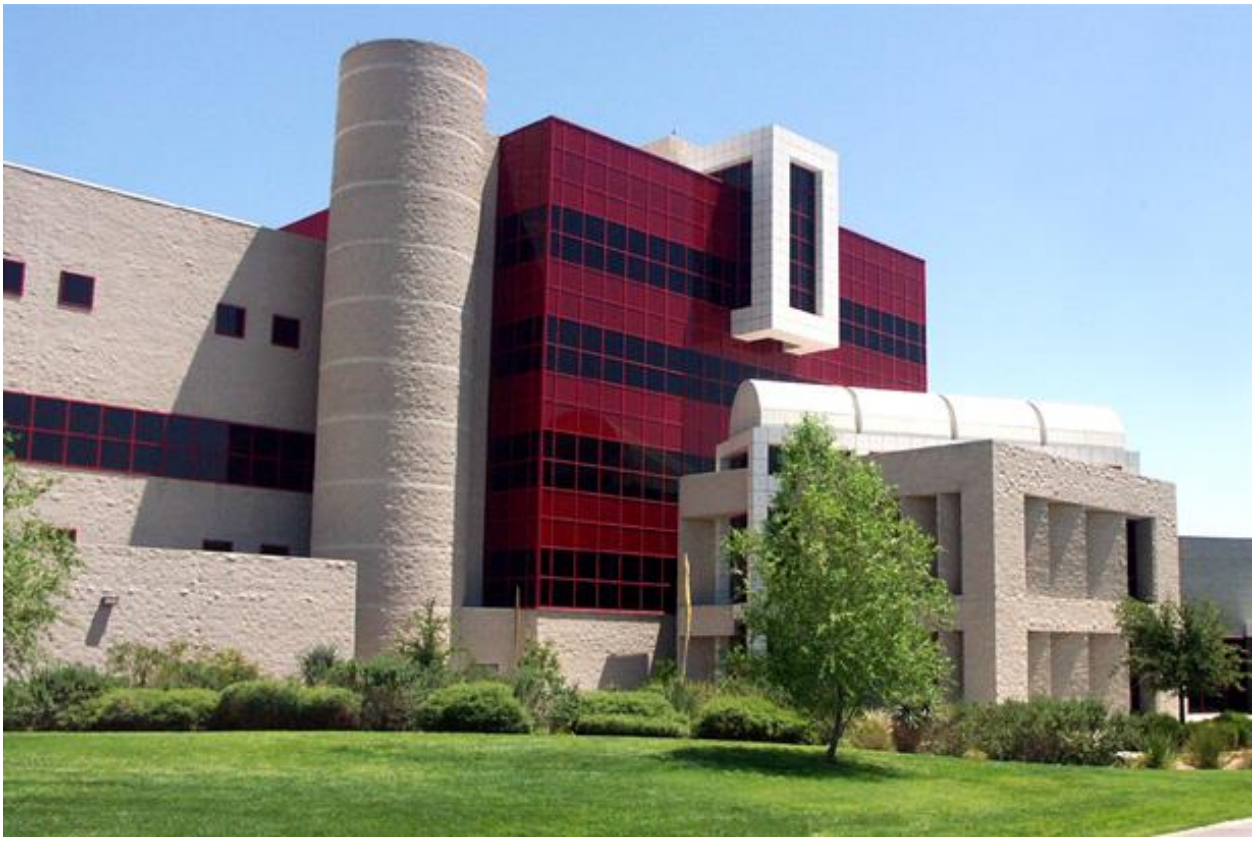
University of Nevada, Las Vegas
School of Community Health Sciences

Final Self-Study Report



Prepared for the Council on Education for Public Health • April 2018

UNLV | School of COMMUNITY HEALTH SCIENCES

Contents

Acronyms

AA: Associate of Arts
AANAPISI: Asian American, Native American, and Pacific Islander Serving Institution
ACHE: American College of Healthcare Executives
AIREC: American Indian Research and Education Center
AP: Advanced Placement
APHA: American Public Health Association
ASTHO: Association of State and Territorial Health Officials
AUPHA: Association of University Programs in Health Administration
BHS: Rod Lee Bigelow Health Science Building
BSPH: Bachelor of Science in Public Health
CAEO: UNLV Center for Academic Enrichment and Outreach
CA-NV PHTC: California-Nevada Public Health Training Center
CAHME: Commission on Accreditation of Health Care Management Education
CEPH: Council on Education for Public Health
CHDR: Center for Health Disparities Research
CHEA: Council for Higher Education Accreditation
CHIA: Center for Health Information Analysis
CITI: Collaborative Institutional Training Initiative
CLEP: College Level Examination Programs
COACHE: Collaborative on Academic Careers in Higher Education
COO: Chief Operating Officer
CPH: Certified in Public Heath
CSB: Campus Services Building
CSUN: Consolidated Students of the University of Nevada
CTR-IN: Mountain West Clinical and Translational Research Infrastructure Network
CV: Curriculum Vitae
DANTES: Defense Activity for Non-traditional Education Support
DHS: Division of Health Sciences
DMD: Doctor of Dental Medicine
EAB: Epidemiology and Biostatistics
EMHA: Executive Master of Heath Care Administration
EOH: Environmental and Occupational Health
EPSCoR: Established Program to Stimulate Competitive Research
ESS: Enrollment and Student Services
FERPA: Family Educational Rights and Privacy Act
FTE: Full Time Equivalent
FY: Fiscal year
GA: Graduate Assistantship
GEAR Up: Gaining Early Awareness and Readiness for Undergraduate Programs
GEH: Global and Environmental Health
GPA: Grade Point Average
GPSA: Graduate and Professional Student Association
GSES: Graduating Senior Exit Survey
GUA: Greenspun Hall
H4NI: Health for Nevada Initiative
HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems
HCAP: Health Care Administration and Policy
HED: Health Education
HiAP: Health in All Policies
HSI: Hispanic Serving Institution
HSMP: Health Services Management and Policy
IB: International Baccalaureate
ICARE4U: Introduce, Communicate, Ask, and Exit with “Is there anything else I can do for you?”
INBRE: IDeA Network of Biomedical Research Excellence
IRB: Institutional Review Board

LSAMP: Lewis Stokes Alliance for Minority Participation in STEM
M.Ed.: Master of Education
MD: Doctor of Medicine
MHA: Master of Health Care Administration
MPE: Paul McDermott Physical Education Building
MPH: Master in Public Health
MSI: Minority Serving Institution
MSM-HRC: Marjorie Barrick Museum of Art/Harry Reid Center
NACCHO: National Association of County and City Health Officials
NALBOH: National Association of Local Boards of Health
NDPBH: Nevada Division of Public and Behavioral Health
NICRP: Nevada Institute for Children's Research and Policy
NIDDK: National Institute of Diabetes and Digestive and Kidney Diseases
NIH: National Institutes of Health
NIMHD: National Institute on Minority Health and Health Disparities
NSHE: Nevada System of Higher Education
NSPHL: Nevada State Public Health Laboratory
NV: Nevada
NWCCU: The Northwest Commission on Colleges and Universities
OCP: Office of Community Partnerships
OE: Online Education
OSP: Office of Sponsored Projects
P&T: Promotion & Tenure
PAC: President's Advisory Council
PCORI: Patient-Centered Outcomes Research Institute
PEBP: Nevada Public Employees' Benefit Program
PhD: Doctor of Philosophy
PI: Primary Investigator
RRPC: Recruitment, Retention/Progression, and Completion
SAMHSA: Substance Abuse and Mental Health Services Administration
SBH: Social and Behavioral Health
SCH: Student Credit Hour
SCHS: School of Community Health Sciences
SOM: School of Medicine
SRWC: Student Recreation and Wellness Center
STEM: Science, Technology, Engineering, and Math
STEP-UP: Short-Term Research Experience Program for Underrepresented Persons
SSS: Student Support Services
TBD: To Be Determined
TEC: Technology Building
TTDRGA: Top Tier Doctoral Research Graduate Assistant
UMCSN: University Medical Center of Southern Nevada
UNLV: University of Nevada, Las Vegas
USAFI: US Armed Forces Institute Courses
WHA1: White Hall Annex 1
WRI: Wright Hall

Tables and Figures

Introduction

Describe the institutional environment, which includes the following:

a. Year institution was established and its type (e.g., private, public, land-grant, etc.)
b. Number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)
c. Number of university faculty, staff and students
d. Brief statement of distinguishing university facts and characteristics
e. Names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the regional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds (list may be placed in the electronic resource file)
f. Brief history and evolution of the school of public health (SPH) or public health program (PHP) and related organizational elements, if applicable (e.g., date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.)

The University of Nevada, Las Vegas was founded in 1957 to meet the educational needs of the Las Vegas community of approximately 100,000 residents. It has grown with the Las Vegas community, now over 2.2 million residents, and has continued to be an educational and cultural center of the city. In 2016, the university employed over 1,033 academic faculty members, 1,251 administrative faculty members, and 981 staff members.

The university has received the ranking of "higher research activity" by the Carnegie Foundation for the Advancement of Teaching and is tied for being the most diverse university for undergraduates (according to a U.S. News & World Report: https://www.usnews.com/best-colleges/rankings/national-universities/campus-ethnic-diversity) with more than 72 different countries represented in the student body. There are approximately 1,185 international students and scholars at the University. UNLV was also the first institution in Nevada to reach a Hispanic enrollment of 25 percent. There are 52 cultural, ethnic, and religious-based student organizations at UNLV.

UNLV's student body is not only diverse, but also shows an increase in creativity and academic success. UNLV has received over $70 million dollars in research awards in fiscal year 2017, showing a 26% growth over fiscal year 2016 (https://www.unlv.edu/news-story/fiscal-year-2017-research-activity-data). Participation in solar decathlons provide a way for students of multiple colleges to collaborate and design solar-powered houses. In the past, UNLV has regularly placed in the top 10 among other national and international teams.

Within the School of Community Health Sciences, the Global Health Initiative held the Global Health Forum in the spring 2017 semester to discuss maternal and child health issues with scholars from India, Guatemala, Nigeria, and Ghana. SCHS Professor Carolee Dodge-Francis and SCHS alumni Crystal Lee presented at the "Permanent Forum on Indigenous Policies on Indigenous Health and Well-Being" at the United Nations in April of 2017. Their topic covered Diverse Tribal Perspectives in Health Care for Native Americans.

The university has recently launched a new School of Medicine (SOM), welcoming its inaugural class of 60 students over the summer of 2017 with almost half of the students being graduates from NSHE institutions and almost 85% from Nevada. The school has received numerous donations and scholarships, including a $25 million dollar anonymous donation. The Engelstad Family Foundation donated $10 million to provide inaugural students with full tuition. The SOM will be housed within the medical district of Las Vegas, comprising over 9 acres of land. The UNLV Medicine Ackerman Center for Autism and Neurodevelopment Solutions has also opened as a part of the SOM to provide families with needed specialists.

The School of Medicine offers one example of ways in which UNLV is innovating and expanding, but other areas are expanding as well. A new building for hospitality students, Hospitality Hall, opened on January 23, 2018, and the university will see a new Engineering program building in the coming years. Recently, a new baseball complex has been completed and a new football practice facility is in the works. In 2020, the Las

Vegas Stadium will provide a new facility for the Rebel football team as well. The business school, student living areas, and the Student Union will all see renovation or expansion in coming years.

Another area in which UNLV is growing is in its community partnerships. The university has fostered over forty research based partnerships and 380 total partnerships. These partnerships allow for students to get into their communities sooner and make a difference. For example, student athletes at UNLV participated in over 13,000 community service hours, which won them the Mountain West Community Service Award in 2016.

Plans for UNLV are exciting for both students and the community. Overall, UNLV is growing by adding square footage for classrooms, research, sports facilities, and student use space. Student housing is set to triple with two major projects offering both undergraduate and graduate housing. One research park is up and running while the second remains in the planning stages. These facilities open up areas of research that were previously unavailable. The Academic Health Center will combine all health science programs in a central location that allows for interdisciplinary collaboration among health science students and faculty with potential new degree programs through a sports medicine research institute.

Enrollment, Degrees and Academic Units

As of Fall 2017, 30,471 students were enrolled at UNLV including 25,282 undergraduates, 4,429 graduate students, and 776 professional students. These students are enrolled in over 320 degree programs including 114 undergraduate degree programs, 132 graduate degree programs, 10 professional degree programs, 64 undergraduate minors, and 56 certificate programs.

The university's academic units are comprised of 15 schools and colleges:

- College of Education
- College of Fine Arts
- College of Liberal Arts
- College of Sciences
- Greenspun College of Urban Affairs
- Honors College
- Howard R. Hughes College of Engineering
- Lee School of Business
- School of Allied Health Sciences
- School of Community Health Sciences
- School of Dental Medicine
- School of Medicine
- School of Nursing
- William S. Boyd School of Law
- William F. Harrah College of Hospitality

Accreditations

UNLV is accredited by the Northwest Commission on Colleges and Universities (NWCCU) and its international programs are accredited by the Council on International Educational Exchange. The university completed its NWCCU seven-year site visit in October of 2017. Many individual programs and units are also accredited through the following other accrediting agencies:

Academy of Nutrition and Dietetics (ACEND)
Accreditation Board for Engineering and Technology (ABET)
American BAR Association (ABA)
American Council for Construction Education (ACCE)
American Psychological Association (APA)
Association of University Programs in Health Administration (AUPHA)
Association to Advance Collegiate Schools of Business (AACSB)
Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE)
Commission on Accreditation in Physical Therapy Education (CAPTE)

Commission on Accreditation of Athletic Training Education (caATe)
Commission on Accreditation of Medical Physics Education Programs (CAMPEP)
Commission on Collegiate Nursing Education (CCNE)
Commission on Dental Accreditation (CODA)
Council for Accreditation of Counseling and Related Educational Programs (CACREP)
Council for Interior Design Accreditation (CIDA)
Council on Education for Public Health (CEPH)
Council on Social Work Education (CSWE)
Joint Review Committee on Education in Radiologic Technology (JRCERT)
Landscape Architectural Accreditation Board (LAAB)
Liaison Committee on Medical Education (LCME)
National Architectural Accrediting Board (NAAB)
National Association of School Psychologists (NASP)
National Association of Schools of Art and Design (NASAD)
National Association of Schools of Music (NASM)
Network of Schools of Public Policy, Affairs, and Administration (NASPAA)
Professional Golfers' Association (PGA)

History of the School of Community Health Sciences, 2003-2017

The School of Community Health Sciences (SCHS), formerly the School of Public Health, is one of UNLV's most recent additions. In 2003, Paul W. Ferguson, Vice President for Research and Graduate Studies, recognized the need for such a school in Nevada, given that rapid population growth threatened the capacity of the state's public health agencies to cope with new and emerging public health issues. Approved as the School of Public Health by the Board of Regents in 2004, the school brought together programs housed in other colleges—environmental and occupational health, health promotion, and health care administration—as well as several research centers—the American Indian Research and Education Center, the Center for Health Disparities Research, Center for Health Information Analysis, and the Nevada Institute for Children's Research and Policy.

Dr. Mary Guinan, a nationally recognized expert in public health, became the founding Dean, and the first classes began in spring 2005. By the Fall of 2006, 82 undergraduates and 124 graduate students were enrolled in SCHS courses. To better align with the Council on Education for Public Health (CEPH) accreditation criteria, specifically those to become an accredited program in public health, the UNLV School of Public Health changed their name to the School of Community Health Sciences on January 1, 2009. Effective in the fall semester of 2010, the SCHS increased the number of credits required to complete the Master of Public Health degree (MPH) to 45 to match forthcoming CEPH criteria. By the spring of 2012, nearly 400 students were enrolled in the degrees offered by the SCHS. At that time, the SCHS offered undergraduate degree programs in public health, health care administration, and health promotion. The school's graduate degree programs included a Master of Public Health (MPH), a Master of Health Care Administration (MHA), a Master of Education in health promotion (MED), as well as a PhD in Public Health. The CEPH Board of Councilors acted at its June 6 - 8, 2013 meeting to accredit the Master of Public Health Program for a five-year term, extending to July 1, 2018. This accreditation encompasses all of the core public health areas of emphasis, including environmental and occupational health, health care administration and policy, social and behavioral health, and biostatistics and epidemiology. In 2013, Dr. Mary Guinan retired from the SCHS, and Dr. Shawn Gerstenberger was appointed as the second Dean of the SCHS on July 1, 2014. By 2016, the School of Community Health Sciences eliminated all Health Promotion degrees that began in the College of Education and added the Executive Master of Healthcare Administration (EMHA) degree as well as graduate certificate programs in Public Health and Infection Prevention. Currently, the SCHS serves well over 500 students and contains 32 tenured or tenure-track faculty. The SCHS faculty published over 100 peer-reviewed journal articles in 2016.

Organizational Charts

Organizational charts that clearly depict the following related to the school or program:

a. The school or program's internal organization, including the reporting lines to the Dean/director
b. The relationship between the school or program and other academic units within the institution. For programs, ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting lines
c. The lines of authority from the school or program's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (e.g., reporting to the president through the provost)
d. For multi-partner schools and programs (as defined in Criterion A2), organizational charts must depict all participating institutions

Figure 1. Organizational chart illustrating the relationship between SCHS and other academic units within UNLV and the lines of authority from the school to UNLV's chief executive officer

Figure 2. School's internal organization, including the reporting lines to the Dean.

Instructional Matrix

Instructional matrix: An instructional matrix presenting all of the school or program's degree programs and concentrations including bachelor's, master's and doctoral degrees, as appropriate.2 Present data in the format of Template Intro-1.

Table Intro 1a Instructional Matrix - Degrees and Concentrations								
Bachelor's Degrees					Categorized as public health	Campus based	Executive	Distance based
Public Health			BS		X	BS		
Health Care Administration			BS			BS		
Master's Degrees			**Academic**	**Professional**				
Public Health								
Environmental and Occupational Health				MPH	X	MPH		
Epidemiology and Biostatistics				MPH	X	MPH		
Health Care Administration and Policy				MPH	X	MPH		
Social and Behavioral Health				MPH	X	MPH		
Health Care								
Master of Health Care Administration				MHA		MHA		
Executive Master of Health Care Administration				EMHA				EMHA
Doctoral Degrees			**Academic**	**Professional**				
Public Health								
Global and Environmental Health			PhD		X	PhD		
Epidemiology and Biostatistics			PhD		X	PhD		
Health Service Management and Policy			PhD		X	PhD		
Social and Behavioral Health			PhD		X	PhD		
Joint Degrees			**Academic**	**Professional**				
	Existing concentration	**Joint-specific concentration**						
Dental Medicine	Environmental and Occupational Health*			MPH-DMD	X	MPH		
	Epidemiology and Biostatistics*			MPH-DMD	X	MPH		
	Health Care Administration and Policy*			MPH-DMD	X	MPH		
	Social and Behavioral Health*			MPH-DMD	X	MPH		

*MPH-DMD joint degree students are admitted into each program separately and only overlap in optional electives. MPH-DMD students must complete the same core classes, track specific required courses, internship, and culminating activity. They are considered MPH students in their selected track but are allowed to take dental school electives.

Enrollment Data

Table Intro 1b Enrollment Data		
Degree		**Current Enrollment (2017-2018)**
Master's		
	MPH	
	Environmental and Occupational Health	20
	Epidemiology and Biostatistics	23
	Health Care Administration and Policy	10
	Social and Behavioral Health	11
	All remaining Master's degrees	
	Master of Health Care Administration	32
	Executive Master of Health Care Administration	22
Doctoral		
	Academic public health doctoral (PhD)	
	Global and Environmental Health	7
	Epidemiology and Biostatistics	6
	Health Service Management and Policy	2
	Social and Behavioral Health	10
Bachelor's	BS Public Health	104
	All remaining bachelor's degrees (SPH)	
	BS Health Care Administration	136

Criterion A

A1. Organization and Administrative Processes (SPH and PHP)

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

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

School or program faculty have formal opportunities for input in decisions affecting the following:

- **degree requirements**
- **curriculum design**
- **student assessment policies and processes**
- **admissions policies and/or decisions**
- **faculty recruitment and promotion**
- **research and service activities**

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

A1.1 Program's Standing and Significant Ad Hoc Committees

Required Documentation: List the school or program's standing and significant ad hoc committees. For each, indicate the formula for membership (e.g.,, two appointed faculty members from each concentration) and list the current members. (self-study document) Programs should generally focus the response on the specific committees that govern the unit of accreditation, not on departmental or school committees that oversee larger organizational units. (self-study document)

The ***Executive Committee*** meets by special request of the Dean. Associate Deans, department chairs, program coordinators, and the directors of institutes and centers participate on the executive committee, which is chaired by the Dean of the SCHS. The Executive Committee serves as an advisory body to the administration of the SCHS in matters pertaining to curriculum, budget, and program decisions. It also provides a forum to share information regarding policy decisions and other matters between units of the SCHS and its administration as well as between the SCHS and the university. There are no external stakeholders on SCHS committees. These important partners sit on the Public Health Advisory Board or the Health Care Advisory Board.

The ***SCHS Bylaws Committee*** reviews the NSHE Code and UNLV Bylaws, and recommends revisions to the SCHS Bylaws as needed. It also serves to interpret the SCHS Bylaws and recommends such interpretations to the SCHS members. Per the SCHS bylaws, this committee consists of a member of each academic department as well as one member of the professional staff.

Table A1.1a SCHS Bylaws Committee

Member Name	Position
Committee Chair – Charles Regin	Assistant Professor, Undergraduate Coordinator, SBH
Maxim Gakh	Assistant Professor, EOH
Ge Lin	Professor, EAB
Michelle Sotero	Assistant Professor, HCAP
Vivian Surwill	Administrative Faculty

The ***Accreditation Committee*** meets weekly throughout the year. The purpose of the Accreditation Committee is to initiate, oversee, direct, and respond to all issues related to program, school, and department accreditation and assessment. This includes revising assessment tools, implementing assessment process, collecting assessment data, generating assessment reports, and identifying specific program improvement strategies. These issues may originate from national accreditation agencies within the health field or from requests from UNLV assessment leaders. The Accreditation Committee is advisory to the SCHS Dean and per SCHS bylaws, this committee consists of members from each academic department including department heads, professional staff, administrative assistants, and student representatives.

Table A1.1b Accreditation Committee	
Member Name	Position
Committee Chair – Shawn Gerstenberger	Dean
Jennifer Bonilla	MHA Programs Director
Mark Buttner	Professor, Graduate Coordinator, EOH
Chris Cochran	Professor, Department Chair, HCAP
Connie Correia	Dean's Assistant/Business Manager
Patricia Cruz	Interim Associate Dean, Professor, EOH
Sherri Gorter	Administrative Assistant III
Allison Laney	Administrative Assistant IV
Charles Regin	Assistant Professor, Undergraduate Coordinator, SBH
Jay Shen	Associate Dean, Professor, HCAP
Vivian Surwill	Director of Assessment
Francisco Sy	Professor, Department Chair, EAB
Selam Ayele	BSPH Student
Cameron Pfand	HCAP Student
Renee Rates	BSPH Student
Lawrence Sagadraca	MPH Student
AJ Wagner	EMHA Student

The ***Academic Standards Committee*** formulates and implements the SCHS academic standards that conform to UNLV and SCHS academic policies, reviews and recommends policies, and develops and updates appropriate materials and policy statements. The committee also executes the SCHS policy probation, suspension, and readmission by recommending action on individual student cases to the Dean. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on the Academic Standards Committee.

Table A1.1c Academic Standards Committee	
Member Name	Position
Committee Chair – Courtney Coughenour	Assistant Professor, EOH
Carolee Dodge Francis	Associate Professor, SBH
Qing Wu	Associate Professor, EAB
Soumya Upadhyay	Assistant Professor, HCAP

The ***Academic Faculty Bylaws Committee*** reviews the NSHE Code, UNLV Bylaws, SCHS School-wide Bylaws, and Academic Faculty Bylaws, and recommends revisions to the Academic Faculty Bylaws, as needed. Each concentration is represented on this committee. It also serves to interpret the Academic Faculty Bylaws and recommends such interpretations to the SCHS academic faculty. The purpose of the committee is to revise the SCHS Chapter II Bylaws whenever so authorized by the SCHS academic faculty and research center professional staff, and to edit the SCHS Chapter II Bylaws in accordance with the NSHE Code and the UNLV Bylaws. It also serves in an advisory capacity to the Dean and Department Chairs to prevent violations of the SCHS Bylaws, serve as the official tellers for elections conducted by mailed ballot, and maintain an up-to-date file of the NSHE Code, UNLV Bylaws, and SCHS Bylaws. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee.

Table A1.1d Academic Faculty Bylaws Committee	
Member Name	Position
Committee Chair – Charles Regin	Assistant Professor, Undergraduate Coordinator, SBH
Max Gakh	Assistant Professor, EOH
Ge Lin	Professor, EAB
Michelle Sotero	Assistant Professor, HCAP
Qing Wu	Associate Professor, EAB

The ***Curriculum Committee*** meets several times a year. The Curriculum Committee is a standing committee. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee. The committee reviews proposed undergraduate and graduate courses and curricular plans submitted by academic units within the SCHS. The committee also reviews courses and new programs of learning for possible addition to the SCHS offerings. After review, it provides a recommendation, with the rationale for approval or disapproval, to the Dean. The Dean provides a recommendation to the committee within ten working days, with the rationale for approval or disapproval. After approval from the Dean, recommendations made by this committee are forwarded to the appropriate Graduate College or Faculty Senate curriculum or program committee.

Table A1.1e Curriculum Committee	
Member Name	Position
Committee Chair – Patricia Cruz	Interim Associate Dean, Professor, EOH
Neeraj Bhandari	Assistant Professor, HCAP
Lung Chang “JoJo” Chien	Assistant Professor, EAB
Marya Shegog	Assistant Professor, SBH

The ***Academic Faculty Review Committee*** meets when there are faculty members ready for mid-tenure review or ready to apply for promotion and tenure. The committee members are divided into two sets, one set is responsible for the departmental level review, and the other is responsible for the school level review. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee. Only tenured faculty members are permitted to hold membership on this committee. The committee reviews and recommends faculty changes in mid-tenure, tenure, promotion, and merit for guidelines or processes. It also evaluates applications of faculty undergoing mid-tenure review, seeking tenure and/or promotion. The department review committee consisting of faculty members responsible for the departmental level review submits recommendations to the department chair. The committee submits recommendations, including rationale, to the Dean. Other duties include conducting a performance evaluation of the Dean as required by the university with input from all faculty and staff of the SCHS, no less than once every three years.

Table A1.1f Academic Faculty Review Committee			
Member Name	School Level	Department Level	Position
Committee Chair – Jay Shen	X		Associate Dean, Professor, HCAP
Timothy Bungum	X		Professor, EAB
Mark Buttner	X		Professor, Graduate Coordinator, EOH
Christopher Cochran		X	Professor, Department Chair, HCAP
Patricia Cruz		X	Interim Associate Dean, Professor, EOH
Carolee Dodge Francis		X	Associate Professor, SBH
Sheniz Moonie		X	Associate Professor, EAB
Melva Thompson-Robinson	X		Professor, SBH

The ***Faculty Appeals Committee*** is a standing committee that meets once a formal appeal is filed and reaches committee level. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee. Only tenured faculty may be members of this committee. This committee hears tenured and tenure-track faculty appeals following the denial of tenure, promotion, workload, or reappointment. The committee complies with the UNLV Faculty Senate procedures for hearing grievances.

Table A1.1g Faculty Appeals Committee	
Member Name	Position
Committee Chair – Jay Shen	Associate Dean, Professor, HCAP
Timothy Bungum	Professor, EAB
Mark Buttner	Professor, Graduate Coordinator, EOH
Christopher Cochran	Professor, Department Chair, HCAP
Patricia Cruz	Interim Associate Dean, Professor, EOH
Carolee Dodge Francis	Associate Professor, SBH
Sheniz Moonie	Associate Professor, EAB
Melva Thompson-Robinson	Professor, SBH

The ***Graduate Studies Committee*** meets several times a year, and is a standing committee with multiple functions. Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee. The committee's responsibility is to oversee, direct and modify the operation of school-wide graduate degree programs. Specific functions of the committee include but are not limited to student admissions, student appeals, new program review, accreditation, awarding graduate assistantships, and setting academic probation and separation policies.

Table A1.1h Graduate Studies Committee	
Member Name	Position
Committee Chair – Mark Buttner	Professor, Graduate Coordinator, EOH
Lung-Wen "Antony" Chen	Assistant Professor, EOH
Lung Chang "JoJo" Chien	Assistant Professor, EAB
Josué Patien Epané	Assistant Professor, HCAP
Melva Thompson-Robinson	Professor, SBH

The ***Scholarship Committee*** convenes to select qualified students who are eligible for awards from the graduate college, private donors, and other opportunities, as they become available (one-time gifts). Per SCHS bylaws, each academic department of the SCHS elects one representative to serve on this committee. This committee confirms the eligibility of applicants, selects the most qualified students based on specific criteria provided to them, and then forwards the list of recipients to the appropriate office.

Table A1.1i Scholarship Committee	
Member Name	Position
Committee Chair – Courtney Coughenour	Assistant Professor, EOH
Carolee Dodge Francis	Associate Professor, SBH
Qing Wu	Associate Professor, EAB
Soumya Upadhyay	Assistant Professor, HCAP

The ***Undergraduate Committee*** oversees, directs, and modifies the operation of the School of Community Health Sciences' two undergraduate programs: The Bachelor of Science in Health Care Administration and Policy (HCAP) and the Bachelor of Science in Public Health (BSPH). Per SCHS bylaws, each concentration is represented by sub-committees, which contain the specific program coordinator, members of faculty, members of the advising center staff, and students.

