$0	\$0	\$4,300	N	N	CPHP/HSMP
GRC Leadership Practices Inventory	Wapner, Andy	Government Resource Center	6/1/16 – 6/30/16	\$1,100	\$0	\$0	\$1,100	N	N	CPHP/HSMP
Greene County Training Needs Assessment	Bisesi, Michael	Greene County Health Department, Agreement dated 08/21/15	08/21/15 – 03/30/16	\$2,500	\$0	\$0	\$2,500	Y	Y	CPHP/EHS
Assessment and assurance of public health accreditation readiness	Wapner, Andrew	Ohio Department of Higher Education, BOR01-0000004917	7/1/16 to 6/30/19	\$1,890,042	\$0	\$0	\$1,890,042	Y	Y	CPHP/HSMP

In addition to the continuing education courses conducted through CPHP, there are continuing education events offered by other divisions and programs within College. However, these events are not coordinated or tracked in a centralized fashion. Four examples include:

- Two MOOCs (massive open online courses), *Applied Logistic Analysis* and *Applied Logistic Regression*, were developed and launched in 2014-2015 by a faculty member in the Division of Biostatistics. To date, over 20,000 participants had enrolled in these offerings.
- Voices from the Community Lecture Series brings stakeholders and leaders from communities across Ohio and nationally to present on current topics relative to public health practice. Examples of past lectures include: *Ebola from the Front Lines*, *Hospice Care and the HIV/AIDS Community*, and *Moms2Be: Reducing Disparities in Infant Mortality in Columbus Neighborhoods*.
- Webinar *Overview of Environmental Health* by the Division of Environmental Health Sciences.
- Workshop *Naturally Occurring and Technologically Enhanced Radiative Material: Occurrence, Field Characterization, Handling and Disposal* via a collaborative effort at the University and involving the Division of Environmental Health Sciences to develop and present.

In order to meet the credentialing and/or licensing requirements of the various disciplines that make up the public health workforce, CPHP typically offers continuing education credit for those who participate in training. The Center is an approved provider of continuing education credit through the National Commission for Health Education Credentialing (CHES/MCHES) and the National Board of Public Health Examiners (CPH). The CPHP also works with the Ohio Nurses Association (RN) and the Ohio State Board of Sanitary Registration (RS) to award credit to those disciplines, often at no charge.

Table 3.3.2 Continuing Education Module and Course Offerings for Period 2013-2015

Workforce Development Modules and Courses	Participant Completes
CQI in Public Health: The Fundamentals*	1,020
CQI in Public Health: Tool Time*	515
Ohio Policymaking Basics*	484
Creating Opportunities for Healthy Communities*	483
Public Health 101*	557
Introduction to Applied Financial Mgt. in Public Health (self-study)*	17
Addressing Workforce Development in your Agency*	111
Writing a QI Plan for your Agency*	13
Disaster Surge for Public Health Nurses Series (4 courses)*	372
Practice in Action Monthly Webinar Series*	582
Organizing at Work*	63
Presentation Do's and Dont's*	33
Social Media in Public Health*	64
Mid-America Public Health Leadership Institute Mentor Webinars (4)*	80
Self-Instructional Modules for Evidence-Based PH Practice*	13
2013 Summer Program in Population Health (12 courses)	144
2014 Summer Program in Population Health (10 courses)	132
2015 Summer Program in Population Health (9 courses)	149
Exploring Learning Technologies UnConference	65
Systems Leadership in Public Health	13

3.3 Workforce Development

Workforce Development Modules and Courses	Participant Completes
Evaluating Data for Public Health Decision Making	13
Workforce Development and QI Plan Workshops (8 workshops)	212
Workforce Development Planning: NACCHO Survive & Thrive*	103
Student Leadership Practices Inventory	9
Introduction to Applied Financial Management in Public Health	10
Strategic Planning for Public Health Organizations	25
Shaping Policy for Health (2 courses)	79
Engaging the Community in Your Work	13
Human Resource Management in Public Health	6

*Distance-based courses

It should also be noted that the Center's contribution to workforce development goes beyond developing and delivering continuing education. For example, the Center developed templates to assist local public health in developing public health workforce development plans, competency-based job descriptions, and quality improvement plans. These have been used by state and local public health agencies across the country. In 2013, the Center received a promising practice award from the Health Resources and Services Administration for this contribution. In 2014, CPHP was retained by the Association of State and Territorial Health Officials (ASTHO) to create a workforce development plan toolkit for state public health agencies. Center staff are currently serving on the National Association of County and City Health Officials Workforce Committee. Other examples of the Center's service work are described under Criterion 3.2.

3.3.c. Description of certificate programs or other non-degree offerings of the school, including enrollment data for each of the last three years.

The College of Public Health currently does not offer non-degree certificate programs for academic credit. A University Certificate Committee activated in 2015 plans to propose a new policy for academic certificate programs during spring 2016, with approvals anticipated at the University-level by the end of 2016. The College has plans to develop and launch select graduate certificate programs for academic credit beginning in 2017.

The CPHP, has offered a non-academic *Public Health Management and Leadership certificate and Epidemiology certificate* in recent years. Despite the ongoing need for training in these topical areas, the Center is no longer accepting new enrollees for either certificate due to limited enrollment and oversight resources within the Center itself, and in anticipation of a more College-wide approach to certificates.

3.3.d. Description of the school's practices, policies, procedures and evaluation that support continuing education and workforce development strategies.

The College of Public Health describes its policies and practices related to continuing education in both its Pattern of Administration and Appointments,

3.3 Workforce Development

Promotion, and Tenure Criteria and Procedures documents. CPHP is the primary coordinator of continuing education offerings through the College and ensures content is delivered both via conventional classroom and distance learning modes. One of the more significant contributions to continuing education supported by CPHP that actively engages faculty to fulfill their continuing education needs is the Summer Program in Population Health described above. Faculty report participation in continuing education in their annual reviews. In addition, the College’s *2015-2017 Strategic Plan* includes goals and initiatives relative to continuing education and public health workforce development. **Table 3.3.3** below lists some with related metrics. Note that the decrease in both professionals trained and DL modules developed is due to an 80% reduction in federal public health training center funding between in 2014 - 2015. Despite this significant reduction in funding, CPHP continues to exceed its 2017 target of professionals trained.

Table 3.3.3 Goal, Initiative and Outcome Measures for Workforce Development

Outcome Measures for D.2.1.				
<i>Initiative: Utilize grants and contracts to provide public health organizations with technical assistance in organizational development, strategic planning, quality improvement and group facilitation.</i>				
Outcome Measure	Target 2017	2016 (to date)	2015	2014
Number of working professionals educated via Center for Public Health Practice	2,000 professionals	Total Number = 1,955	Total Number = 2,586	Total Number = 3,629
		Summer Enrollees = 136	Summer Enrollees = 149	Summer Enrollees = 134
Number of DL Accessible Modules	50 modules or courses	DL modules = 12	DL Modules = 15	DL Modules = 27
		No Accessed = 12	No. Accessed = 15	No. Accessed = 27

An example of the College’s commitment to CPHP’s leadership in workforce development is a soon to be developed, jointly funded clinical faculty position within the College (through the Center for Public Health Practice) and the College of Food, Agriculture and Environmental Science’s Department of Extension. The position will be heavily focused on workforce development and continuing education for the state’s cooperative Extension network staff and on connecting this network to local public health. And finally, the College has committed to supporting CPHP’s ability to provide workforce development opportunities during difficult financial periods through salary and benefit support for key Center staff.

3.3.e. A list of other educational institutions or public health practice organizations, if any, with which the school collaborates to offer continuing education.

During the past three years the Center for Public Health Practice (CPHP) has collaborated with many partners to conduct activities related to workforce development. A brief list of organizations and agencies include:

- Local health departments in Ohio
- Association of Ohio Health Commissioners (AOHC)
- Ohio Department of Health (ODH)
- Ohio Hospital Association
- Ohio Colleges of Medicine Government Resource Center
- Ohio Emergency Management Agency
- Ohio Public Health Association (OPHA)
- Health Policy Institute of Ohio (HPIO)

Collaborating universities in Ohio include:

- Case Western Reserve University
- University of Cincinnati
- Kent State College of Public Health
- University of Toledo and the Northwest Ohio Consortium for Public Health
- Northeast Ohio Medical University and the Consortium for Eastern Ohio MPH Program
- Wright State University.

Universities outside Ohio include:

- University of Kentucky
- University of Illinois
- Indiana University
- University of Michigan
- University of Minnesota
- University of Pittsburgh
- Rutgers University
- The University of Wisconsin.

Some specific examples of continuing education and other workforce development related efforts conducted in partnership or collaboration with other academic and practice partners includes, but is not limited to:

- *Creating Opportunities for Healthy Communities* online course developed in partnership with the ODH and the College's Prevention Research Center (no longer funded)
- *Ohio Policymaking Basics* online course developed in partnership with the Health Policy Institute of Ohio
- *Summer Program in Population Health* offered in partnership with the Ohio Colleges of Medicine Government Resource Center
- *2010-2011 Competency Based Needs Assessment* conducted with data analysis support from the University of Cincinnati
- *Monthly Practice in Action Webinars* planned and conducted in partnership with the University of Pittsburgh and Drexel University
- *Public Health 101* developed with input from an advisory committee comprised of representatives from OPHA, ODH, AOHC and local governmental public health agencies
- *Workforce Development and QI Plan Workshops* held in partnership with the Indiana University School of Public Health and Rutgers, NJ

- *Workforce Development Plan, Competency Based Job Description, and QI Plan templates* developed with input and guidance from our practice partners in state and local public health across Ohio.

Additionally, CPHP provides training through its fee-for-service work with numerous local and state health agencies. In these instances, CPHP contracts with an agency to provide training to agency staff, neighboring agency staff, and community partners. Examples include onsite training on topics such as: continuous quality improvement, public engagement, leadership, and facilitation. Often, this training is provided in addition to other service-related work.

3.3 f. *Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.*

Assessment:

- The OSU College of Public Health meets Criterion 3.3.

Strengths:

- The College primarily via CPHP contributes substantially to continuing education and workforce development activities in Ohio and beyond.
- CPHP has collaborated with multiple academic institutions in Ohio and in other states and works in partnership with state and local governmental public health agencies across the U.S., as well as other public health organizations to develop and deliver non-academic course offerings.
- Through its recent appointments of an Associate Dean for Outreach and Engagement and a Director for the Center for Public Health Practice, the commitment to workforce and organizational development continuing education provision is positioned for growth.
- The College has committed resources to CPHP in the form of space and funds for salary and benefit of select key personnel as needed based on external funding levels.
- CPHP is an active and substantive contributor to the HRSA Region V PHTC.

Challenges/Weaknesses/Plans:

- Diminished availability of federal and state funding for workforce development including the PHTCs, has resulted in decreased personnel and number of activities within the CPHP and limited continuing education development.
- Diminished funding and governmental restrictions have significantly impacted practitioners' ability to participate in continuing education offerings.
- Formal training needs assessments (competency-based surveys/focus groups), while rich in information, are expensive and time consuming to conduct. Survey fatigue and lack of understanding of core competencies is also an issue with the target audience.
- The development of high-quality online learning is both time and financial resource intensive, as is the technology and instructional design support needed to deliver and maintain efforts.

- While the CPHP is the primary entity within the College providing continuing education programs, there are other learning opportunities offered through other divisions and programs. However, offerings outside of CPHP are not collectively coordinated or tracked. There is plan to pursue opportunities to centralize all continuing education related programs offered across the College under CPHP.

4.0 FACULTY, STAFF AND STUDENTS

CRITERION 4.1 FACULTY QUALIFICATIONS

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

4.1.a. A table showing primary faculty who support the degree programs offered by the school. It should present data effective at the beginning of the year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) FTE or percent time, d) tenure status or classification, e) graduate degrees earned, f) discipline in which degrees earned, g) institutions from which degrees were earned, h) current instructional areas and i) current research interests. See CEPH Data template 4.1.1.

The faculty members in the College of Public Health represent a comprehensive cross-section of academic education and training plus expertise across the five core disciplines of public health and beyond. The College uses a combination of primary plus other faculty members to meet its mission.

Primary faculty members are defined as those who are provided continuing salary from the College's general funds. The FTE for primary faculty is the percentage of their appointment in the College of Public Health and is based on their contribution to the College's Mission of teaching, research, and service. As of August 2016, the College has 48 (47.15 FTE) primary faculty members. **Table 4.1.1.** provides a summary of applicable information for each primary faculty member.

Table 4.1.1 Primary Faculty who Support Degree Offerings of the School or Program (includes faculty with joint appointments in other colleges who are paid >0.50FTE by the College of Public Health and support degree offerings in our College)

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Biostatistics (n=9; 9.0 FTE)	Archer, Kellie	Professor	Tenured	1.0	MAS, PhD	OSU	Statistics, Biostatistics	Biostatistical Collaboration	Statistical methods for analyzing high-throughput genomic assay data, Supervised learning and data mining, Ordinal and discrete response regression
	Andridge, Rebecca	Associate Professor	Tenure Track	1.0	MS, PhD	U. of Michigan	Biostatistics	UG and G introductory biostatistics , online and hybrid courses	Missing data, multiple imputation, group randomized trials, collaborative research in behavioral medicine, psychology, cancer
	Lemeshow, Stanley	Professor	Tenured	1.0	MSPH, PhD	U. of North Carolina, UCLA	Biostatistics	Logistic regression, sampling, intro and intermediate biostatistics	Regression modeling, sampling methods
	Lu, Bo	Associate Professor	Tenured	1.0	MA, PhD	U. of Pennsylvania	Statistics	Missing data, survey sampling, introductory and intermediate biostatistics	Propensity scores, causal inference in observational studies
	Odei, James	Assistant Professor	Tenure Track	1.0	MS, PhD	UNLV Utah State U.	Statistics	Introductory Biostatistics	Bayesian Methods, Spatial,

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
								and SAS for Public Health Students,	Temporal, and Spatio-Temporal Statistics, Environmental and Ecological Statistics
	Pennell, Michael	Associate Professor	Tenured	1.0	MS, PhD	U. of North Carolina at Chapel Hill	Biostatistics	Applied statistics, Survival Analysis	Bayesian methods, cluster randomized trial, joint modeling outcomes, risk assessment, and survival analysis
	Rempala, Grzegorz	Professor	Tenured	1.0	MA, PhD	U. of Warsaw, Bowling Green State U.	Mathematics	Statistics, Mathematical Modeling,	Data analytics in public health, math biology, molecular sys, epidemic models, Ebola epidemic
	Shoben, Abigail	Associate Professor	Tenure Track	1.0	MS, PhD	U. of Washington	Biostatistics	Introductory biostatistics, longitudinal data	Clinical trials, group sequential methods, consent bias, misspecified models, correlated data
	Song, Chi	Assistant Professor	Tenure Track	1.0	MS, PhD	Tsinghua U., U. of Pittsburgh	Biology, Biostatistics.	Biostatistics, Applied regression	Genetics, Genomics, meta-analysis, data integration
Environmental Health Sciences (n=9; 8.7 FTE)	Adetona, Olorunfemi	Assistant Professor	Tenure Track	1.0	MSc, MEM, PhD	U of Ibadan Nigeria), Yale, U. of Georgia	Geographic info systems, Environmental management, Toxicology	Environmental risk assessment, occupational health	Air pollution, occupational health, molecular epidemiology, environmental risk assessment
	Bisesi, Michael	Professor	Tenured	1.0	MS, PhD	Rutgers, SUNY CESF/	Environmental science,	Exposure science,	Contaminated air, soil, water and

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
						Syracuse U.	occupational health, environmental health	environmental fate & health, occupational health, toxicology	exposure pathway; One Health approach
	Hood, Darryl	Associate Professor	Tenured	1.0	PhD	E. Tennessee State U.	Biomedical Science/ Biochemistry	EHS, Toxicology, Neuroscience, Seminar	<i>In utero</i> environmental exposure modulation of glutamatergic gene/protein expression and resulting behavioral phenotypes, polycyclic aromatic hydrocarbons, citizen science
	Hyder, Ayaz	Assistant Professor	Tenure Track	1.0	PhD	McGill U	Biology		Computational epidemiology, environmental health, health disparities, birth outcomes, asthma, complex systems modeling
	Lee, Jiyoung	Associate Professor (joint apt.)	Tenured	0.7 (0.3 in Food Science)	MS, PhD	Seoul Nat'l U., U. of Michigan-Ann Arbor	Microbiology, Environmental Health	EHS, toxicology, neuroscience, seminar	Cyanotoxins, water-food-climate nexus, zoonotic disease, microbial source tracking, enteric diseases
	Martin, William	Professor	Tenured	1.0	MD, MS	U. of Minnesota, Mayo Grad School of Medicine	Medicine	Indoor Air Pollution, Public Policy, Global Health	Indoor air pollution, public policy, global health
	Sun, Qinghua	Professor	Tenured	1.0	MD, PhD	Second	Respiratory	Toxicology	Effects of

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
						Military Medical U. (China), Peking Union Medical College	Physiology		particulate air pollution on human health, ambient temperature, cardiovascular diseases
	Weghorst, Christopher	Professor	Tenured	1.0	PhD	Medical College of Ohio, Toledo, OH	Biomedical Sciences/ Pathology	Advance Principles of EHS; Molecular Techniques for EHS, EHS field experiences	Molecular mechanisms of oral cancer development and food-based prevention strategies in humans and experimental tumor models
	Weir, Mark	Assistant Professor	Tenure Track	1.0	PhD	Drexel U.	Environmental engineering	Env Hlth, Rixk Analysis	Development of predictive microbiology models with regards to Legionella pneumophila and other water- and hospital-acquired infection pathogens in the urban environment
Epidemiology (n=12;1.7 FTE)	Anderson, Sarah	Associate Professor	Tenured	1.0	MS, PhD	Tufts U.	Nutritional Epidemiology	Epidemiology of obesity, survey methods, grant writing	Psychosocial aspects of child health and obesity across life course
	Bower, Julie	Assistant Professor	Tenure Track	1.0	MPH, PhD	UNC at Chapel Hill, U. of Minnesota	Health Behavior and Health Education, Epidemiology	Epidemiology principles and research methods	cardiovascular epidemiology, diabetes epidemiology and prevention,

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
									hypertension and pre-hypertension, physical activity, and risk prediction
	Felix, Ashley	Assistant Professor	Tenure Track	1.0	MPH, PhD	U. of Michigan, U. of Pittsburgh	Epidemiology	Intro to Epidemiology	Cancer epidemiology, women's health, racial disparities, molecular epidemiology, screening and early detection
	Ferketich, Amy	Professor	Tenured	1.0	MA, PhD, MAS	Ohio State U.	Exercise Physiology, Epidemiology, Statistics	Introductory epidemiology	Tobacco, smoking, and tobacco policy
	Foraker, Randi	Associate Professor	Tenured	1.0	MA, PhD	U. of Iowa, UNC at Chapel Hill	Health Promotion, Epidemiology	Epidemiologic methods, cardiovascular disease epidemiology, Graduate seminar in teaching	Clinical informatics approaches to improving population health, electronic health records
	Gallo, Maria	Assistant Professor	Tenure Track	1.0	MSW, MSPH, PhD	UNC at Chapel Hill	Health, Maternal Child Health, Epidemiology	Meta-analysis, global health	Reproductive health, sexually transmitted infections, contraception, semen biomarkers, randomized controlled trials, clinical trials, global health
	Harris, Randall	Professor	Tenured	1.0	MD, PhD, MS	U. of Nebraska, N. Carolina State U., Duke U.	Medicine, Genetics, Statistics	Cancer epi, Biological basis of disease,	Anti-inflammatory drugs, COX-2 blockade in cancer prevention

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
								chronic disease epi, clinical investigations, intro to epi	and therapy
	Miller, Wm.	Professor and Chair	Tenured	1.0	MD, MPH, PhD	Johns Hopkins U., UNC-Chapel Hill, Johns Hopkins U.	Medicine, Epidemiology, Neuroscience	Outbreak Investigation	Sexually transmitted diseases, HIV infection, women's health
	Norris, Alison	Assistant Professor	Tenure Track	0.7 (0.3 in Medicine)	MD, PhD	Yale	Medicine, Epidemiology and Public Health	Global health, survey design	Sexual and reproductive health epidemiology, decision making, sexually transmitted infections and contraception
	Olivo-Marston, Susan	Assistant Professor	Tenure Track	1.0	MS, PhD, MPH	U. of Texas, Georgetown U., Johns Hopkins	Cancer Biology, Tumor Biology, Epidemiology and Biostatistics	Intro Epi, Principles of Epi, Nutritional Epi	Impact of early life exposures, particularly obesity, diet & nutrition, on adult cancer risk, second-hand smoke and lung cancer
	Schwartzbaum, Judith	Associate Professor	Tenured	1.0	MA., PhD.	Sussex U. (England), UCLA	Epidemiology	Advanced Epi methods	Etiology of brain tumors, glioblastoma, cytokines and immune suppression
	Yotebieng, Marcel	Assistant Professor	Tenure Track	1.0	MD, MPH, PhD	U. of Yaounde (Cameroon), UNC at Chapel Hill	Medicine, Maternal and Child Health, Epidemiology, Biostatistics	Epidemiology data analysis	Implementation science, HIV, tuberculosis, child survival

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
Health Behavior and Health Promotion (n=7; 7.0 FTE)	Katz, Mira	Professor	Tenured	1.0	MPH, PhD	Temple U.	Community Health Education, Health Studies/Education	Program planning and implementation; Health behavior theory	Cancer prevention and early detection, health communication and literacy, HPV vaccine, disparities
	Kaye, Gail	Clinical Assistant Professor	Clinical	1.0	MS, PhD	Ohio State U.	Medical Dietetics, Counseling (Organizational Theory & Leadership; Adult Development)	Research methods, obesity prevention. role of behavior in public health, culminating/capstone preparation & implementation	Childhood obesity prevention, nutrition policies that foster healthy food environments, community based nutrition interventions, food insecurity
	Klein, Elizabeth	Associate Professor	Tenured	1.0	MPH, PhD	U. of California-Berkeley, U. of Minnesota	Epidemiology, Behavioral Emphasis	Program evaluation, community health, social-ecological strategies in prevention	Policy based interventions in smoking and obesity prevention, graphic health warnings
	Love, Randi	Associate Professor-Practice	Auxiliary Track	1.0	MA, PhD	Ohio State U.	Education		Public health practice in communities, AIDS, sexual health, substance abuse
	Pirie, Phyllis	Professor	Tenured	1.0	PhD	Ohio State U.	Anthropology	Program evaluation; HBHP core;	Program evaluation in community settings; smoking; community engaged research

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
	Ricks, JaNelle	Assistant Professor	Tenure-track	1.0	DrPH, MPA	U. of Kentucky, Ohio U.	Behavioral Health, Health Policy	Adolescent Health, Diversity	Sexual and reproductive health; health disparities; social determinants of health; program evaluation
	Salsberry, Pamela	Professor	Tenured	1.0	MS, MA, PhD	Ohio State U	Nursing, Philosophy (social and political philosophy with specialties in ethics, and social justice)	Grant writing, Health Behavior, Determinants of health	Health equity, health disparities, maternal and child health
Health Services Management Policy (n=12; 11.75 FTE)	Acton, Amy	Assistant Clinical Professor-Practice	Clinical	1.0	MD, MPH	Northeastern Ohio U., Ohio State U	Medicine, Preventive Medicine	Intro to global public health	Innovative technologies in education, service learning
	Berman, Micah	Assistant Professor (joint appt.)	Tenure Track	0.75 (0.25 in Law)	JD	Stanford	Law	Public health law, health law, tobacco policy	Public health law, tobacco policy, First Amendment, marketing
	Dembe, Allard	Professor	Tenured	1.0	MA, ScD	Cornell, U. of Mass.-Lowell	Philosophy of Science, Occupational Health	Health care organization, health services research	Health care for injured workers, access to health care, workplace-based health programs
	Hilligoss, Brian	Assistant Professor	Tenure Track	1.0	MS, PhD	UNC at Chapel Hill, U. of Michigan	Information Science	Health care management and leadership, quality and patient safety	Patient handoffs and coordination of care; accountable care organizations, organizational change
	Padamsee, Tasleem	Assistant Professor	Tenure Track	1.0	PhD	U. of Michigan	Sociology	U.S. and International Health Care Institutions,	HIV/AIDS policy, breast cancer prevention, women's health,

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
								Health Policy	health policy, health care institutions, health disparities
	Robbins, Julie	Clinical Assistant Professor	Clinical	1.0	MPA, MHA, PhD	Ohio State U.	Public Health, Health Management	Health care organizational behavior and management, health care human resources management, health care strategy and marketing	Quality and safety in health care organizations, strategic human resource management, employee voice
	Schweikhart, Sharon	Associate Professor	Tenured	1.0	MBA, PhD	U. of Minnesota	Business Administration	Operations management, health information technology	Health care process improvement, health technology adoption
	Seiber, Eric	Associate Professor	Tenured	1.0	PhD	Tulane U.	Economics	Economic analysis of health systems, Health care financing and insurance	Effects of insurance in public health care systems, immigration issues in health care
	Tanenbaum, Sandra	Professor	Tenured	1.0	MSS, PhD	Bryn Mawr College, MIT	Social Work & Social Research, Political science	Health policy and politics; mental health and disability policy and politics	Evidence-based medicine; U.S. health policy and politics; disability care coordination
	Wapner, Andrew	Assistant Professor-Practice	Clinical	1.0	DO, MPH	Des Moines U., Ohio State U.	Osteopathic Medicine, Public Health	Population Health	Community hlth planning, food security/healthy food access

College Divisions	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE School or Program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
	Wickizer, Thomas	Professor	Tenured	1.0	MSW, MPH, MA, PhD	U. of Washington, U. of Michigan	Social Work, Health Planning and Administration, Economics, Health Services Organization and Policy	Health Services Research, Health Services	Quality improvement, health expenditures, managed care
	Xu, Wendy Yi	Assistant Professor	Tenure Track	1.0	MS, PhD	U. of Minnesota	Health Services	Economic evaluation of health care programs, health economics, online teaching	Impact of insurance benefit regulations/ reforms on health care utilization, costs and cross-subsidization

* Classification of faculty may differ by institution, but may refer to teaching, research, service faculty or tenured, tenure-track, non-tenure-track faculty or alternative appointment categories used by the school or program.

4.1.b. If the school uses other faculty (adjunct, part-time, secondary appointments, etc.), summary data on their qualifications should be provided in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or percent time allocated to the school, e) highest degree earned (optional schools may list all graduate degrees earned to more accurately reflect faculty expertise), f) discipline in which listed degrees were earned, and g) contributions to the school. See CEPH Data template 4.1.2.