Table A1.1j Undergraduate Committee	
Member Name	Position
Public Health Sub-Committee	
Committee Chair – Charles Regin	Assistant Professor, Undergraduate Coordinator, SBH
Jennifer Pharr	Assistant Professor, EOH
Guogen Shan	Associate Professor, EAB
Melaney Jones	Assistant Director Health Sciences Advising Center
Sandra Annan	Student
Fabian Donate	Student
Health Care Sub-Committee	
Committee Chair - Christopher Cochran	Professor, Department Chair, HCAP
Michelle Sotero	Assistant Professor, HCAP
Neeraj Bhandari	Assistant Professor, HCAP
Kurt Houser	Visiting Lecturer
Cameron Pfand	Student

The ad hoc **Policy Committee** develops, proposes, and updates school-wide academic policies, in compliance with the university policies. The committee is composed of an Associate Dean, two Department Chairs, and two (senior) faculty members, who represent all of the four main disciplines (Environmental and Occupational Health, Epidemiology and Biostatistics, Health Care Administration and Policy, and Social and Behavioral Health) of the school. After a policy draft has been developed, the policy committee presents the draft to SCHS faculty for discussion and feedback. Once the policy draft is finalized, the policy committee sends it to the SCHS Bylaws Committee who will start the policy approval process. The policy draft becomes a formal policy if it is approved by the faculty, Dean, and Provost's Office, when appropriate.

Table A1.1k Ad hoc Policy Committee	
Member Name	Position
Committee Chair – Jay Shen	Associate Dean, Professor, HCAP
Timothy Bungum	Professor, EAB
Christopher Cochran	Professor, Department Chair, HCAP
Francisco Sy	Professor, Department Chair, EOH
Melva Thompson-Robinson	Professor, SBH

The ***Professional Staff Bylaws Committee*** consists of three members of the SCHS Professional Staff, elected by a two-thirds vote of the Professional Staff membership as a whole. Members of the committee shall serve a one year term. Functions of the committee include review and revision of Chapter III of the Bylaws as necessary, interpretation of the intent of Chapter III of the Bylaws when questions arise, and serving as official tellers for elections conducted by mailed ballot that involve only the Professional Staff of the SCHS.

Table A1.1l Professional Staff Bylaws Committee	
Member Name	Position
Committee Chair – Connie Correia	Dean's Assistant/Business Manager
José Meléndrez	Executive Director of Community Partnerships
Tara Phebus	Director of NICRP

The ***Professional Staff Personnel/Appeals Committee*** consists of three members of the SCHS Professional Staff, elected by a two-thirds vote of the Professional Staff membership as a whole. Members of the committee shall serve a one-year term. Administrators are not eligible for membership on this committee. Functions of the committee include hearing grievances related to personnel matters and providing recommendations to Professional Staff administrators, the Dean, and/or the Faculty Senate Professional Staff Committee, as appropriate.

Table A1.1m Professional Staff Personnel/Appeals Committee	
Member Name	Position
Committee Chair – Amanda Haboush-Deloye	NICRP Associate Director
Joseph Strother	Director of Development
Vivian Surwill	Director of Assessment

A1.2 Decision Making

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

a. Degree requirements
b. Curriculum design
c. Student assessment policies and processes
d. Admissions policies and/or decisions
e. Faculty recruitment and promotion
f. Research and service activities (self-study document)

a. Degree Requirements

The SCHS has two departments, one is school wide housing the PhD, MPH, and BSPH while the other houses the HCAP, MHA, and EMHA degrees. This differentiation dictates how some changes are handled. Degree requirements and curriculum design can be initiated by an individual, committee, or department.

Faculty within the departments or programs initiate degree changes based on accreditation needs, advisory boards' recommendations, or university policy changes (e.g., through the Graduate College or Faculty Senate). The SCHS Graduate Studies and Undergraduate Committees focus on the appropriate degree programs, and each program is represented in the School's Curriculum Committee. These committees provide recommendations to departments regarding degree requirements. Any degree requirements that result in program changes must also be submitted by the affected department or program to the (affected) faculty for discussion and vote prior to submission to the SCHS Curriculum Committee. Upon approval by the Curriculum Committee, the program changes are submitted to the Dean for final SCHS approval and forwarded to the appropriate Graduate College or Faculty Senate Committee for final approval.

b. Curriculum Design

The Graduate Studies Committee evaluates the effectiveness of the SCHS graduate programs in accordance with the SCHS bylaws, UNLV policies, and the Graduate College. This committee meets regularly to discuss the programs; if changes are requested that involve course or program changes, these recommendations are submitted to the appropriate program or department to initiate the change. These recommendations are typically made for school-wide degrees such as the SCHS PhD in Public Health. All program level degree or curriculum changes must be approved at the program or department level and then submitted to the School's Curriculum Committee for further review and a vote. In most instances, a full faculty vote is not required to confirm acceptance of a proposed curriculum change unless one-third or more voting faculty request such action in writing to the Dean within ten working days from the date of distribution of the curriculum committee minutes. After such a full faculty vote, if required, the proposal(s) is (are) forwarded to the Dean of the SCHS for his approval or rejection. If rejected, the proposal(s) is (are) returned to the originator accompanied by stated reasons.

c. Student Assessment Policies and Processes

Student assessment policies and processes related to accreditation are handled by the Accreditation Committee. This committee meets weekly and is charged with assessing students in order to improve the student experience within the SCHS and UNLV. The student committee representative works with faculty and staff to review current assessments, assessment needs, data, and accreditation needs in order to effect change based on student assessments.

d. Admissions Policies and/or Decisions

The Graduate Studies Committee oversees admissions policies and decisions for SCHS graduate

programs. They determine the criteria for admission and review applications for the Certificate Programs, MPH and PhD degrees while Health Care degrees are handled by the Health Care Administration and Policy Department. At the undergraduate level, the responsibility for admissions falls on the university based on their policies and requirements. Students are admitted to our programs based on university requirements. Students are allowed to become majors when the criteria and prerequisite courses determined by the Undergraduate Committee are met satisfactorily for each program.

e. Faculty Recruitment and Promotion
Faculty promotion is the purview of the Academic Faculty Review Committee. This committee's focus is to review and recommend faculty changes in mid-tenure, tenure, promotion, and merit based on guidelines or processes. The Committee also evaluates applications of faculty undergoing mid-tenure review, seeking tenure and/or promotion. The committee submits recommendations regarding promotion and tenure, including rationale, to the Dean. Promotion and tenure guidelines specific to the School were recently updated and approved by the SCHS faculty (see Bylaws).

Faculty recruitment is handled by the Department Chairs. A search and review committee is appointed by the Department Chair with appropriate input by academic faculty and with clearance by the Dean. The department or program faculty as a whole or a sub-committee of the academic department faculty may serve in this capacity. Vacancy notices are sent out from the Department Chair using recruitment lists developed for this purpose. The department or program may recommend a ranked list of names to the Dean for approval. The Dean in turn recommends the hiring of a new academic faculty member to the Executive Vice President and Provost who makes the final decision on such matters.

f. Research and Service Activities
The SCHS workload policy regarding research and service was also recently revised by the Ad hoc Policy Committee, voted on by SCHS faculty, and approved by the Chairs and Dean. The new workload policy allows for reductions in teaching load for documented grant and research activities, as well as outlines service expectations. This workload permits faculty to dedicate more time towards research activities and guides them in their service activities.

A1.3 Rights and Obligations

Required Documentation: A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the school or program. (electronic resource file)

See Electronic Resource file. (Electronic Resource files always match the criterion number. For example, this file is named A1.3.)

A1.4 Faculty Contribution

Required Documentation: Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees' external to the unit of accreditation. (self-study document)

Many faculty members serve on committees or boards that contribute to decision making at the university. This service ranges from sitting on a committee to being on the President's Advisory Council; below are a few examples of such contribution.

Dr. Carolee Dodge Francis heads the UNLV American Indian Alliance as well as sits on the President's Advisory Council (PAC), which consists of an At-Large Faculty member selected by the President (Chair), the President's Senior Advisor, the Immediate-Past Faculty Senate Chair, the Administrative Faculty Committee Chair, the Classified Staff Council Chair, the GPSA President, the CSUN President, and representatives from select campus constituencies. This council brings issues to the attention of the President and advises him on matters of importance.

Associate Dean Dr. Jay Shen is on the Top Tier Scholarship and Faculty Compensation Committee, the advisory board for Faculty Mentoring Program, the University Accreditation Committee, and the Bio-medical IRB board. These various groups are involved in decision making at the institutional level in each area.

Dr. Marya Shegog is the director of health programs at The Lincy Institute and assistant professor in the SCHS. The Lincy Institute identifies best practices that can be used to expand health care services and sustain healthy communities throughout Southern Nevada as well as collaborates with public and private sectors to identify opportunities for research, develop and expand health care education programs, and advocate for policies that support access and quality health care in Southern Nevada. Dr. Shegog also sits on the Women's Council, which ensures the voices of women at UNLV are heard and to advocate for a quality work life for women at all levels of the university.

Dr. Chris Cochran serves as a board member of the Nevada Public Employees Benefits Program (PEBP) and has participated in the School of Medicine Internal Medicine Department Chair Search Committee. His service on PEBP gives him input to the benefits for state employees including UNLV employees.

Dr. Sheniz Moonie serves as faculty senator representing the SCHS on the UNLV Faculty Senate, which is the voice of the faculty in the shared governance of the university.

SCHS Graduate Coordinators and Program Directors serve on the Graduate College Graduate Council. Dr. Mark Buttner is on the Graduate Council and Graduate Course Review Committee. Dr. Josue Epané is on the Graduate Council and Graduate Scholarship Committee.

A1.5 Description of Faculty Interaction

Required Documentation: Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc. (electronic resource file)

Faculty regularly interact within the SCHS through committee meetings, weekly writing groups, faculty meetings, conferences, events, etc. Every full-time faculty member serves on committees and attends meetings for specific committees, their department, and the SCHS. Part-time faculty are invited to all department meetings, SCHS meetings, and academic events such as seminars, awards ceremonies, panel discussions, the Annual Assessment meeting, and the biennial Assessment Summit. They are also included in all social events such as tailgating, potlucks, and parties. In an attempt to engage part-time instructors more efficiently, we have scheduled events such as orientations, faculty retreats, and social events at times that best accommodate their schedules. Department Chairs and program coordinators have reached out specifically to part-time instructors to find a time when we can meet with them to find out what development needs and constraints they may have. This includes evenings, weekends or other times that correspond with their availability as indicated by surveys and Doodle polls. It should be noted that many of the part-time instructors have jobs elsewhere, which can make scheduling a time for them all to get together difficult. While this presents a scheduling conflict, many of their current jobs bring real world experiences directly into the classroom, enhancing the student learning experience.

Faculty also interact while conducting research and writing for publications. Of the 101 distinct publications authored by SCHS faculty in 2016, over thirty were co-authored by another SCHS faculty member. In 2017, 64 original publications were authored by SCHS faculty, with 34 of them co-authored by other SCHS faculty.

A1.6 Strengths and Weaknesses

If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

<u>Strengths</u>

- SCHS faculty work together on a regular basis in various ways. This strengthens the SCHS community and creates a more productive environment for faculty.
- The HCAP program department wide faculty meeting is well attended by part-time instructors.

<u>Weaknesses</u>

- We have many part-time instructors that choose not to, or are unable to, participate in the various SCHS events and meetings. An event was scheduled for this fall but was cancelled due to low response, which was intended specifically for part-time faculty to socialize with full-time faculty and prepare for the academic year. We will try to hold this event again in order to engage part-time faculty.

A2. Multi-Partner Schools and Programs

When a school or program is sponsored by more than one regionally-accredited institution and is operated as a single organizational unit, the school or program defines a clear and comprehensive set of organizational rights and responsibilities that address operational, curricular and resource issues. Memoranda of agreement or other similar documents outline all such rights and responsibilities.

The school or program has a single identified leader (Dean or director) and a cohesive chain of authority for all decision making relevant to the educational program that culminates with this individual.

A2.1 Major Rights and Responsibilities of Participating Institutions

Required Documentation: Describe the major rights and responsibilities of each participating institution. (self-study document)

Not applicable.

A2.2 Formal Written Agreement

Required Documentation: A copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the school or program's operation. (electronic resource file)

Not applicable.

A2.3 Role and Responsibilities of Identified Leader

Required Documentation: Describe the role and responsibilities of the identified leader. (self-study document)

Not applicable.

A2.4 Strengths and Weaknesses

Required Documentation: if applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Not applicable.

A3. Student Engagement

Students have formal methods to participate in policy-making and decision making within the school or program, and the school or program engages students as members on decision-making bodies whenever appropriate.

A3.1 Student Participation in Policy-Making

Required Documentation: Describe student participation in policy-making and decision-making at the school or program level, including identification of all student members of school or program committees over the last three years, and student organizations involved in school or program governance, if relevant to this criterion. Schools should focus this discussion on students in public health degree programs. (self-study document)

Students are provided with multiple ways in which they can participate in policymaking or decision making within the School of Community Health Sciences. Four primary areas for student engagement will be discussed and include 1) participation in student organizations 2) inclusion in formal school committees and 3) the Public Health Undergraduate Subcommittee and 4) participation in the annual assessment meeting and biennial summit.

The Public Health Student Association along with the Health Care Administration Student Association allows both undergraduate and graduate students to voice their opinions regarding community involvement, student engagement, program concerns, and departmental opportunities. The administration and faculty work closely with these student organizations to assist them with career advancement, curriculum changes, communications strategies and other areas. Each year, the student organizations are asked to convene and prepare a list of strengths and weaknesses they see in the programs; the leadership from the student organizations compiles these data and completes a written report. This report is presented at the annual assessment meeting each spring to SCHS faculty, staff, and administration. In addition, representatives from these associations are also included as members of several school committees most notable are the weekly assessment meeting and annual assessment meeting.

Student clubs present data at the Annual Assessment Meeting each spring. These data are compiled and used by our Accreditation Committee to facilitate change. Students are also encouraged to attend the biennial Assessment Summit and participate in focus groups that are used to drive policies with the school. Sixteen students attended the 2016 Assessment Summit. Focus groups included a mix of faculty, staff, community members, alumni, students, and state officials, and asked the following questions:

1. What deficiencies are you noticing in your organization or education (i.e., training, education, emerging skills)?
2. What skills are you looking for as a student? As an employer?
3. How can the School of Community Health Sciences help you acquire these skills?
4. What barriers do you encounter in obtaining the skills and addressing the deficiencies discussed in breakout session 1?
5. Are there ways the School of Community Health Sciences can help you overcome these barriers (i.e., partnerships, trainings, scholarships)?
6. What role could an effective alumni network play in improving your organization or educational experience and overcoming barriers and deficiencies?

In 2018, an additional 16 students participated in the summit and addressed questions related to service learning opportunities, communication strategies, mentorship, and faculty/staff development. Data from these focus groups generated an action list for the SCHS Accreditation Committee, several student representatives serve on this committee to ensure that strategies and policies are discussed and implemented. The accreditation committee meets weekly and encourages active student participation, and is instrumental to successful implementation of strategies and policies. From the 2016 “to do” list, many new initiatives were implemented such as a three year course rotation, new faculty hires, increased internship hours, the creation of an alumni association, additional course offerings, etc. Students were directly involved in this process which led to policy

changes within the SCHS.

The Accreditation Committee allows a student representative to have a voice in policy-making and changes in the SCHS. Student input is encouraged on topics such as course surveys, student engagement, activities, curriculum, and SCHS policies. Not only does this committee genuinely consider student opinions, it allows students to understand how the department works and functions – facilitating a greater sense of engagement within the school. The committee has always included a student representative since it was formed in 2015. Its first student representative was Jennifer Lucas (MPH, PhD), followed by Noehealani Antolin (MPH), Melissa Bartshe (BSPH, MPH student), and now has five student members including Selam Ayele (BSPH student), Renee Rates (BSPH student), Cameron Pfand (HCAP student), Lawrence Sagadraca (MPH student), and AJ Wagner (EMHA student).

Finally, the Public Health Undergraduate Sub-Committee is another way in which students can be involved in decisions within the department. Within this committee, students are encouraged to give their opinions regarding degree requirements, academic advising, and career/internship opportunities. This committee examines how students feel about their degree, the classes they have taken, and whether students feel prepared to enter the public health workplace at the completion of their degree. Several recent efforts of the committee include the development of a course rotation for undergraduate students, a revision of the undergraduate handbook, development of several exit surveys, critical evaluation of degree requirements, and development of strategies for engaging undergraduate students in research projects. Summaries of these efforts can be found in the meeting minutes that are part of the electronic resource file.

A3.2 Strengths and Weaknesses

Required Documentation If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Students are engaged on many levels in the SCHS. This is a strength in our program as our new student clubs are working to create an even more student centered environment. Students actively serving on decision-making committees such as the undergraduate committee and Accreditation Committee demonstrate this well.

Weaknesses

- A weakness in this area is that these student and alumni clubs are fledgling and need time to develop and grow. The input they have offered has been valuable and the SCHS will continue to engage them in SCHS decision making.

A4. Autonomy for Schools of Public Health (SPH only)

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

A4.1 Reporting Lines up to Chief Executive Officer

Required Documentation: Briefly describe the school's reporting lines up to the institution's chief executive officer. The response may refer to the organizational chart provided in the introduction. (self-study document)

The School of Community Health Sciences is part of the Division of Health Sciences, which includes the School of Dental Medicine, School of Allied Health, School of Medicine, and the School of Nursing, but the Division of Health Sciences has no administration or impact on the autonomy of the SCHS. Please see https://www.unlv.edu/academics/colleges-schools for a complete listing of autonomous colleges and schools at UNLV.

The SCHS consists of two departments, Environmental and Occupational Health and Health Care Administration and Policy. The department heads report to the School's administration including the Associate Deans and Dean. The Dean reports to the Executive Vice Provost as do all other schools and colleges within UNLV. The Executive Vice Provost reports directly to the university President, who acts as the institution's chief executive officer.

A4.2 Reporting Lines and Levels of Autonomy

Required Documentation: Describe the reporting lines and levels of autonomy of other professional schools located in the same institution and identify any differences between the school of public health's reporting lines/level of autonomy and those of other units. (self-study document)

All schools and colleges within UNLV share the same reporting structure as the SCHS.

A4.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The SCHS is well established within UNLV and requires no exceptional reporting lines.

Weaknesses

- The Division of Health Sciences is a seemingly unnecessary level between the SCHS and the reporting lines and as there is no administration within the Division of Health Sciences, it is superfluous. When an academic health center is established this may change.

A5. Degree Offerings in Schools of Public Health (SPH Only)

A school of public health offers a professional public health master's degree (e.g.,, MPH) in at least three distinct concentrations (as defined by competencies in Criterion D4) and public health doctoral degree programs (academic or professional) in at least two concentrations (as defined by competencies in Criterion D4).[4] A school may offer more degrees or concentrations at either degree level.

A5.1 Concentration Areas

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

The SCHS offers four distinct MPH concentrations including Environmental and Occupational Health, Epidemiology and Biostatistics, Health Care Administration and Policy, and Social and Behavioral Health. There are also four distinct doctoral concentrations including Global and Environmental Health, Epidemiology and Biostatistics, Health Service Management and Policy, and Social and Behavioral Health.

MPH-Doctorate in Dental Medicine (DMD) joint degree students are admitted into each program separately and only overlap in optional electives. MPH-DMD students must complete the same core classes, track specific required courses, internship, and culminating activity as MPH students. They are considered MPH students in their selected track.

Please see the Instructional Matrix Table Intro 1A.

A5.2 Degrees Offered

Required Documentation: An official catalog or bulletin that lists the degrees offered by the school. (electronic resource file or hyperlink in self-study document)

https://www.unlv.edu/publichealth/academic-programs

Criterion B

B1. Guiding Statements

The school or program defines a *vision* that describes how the community/world will be different if the school or program achieves its aims. The school or program defines a *mission statement* that identifies what the school or program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the school or program's setting or community and priority population(s). The school or program defines *goals* that describe strategies to accomplish the defined mission. The school or program defines a statement of *values* that informs stakeholders about its core principles, beliefs, and priorities.

Together, the school or program's guiding statements must address instruction, scholarship, and service and must define the ways in which the school or program plans to 1) advance the field of public health and 2) promote student success.

may derive from the purposes of the parent institution but also reflect the school or program's own aspirations and respond to the needs of the school or program's intended service area(s).

are sufficiently specific to allow the school or program to rationally allocate resources and to guide evaluation of outcomes.

Required documentation: A one- to three-page document that, at a minimum, presents the school or program's vision, mission, goals and values.This document may take the form of the executive summary of a strategic plan, or it may take other forms that are appropriate to support the school or program's ongoing efforts to advance public health and student success. (self-study document)

The mission, vision, and goals related to the SCHS have been developed and are clearly articulated in our strategic plan; an executive summary of this process will follow and will be supplemented with evidence demonstrating how we regularly evaluate data, create policies and procedures, and acquire feedback to ensure we are making progress in all areas.

The SCHS has worked collaboratively to develop a clear vision and mission for our school. Our vision is to be a vibrant center of excellence for public health teaching, research, and community action, and to be a magnet for state, national, and international students. Our mission is to provide quality education, research, service, and leadership to improve public health and quality of life, and to eliminate health disparities. Several major initiatives are underway to enhance our capacity in health disparities. These include several large grant submissions and the development of an interdisciplinary research group funded by the State of Nevada focusing on health disparities, entitled the "Health for Nevada Initiative."

The SCHS has a well-established strategic plan that was completed in 2015. At the center of this plan are acquiring and maintaining accreditation in our undergraduate and graduate programs in Public Health and Healthcare Administration, which directly aligns us with the overarching UNLV Top Tier efforts (see UNLV Top Tier Website for details - https://www.unlv.edu/toptier). Specifically, our major three-year strategic goal is to become the first accredited School of Public Health in Nevada, establish the first CAHME accredited Healthcare Administration program in Nevada, and maintain, grow and improve our AUPHA accredited undergraduate Healthcare Administration degree. To accomplish the three-year goal, we began by creating an integrated strategic plan focused on four SCHS specific strategies for success: 1) Leadership in Public Health and Health Care Management and Policy Education; 2) Strong Foundation for Research, Policy, and Practice; 3) Collaborative Relationships; and 4) Multilevel Accountability. For each of the four strategies for success, we also have identified objectives, action steps, and assessment criteria that are collected by the faculty, staff, students, and university to evaluate our progress systematically in each area. Internal policies, procedures, and guidelines are created and modified to reflect and reinforce the strategic planning process, and to create clear expectations and regular feedback to ensure we are on track to accomplish these tasks. The SCHS fosters the development of our diverse faculty including expertise in the five core areas of public health including biostatistics, environmental and occupational health, epidemiology, health care administration and policy, and social behavioral health. This goal is exemplified by our revised PhD

program, which insures that all PhD students receive core curriculum in these areas, similar to the MPH program.

To engage all stakeholders in this process, we hold a weekly assessment/accreditation meeting to be sure all data are being collected and analyzed. Similarly, we hold an annual assessment/accreditation meeting where all faculty, staff, and students summarize the various data collected on all of our programs in a public forum and identify the strengths, weaknesses, and recommendations for improvement. Biennially, we also hold an Assessment Summit where critical information regarding our programs is collected, evaluated, and discussed by faculty, staff, students, alumni, community partners, preceptors, and research collaborators. These efforts, in combination with several others within the school, are then used to prioritize our efforts and resources for the next year. To focus these discussions and decisions, the goals listed above are explicated here:

Leadership in Public Health and Health Care Management and Policy Education Goals[1]

1. Offer coursework that teaches required competencies for public health and health care workforce professionals at all levels and that meet/exceed the criteria for accreditation by relevant entities.
2. Offer a variety of programs and services that support student recruitment, retention, progression, and graduation.
3. Build faculty with diverse skills and backgrounds in the five core areas.

Strong Foundation for Research, Policy, and Practice Goals[2]

1. Increase impactful extramurally funded research through public and private sources.
2. Provide unique opportunities for graduate students and junior faculty to participate in public health research and real-world practice opportunities.
3. Expand and enhance the ability to access health data sources for collection, analysis, and reporting by centers, research faculty, and students

Collaborative Relationships Goals[3]

1. Promote and support active participation in University service including department, school, and Division of Health Sciences (DHS).
2. Promote and support active participation in Community service.
3. Establish and support Professional partnerships.
4. Establish and support Community partnerships.
5. Establish and support Donor partnerships

Multilevel Accountability Goals

1. Assessment - Establish and support a diverse complement of faculty and staff sufficient to meet the needs of students and accreditation requirements
2. Infrastructure - Build a strong infrastructure to support the needs of students, faculty, centers, laboratories, and partners
3. Accreditation – Establish a process for identifying, collecting, and documenting needed information for new and continuing accreditation applications

[1]In alignment with our Top Tier UNLV Initiative, School of Community Health Sciences mission and vision it is imperative that we continually evaluate, modify and adapt our courses, community-based needs, faculty and diversity and student success to meet the current demands. Thus, making goal number 1 a relevant and adaptable ongoing priority for the school.

[2]Infrastructure needs that are relevant to this goal include but are not limited to: acquisition of suitable combined space for the SCHS, access to regional and national health care databases, classroom technologies that are relevant and current, on line teaching technologies, integrated databases to address student success and progression, financial technology to assist with grant management and tracking.

[3]This goal remains relevant as it highlights our needs to engage our faculty, staff and students regularly and effectively in meaningful collaborations with community and university partners. Given the requirements for hands on internships, volunteer opportunities and service learning projects we must foster and expand the relationships with our existing collaborators, and actively pursue relationships with new partners to provide innovative opportunities for all members of the SCHS.

Several documents used to review and evaluate faculty and staff success have recently been modified or created to demonstrate our commitment to these areas; these include the SCHS Workload Assignment Policy and Guidelines, and the SCHS Promotion Guidelines for both ranks of Assistant-Associate professor and Associate-Full professor. We also recently created promotion guidelines for the Faculty in Residence positions and procedures for the peer evaluation of teaching.

The individual action steps and assessment criteria related to each of these goals can be found in the strategic plan and referenced throughout this document, as well as in the resource files held by the school. Extensive meeting minutes are available from our weekly meetings detailing the in-depth discussions regarding assessment criteria and student success, and executive summaries of the Annual Assessment Meetings and the biennial Assessment Summit are also available in the resource files.

Finally, the SCHS has a clear set of values that are incorporated throughout all areas of the school and integrated into all practices, policies, and procedures.

1. The practice of public health should strive to advance and safeguard the health of populations, especially the most vulnerable.
2. Faculty, staff, and students should uphold the highest principles of ethics and scientific and academic conduct, should cultivate curiosity, and should respect all individual rights.
3. A multidisciplinary approach in public health is vital to addressing health challenges.
4. Achieving social justice should be a recognized element in furthering public health.
5. Public health programs should include students, faculty, and staff with diverse backgrounds.
6. Public health education programs should combine quality classroom and research experience with applied laboratory and field practice.

B1.2 Strategic Plan

Required Documentation: If applicable, a school- or program-specific strategic plan or other comparable document. (electronic resource file)

See Electronic Resource file.

B1.3 Strengths and Weaknesses

Required Documentation If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The SCHS has a clearly articulated mission, vision, goals, strategies and values that are regularly assessed and incorporated into their programs in a systematic and thoughtful process.

Weaknesses

- With a limited number of support staff and faculty, there is a significant amount of work related to collecting and analyzing these data. This often competes with other critical areas within the school.

B2. Graduation Rates (SPH and PHP)

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

The school or program achieves graduation rates of 70% or greater for bachelor's and master's degrees and 60% or greater for doctoral degrees.

B2.1 Graduation Rate

Required Documentation: Graduation rate data for each public health degree. See Template B2-1. (self-study document)

Please note that all SCHS degrees must be completed in six years per university policy (https://catalog.unlv.edu/content.php?catoid=20&navoid=3589#Six-Year_and_Eight-Year_Policy).