Other faculty members that contribute to the mission of the College include those with joint and courtesy appointments in the College. Joint faculty appointments split salary among two or more units. Courtesy faculty members have a primary appointment with salary from another College within the University. Other faculty members include those from outside the University, usually practitioners, who serve as adjunct faculty members and lecturers. Typically, they are hired to teach on a course-by-course basis. The FTE for these individuals is based on the amount of teaching conducted. Each 3 credit course is worth approximately 0.125 FTE. **Tables 4.1.2a** (graduate) and **4.1.2b** (undergraduate) lists the other faculty with course plus often additional responsibilities that support the public health degree programs. All faculty are appointed in accordance with the rules of the University and the College's Appointment, Promotion, and Tenure Document.

The full complement of faculty involved in the programs of the College is much larger than the lists shown in Tables 4.1.1 and 4.1.2. Although they are not compensated by the College, many individuals with relevant expertise come from within and beyond the University to provide guest lectures, assist students with research, serve on exam committees, etc. The contributions of these faculty members are stated very conservatively, because only those with significant course responsibility are included in the FTE calculation. **Table 4.1.3** lists individuals in this third category.

Table 4.1.2a. Other Faculty Used to Support Graduate Teaching Programs (adjunct, part-time, secondary appointments, etc. **NOTE:** FTE represents direct contribution to the College, but for interdisciplinary programs, overall percent effort to programs is higher)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank In College	Title & Current Employer – Other	FTE to School/Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Biostatistics	Linder, Scott	Adjunct Asst Prof	Professor, Ohio Wesleyan	0.125	MS, PhD	Statistics	Design & Analysis of Studies in Hlth Sci I (PUBHBIO 6210)
Environmental Health Sciences	Dannemiller, Karen	Asst Prof (joint appt.)	Asst Prof, Engineering and Public Health, OSU	0.30	MS, PhD	Environmental Engineering	Team tchg Risk Assessment, Environmental Health (PUBHEHS 3320, 7365,
	Li, Jianrong	Assoc Prof (courtesy appt.)	Associate Professor, Food Sci & Technology, OSU	0.125	DVM, PhD	Molecular Virology and Immunology	Team tchg Water Contamination (PUBHEHS 7360)/Food Microbiology (PUBHEHS 6310)
Epidemiology	Stevenson, Kurt	Professor (joint appt.)	Professor, Internal Medicine, OSU	0.15 (.85 Medicine)	MD, MPH	Health Services	Infectious Disease Epi (PUBHEPI 6436)
Health Services Management and Policy	Fraleay, Reed	Adjunct Asst Prof	Chief Operations Officer, PrimaryOne Hlth	0.125	MHA	Health Services Administration	Clinical Rotations (PUBHHMP 7672)
	Rives, Bill	Lecturer	Senior Lecturer, Fisher Coll of Business, OSU	0.125	MA, PhD	Economics	Health Services Finance (PUBHHMP 7620)
	Schrock, Richard	Adjunct Instructor	Managed Health Care Systems, OSU	0.125	MBA	Finance	Teaches finance course (PUBHHMP 7622)
BMI	Brock, Guy		Research Assoc Prof, Biomedical Informatics, OSU	0.125	MS, PhD	Statistics	Team tchg Methods in BMI and Data Sci (BMI 5750)
	Chen, James	Asst Prof (courtesy appt.)	Asst Prof, Biomedical Informatics, OSU	0.125	MD		Intro to BMI (BMI 5730)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank In College	Title & Current Employer – Other	FTE to School/ Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Embi, Peter	Assoc Prof (courtesy appt.)	Assoc Prof, Biomedical Informatics, OSU	0.125	MD, MS	Medical Informatics and Clinical	Intro to Research Informatics (BMI 5740)
	Fernandez, Soledad	Research Assoc Prof (courtesy appt.)	Research Assoc Prof, Biomedical Informatics, OSU	0.125	PhD	Biomedical Informatics	Team tchg Methods in BMI and Data Sci (BMI 5750)
	Hade, Erinn	Research Asst Prof (courtesy appt.)	Research Asst Prof, Biomedical Informatics, OSU	0.125	PhD	Biomedical Informatics	Team tchg Methods in BMI and Data Sci (BMI 5750)
	Hebert, Courtney	Asst Prof (courtesy appt.)	Asst Prof, Biomedical Informatics, OSU	0.125	MD, MS	Public health and Biomedical Informatics	Team tchg Intro to Biomed Informatics (BMI 5710)
	Huang, Kun	Professor (courtesy appt.)	Professor, Medicine, OSU	0.125	MS, PhD	Molecular & Systems Physiology, Mathematics, Electrical & Computer	BMI Approaches to Human Disease (BMI 7830)
	Kite, Bobbie	Lecturer	Instructor, Biomedical Informatics, OSU	0.125	MS, PhD	Emergency & Disaster Mgmt, Public Health- epidemiology & health policy	Pub Hlth Informatics & team tchg Intro to Biomed Informatics (PUBHLTH 5760 & BMI 5710)
	Lai, Albert	Asst Prof (courtesy appt.)	Asst Prof, Biomedical Informatics, OSU	0.125	MS, MPhil, PhD	Computer Science, Biomedical Informatics	Team tchg Methods in BMI and Data Sci (BMI 5750)
	Mathe, Ewy		Asst Prof, Biomedical Informatics, OSU	0.125	PhD	Bioinformatics	Seminar in BMI (BMI 7891)
	Tien, Joseph	Assoc Prof (courtesy appt.)	Assoc Prof, Mathematics, OSU	0.25	PhD	Applied Mathematics	Mathematics of Infec Disease & team tchg Intro to BMI (PUBHEPI 5421)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank In College	Title & Current Employer – Other	FTE to School/ Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Yen, Po-Yin	Res Asst Prof (courtesy appt.)	Res Asst Prof, Medicine, OSU	0.125	RN, PhD	Nursing	Design & Methodol Approaches in BMI (BMI 7810)
CTS	Binkley, Philip	Professor (joint appt.)	Professor, Cardiovascular Medicine, OSU Director MPH-CTS	0.25	MD, MPH	Biostatistics & Epidemiology	Basic Principles in CTS & Research in CTS (PUBHEP 6412 & 6413)
PEP	Hall, Lois	Lecturer	Exec Dir, Ohio Public Health Association	0.125	MS	Preventive Medicine	Public Health Organization (PUBHLTH 7040)
	Hayes, William	Adjunct Asst Prof	Director, Office of Health Sci., OSU Wexner Med Ctr	0.25	PhD	Political Science	Teaches PEP courses (HMP 7606 and 6609)
VPH	Garabed, Rebecca	Assoc Prof (courtesy appt.)	Associate Professor, Vet Prev Med, OSU	0.125	VMD, MPVM, PhD	Epidemiology	Infectious Disease Modeling (PUBHEPI 5420)
	Gebreyes, Wondwossen	Professor (courtesy appt.)	Professor, Vet Prev Med, OSU	0.25	DVM, PhD	Vet. Med., Comparative Biomedical Science	Team teaching Molecular Epi and Epi of Zoonotic Diseases (PUBHEPI 8413 & VETPREV 7721)
	Habing, Greg	Asst Prof (courtesy appt.)	Asst Prof, Vet Prev Med, OSU	0.125	DVM, PhD	Comparative Medicine and Integrative Biol	Foodborne Diseases (VETPREV 7722)
	Hoet, Armando	Assoc Prof (joint appt.)	Assoc Prof, Vet Prev Med, OSU Direct MPH-VPH	0.3 (0.7 Vet Med)	DVM, PhD	Vet Med, Infec Diseases & Molecular Epi	Molecular Epi & Epi of Zoonotic Diseases (PUBHEPI 8413 & VETPREV 7721)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank In College	Title & Current Employer – Other	FTE to School/ Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
	Stull, Jason	Asst Prof (courtesy appt.)	Asst Prof, Vet Prev Med, OSU	0.125	VMD, PhD	Veterinary Infectious Diseases	Biosecurity, Environ Hlth (VETPREV 7723)
	Wittum, Thomas	Professor (courtesy appt.)	Professor, Vet Prev Med, OSU	0.125	PhD	Clinical Science	Veterinary Epi (VETPREV 7725)

Table 4.1.2b. Other Faculty Used to Support *Undergraduate* Teaching Programs (adjunct, part-time, secondary appointments, etc.)

(NOTE: FTE represents direct contribution to the College, but for interdisciplinary programs, overall percent effort to programs is higher)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank in College	Title & Current Employer – Other	FTE to School/ Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Environmental Health Sciences/ Environmental Public Health	Clark, Brenda	Lecturer	OSU Coll of Public Health	0.50	MA, MPH, PhD	Environmental Health Sciences	Current Issues in Global Env Hlth and Fndmtl of Env Hlth Risk (PUBHEHS 3310 & 3320)
	Waters, Brian	Lecturer	Lecturer, Food Science, OSU	0.125	MS, PhD	Microbiology, Food Science & Technology	Food Safety and Public Health (PUBHEHS 4530)
	von Frese, Ralph	-	Professor, Earth Sciences, OSU	0.125	M.Sc., PhD	Physics, Geophysics	Environmental Geoscience (EARTHSC 2203)
	Schwartz, Franklin	-	Professor, Earth Sciences, OSU	0.25	PhD	Geology	Exploring Water Issues & Geo-Environ & Human Hlth (EARTHSC 2204 & 5203)
	Ibaraki, Motomu	Assoc Prof (courtesy appt.)	Assoc Prof, Earth Sci, OSU; Coordinator BSPH-Environ. Public Health	0.375	PhD	Earth Sciences	Basic Sci, Res, & Implications for Society; Water Security; & Geo- Environ & Human Hlth (EARTHSC 3203, 3411, & 5203)
Epidemiology	McKenzie, Lara	Assoc Prof (courtesy appt.)	Assoc Prof, Pediatrics, OSU	0.125	MA, PhD	Psych, Public Health	Injury Epi (PUBHEPI 4432)
	Stevenson, Kurt	Professor (joint appt.)	Professor, Internal Medicine, OSU	0.15 (.85 Medicine)	MD, MPH	Health Services	Infec Disease in Developing World (PUBHEPI 5412)
Health Behavior and Health Promotion	Nemeth, Julianna	Post doc Researcher	Post doctoral researcher, College of Public Health, OSU	1.00	PhD	Health Behavior and Health Promotion	Role of Behavior in Public Health (PUBHHBP 3510)

Department (School/Specialty Area/Program)	Name	Title/Academic Rank in College	Title & Current Employer – Other	FTE to School/ Program	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
Health Services Management and Policy	Wallace, Lorraine	Assoc Prof (courtesy appt.)	Family Medicine, OSU	0.125	MS, PhD, FAAHB	Health Sci, Health Promotion & Health Ed	(PUBHHMP 4650)
Public Health	Nagaraja, Haikady	Retiree Faculty Emeritus	Retired, College of Public Health, OSU	0.45	MS, PhD	Statistics	Field Exp in Global Public Hlth (PUBHLTH 3189)
Public Health Sociology	Bellair, Paul		Professor, Sociology, OSU	0.125	MA, PhD	Sociology	Criminology (SOC 3410)
	Bartley, Timothy		Assoc Prof, Sociology, OSU	0.125	MA, PhD	Sociology	Environmental Justice (SOC 3460)
	Colen, Cynthia		Assoc Prof, Sociology, OSU Coordinator BSPH-Public Health Sociology	0.25	MPH, PhD	Health Behavior & Health Education	Hlth Disparities in Social Context (SOC 5629)
	Lopez, Kim		Lecturer, Sociology, OSU	0.125	MA	Clinical Psychology	Medical Sociology (SOC 3630)
	Hayford, Sarah		Assoc Prof, Sociology, OSU	0.125	PhD	Demography	Sociology of Global Hlth Illness (SOC 5450)
	Martin, Andrew		Professor, Sociology, OSU	0.125	MA, PhD	Sociology	Res Methods in Sociology (SOC 3487)
	Martin, Lynette		Lecturer, Sociology, OSU	0.125	MA	Forensic Psychology	Violence (SOC 4508)
	Roscigno, Vincent		Professor, Sociology, OSU	0.125	MS, PhD	Sociology	Social Stratification (SOC 3463)

4.1.3 Additional Faculty (Adjunct (a), Joint (j), and Courtesy (c) not teaching in 2016-17, but support academic programs in other ways)

Division	Name	Rank	Degree	TIU/Dept.	Role
Biomedical Informatics	Dvorchik, Igor	Res Prof (c)	MD, PhD	Pediatrics	Collaborate on research
	Wei, Lai	Res Asst Prof (c)	PhD	Biomedical Informatics	Collaborate on research
	Yu, Lianbo	Res Asst Prof (c)	PhD	Biomedical Informatics	Collaborate on research
Environmental Health	Basta, Nicholas	Professor (c)	PhD	Sch of Environ & Natural Res	Collaborate on research
	Bergman, Andrew	Adjunct Asst Prof	JD	Ohio EPA	Guest lecturer
	Crawford, John "Mac"	Adjunct Assoc Prof	PhD	EHS, College of Public Health	Serves on PhD Advisory Comm
	Clinton, Steve	Professor (c)	MD, PhD	Med Oncology	Collaborate on research
	Gray, Deborah	Adjunct Asst Prof	PhD	Stantec Consulting Services, Inc.	Guest lecturer
	McClure, Diane	Adjunct Asst Prof-Prac	MS	Ohio EPA	Guest lecturer
	Lanno, Roman	Assoc Prof (c)	PhD	Evol., Ecology, and Org. Biology	Collaborate on research, available to teach
	Weavers, Linda	Professor (c)	PhD	Earth Sciences and Civil, Environ & Geodetic	Collaborate on research, available to teach
	Wold, Loren	Assoc Prof (c)	PhD	Nursing, Dir. of Biomedical Res.	Available to mentor students, collaborate on research
Epidemiology	Brasky, Theodore	Res Asst Prof (c)	PhD	Cancer Prevention and Control	Available to mentor students, guest lecture, collaborate on research
	Crews, Douglas	Professor (c)	PhD	Anthropology	Available to teach, serve on committees
	Fisher, James	Adjunct Assoc Prof	PhD	Comprehensive Cancer Ctr	Available to teach PUBHEPI 5411, guest lecture, serve on committees, collaborate
	Gillison, Maura	Professor (c)	MD, PhD	Internal Med	Available to teach, advise students