Table B2.1a Students in the BSPH Degree, by Cohorts Entering Between 2012-2013 and 2017-2018

	Cohort of Students	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
2012-2013	# Students entered	13					
	# Students withdrew, dropped, etc.	0					
	# Students graduated	1					
	Cumulative graduation rate	8%					
2013-2014	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	28				
	# Students withdrew, dropped, etc.	0	0				
	# Students graduated	0	0				
	Cumulative graduation rate	8%	0%				
2014-2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	28	20			
	# Students withdrew, dropped, etc.	0	0	0			
	# Students graduated	1	1	0			
	Cumulative graduation rate	15%	4%	0%			
2015-2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	11	27	20	17		
	# Students withdrew, dropped, etc.	0	0	0	0		
	# Students graduated	2	3	1	0		
	Cumulative graduation rate	31%	14%	5%	0%		
2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	9	24	19	17	7	
	# Students withdrew, dropped, etc.	0	1	0	0	0	
	# Students graduated	2	7	2	2	1	
	Cumulative graduation rate	46%	39%	15%	12%	14%	
2017-2018 *Only includes Summer and Fall 2017 graduates	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	16	17	15	6	38
	# Students withdrew, dropped, etc.	0	0	0	0	0	0
	# Students graduated	1	1	2	1	0	0*
	Cumulative graduation rate	54%	43%	25%	18%	14%	0%

Table B2.1b Students in the MPH Degree, by Cohorts Entering Between 2012-2013 and 2017-2018							
	Cohort of Students	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
2012-2013	# Students entered	25					
	# Students withdrew, dropped, etc.	0					
	# Students graduated	0					
	Cumulative graduation rate	0%					
2013-2014	# Students continuing at beginning of this school year (or # entering for newest cohort)	25	12				
	# Students withdrew, dropped, etc.	0	0				
	# Students graduated	6	0				
	Cumulative graduation rate	24%	0%				
2014-2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	19	12	28			
	# Students withdrew, dropped, etc.	0	0	0			
	# Students graduated	7	1	0			
	Cumulative graduation rate	52%	8%	0%			
2015-2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	12	11	28	28		
	# Students withdrew, dropped, etc.	0	0	0	0		
	# Students graduated	3	3	3	1		
	Cumulative graduation rate	64%	33%	11%	4%		
2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	9	8	25	27	28	
	# Students withdrew, dropped, etc.	0	0	1	2	1	
	# Students graduated	2	4	15	5	0	
	Cumulative graduation rate	72%	66%	64%	21%	0%	
2017-2018 *Only includes Summer and Fall 2017 graduates	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	4	9	20	27	26
	# Students withdrew, dropped, etc.	1	0	1	1	0	0
	# Students graduated	0	1	1	1	1	0*
	Cumulative graduation rate	72%	75%	68%	25%	4%	0%

Table B2.1c Students in the PhD Degree, by Cohorts Entering Between 2012-2013 and 2017-2018							
	Cohort of Students	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
2012-2013	# Students entered	8					
	# Students withdrew, dropped, etc.	0					
	# Students graduated	0					
	Cumulative graduation rate	0%					
2013-2014	# Students continuing at beginning of this school year (or # entering for newest cohort)	8	3				
	# Students withdrew, dropped, etc.	2	0				
	# Students graduated	0	0				
	Cumulative graduation rate	0%	0%				
2014-2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	3	6			
	# Students withdrew, dropped, etc.	0	0	0			
	# Students graduated	1	1	0			
	Cumulative graduation rate	13%	33%	0%			
2015-2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	5	2	6	6		
	# Students withdrew, dropped, etc.	0	0	0	0		
	# Students graduated	2	0	0	0		
	Cumulative graduation rate	38%	33%	0%	0%		
2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	3	2	6	6	4	
	# Students withdrew, dropped, etc.	0	0	0	0	0	
	# Students graduated	2	0	0	0	0	
	Cumulative graduation rate	63%	33%	0%	0%	0%	
2017-2018 *Only includes Summer and Fall 2017 graduates	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	2	6	6	4	12
	# Students withdrew, dropped, etc.	0	0	0	0	0	0
	# Students graduated	0	1	1	0	0	0*
	Cumulative graduation rate	63%	66%	17%	0%	0%	0%

B2.2 Doctoral Student Progression

Required Documentation: Data on public health doctoral student progression in the format of Template B2-2. (self-study document)

Table B2.2 Doctoral Student Data for 2016/2017				
	Global and Environmental Health	**Epidemiology and Biostatistics**	**Health Services Management and Policy**	**Social and Behavioral Health**
# newly admitted in 2017-2018	6	3	0	2
# currently enrolled (total) in 2017	8	8	2	12
# completed coursework during 2016	3	6	4	9
# advanced to candidacy (cumulative) during 2016	1	1	0	1
# graduated in 2016	1	2	0	1

B2.3 Explanation of Data

Required Documentation: Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors. (self-study document)

The BSPH degree has undergone significant changes over the last few years, including name changes and curricular changes. During the 2014-2105 academic year, the degree was completely revised to reflect a public health degree and named the BSPH officially. Given the various different names and differing required courses prior to 2014-2015, tracking these students has become difficult. In addition, given the fact that graduation and retention rates are tracked at UNLV by evaluating full-time, first-time freshman, the numbers in a new degree are quite low. However, many of our students transfer from other degree programs or universities but those numbers are not always reflected in the official data found on the UNLV websites because they were never full-time, first-time freshman. We have constructed tables and descriptions that will help explain this information, and are prepared to discuss details during the site visit if needed. As we approach the maximum time to graduation, these problems should be resolved.

With respect to the MPH, for the two cohorts that are approaching their six-year limit for graduation (2012-2013; 2013-2014) we already have over a 70% graduation rate. It is also notable that we have retained most of the students from these cohorts. We cater to a group of students that are working professionals and offer classes in the evening to help with progression and completion, but these students do take a bit longer to graduate. We also have revised our advising, based on student feedback to try to retain and many students as possible.

The SCHS doctoral programs are relatively young and have grown steadily. One concerning factor is in the Health Services Management and Policy (HSMP) track, in which enrollment is low and there have been no graduates. One explanation for low enrollment is that some health care students may not be interested in a public health PhD. Master of Public Health or Master of Health Care Administration degrees in the health care field are more typical. Another reason may be that there have not been any full-time students in the PhD program with the Health Services Management and Policy (HSMP) concentration, which means that students remain in the program longer as they progress more slowly. One of the students is currently working on her dissertation proposal and plans to defend her dissertation in fall 2018. Another student is preparing her oral part of the comprehensive exam that will focus on her dissertation topic. One student, a large hospital administrator, is currently taking a year of leave of absence due to the demanding commitment from the high administrative position. The remaining students are still completing their coursework.

There are several things that will be done to address the slow progression issue. The first is to strengthen the marketing for this concentration. Since the degree is PhD in Public Health, many potential applicants may not know that it contains the HSMP concentration. To our knowledge, some potential applicants merely search PhD in HSMP and related degree. Second, we will make efforts to admit full-time HSMP track students including support such as graduate assistantships to attract those applicants.

B2.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The progression of most PhD students including part-time students is typical.
- All new students must have an academic plan including dissertation research ideas and a faculty member in mind when applying to the program, which has increased the quality and focus on new PhD students.
- More students are applying than are being accepted.

Weaknesses

- A more structured PhD program may get students through the program in a more timely fashion. This is currently being developed and is scheduled to be implemented in the Fall 2018 semester.

B3. Post-Graduation Outcomes (SPH and PHP)

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

The school or program chooses methods that are explicitly designed to minimize the number of students with unknown outcomes. This expectation includes collecting data that accurately presents outcomes for graduates within approximately one year of graduation, since collecting data shortly before or at the exact time of graduation will result in underreporting of employment outcomes for individuals who begin their career search at graduation. In many cases, these methods will require multiple data collection points. The school or program need not rely solely on self-report or survey data and should use all possible methods for collecting outcome data.

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

B3.1 Post-Graduation Outcomes

Required documentation: Data on post-graduation outcomes (employment or enrollment in further education) for each public health degree. See Template B3-1. (self-study document)

Table B3.1a BSPH Post-Graduation Outcomes*

	2013-2014 Number and percentage	2014-2015 Number and percentage	2015-2016 Number and percentage
Employed	5 (45%)	3 (100%)	5 (55%)
Continuing education/training (not employed)	2 (18%)	0 (0%)	1 (11%)
Not seeking employment or not seeking additional education by choice	0 (0%)	0 (0%)	0 (0%)
Actively seeking employment or enrollment in further education	0 (0%)	0 (0%)	0 (0%)
Unknown	4 (36%)	0 (0%)	3 (33%)
Total	11 (100%)	3 (100%)	9 (100%)

*This data has not been previously documented leading to large percentages in the unknown category. This data will be collected and stored moving forward.

Table B3.1b MPH Post-Graduation Outcomes

	2013-2014 Number and percentage	2014-2015 Number and percentage	2015-2016 Number and percentage
Employed	22 (92%)	16 (84%)	8 (57%)
Continuing education/training (not employed)	0 (0%)	1 (5%)	4 (29%)
Not seeking employment or not seeking additional education by choice	0 (0%)	0 (0%)	0 (0%)
Actively seeking employment or enrollment in further education	0 (0%)	1 (5%)	1 (7%)
Unknown	2 (8%)	1 (5%)	1 (7%)
Total	24 (100%)	19 (100%)	14 (100%)

Table B3.1c PhD Post-Graduation Outcomes			
	2013-2014 Number and percentage	**2014-2015 Number and percentage**	**2015-2016 Number and percentage**
Employed	2 (100%)	5 (100%)	6 (86%)
Continuing education/training (not employed)	0 (0%)	0 (0%)	1 (14%)
Not seeking employment or not seeking additional education by choice	0 (0%)	0 (0%)	0 (0%)
Actively seeking employment or enrollment in further education	0 (0%)	0 (0%)	0 (0%)
Unknown	0 (0%)	0 (0%)	0 (0%)
Total	2 (100%)	5 (100%)	7 (100%)

B3.2 Explanation of Data

Required documentation: Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors. (self-study document)

The BSPH program was reconfigured in 2014 and students graduated with other degrees or changed their declared major to public health. There was no job placement tracking conducted in the past other than through alumni surveys. Alumni surveys have a notoriously low response rate so job placement data were unavailable. Currently, graduates are required to fill out an exit survey that asks for job placement information as well as graduates' personal email addresses so that we can contact alumni in the future. We have also established an alumni association and will begin tracking job placement rates through that avenue as well.

MPH graduates work primarily in the public health field or go on to further their education. Job placement rates for MPH graduates are well above 80% if those continuing their education are considered (92%, 89%, and 86% for 2013-2016, respectively). The employment rates for PhD graduates is excellent as well (86%).

B3.3 Strengths and Weaknesses

Required documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

<u>Strengths</u>

- Most graduate students are finding employment within one year of graduation in public health or related fields.

<u>Weaknesses</u>

- Undergraduate students were not tracked so data are incomplete. Plans have been made to correct this situation including maintaining an active alumni association, involving the Public Health Student Association in tracking students, and creating new exit survey procedures

B4. Alumni Perceptions of Curricular Effectiveness (SPH and PHP)

For each degree offered, the school or program collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements. The school or program defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered. The school or program documents and regularly examines its methodology as well as its substantive outcomes to ensure useful data.

B4.1 Alumni Self-Assessment

Required documentation: Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation. (self-study document)

Students complete an exit survey after defending their master's or doctoral culminating project. Within the survey there is a self-report measure of students' competency attainment. The following data are from 2015-2017 using program competencies prior to implementation of CEPH required foundational competencies. For most competencies, MPH students (N=26) rated their knowledge of the competency as "with distinction," "very well," or "well." For PhD students (N=5), only one competency was rated as "well" with all others rated as "with distinction" and "very well."

Table B4.1a Old MPH Competency Student Self-Assessment

Percentage of students who identified their level of proficiency with the following competencies	With Distinction		Very Well		Well		Adequately		Poorly	
	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %
MPH 001- Collect, manage and organize data to produce information and meaning that is exchanged by use of signs and symbols.	23	60	58	40	19	0	0	0	0	0
MPH 002- Gather, process, and present information to different audiences in---person, through information technologies, or through media channels.	31	40	58	60	12	0	0	0	0	0
MPH 003- Strategically design the information and knowledge exchange process to achieve specific objectives.	27	40	54	60	19	0	0	0	0	0
MPH 004- Interact with both diverse individuals and communities to produce or impact an intended public health outcome.	35	20	46	80	12	0	8	0	0	0
MPH 005- Create and communicate a shared vision for a changing future.	15	20	54	80	31	0	0	0	0	0
MPH 006- Champion solutions to organizational and community challenges.	12	40	54	60	31	0	4	0	0	0
MPH 007- Energize commitment to goals.	15	20	46	80	31	0	8	0	0	0
MPH 008- Demonstrate ethical choices, values and professional practices implicit in public health decisions.	38	60	46	40	15	0	0	0	0	0
MPH 009- Consider the effect of choices on community stewardship, equity, social justice and accountability.	31	80	50	20	19	0	0	0	0	0
MPH 010- Commit to personal and institutional development.	31	80	65	20	4	0	0	0	0	0
MPH 011- Plan for the design, development, implementation, and evaluation of strategies to improve individual and community health.	12	60	54	40	27	0	8	0	0	0
MPH 012- Understand the biological and molecular context of public health (public health biology).	15	40	50	40	19	20	12	0	4	0
MPH 013- Recognize system level properties that result from dynamic interactions among human and social systems and how they affect the relationships among individuals, groups, organizations, communities, and environments.	4	80	65	20	23	0	8	0	0	0

Few students have graduated since we began implementation of the CEPH required foundational competencies. These data were collected during the spring and fall of 2017, and include both MPH graduates (N = 8) and PhD graduates (N = 3). In general, MPH students rated themselves as "very well" or "well." One PhD student assessed himself as knowing the competencies "very well", while the other two students rated themselves with varying degrees of competency attainment.

Table B4.1b New MPH Competency Student Self-Assessment

Percentage of students who identified their level of proficiency with the following competencies	Very Well		Well		Adequately		Poorly		Very Poorly	
	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %	MPH %	PhD %
MPH 01- Apply epidemiological methods to the breadth of settings and situations in public health practice	25	67	50	0	25	33	0	0	0	0
MPH 02- Select quantitative and qualitative data collection methods appropriate for a given public health context	50	33	38	67	13	0	0	0	0	0
MPH 03- Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	25	33	13	67	63	0	0	0	0	0
MPH 04- Interpret results of data analysis for public health research, policy or practice	38	100	63	0	0	0	0	0	0	0
MPH 05- Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	13	67	63	0	13	0	13	33	0	0
MPH 06- Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	38	33	38	33	25	33	0	0	0	0
MPH 07- Assess population needs, assets and capacities that affect communities' health	50	33	50	33	0	33	0	0	0	0
MPH 08- Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	25	33	75	0	0	67	0	0	0	0
MPH 09- Design a population-based policy, program, project or intervention	50	33	25	33	13	33	13	0	0	0
MPH 10- Explain basic principles and tools of budget and resource management	25	33	38	33	50	33	0	0	0	0
MPH 11- Select methods to evaluate public health programs	25	33	38	0	25	67	13	0	0	0
MPH 12- Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	25	33	50	33	25	33	13	0	0	0
MPH 13- Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	25	33	50	33	13	0	13	33	0	0
MPH 14- Advocate for political, social or economic policies and programs that will improve health in diverse populations	25	33	63	33	25	0	0	33	0	0
MPH 15- Evaluate policies for their impact on public health and health equity	25	33	50	0	13	67	0	0	0	0
MPH 16- Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	13	33	13	33	38	33	0	0	0	0
MPH 17- Apply negotiation and mediation skills to address organizational or community challenges	25	33	38	0	63	50	0	0	0	0
MPH 18- Select communication strategies for different audiences and sectors	38	33	25	0	13	67	13	0	0	0
MPH 19- Communicate audience-appropriate public health content, both in writing and through oral presentation	63	67	25	33	13	0	0	0	0	0
MPH 20- Describe the importance of cultural competence in communicating public health content	50	33	38	33	13	33	0	0	0	0
MPH 21- Perform effectively on interprofessional teams	50	67	38	33	13	0	0	0	0	0
MPH 22- Apply systems thinking tools to a public health issue	38	33	38	67	13	0	13	0	0	0

While we do not currently ask alumni if they are applying their competencies in their place of employment, the SCHS annual alumni survey requests that alumni rate how their degree helped them in finding new employment or progressing at their current employment indicating the impact their education and competencies had on post-graduation employment. Response rates for the 2018 alumni survey varied greatly between undergraduate and graduate programs with 7% and 28% respectively. The assessment ws done a 1-to-10 scale, with 10 being the highest ranking. Students rated the usefulness of their degree in improving their employment, with average scores ranging from 4.7 in the undergraduate Health Care Administration and Policy program to 10 in the PhD program.

Table B4.1c Self-Assessment of Degree Aiding Employment Endeavors					
	Degree Programs				
Annual Alumni Survey Spring 2018 Mean Scores	**BSPH**	**MPH**	**PhD**	**HCAP**	**MHA**
Was your degree instrumental in helping find a position in a new organization? Q20	7.3	6.4	8.8	4.9	6.2
Was your degree instrumental in helping you to get a better position within your current organization? Q21	7.7	6.4	7.7	4.3	7.1

B4.2 Methodology and Findings

Required documentation: Provide full documentation of the methodology and findings from alumni data collection. (electronic resource file)

See Electronic Resource file.

B4.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths:

- Multiple tools have been created to assess alumni perception of curricular effectiveness.
- Exit surveys and other advising documents and forms are now easily accessible to faculty on a Team Google Drive that contains a folder for each degree program with the most current version of each document.
- A binder has been created with a table of contents, and includes all SCHS forms and policies as well as an online version; this is accessible in the administrative office for the School.
- Pertaining to the alumni survey data, the university is working towards offering lifelong email addresses for students, which will keep students connected, and this may increase our response rate. Currently the emails are discontinued one-year post graduation.

Weaknesses:

- Faculty must provide the students that they are advising with the Exit Survey, and make sure that he or she is bringing the completed survey to the defense. These forms have been made more accessible to faculty and completion is now tracked by administrative assistants.
- We have historically received a low response rate on Alumni Surveys. We attempted to acquire higher response rates by offering a free t-shirt to respondents, but this did not increase the rate. More of an emphasis has been placed on creating an engaged alumni community through the formation of the Alumni Association, the Delta Omega honor society, and various community events, which likely will improve the response rate.
- There are limited data on the undergraduate placement rates. We are working to form strategies to improve this tracking. Plans include university email continuing past graduation, encouraging graduating seniors to participate in an online employment network such as LinkedIn, and promoting the alumni association.

B5. Defining Evaluation Practices (SPH and PHP)

The school or program defines appropriate evaluation methods and measures that allow the school or program to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic, and well-documented. The chosen evaluation methods and measures must track the school or program's progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

B5.1 Evaluation Plan

Required Documentation: Present an evaluation plan that, at a minimum, lists the school or program's evaluation measures, methods and parties responsible for review. See Template B2-1. (self-study document)

Table B5.1 Evaluation Plan

Evaluation Measures	Data Collection Method for Measure	Responsibility for Review
Instructional Objectives: Develop student knowledge and skills through innovative education, experiences, and opportunities while developing the instructional efficacy of faculty delivering public health curricula.		
Student perception of instructional efficacy and relevance of materials.	Course Evaluations completed for each course each semester.	Dean's Office, Administrative Assistants
Student perception of competency attainment.	Exit Surveys completed at the end of students' programs.	Dean's Office
Student experience working in their field as an intern.	Internship Surveys completed at the end of the internship to measure student experience.	Internship Coordinators
Alumni perceptions of the program and curriculum.	Alumni Surveys administered each spring.	Dean's Office
Faculty participation in professional development that supports innovative instruction and pedagogy.	Faculty Annual Evaluation	Department Chairs
Faculty assessment of student competency attainment.	Faculty Assessment of Student Competency Attainment	Faculty
Preceptor perception of student preparedness for the workforce.	Preceptor Surveys that measure student ability to apply skills and competencies.	Internship Coordinators
Research and Scholarship Objectives: Provide collaborative research opportunities for students and faculty while increasing impactful, extramurally funded research.		
Student participation in research opportunities including publications and presentations.	Graduate College Annual Review of graduate students/ Pre-GA Program for BSPH Seniors/ Biennial Assessment Summit	Dean's Office Graduate Coordinators PH Undergraduate Coordinator
Faculty engagement in research designed to further the field of public health practice and policy.	Faculty Annual Evaluation	Department Chairs
Faculty will actively search out grants to support their research activities.	Faculty Annual Evaluation/ Grant Funding	Dean, Department Chairs
Scholarship (Presentations and Publications)	Digital Measures Report submitted by faculty each spring.	Faculty, Dean
Develop sustainable community and professional partnerships.	Annual Assessment Reports presented at the Annual Assessment Meeting.	Dean, Directors of Development and Community Partnerships

Table B5.1 continued		
Service Objectives: Provide students and faculty with service opportunities that promote active participation in the community while building professional and community partnerships.		
Promote and support active participation in service/volunteerism.	Faculty Annual Reports/ Faculty Workload Reports/ Student Clubs Annual Reports	Department Chairs Faculty Advisors
Number of students participating in the student and alumni clubs.	Annual Assessment Reports presented at the Annual Assessment Meeting.	Student Club Officers Alumni Association Officers
Develop service-learning opportunities in SCHS programs.	Annual Assessment Reports presented at the Annual Assessment Meeting.	Executive Director of Community Partnerships

B5.2 Tracking the Schools Progress

Required Documentation: Briefly describe how the chosen evaluation methods and measures track the school or program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success. (self-study document)

The SCHS's priorities include promoting student learning and success, innovative research, scholarship, and creative activity as well as community engagement and fostering a diverse campus population. Our priorities include leadership in public health education, a strong foundation for research, policy, and practice, collaborative relationships, and multilevel accountability. The SCHS purpose statements specifically aim for excellence in academics, which provides the foundation necessary for students to become valuable members of the public health community. This is the promotion of student learning and success. The SCHS has addressed the need for quality research and scholarship as part of the strategic plan. The plan includes state of the art facilities, specialty centers and laboratories, and innovation in research, which further the field of public health. Lastly, the SCHS fosters a community that is diverse and engaged through collaborations outside the SCHS, internships, and coursework.

The SCHS uses an ongoing iterative assessment model based on the SCHS Strategic Plan that ensures continual growth and development. This includes an Accreditation Committee, which is tasked with ensuring annual data collection as well as implementation of meaningful, data-driven changes identified by the process. The assessment methods vary but put together they reflect the mission and purpose of the SCHS. Please see the electronic resource file for a list of these measures, when they are collected and by whom.

All of the assessment data are presented at the SCHS Annual Assessment Meeting each spring. Responsible parties present the data and any recommendations that stem from the data. Biennially, an Assessment Summit is held where these results are conveyed to stakeholders. Additional data are collected at the Assessment Summit. All of these data are combined into action items and are addressed at the Accreditation Committee weekly meetings.

The data acquired during the annual assessment meeting, the Summit and other tools mentioned above are compiled and prioritized. These areas become the focal areas for improvement and are implemented during the weekly assessment meeting. Minutes are kept tracking our progress towards improvement, and the successes are reported to the faculty, staff, students and community partners through regular meetings and executive summaries from assessment events.

<u>Promoting Student Success and Advancing the Field of Public Health</u>
The SCHS three year Strategic Plan includes several objectives that are aimed at promoting student success and advancing the field of public health. Within Leadership in Public Health and Health Care Management and Policy Education, three objectives are crucial to student success. Objective one focuses on assessment of student learning through monitoring of student success, needs, and teaching practices. Examples of this include course evaluations to monitor teaching practices, exit surveys to monitor student attainment of competencies and overall experience, and alumni surveys to monitor student achievement post-graduation. Internship surveys and preceptor surveys are used to monitor student practical experiences and to prepare the student for working in the field of public health. The internship program gives public health leaders an opportunity to shape the next generation of public health employees, which

is advancing the field of public health.

The second objective focuses assessment on student retention and progression. Assessments examine student progress through separation and probation reports, required Graduate College Forms, graduation rates, and exit surveys.

The third objective uses workload reports and faculty evaluations to monitor the skilled and diverse faculty within the SCHS that have specialized knowledge in the five core areas of public health. By promoting faculty development, research, and service, the SCHS promotes advancement in the field. We conduct an annual review for productivity to compare with the workload policy in order to reassign workload (# of courses taught) if required. This is completed annually by the Department Chairs concurrent with the annual review. Faculty with good support systems in place such as those at the SCHS are more productive and spend more time actively pursuing cutting-edge research and service opportunities.

Strong Foundation for Research, Policy, and Practice is the second strategy employed in the strategic plan. This strategy promotes impactful extramurally funded research and scholarship and is assessed through faculty annual reports. This strategy also promotes public health research opportunities for graduate students and junior faculty, thus furthering the field. Assessments for these strategies include improved data partnerships and internship sites, working with stakeholders at the Assessment Summit or the Advisory Board, and scholarship including student presentations and publications.

The third strategy that affects student success is Collaborative Relationships. This area focuses on working with others to broaden students' experiences and is measured through faculty reports of level of engagement with the community, the university, and the SCHS as well as the development of student clubs, which directly engages students in leadership and community service. Other components include the development of dual degree programs and development of donor relationships, which provide graduate assistantships and scholarships. Working collaboratively extends the boundaries of the public health field and allows for growth opportunities for researchers regardless of whether they are a student or faculty.

The last strategy focuses on Multilevel Accountability including assessment and accreditation. Goals within this area that promote student success are gaining acceptance by the appropriate accrediting bodies and creating a diverse faculty that are engaged in all levels of the university. Becoming an accredited program or school provides faculty and students with a level of prestige that tells others that they are working at a higher level that demonstrated accountability in all areas. Working with accrediting bodies furthers the field of public health by presenting to the world a more organized and accountable education.

B5.3 Evidence of Implementation

Required Documentation: Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success. (electronic resource file)

See Electronic Resource File.

B5.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Assessments are carried out in an iterative cycle that continually evaluates programs, student success, workforce needs, and faculty growth.
- The strategic plan is a three-year plan and most of the proposed goals have been accomplished and even exceeded.

Weaknesses

- None.

B6. Use of Evaluation Data (SPH and PHP)

The school or program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings. The school or program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

B6.1 Programmatic Changes based on Evaluation Results

Required Documentation: Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself. (self-study document)

Through the iterative assessment cycle, action items are identified and addressed. For example, better academic advising was mentioned in student exit surveys at the Annual Assessment Meeting as well as at the biennial Assessment Summit in 2016. While the exit surveys were all from students, the Assessment Summit data were from all SCHS stakeholders. This was identified as an action item at the Annual Assessment Meeting and by the Accreditation Committee, the data were examined from all sources, and the accreditation committee acted on that information to refine advising. In addition to the guidance provided by the Graduate Coordinators, students are now assigned a temporary faculty advisor upon admittance to their program and an advising plan is established and tracked on a regular basis as part of their permanent file. Students are encouraged to identify a permanent advisory committee chair by the time they have completed their core classes. New relationships were also formed with the undergraduate advising center. Undergraduate advisors now collaborate with SCHS committees in order to keep the flow of information consistent.

The SCHS internship program allows students to gain real world experience in the field. Assessments of student learning in this area correlated with data received through other assessments completed by faculty, preceptors, students, and alumni, which indicated that the program was not meeting its potential. These data emerged from alumni surveys, preceptor surveys, internship self-assessments, and the 2016 Assessment Summit. Students were unable to finish the internship on time and were not gaining the sufficient experience required for the job market after graduation. Based on these factors, the program was reevaluated and improved upon by lengthening the internship to be more in line with other institutions, and developing a system of variable credit enrollment to complete the internship over a period of XX semesters. In addition, a system was developed for better matching between students and internships, fostering community partnerships that will provide paid internships, and more frequent communication between internship coordinators and preceptors during their internship.

Another change that was made to address evaluation results is that of offering classes on a regular and published schedule. This request was made through alumni surveys, exit surveys, and Summit data. This was identified as an action item and addressed through the Accreditation Committee. Each department was assigned the creation of a three-year course rotation, which was published for students to use in planning their academic careers.

B6.2 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The iterative assessment cycle used in the SCHS facilitates continual progress and monitoring of student needs and success. The process involves all SCHS stakeholders including students, alumni, faculty, staff, community partners, and advisory boards. The process requires constant attention, which provides a climate of regular evaluation and assessment. This climate keeps all parties involved and in the loop.

Weaknesses

- Alumni surveys contain important information but have a low response rate. We are trying to increase this rate by engaging students more through student clubs, alumni association, and the Delta Omega Honor Society, as well as using more current email addresses, and other communication strategies.

Criterion C

C1. Fiscal Resources (SPH and PHP)

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

C1.1 Budget Processes

Required Documentation: Describe the school or program's budget processes, including all sources of funding. This description addresses the following, as applicable:

a. Faculty Salaries

Briefly describe how the school or program pays for faculty salaries. For example, are faculty salaries fully guaranteed, or are faculty expected to raise funds to support salaries? If this varies by individual or appointment type, indicate this and provide examples. For programs, if faculty salaries are paid by an entity other than the program (such as a department or college), explain.

Faculty salaries for tenured faculty, tenure track faculty, and Faculty-In-Residence (FIR) positions are funded through the State of Nevada and are fully guaranteed. The School does have one faculty member, Dr. Qing Wu, who is a joint hire between the School and the Nevada Institute for Personalized Medicine (NIPM), who is required to bring in 49% of his salary by his third year of employment.

b. Additional Faculty or Staff

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

Additional faculty positions are requested through a formal process initiated by the Provost's Office. The Nevada legislature currently meets every other year; accordingly two year budgets are prepared and submitted but can be reviewed and revised annually. Each department/unit/center in the school was involved in an integrated process that helped them identify the greatest needs for their respective areas; these requests were then combined into one document and prioritized during an executive committee meeting. During the most current fiscal year, the Provost placed an emphasis on two key areas: 1) interdisciplinary research efforts and 2) recruitment, retention and completion of students.

A second avenue for the addition of new faculty positions is to demonstrate significant growth in the number of students enrolled in our degree programs, or increases in the number of course sections needed to meet the student demand. This has been a successful strategy as we have seen significant growth in our undergraduate programs over the last few years that allowed us to add new faculty members to meet critical needs. Specifically, information regarding the program experiencing growth is compiled and presented directly to the Provost's office. This includes data such as new student enrollment, number of graduates, demand for classes, wait lists, or data from advising on availability of classes. Typically, these requests are only a page or two in length and highlight key information that demonstrates need, and are accompanied by a request for either a tenure track faculty position, or a faculty in residence position. These requests can be submitted at any time by the Dean and are not restricted to the annual budget request. The Provost, along with other departments such as online education and the Vice Provost for Academic Resources and Finance review these requests and try to identify funds to support new positions. It should be noted that this is not a formal process with an established deadline, but rather another opportunity to increase the number of faculty based on increased productivity and growth. Accordingly, these requests are submitted when need is identified. The following steps are generally followed:

1. Identify need for faculty as evidenced by demand for course sections, number of new students enrolled in program or identify a bottleneck to student progression and/or completion.
2. Draft a letter (or memorandum) summarizing the data, and making a request for a

faculty member that will address this need, highlighting when the position is requested and the type of person needed. These are often FIR requests if they are meeting a teaching need.
3. Submit the request to the Provost, online education, or Vice Provost for Faculty Resources as appropriate.
4. Address any additional concerns or questions they might have 5) acquire new position.
5. Acquire new position.

A third avenue for the addition of new faculty/staff positions is for the School to fund them, initially, through indirect cost revenue dollars and then convert those positions to state funding with the approval of the Provost's office.

c. Funding of Operational Costs, Student Support, and Faculty Development

Describe how the school or program funds the following:

a. operational costs (schools and programs define "operational" in their own contexts; definition must be included in response)
b. student support, including scholarships, support for student conference travel, support for student activities, etc.
c. faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples

a. Each Department in the School is provided with an annual operating budget that is allocated to them from the state. Operating costs include, but are not restricted to, items such as telephone charges, photocopies, conference registrations, travel, faculty development, grant writing services, professional fees, office supplies, computers, and other technology. These state funds alone are not sufficient to fund all the travel, conferences, faculty development and grant writing requests that are received from the faculty, and are supplemented with indirect cost return dollars, summer school revenue or other sources when appropriate. In addition, faculty may choose to use their start-up funds to pay for some of these items.

b. Student support for scholarships, travel and other professional activities are generated through multiple sources including state funds, indirect cost revenue, summer teaching revenue, philanthropic efforts, the office of undergraduate research, the graduate college, grants, and faculty start-up funds. These decisions are made on a case-by-case basis in collaboration with the student's advisor and department chair.

c. Faculty development, travel and related expenses are typically submitted to the department chairs for approval; the Chairs may allocate funds from the state, indirect costs revenue, summer teaching return and start-up funds as they see appropriate.

d. Requests/Obtaining Funds for Operational Costs, Student Support, and Faculty Development

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

Requests to increase operational budgets, done every two years, are submitted to the Provost's office to be included in the University's overall budget to the Nevada legislature. Since operational funds are allocated through the state budget, these requests are made through the regular budgeting process. Each year, the department chairs, Executive Committee and our centers and institutes meet and discuss prioritized needs for their respective units. Any of these individuals can request an increase to the operating budget, but all requests for the school are submitted on one ranked and prioritized budget to the Provost's office. The proposed budget increases submitted during the last cycle were prioritized in an executive committee meeting. This request did include increases to departmental operating budgets, but not all parts of the budget are funded and the Provost's office does not always fund our top priorities. Therefore, the School supplements these requests through funding generated by indirect cost revenue and summer teaching revenue. The faculty may also use their start-up funding to support their own and their student's development. Any faculty/staff member can submit a request for increased funding; however, these are routed through their respective units, discussed at the department, school or center level as appropriate and prioritized by either the Department Chairs, Executive Committee or Dean. Final submissions for increased

funds from the State of Nevada are submitted by the Dean's office.

e. Tuition and Fees Paid by Students

Required Documentation: Explain how tuition and fees paid by students are returned to the school or program. If the school or program receives a share rather than the full amount, explain, in general terms, how the share returned is determined. If the school or program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

The amount of funding that comes back to UNLV (and all other institutions), as we are part of the overall NSHE system, is allocated through a complex formula funding equation. A summary of this formula can be found at https://nshe.nevada.edu/wpcontent/uploads/file/Initiatives/fundingformula/Funding%20Formula%20Summary_2017%20Leg%20Approved_1-9-18.pdf. The university then allocates those funds to individual colleges/schools as they see fit. In short, the tuition generated by our students is not returned to the School directly– but rather is returned to a combined University pool. Each unit then requests new positions or increases in funding following the process previously described. There is not an opportunity to have input on the overall distribution of funds throughout the NSHE system, but the new distribution model included extensive input during the developmental stages, a brief history of this process can be found at https://nshe.nevada.edu/initiatives/formula-funding-study/.

There is one exception to this rule, the creation of degree programs that are self- sustaining. These degree programs operate on a revenue based or differential fee model. Starting in FY17, our School created an online degree program (the Executive Master's in Health Care Administration); that is revenue based and contains a differential fee. The differential fee revenue is split as follows: 85% is returned to the EMHA program and 15% is returned to the Financial Aid office to provide scholarships to EMHA students. The registration fee revenue is split as follows: 70% is returned to the EMHA program and 30% is returned to the University. The EMHA program keeps 100% of the revenue generated by the program fees. All revenue generated by this program must be used to support the EMHA degree program. Currently these funds are used to provide instruction, immersion sessions, speaker honoraria, technology or for other purposes directly related to student achievement.

All state funding must be expended before June 30 annually, thus there is not excess revenue or carry over funds allowed on any state accounts. Revenue generated from indirect costs from grants and contracts do not have similar restrictions and may be carried to the next fiscal year. Excess funds in those categories are used to supplement operating budgets for the departments, are the source of faculty development and travel awards, and are used to pay for grant-funded personnel who are between grants (bridge funding).

f. Indirect Costs Associated with Grants and Contracts

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

The University has a policy for the split of the indirect cost revenue – the Schools/Colleges receive 40% and the Office of the Vice President for Research (VPR) receives 60%. Of the allocation received by the School (40%), that revenue is then split internally in three equal parts between the School, Department and Principal Investigator (33%, 33% and 34% respectively).

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

Not applicable.

C1.2 Budget Statement

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

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

Table C1.2 Sources of Funds and Expenditures by Major Category, 2013 to 2018

	Year 1 FY14 (2013-2014) ($)	Year 2 FY15 (2014-2015) ($)	Year 3 FY16 (2015-2016) ($)	Year 4 FY17 (2016-2017) ($)	Year 5 FY18 (2017-2018)* ($)
Source of Funds					
Tuition & Fees				61,606	105,852
State Appropriation	2,270,787	2,860,077	3,585,149	4,199,127	5,317,627
University Funds	40,000	520,724	824,000	190,000	27,000
Grants/Contracts	5,108,476	9,681,529	5,152,034	6,612,827	2,088,543
Indirect Cost Recovery	279,013	267,973	313,001	361,767	157,297
Endowment	0	100,000	0	30,000	175,000
Gifts	10,623	48,521	23,705	86,117	48,838
Other (CHIA's data sales revenue)**	83,000	130,250	85,456	95,425	28,175
Other (Summer Term Distribution)	71,900	54,628	64,485	97,174	
Other (Course Development Incentives)	15,500			12,000	12,000
Total	7,879,300	13,663,702	10,047,829	11,746,042	7,960,332
Expenditures					
Faculty Salaries & Benefits	2,643,533	2,614,741	3,052,466	3,693,446	3,855,025
Staff Salaries & Benefits	1,815,314	2,335,368	3,037,802	3,215,258	2,112,777
Operations	840,018	606,965	566,991	626,400	197,485
Travel	111,638	113,316	173,117	217,245	48,064
Student Support	365,746	313,825	263,650	292,582	70,433
University Tax	12,833	14,125	14,338	16,630	0
Other (hosting)	33,179	50,557	32,868	33,716	10,608
Other (subcontracts)	107,143	194,360	258,591	760,529	309,212
Other (participant support)	101,974	85,789	59,410	56,438	80,243
Other (equipment)	34,326	22,964	26,612	0	0
Total	6,065,704	6,352,011	7,485,845	8,912,243	6,683,848

**Data up to September 30, 2017.*

***CHIA sales data- CHIA charges a fee for special data requests that require additional staff time and effort to complete, analyze, and present.*

For example, CHIA releases three data set types: 1) Inpatient (IP), 2) Emergency Department (ED), and 3) Ambulatory, which includes Ambulatory Surgical Center (AS) and Hospital Outpatient Surgery (OS) and Other (TH) hospital outpatient such as observation, lab, radiology, etc. Each set is $600 per quarter and $2400 per year.

C1.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The School has a vibrant and active research portfolio that generates indirect cost revenue that can be used to support and advance the mission and vision of the School. We also have researchers who buy out portions of their time, allowing us to reallocate funds (although much more restricted) to prioritized initiatives. We are well supported by the upper administration and they are responsive to our annual faculty requests.

Weaknesses

- The annual operating budgets for the departments are very small and have not increased in proportion to the number of faculty in the units. Indirect cost return dollars are used to supplement almost all areas in the School that are underfunded, although this is working for now we need to manage these funds carefully and cautiously.

C2. Faculty Resources (SPH and PHP)

The school or program has adequate faculty, including primary instructional faculty and non- primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy. Primary instructional faculty, as defined in these criteria, provide the basis for initial levels of review of the adequacy of a school or program's resources. This criterion employs a three-step review (outlined in C2-A through C2-C) in assessing adequacy of faculty resources.

Definitions

SPH only: Primary instructional faculty must meet BOTH requirements outlined below:

Employed full-time as faculty members appointed in the school (ie, 1.0 FTE in the unit of accreditation). The school uses the university's definition of "full-time." Individuals appointed in the school with honorary appointments in other disciplines or occasional teaching/advising duties outside the school may count as primary instructional faculty members in some circumstances, but the primary expectation of the individual's employment must be activities associated with the school.

Have regular responsibility for instruction in the school's public health degree programs as a component of employment. Individuals whose sole instructional responsibility is advising individual doctoral or research students do not meet CEPH's definition of primary instructional faculty, nor do faculty whose regular instructional responsibilities lie with non-public health degrees within the school, if applicable.

C2-A. Minimum faculty requirement by accreditation unit (SPH and PHP)

Schools employ, at a minimum, 21 primary instructional faculty. Programs employ, at a minimum, three primary instructional faculty.

C2-B. Minimum faculty requirement by range of offerings (SPH and PHP)

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

To provide this basic breadth and range and to assure quality, schools and programs employ, at a minimum, three faculty members per concentration area for the first-degree level offered.

Each additional degree level in a concentration requires the addition of one faculty member. Thus, a concentration area that solely offers master's degrees requires three faculty members. A concentration offering bachelor's and master's degrees OR master's and doctoral degrees requires four faculty members. A concentration with bachelor's, master's and doctoral-level degrees requires a minimum of five faculty members.

Additional definitions and specifications for these faculty requirements differ between schools and programs, due to the differing appointment and resource structures in these organizational units. Definitions and specifications are as follows:

SPH

The three faculty per concentration for the first-degree level include the following:

Two primary instructional faculty members: These individuals may count among the two faculty (or additional faculty required for adding a degree level) in no more than one additional concentration. One additional faculty member of any type (faculty from another university unit, adjunct faculty, part-time faculty or primary instructional faculty associated with another concentration area). The additional faculty member required for adding a degree level in a concentration area must be a primary instructional faculty member. All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

SPH & PHP

All identified faculty must be qualified to provide instruction in the concentration area, as defined in Criterion E1. Criterion E assesses an individual's qualifications vis-à-vis his or her association with a concentration, degree level, and type of degree (e.g., professional or academic). In multi-partner schools and programs (i.e., institutions responding to Criterion A2), faculty may be drawn from any of the participating institutions to demonstrate compliance with this aspect of the criteria.

C2-C. Faculty resource adequacy, beyond minimum eligibility (SPH and PHP)

In addition to meeting the minimum quantitative standards above, the size of the school or program's faculty complement is appropriate for the size of the student body and supports and encourages effective, regular and substantive student-faculty interactions.

The school or program documents the adequacy of the faculty complement through multiple quantitative and qualitative measures, including the following: advising ratios; availability of faculty to supervise MPH integrative learning experiences and doctoral students' final projects; and data on student perceptions of class size and faculty availability.

C2.1 Adequacy of Faculty Resources

*Required Documentation: A table demonstrating the adequacy of the school or program's instructional faculty resources in the format of Template C2-1. (Note: C2-1 has different formats for schools vs. programs.) The school or program need not list all faculty but must list sufficient faculty to demonstrate compliance with C2-B and C2-C. For example, if the school or program exceeds the number of faculty needed to document compliance (as defined in these criteria), the school or program may note the number of faculty available in addition to those identified by name in Template C2-1. The data reflect the most current academic year at the time of the **final** self-study's submission and should be updated at the beginning of the site visit if any changes have occurred since self-study submission. (self-study document)*

Table C2.1 Adequacy of Faculty Resources

	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	THIRD DEGREE LEVEL	
CONCENTRATION	**PIF 1**	**PIF 2**	**FACULTY 3**	**PIF 4**	**PIF5**	**ADDITIONAL FACULTY**
Environmental and Occupational Health						
MPH PhD BSPH	**Buttner (1.0)**	**Cruz (1.0)**	**Chen (1.0)**	**Labus (1.0)**	**Pharr (1.0)**	PIF: 3 Non-PIF: 14
Epidemiology and Biostatistics						
MPH PhD	**Moonie (1.0)**	**Bungum (1.0)**	**Lin (1.0)**	**Chien (1.0)**		PIF: 3 Non-PIF: 1
Social and Behavioral Health						
MPH PhD	**Thompson-Robinson (1.0)**	**Dodge-Francis (1.0)**	**Morgan (1.0)**	**Regin (1.0)**		PIF: 0 Non-PIF: 1
Health Care Administration and Policy						
MPH, MHA, EMHA HCAP PhD	**Bhandari (1.0)**	**Epané (1.0)**	**Sotero (1.0)**	**Burston (1.0)**	**Shen (1.0)**	PIF: 1 Non-PIF: 8

TOTALS:		
	Named PIF	18
	Total PIF	25
	Non-PIF	24

C2.2 Calculating FTE

Required Documentation: Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method's implementation. For schools only, all primary instructional faculty, by definition, are allocated 1.0 FTE. Schools must explain the method for calculating FTE for any non-primary instructional faculty presented in C2-1. Programs must present calculation methods for primary instructional and non-primary instructional faculty. (self-study document)

The term "full-time" means an appointment at 1.0 FTE for the contract year. *Full-time instructional faculty are* faculty employed on a full-time basis for instruction (including those with released time for research). Contract status refers to the number of months an employee works per year: "A" Contracts = 12 month appointments & "B" Contracts = 9 month appointments. FTE = Full-Time Equivalent value of the appointment. The stated values for salary increases for academic faculty (with tenure or rank) who have 12-month administrative appointments, the values stated for salary adjustments represent 9-month, B base adjustments. The annualized full-time-equivalent 12-month base salary is then calculated as 1.2 x the 9-month base salary, as provided in Board of Regents' policy.

C2.3 Narrative of Data

Required Documentation: If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates. (self-study document)

There are sufficient faculty in each area of study in the SCHS with no overlapping of faculty.

C2.4 Student and Advising Data

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

a. *Advising ratios (faculty and, if applicable, staff) by degree level (bachelor's, master's, doctoral), as well as the maximum and minimum. If both faculty and staff advise, present and calculate both ratios*
b. *If applicable, average number of baccalaureate students supervised in a cumulative or experiential activity*
c. *Average number of MPH students supervised in an integrative learning experience (as defined in Criterion D7), as well as the maximum and minimum*
d. *Average number of DrPH students advised, as well as the maximum and minimum*
e. *Average number of PhD students advised, as well as the maximum and minimum*
f. *Average number of academic public health master's students advised, as well as the maximum and minimum*

As noted in Template C2-2's instructions, schools should only present data on public health degrees and concentrations. If primary instructional faculty, non-primary instructional faculty, and/or staff are all regularly involved in these activities, indicate this and present data separately for each group, as applicable. Though the self-study requires only the most recent year, the school or program may wish to present additional years of data for context. For example, if the most recent year's results are anomalous, additional data may be helpful.

Table C2.4a Primary Instructional Faculty Advising			
General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Bachelor's	6.36	1	15
Master's	5.0	1	15
Doctoral	2.14	1	5

Advising in MPH integrative experience		
Average	**Min**	**Max**
2.4	1	6

Supervision/Advising of bachelor's cumulative/experiential activity		
Average	**Min**	**Max**
3	1	11

Mentoring/primary advising on thesis, dissertation or DrPH integrative project			
Degree	**Average**	**Min**	**Max**
PhD	1.5	1	2
MHA/EMHA	2.1	1	5

Table C2.4b Non-Primary Instructional Faculty Advising			
General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Bachelor's	8	3	12
Master's	7.75	1	15
Doctoral	2.33	1	4

Advising in MPH integrative experience		
Average	**Min**	**Max**
3	3	3

Supervision/Advising of bachelor's cumulative or experiential activity		
Average	**Min**	**Max**
1	1	1

Mentoring/primary advising on thesis, dissertation or DrPH integrative project			
Degree	**Average**	**Min**	**Max**
PhD	1.5	1	2
MHA/EMHA	2	2	2

Note that some advising does occur that is not within the public health degrees. For example, McNair advising, which is specific to students on the McNair Scholarship, is not degree specific. One primary instructional faculty member advised a McNair scholar from May through mid-October. In addition, advising occurs for Honors college students who complete a senior thesis. Two primary instructional faculty members have advised a Public Health Honor's College student on her Senior Thesis, one as chair and one as a committee member.

C2.5 Quantitative Data on Student Perceptions

Required Documentation Quantitative data on student perceptions of the following for the most recent year:

Class Size and its Relation to Quality of Learning (e.g.,, the class size was conducive to my learning)

Availability of Faculty (ie, Likert scale of 1-5, with 5 as very satisfied)

Present data by degree level (bachelor's, master's, doctoral), at a minimum. If the school or program wishes to collect and present data by degree (MPH, MS, PhD, DrPH, etc.), degree data may be presented. Schools should only present data on public health degrees and concentrations. Though the self-study requires only the most recent year, the school or program may wish to present additional years of data for context. For example, if the most recent year's results are anomalous, additional data may be helpful.

Class Size and its Relation to Quality of Learning

Alumni surveys collected in early 2017 asked students to rate their class sizes during their program on a four-point scale where one is very dissatisfied and four is very satisfied. MPH students were largely satisfied (35%) or very satisfied (58%), but a few rated this as very dissatisfied (5%) or dissatisfied (3%). Doctoral students reported that they were very satisfied with class sizes.

In summer 2017, a new course evaluation was piloted in three undergraduate public health sections (PBH 165). Students reported that they strongly agreed (43%), agreed (43%), or neither agreed nor disagreed (14%) with class size being conducive to learning. This was a small sample (n=11) originally intended for piloting purposes, but this item was implemented in the fall 2017 course evaluations. Fall 2017 undergraduates reported that they strongly agreed (45%), agreed (32%), neither agreed nor disagreed (12%), disagreed (1%) or strongly disagreed (4%) with class size being conducive to learning (n=825). Fall 2017 graduate students reported that they strongly agreed (52%), agreed (28%), neither agreed nor disagreed (8%), disagreed (1%) or strongly disagreed (1%) with class size being conducive to learning (n=280). These data indicate that overall, our students believe that the class sizes are appropriate for learning at both the undergraduate and graduate level.

The Graduating Senior Exit Survey (GSES) conducted by the office of the Vice Provost for Undergraduate Education asks students to rate their satisfaction with their class sizes on a four-point scale where one is strongly disagree and four is strongly agree. Response rates for this survey are approximately 40%. The SCHS specific results indicate that students agree or strongly agree with class size satisfaction more than university level results.

Table C2.5 GSES Quality of Class Size Survey Results (four point scale)

	All Graduating Seniors			SCHS Graduating Seniors		
Academic Year	**2014 - 15**	**2015 - 16**	**2016 - 17**	**2014 - 15**	**2015 - 16**	**2016 - 17**
Quality of class size	3.21	3.22	3.20	3.52	3.50	3.20

Availability of Faculty

Alumni surveys collected in early 2017 asked students to rate their satisfaction with faculty availability during their program on a four-point scale where one is very dissatisfied and four is very satisfied. MPH students were largely very satisfied (78%) or satisfied (15%), but a few rated this as very dissatisfied (5%) or dissatisfied (3%). Doctoral students reported that they were satisfied (25%) or very satisfied (75%) with

faculty availability. Undergraduate students reported that they were satisfied (40%) or very satisfied (60%) with faculty availability.

New course evaluations were piloted in summer of 2017 and officially implemented in the fall of 2017. Students were asked to rate their satisfaction with the following statement: The instructor was available during posted office hours and by appointment when I needed assistance. On a five-point scale, students rated faculty availability at 4.3/5 for undergraduate classes (n=726) and 4.4 for graduate classes (n=256).

Exit surveys from 2016 asked students to rate their advisor's performance in the area of availability on a four-point scale where one is very dissatisfied and four is very satisfied. MPH students were largely very satisfied (91%) or satisfied (9%). Doctoral students reported that they were very satisfied with faculty availability.

C2.6 Qualitative Data of Student Perceptions

Required Documentation: Qualitative data on student perceptions of class size and availability of faculty. Schools should only present data on public health degrees and concentrations. (summary in self-study and full results/backup documentation in electronic resource file)

The new course evaluation piloted in summer of 2017 asked undergraduate students how class size affected the quality of their education. This was a small sample originally intended for piloting purposes but this item was answered by five individuals. Two students reported that because of the online learning environment, class size was not an issue. One student reported, "It didn't affect anything." Two students remarked that the class was small or smaller than usual which increased their engagement.

Focus groups were held in fall 2017 in order to gather these data prior to self-study submission. Undergraduate (N=30) and graduate students (N=11) participated. Students were asked "What is your perception of class size as it relates to learning in the BSPH/Public Health Graduate Programs?" and "What is your perception of the availability of SCHS faculty?" Results of these focus groups are shown below.

Undergraduate Students

Regarding class size, undergraduate students responded positively, remarking on the appropriateness of class sizes in the program. Many students commented with words such as great, good, optimal, very good, excellent, etc. Student comments included, "I think that the size of the class is good because it allows enough one on one time with the professor while at the same time there being enough people to interact with and ask questions" and "Class sizes are perfect for the public health classes." Some students commented with a more general response, which indicated they preferred small or medium sized classes for better engagement. For example, one student wrote, "I think that having smaller more intimate class sizes is the best way to learn."

Student comments were also generally positive regarding faculty availability. Most responses indicated that faculty are easily reached and available during their office hours. One student responded with concerns regarding faculty office hours being held only two days per week. All faculty are expected to maintain office hours on a weekly basis for a minimum of five hours, spread over two or more days. The office hours will occur during the normal university workday (8 am to 5 pm). With the approval of the Department Chair, faculty may request office hours outside of the normal workday provided they occur immediately before or immediately following a class that meets outside of the normal workday hours and do not exceed a total of two hours.

Graduate Students

Regarding class size, graduate students responded positively, with comments such as "I have felt that the class size is just right for optimal learning and access to good in class discussions." All but one student had a positive response. That student was concerned with class cancellations, "I feel as though the classes are always on the small side. This is only a negative when classes get cancelled due to low class enrollment."

Student comments regarding faculty availability centered on flexibility and email communications such as "Most faculty are available often, and if they are busy or out of town, they answer email pretty quickly." These comments were mostly positive and indicative that faculty are willing to meet outside of posted office

hours when necessary and willing to communicate via email. A few students' responses indicated that some faculty are easy to reach while some faculty are not with one student referring to his experience as, "OK."

New qualitative data were collected and are in the process of being analyzed.

C2.7 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Students of all levels report that class size and faculty availability are satisfactory. SCHS students consistently rate these higher than the university population.

Weaknesses

- Only pilot data were available for some items. This will be included on all future course evaluations for all public health programs in the SCHS collected at the end of each semester.

C3. Staff and Other Personnel Resources (SPH and PHP)

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

"Staff" are defined as individuals who do not have faculty appointments and for whom staff work is their primary function. "Other personnel" includes students who perform work that supports the program's instructional and administrative needs (e.g.,, individuals who enroll first as students and then obtain graduate assistant or other positions at the university are classified as "other personnel," while individuals hired into staff positions who later opt to complete coursework or degrees are classified as "staff").

C3.1 Staff Support

Required Documentation: A table defining the number of the school or program's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation. (self-study document)

The SCHS has eight full time staff members that support school efforts including the Business Manager /Dean's Assistant, three Administrative Assistants, a Director of Assessment, a Director of Communications, a Director of Development, and an Executive Director of Community Partnerships. All staff report to the Dean.

Table C3.1 SCHS Staff Support	
Role/function	**FTE**
Administrative Assistant III	1.0
Administrative Assistant III	1.0
Administrative Assistant IV	1.0
Dean's Assistant/Business Manager	1.0
Director of Assessment	1.0
Director of Communications	1.0
Director of Development	1.0
Executive Director of Community Partnerships	1.0

Business Manager/Dean's Assistant

The Business Manager/Dean's assistant is responsible for the financial management of the school's research awards, contracts, self-supporting accounts, gift accounts, state-appropriated funds, and UNLV Foundation/outreach accounts. She works closely with UNLV's Office of Sponsored Programs (pre-award and post-award), the Budget Office and the Office of the Controller to ensure compliance with the terms and conditions of all awards, as well as federal, state, and local regulations. This person is also responsible for assisting the Dean with activities sponsored by the school, including arranging and facilitating university and community meetings, and serving as a liaison between the Dean and faculty, staff and other campus units.

Administrative Assistants

There are three administrative assistants. One of the administrative assistants is in a supervisory capacity. Her duties include assisting faculty with grant budgets, completing monthly budget reports, and working with faculty to determine allowable expenses; assisting the dean's office with university-wide initiatives, special event coordination, school accreditation, and recruitment activities, including the development of training manuals and training new classified staff and student workers. The other Administrative Assistants' duties include assisting students, coordinating the six degrees offered in the school including the PhD, MPH, MHA, EMHA, HCAP, and BSPH, supporting the academic faculty, instructors, and advisors associated with those programs, as well as the externally-funded research programs and awards.

Director of Assessment
The Director of Assessment is responsible for designing and implementing academic assessment programs associated with the six degree programs offered by the SCHS as well as for complying with all accreditation requirements. She acts as a guide for academic units in the development, implementation, monitoring, and evaluation of their learning outcomes and facilitates the use of assessment data to enhance curriculum design to improve student learning.

Director of Communications
The Director of Communications manages the school's communications and marketing efforts to heighten awareness of the school and its initiatives and highlight faculty and student achievement. The director collaborates with campus communications staff to manage the school's website and generate CHS-focused content for campus and community publications. The director also generates collateral, press releases, advertising, and social media content intended for a broad set of audiences: current and prospective students, parents, faculty, staff, alumni, donors, and community partners. The director serves as the school's media relations contact.

Director of Development
The Director of Development manages the cultivation, solicitation, and stewardship of donors for the SCHS by working closely with the Dean. The director helps identify and collaborate with donors, design programs and strategies to maintain and expand relationships in the donor community, develop proposals for donors, assist the Dean in managing advisory boards, and undertake related administrative tasks to develop and support an annual development plan.

Executive Director of Community Partnerships
The Executive Director of Community Partnerships collaborates and supports the SCHS effort to reach diverse populations in Nevada. He supports programming, outreach, and research as needed by the Center for Health Disparities and the American Indian Research and Education Center (AIREC). Specific activities include community-based participatory research including community engagement, education, recruitment, research, and service learning opportunities for historically underserved student and community populations. These efforts include collaboration with faculty, staff, student leaders, the Office of Admissions, and community-based organizations. In addition, the director in collaboration NSHE, coordinates special initiatives designated to support the university's efforts around Title III Asian American, Native American, and Pacific Islander Serving Institution (AANAPISI) and Title V Hispanic Serving Institution (HSI). Outreach and engagement efforts include collaboration with the State of Nevada in the development of the Nevada Minority Health and Equity Coalition.

C3.2 Contributions of Other Personnel

Required Documentation: Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel. (self-study document)

The SCHS also employs a student worker who assists the SCHS administrative staff with filing, delivering items to other campus units as needed, keeping track of equipment inventory, assisting faculty and staff with various projects as needed, and answering phones.

While there are other personnel who are assets to the SCHS, these staff positions report to specific centers or programs and do not assist in the day-to-day operations of the SCHS.

Table C3.2a SCHS Centers Staff			
Role/Function	Name	Grant/State Funded	FTE
AIREC Program Coordinator	Noehealani Antolin	Grant funded	0.95 FTE
CHIA Director	Joseph Greenway	State funded	1 FTE
CHIA Administrative Assistant III	Deysi Baca	State funded	1 FTE
CHIA Administrative Assistant III	Nora Langendorf	State funded	1 FTE
CHIA Software/Web Developer	Danny Chan	State funded	1 FTE
CHIA Software Developer	Robert Herrington	State funded	1 FTE
CHIA Software Developer	William Porter	State funded	1 FTE
Global Health Program Coordinator	Tami Bruno	State funded	1 FTE
Global Health Research and Grants Coordinator	Semiu Gbadamosi	Grant funded	1 FTE
Global Health Nurse Practitioner	Dina Patel	Grant funded	1 FTE
NICRP Chief Research Associate	Dawn Davidson	Grant funded	1 FTE
NICRP Program Manager	Valeria Gurr	Grant funded	1 FTE
NICRP Associate Director	Amanda Haboush-Deloye	Grant funded	1 FTE
NICRP Assistant Research Analyst	M. Amaris Knight	Grant funded	1 FTE
NICRP Research Associate	Erika Marquez	Grant funded	1 FTE
NICRP Executive Director	Tara Phebus	State funded	1 FTE
NICRP Research Assistant	Mirzah Trejo	Grant funded	1 FTE
EDL Laboratory Manager	David Woodard	State funded	0.50 FTE
NSPHL Biological Laboratory Technician	Jamie Gilmore	Grant funded	1 FTE
NSPHL Biological Laboratory Technician	Theresa Trice	Grant funded	1 FTE
NSPHL Biological Laboratory Technician	Adam Rowland	Grant funded	1 FTE
NSPHL Field Ops Supervisor	Jessica Gunter	Grant funded	1 FTE
NSPHL Field Technician	Jorge Bertran	Grant funded	0.70 FTE
NSPHL Field Technician	Adam Obenza	Grant funded	0.70 FTE
NSPHL Field Technician	Alexis York	Grant funded	0.70 FTE
Pollen Lab Research Associate	Tanviben Patel	Grant funded	0.75 FTE
Pollen Lab Supervisor	Asma Tahir	Grant funded	0.5 FTE
Tenant-Landlord Hotline Manager	Melissa Bartshe	State funded	0.5 FTE

There are 27 graduate assistants, who assist faculty in research projects as well as administrative duties for a maximum of 20 hours per week, while enrolled in at least six graduate credits. These graduate assistantships are state and grant funded and include both master's level and doctoral level students. Student workers assist faculty in various ways. The student worker policy restricts workers to no more than 30 hours per week or eight hours per day (https://www.unlv.edu/sites/default/files/page_files/27/HR-StudentEmploymentSupervisorsGuide-07-2014.pdf). Also included in the SCHS are two casual workers, who are not currently enrolled students, who work in a laboratory setting (https://www.unlv.edu/sites/default/files/page_files/27/HR-StudentEmploymentSupervisorsGuide-07-2014.pdf). A casual worker is defined as individuals employed by the University who are enrolled in less than six credit hours (undergraduate) or less than five credit hours (graduate) per semester who are

classified as Non-Student (160 hour/ 1000 hour) employees by law (NRS 284.325), and are restricted to working a maximum of 160/1000 hours during any calendar year. This is a one-time, temporary appointment and successive temporary appointments to the same position are not allowed (NRS 284.325, section 6).