Division	Name	Rank	Degree	TIU/Dept.	Role
	Hayes, Don	Assoc Prof-Clin (c)	MD	Nationwide Children's Hosp.	Ongoing research collaboration; available to teach, serve on student committees
	Keim, Sarah	Asst Prof (c)	PhD	Pediatrics	Available to teach, advise students
	Klebanoff Mark	Professor (c)	PhD	Pediatrics	Available to mentor students, guest lecture, collaborate on research
	Lord, Linda	Asst Prof (c)	DVM, PhD	Vet Prev Med	Available to mentor students, guest lecture, collaborate on research
	Lynch, Courtney	Assoc Prof (c)	PhD, MPH	Obstetrics and Gynecology	Available to teach, serve on doctoral committees, mentor students, collaborate on research
	Paskett, Electra	Professor (j)	MSPH, PhD	Cancer Prevention and Control	Available to mentor students, collaborate on research, serve on exam committees
	Reider, Carson	Adjunct Asst Prof	PhD	Ctr for Clin Translational Sci	Available to mentor students in research related to bioethical issues in public health
	Reiter, Paul	Asst Prof (c)	PhD	Internal Medicine	Guest lecturer in undergraduate Honors class; available to mentor students, teach, collaborate on research
	Root, Elisabeth	Assoc Prof (j)	PhD	Geography	Guest lecturer in PUBHLTH 6000; On PhD student committee; Available to advise students, serve on doctoral committees, teach, collaborate on research
	Saville, William	Professor (c)	DVM, PhD	Vet Prev Med	Guest lecturer, advises VPH students, serves on VPH Committee
	Shields, Peter	Assoc Prof (c)	MD,	Internal Medicine/ Cancer Prevention and Control	Available to mentor students, guest lecture, collaborate on research
	Smith, Gary	Professor (c)	MD, DrPH	Pediatrics	Available to teach, collaborate on research
	Smith, Sakima	Asst Prof (c)	MD	Internal Medicine	Mentor/preceptor for multiple MPH students; available to teach, collaborate on research
	Turner, Abigail Norris	Assoc Prof (c)	PhD, MSPH	Internal Medicine/Infectious Dis	Available to teach, advise students

Division	Name	Rank	Degree	TIU/Dept.	Role
	Wang, Shu-Hua	Assoc Prof (c)	MPH, MD	Infectious Disease	Guest lecturer in global health course; available to mentor students, guest lecture, collaborate on research
	Xiang, Huiyun	Professor (c)	PhD, MPH, MD	Pediatrics	Advises PhD student; available to teach, advise students, collaborate on research
	Yang, Ginger	Assoc Prof (c)	PhD, MD	Pediatrics	Teaches injury epidemiology alternate years; available to teach, advise students, collaborate on research
Health Behavior and Health Promotion	Andersen, Barbara L	Professor (c)	PhD	Psych/Ob-Gyn	Available to mentor students, guest lecture, collaborate on research
	Kelleher, Kelly	Professor (c)	PhD	Pediatrics	Available to mentor students, guest lecture, collaborate on research
	Kiecolt-Glaser, Janice	Professor (c)	PhD	Medicine/Psych	Available to mentor students, guest lecture, collaborate on research
	Long, Teresa	Adjunct Assoc Prof	MD, MPH	Columbus Health Dept.	Links students with CHD opportunities, available to mentor students, guest lecture, and collaborate on research
	Miller, Carla	Professor (c)	PhD	Education & Human Ecology	Available to mentor students, guest lecture, collaborate on research
	Miser, Wm. Fred	Professor (c)	MD, MA	Family Medicine	Available to mentor students, guest lecture, collaborate on research
	Smathers, Carol	Asst Prof (c)	MPH	Ag Extension	Available to mentor students, guest lecture, collaborate on research
	Sui, Daniel (Dianzhi)	Professor (c)	PhD	Geography, OSU	Available to mentor students, guest lecture, collaborate on research
Health Services Management and Policy	Brass, Alan	Adjunct Instructor	MHA	Promedical Systems, Toledo	Available as guest lecturer or preceptor
	Channing, Alan	Adjunct Asst Prof	MHA	Channing Consulting Group	Available as guest lecturer or preceptor
	Chisolm, Deena	Assoc Prof (c)	PhD	Pediatrics	Available to teach
	Huerta, Timothy	Assoc Prof (c)	PhD	Medicine/BMI	Available to teach

Division	Name	Rank	Degree	TIU/Dept.	Role
	McAlearney, Ann	Professor (c)	ScD	Family Medicine	Collaborate on research
	Parasidis, Efthimios	Assoc Prof (j)	JD	Law	Available to teach, advise students and serve on committees
	Porter, Janet	Adjunct Prof	MHA, MBA, PhD	Stroudwater Associates	Available as guest lecturer or counselor
	Thomas, Andrew	Assoc Prof-Clin (c)	MD, MBA	Medicine	Available to teach

4.1.c. Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the school. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

More than 50% of the primary and other supporting faculty members in the College have professional work experience outside of an academic or research setting. Almost all faculty members share an understanding of the importance of integrating perspectives from the field of practice into their work, including delivering applied content, when appropriate, in their courses. Each faculty member accomplishes this in different ways, including drawing from their own education, professional training and experience and research activities and engaging in projects involving practitioners outside of academe.

All faculty members apply their background, education, training and experience to integrate both theoretical and practical perspectives into their teaching and research activities. All primary faculty members have academic or professional degrees in disciplines that are within or academically linked to the core and/or specialization areas of public health knowledge. **Table 4.1.4** shows that 60% of the 48 primary faculty members have graduate education and training in a specialization of public health. This is true for some faculty members in each of five College Divisions ranging from 42% for Health Service Management and Policy to 92% for Epidemiology.

Table 4.1.4 Percentage of Primary Faculty Members with Public Health Education and Training

Division	Number Primary Faculty	Number with Public Health Degrees	Percentage with Public Health Degrees
Biostatistics	9	6	67%
Environmental Health Sciences	9	4	44%
Epidemiology	12	11	92%
Health Behavior and Health Promotion	7	3	43%
Health Services Management and Policy	12	5	42%
TOTAL	48	29	60%

Table 4.1.5 lists all College faculty members who have work experience in public health by means of past employment in non-academic positions or organizations. All faculty members in the College have appropriate public health discipline-specific education and training and/or practical work experience.

The College can formally appoint or simply invite practitioners to share their applied expertise, especially related to course content and teaching. One formal approach is to appoint practitioners to non-tenure track Clinical Faculty positions. Clinical faculty serve under fixed-term contracts of three to five years and are not eligible for tenure. The titles of clinical faculty in the College of Public Health are: Assistant Professor of Clinical Public Health, Associate Professor of Clinical Public Health, and Professor of Clinical Public Health. Clinical faculty members have responsibility primarily for teaching and service/practice activities. Criteria for appointment for clinical faculty are similar to those for the tenure-track faculty, but with the emphasis on teaching and service/practice. Another approach to formal appointment uses the Associated Faculty category, specifically the sub-categories of Clinical Practice Faculty or Lecturers. These appointments may be made for a couple of weeks to assist with a specific project, a semester to teach one or more courses, or as long as three years when a longer contract aids in long-term planning and retention. These appointments require a minimum of a master's degree plus professional experience and scholarly endeavors congruent with the anticipated contribution to the mission of the College.

The College also engages outside practitioners less formally by inviting them as guest speakers for seminars and guest lecturers for courses. In addition, some faculty members build field components into their courses, typically in the form of project assignments to be completed in practice settings.

Table 4.1.5 Faculty Members with Applicable Practice-based Public Health Work Experience

Division	Faculty Member	Degrees	Public Health Work Experience	Organization/Agency Employed
BIO	Lemeshow, Stanley	MSPH, PhD	Sampling Methods and Developing Countries; Health Statistics	World Health; U.S. Public Health Service
EHS	Adetona, Olorunfemi	MSc, MEM, PhD	Environmental Health and Safety	British American Tobacco Nigeria Limited
EHS	Bisesi, Michael	MS, PhD, REHS, CIH	Environmental and Occupational Health	Corporate Tenneco Chemical; Enviro-Health, Inc.
EHS	Dannemiller, Karen (joint appt. w/ Engineering)	PhD	Asthma Research	Boston Medical Center
EHS	Martin, William	MD, MS	Disease Prevention and Health Promotion	Eunice Kennedy Shriver Nat'l Institute for Child Health & Human Development; NIH
EHS	Weir, Mark	PhD	Environmental Health and Environmental Engineering	USEPA CAMRA Consulting
EPI	Bower, Julie	MPH, PhD	Public Health Research & Evaluation; Health & Fitness	Battelle Memorial Institute; Health Fitness Corp.
EPI	Felix, Ashley	MPH, PhD	Cancer Research	NIH National Cancer Institute
EPI	Foraker, Randi	MA, PhD	Tobacco Treatment	Mayo Clinic Nicotine Dependence Ctr
EPI	Gallo, Maria	MSPH, MSW, PhD	Epidemiologist*; Rubella & Varicella Susceptibility among Spanish-Speaking Patients; Health Education; Community Health Promotion	CDC Div. of Reproductive Hlth, FHI 360, and Ipas*; NC Dept. of Health & Human Serv.; Farmworker Hlth Services; Peace Corps
EPI	Norris, Alison	MD, PhD	Integrating Medical Care with Environmental Protection Strategies	Health in Harmony Board of Directors
EPI	Paskett, Electra (joint appt. in Medicine)	MSPH, PhD	Cancer Prevention Research; Adolescent Pregnancy Program	Fred Hutchinson Cancer Research Center; Tacoma-Pierce Co. Health Dept.

Division	Faculty Member	Degrees	Public Health Work Experience	Organization/Agency Employed
EPI	Root, Elisabeth Dowling (joint appt. in Geog.)	MA, PhD	Community Health	The Lewin Group; RTI, International
EPI	Stevenson, Kurt (joint appt. in Medicine)	MS, MD, MPH	Infection Control & Healthcare Epidemiology; Hospital Epidemiologist and Infection Control Officer; Healthcare Quality Improvement Program	Intermountain Infection Control (ID); St. Alphonsus Regional Medical Ctr. (ID); Qualis Health (ID)
EPI	Yotebieng, Marcel	MD, MPH, PhD	Technical Support for HIV & TB Clinics; Attending Physician in HIV & TB Wards	Ctr for the Study & Control of Communicable Diseases (Cameroon); South West Provincial Hospital (Cameroon)
HBHP	Kaye, Gail	MS, PhD	Hlth Care Quality Improvement Programs; Nutrition Research	Kaye Consultation Serv., Inc.; Abbot Labs
HBHP	Klein, Elizabeth	MPH, PhD	Childhood Obesity Treatment; Indoor Air Quality; Tobacco Use & Secondhand Smoke Exposure	Ctr. For Hlth Weight & Nutrition; Assoc. for Non-Smokers (MN); Kent Co. Hlth Dept. (MI)
HBHP	Love, Randi	MA, PhD	Health Policy; Employee Assistance Program and Health Outreach Program	Franklin Co. Prevention Institute; Columbus Public Health
HBHP	Salsberry, Pamela	MS, MA, PhD	Early Childhood Development; Medicaid Policy	Crane Ctr. For Early Childhood Research & Policy; Medicaid Administration
HSMP	Acton, Amy	MPH, MD	Immunization Program; Healthy Summit 2000; Family and Community Health	Project L.O.V.E.; Akron City Health Dept.; Ohio Dept. of Health

Division	Faculty Member	Degrees	Public Health Work Experience	Organization/Agency Employed
HSMP	Berman, Micah (joint appt. in Law)	JD	Legal & Policy Assistance for Tobacco Control Programs; Legal & Policy Support on Tobacco Control & Chronic Disease Prevention; Tobacco-Related Regulations	Tobacco Public Policy Ctr.,;Ctr. For Public Health & Tobacco Policy; FDA Center for Tobacco Products
HSMP	Dembe, Allard	MA, ScD	Workers' Compensation Health Initiative; Ergonomics and Occupational Health Strategies; Sustainability Program	Robert Wood Johnson Fdn.; Liberty Mutual Insurance; Ohio Dept. of Health
HSMP	Padamsee, Tasleem	MA, PhD	AIDS Service Organization	AIDSWORK, Inc.
HSMP	Parasidis, Efthimios (joint appt. in Law)	MBE, JD	Health Outcomes Research	Global Health Outcomes
HSMP	Robbins, Julie	MHA, MPA, PhD	Community-based Health Planning Initiatives; Infant Mortality and Disparities	Columbus Public Health; Greater Columbus Infant Mortality Task Force
HSMP	Schweikhart, Sharon	MBA, PhD	Operations Analysis	Henry Ford Hospital
HSMP	Tanenbaum, Sandra	MSS, PhD	Policy Analysis	Ohio Medicaid Program
HSMP	Wickizer, Thomas	MSW, MPH, MA, PhD	W.H.O. Worldwide Smallpox Eradication Program	Peace Corps

4.1.d. Identification of measureable objectives by which the school assesses the qualifications of its faculty complement, along with data regarding the performance of the school against those measures for each of the last three years. See CEPH Outcome Measures Template.