Table 3.2b SCHS Graduate Assistants and Student Workers				
Role/Function	Supervisor/Department	Name	Grant/State Funded	FTE
Casual Worker	Chen, Lung-Wen (Antony)	Fortier, Karey	State funded	FTE
Casual Worker	Chen, Lung-Wen (Antony)	Myatt, Louise	State funded	FTE
Graduate Assistant	Cruz, Patricia	Alonzo, Fernanda	State funded (H4NI)	.50 FTE
Graduate Assistant	Moonie, Sheniz	Anderson, Julia	State funded	.50 FTE
Graduate Assistant	Thompson-Robinson, Melva	Andrews, Johanna	State funded (H4NI)	.50 FTE
Graduate Assistant	Gerstenberger, Shawn	Bartshe, Melissa	Department funded	.50 FTE
Graduate Assistant	Pinheiro, Paulo	Callahan, Karen	State funded	.50 FTE
Graduate Assistant	Coughenour, Courtney	Cheong, Prescott	State funded	.50 FTE
Graduate Assistant	Sotero, Michelle	Chevalier, Jocy-Anna	State funded	.50 FTE
Graduate Assistant	Moonie, Sheniz	De Leon, Jacklynn	Grant funded	.50 FTE
Graduate Assistant	Chen, Lung-Wen (Antony)	Fortier, Karey	State funded	.50 FTE
Graduate Assistant	Shen, Jay	Frakes, Kaitlyn	State funded (H4NI)	.50 FTE
Graduate Assistant	Rodriguez, Rachelle	Ghimire, Saruna	State funded	.50 FTE
Graduate Assistant	Epané, Josue	Gillogly, Alora	State funded	.50 FTE
Graduate Assistant	Cruz, Patricia	Girmay, Mehret	State funded (H4NI)	.50 FTE
Graduate Assistant	Bhandari, Neeraj	Hasseineh, Hoda	State funded (H4NI)	.50 FTE
Graduate Assistant	Chien, Lung-Chang	Maheshwari, Sfurti	State funded (H4NI)	.50 FTE
Graduate Assistant	Coughenour, Courtney Pharr, Jennifer Bungum, Timothy	Malik, Sabina	State funded (TTDRGA)	.50 FTE
Graduate Assistant	Bungum, Timothy	Milmeister, Helena	State funded (H4NI)	.50 FTE
Graduate Assistant	Chen, Lung-Wen (Antony) Lin, Ge	Myatt, Louise	State funded (TTDRGA)	.50 FTE
Graduate Assistant	Echezona, Ezeanolue	Olakunde, Babayemi	State funded (H4NI)	.50 FTE
Graduate Assistant	Pharr, Jennifer	Olawepo, John	State funded	.50 FTE
Graduate Assistant	Buttner, Mark	Rivas, David	State funded	.50 FTE
Graduate Assistant	Sy, Francisco	Sagadraca, Lawrence	Department funded	.50 FTE
Graduate Assistant	Cochran, Christopher	Soomro, Raheem	State funded	.50 FTE
Graduate Assistant	Gakh, Maxim Coughenour, Courtney	Tango Assoumou M, Bertille	State funded (TTDRGA)	.50 FTE
Graduate Assistant	Upadhyay, Soumya	Torres, Frank	State funded (H4NI)	.50 FTE
Graduate Assistant	Wu, Qing	Xiao, Xiangxue	State funded (TTDRGA)	.50 FTE
Graduate Assistant	Wu, Qing	Xu, Yingke	Grant funded	.50 FTE
Student Worker	Coughenour, Courtney	Abelar, James	State funded	Varies
Student Worker	Bungum, Tim	Alonzo, Fernanda	Grant funded	Varies

Table 3.2b SCHS Graduate Assistants and Student Workers, continued				
Role/Function	Supervisor/Department	Name	Grant/State Funded	FTE
Student Worker	Rodriguez, Rachel	Anderson, Julia	State funded	Varies
Student Worker	Moonie, Sheniz	Anderson, Julia	State funded	Varies
Student Worker	Pinheiro, Paulo	Callahan, Karen	Grant funded	Varies
Student Worker	Sy, Francisco	Cheong, Prescott	State funded	Varies
Student Worker	Coughenour, Courtney	Cheong, Prescott	State funded	Varies
Student Worker	Gakh, Maxim	Chris, Cody	State funded	Varies
Student Worker	Pinheiro, Paulo	Cobb, Taylor	Grant funded	Varies
Student Worker	Clark, Sheila	Del Toro Contreras, Clarisa	State funded	Varies
Student Worker	Coughenour, Courtney	Dennis, Sarah	State funded	Varies
Student Worker	Sy, Francisco	Ghimire, Saruna	State funded	Varies
Student Worker	Gakh, Maxim	Goodie, Aaliyah	State funded	Varies
Student Worker	Coughenour, Courtney	Huebner, Joshua	State funded	Varies
Student Worker	Coughenour, Courtney	Li, Jiaxin	State funded	Varies
Student Worker	Shen, Jay	Kim, Pearl	Grant funded	Varies
Student Worker	Shen, Jay	Ornelas, Ashley	Grant funded	Varies
Student Worker	Coughenour, Courtney	Malik, Sabina	State funded	Varies
Student Worker	Shen, Jay	Maheshwari, Sfurti	Grant funded	Varies
Student Worker	Correia, Connie	Pfand, Cameron	State funded	Varies
Student Worker	Coughenour, Courtney	Regalado, Martha (Nikki)	State funded	Varies
Student Worker	Coughenour, Courtney	Reynolds, Chantel	State funded	Varies
Student Worker	Buttner, Mark	Rivas, David	Grant funded	Varies
Student Worker	Sy, Francisco	Sagadraca, Lawrence	State funded	Varies
Student Worker	Global Health	Slinkard, Samantha	Grant funded	Varies
Student Worker	Clark, Sheila	Thornton, Kendra	State funded	Varies
Student Worker	Gakh, Maxim	To, Samantha	State funded	Varies

C3.3 Support of Other Personnel

Required Documentation: Provide narrative and/or data that support the assertion that the school or program's staff and another personnel support is sufficient or not sufficient. (self-study document)

Over the past eighteen months, the staff at the SCHS and their capacity has increased substantially. During this time, the school hired an additional administrative assistant as well as four other support positions and promoted an administrative assistant into a supervisory role. Increasing the administrative staff was important, as the enrollment and faculty needs in the SCHS have continued to grow. Currently, each of the administrative assistants has clearly defined duties and provide service to students and faculty. The supervisory administrative assistant handles tasks that are more complicated, which eases the burden on the Dean's Assistant/Business Manager and the two Administrative Assistant III's. This division of labor has increased productivity and efficiency. These additions and workflow policies have proven to be effective for the SCHS, but we are planning to hire an AA I to better satisfy the needs of the students and faculty.

The addition of support positions with specializations has also increased the capacity and efficiency of the SCHS, as their duties were previously handled by the Dean, a smaller administrative staff, and faculty. For example, the addition of a Director of Assessment has facilitated the coordinating of accreditation documents and the integration of competency based curriculum and assessment into the culture of the SCHS. Similarly, the Director of Communications has facilitated necessary website updates, media releases, social media content, and alumni newsletters. This is especially critical because communication is key to developing a strong public health community centered on the SCHS and its programs, research, and achievements. The Executive Director of Community Partnerships also affects the impact the SCHS has on the community through recruitment efforts and the experience our students have when they go into the community for their internships and eventual careers.

This year, the amount of graduate assistantships increased substantially, which affords most tenured/tenure track faculty members with a student graduate assistant. This allows faculty to further their research agenda, which increases productivity of the school. Due to state funded programs and grants some faculty have more than one assistant.

C3.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Current SCHS staffing is consistent with its needs and therefore strong. By increasing our administrative staff, it has considerably aided in the everyday efficiency of the SCHS. This, as well as the increased numbers of graduate assistantships, has allowed faculty to focus on their research and academic goals. Specialized administrative staff have been able to accomplish tasks that were previously parsed out to administrative assistants, faculty, and administrators. The addition of these positions has allowed the SCHS to pursue deeper communications with stakeholders, updates to the school's website, revised assessments, accreditation facilitation, community partnership development, scholarship development, etc.

Weaknesses

- A challenge regarding resources is that the existing graduate assistantship increase is part of a particular state program that was funded for three years but may discontinue after. Plans will need to be developed to maintain that level of support in the future.

C4. Physical Resources (SPH and PHP)

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

C4.1 Space

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

Faculty office space
Staff office space
Classrooms
Shared student space
Laboratories, if applicable to public health degree program offerings (self-study document)

The UNLV campus covers 332 acres, including 55 major buildings. As reported in the Top Tier Progress Report, there are a total of 203 classrooms and 144 class labs.

The majority of the SCHS faculty and staff are located in the Rod Lee Bigelow Health Sciences Building (BHS) and White Hall Annex Building 1 (WHA1). The SCHS shares BHS with the School of Allied Health Sciences and the School of Nursing. Overall, the SCHS occupies over 18,000 square feet of space on campus in eight different buildings.

Table C4.1 Space

Building	Use
Rod Lee Bigelow Health Sciences Building (BHS)	19 faculty offices 10 staff offices 1 dedicated classrooms 1 graduate assistant lounge 3 other spaces (conference room, mail room, storage space)
White Hall Annex Building 1 (WHA1)	6 faculty offices (110, 112, 114, 116, 118, 120)
Marjorie Barrick Museum of Art/Harry Reid Center (MSM-HRC)	5 faculty offices 7 staff offices 1 lab
Wright Hall Building A (WRI)	3 faculty offices (A225, A226, A227)
Greenspun Hall (GUA)	1 faculty office (2121)
Technology Building (TEC)	2 staff offices (101, 102)
Campus Services Building (CSB)	23 staff offices
Paul McDermott Physical Education Building (MPE)	2 Labs

Classes are held in various buildings across campus; however, the SCHS has dedicated classroom space with computers within the BHS building as well as meeting rooms, a laboratory, offices, and common areas. The SCHS has a dedicated computer lab, BHS 131, which is classified as mixed instructional use and contains 26 student computers and one instructor computer. These computers are configured with an array of software applicable to the research done within the SCHS (Adobe, ArcGIS, Python, SAS, Minitab, and Microsoft Office).

The SCHS has four laboratories including the: (1) Environmental and Occupational Health Laboratory is located in the Paul McDermott Physical Education Complex (MPE 224); (2) Emerging Diseases Laboratory is located in the same building (MPE 231); (3) Urban Air Quality Laboratory is located in MSM Building; and (4) Nevada State Public Health Laboratory UNLV Branch is dedicated to a government-funded project that is designated as For Official Use Only. There is a total of 6,320 square feet of research space assigned to the SCHS.

The University Library System includes a main library, the Lied Library, and four satellite libraries (Health Sciences Library, Architecture Studies Library, Teacher Development & Resources Library, and Music Library). The library system includes 127 highly-trained and experienced individuals, including 56 tenure-track librarians. Lied Library houses more than 1.2 million bound volumes, almost 80,000 journals and serials, over 300 databases and references sources, and access to over 1.3 million e-books.

The Health Sciences Library serves all faculty, staff, students, and researchers in UNLV's health sciences programs (Community Health Sciences, Allied Health Sciences, Dental Medicine, Medicine, and Nursing) as well as other programs that are in clinical or biomedical areas. A dedicated SCHS Health Sciences librarian, Xan Goodman, is available to faculty and students. A new facility is being built as part of the new UNLV School of Medicine and is scheduled to open in 2021. Interim facilities are available at the Shadow Lane Campus and at the temporary offices for the UNLV School of Medicine.

UNLV has 50 computer labs and 1,500 computers located throughout campus for use by all UNLV faculty, staff, and students. Users can access word processing, spreadsheet, and other specialized software for data analysis and mapping, film and sound editing, and engineering software. Free wireless service is available to the entire campus.

The Student Union is a 135,000 square foot building with 25,000 square feet of meeting space. The Student Union ballrooms offer 9,000 feet of additional space where new student orientation events, student organization events, and student mixers can take place. Here students can also purchase their rebel card and take care of finances at a full-service US Bank Branch. With retail food options such as Starbucks, Panda Express, and Jamba Juice etc., the Student Union is a centerpiece of campus life.

The Student Union Courtyard, Pida Plaza, UNLV Academic Mall, Alumni Amphitheater, Angelo J. and Frances Manzi Courtyard, Tonopah Lawn, and Warner Green are all green spaces or courtyards in which students can attend university events such as Party in the Pida, Premier UNLV, and Greek Life events. These outdoor venues also offer a place to congregate, study, or relax. The Learning Garden is another outdoor space that was created as a turf reduction project and offers places for students to study and observe nature.

The Marjorie Barrick Museum is a place for exhibitions and events, promoting the visual arts among all UNLV members. Located just outside the Barrick Museum is the Donald H. Baepler Xeric Garden. With over 9,000 square feet of paved pathways, benches, arbors, and bridges, this garden is a refuge for indigenous birds, reptiles and mammals and a place where students can relax and view nature.

The Student Recreation and Wellness Center (SRWC) is 165,000 square feet of recreational space including: a 200-meter indoor jogging track; a 6-lane, 25 yard lap pool; spa, leisure, and vortex pool; multi-purpose activity courts; cardio equipment, strength equipment, functional trainers, and free weights. Personal training, over 65 group exercise classes, certification courses, and intramural sports are also available here. In addition, the SRWC holds the Rebel Wellness Zone, which includes a relaxation room with massage chairs, fitness and nutrition consultations, and education for Health Rebels. The first floor also houses various food options and study / relaxation space. The SRWC is open to SWRC members and UNLV students registered for four or more credit hours during the semester.

C4.2 Sufficiency of Space

Required Documentation: Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient. (self-study document)

Office and classroom space shortages have become critical for the SCHS. The growth of SCHS has compounded facility shortages. The SCHS has faculty and staff in eight different locations on campus. Some of the locations are due to dual appointments but most are due to space limitations. A critical mass of SCHS core staff are located in BHS with the administration. Due to the growth in student enrollment at UNLV, classroom space can be a premium depending on the time that the class is offered. The school has five face-to-face programs which use space at all times of day including evenings and Fridays. This can create scheduling challenges for students who take classes at specific times (e.g., evening classes only). Students who take classes primarily during the daytime are not affected by this issue. The space issue does not affect instruction, but can affect students who need to visit faculty office hours when offices are scattered across the campus. To date the SCHS has been able to provide space and resources, including technology and computer lab classrooms, to meet the needs of students, but as we grow this may be an issue. University officials are aware of the space issues and are working on securing new space, including a permanent facility for the School of Community Health Sciences to house all faculty and staff. However, to date there is no firm solution to space needs. Ideally, all faculty will be housed together; however, that is not likely to happen in the near future.

The university does have sufficient shared student space. The student union, built in 2007, and Lied Library, built in 2000, were designed with growth in mind providing students with wonderful resources. The university also places an emphasis on having green space on campus, which allows students to use the outdoor spaces as well year round.

C4.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

<u>Strengths</u>

- Shared space on campus is plentiful.
- Library space resources are adapting with growth in the health sciences.

<u>Weaknesses</u>

- While office and classroom is a limitation for the SCHS, the university is aware of the space limitations and has proposed several plans. Until one of the proposed plans can be implemented, the Dean has placed departments as closely together as possible. There is an existing building on campus that is being rehabilitated and may be ready for use as early as 2019 that has been proposed to house the SCHS. This building would house all of the SCHS in a central location. Another proposal is to house the SCHS in the new medical corridor near the Shadow Lane campus. These plans are further out as building construction has not begun.

C5. Information and Technology Resources (SPH and PHP)

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

C5.1 Resources

Required Documentation: Briefly describe, with data if applicable, the following:

Library resources and support available for students and faculty
Student access to hardware and software *(including access to specific software or other technology required for instructional programs)*
Faculty access to hardware and software *(including access to specific software or other technology required for instructional programs)*
Technical assistance available for students and faculty *(self-study document)*

Library resources and support available for students and faculty

The libraries at UNLV provide abundant support for both students and faculty. In fact, based on publications by library faculty, the library system at UNLV was ranked as the 15th most productive academic library for academic research in the May 2017 edition of *College and Research Libraries* published by the Association of College and Research Libraries. The libraries include a staff of over 100 highly trained individuals who work collectively to facilitate the smooth operation and support of resources for both faculty and staff. The website for the libraries provides a portal to publications and resources for all, including special sections for undergraduate students, graduate students, alumni, community members, and faculty. See the UNLV library website for additional information.

The four branches of UNLV libraries including Architecture Studies, Music, Teacher Development, and Lied Library total over 325,000 square feet of building space, which includes 16 group study rooms, 2 media viewing rooms, 6 smart classrooms, a high density storage system (LASR), and many special collections. The main campus library, Lied Library, is open over 90 hours per week during the academic year. These collections include over 1.2 million bound volumes, over 300 databases and reference sources, nearly 80,000 journals and serials, and more than 1.3 million ebooks. Special collections include rare and specialized research materials documenting the region, the gaming industry, and the university. The libraries have embraced technology and access for students and faculty with over 625 computer workstations and circulating laptops, a multi-media design studio, and 16 staff members dedicated to maintaining the technological resources.

In addition to the library resources discussed, there is a Health Sciences Library with physical space in development near the UNLV School of Medicine set to open in the fall of 2021. Until that time, the materials are contained in two interim sites, one for the medical school, and one for the health sciences. The interim library space at the 2040 West Charleston Boulevard building is available to the School of Medicine, the School of Dental Medicine, and to all UNLV health sciences students, residents, fellows, faculty, staff, researchers, and members of the health sciences community. This space comprises 2,560 square feet with individual study areas, group study, table seating, and lounge seating. There are computer workstations, copiers, and print and multimedia collections. Staffing includes four health sciences library faculty or staff, and student workers. The library is staffed 48 hours per week during the academic year. The Health Sciences Library website pulls together, and provides access to, the resources and services related to health sciences at UNLV. The website serves all faculty, staff, students, and researchers in UNLV's health sciences programs including Community Health Sciences, Allied Health Sciences, Dental Medicine, Medicine, and Nursing, as well as other programs that are in clinical or biomedical areas. The health sciences librarian, Xan Goodman, is a resource specifically dedicated to the health sciences and assists with curriculum design, research support, and other inquiries. See the Health Sciences Library website for additional information.

Faculty and Student access to hardware and software *(including access to specific software or other technology required for instructional programs)*

The Office of Information Technology (OIT) is the central unit responsible for meeting the computing needs of UNLV faculty, staff, and students. All students and faculty are provided with an ACE account that allows students and faculty to log in to various UNLV services and applications. ACE access makes it possible for students and faculty to have access to 50 computer labs throughout campus, including those located in the libraries.

Students have access to ten general use computer labs and 41 specialized labs that are supported by OIT. These labs contain more than 1,300 computers with a variety of standard office software (Word, Excel, etc.) while some computers have specialized applications (Mathcad, ArcGIS, SAS, SPSS, etc.). The ten general access labs have most of the general-use software that students need to complete their coursework and are open to all students. The 41 specialized labs, including the SCHS classroom/computer lab, are customized for departments and colleges that require either special software or hardware specific to their discipline. These labs are often used as both classrooms and open labs for students to complete their coursework. The SCHS dedicated classroom/computer lab, which is mixed instructional use and contains 26 student computers and one instructor computer (https://oit.unlv.edu/labs-classrooms/labs/bhs-131), is located in the Bigelow Health Sciences Building (BHS). These computers are configured with an array of software applicable to the research done within the SCHS (Adobe, ArcGIS, Python, SAS, Minitab, and Microsoft Office).

OIT works with vendors to provide free or discounted software for personal or academic use to both students and faculty. Software can be accessed in the labs for free using an ACE account, and CDs with utilities such as Symantec AntiVirus are available from the help desk. Students, faculty, and staff can also visit the online software store (hosted by Kivuto) and order discounted software on titles such as Microsoft Office 365, SPSS, Adobe Creative Cloud, and Qualtrics.

Technical assistance available for students and faculty

The Office of Information Technology (OIT) supports both students and faculty through resources such as computer labs, help desk services, free and discounted software, training on a variety of software, technology orientations and guides, wireless networking, network storage with web pages, learning management system support, email, custom application development, and technology enhanced classrooms (TECs).

The help desk, which is available to all currently enrolled students, faculty, and staff, assists with logins/passwords for the computer labs, individual help with use of technology, email, WebCampus, and other technology issues. They also assist with hardware and software troubleshooting through email, web submission, phone, or in person. OIT's Instructional Technology Services (ITS) unit also operates a help desk specifically for support of the technology in classrooms and is staffed for immediate response to the technology issues in classrooms. Help desk staff can access and control classroom equipment in the room virtually. The Library Computer Help Desk offered by University Libraries, consists of a group of library staff and student employees assisting students and faculty with general guidance on various software packages, printing, login issues, and computer hardware. OIT also provides a variety of workshops pertaining to software use and developing technology skills each semester. There are also self-help tutorials for various software programs available through OIT's Lynda.com.

The university's Educational Outreach program also provides discounted or free technical training to faculty and staff, extending what is available for the campus. OIT collaborates with Online Education and the libraries to provide one-on-one or small group support and training to faculty who are in need of technological assistance and the use of instructional technology.

C5.2 Sufficiency of Information and Technology Resources

Required Documentation: Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient. (self-study document)

Overall, the university sufficiently supports both faculty and students in regards to technology and informational resources. Students taking the 2015-2016 Graduating Senior Exit Survey (GSES) reported that they were most satisfied with library resources (94% satisfied) and access to computer facilities and services (93% satisfied) and both of these resources have remained above 91% since 2013.

Table C5.2 GSES Information and Technology Resources Survey Results

	All Graduating Seniors			SCHS Graduating Seniors		
Academic Year	**2014 - 15**	**2015 - 16**	**2016 - 17**	**2014 - 15**	**2015 - 16**	**2016 - 17**
Quality of Library Resources	3.48	3.51	3.49	3.39	3.62	3.48
Access to Computer Facilities/Services	3.43	3.46	3.45	3.48	3.65	3.54

Mean Rating (1 = Strongly Disagree and 4 = Strongly Agree)

The Ithaka S+R Graduate Student Survey, launched in the fall of 2015, provides an assessment of graduate student satisfaction in library support of their needs. The survey is administered through an email invitation to complete the survey with incentives for participation. Out of 3,912 email invitations sent, 631 surveys (16%) were completed. Thirty-two percent of students note using the library website as a starting point for research and 70% of respondents noted that the library helps them develop their research skills. Results regarding student's satisfaction with campus librarians or library staff to help with research indicate most students were satisfied (strongly agree (14%), agree (28%), somewhat agree (18%), neither agree nor disagree (32%), somewhat disagree (2%), disagree (4%), and strongly disagree (3%)). Students were highly satisfied with the fact that the library pays for resources they may need for their research projects (extremely useful (68%), very useful (23%), somewhat useful (7%), not too useful (1%), and not useful at all (1%)).

Academic faculty are surveyed using the Collaborative on Academic Careers in Higher Education (COACHE) tool based in the Graduate School of Education at Harvard University. This is a consortium of over 200 academic institutions that aim to improve the work lives of faculty. This survey is administered through a third party and uses evidence-based questions. This most recent survey was administered in 2016 (N=371) and the results indicated that the majority of faculty members were satisfied or very satisfied with library resources (very satisfied (31%), satisfied (49%), neither satisfied or dissatisfied (12%), dissatisfied (6%) and very dissatisfied (3%)). Results regarding faculty satisfaction with computing and technical support were similar, with the majority faculty reporting that they were satisfied or very satisfied (very satisfied (21%), satisfied (39%), neither satisfied or dissatisfied (18%), dissatisfied (15%) and very dissatisfied (7%)).

C5.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The university has not only sufficient information and technology resources, but a plan to continually upgrade and broaden these resources.

Weaknesses

- None

Criterion D

D1. MPH & DrPH Foundational Public Health Knowledge (SPH and PHP)

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

Grounding in foundational public health knowledge is measured by the student's achievement of the learning objectives10 listed below, or higher-level versions of the same objectives.

Profession & Science of Public Health

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

The school or program validates MPH and DrPH students' foundational public health knowledge through appropriate methods, which may include the following:

- **The school or program verifies students' previous completion of a CEPH-accredited bachelor's degree in public health or MPH degree**
- **The school or program implements a test or other assessment tools that address the learning objectives listed above, or higher-level versions of the same objectives**
- **The school or program offers an online or in-person course, for credit or not-for-credit, that incorporates the learning objectives listed above, or higher-level versions of the same objectives**
- **The school or program includes the learning objectives listed above, or higher-level versions of the same objectives, in courses required of all MPH or DrPH students**

D1.1 Foundational Public Health Knowledge

Required Documentation: Describe how the school or program ensures that all MPH and DrPH students are grounded in foundational public health knowledge. The description must identify all options for MPH and DrPH students used by the school or program. (self-study document)

Table D1.1 Foundational Public Health Knowledge Assessment	
Content	**Course number and name or other educational requirements**
1. Explain public health history, philosophy and values	EOH 710 Fundamentals of Public Health
2. Identify the core functions of public health and the 10 Essential Services*	EOH 710 Fundamentals of Public Health
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	EOH 710 Fundamentals of Public Health
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	EOH 710 Fundamentals of Public Health
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	EOH 710 Fundamentals of Public Health
6. Explain the critical importance of evidence in advancing public health knowledge	EOH 710 Fundamentals of Public Health
7. Explain effects of environmental factors on a population's health	EOH 710 Fundamentals of Public Health
8. Explain biological and genetic factors that affect a population's health	EOH 710 Fundamentals of Public Health
9. Explain behavioral and psychological factors that affect a population's health	EOH 710 Fundamentals of Public Health
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	EOH 710 Fundamentals of Public Health
11. Explain how globalization affects global burdens of disease	EOH 710 Fundamentals of Public Health
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	EOH 710 Fundamentals of Public Health

All MPH students are required to enroll in and pass EOH 710 – Fundamentals of Public Health. This three-credit course introduces students to public health concepts and practice, provides a broad overview of the field of public health and a focused look at core areas of health promotion and education, environmental health, epidemiology, biostatistics, and health care administration. See electronic resource file (D1.2) for assignments and syllabus.

D1.2 Assessment of Public Health Knowledge

Required Documentation: Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable. (electronic resource file)

See Electronic Resource File.

D1.3 Strengths and Weaknesses

Required Documentation: If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The Fundamentals of Public Health course (EOH 710) exemplifies the foundational public health knowledge content.

Weaknesses

- None

D2. MPH Foundational Competencies (SPH and PHP)

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

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the school or program must assess *all* MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (e.g., joint, dual, concurrent degrees). For combined degree students, assessment may take place in either degree program. These competencies are informed by the traditional public health core knowledge areas, (biostatistics, epidemiology, social and behavioral sciences, health services administration and environmental health sciences), as well as cross-cutting and emerging public health areas.