Various indicators and outcome measures are used to determine and assess qualifications of faculty members. The major relevant goal and the underlying initiatives follow in **Table 4.1.6:**

Table 4.1.6 Goal, Initiatives and Outcome Measures for Faculty Capacity Building

A. CAPACITY BUILDING	
Strategic Goal A.1. Interdisciplinary Capacity Building: <i>Build and sustain high quality diverse core faculty and staff.</i>	
Outcome Measures for A.1.1. Initiative: <i>Recruit, appoint promote and retain high quality diverse faculty and staff aligned with Divisions, academic programs, research initiatives, and outreach needs.</i>	
Outcome Measure	Target 2017
Number of core (primary) faculty members	50 Faculty Members
Number of core (primary) staff members	60 Core Staff Members
Percentage of underrepresented faculty and staff based on race, ethnicity, and gender	Representative of Ohio demographics
Outcome Measures for A.1.2. Initiative: <i>Formalize courtesy and joint faculty appointments with other Colleges at OSU. (Courtesy faculty appointments do not involve shared percentage of full-time equivalent (FTE) effort nor the corresponding salary and fringe support across the cooperative units as do joint faculty appointments.)</i>	
Outcome Measure	Target 2017
Number of active courtesy and joint appointments between the College and other Colleges w/in OSU to support interdisciplinary collaborative efforts	Appointments involving 15 OSU Colleges

Outcome measures data regarding the goal and initiatives for faculty capacity building and diversity shown above, are summarized in Criterion 1.7 (Tables 1.7.1, 1.7.2, 1.7.6) and Criterion 1.8 (Table 1.8.3). Outcome measures have improved considerably, especially relative to the last CEPH self-study review in 2009. During the application and pre-hire phase, applicant qualifications are vetted for earned degrees and specializations, work experience, alignment with the academic and professional degree programs and Divisions, and potential to meet the College's expectations for high-quality productivity and performance in teaching, research and service activities. Based on the above Tables 4.1.4 and 4.1.5 respectively, 60% of

the College's primary faculty members have a degree in a public health specialization, and, approximately 61% have applied public health practice experience outside of academe.

4.1.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 4.1.

Strengths

- The composition and qualifications of primary and other supporting faculty members with appointments in the College are increasingly multidisciplinary and complimentary.
- The College has increased and improved its faculty through a combination of open searches and successful involvement in the University Discovery Theme hiring process. Five additional tenure-track faculty hires are likely by autumn semester 2017.

Challenges/Weaknesses/Plans:

- One of the five Divisions has an interim chairperson and two divisions have new chairpersons. Recruitment of high-quality faculty with leadership skills has been lengthy process. Plan is to have permanent Chairs for the respective Divisions by autumn 2017.

CRITERION 4.2 FACULTY POLICIES AND PROCEDURES

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

4.2.a. A faculty handbook or other written document that outlines faculty rules and regulations.

The three primary sources of faculty rules and regulations for the College of Public Health are located at:

- College of Public Health *Pattern of Administration*
<http://cph.osu.edu/sites/default/files/docs/20141210AmendedPatternofAdministrationCPH.pdf>
- College of Public Health *Appointments, Promotion and Tenure Criteria and Procedures*
<http://cph.osu.edu/sites/default/files/docs/PublicHealth-APT.pdf>
- Ohio State University Office for Academic Affairs and the Board of Trustees *Rules of the University Faculty*
<http://trustees.osu.edu/ChapIndex/index.php>

Copies of these documents are available in the **eResource File**.

4.2.b. Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

A formal faculty development process, including mentoring of early-career faculty members, was implemented at the College a decade ago. This mentoring program applies to both categories, tenure-track and non-tenure-track (e.g., Clinical; Associated) of faculty members. The process has evolved and improved as the College expands and matures. The College and the University recognize that structured faculty development with a mentoring program is essential to achieving and sustaining excellence. Mentored faculty report more job satisfaction, better student evaluations, greater scholarly productivity, and higher levels of retention. Mentors report similar outcomes. A successful faculty development program requires the endorsement and involvement of the entire faculty. Support from the Dean, Senior Associate Dean, Associate Deans, Division Chairs, and other experienced senior-level faculty members is particularly important.

The College Dean and respective Division Chairs work together address faculty development even before a new hire arrives on campus. They identify possible mentors from among faculty inside and outside of the College. When new faculty first arrive, they meet individually and jointly with other faculty members to identify one or two key mentors. The chair advises new faculty about academic review and

advancement. New faculty members meet at least once a semester with the assigned mentor(s) and/or Division Chair to reinforce career advancement goals and strategies.

Currently, the Associate Dean for Outreach and Engagement in the College also serves as a primary coordinator of faculty development activities. She organizes and conducts a new faculty orientation that covers many topics relevant to launching an academic career.

4.2.c. Description of formal procedures for evaluating faculty competence and performance.

All faculty members complete and submit a performance plan at the beginning of each calendar year listing goals for teaching, research and service activities. Plans are discussed and revised, if necessary, with the Division chair. During the same period, faculty reviews are conducted based on performance plans submitted at the start of the preceding year to determine and evaluate levels of productivity and performance. The annual reviews influence consideration for faculty members' merit-based salary increases. When there are identified concerns from the reviews, for example unacceptable teaching performance or research activity, goals and plans for improvement are established by the Chair with the faculty members involved.

Each spring, all untenured assistant professors and every three years Associate Professors are reviewed by the APT Committee and eligible faculty. Full professors are reviewed by the Dean every five years. In addition, all faculty members are reviewed annually for merit increases by their respective Division chairs. The criteria used for evaluation of faculty performance are delineated in the College's *Appointments, Promotion and Tenure Criteria and Procedures* document.

4.2.d. Description of processes used for student course evaluation and evaluation of instructional effectiveness.

Faculty members serving as course directors and teachers are required to use the University process and survey tool, known as the *Student Evaluation of Instruction* (SEI), to evaluate every didactic course. Exceptions for not conducting a course evaluation may be considered if a class size is so small as to make respondents easily identifiable. The SEI survey includes both standardized questions and open-ended comment sections. The electronic SEI form is accessible to students via an on-line portal toward the conclusion of each course. Quantitative SEI scores (x/5.0-scale) and qualitative comments from the survey are available electronically to each course director after grades have been submitted to the University Registrar's Office. Applicable faculty members receive an automatic e-mail with link notifying that course SEI data are available for review.

The College's Office of Academic Programs and Student Affairs shares a composite of all SEI results with the College Dean, Senior Associate Dean for Academic Affairs, and applicable Division Chair for review. The results are used for the College's assessment process for quality assurance/quality improvement, for annual faculty evaluations, and as part of the dossier for promotion and tenure reviews. To supplement SEI data, faculty members may also choose additional approaches to evaluation (i.e., open-ended questions, instructor-developed rubrics, open discussion). Several other options for evaluation, including self- and peer-evaluation and external review of teaching materials, are also available to faculty. The quality of courses and teaching is a critical component of the reviews for merit and promotion and tenure. Faculty members who find teaching problematic may work with, and may be encouraged by their chairs to work with, the University Center for Advancement of Teaching.

4.2.e. Assessment of the extent to which the criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 4.2.

Strengths:

- The College and University have well-defined policies and procedures.
- The College has established active faculty mentoring and professional development programs.
- There are established formal procedures for evaluating faculty through the appointments, promotion and tenure process and the annual merit reviews.
- All applicable course syllabi are reviewed by the Undergraduate Studies Committee and/or the Graduate Studies Committee.
- Student evaluation of teaching and courses is effective. Most faculty members have SEI scores >4.0/5.0. These evaluations are considered in promotion and tenure as well as in annual merit reviews.

Challenges/Weaknesses/Plans:

- The College has a few faculty members who do not perform as well as expected with course management and teaching. Efforts to improve may include providing assistance to faculty members through on-line and in-person training at the University's Center for Advancement of Teaching as well as involving the College's instructional designer.

CRITERION 4.3 STUDENT RECRUITMENT AND ADMISSIONS

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

4.3.a. Description of the school's recruitment policies and procedures. If these differ by degree (e.g. bachelor's vs. graduate degrees), a description should be provided for each.

The College offers both undergraduate and graduate degree programs, as discussed in Criterion 2.1. The framework for marketing, recruitment and admission activities is established by the University's Office of Enrollment Services for undergraduate degree programs and by the Graduate School for graduate degree programs. Via the Office of Enrollment Services, staff recruiters are active within the State and beyond marketing and recruiting for all University undergraduate programs, including the College's BSPH degree. Within the College, the Office of Academic Programs and Student Services (OAPSS) promotes both the undergraduate and graduate degree programs to undergraduate advisors throughout campus including advisors in the Exploration Program (the University's advising unit dedicated to advising students exploring or re-exploring majors). OAPSS staff also provide bi-annually counselor information sessions to advisors. Staff participate in residence hall dinners with residence hall Scholars groups and participate in an annual residence hall program to inform undergraduate students about the BSPH major. Staff from OAPSS work with the College Outreach Group (COG) through the Office of Enrollment Services to promote the BSPH major to prospective (non-current OSU students) through guidance counselor breakfasts, leading academic sessions during visit days, training of call center student staff on the BSPH major, and attending various COG sponsored recruitment trips within the state of Ohio.

For its graduate degree programs, the College recruits students from a variety of sources. A major outreach activity is attending recruitment fairs held in Ohio and across the country, mostly coordinated by various institutions, but others coordinated through ASPPH and the *This is Public Health* fairs. These venues provide exposure to numerous prospective applicants representing diverse demographics relative to race, ethnicity and socioeconomic status. Other off-campus marketing and recruitment occurs at national and state conferences. The College also participates and sponsors regular (average seven dates per year) on-campus and two visitation days are offered for students admitted to a graduate program, but not yet confirmed. These events provide opportunities for individuals to get more information directly from students, staff, faculty and alumni.

The College utilizes online resources for additional outreach to prospective students. This type of recruitment may be more accessible for harder to reach audiences,

such as international students or working professionals. There are an average of 5 on-line information sessions for prospective applicants held each year. The College also regularly participates in non-Ohio State virtual graduate school fairs. A virtual campus tour and information sessions are available on-demand on the College website for both undergraduate and graduate audiences. Email newsletters also are sent (minimum four times) to accepted and matriculating graduate students to keep them informed regarding enrollment.

College outreach efforts are designed to attract students from all backgrounds; however, some recruitment activities are designed to provide additional support to specific diverse populations. The college has identified underrepresented racial and ethnic minorities and individuals from Appalachia as groups for targeted outreach. This aligns with the university's strategic recruitment plan and the College's mission to serve the state of Ohio. The College attends graduate school fairs for underrepresented students, and makes individual visits to universities (including Central State, an Ohio HBCU, and Shawnee State, home of the Ohio Appalachian Center for Higher Education). The Admissions Staff coordinates with the Diversity and Inclusion Committee to have faculty and current students call admitted underrepresented students to answer questions. Collaborative events are held with Undergraduate Admissions and The Office of Diversity and Inclusion. The College continues to work towards increased participation in these programs resulting in a three year high for applications (10) and a five year high in RSVPs (8) for the University's premier graduate student diversity campus visitation program.

Financial support is provided to students through a variety of means including university fellowships, graduate enrichment fellowships (designed to increase the diversity of the Graduate School), and graduate assistantships. Awards are competitive and are a tool of recruiting top talent to the College. However, competitive funding from other institutions remains a challenge particularly for recruitment of doctoral students. The College has been successful in increasing the number of fellowships awarded from the Graduate School in both the University and Graduate Enrichment (GE) competitions. The College also provides one year matched funding for doctoral students and master's students from underrepresented backgrounds.

4.3.b. *Statement of admissions policies and procedures. If these differ by degree (e.g. bachelor's vs. graduate degrees), a description should be provided for each.*

Undergraduate Degree Admission

Admission to the public health major is relatively competitive since the College limits enrollments each year to between approximately 80-90 students. Applicants are selected on the basis of their academic record, leadership, work and volunteer experiences, and potential for success.

Pre-Public Health Major (Pre-Majors):

Pre-major is defined as students who intend to declare the Public Health major, but who haven't met the minimum criteria, nor submitted an application to the major.

- ***New First-Year Students*** New First Year students must have a minimum ACT score of 26 or a minimum combined SAT score of 1170 to be directly admitted to the College as a Pre-Public Health major. Admitted first year Ohio State students who do not meet the incoming freshman criteria can enroll in the Exploration program to consider alternative majors. Students who are not declared Pre-Public Health majors can still complete prerequisite courses and apply to the Public Health major.
- ***Transfer Students:*** Students transferring to Ohio State from outside the university must have a minimum 2.80 cumulative GPA and a minimum of 30 credits from the college/university in which they last earned transfer credit to be directly enrolled as a Pre-Public Health major.
- ***Current Ohio State Students:*** Current Ohio State students who want to switch to the College as a Pre-Public Health major must have a minimum 2.80 cumulative OSU GPA and a minimum of 12 credits.

Public Health Major:

Applicants for the Public Health major must have an OSU cumulative GPA of 2.8 and a minimum of 30 credit hours by the end of Spring Semester. Interested students must complete and submit an application and prerequisite courses to be considered for admission to the program. The application opens December 15th and closes February 15th.