Evidence-based Approaches to Public Health

1. **Apply epidemiological methods to the breadth of settings and situations in public health practice**
2. **Select quantitative and qualitative data collection methods appropriate for a given public health context**
3. **Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate**
4. **Interpret results of data analysis for public health research, policy or practice**

Public Health & Health Care Systems

5. **Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings**
6. **Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels**

Planning & Management to Promote Health

7. **Assess population needs, assets and capacities that affect communities' health**
8. **Apply awareness of cultural values and practices to the design or implementation of public health policies or programs**
9. **Design a population-based policy, program, project or intervention**
10. **Explain basic principles and tools of budget and resource management**
11. **Select methods to evaluate public health programs**

Policy in Public Health

12. **Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence**
13. **Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes**
14. **Advocate for political, social or economic policies and programs that will improve health in diverse populations**
15. **Evaluate policies for their impact on public health and health equity**

Leadership

16. **Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making**
17. **Apply negotiation and mediation skills to address organizational or community challenges**

Communication

18. **Select communication strategies for different audiences and sectors**
19. **Communicate audience-appropriate public health content, both in writing and through oral presentation**
20. **Describe the importance of cultural competence in communicating public health content**

Interprofessional Practice

21. **Perform effectively on interprofessional teams**

Systems Thinking

22. **Apply systems thinking tools to a public health issue**

D2.1 Required Coursework for MPH Degree

Required Documentation: List the coursework and other learning experiences required for the school or program's MPH degrees, including the required curriculum for each concentration and combined degree option. Information may be provided in the format of Template D2-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree. (self-study document)

Table D2.1a Requirements for MPH degree, Environmental and Occupational Health		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (18 Credits)		
EOH 601	Environmental Toxicology	3
EOH 709	Scientific/Technical Writing for the Health and Life Sciences	3
EOH 717	Food Safety and Public Health	3
EOH 747	Transmission of Infectious Diseases	3
EOH 765	Seminar in Environmental Justice and Public Health	3
EAB 700	Research Methods for Public Health	3
Elective Courses (0-3 Credits)		
EOH 705	Social Epidemiology	3
EOH 713	Public Health Law	3
EOH 715	Qualitative and Field Methods for Public Health	3
EOH 732	Children, Development, Health, and the Environment	3
EOH 757	Parasitology and Public Health	3
EOH 760	Racial and Ethnic Disparities in Health	3
EOH 767	Airborne Pathogens and Human Health	3
EOH 769	Pollution and Health	3
EAB 716	The Epidemiology of Obesity	3
EOH 777	Emerging Infectious Disease	3
EOH 795	Special Topics in Public Health	3
EOH 796	Independent Study in Environmental Health	3
HED 705	Theoretical Foundations in Health Promotion	3
Culminating Experience (3-6 Credits)		
EOH 794	Professional Paper in Environmental Health	3
EOH 798	Thesis Research	6
Internship		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

Table D2.1b Requirements for MPH degree, Epidemiology and Biostatistics		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (12 Credits)		
EAB 700	Research Methods for Public Health	3
EAB 715	Chronic Disease Epidemiology	3
EAB 725	Epidemiology of Infectious Disease	3
EAB 763	Linear Statistical Models	3
Elective Courses (6-9 Credits)		
EOH 705	Social Epidemiology	3
EAB 716	The Epidemiology of Obesity	3
EAB 720	Grant Writing for Epidemiology and Public Health Research	3
EAB 733	Survey Sampling for the Health Sciences	3
EAB 735	Outbreak Investigation	3
EAB 743	Experimental Design for the Health Sciences	3
EAB 753	Nonparametric Statistics for Public Health	3
EAB 773	Survival Analysis for Public Health	3
EAB 795	Special Topics in Epidemiology	3
HED 705	Theoretical Foundations in Health Promotion	3
Culminating Experience (3-6 Credits)		
EAB 794	Professional Paper in Epidemiology and Biostatistics	3
EAB 798	Thesis Research	6
Internship (3 Credits)		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

Table D2.1c Requirements for MPH degree, Health Care Administration and Policy		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (15 Credits)		
HCA 703	Management of Health Service Organizations and Systems	3
HCA 716	Health Care Accounting and Finance	3
HCA 719	Operations and Quality Management of Health Services	3
HCA 720	Information Systems in Health Services Management	3
HCA 730	Strategic Management of Health Services	3
Elective Courses (3-6 Credits)		
HCA 652	Health Politics and Policy	3
HCA 680	Organization and Management of Long Term Care Services	3
HCA 715	Health Services Research Methods	3
HCA 718	Health Care Economics	3
HCA 721	Advanced Health Care Finance	3
HCA 761	Health Care Law and Ethics for Managers	3
HED 705	Theoretical Foundations in Health Promotion	3
Culminating Experience (3-6 Credits)		
HCA 794	Professional Paper in Health Care Administration	3
HCA 799	Thesis Research	6
Internship (3 Credits)		
HCA 793	Internship in Health Care Administration	3
	Total	**45**

Table D2.1d Requirements for MPH degree, Social and Behavioral Health		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (6 Credits)		
HED 705	Theoretical Foundations in Health Promotion	3
HED 730	Program Evaluation in Health Promotion	3
Methods Courses (3 Credits)		
EAB 700	Research Methods for Public Health	3
EOH 715	Qualitative and Field Methods for Public Health	3
Social Health Courses (3 Credits)		
EOH 705	Social Epidemiology	3
EOH 760	Racial and Ethnic Disparities for Public Health	3
Elective Courses (6-9 Credits)		
HED 607	Stress Management	3
HED 627	Methods in Health Education	3
HED 629	Education for Sexuality	3
HED 630	Nutrition	3
HED 635	Health Studies on Dangerous Drugs	3
HED 760	Technology in Health Promotion	3
Culminating Experience (3-6 Credits)		
HED 750	Graduate Project in Health Promotion	3
HED 755	Thesis Research	6
Internship (3 Credits)		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

MPH-DMD Degree Plans

Table D2.1e Requirements for MPH degree - Doctorate of Dental Medicine Track, Environmental and Occupational Health		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (18 Credits)		
EOH 601	Environmental Toxicology	3
EOH 709	Scientific/Technical Writing for the Health and Life Sciences	3
EOH 717	Food Safety and Public Health	3
EOH 747	Transmission of Infectious Diseases	3
EOH 765	Seminar in Environmental Justice and Public Health	3
EAB 700	Research Methods for Public Health	3
Elective Courses (6-9 Credits)		
Den 7151	Healthcare Finance and Public Health	1
Den 7154	Healthcare Delivery: Patient Record and HIPPA Regulations	1.5
Den 7160	Research and Professional Development I	1
Den 7161	Research and Professional Development II	1.5
Den 7162	Biochemical Basis of Clinical Nutrition	3
Den 7253	Research and Analysis Methodology	1.5
Culminating Experience (3-6 Credits)		
EOH 794	Professional Paper in Environmental Health	3
EOH 798	Thesis Research	6
Internship (3 Credits)		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

Table D2.1f Requirements for MPH degree - Doctorate of Dental Medicine Track, Epidemiology and Biostatistics		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (12 Credits)		
EAB 700	Research Methods for Public Health	3
EAB 715	Chronic Disease Epidemiology	3
EAB 725	Epidemiology of Infectious Disease	3
EAB 763	Linear Statistical Models	3
Elective Courses (6-9 Credits)		
Den 7151	Healthcare Finance and Public Health	1
Den 7154	Healthcare Delivery: Patient Record and HIPPA Regulations	1.5
Den 7160	Research and Professional Development I	1
Den 7161	Research and Professional Development II	1.5
Den 7162	Biochemical Basis of Clinical Nutrition	3
Den 7253	Research and Analysis Methodology	1.5
Culminating Experience (3-6 Credits)		
EAB 794	Professional Paper in Epidemiology and Biostatistics	3
EAB 798	Thesis Research in Epidemiology and Biostatistics	6
Internship (3 Credits)		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

Table D2.1g Requirements for MPH degree - Doctorate of Dental Medicine Track, Health Care Administration and Policy		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (12 Credits)		
HCA 703	Management of Health Service Organizations and Systems	3
HCA 716	Health Care Accounting and Finance	3
HCA 719	Operations and Quality Management of Health Services	3
HCA 720	Information Systems in Health Services Management	3
HCA 730	Strategic Management of Health Services	3
Elective Courses (6-9 Credits)		
Den 7151	Healthcare Finance and Public Health	1
Den 7154	Healthcare Delivery: Patient Record and HIPPA Regulations	1.5
Den 7160	Research and Professional Development I	1
Den 7161	Research and Professional Development II	1.5
Den 7162	Biochemical Basis of Clinical Nutrition	3
Den 7253	Research and Analysis Methodology	1.5
Culminating Experience (3-6 Credits)		
HCA 794	Professional Paper in Health Care Administration	3
HCA 799	Thesis Research	6
Internship (3 Credits)		
HCA 793	Internship in Health Care Administration	3
	Total	**45**

Table D2.1h Requirements for MPH degree - Doctorate of Dental Medicine Track, Social and Behavioral Health		
Course number	**Course name**	**Credits**
Public Health Core Requirements (18 Credits)		
EOH 710	Fundamentals of Public Health	3
EOH 740	Fundamentals of Environmental Health	3
EAB 705	Epidemiology and PublicHealth	3
HCA 701	U.S. Health Care System: Programs and Policies	3
HED 720	Program Planning and Grant Writing	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Concentration Required Courses (6 Credits)		
HED 705	Theoretical Foundations in Health Promotion	3
HED 730	Program Evaluation in Health Promotion	3
Methods Requirements (3 credits)		
EAB 700	Research Methods for Public Health	3
EOH 715	Qualitative & Field Methods for Public Health	3
Social Health Requirements (3 credits)		
EOH 705	Social Epidemiology	3
EOH 760	Racial and Ethnic Disparities in Health	3
Elective Courses (6-9 Credits)		
Den 7151	Healthcare Finance and Public Health	1
Den 7154	Healthcare Delivery: Patient Record and HIPPA Regulations	1.5
Den 7160	Research and Professional Development I	1
Den 7161	Research and Professional Development II	1.5
Den 7162	Biochemical Basis of Clinical Nutrition	3
Den 7253	Research and Analysis Methodology	1.5
Culminating Experience (3-6 Credits)		
HED 750	Graduate Project in Health Promotion	3
HED 755	Thesis Research	6
Internship (3 Credits)		
EOH 793	Internship in Environmental Health*	3
	Total	**45**

**This course is in the process of being renamed Internship in Public Health.*

This information can also be seen in the 2017-2018 Graduate Catalog: Mater of Public Health Degree.

D2.2 Assessment of Foundational Competencies

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

Table D2.2 Assessment of Foundational Competencies for MPH in all Concentrations		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Evidence-based Approaches to Public Health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	EAB 705 Epidemiology and Public Health	EAB 705: Class assignments: Classic case studies that require students to apply the principles of epidemiology to real world examples.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	EAB 703 Biostatistics Methods for the Health Sciences EOH 740 Fundamentals of Environmental Health EOH 710 Fundamentals of Public Health	EAB 703: Week 3: homework assignment 2, question 1 EOH 740: Midterm & Final Exams: Answer exam questions on selected sources of environmental health data and data collection methods. EOH 710: Assignment 5 (Questions 3/4) asks students to describe the role of quantitative and qualitative research in assessing a population's health including study question, population, data collection methodology, and tools.
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	EAB 703 Biostatistics Methods for the Health Sciences HCA 701 U.S. Health Care System: Programs and Policies	EAB 703: Homework assignment 1, question 2 HCA 701: Analysis of comments from the Nevada Public Employee Benefits Program.*
4. Interpret results of data analysis for public health research, policy or practice	EAB 703 Biostatistics Methods for the Health Sciences EOH 740 Fundamentals of Environmental Health	EAB 703: Homework assignments 6 and 7 EOH 740: Research paper & presentation: Environmental health issues and interventions based on available data

Table D2.2 Assessment of Foundational Competencies for MPH in all Concentrations, Continued		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Public Health & Health Care Systems		
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Debates 3 and 4 in which teams debate current event issues in class. Term paper in which students review a current health policy or propose a new policy to improve health care services and exams.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	EOH 710 Fundamentals of Public Health	EOH 710: Assignment (group) completing "Root cause analysis worksheet" in which students identify the risk factors associated with a health problem.
Planning & Management to Promote Health		
7. Assess population needs, assets and capacities that affect communities' health	EOH 740 Fundamentals of Environmental Health HCA 701 U.S. Health Care System: Programs and Policies	EOH 740: Midterm & Final Exams: Answer exam questions on population growth, demographic transition, and related environmental issues HCA 701: Term paper in which students review a current health policy or propose a new policy to improve health care services as well as debates 2 and 4.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	EOH 740 Fundamentals of Environmental Health	EOH 740: Research paper & presentation: Environmental health issues and interventions addressing cultural barriers
9. Design a population-based policy, program, project or intervention	HED 720 Program Planning and Grant Writing	HED 720: Group Project and Presentation: Development of a comprehensive program plan in small groups including social assessment, epidemiological diagnosis, ecological and educational diagnosis, and program, administration, and policy design.
10. Explain basic principles and tools of budget and resource management	HED 720 Program Planning and Grant Writing	HED 720: Group Project and Presentation: Development of a comprehensive program plan in small groups including social assessment, epidemiological diagnosis, ecological and educational diagnosis, and program, administration, and policy design.
11. Select methods to evaluate public health programs	HED 720 Program Planning and Grant Writing	HED 720: Group Project and Presentation: Development of a comprehensive program plan in which students make sure that program objectives are SMART (specific, measureable, achievable, realistic, and timely).

Table D2.2 Assessment of Foundational Competencies for MPH in all Concentrations, Continued		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Policy in Public Health		
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Debates 1 and 2 in which teams debate current event issues in class. Term paper in which students review a current health policy or propose a new policy to improve health care services and exams.
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Term paper in which students review a current health policy or propose a new policy to improve health care services.
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Debates 1 and 4 in which teams debate current event issues in class.
15. Evaluate policies for their impact on public health and health equity	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Debates 1 and 4 in which teams debate current event issues in class. Term paper in which students review a current health policy or propose a new policy to improve health care services and exams.
Leadership		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Students describe the various ownership and organ-izational structures of the health care delivery system through exams and through the health policy paper. Students demonstrate leadership and collaboration through teamwork in various debates.
17. Apply negotiation and mediation skills to address organizational or community challenges	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Making Deals in Congress reflection paper.*
Communication		
18. Select communication strategies for different audiences and sectors	HCA 701 U.S. Health Care System: Programs and Policies	HCA 701: Debates in which teams debate current event issues in class.
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	HED 720 Program Planning and Grant Writing	HED 720: Group Project and Presentation: Development of a comprehensive program plan in small groups including social assessment, epidemiological diagnosis, ecological and educational diagnosis, and program, administration, and policy design (paper and presentation).
20. Describe the importance of cultural competence in communicating public health content	EOH 710 Fundamentals of Public Health	EOH 710: Group Assignment (Cultural Awareness Assignment) in which students describe the importance of cultural competency in a public health program.

Table D2.2 Assessment of Foundational Competencies for MPH in all Concentrations, Continued		
Competency	**Course number(s) or other educational requirements**	**Specific assessment opportunity**
Interprofessional Practice		
21. Perform effectively on interprofessional teams	EAB 703 Biostatistics Methods for the Health Sciences	EAB 703: In class, problem sets based on public health problems. This class has students from multiple disciplines including anthropology, biology, etc.
Systems Thinking		
22. Apply systems thinking tools to a public health issue	EAB 705 Epidemiology and Public Health	EAB 705: Research presentation in which students present on a disease or public health issue including causative agents using a system thinking model.

See electronic resource file more information regarding assessment opportunities.
*This is a new assignment. No work sample is available.

D2.3 Syllabi

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

See Electronic Resource File.

D2.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Many of our core courses cover these foundational competencies extensively. For example, competency number seven is covered in many courses during the program. Each time a competency is addressed the student is reminded of the importance of understanding these principles of public health.

Weaknesses

- As these competencies are compulsory, a few are only covered in one course or has had to be integrated into the curriculum. For example, competency number seventeen did not seem to fit in any of our courses and had to be added into HCA 701 through the examination of negotiation within health care and in government.

D3. DrPH Foundational Competencies (SPH and PHP, if applicable)

The DrPH is the professional doctoral degree in public health, designed to produce transformative academic and practice leaders with expertise in evidence-based public health practice and research. These individuals are able to convene diverse partners; communicate to effect change across a range of sectors and settings; synthesize and translate findings; and generate practice-based evidence that advances programs, policies, services and/or systems addressing population health. DrPH graduates demonstrate the competencies defined in this criterion.

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

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

Data & Analysis

1. **Explain qualitative, quantitative, mixed methods and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community and population) levels**
2. **Design a qualitative, quantitative, mixed methods, policy analysis or evaluation project to address a public health issue**
3. **Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring and evaluating policies and programs and to address a population's health**

Leadership, Management & Governance

4. **Propose strategies for health improvement and elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders and other partners**
5. **Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies**
6. **Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems**
7. **Create a strategic plan**
8. **Facilitate shared decision making through negotiation and consensus-building methods**
9. **Create organizational change strategies**
10. **Propose strategies to promote inclusion and equity within public health programs, policies and systems**
11. **Assess one's own strengths and weaknesses in leadership capacities, including cultural proficiency**
12. **Propose human, fiscal and other resources to achieve a strategic goal**
13. **Cultivate new resources and revenue streams to achieve a strategic goal**

Policy & Programs

14. **Design a system-level intervention to address a public health issue**
15. **Integrate knowledge of cultural values and practices in the design of public health policies and programs**
16. **Integrate scientific information, legal and regulatory approaches, ethical frameworks and varied stakeholder interests in policy development and analysis**
17. **Propose interprofessional team approaches to improving public health**

Education & Workforce Development

18. **Assess an audience's knowledge and learning needs**
19. **Deliver training or educational experiences that promote learning in academic, organizational or community settings**
20. **Use best practice modalities in pedagogical practices**

D3.1 Required Coursework for DrPH Degree

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

Not applicable.

D3.2 Assessment of Foundational Competencies

Required Documentation: Provide a matrix, in the format of Template D3-2, that indicates the assessment activity for each of the foundational competencies listed above (1-20). If the school or program addresses all of the listed foundational competencies in a single, common core curriculum, the school or program need only present a single matrix. If the school or program relies on concentration-specific courses to assess some of the foundational competencies listed above, the school or program must present a separate matrix for each concentration. (self-study document)

Not applicable.

D3.3 Syllabi

Required Documentation: Include the most recent syllabus from each course listed in Template D3-1, or written guidelines for any required elements listed in Template D3-1 that do not have a syllabus. (electronic resource file)

Not applicable.

D3.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Not applicable.

D4. MPH & DrPH Concentration Competencies (SPH and PHP)

MPH and DrPH graduates attain competencies in addition to the foundational competencies listed in Criteria D2 and D3. These competencies relate to the school or program's mission and/or to the area(s) of concentration.

The school or program defines at least five distinct competencies for each concentration or generalist degree at each degree level in addition to those listed in Criterion D2 or D3.

The list of competencies may expand on or enhance foundational competencies, but the school or program must define a specific set of statements that articulates the depth or enhancement for all concentrations and for generalist degrees. It is not sufficient to refer to the competencies in Criterion D2 or D3 as a response to this criterion.

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

These assessment activities may be spread throughout a student's plan of study.

Because this criterion defines competencies beyond the foundational competencies required of all MPH and DrPH students, assessment opportunities typically occur in courses that are required for a concentration or in courses that build on those intended to address foundational competencies. Assessment may occur in simulations, group projects, presentations, written products, etc.

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

D4.1 Competencies and Assessment for Concentration or Generalist MPH or DrPH

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

Table D4.1a Assessment of Competencies for MPH, Environmental and Occupational Health		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Characterize the biological, chemical, and physical hazards affecting human and ecosystem health.	EOH 601 Environmental Toxicology EOH 717 Food Safety and Public Health	EOH 601: 1. Pre-Proposal and Final Grant Proposal 2. Exams EOH 717: 1. Course paper and presentation
2. Understand the effects of environmental contaminants and infectious diseases on the human body and apply knowledge of these factors in developing prevention and management strategies and making policy recommendations.	EOH 601 Environmental Toxicology EOH 740 Fundamentals of Environmental Health	EOH 601: 1. Pre-Proposal and Final Grant Proposal 2. Exams EOH 740: 1. Exams 2. Research paper and presentation: Environmental Health Issues and Interventions
3. Perform complex literature searches that aggregate results from multiple sources, assess literature quality, and demonstrate relevance to the student's work.	EOH 740 Fundamentals of Environmental Health EOH 709 Scientific/Technical Writing for Health and Life Sciences	EOH 740: 1. Research paper and presentation: Environmental Health Issues and Interventions EOH 709: 1. Exams 1& 2 2. Research paper
4. Articulate the role of environmental health in the development of public policy and advocate for science-based environmental health policy positions.	EOH 740 Fundamentals of Environmental Health EOH 765 Seminar in Environmental Justice and Public Health	EOH 740: 1. Research paper & presentation: Environmental Health Issues and Interventions based on available data EOH 765 1. Environmental Justice Case Study Media Presentation
5. Effectively communicate research findings both in writing and orally to diverse stakeholders.	EOH 709 Scientific/Technical Writing for Health and Life Sciences EOH 747 Transmission of infectious Diseases	EOH 709 1. Research paper, oral presentation of research paper EOH 747: 1. Individual Project: Literature Review with Paper and Presentation
New 5. Determine and use appropriate scientific methodologies (tests and measurements) to validate hypotheses in environmental health settings*	EOH 747 Transmission of infectious Diseases EOH 794 Professional Paper in Environmental Health EOH 798 Thesis Research	EOH 747: 1. Individual Project: Literature Review with Paper and Presentation EOH 794: 1. Professional paper (i.e., capstone) EOH 798: 1. MPH thesis project

* This competency is new and will be implemented in the fall of 2018.

Table D4.1b Assessment of Competencies for MPH, Epidemiology and Biostatistics		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Explain the importance of epidemiology and biostatistics for informing scientific, ethical, economic, and political discussion of health issues.	EAB 705 Epidemiology and Public Health EAB 725 Epidemiology of Infectious Disease*	EAB 705: 1. Homework assignments 2. Classic cases; 3. Cohort/case-control assignment EAB 725: 1. Weekly class exercise discussions
2. Understand and apply proper terminology and definitions used in epidemiology and biostatistics.	EAB 703 Biostatistical Methods for the Health Sciences EAB 725 Epidemiology of Infectious Disease*	EAB 703: 1. Week 7: homework assignment 6, questions 2, 4 & 6 EAB 725: 1. Weekly class exercise discussions 2. Class presentation 3. Course paper
3. Identify key sources of data for epidemiologic and biostatistical studies.	EAB 700 Research Methods for Public Health EAB 703 Biostatistical methods for the Health Sciences	EAB 700: 1. Research paper 2. Oral presentation EAB 703: 1. Week 3: homework assignment 2, question 1
4. Comprehend ethical and legal principles pertaining to the collection, maintenance, use, and dissemination of data and other epidemiological information.	EAB 700 Research Methods for Public Health EAB 725 Epidemiology of Infectious Disease*	EAB 700: 1. Exam 2. Complete CITI training EAB 725: 1. Weekly class exercise discussions (Week 6: Surveillance and Reporting, Week 7: Disease Investigation, Week 12: Presenting Infectious Disease Data, Week 14: Legal, Ethical, and Policy Issues)
5. Monitor the occurrence of health outcomes, organizing data from surveillance, investigations, and other sources, and use those data to support the evaluation of the effectiveness of public health programs.	EAB 705 Epidemiology and Public Health EAB 715 Chronic Disease Epidemiology	EAB 705: 1. Homework assignments EAB 715: 1. Peer-Reviewed Article In-Class Discussion in relation to Guest Lecture

*Some courses are either new or significantly revised courses. Work samples may not be available.

Table D4.1c Assessment of Competencies for MPH, Health Care Administration and Policy		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Apply principles of strategic planning, marketing, and patient and staff experience as it applies to public health and/or a healthcare services organization.	HCA 730 Strategic Management of Health Services	HCA 730: 1. 5 Year Strategic Plan 2. Case Study
2. Apply performance improvement concepts to address organizational performance issues aligned with quality, cost, and access.	HCA 701 US Health Care System	HCA 701: 1. Term paper 2. Debate 4 class discussion exercise
3. Possess the ability to compile and analyze financial data: develop capital, operating, and cash flow budgets; analyze investment data; pro forma development.	HCA 716 Health Care Accounting and Finance	HCA 716: 1. Financial Condition Analysis 2. Case Study Analysis and Presentation
4. Apply organizational theory and behavior to develop, assess, and design or redesign health care organizations.	HCA 719 Operations and Quality Management of Health Services HCA 703 Management of Health Service Organizations and Systems	HCA 719: 1. Balanced Score Card Strategy Map and Excel data file. 2. Case Study HCA 703: 1. Application article discussion on topics related with motivational theories in organizational behavior 2. Case study analyses on organizational leadership, organizational power, politics and influence
5. Use information technology to operationally improve performance, data security, and integrity, and deliver patient transparency in health care.	HCA 720 Information Systems in Health Services Management	HCA 720: 1. The final group presentation 2. The comprehensive interview and report

Table D4.1d Assessment of Competencies for MPH, Social and Behavioral Health		
Competency	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Apply psychosocial and behavioral theory as a basis for planning, implement-ation, administration, management, and evaluation of health education/promotion programs.*	HED 720 Program Planning and Grant Writing in Health Promotion HED 730 Health Program Evaluation	HED 720: 1. Group Project HED 730: 1. Evaluation Plan
2. Examine factors that influence the process by which people learn health concepts.*	EOH 715 Qualitative Research Methods for Public Health HED 720 Program Planning and Grant Writing in Health Promotion	EOH 715: 1. Oral Presentation 2. Qualitative Proposal HED 720: 1. Group Project
3. Differentiate factors that enhance or impede the process of health education/promotion.*	HED 720 Program Planning and Grant Writing in Health Promotion HED 730 Health Program Evaluation	HED 720: 1.Group Project HED 730: 1. Evaluation Plan
4. Identify, develop, and deliver messages using a variety of communication strategies, methods, and techniques.*	EOH 715 Qualitative Research Methods for Public Health HED 720 Program Planning and Grant Writing in Health Promotion	EOH 715: 1. Oral Presentation 2. Qualitative Proposal HED 720: 1. Group Project
5. Involve priority populations, partners, and other stakeholders in the health promotion program planning and/or evaluation process.*	HED 720 Program Planning and Grant Writing in Health Promotion HED 730 Health Program Evaluation	HED 720: 1. Group Project HED 730: 1. Evaluation Plan

* These competencies have been rewritten and replaced. See Table D4.1e.

In the spring of 2018, the Social and Behavioral program faculty revised all their competencies, thus there are two sets of competencies presented in table format here. First are the old competencies that were in effect through the Spring 2018 semester (Table D4.1d); and second the new competencies that will be implemented starting in the Fall 2018 semester (Table D4.1e).

Table D4.1e Assessment of Competencies for MPH, Social and Behavioral Health		
New Competency*	**Course number(s) or other educational requirements**	**Specific assignment(s) that allow assessment**
1. Interpret and apply psychosocial and behavioral theory as a basis for planning, implementation, administration, management, and evaluation of health education/promotion programs.	HED 720 Program Planning and Grant Writing in Health Promotion HED 730 Health Program Evaluation	HED 720: 1. Group Project HED 730: 1. Evaluation Plan
2. Indicate relevant and targeted priority populations, partners, and other stakeholders in the health promotion evaluation process, from planning to dissemination.	HED 730: Health Program Evaluation	HED 730: 1. Exam #1 2. Evaluation Plan
3. Identify the links between social determinants of health; disease exposure, risk factors, and health outcomes.	EOH 760: Racial and Ethnic Disparities in Health EOH 705: Social Epidemiology	EOH 760: 1. Reaction Papers 2. Exam 3. Final Paper EOH 705: 1. Project Concept Paper 2. Final Project
4. Describe the socio-political dynamics that can promote health equity and/or contribute to health disparities.	EOH 760: Racial and Ethnic Disparities in Health EOH 705: Social Epidemiology	EOH 760: 1. Reaction Papers 2. Final Paper EOH 705: 1. Project Concept Paper 2. Final Project
5. Define and illustrate the utilization of evidence base strategies for improving health equity, decreasing health disparities, and/or impacting the social determinants of health.	EOH 760: Racial and Ethnic Disparities in Health EOH 705: Social Epidemiology	EOH 760: 1. Reaction Papers 2. Final Paper EOH 705: 1. Project Concept Paper 2. Final Project

*To be implemented in fall 2018.

D4.2 Degrees Allowing Students to Tailor Competencies

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

Not applicable.

D4.3 Syllabi

Required Documentation: Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus. (electronic resource file)

See Electronic Resource File.

D4.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The track specific competencies are well addressed throughout the curriculum, oftentimes in over four courses and assessed in various ways.

Weaknesses

- Some courses that cover a competency particularly well are not offered annually and some are new courses that will be offered in the future.

D5. MPH Applied Practice Experiences (SPH and PHP)

MPH students demonstrate competency attainment through applied practice experiences.

Applied practice experiences may be concentrated in time or may be spread throughout a student's enrollment. Opportunities may include the following:

- **a practicum or internship completed during a summer or academic term**
- **course-based activities** (e.g.,, **performing a needed task for a public health or health care organization under the supervision of a faculty member as an individual or group of students)**
- **activities linked to service learning, as defined by the program, school or university**
- **co-curricular activities (e.g., service and volunteer opportunities, such as those organized by a student association)**
- **a blend of for-credit and/or not-for-credit activities**

Applied practice experiences may involve governmental, non-governmental, non-profit, industrial and for-profit settings or appropriate university-affiliated settings. To be appropriate for applied practice experience activities, university-affiliated settings must be primarily focused on community engagement, typically with external partners. University health promotion or wellness centers may also be appropriate.

The school or program identifies sites in a manner that is sensitive to the needs of the agencies or organizations involved. Activities meeting the applied practice experience should be mutually beneficial to both the site and the student.

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

The school or program assesses each student's competency attainment in practical and applied settings through a portfolio approach, which demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, journal entries, completed tests, projects, videos, multi-media presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the school or program or by individual students) in any physical or electronic form chosen by the school or program.

The materials may originate from multiple experiences (e.g., applied community-based courses and service learning courses throughout the curriculum) or a single, intensive experience (e.g., an internship requiring a significant time commitment with one site). While students may complete experiences as individuals or as groups in a structured experience, each student must present documentation demonstrating individual competency attainment.

Combined degree students have opportunities to integrate and apply their learning from both degree programs through applied practice experiences.

The school or program structures applied practice experience requirements to support its mission and students' career goals, to the extent possible.

D5.1 Competencies Attained in MPH Applied Practice Experiences

Required Documentation: Present evidence that the school or program identifies competencies attained in applied practice experiences for each MPH student in the format of Template D5-1. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file. (self-study document)

The School of Community Health Sciences requires students pursuing the MPH degree to participate in experiential learning by completing an internship with a partner agency. Internships are designed to bridge the gap between classroom learning and the practice of public health, and are tailored to meet the needs of sponsoring agencies and the interests of the students. See https://www.unlv.edu/publichealth/mph-internship-program for details.

To complete the three required internship credits, students enroll in either EOH 793 (EAB, EOH and SBH concentrations) or HCA 793 (HCAP concentration). HCA 793 is also the internship course required for students enrolled in the Masters of Healthcare Administration program. By enrolling in this course, HCAP students are able to better take advantage of internship opportunities available in healthcare administration and allows for a more suitable coordination with community partners.

Based on feedback from students, alumni and partner organizations, the number of hours required for internship completion was increased to 200 hours as of the fall semester 2017. Students admitted prior to this date will still be allowed to complete the previous requirement of 120 hours if it is completed by the end of the spring 2019 semester. Students are required to complete the full internship hours regardless of their work history or educational background.

As many students in the program also work full-time, the completion of the internship hours can be challenging. In developing their internship project plan, students have the flexibility to develop a schedule that allows them to complete the internship, with agreement from their sponsoring organization, while still meeting their professional obligations. The internship credits may be distributed over multiple semesters, and students are not required to follow a strict academic calendar when developing their schedule.

Full-time students are advised to complete their internship during their third semester or during the summer between their first and second year to make satisfactory progress toward their degree. Part-time students are advised to begin the internship near the middle of their graduate studies. This allows students to complete their internship prior to the final semester, as the demands of writing a thesis or professional paper can interfere with the student's ability to complete the required internship hours and may delay graduation.

Students are also not allowed to begin the internship prior to having sufficient classroom preparation, and the internship is an opportunity to extend and refine skills that have already been introduced through classroom work. As part of the internship project plan, students are required to explain which coursework prepared them for the internship (this also serves as a way to help the preceptor understand their background and ensure that they are properly prepared for the internship).

The two internship course instructors serve as the internship coordinators and are responsible for managing all aspects of the internship program. With the current size of the MPH program, the coordinators are able to provide individual assistance in identifying and applying for internships. The internship coordinators are also responsible for developing relationships with new partners and assisting host agencies as they are looking for student interns. The school's Executive Director of Community Engagement shares these responsibilities and provides assistance with legal documents (i.e., educational affiliation agreements) and administrative matters.