- **Course prerequisites (*Applicants must complete all prerequisite courses with a grade of C or higher*):**
 - **Public Health Sociology Specialization:**
 - English 1110
 - Math 1116 or higher
 - One approved GE Science course
 - Sociology 1101
 - **Environmental Public Health Specialization:**
 - English 1110
 - Math 1148/1149 or 1150 or higher
 - Biology 1113
 - Sociology 1101

Graduate Degree Admission

As indicated above, the College operates within a framework of policies and procedures established by the Graduate School and implemented and monitored by the College's Graduate Studies Committee (GSC) and Academic Affairs. The GSC delegates specific responsibilities associated with admissions decisions to the divisions/programs for review of applicant files. Applicants must, at a minimum, meet the requirements described below:

- **General Requirements.** The College of Public Health participates in the SOPHAS centralized application system for almost all applicants. Applicants to the Interdisciplinary PhD in biostatistics apply via The Ohio State University Graduate Application, and applicants to the MHA may use SOPHAS or HAMPCAS. The Graduate School and the College require each applicant to provide a completed centralized application; an abbreviated form of the OSU Graduate School application; transcripts from all undergraduate, graduate, and professional schools attended (a GPA of 3.0 or higher is required by the Graduate School); scores on the Graduate Record Examination (GRE) or approved substitute; a personal statement on relevant experience and professional goals; and three letters of recommendation from the applicant's professors and/or employers. For students whose native language is not English, the college requires proof of English proficiency following the Graduate School's standards. This is most often shown through a minimum score of 550 paper or 79 internet-based testing (IBT) on the Test of English as a Foreign Language (TOEFL). International students must provide an affidavit of financial support. The college can petition the Graduate School in exceptional cases to waive any of the usual requirements.
- Beyond the general admission requirements, the categories (MPH, MHA, MS, PhD) of graduate degree programs have additional requirements, as summarized below. In addition, some specializations also have specific admission requirements relative to undergraduate foundation courses. For example, the specialization for Environmental Health Sciences for the MPH, MS and PhD degree curricula require admitted students to have strong undergraduate education in science (e.g., biology and chemistry) and math. Admission decisions are made largely based on GPA, GRE scores, recommendations, personal statement and experience.

Additional MPH Program Requirements. The MPH program prepares students for programmatic leadership and advanced practice in public health. The traditional MPH program admits applicants who have at least a baccalaureate degree; prior public health work experience is not required, but applicants are expected to show motivation for, and basic understanding of, the field of public health. The MPH-PEP program (the Program for Experienced Professionals) prefers applicants who have the equivalent of at least two years of full-time employment experience or concurrent experience in a related field. The MPH-CTS (Clinical Translational Science) requires

an earned or concurrently enrolled clinically-related doctorate (i.e., MD, DDS, PharmD). Since 2013, the MPH-HSMP (Health Services Management & Policy) requires an earned or concurrently enrolled graduate or professional degree (i.e., MBA, MPA, MD).

- **Additional MHA Program Requirements.** The MHA program prepares students for professional leadership in health services management and policy. Prior work experience is preferred, but not required. Promising applicants are required to have personal interviews with the HSMP faculty.
- **Additional MS and PhD Program Requirements.** The MS and PhD programs prepare students for academic leadership with the expectation that graduates will pursue careers in teaching and/or research. The PhD program requires evidence of scholarly achievement and the potential for independent research. The divisions may request the applicant's master's thesis or published papers to assess readiness for doctoral study. The PhD in epidemiology requires an earned master's degree in a related field.

4.3.c. Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading, and the academic offerings of the school. If a school does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the school. In addition, references to website addresses may be included.

Copies of sample brochures and information sheets used for degree program marketing and student recruitment are available in the eResource File. Most initial contacts with prospective applicants are now via the College's website (<http://cph.osu.edu>). This has been shown to be a preferred, but not exclusive, source of information. The website has links to a broad spectrum of general and specific information, including descriptions of the academic programs, the faculty and divisions, the admissions process, and accompanying information. Printed copies of the relevant pages from the website are also available in the **eResource File**.

4.3.d. Quantitative information on the number of applicants, acceptances and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format. See CEPH Data template 4.3.1.

Table 4.3.1. Quantitative Information on Applicants, Acceptances, and Enrollments, by Specialty Area for the Last Three Academic Years

Degree and Specialization	Stages	AU2014 to SU2015	AU2015 to SU2016	AU2016 (only)
BSPH: Public Health Sociology	Applied	114	123	96
	Accepted	72	78	85
	Enrolled	68	71	80
BSPH: Environmental Public Health	Applied	28	37	33
	Accepted	23	28	33
	Enrolled	21	26	31
MPH: Biomedical Informatics	Applied	5	11	10
	Accepted	4	4	3
	Enrolled	3	3	3
MPH: Biostatistics	Applied	14	15	16
	Accepted	5	6	8
	Enrolled	1	1	4
MPH: Clinical Translational Science	Applied	11	7	5
	Accepted	8	6	5
	Enrolled	8	5	5
MPH: Environmental Health Science	Applied	16	23	10
	Accepted	8	13	6
	Enrolled	4	4	1
MPH: Epidemiology	Applied	115	93	110
	Accepted	41	62	76
	Enrolled	10	17	28
MPH: Health Behavior/ Health Promotion	Applied	101	100	78
	Accepted	47	55	39
	Enrolled	25	22	17
MPH: Health Services Management Policy	Applied	16	11	13
	Accepted	5	1	3
	Enrolled	2	1	1
MPH: Program Experienced Professionals	Applied	40	22	6
	Accepted	29	13	4
	Enrolled	24	11	4
MPH: Veterinary Public Health	Applied	51	44	52
	Accepted	22	22	28
	Enrolled	18	16	22
MHA	Applied	166	165	186
	Accepted	61	52	50
	Enrolled	33	32	26
MS: Biomedical Informatics	Applied	9	10	4
	Accepted	7	6	2
	Enrolled	4	5	1
MS: Biostatistics	Applied	19	30	18
	Accepted	8	19	15
	Enrolled	1	5	0

Degree and Specialization	Stages	AU2014 to SU2015	AU2015 to SU2016	AU2016 (only)
MS: Environmental Health Science	Applied	5	2	1
	Accepted	4	0	1
	Enrolled	0	0	0
MS: Epidemiology	Applied	11	21	14
	Accepted	6	15	7
	Enrolled	3	6	0
PhD: Environmental Health Science	Applied	10	14	8
	Accepted	3	7	4
	Enrolled	2	1	2
PhD: Epidemiology	Applied	27	42	43
	Accepted	6	13	15
	Enrolled	5	6	7
PhD: Health Behavior/ Health Promotion	Applied	23	15	20
	Accepted	2	0	7
	Enrolled	1	0	2
PhD: Health Services Management Policy	Applied	18	18	31
	Accepted	2	4	4
	Enrolled	2	0	3
Interdisciplinary PhD in Biostatistics (joint with College of Arts and Sciences)	Applied	0	1	0
	Accepted	0	1	0
	Enrolled	0	1	0

Specialty area is defined as each degree and area of specialization contained in the instructional matrix.

Applied = number of submitted applications

Accepted = number to whom the school/program offered admissions in the designated year

Enrolled = number of first-time enrollees in the designated year

4.3.e. Quantitative information on the number of students enrolled in each specialty area identified in the instructional matrix, including headcounts of full- and part-time students and a full-time-equivalent conversion, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any program or specialization. Data must be presented in a table format. See CEPH Data Template 4.3.2.

Student enrollment and registered credits in the College's degree programs has increased over the past three years, as shown in **Table 4.3.2**. Implementation of the undergraduate BSPH degree program in autumn 2012 contributed substantially to increases in head count and FTE of students plus registered undergraduate credits. The College could, but chooses not to, exploit this and open more seats for the BSPH degree program.

The number of enrolled graduate students and registered credits has remained relatively stable. However, some specializations, such as Environmental Health Sciences, have experienced some decline. This trend is observed among numerous graduate Environmental Health programs throughout the country. Indeed, a national survey sponsored by the American Industrial Hygiene Association, the American Society of Safety Engineers, the Association of Schools and Programs of Public Health, and the Association of Environmental Health Academic Programs in

4.3 Student Recruitment and Admissions

collaboration with Dr. Roger D. Lewis and Dr. David Sterling have released a national survey in May 2016 to gather information regarding changing enrollment patterns of students. The College via the Division is actively exploring integrating this specialization into the University's interdisciplinary Environmental Science Graduate Program. This would enhance recruiting efforts for what would be an extremely strong interdisciplinary graduate program.

During the 2009 CEPH self-study review, student recruitment and admissions was "met with commentary". The commentary focused on the uneven distribution of students across degrees and specializations. While there has been some change since then, despite efforts to enhance recruitment efforts the uneven or imbalanced distribution of students among degrees and specializations remains a challenge. At this point, highest demand, for example, is for the MPH degree specializations in Health Behavior and Health Promotion, and, Epidemiology.

Table 4.3.2 Total Enrollment Data: Students Enrolled in each Area of Specialization Identified in Instructional Matrix for Each of the Last 3 Academic Years

Degree and Specialization	2014-15*		2015-16*		AU 2016	
	HC	FTE	HC	FTE	HC	FTE**
BSPH: Public Health Sociology***	43	42.5	51	50.83	65	150.25
BSPH: Environmental Public Health***	150	147.83	148	145.3	161	158.91
MPH, MS Biomedical Informatics	5	11.75	18	14.75	13	11.87
MPH, MS, PhD Biostatistics	10	9.25	13	12.13	16	14.75
MPH: Clinical Translational Science	14	10.3	16	15.75	10	8.62
MPH, MS, PhD Environmental Health Science	25	23.75	19	18.13	18	17.25
MPH, MS, PhD Epidemiology	54	43.37	56	55.88	70	68.5
MPH, PhD Health Behavior/Health Promotion	63	58.62	59	56.5	45	43.25
MPH, MHA, PhD Health Services Management and Policy****	90	87.62	146	142.25	75	74.68
MPH: Program Experienced Professionals	55	40.18	53	39	50	38
MPH: Veterinary Public Health****	39	35.75	45	41.63	53	49.62

*Data provided is as of 15th day of Autumn Term 2014, 2015, and 5th day Autumn Term 2016

**FTE for MPH, MS, MHA, and Pre-Candidacy PhD students is 8 credit hours. FTE for BSPH students is 12 credit hours. FTE for Post-Candidacy PhD students is 3 credit hours.

***For this report, Combined and Dual Degree students are counted as 1 student – with the exception of dual specialization students with CPH and the BSPH/MPH combined degree

FTE Calc: Total number of full-time students

Then take the total number of Part Time hours and divide by 8 or 3 or 12 (depending on student status)

then add that to the total number of full-time students.

4.3 Student Recruitment and Admissions

4.3.f. Identification of measureable objectives by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures for each of the last three years. See CEPH Outcomes Measures Template.

The College has goals and initiatives with outcome measures relative to admissions, retention and graduation as summarized in **Table 4.3.3**.

Table 4.3.3 Goal, Initiatives and Outcome Measures for Admissions, Retention and Graduation

Outcome Measures for B.1.1.				
Initiative: <i>Expand student recruitment, and align the College's marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.</i>				
Outcome Measure	Target 2017	Cohort entering Au16-Su17* <small>*Does not include SP17 or SU17</small>	Cohort entering Au15-Su16	Cohort entering Au14-Su15
Number of graduate and undergraduate applications received	700 graduate degree applicants per year 250 undergraduate degree applicants per year	No. Graduate Applicants = 625 No. Graduate Matriculates =126 (will be higher when SU17 data are included) No. Undergraduate Applicants =129 No. Undergraduate Matriculates =111	No. Graduate Applicants = 644 No. Graduate Matriculates= 136 No. Undergraduate Applicants = 160 No. Undergraduate Matriculates =97	No. Graduate Applicants = 657 No. Graduate Matriculates=146 No. Undergraduate Applicants = 142 No. Undergraduate Matriculates =89
Diversity of applicant pool, based on race/ethnicity/gender	Representative of Ohio demographic	Underrepresented Graduate Degree Applicants = 44.9% Gender Graduate Degree Applicants M=34% F=66% Underrepresented Graduate Degree Admits = 36.2% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.6% Gender Graduate	Underrepresented Graduate Degree Applicants = 46% Gender Graduate Degree Applicants M=32% F=68% Underrepresented Graduate Degree Admits = 36.3% Gender Graduate Degree Admits M=27% F=73% Underrepresented Graduate Matriculates = 28.7% Gender Graduate Degree	Underrepresented Graduate Degree Applicants = 45.2% Gender Graduate Degree Applicants M=35% F=65% Underrepresented Graduate Degree Admits = 29.5% Gender Graduate Degree Admits M=33% F=67% Underrepresented Graduate Matriculate = 25.3% Gender Graduate Degree

Outcome Measures for B.1.1.				
Initiative: <i>Expand student recruitment, and align the College's marketing and recruitment plan with the Ohio State Enrollment Services Strategic Marketing and Communication Plan.</i>				
Outcome Measure	Target 2017	Cohort entering Au16-Su17* <small>*Does not include SP17 or SU17</small>	Cohort entering Au15-Su16	Cohort entering Au14-Su15
		Degree Matriculates M=20% F=80% ***** Underrepresented Undergrad Degree Applicants = 36% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 35% Gender Undergrad Degree Admits M= 23% F= 77% Underrepresented Undergrad Degree Admits = 34% Gender Undergrad Degree Admits M= 22% F= 78%	Matriculates M=29% F=71% ***** Underrepresented Undergrad Degree Applicants = 29% Gender Undergrad Degree Applicants M= 23% F= 77% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 22% F= 78% Underrepresented Undergrad Degree Admits = 24% Gender Undergrad Degree Admits M= 22% F= 78%	Matriculates M=36% F=64% ***** Underrepresented Undergrad Degree Applicants = 26% Gender Undergrad Degree Applicants M= 15% F= 85% Underrepresented Undergrad Degree Admits = 25% Gender Undergrad Degree Admits M= 11% F= 89% Underrepresented Undergrad Degree Admits = 23.5% Gender Undergrad Degree Admits M= 11% F= 89%
GPA of accepted graduate and undergraduate degree applicants	≥3.60/4.00 Graduate Applicant GPA ≥3.30/4.00 Undergraduate Applicant GPA	PhD = 3.49 MS = 3.45 MPH = 3.49 MHA = 3.55 BSPH = 3.39	PhD = 3.49 MS = 3.42 MPH = 3.47 MHA = 3.47 BSPH = 3.46	PhD = 3.35 MS = 3.36 MPH = 3.49 MHA = 3.47 BSPH = 3.42
GRE scores of accepted graduate degree applicants	≥70 th Percentile Q and V Average scores of Admitted Graduate Degree Students	PhD = 66Q, 72V MS = 79Q, 68V MPH = 61Q, 70V MHA = 57Q, 68V	PhD = 72Q, 66V MS = 73Q, 71V MPH = 60Q, 67V MHA = 55Q, 67V	PhD = 60Q, 69V MS = 78Q, 75V MPH = 60Q, 67V MHA = 61Q, 67V
ACT scores of accepted undergraduate and graduate applicants	≥30 Average scores of Admitted Undergraduate Degree Students	BSPH: 28.3	BSPH = 27.82	BSPH = 27.11

4.3.g. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 4.3.

Strengths:

- The College has seen continued quality of the applicant pool, admitted applicants, and matriculated students based on racial and ethnic diversity and academic preparation and qualifications.
- Increased success in obtaining competitive University and Graduate Enrichment Fellowships to help establish improved funding packages to prospective students. The College of Public Health provides matching funds.

Challenges/Weaknesses/Plans:

- Although overall racial and ethnic diversity has been comparable to Ohio demographics, racial and ethnic diversity for Black/African American and Hispanic/Latino applicants and students remains lower than desired. The College's marketing and recruitment plan will continue to include and expand efforts to attract applicants from these categories. Diversity data based on gender shows low numbers and percentages of males.
- There remains uneven or imbalanced distribution of students between and among the degrees and specializations. Current recruitment efforts promote all specializations together. Some specializations may need more targeted recruitment and will be addressed in the marketing and recruitment plan.
- Graduate Environmental Health Science degree program enrollments have declined. However, the College via the Division is actively exploring integrating this specialization into the University's interdisciplinary Environmental Science Graduate Program. This would enhance recruiting efforts for what would be an extremely strong interdisciplinary graduate program that would be expanded to include specializations in environmental public health.

CRITERION 4.4 ADVISING AND CAREER COUNSELING

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

4.4.a. Description of the school's advising services for students in all degree programs, including sample such as student handbooks. Include an explanation of how faculties are selected for oriented to their advising responsibilities.

Advising students is a core service and expectation for all the College's degree programs. Student advisement is handled slightly differently for undergraduate compared to graduate students. At Ohio State University, colleges offering undergraduate degree programs are expected to employ staff advisors as a primary, but not exclusive, academic advisor for students. The College's Office of Academic Programs and Student Services (OAPSS) has two full-time professional staff with almost exclusive responsibility to serve as advisors for undergraduate public health pre-majors and majors for the Bachelor of Science in Public Health (BSPH) degree, as well as, the two undergraduate minor programs. These advisors support the student experience from pre-admission to post-graduation including application support to the major, coordinating the major admissions process, assisting with degree planning, monitoring of academic progress (courses, grades in coursework, and term and cumulative GPA's), and registration and curriculum petition support. In addition, the staff also provides Honors student advising support, monitoring of student athlete progress and coordinating and certifying each BSPH student for graduation.

One of the two full-time staff members is also designated as career advisor. She provides support for students applying to graduate and professional school, preparing for employment, resume review, career services programming, and additional career activities. In addition to these two advisors, some of the other professional staff in OAPSS provide additional support for advisement services. In addition to the staff support just mentioned, faculty members from the College who have major roles in the undergraduate degree and minor programs provide advising support to undergraduate students, especially as they move to junior and senior levels. Administrative faculty with formal administrative responsibilities, including the College's Director of Undergraduate Studies, the Program Coordinator for the BSPH Environmental Public Health specialization, and the Program Coordinator for the BSPH Public Health Sociology specialization.

Advising services and activities for graduate students, including those in joint degree programs, primarily involve faculty members. At Ohio State, there are two categories of faculty for advising delineation. Tenure-track faculty and research track faculty are eligible for appointment as Category "M" (Masters) and "P" (Masters and Doctoral) Graduate Faculty status. Clinical faculty are eligible for appointment as Category M Graduate Faculty status. These graduate faculty members provide academic

advisement, plus, those with M status may serve as major advisors for master-level culminating projects and theses; and, those with P-status may advise doctoral dissertations too. In addition to the faculty members, most professional staff members from OAPSS also provide general and specific advisement support for graduate students. This includes assisting students transitioning into and those already pursuing the combined 3+2 BSPH-MPH degree program.

Graduate students are assigned to faculty advisers aligned with their specialization. Students may request a change of adviser as their interests change. Although staff advisers are the primary resource for undergraduate student advisement, especially as these students progress through the early stages of the BSPH degree program, BSPH students are also directed to applicable faculty members for support. Beyond assisting with selection of required and elective courses, advisers also help students with other decisions concerning capstone, projects/theses/dissertations, and job preparation and career outcomes. For the bachelor and master's degree programs, the course selections to meet the respective curriculum requirements are relatively straightforward. Doctoral students often require more assistance from advisers due to curricula requirements including research methodology and minor cognate areas and also which courses will fulfill those requirements. Indeed, for doctoral students, the relationship with the adviser is quite different, with much more emphasis on planning the student's curriculum and preparing for qualifying and candidacy examinations, plus dissertation research.

During the 2009 CEPH self-study review, student advising and career counseling was "met with commentary." One comment focused on uneven quality of student advisement and workload relative to career counseling. The college has taken several steps to improve advising. These steps include involving more senior faculty members who advise students, providing mentorship, and involving students in public health research. The College adopted the faculty guidelines for student advisement from the Graduate School, *Graduate Advising Best Practices* in Appendix F of its *Graduate Student Handbook*, and applies these principles for both undergraduate and graduate students. In addition, applicable faculty and staff members are reminded to be familiar with the respective degree program curriculum guides and key policies, procedures and practices summarized in the handbooks listed below. All these documents are posted on the College's Website <http://cph.osu.edu/> and available in the **eResource File**.

- *2016-17 College of Public Health Undergraduate Student Handbook*
<http://cph.osu.edu/sites/default/files/students/docs/BSPH%20Handbook.pdf>
- *2016-17 College of Public Health Graduate Student Handbook*
<https://cph.osu.edu/students/graduate/handbooks/graduate-student-handbook>
- *2016-17 Graduate Student Handbook (OSU Graduate School)*
<http://www.gradsch.ohio-state.edu/graduate-school-handbook1.html>

Each autumn, entering undergraduate and graduate students are invited and expected to attend a new student orientation on campus the day prior to first day of classes. They attend presentations by administrative, faculty and staff representatives from the College and other service units. Students are referred to the applicable curriculum guides, degree program competencies, and handbooks. Some select policies and procedures are emphasized, such as criteria relevant to academic integrity, advisement, retention and graduation, however although not all policies and procedures are reviewed, students are told that the expectation is that they are familiar with the policies and procedures and where to locate these materials on the web. Students also meet with their assigned advisors at orientation. At the Autumn 2015 new student orientation, the College implemented an expanded program to include a summary of composited student survey and graduate exit survey results from the prior year. In addition, effective Autumn 2015, the College began a separate orientation program for continuing students to provide an overview of relevant reminders, review any changes, and summarize student and graduating student survey results. The expanded orientations which began in 2015, which now include a separate continuing student session plus sharing of survey data from the prior academic year, is now standard practice for the College.

4.4.b. Description of the school's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to specific needs in the school's student population.

Another comment from the 2009 CEPH review focused on workload and student demand relative to career counseling. The College's Office for Academic Programs and Student Services has increased the number of staff who provide career counseling to undergraduate students and the Office provides numerous career counseling workshops (e.g. Job Search Process; Developing a Resume; Job Interviewing; etc.) that are conducted throughout the academic year for all students. **Table 4.1.1** shows a list of relevant career service opportunities and workshops available to public health students by the College and University.

Indeed, as part of the overall advisement activities, the College has an active interest in providing both formal and informal career counseling for students. Aspects of these activities are handled by both faculty and staff members in the college, and, from the University. As an example of informal activity, faculty academic advisors are instructed to ask all student advisees what plans they have for applicable employment and/or continued education immediately after graduation. Faculty knowledge and understanding of students' career goals and plans help inform decision-making relative to degree program course selections (e.g. elective courses; minor programs) and emphasis of capstone experiences.

All students in the College's degree programs are assisted with some level of relevant counseling, such as identifying practice placement sites, identifying their interests for post-graduation, and providing resources to help guide students through the process.

Table 4.4.1 Summary of Major Applicable Career Professional Development Provided for Public Health Degree Students by the College of Public Health and the University

Activity	Descriptor	Provider	Term Offered	Degree Program Targeted	Attendance
Practicum Orientation/ Internship Orientation	<ul style="list-style-type: none"> ●Dress/Appearance ●Behavior ●Punctuality ●Rules/Expectations 	<ul style="list-style-type: none"> ●College of Public Health 	AU	BSPH; MPH	●Mandatory
Career Fair	<ul style="list-style-type: none"> ●Prospective Employers ●Prospective Preceptors 	<ul style="list-style-type: none"> ●College of Public Health 	AU; SP	All	●Optional
Career Fair Preparation	<ul style="list-style-type: none"> ●Dress/Appearance ●Research Company/Org ●Approaching Employers ●Questions to Ask 	<ul style="list-style-type: none"> ●College of Public Health 	AU; SP	All	●Optional
Career Preparation for Success Workshop	<ul style="list-style-type: none"> ●Dress/Appearance ●Research Company/Org ●Approaching Employers ●Questions to Ask 	<ul style="list-style-type: none"> ●University 	AU	All	●Optional
Career Conversations with Alumni	<ul style="list-style-type: none"> ●Q&A with CPH Alumni re: their work in PH, expectations, etc. 	<ul style="list-style-type: none"> ●College of Public Health 	AU; SP	All	●Optional
Etiquette Dinner	<ul style="list-style-type: none"> ●Dinner presentation on professional etiquette for business meetings, interviews, and networking 	<ul style="list-style-type: none"> ●College of Public Health and Office of Student Life 	AU	All	●Optional
Negotiation Workshop	<ul style="list-style-type: none"> ●Approaches to ask for salary 	<ul style="list-style-type: none"> ●College of Public Health ●University 	SP	All	●Optional
Resume and Cover Letter Workshop	<ul style="list-style-type: none"> ●Content ●Format ●Customizing 	<ul style="list-style-type: none"> ●College of Public Health ●University 	AU; SP	All	●Optional

Activity	Descriptor	Provider	Term Offered	Degree Program Targeted	Attendance
Convert Curriculum Vita (CV) to Resume Workshop	<ul style="list-style-type: none"> ●Truncating Content ●Format ●Customizing 	●University	AU	All (mainly PhD)	●Optional
Employer Information Sessions	<ul style="list-style-type: none"> ●Overview of organization, positions, expectations, how to apply 	●College of Public Health	SP	All	●Optional
Master Application Process USA Jobs Site	<ul style="list-style-type: none"> ●How to access, navigate and complete online application 	●University	AU	All	●Optional
Interview Workshop	<ul style="list-style-type: none"> ●Dress/Appearance ●Manners ●Techniques ●Questions to ask 	<ul style="list-style-type: none"> ●College of Public Health ●University 	AU; SP	All	●Optional
Developing a Job Search Strategy Workshop with Janet Porter	<ul style="list-style-type: none"> ●Job search strategies and advice ●Application tips ●Networking basics 	●College of Public Health	SP	All	●Optional
Acing Your Interview Workshop with Janet Porter	<ul style="list-style-type: none"> ●General interview techniques and best practices ●Networking advice 	●College of Public Health	SP	All	●Optional
MPH 2-Year Career Plan	<ul style="list-style-type: none"> ●Two-year plan developed with students scheduling the above activities 	●College of Public Health	AU	All	●Optional

For BSPH pre-major and major students, career advising is managed through OAPSS. Some faculty members also work closely with BSPH majors to explore career interests. In addition, all BSPH students enroll in PUBHLTH 3180, a capstone preparation course, prior to completing their undergraduate degree capstone experience.

For MPH students, career counseling activities are overseen and coordinated by the OAPSS Assistant Director. During Autumn Semester, all MPH students are required to attend practicum orientation. There are four in-person sessions offered and one virtual session via webinar. The Assistant Director also offers one-on-one appointments with students to discuss the practicum. The Assistant Director works closely with the Alumni Coordinator in the College to provide programming for MPH students to connect and network with alumni.