The internship project plan serves as the contract between the student, the instructor, and the host agency. The plan is designed around allowing the student attainment of at least five competencies, three of which are foundational competencies and two that can be foundational competencies or track specific competencies. One foundational competency will be the same for all students and is tied to the internship course requirements. This competency is MPH 19: Communicate audience-appropriate public health content, both in writing and through oral presentation. Students will select four other competencies based on their project; two of these must be MPH core competencies. Students are required to explain how they will show that they have attained the competencies through internship work products and course requirements.

Students are evaluated through two papers required at the end of the internship, one discussing the specifics of their project and a personal reflection on their future, their skills, and the agency. Students are also required to present a poster at the annual Internship Poster Day/Awards Ceremony held at the end of each spring semester. Students formally evaluate their preceptors, and the preceptors evaluate the students at the end of the internship, and there are regular, informal, evaluations during the internship (i.e., required check-ins and conversations between the internship coordinator and internship preceptors).

Preceptors are approved by the internship coordinator as part of the approval of the project plan. Preceptors are evaluated by the internship coordinator based on their educational background and employment, as well as having the mentoring skills needed to make the internship successful. Internship sites are also approved by the internship coordinator as part of the project plan approval. The plan must list general agency details as well as information about resources available to host a student intern.

D5.2 Requirements of Applied Practice Experience

Required Documentation: Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience. (electronic resource file)

See Electronic Resource File.

D5.3 Practice-Related Materials

Required Documentation: Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The school or program must provide samples of complete sets of materials (ie, the documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the school or program has not produced five students for which complete samples are available, note this and provide all available samples. (electronic resource file)

There has only been one student from the DMD-MPH program to complete the internship or graduate. Her internship project can be seen in the electronic resource file. See Electronic Resource File.

D5.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

<u>Strengths</u>

- Several students in the MPH Program have obtained full-time, post-graduate employment with their respective agency as a result of their internship experience.
- We have several agencies who consistently request MPH student interns. This speaks to the quality of the students that we have sent into the workforce.
- Students learn skills needed for success in the workforce, from how to dress, to how to prepare a résumé, interview, and network with leaders.

<u>Weaknesses</u>

- Opportunities for paid internships are rare. The vast majority of community partners do not have the resources to offer paid internships, and students must pay to enroll in course credits.
    - Plans for improvement in this area: our Director of Development has been working to identify scholarships that will allow students to obtain at least some money while completing the internship, and this is part of the school's financial plan for the future.
- Students and preceptors both indicated during the 2016 Assessment Summit that the number of hours required was not sufficient to complete a project.
    - Plans for improvement in this area: we have increased the hours from 120 to 200. This will take some time to fully implement as it was been in place for a short period of time, and it is only required for the students entering the program in the fall of 2017 and beyond.

D6. DrPH Applied Practice Experience

Regardless of the amount or level of prior experience, all DrPH students engage in one or more applied practice experiences in which students are responsible for completion of at least one project that is meaningful for an organization and to advanced public health practice.

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

Relevant organizations may include governmental, non-governmental, non-profit, industrial, and for-profit settings. The school or program identifies sites in a manner that is sensitive to the needs of the agencies or organizations involved. Sites should benefit from students' experiences. The intention of this criterion is that the applied practice experience should take place within an organization external to the student's school or program so that it is not merely an academic exercise, but application of learning to a "real world" setting. The applied practice experience may be completed within a student's own work setting.

DrPH programs ensure that graduates have significant advanced-level practical experiences collaborating with practitioners, allowing opportunities to develop leadership competencies and contribute to the field.

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

This criterion does not define a minimum number of hours for the applied practice experience, but it does require the school or program to identify substantive, quality opportunities that address the identified competencies.

D6.1 Competencies Attained in DrPH Applied Practice Experiences

Required Documentation: Present evidence that the school or program identifies competencies attained in applied practice experiences for each DrPH student in the format of Template D6-1. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file. (self-study document)

Not Applicable.

D6.2 Demonstration of Leadership Competencies

Required Documentation: Explain, with references to specific deliverables or other requirements, the manner through which the school or program ensures that the applied practice experience requires students to demonstrate leadership competencies. (self-study document)

Not Applicable.

D6.3 Practice-Related Materials

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

Not Applicable.

D6.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Not Applicable.

D7. MPH Integrative Learning Experience (SPH and PHP)

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

The ILE represents a culminating experience and may take many forms, such as a practice-based project, essay-based comprehensive exam, capstone course, integrative seminar, etc. Regardless of form, the student produces a high-quality written product that is appropriate for the student's educational and professional objectives. Written products might include the following: program evaluation report, training manual, policy statement, take-home comprehensive essay exam, legislative testimony with accompanying supporting research, etc. Ideally, the written product is developed and delivered in a manner that is useful to external stakeholders, such as non-profit or governmental organizations.

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

The ILE is completed at or near the end of the program of study (e.g., in the final year or term). The experience may be group-based or individual. In group-based experiences, the school or program documents that the experience provides opportunities for individualized assessment of outcomes.

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

Combined (dual, joint, concurrent) degree students should have opportunities to incorporate their learning from both degree programs in a unique integrative experience.

D7.1 MPH Integrative Learning Experience

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

Table D7.1 MPH Integrative Learning Experience for All Concentrations

Integrative learning experience (list all options)	How competencies are synthesized
Professional Paper	The Advisory Committee Chair approves the proposal and identified competencies*; the advisory committee rates the student level of competency integration on the faculty evaluation of the student survey given following the final defense.
Thesis Research	The Advisory Committee Chair approves the proposal and identified competencies chosen by the student; the advisory committee rates the student level of competency integration on the faculty evaluation of the student survey given following the final defense.

*Note that the competencies are decided upon between the student and the Advisory Committee Chair.

D7.2 Process, Expectations, and Assessment

Required Documentation: Briefly summarize the process, expectations and assessment for each integrative learning experience. (self-study document)

Integrative Learning Experiences

Students, in conjunction with their advisory committee chair, select a topic, competencies, and methods for their integrative learning experience in the form of a thesis or professional paper. Students must formally propose their plan, in writing and orally in a prospectus, to their committee. The written prospectus is submitted to the committee at least two weeks prior to the oral presentation. The committee either approves or rejects the proposal.

The written part of the prospectus should include:

Cover page: Proposed title, student's name, department, and committee members.

Abstract: A one-page summary of the proposal.

Chapter 1: Introduction. This section should present a detailed discussion of the problem to be addressed by the research, the objective of the research, and its significance to the field.

Chapter 2: Background and significance. This section includes a detailed review of the scientific literature that provides background information and support for the proposed research. The purpose of this section is to demonstrate that the student understands what is currently known about the topic, gaps in knowledge, problems, or issues requiring further study, and how the proposed study will address these gaps/problems.

Chapter 3: Methods. This section should provide, at a minimum, a step-by-step description of the research question, hypotheses, theoretical framework, research design, data sources, protection of human subjects, analytical methods, and research limitations.

References: Complete citations for all referenced works must be included.

The oral part of the prospectus is a 30-minute public PowerPoint presentation of the research plan that reflects the content of the three primary chapters in the written document followed by a question and answer session. Students, faculty, and other interested persons are invited to attend prospectus presentations.

The committee deliberates privately to determine whether the student is ready to proceed. There are three possible decisions the committee can render:

Pass – The student is able to begin their research. The Committee may only have minor edits or suggestions.

Pass with Conditions – The committee may ask the student to modify the written document, address additional issues, or respond to any committee questions or concerns. The student will submit the revised written prospectus to the committee. The student does not have to repeat the oral presentation.

Fail – If the student fails the prospectus he must arrange a meeting with their Advisor to discuss options for addressing the identified problems. Students may repeat the prospectus once. If the student fails any part of the prospectus (written/oral or both) a second time he will be separated from the program.

Professional Paper

The professional paper is a project relevant to the student's professional and academic background; therefore, it varies from student to student. The professional paper may be a systematic literature review related to the field of public health. The specific format to be used will be decided upon at the oral prospectus defense. The professional paper is designed to demonstrate program evaluation skills that students have acquired during their graduate education. Students should consult their advisory committee chair to determine if the professional paper is an appropriate option.

Thesis

The written thesis is the culmination of the student's research. The final manuscript should present the

totality of the research plan, process, and results in a well-written, detailed manner. At a minimum, the final thesis includes final versions of the three chapters presented for the prospectus, a fourth chapter with a detailed presentation of the results/findings from the research, and a fifth chapter providing a detailed discussion of the implications of the results for the student's field of study and where appropriate, recommendations for future policy and practice.

Final Oral Defense

Upon completion of the thesis or professional paper, the student must pass a final oral examination that involves the successful defense of their study. All committee members must be present for this examination and may question the student following presentation of the study. Similar to the prospectus, the final oral defense involves a 30-45 minute PowerPoint presentation, followed by the student responding to questions from the committee and the audience.

The committee deliberates in private to make the final decision. Additional revisions to the thesis or professional paper may be requested by the committee members and must be completed and approved by the committee chair prior to submitting the Culminating Experience Results form, which indicates that the student passed or failed.

All theses must be submitted to iThenticate for a similarity check prior to submission of the final document. A copy of the similarity report must be submitted to the student's committee at the time of the final defense, and it will be taken into account when determining the outcome of the defense. If the student passes their defense, the report shall be attached to the Culminating Experience Results form before submission to the Graduate College. See https://www.unlv.edu/graduatecollege/thesis for UNLV thesis information. All theses become part of the UNLV Library repository. Digital Scholarship@UNLV (https://digitalscholarship.unlv.edu/) is the institutional repository of the University of Nevada, Las Vegas. It holds scholarship from UNLV faculty, staff, and students. Digital Scholarship@UNLV provides a wider audience to the scholarly output of UNLV as well as assures its long-term preservation. Professional papers are not required to be submitted to the Graduate College, and only the abstract with its accompanying culminating experience form is required. These are archived at the SCHS, and we are in the processes of building a searchable database for professional papers. Students are greatly encouraged to work with their Advisor to submit their capstone project for publication to a peer-reviewed journal.

Assessment

Upon completion of the final oral defense, the advisory committee chair and committee members assess the student's ability to apply the foundational and track specific competencies. Additional assessment of the integrative learning experience is under development.

D7.3 Communication of Policies and Procedures to Students

Required Documentation: Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students. (electronic resource file)

See Electronic Resource File.

D7.4 Assessment of Selected Competencies

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

See Electronic Resource File.

D7.5 Deliverables

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

See Electronic Resource File.

D7.6 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The integrated learning experience is unique for each student, which provides them with an opportunity to explore their interests and career aspirations.
- Conducting a systematic literature review for the professional paper has resulted in publication of several of this type of capstone project.

Weaknesses

- Pass/Fail grading does not indicate the level of success a student achieves, only that the minimum expectations were met. This could be enhanced with a detailed rubric, which would provide feedback to the student on their accomplishment.

D8. DrPH Integrative Learning Experience (SPH and PHP, if applicable)

As part of an integrative learning experience, DrPH candidates generate field-based products consistent with advanced practice designed to influence programs, policies or systems addressing public health. The products demonstrate synthesis of foundational and concentration- specific competencies.
The integrative learning experience is completed at or near the end of the program of study. It may take many forms consistent with advanced, doctoral-level studies and university policies but must require, at a minimum, production of a high-quality written product.

D8.1 DrPH Integrative Learning Experience

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

Not Applicable.

D8.2 Process, Expectations, and Assessment

Required Documentation: Briefly summarize the process, expectations and assessment for each integrative learning experience. (self-study document)

Not Applicable.

D8.3 Communication of Policies and Procedures to Students

Required Documentation: Provide documentation, including syllabi and/or handbooks, that communicates integrative learning experience policies and procedures to students. (electronic resource file)

Not Applicable.

D8.4 Assessment of Selected Competencies

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

Not Applicable.

D8.5 Deliverables

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

Not Applicable.

D8.6 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Not Applicable.

D9. Public Health Bachelor's Degree General Curriculum (SPH and PHP, if applicable)

The overall undergraduate curriculum (e.g., general education, liberal learning, essential knowledge and competencies, etc.) introduces students to the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.

- **the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease**
- **the foundations of social and behavioral sciences**
- **basic statistics**
- **the humanities/fine arts**

D9.1 Required Coursework

Required Documentation: List the coursework required for the school or program's public health bachelor's degree. (self-study document)

Table D9.1 Requirements for Bachelor of Science in Public Health 2017-2018		
Course number	**Course name**	**Credits**
General Education Requirements (44 Credits)		
HSC 100	Introduction to Academia and Scholarship in Health Sciences	2
PBH 205	Introduction to Public Health	3
ENG 101	English Composition I	3
ENG 102	English Composition II	3
PSC 101 or	Introduction to American Politics	4
HIST 100 or	Historical Issues and Contemporary Society	4
Various Courses	Constitutions Requirement: Varies	6
MATH 124 or	College Algebra	3
MATH 126	Precalculus I	3
KIN 300	Statistics for the Health Sciences	3
PBH 200	Multicultural Health	3
PBH 330	Global Health	3
BIOL 189	Fundamentals of Life Science	4
ENV 101	Introduction to Environmental Science	3
PHIL 102	Critical Thinking and Reasoning	3
Humanities	Humanities Courses: Varies	6
Fine Arts	Fine Arts Courses: Varies	3
Electives		
Electives	Varies	24
Public Health Core Requirements (36 Credits)		
PBH 165	Personal Health Across the Lifespan	3
PBH 202	Introduction to Epidemiology	3
PBH 210	Principles of Health Promotion	3
PBH 225	History of Public Health	3
PBH 275	Injury Prevention and Control	3
PBH 360	Research Methods for Public Health	3
PBH 460	Health Ecology and Sustainability	3
Optional	Complete 2 of 3 of the following:	
PBH 407	Stress Management	3
PBH 429	Education for Sexuality	3
PBH 435	Health Studies on Dangerous Drugs	3
Optional	Complete 3 of 4 of the following:	
PBH 340	Built Environment and Health	3
PBH 365	Applied Biostatistics for Public Health	3
PBH 445	Food Access and Health	3
PBH 455	Active Transport, Physical Activity and Health	3
Additional Degree Requirements (12 Credits)		
HCA 175	US Health Care	3
Physical Science	Physical Science: Varies	3
Economics	Economics: Varies	3
Practicum and Culminating Experience (4 Credits)		
PBH 495	Public Health Capstone	4
	Total	**120**

D9.2 Required Components and Length of Degree

Required Documentation: Provide official documentation of the required components and total length of the degree, in the form of an institutional catalog or online resource. Provide hyperlinks to documents if they are available online, or include copies of any documents that are not available online. (electronic resource file)

The undergraduate 2017-2018 catalog can be viewed here:
http://catalog.unlv.edu/preview_program.php?catoid=19&poid=4831&returnto=3511

Degree Worksheets can be viewed here: https://www.unlv.edu/degree/bs-public-health

D9.3 Student Introduction to Domains

Required Documentation: Provide a matrix, in the format of Template D9-1, that indicates the courses/experience(s) that ensure that students are introduced to each of the domains indicated. Template D9-1 requires the school or program to identify the experiences that introduce each domain. (self-study document)

Table D9.3 Undergraduate Student Introduction to General Domains			
Domains	**Courses and other learning experiences through which students are introduced to the domains specified**		
Science: Introduction to the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease			
Life and Physical Sciences (7 credits): Biology 189 or higher and Environmental Science 101 (required)	**Fundamentals of Life Science**	BIOL 189	Survey of contemporary biology; includes structure, function, interactions and evolutionary origins of living systems. For Biological Sciences majors and others who require biology as part of their professional career preparation.
	Principles of Modern Biology I	BIOL 196	Structural and chemical nature of cells, complex organisms and cellular environments. Transmission and molecular genetics, cell communication, reproduction and energetics. For Biological Sciences majors and others pursuing advanced study in biology.
	Principles of Modern Biology II	BIOL 197	Whole-organism biology in an evolutionary context; biodiversity, structure, function and reproduction of prokaryotic and eukaryotic organisms. Evolutionary and ecological pattern and process. For Biological Sciences majors and others pursuing advanced study in biology.
Physical Science (3 Credits): Any AST course; ANTH 102, 110L; NUTR 121; any CHEM course (except CHEM 103 and CHEM 108); EGG 100, 150; ENV 220; any GEOG course; any GEOL course; any PHYS course.	**Introduction to Environmental Science**	ENV 101	Introduction to the relationship of humans and the environment. Selected aspects of current thinking and research concerning the impact of industrialization and urbanization on environmental quality, including the population explosion; the potential decline of the affluent society by the depletion of natural resources; the pollution of air, land surface and water; the public agencies and policies designated to solve environmental problems.
	Introduction to Physical Anthropology	ANTH 102	Origin, evolution, and geographical distribution of humans, the growth of populations and how they change over time, genetics and heredity, human adaptation and human diversity. Emphasizes the origin and evolution of humans and their place in nature.
	For more examples of Life and Physical Science courses refer to: http://catalog.unlv.edu/content.php?catoid=19&navoid=3502		

Table D9.3 Undergraduate Student Introduction to General Domains, continued			
Domains	**Courses and other learning experiences through which students are introduced to the domains specified**		
Social and Behavioral Sciences: Introduction to the foundations of social and behavioral sciences			
Social Sciences (9 Credits): Any AAS course; any ANTH course (except ANTH 102); CED 117; CEE 307; CRJ 104, 270, 435, 436, 438, 469; COM 102; any ECON course; PBH 165, 429, 435; LAS 101; MFT 150, 350, 360; any PSC course; any PSY course; EPY 303; SW 101; any SOC course; or any WMST course (excluding those cross-listed with Humanities and Fine Arts). All statistics courses are excluded.	**Personal Health Across the Lifespan**	PBH 165	Study of health principles as they apply to college and adult life, including mental health, sexuality, substance abuse, nutrition, health care, and environmental health. Increases understanding of underlying causes of, and cultural, social, and personal influences on these principles, and helps move students toward optimal physical, emotional, social, and mental health.
	Education for Sexuality	PBH 429	Physical, mental-emotional, and social aspects of sexuality including sexual communication, relationships, gender, decision making and sexual pleasure and function. Structured to prepare individuals to conduct meaningful learning experiences in personal and family life sex education.
	Health Studies on Dangerous Drugs	PBH 435	Analysis and evaluation of scientific data on effects of tobacco, alcohol, narcotics, and other dangerous drugs. Current problems relating to control of use and abuse of these drugs and the role of education in preventing substance abuse.
	Global Economics	ECON 190	Introduction to the economic organization of global markets. Analysis of international trade and finance, transnational corporations, global economic institutions, economic growth and economic systems.
	The Economics of Discrimination	ECON 180	Investigates the economic causes, effects, and remedies of discrimination based on age, ethnicity, gender, religion, national origin, or sexual orientation.
	For more examples of Social and Behavioral Sciences refer to: http://catalog.unlv.edu/content.php?catoid=19&navoid=3502		
Math/Quantitative Reasoning: Introduction to basic statistics			
Mathematics (6 credits): MATH 124 or 126 and KIN 300	**College Algebra**	MATH 124	Equations and inequalities; relations and functions; linear, quadratic, polynomial, exponential, and logarithm functions; systems of linear equations and inequalities; matrices; sequences and series; binomial theorem.
	Precalculus I	MATH 126	Topics include fundamentals of algebra, functions and graphs, polynomial, rational, exponential, and logarithmic functions, and systems of linear equations.
	Statistics for the Health Sciences	KIN 300	Introduction to quantitative methods in the analysis and interpretation of data from research in the health and human movement sciences. Emphasis on conceptual understanding, appropriate application of tests, and interpretation of results.
	Introduction to Statistics	STAT 152	Basic statistical methods with emphasis on application, descriptive statistics, graphical presentation, point and interval estimation, hypothesis testing, regression, experimental design.

Table D9.3 Undergraduate Student Introduction to General Domains, continued			
Domains	**Courses and other learning experiences through which students are introduced to the domains specified**		
Humanities/Fine Arts: Introduction to the humanities/fine arts			
Humanities (6 Credits): Any English Department literature course, any foreign language, and any HIST course (Afro-American studies if cross-listed), philosophy (except 102, 105, or 114), AAD 201/201D, COM 101, COM 211, COM 216, GWK 300, any WMST course cross-listed with Humanities	**Elementary Spanish I**	SPAN 113	Development of language skills in listening, speaking, reading, and writing; structural analysis. Emphasis placed on speaking.
	Elementary French I	FREN 113	Development of language skills in listening, speaking, reading, and writing; structural analysis. Emphasis on speaking.
	Oral Communication	COM 101	Theory and performance work in extemporaneous speaking and related speaking experiences. Emphasis placed on developing skills necessary for effective public speaking.
	Survey of Rhetorical Studies	COM 211	Survey of historical development of various rhetorical canons, concepts, and perspectives, beginning with ancient Greek and Roman discourse and concluding with contemporary rhetoric.
	History of the Built Environment	AAD 201	Relationships among art, architecture, and literature (fiction and non-fiction) from the twenty-fifth century BCE to the present. Emphasis on the built environment as a manifestation of cultural forces and design aesthetics.
	For more examples of Humanities refer to: http://catalog.unlv.edu/content.php?catoid=19&navoid=3502		
Fine Arts (3 Credits): AAE 100; AAI 100; LAND 100; ART 101, 107, 211, 212, 135, 160, 216, 260, 261; CFA 103; DAN 100, 101, 103, 104, 166/AAS 166; FIS 100, 110; MUS 101, 121, 125, 127*, 129, 134*, or THTR 100, 105, 124, 175	**Introduction to Architecture**	AAE 100	This survey of architectural design focuses on historical, theoretical, social, technical, and environmental forces that shape the design profession. This course is for majors and non-majors who wish to explore this field as a career choice. Collaborative design communication skills are learned and applied in course design challenges.
	Introduction to Interior Design	AAI 100	Survey of interior design. Includes historical examples and the theoretical, social, technical, and environmental forces that shape this profession. Especially for majors and non-majors who wish to explore this field as a career choice.
	Music Fundamentals	MUS 101	Introduction to music reading. Study of notation, rhythm, scales, intervals, and chords with emphasis on ear training. Recommended for elementary education majors and anyone interested in learning to sing or play an instrument.
	Introduction to Theatre	THTR 100	Explores theatre as a cultural attribute of world society. Special focus on theatre as an expression of culture, a representation of international themes, and its contribution to the development of civilization.
	For more examples of Fine Arts refer to: http://catalog.unlv.edu/content.php?catoid=19&navoid=3502		

D9.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The general education offered at UNLV is well rounded and intends to expose students to areas such as humanities and fine arts as well as courses that are international and multicultural in nature. The Nevada constitution requirement ensures that students have studied the Nevada and US Constitutions.
- The program integrates some of the general education elements into the public health curriculum. For example, PBH 330 – Global Health is a required course and satisfies the international requirement, and the second year seminar, PBH 205 – Introduction to Public Health, is both the required seminar and is focused on public health.
- This degree also has 24 credits of electives, which allows students to take a minor in another complementary area or more public health courses depending on their area of interest.
- Each academic unit has identified a program-wide course reviewer. It is the job of the reviewer to find equivalent courses for courses brought to the university from other institutions. This allows for a smoother transition / maximum credit usage for a transfer student from another institution to UNLV.
- Mid-semester general education courses are offered to students to assist them in maintaining full-time status (this has athletic and scholarship eligibility implications).

Weaknesses

- The quality of instruction for courses taught outside the department is beyond the control of the School of Community Health Sciences.
- The timely scheduling of general education courses is dependent on any department that offers a course that an undergraduate student in public health might take. The posting of semester-by-semester or yearly course rotations from such academic units vary from site to site (from none to comprehensive).

D10. Public Health Bachelor's Degree Foundational Domains

The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (ie, the school or program may identify multiple learning experiences that address a domain— the domains listed below do not each require a single designated course).

- **the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society**
- **the basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice**
- **the concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations**
- **the underlying science of human health and disease, including opportunities for promoting and protecting health across the life course**
- **the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities**
- **the fundamental concepts and features of project implementation, including planning, assessment and evaluation**
- **the fundamental characteristics and organizational structures of the US health system as well as the differences between systems in other countries**
- **basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government**
- **basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology**

If the school or program intends to prepare students for a specific credential, the curriculum must also address the areas of instruction required for credential eligibility (e.g., CHES).

D10.1 Student Exposure to Domains

Required Documentation: Provide a matrix, in the format of Template D10-1, that indicates the courses/experience(s) that ensure that students are exposed to each of the domains indicated. Template D10-1 requires the school or program to identify the learning experiences that introduce and reinforce each domain. (self-study document)

Please note that the table below uses specific terms. The school defines an "I" as an assessment of a domain that is covered in a class but is only introduced or briefly covered and may or may not be evaluated as a part of an assignment quiz, exam, or discussion. The "C" designation is applied if the assessment of the domain reveals that the information is emphasized in the class through either lectures, supportive assignments, testing, or a combination of these strategies. Please note that instructors for courses taught over multiple sections came together to determine which domains were covered and how, in each of those courses.

Table D10.1 Undergraduate Exposure to Public Health Domains																
Public Health Domains	**Course Name and Number**															
	PBH 165	PBH 200	PBH 202	PBH 205	PBH 210	PBH 275	PBH 330	PBH 360	PBH 365	PBH 407	PBH 429	PBH 435	PBH 445	PBH 460	HCA 175
Overview of Public Health: Address the history and philosophy of public health as well as its core values, concepts, and functions across the globe and in society															
Public Health History		IC	I	IC	C						I			C	IC
Public Health Philosophy	IC	I		I	IC						I	I		C	IC
Core PH Values	IC	I	IC	I	C		I					I		C	I
Core PH Concepts	IC	IC	IC	IC	C	C		I						C	IC
Global Functions of Public Health		IC	I				I							IC	
Societal Functions of Public Health	IC	IC		IC	C	C	I	I			IC	IC		IC	
Role and Importance of Data in Public Health: Address the basic concepts, methods, and tools of public health data collection, use, and analysis and why evidence-based approaches are an essential part of public health practice															
Basic Concepts of Data Collection			IC	I	C	I		IC	I		IC	C	IC		
Basic Methods of Data Collection			IC	I	C			IC	I	C			IC	C	
Basic Tools of Data Collection			IC	I				IC	I	C		I	IC	IC	
Data Usage			IC	I		C	I	IC	IC		IC		IC		IC
Data Analysis	IC		IC	I	C			I	IC	C	IC			C	I
Evidence-based Approaches	IC	I	IC		C	I				C		I	IC	C	I
Identifying and Addressing Population Health Challenges: Address the concepts of population health, and the basic processes, approaches, and interventions that identify and address the major health-related needs and concerns of populations															
Population Health Concepts		IC	IC	IC	IC	C	I	I		C	I	I	C	C	IC
Introduction to Processes and Approaches to Identify Needs and Concerns of Populations		IC	IC	I	I	I	I	IC						IC	IC
Introduction to Approaches and Interventions to Address Needs and Concerns of Populations		I			I	I	I	I		C		I		IC	IC
Human Health: Address the underlying science of human health and disease including opportunities for promoting and protecting health across the life course															
Science of Human Health and Disease	IC		I	I						C	IC	IC		IC	
Health Promotion	IC	IC		IC	IC		I			C	IC			IC	
Health Protection	IC	I								C				IC	

Table D10.1 Undergraduate Exposure to Public Health Domains, continued																
Public Health Domains	**Course Name and Number**															
	PBH 165	PBH 200	PBH 202	PBH 205	PBH 210	PBH 275	PBH 330	PBH 360	PBH 365	PBH 407	PBH 429	PBH 435	PBH 445	PBH 460	HCA 175
Determinants of Health: Address the socio-economic, behavioral, biological, environmental, and other factors that impact human health and contribute to health disparities															
Socio-economic Impacts on Human Health and Health Disparities		IC	I		C	C	I			C	I	I	C	IC	IC
Behavioral Factors Impacts on Human Health and Health Disparities	IC	IC	I	IC	C	I	I			C	I	I		IC	IC
Biological Factors Impacts on Human Health and Health Disparities		I	I	I	C		I				I	IC		IC	IC
Environmental Factors Impacts on Human Health and Health Disparities		I	I	I	C	C	I			C			C	IC	IC
Project Implementation: Address the fundamental concepts and features of project implementation, including planning, assessment, and evaluation															
Introduction to Planning Concepts and Features			IC					I			I				
Introduction to Assessment Concepts and Features			IC					I		C					
Introduction to Evaluation Concepts and Features			IC					I		C		I			
Overview of the Health System: Address the fundamental characteristics and organizational structures of the U.S. health system as well as to the differences in systems in other countries															
Characteristics and Structures of the U.S. Health System	IC	I		I	I							I			IC
Comparative Health Systems	IC						I								IC
Health Policy, Law, Ethics, and Economics: Address the basic concepts of legal, ethical, economic, and regulatory dimensions of health care and public health policy, and the roles, influences and responsibilities of the different agencies and branches of government															
Legal dimensions of health care and public health policy			I			C						IC			IC
Ethical dimensions of health care and public health policy		I	I	I			I	IC		C		IC			IC
Economical dimensions of health care and public health policy		I		I			I				I				IC
Regulatory dimensions of health care and public health policy				I											IC
Governmental Agency Roles in health care and public health policy	I				C						I	I		IC	IC
Health Communications: Address the basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology															
Technical writing			IC			C		IC	IC					IC	IC
Professional writing				I	C		I	IC			IC		C	IC	IC
Use of Mass Media	I				C						IC				
Use of Electronic Technology	I	IC	IC	I	C	I	I							IC	

D10.2 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- These Public Health Bachelor's Degree Foundational Domains align with our curriculum. They are covered extensively in many courses, as this is just a sampling of those courses. Students receive instruction on these domains throughout our undergraduate program.
- All domains and sub-domains (100%) have been judged to have an "I" component in the identified lower division courses.