All MPH students receive an MPH Two-Year Career Plan. The Plan provides a checklist for students on career related activities they should complete in Year 1 and Year 2 of their program. Some activities are sponsored by OAPSS, and some by the University. It serves as a checklist to encourage students to become engaged in career and professional development events during their program. The Assistant Director encourages students to meet with her at least once a semester to assess and review what activities they have completed and to answer any career related questions they may have. In addition, MPH students are directed to the College website that provides some Public Health career-related resources.

The MHA degree program has a robust two-year professional development program that is designed to help students focus their goals and develop the professional skills needed to successfully start their careers. This plan delineates priorities and activities to support student development during each semester of the program. Highlights of this plan include a structured professional development series during the semester for all full-time students that includes professional skills building (e.g., resumes, cover letters, interview skills, career exploration through visits to a variety of health care organizations, and training in Microsoft Excel). The focus of each of the remaining semesters is designed to support students to secure and complete a successful residency, successfully secure administrative fellowships. MHA professional development highlights include the annual Fellowship and Consulting Fair (link to organizations), a fellowship coaching initiative and first year mentor program which links students to alumni volunteers for one-on-one coaching, mock in-person and telephone interviews, and a variety of other focused workshops and panels. This work is led by a dedicated professional (HSMP Coordinator) whose responsibilities include career counseling, programming, and placement for students in that program. The program draws on its very active alumni network to support career programming, including: participation on a variety of panels throughout the year, fellowship coaches or mentors, mock interviewers, and general resources for students exploring a variety of careers in health services.

4.4.c. Information about student satisfaction with advising and career counseling services.

Based on the exit surveys from students at the time of graduation, reported satisfaction has been good for academic advising, but there remains need for continued improvement. For career services the survey data suggest that the College and University are not meeting the desired level of quality relative to student expectations. Efforts to improve this over the past three years include: creation of the two-year professional development plans for MHA and MPH students, creation of the four-year career plan for BSPH students, coordination of six health system site visits for MHA students, creation of a semester-long MHA professional development series, MHA alumni mentors for first year students, mock interviews with MHA alumni, and new workshops tailored to the needs of job-searching and part-time MHA student populations.

In Spring 2016, a survey was administered to Year 1 MPH students in regards to effectiveness of the MPH Two-Year Career Plan. The questions were vetted by the Assistant Director and the survey was administered by the Graduate Career Services student worker via Qualtrics. 39 students responded to the survey. Feedback included time conflicts with scheduled career events. As a result, the college identified common available times for MPH students and planned Autumn 2016 events at times where a majority of MPH students did not have class time conflicts.

Out of the 39 students who responded to the survey, 4 agreed to participate in a focus group. Some of the feedback received from the focus group resulted in changes being made for the 2016-2017 academic year. One example was a concern that there were not enough employers hiring for full-time post-graduation positions. For the Spring 2017 Career Fair more employers seeking students for full-time post-graduation employment opportunities will be targeted to attend. Students expressed concern that Practicum Orientations were too broad and not specifically tailored to their specialization, and they also wanted more student panels incorporated into the Orientations. For the 2016-2017 academic year, the practicum orientation will include a larger student panel and will include presentations from second year students. The Assistant Director will continue to assess and respond to student feedback.

4.4.d. Description of the procedures by which students may communicate their concerns to school officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.

Throughout the duration of students' enrollment in the College's degree programs and at the University, they are encouraged to constructively communicate, informally

or formally, any concerns and/or ideas for improving elements of the overall experience. Indeed, opportunities to express themselves regarding what worked well and what they wish could have been better continue at the time of graduation and post-graduation.

As part of the College's assessment process, formal evaluation measures include sending electronic surveys to students each year during mid-spring semester to solicit feedback. Graduating students and alumni are surveyed, too. Data are compiled, summarized and interpreted each year. **Table 4.4.2** below summarizes some relevant outcome measures. If issues are identified and considered valid concerns, efforts are made to implement measures to address. Summaries of data collected are communicated with faculty, staff and students in the College. All efforts are designed to contribute to the College's interest in continuous quality assurance and quality improvement.

Other evaluation elements of the assessment process which represent students' perceptions of quality are also considered. These include one-on-one and focus group meetings, plus communications from student representatives at Division, Undergraduate Studies, Graduate Studies, and Diversity and Inclusion Committee meetings.

For more formal complaints, especially involving academic issues or alleged faculty misconduct, there is an established student grievance procedure described in the respective handbooks. The intent of the grievance procedure is to evaluate the concern or issue and, when feasible and reasonable, seek resolution relatively quickly. The forums for addressing grievances range from formal meetings to higher level hearings at the College- and possibly University-levels.

In the last three years, the College experienced two student grievances. One contested failure of a PhD degree program qualifying exam. This grievance was formally managed at the College-level and the original exam score upheld. The student was given a plan with opportunity to retake the exam, but instead left the program. The other grievance was filed by a student who violated an academic conduct policy and disagreed with the sanction decided and enforced by the University Committee on Academic Misconduct. This led to filing a law suit, but the case was dismissed by the court and the issue was closed. There are no current filed or open student grievances.

Table 4.4.2 Goal, Initiative and Outcome Measures Relative to Student Advisement and Career Counseling

Outcome Measures for B.2.2.				
Initiative: <i>Survey students to evaluate the student experience from the point of pre-admission through graduation.</i>				
Outcome Measure	Target 2017	2015-16 138 surveyed/67 replied (48% response rate)	2014-15 133 surveyed/57 replied (42% response rate)	2013-14 141 surveyed/98 replied (67% response rate)
Percentage of Year1 graduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Year 1 Student Survey.	Among students who respond to the survey, ≥80% graduate students agree for each of the categories surveyed	Curriculum PH Core = 97% Curriculum PH Specialization =92% Curricula Plans indicate courses and requirements = 84% Course Objectives Aligned w/ Course Learning Objectives =95% Course Objectives and program competencies listed in syllabi =n/a (inadvertently left off) Student Handbook = 83% OAPSS Staff Availability = 68% Faculty Advisement = 75% Classroom Comfort = 90% Computer Access = 86% Student Space = 79% Preparation for Jobs = 89%	Curriculum PH Core = 94% Curriculum PH Specialization = 88% Curricula Plans indicate courses and requirements = 89% Course Objectives Aligned w/ Course Learning Objectives =93% Course Objectives and program competencies listed in syllabi =93% Student Handbook = 86% OAPSS Staff Availability = 73.7% Faculty Advisement = 89% Classroom Comfort = 86% Computer Access = 86% Student Space = 75% Preparation for Jobs = 86%	Curriculum PH Core = 88% Curriculum PH Specialization = 79% Curricula Plans indicate courses and requirements = 94% Course content is aligned with the course learning objectives =82% Course Objectives and program competencies listed in syllabi =82% Student Handbook = 84% OAPSS Staff Availability = 70% Faculty Advisement = 73% Classroom Comfort = 81% Computer Access = 83% Student Space = 73% Preparation for Jobs = 72%

Outcome Measure	Target 2017	2015-16 187 surveyed/82 replied (43.8% response rate)	2014-2015 195 surveyed/79 replied (42% response rate)	2013-2014 125 surveyed/73 replied (58% response rate)
Percentage of undergraduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Year 1 Student Survey.	Among students who respond to the survey, ≥80% undergraduate students agree for each of the categories surveyed	Curriculum PH =97% Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH =97% Curricula Plans, Accessible =95% Curricula Plans, Identify Needed Courses = 95%	Curriculum PH = 100% Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH = 90% Curricula Plans, Accessible = 93 % Curricula Plans, Identify Needed Courses = 87%	Curriculum PH = 98% Specialization (Dept. of Sociology; PH SOC) & Dept of Earth Science; EPH =95% Curricula Plans, Accessible = 93% Curricula Plans, Identify Needed Courses = 92%

Outcome Measure	Target 2017	2015-16 187 surveyed/82 replied (43.8% response rate)	2014-2015 195 surveyed/79 replied (42% response rate)	2013-2014 125 surveyed/73 replied (58% response rate)
		Curricula Plans, Identify Capstone Options = 70% OAPSS Staff Availability, Course Selection = 77% OAPSS Staff Availability, Career Advisement = 58% OAPSS Staff Help With, Course Selection = 64% OAPSS Staff Help With, Career Advisement = 36% OAPSS Staff Demonstrate Cultural Competency = 74%	Curricula Plans, Identify Capstone Options = 81% OAPSS Staff Availability, Course Selection = 96% OAPSS Staff Availability, Career Advisement = 76% OAPSS Staff Help With, Course Selection = 81% OAPSS Staff Help With, Career Advisement = 47% OAPSS Staff Demonstrate Cultural Competency = 87%	Curricula Plans, Identify Capstone Options = 59% OAPSS Staff Availability, Course Selection = 92% OAPSS Staff Availability, Career Advisement = 67% OAPSS Staff Help With, Course Selection = 85% OAPSS Staff Help With, Career Advisement = 51% OAPSS Staff Demonstrate Cultural Competency = n/a (not asked on survey)
Outcome Measure	Target	AU2015-SP2016 125 graduated/69 replied (55% response rate)	2014-2015 128 graduated/90 replied (0% response rate)	2013-2014 126 graduated
Percentage of graduating graduate students who indicate "strongly agree/agree" with quality/satisfaction indicators on Exit Graduating Student Survey.	Among students who respond to the survey, ≥80% graduate students agree for each of the categories surveyed	Overall PH Curriculum = 90% Specialization, Curriculum =** Knowledge and Skills Prepare for Job/ Edu = 90% Identify Volunteer and Internships =** Help Focus Career Goals = 74% Meeting Expectations = 75% Promotes Cultural Competency = n/a** **Questions were not asked in 15-16 Survey because cooperative transition from College to the University centralized Exit Survey system inadvertently omitted. OAPSS has worked to correct this for future Exit Survey.	Overall PH Curriculum = 100% Specialization, Curriculum = 90% Knowledge and Skills Prepare for Job/ Edu = 85% Identify Volunteer and Internships = 70% Help Focus Career Goals = 56% Meeting Expectations = 72% Promotes Cultural Competency = 89%	Overall PH Curriculum = 98% Specialization, Curriculum = 95% Knowledge and Skills Prepare for Job/Edu = 75% Identify Volunteer and Internships = 52% Help Focus Career Goals = 64% Meeting Expectations = 83%

Outcome Measure	Target 2017	2015-16 187 surveyed/82 replied (43.8% response rate)	2014-2015 195 surveyed/79 replied (42% response rate)	2013-2014 125 surveyed/73 replied (58% response rate)
Percentage of graduating undergraduate students who indicate “strongly agree/agree” with quality/satisfaction indicators on Exit Graduating Student Survey.	Among students who respond to the survey, ≥80% undergraduate students agree for each of the categories surveyed	Relevance of core =89% Relevance of specialization = 66% Quality PH Faculty = 94% Quality Specialization Faculty = 89% Balance Theory and Practice = 74% Understanding Field PH = 91% Job, Graduate/ Professional School = 83% Help With Career Services = 49% Focus Career Goals =69% Met Overall Expectations =77%	Relevance of core = 89% Relevance of specialization = 45% Quality PH Faculty = 97% Quality Specialization Faculty = 84% Balance Theory and Practice = 55% Understanding Field PH = 100% Job, Graduate/ Professional School = 95% Help With Career Services = 50% Focus Career Goals = 68% Met Overall Expectations = 76%	Relevance of core = 95% Relevance of specialization = 68% Quality PH Faculty, = 95% Quality Specialization Faculty = 89% Balance Theory and Practice = 68% Understanding Field PH = 100% Job, Graduate/ Professional School = 89% Help With Career Services = 68% Focus Career Goals =79% Met Overall Expectations = 89%

4.4.e. Assessment of the extent to which this criterion is met and an analysis of the school’s strengths, weaknesses and plans relating to this criterion.

Assessment:

- The OSU College of Public Health meets Criterion 4.4.

Strengths:

- Academic advising is well-structured and students are satisfied with the process. However, the College continues providing faculty members with information to improve and expand scope (i.e. academic; career) advisement activities.
- Advisement-related materials are readily available electronically via the College’s Website.
- Career counseling is conducted and activities ongoing with goal to meet student expectations.

Challenges/Weaknesses/Plan:

- The expansion of some programs, especially the BSPH degree and the two specializations, has caused some challenges for faculty and staff in providing the high quality advising and monitoring that we expect. However, this has been addressed with additional hiring of appropriate staff for undergraduate

program academic and career advisement. Other measures taken to address advisement needs include development of: an online BSPH information session; completion of a new BSPH major online module, that includes a proactive course/career advisement program (4-year curricula plans/resumes reviewed for newly admitted students); and 2-year (MPH) and 4-year (BSPH) career development plans. Increasing the number of the College's faculty will also facilitate delivery of high quality advising and monitoring. In this regard, the Senior Associate Dean for Academic Affairs and OAPPS staff make periodic presentations and disseminate information to faculty to facilitate continually improving their overall advisement of students.

- Although there have been expanded efforts and resources, career counseling and post-graduation employment placement assistance, especially for non-MHA degree students, continues to be below levels that a higher percentage of students and graduates would deem acceptable and meeting expectations. Effort to explore and identify increased efficiency of operations as well as staffing needs for continued improvement are underway at the College.
- Expanded career services and opportunities, including improved student placement, is being explored at the College- and University-levels.
- Course schedules often pose a challenge for many students to attend the in-person, career-related workshops and events. The College is exploring additional modes for delivery including increasing accessible online videos.