Weaknesses

- No categorical standards exist/are known/have been determined for the values reported below, making it impossible to judge whether it is a strength or weakness. These domains have never been measured before in our program and a standard needs to be established.
    - The total number of domains/subdomains identified (designated by an "I" or "C") in each class range from 78 identifiers (Data in Public Health) to 13 identifiers (Overview of Health Care Systems and Project Implementation).

D11. Public Health Bachelor's Degree Foundational Competencies

Students must demonstrate the following competencies:

- **the ability to communicate public health information, in both oral and written forms, through a variety of media and to diverse audiences**
- **the ability to locate, use, evaluate and synthesize public health information**

D11.1 Student Demonstration of Competencies

Required Documentation: Provide a matrix, in the format of Template D11-1, that indicates the experience(s) that ensure that students demonstrate competencies in each of the domains indicated. Template D11-1 requires the school or program to identify the experiences that introduce and reinforce each domain. (self-study document)

Table D11.1 Undergraduate Student Demonstration of Competencies		
Competencies	**Course number(s) & name(s) or other educational requirements**	**Specific assessment opportunity**
Public Health Communication: Students should be able to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences		
Oral communication	1. PBH 205 Introduction to Public Health 2. PBH 330 Global Health 3. PBH 360 Research Method for Public Health 4. PBH 429 Education for Sexuality	1. Presentations 2. Recruitment video, case study 3. Paper, presentation 4. Presentations
Written communication	1. PBH 330 Global Health 2. PBH 360 Research Method for Public Health 3. PBH 460 Health Ecology and Sustainability	1. Final paper 2. Paper, presentation 3. Research paper
Communicate with diverse audiences	1. PBH 205 Introduction to Public Health 2. PBH 360 Research Method for Public Health	1. Presentations 2. Paper; presentation
Communicate through variety of media	1. PBH 165 Personal Health Across the Lifespan 2. PBH 360 Research Method for Public Health 3. PBH 460 Health Ecology and Sustainability	1. Journal assignments 2. Paper, presentation 3. Presentations
Information Literacy: Students should be able to locate, use, evaluate, and synthesize information		
Locate information	1. PBH 330 Global Health 2. PBH 360 Research Method for Public Health 3. PBH 429 Education for Sexuality 4. PBH 460 Health Ecology and Sustainability	1. Infographic 2. Assignment 3. Research project 4. Research paper
Use information	1. PBH 330 Global Health 2. PBH 360 Research Method for Public Health 3. PBH 429 Education for Sexuality 4. PBH 460 Health Ecology and Sustainability	1. Infographic 2. Assignment 3. Research project 4. Research paper, exams
Evaluate information	1. PBH 205 Introduction to Public Health 2. PBH 360 Research Methods for Public Health 3. PBH 460 Health Ecology and Sustainability	1. Assignments 2. Assignment 3. Research paper
Synthesize information	1. PBH 330 Global Health 2. PBH 360 Research Method for Public Health 3. PBH 429 Education for Sexuality 4. PBH 460 Health Ecology and Sustainability	1. Infographic 2. Assignment and paper 3. Research project 4. Research paper, exams

D11.2 Student Work Examples

Required Documentation: If applicable, include examples of student work indicated in Template D11-1.

See Electronic Resource File.

D11.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- These undergraduate competencies align with our universal undergraduate learning outcomes. They are covered extensively in many courses, as this is just a sampling of those courses. Students receive these competencies throughout our undergraduate program.
- Literacy competencies are covered through a variety of methods including research papers, research projects and infographics, and assignments.
- Communication competencies are also covered through a variety of methods including presentations, papers, and journal assignments.

Weaknesses

- None.

D12. Public Health Bachelor's Degree Cumulative and Experiential Activities

Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honors theses. Schools and programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

D12.1 Cumulative and Experiential Activities

Required Documentation: Provide a matrix, in the format of Template D12-1, that identifies the cumulative and experiential activities through which students have the opportunity to integrate, synthesize and apply knowledge as indicated. (self-study document)

Table D12-1 summarizes the required tasks (student samples found in section 12-2) for all enrolled students associated with the capstone class. The tasks themselves are both stand-alone as well as component parts of the larger capstone experience. To illustrate: The faculty members in the undergraduate capstone class embrace the two summary undergraduate domains (i.e. Public Health Communication and Information Literacy). Sample assignments associated with communication are Vita 1 and 2, video clip answers, and the 7-second résumés. Sample assignments associated with literacy are the "All Voices Heard" series questions, poster session creations, and program exit evaluations. In addition, the initial résumé (vita 1), the revised résumé (vita 2), and participation in presentations provided by the professional development series are integral components of the activity of the mock – interviews.

Furthermore, the program emphasizes the importance of mentorship through the CEPH concept of "Teamwork and Leadership". To that end, the program has initiated a very strong student-to-student component. While not necessarily having the capability to affect students in real time, leadership legacies are practiced and provided through the verification of usable program information sources (e.g. the website evaluations), advice for program improvements for in-coming public health majors (e.g. program evaluations) and written practical "clues" to an efficient and timely graduation (e.g. rules of acquisition).

Table D12.1 Cumulative and Experiential Activities	
Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	**Narrative describing how activity provides students the opportunity to integrate, synthesize, and apply knowledge.**
All Voices Heard Course Mash-up – Part I: Question Generation	Integration: While many questions about an event's topic have been explored both formally and informally by all students, the forum provides an opportunity to ask additional and verification questions about the event's main topic(s).
	Synthesize: Students are expected to integrate what they think they know with what they would like to know about the event's topic.
All Voices Heard Course Mash-up – Part II: Event Participation and Event Evaluation	Integration: It is expected that additional information about the content presented by the panel group as well as the personal experience will add to the professional preparation experience of the undergraduate student while at the same time allowing the graduate students to articulate previous experiences which may be helpful to current Bachelor-level students.
	Synthesize: By combining three distinct levels of students into one required event, it is expected that interactions between undergraduate students, new graduate students, and graduate students "deeper" into the MPH program will result in a greater understanding of the masters-level educational process.
	Apply: All participants are required to interact with the panel group as well as with the other event participants in attendance.
Capstone Option Selection: Expanded Description	Synthesize: Students are required to identify and discuss the specific public health domains that are expected to be addressed during the capstone experience
	Apply: Each student selects from a group of 3 options that professional, culminating activity to which they feel will best contribute to their professional growth.
Capstone Option Choice Evaluations (mid-semester and end-of- semester)	Integration: The student is allowed to experience a real-world part-time job – maybe for the first time. Personal and professional qualities are scrutinized, evaluated, and discussed both from the supervisor's perspective as well as the student's perspective.
	Synthesize: Because the evaluations (mid/post) require self-reflection, it is an opportunity for each student to balance how they believe they are accomplishing set goals with the professional judgements of a supervisor accomplished during 1 to 1 meetings at the mid-point and end point of the semester.
	Apply: The concluding section of evaluation form calls for professional development ideas offered by the capstone supervisor.
Capstone Option Selection: Permission to Enroll Process	Integration: This is the students – perhaps first – exposure to the summation of their course work as it applies to the application process of their desired future worksite in public health.
	Apply: Application interviews are required thereby providing students with a job simulated experience that can be used to refine in future interview settings.
Capstone Summaries	Synthesize: Students look objectively and subjectively at their capstone experience and provide a description that is designed to provide future students with insights to that same capstone choice / site.
	Apply: As this document is created with informality as the guiding principle, the repeating of the content and descriptions is designed to serve the author well in many informal settings.
Mock Interviews	Integration: This is a "highest level" opportunity to incorporate a student's professional strengths and personal qualities in a real-world simulation experience.
	Synthesize: The student is expected to combine relevant facts from a pool of courses to address questions presented to them in a 1 to 1 setting.
	Apply: Lessons learned and experience gained from this simulation will better prepare students for identical settings in the job market or in academic application settings.

Table D12.1 Cumulative and Experiential Activities, continued	
Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	**Narrative describing how activity provides students the opportunity to integrate, synthesize, and apply knowledge.**
Poster Session Creation	Integration: The task calls for the student to summarize the information gained through the course's capstone responsibilities regarding poster session development and demonstrate these new or refined skills in a presentation targeting their capstone selection.
	Synthesize: Students are expected to summarize each of the major summary areas (e.g. goals, objectives, methods used, recommendations, and evaluations) from the extended list of tasks completed and knowledge gained during the capstone experience.
	Apply: The "physical" creation of a summary document and the presentation skills needed to deliver a concise, creative, and complete overview of the student's capstone content.
Professional Development Series	Integration: A collection of job-related topics and skill training sessions allow each student to expand their hard and soft job interview skill set.
	Synthesize: Students will be able to practice the expansion of or adjustments to individual personal qualities that may affect their ability to secure an entry-level job or successfully complete a graduate school application process.
	Apply: Students have immediate opportunities to use their new / revised job application skill set acquired in this series directly.
Program Exit Evaluations	Integration: Students are expected to reflect on the total degree experience at UNLV in Public Health to assess the personal and professional impact of the program.
	Synthesize: The completion of each of the 7 sub-categories is designed to demonstrate the inter- and intra-relationships between, courses, domains, skills, and competencies within the program.
	Apply: It is expected that through the program evaluation process that content and process triggers will "fire" within a student and result in insightful applications to current and future public health challenges and opportunities.
Video Clip Questions	Integration: By reviewing the pool of questions provided for the video-taping, it is expected that students will further incorporate their past experiences in the BSPH program with their answers to each question.
	Synthesize: A compilation of all content and experiences provided both within and external to the program will contribute to students' responses.
	Apply: The task of writing out responses in clear and complete sentences is intended to help students to focus on the most salient points of their responses.
Video Clip Recordings	Synthesize: A compilation of all content and experiences provided both within and external to the program will contribute to students' responses.
	Apply: The act of practicing and then actually presenting responses to select program questions is intended to provide a potentially positive experiential event for each student.
Vita I	Integration: The activity requires the student to reflect on past work, organize it in a logical presentation sequence, and present it in an appealing format.
	Synthesize: Students review sample résumés from companion fields to better create their own.

Table D12.1 Cumulative and Experiential Activities, continued	
Cumulative and Experiential Activity (internships, research papers, service-learning projects, etc.)	**Narrative describing how activity provides students the opportunity to integrate, synthesize, and apply knowledge.**
Vita II – Part 1 (Standard résumé)	Integration: The task involves reviewing the beginning-of-the-class vita and adding new skills and experiences to the document based on the work completed during the capstone class.
	Synthesize: The content of the vita will alter due to what was taught in a classroom setting content area as it is combined with applied knowledge and experiences gained at the capstone site.
	Apply: This end product (current vita), with adjustments probable, is expected to be used for job or graduate school application opportunities.
Vita II – Part 2 (7-Second Résumé Video)	Integration: Viewing the TED Talk by Regina Hartley is intended to provide stimulus for viewers to expand their personal list of attributes.
	Synthesize: Students are expected to review the "Grads of Life" website that is designed to trigger reflective thoughts about their life experiences as they apply to a future job site.
	Apply: The creation and ultimate delivery of each student's response will provide practice for real-life job / higher education application interviews.
Website / Handbook Evaluations	Integration: It is expected that students will rely / reflect on their personal degree program experiences to help determine the appropriate content of a university undergraduate website (e.g., user categories).
	Synthesize: Students are expected to combine their problem solving skills with the appropriateness of theirs and others suggested solutions in the construction of user-friendly content and site navigation.
	Apply: Students are expected to recall their "successful routes" taken to complete the program and utilize these experiences in creating innovative and practical solutions to similar challenges that are likely to be faced by students just starting or currently involved in the BSPH program.

D12.2 Student Work Examples

Required Documentation: Include examples of student work that relate to the cumulative and experiential activities. (electronic resource file)

See Electronic Resource File.

D12.3 Implementation of Cumulative Experience and Field Exposure Requirements

Required Documentation: Briefly describe the means through which the school or program implements the cumulative experience and field exposure requirements. (self-study document)

Designed as the concluding class in the degree program, the Capstone in Public Health course (PBH 495) offers senior-level students the opportunity to act on their next step in their professional development and involvement within the field of public health while remaining a student in the degree program. The process is intended to be initiated by students; however, the program offers both electronic and face-to-face prompts (i.e., the capstone process is posted on line in the degree's handbook and is verbally presented to students during their regularly scheduled meetings with advising center staff members). Students are encouraged to begin the "Permission-to-enroll" process (an identified course pre-requisite) the semester prior to the actual semester the student enrolls in the class. It is up to each individual student to choose the format of the culminating experience from three options.

The Initial Capstone Process

All students are required to complete the Permission to Enroll Application form the semester before the capstone class is taken. This step is part of the "permission to enroll" protocol for the class. Once completed, it is submitted to the undergraduate public health program coordinator for review and approval.

The Capstone Options

Professional / Senior Paper: Using the guidance of a student-selected SCHS professor (i.e., the paper's sponsor), the student constructs a final paper following the basic guidelines of a research paper. The topic is selected by the student. All aspects of the paper's format (e.g., writing style, length, etc.) is provided by the sponsoring faculty member. The willingness to work with and guide a student's work is at the discretion of the sponsoring faculty member.

Internship: The student selects, interviews with, and, if agreed to by the site and the student, volunteers to be a part of a pre-approved public health community site. A minimum of 120 hours must be completed at the site in order to fulfill one of the requirements of the capstone class. The sequence to apply for an internship site is described below. This protocol is also located on the school's website and it is distributed directly to the Division's advising center staff.

- If you have chosen the internship experience as your capstone choice, you will need to secure an internship site prior to enrolling in PBH 495. Dr. Charles Regin will oversee the PBH 495 course and will be the faculty member responsible for evaluating your completion of the internship. Dr. Brian Labus, the internship coordinator for the Master of Public Health program, will assist you in identifying potential internships.

- There are multiple routes to finding an internship, and it is not as simple as just picking an agency off a list. In order to find an internship that matches your interests, Dr. Labus will work with you to identify prospective agencies and appropriate contacts within those agencies. If you would like to approach a new agency, Dr. Labus will help start the process to make the agency an official partner

agency of the School of Community Health Sciences (there is legal paperwork required before an agency can host an intern).

***Prior* to contacting an agency about a possible internship**:

- Contact Dr. Brian Labus (brian.labus@unlv.edu) and identify yourself as an undergraduate senior student who would like to complete an internship as part of PBH 495 during the upcoming semester.
- Request a meeting with Dr. Labus and be prepared to explain the field / content area of public health in which you would like to work (e.g., social and behavioral health, heart disease, nutrition etc.). If there are particular populations with whom you would like to work, describe them as well (e.g., senior citizens, HIV-positive adults, Hispanic children, etc.).
- Bring your résumé to the meeting and be prepared to talk about your tentative professional plans upon completing your degree.
- At the meeting, Dr. Labus will help you identify possible internship agencies. If you have a site in mind or have been tentatively offered a placement due to work or personal connections, present that information to Dr. Labus in this meeting for consideration and, ultimately, required university-level approval.
- Conclude the meeting by identifying at least two possible sites as well as how those sites will be contacted. Depending on the site's preference, you may receive contact information at that time. Dr. Labus may also have to contact the site prior to providing the contact information to you.
- Keep in mind that, although many agencies have partnered with the School of Community Health Sciences to provide internship opportunities, these agencies do not always have openings for students.
- Contact Dr. Labus again if, following your site interview, the suggested internship site does not fit your professional goals at this time or you are not offered a position.
- Once you have successfully identified your internship agency, contact Dr. Regin for permission to enroll in the PBH 495.

Research Team Member The Pre-GA program is designed to provide a graduate level-like experience to the student. Class members can apply for, and interview with the faculty member(s) in charge of the research project. If selected after an application and interview process, the student agrees to dedicate 120 hours of volunteer time to the project. A list of potential Pre-GA sites and the application form are available through the undergraduate coordinator.

The School is in full support of the university-wide goal to become a more viable and productive research institution (https://www.unlv.edu/toptier/vision). Masters and Doctoral programs have a long history of contributing to a goal such as this in part through assistantships awarded at the graduate level. These assistantships give a level of training to individual students not normally possible through classroom work. The faculty members of the School are extending that research arm in an innovative and synergistic way to undergraduate students.

The Pre-GA Program

The undergraduate volunteer Pre-GA program is designed to connect SCHS faculty members in need of qualified student assistance on research projects with volunteer undergraduate students who enjoy and are challenged by public health-related faculty research projects. While initially intended as an option for the program's capstone class, highly motivated and qualified undergraduate students in the Public Health degree program can also be considered. This option can be used as a foundation for either PBH 497 (Independent Study in Public Health) or PBH 498 (Special Topics in Public Health).

Application Process

A current listing of Pre-GA positions can be obtained by the undergraduate coordinator. A brief description of each project and the faculty member leading the project are provided. To apply, fill out the Pre-GA Application form and submit it to the undergraduate public health program

coordinator. Once screened by the coordinator, the application form will be passed on to the project leader for review. A review of the application form will be made by the project's lead faculty member with an introductory interview scheduled based on the application review. If the application form is judged to be incompatible with the project at this time, the project lead faculty member will inform the undergraduate program coordinator who will pass on the decision to the applicant. Notification of a student's acceptance as a team member will be made by the lead faculty member as quickly as possible. It is best if the form is submitted for review near the end of the semester before the work is scheduled to start.

Assessment Process

Pre-GA assessments come from two formal sources. Because the capstone class is the identified "home course" for the capstone experiences, the university instructor of the class (PBH 495) evaluates all in-class assignments through submitted papers, in-class discussions, student-authored presentations, and assessments. The second source of a formal evaluation comes directly from the student's mentor / supervisor. At the mid-point of the semester and again at the end of the semester, the faculty member completes an evaluation form (copy provided in the electronic resource file) and discusses its content through a 1 to 1 meeting between the student and the supervisor. The PBH 495 instructor also reviews the evaluation forms.

There is also an informal evaluation of the work completed by the pre-GA student. The student is required to submit an electronic poster-board presentation at the end of the class. This assignment acts as a summary activity for the work competed during the semester. These poster session submissions are forwarded (anonymously), as a group, to an in-house faculty review committee for rankings. The top submissions are printed out (at department expense) and displayed during the annual honors convocation for the school. To be a finalist for printing is an informal strategy of acknowledging the work completed by the student. Note: the other two capstone options (i.e. professional / senior paper and internship) complete the same two formal evaluations as described herein.

D12.4 Documentation Relating to Cumulative Experience and Field Exposure

Required Documentation: Include handbooks, websites, forms and other documentation relating to the cumulative experience and field exposure. Provide hyperlinks to documents if they are available online, or include electronic copies of any documents that are not available online. (electronic resource file)

See Electronic Resource File.

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and lifelong learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following:

- **advocacy for protection and promotion of the public's health at all levels of society**
- **community dynamics**
- **critical thinking and creativity**
- **cultural contexts in which public health professionals work**
- **ethical decision making as related to self and society**
- **independent work and a personal work ethic**
- **networking**
- **organizational dynamics**
- **professionalism**
- **research methods**
- **systems thinking**
- **teamwork and leadership**

D13.1 Curriculum and Co-Curricular Experiences

Required Documentation: Briefly describe, in the format of Template D13-1, of the manner in which the curriculum and co- curricular experiences expose students to the concepts identified. (self-study document)

For most of the concepts listed, many courses expose or reinforce students' understanding of the concept. Minimum guidelines are given to instructors to maintain consistency among courses with many sections. In some cases, instructors work together to ensure content remains consistent. For example, in PBH 429 (Education for Sexuality), the instructors use identical learning objectives and work together to construct the best student experience possible.

Table D13.1 Undergraduate Curriculum and Co-Curricular Experiences		
Concept	**Manner in which the curriculum/co-curricular experiences expose students to the concepts**	
Advocacy for protection and promotion of the public's health at all levels of society	PBH 210 Principles of Health Promotion PBH 330 Global Health PBH 429 Education for Sexuality PBH 435 Health Studies on Dangerous Drugs PBH 460 Health Ecology and Sustainability	Exams; written paper Infographic Semester research project Substance Abuse & Mental Health Services Research Paper
Community dynamics	PBH 210 Principles of Health Promotion PBH 330 Global Health Service	Exams; written paper Exams National Rebuilding Day National Make a Difference Day
Critical thinking and creativity	PBH 210 Principles of Health Promotion PBH 330 Global Health PBH 360 Research Method for Public Health PBH 429 Education for Sexuality PBH 445 Food Access and Health PBH 460 Health Ecology and Sustainability	Written paper Video; infographic; case study Assignments; Final paper; presentation Semester research project Food journal; reflection Exam; research paper
Cultural contexts in which public health profess-ionals work	PBH 429 Education for Sexuality Seminar	Midterm exam; readings Your Future in Public Health Seminar NIH Seminar
Ethical decision making as related to self and society	PBH 210 Principles of Health Promotion PBH 330 Global Health PBH 360 Research Method for Public Health PBH 429 Education for Sexuality PBH 445 Food Access and Health	Exams; Written paper Exams Assignments, CITI Certification Semester research project Food journal; reflection
Independent work and a personal work ethic	PBH 407 Stress Management PBH 429 Education for Sexuality PBH 460 Health Ecology and Sustainability	Quiz; test Reflection/Review paper; Semester research project Exam; research paper; discussion
Networking	PBH 407 Stress Management Events	Quiz; test Public Health Career Fair and Workshops Seminars Public Health Trivia Night
Organizational dynamics	PBH 330 Global Health	Case study
Professionalism	PBH 460 Health Ecology and Sustainability PBH 495 Public Health Capstone Event	Research paper Internship class Public Health Career Fair and Workshops
Research methods	PBH 210 Principles of Health Promotion PBH 360 Research Method for Public Health PBH 365 Applied Biostatistics for Public Health PBH 429 Education for Sexuality PBH 460 Health Ecology and Sustainability	Exams; written paper Assignments; quiz; Final paper Exam Semester research project Research paper
Systems thinking	PBH 429 Education for Sexuality PBH 445 Food Access and Health PBH 460 Health Ecology and Sustainability	Semester research project Research paper; reflection paper Exam; research paper
Teamwork and leadership	PBH 330 Global Health PBH 429 Education for Sexuality Service	Case study Semester research project Public Health Student Association Rebuilding Southern Nevada Day National Make a Difference Day

D13.2 Syllabi

Required Documentation: Provide syllabi for all required coursework for the major and/or courses that relate to the domains listed above. Syllabi should be provided as individual files in the electronic resource file and should reflect the current semester or most recent offering of the course. (electronic resource file)

See Electronic Resource File.

D13.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- These concepts are woven through the curriculum, seminars, and service activities from the beginning of the program to the capstone.

Weaknesses

- Faculty did not cover organization dynamics in courses other than Global Health (PBH 330).

D14. MPH Program Length (SPH and PHP)

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

Schools and programs use university definitions for credit hours.

D14.1 MPH Minimum Credit-Hour Requirement

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

All MPH degrees have a 45 credit minimum requirement.

The graduate 2017-2018 catalog can be viewed here: http://catalog.unlv.edu/index.php?catoid=20

The MPH degree can be viewed here:
http://catalog.unlv.edu/preview_program.php?catoid=20&poid=5002

D14.2 Credit in Regard to Classroom/Contact Hours

Required Documentation: Define a credit with regard to classroom/contact hours. (self-study document)

Student credit hour (SCH) is generally defined as one 50-minute classroom session per week for the 15-week semester, which totals 12.5 hours of classroom time per credit. The university website distinctly describes the classroom/contact hours in terms of standard class times describing a three credit class as 150 minutes per week. The UNLV Registrar's office, as a participant in the University's curriculum process, ensures that all courses offered meet this requirement as established in 34 CFR §600.24.

D15. DrPH Program Length (SPH and PHP, if applicable)

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

Schools and programs use university definitions for credit hours.

D15.1 DrPH Minimum Credit-Hour Requirements

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

Not applicable.

D15.2 Credit in Regard to Classroom/Contact Hours

Required Documentation: Define a credit with regard to classroom/contact hours. (self-study document)

Not applicable.

D16. Bachelor's Degree Program Length (SPH and PHP, if applicable)

A public health bachelor's degree requires completion of a total number of credit units commensurate with other similar degree programs in the university.

Schools and programs use university definitions for credit hours.

Bachelor's degree programs have publicly available policies and procedures for review of coursework taken at other institutions, including community colleges. These may be incorporated into articulation agreements.

D16.1 Bachelor's Degree Minimum Credit-Hour Requirements

Required Documentation: Provide information about the minimum credit-hour requirements for all public health bachelor's degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form. (self-study document)

The minimum number of semester credits required for a bachelor's degree for a student graduating under the regulations of the 2017 - 2018 undergraduate catalog graduation policies is 120. At least half of the credits required for a baccalaureate degree at the institution must be earned at a four-year institution.

D16.2 Credit with Regard to Classroom/Contact Hours

Required Documentation: Define a credit with regard to classroom/contact hours. (self-study document)

Student credit hour (SCH) is generally defined as one 50-minute classroom session per week for the 15-week semester, which totals 12.5 hours of classroom time per credit. The university website distinctly describes the classroom/contact hours in terms of standard class times describing a three credit class as 150 minutes per week. The UNLV Registrar's office, as a participant in the University's curriculum process, ensures that all courses offered meet this requirement as established in 34 CFR §600.24 and seen in the catalog's academic policies.

D16.3 Coursework Completed at Other Institutions

Required Documentation: Describe policies and procedures for acceptance of coursework completed at other institutions, including community colleges. (self-study document)

Coursework completed at other institutions is evaluated after a student applies to UNLV and official transcripts have been received. A section of the undergraduate catalog credit evaluation policies, is dedicated to expressing this policy to students.

In general, college level coursework from one of the eight regionally accredited institutions recognized by the Council of Higher Education Accreditation (CHEA) or a candidate for accreditation by one of these associations will transfer but this is not guaranteed. For example, some courses from private institutions, remedial courses, and vocational courses do not transfer. Generally, credits from a nationally accredited institution will not be accepted but there are some exceptions to this rule. Some specialized schools offer associate and bachelor degrees that are nationally accredited (or candidates for accreditation) and recognized by CHEA. These will be evaluated on an individual basis and credit may be granted for comparable coursework. A transfer course equivalence table is available for students to use in conjunction with academic advising to determine comparability. Credits from non-accredited institutions, credits awarded for life experience, credits completed at non-collegiate institutions, and continuing education non-credit courses will not be accepted.

Any international coursework must be from an institution that is recognized by the country's Ministry of Education as a degree granting institution and transcripts must be formally evaluated and translated.

Non-traditional credits may be applied to a degree with appropriate documentation/scores through Advances Placement (AP) programs, College Level Examination Programs (CLEP), International Baccalaureate (IB) programs, Defense Activity for Non-traditional Education Support (DANTES) program, Military Service (physical education credit only), and acceptable correspondence, extension, or US Armed Forces Institute Courses (USAFI). Minimum scores required are included in the undergraduate catalog (see link above) for AP, CLEP, and IB programs. All non-traditional credits are evaluated by the registrar's office.

D16.4 Articulation Agreements with Community Colleges

Required Documentation: If applicable, provide articulation agreements with community colleges that address acceptance of coursework. (electronic resource file)

See Electronic Resource File.

D16.5 Similar Bachelor's Degree Credit-Hour Requirements

Required Documentation: Provide information about the minimum credit-hour requirements for coursework for the major in at least two similar bachelor's degree programs in the home institution. (self-study document)

The minimum credits required for any undergraduate degree awarded at UNLV is 120. Two similar programs with this requirement include the Bachelor of Science in Health Care Administration and Policy and the Bachelor of Science in Nutrition Sciences. Both of these programs require a minimum of 120 credits to graduate.

D17. Public Health Academic Master's Degrees (SPH and PHP, if applicable)

Students enrolled in the unit of accreditation's academic public health master's degrees (eg, MS in biostatistics) complete a curriculum that is based on defined competencies; produce an appropriately rigorous discovery-based paper or project at or near the end of the program of study; and have the opportunity to engage in research at a level appropriate to the degree program's objectives. These students also complete coursework and other experiences, outside of the major paper or project, that substantively address scientific and analytic approaches to discovery and translation of public health knowledge in the context of a population health framework.

Finally, students complete coursework that provides a broad introduction to public health. This introduction to public health addresses the learning objectives listed in this criterion, at an appropriate level of complexity. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

- **The instruction includes assessment opportunities, appropriate to the degree level, that allow faculty to assess students' attainment of the introductory public health learning objectives. Assessment opportunities may include tests, writing assignments, presentations, group projects, etc.**
- **The instruction and assessment of students' broad introduction to public health are equivalent in depth to the instruction and assessment that would typically be associated with a three-semester-credit class, regardless of the number of credits awarded for the experience or the mode of delivery.**

The school or program identifies at least one required assessment activity for each of the following introductory public health learning objectives.

1. **Explain public health history, philosophy and values**
2. **Identify the core functions of public health and the 10 Essential Services[14]**
3. **Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health**
4. **List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program**
5. **Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.**
6. **Explain the critical importance of evidence in advancing public health knowledge**
7. **Explain effects of environmental factors on a population's health**
8. **Explain biological and genetic factors that affect a population's health**
9. **Explain behavioral and psychological factors that affect a population's health**
10. **Explain the social, political and economic determinants of health and how they contribute to population health and health inequities**
11. **Explain how globalization affects global burdens of disease**
12. **Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)**

D17.1 Curricular Requirements

Required Documentation: List the curricular requirements for each relevant degree in the unit of accreditation. (self-study document)

Not applicable.

D17.2 Assessment Opportunities

Required Documentation: Provide a matrix, in the format of Template D17-1, that indicates the required assessment opportunities for each of the defined introductory public health learning objectives (a-l). Typically, the school or program will present a separate matrix for each degree program, but matrices may be combined if requirements are identical. (self-study document)

Not applicable.

D17.3 Competencies

Required Documentation: Provide a matrix, in the format of Template D17-2, that lists competencies for each relevant degree and concentration. The matrix indicates at least one assessment activity for each of the listed competencies. Typically, the school or program will present a separate matrix for each concentration. Note: these competencies are defined by the school or program and are distinct from the introductory public health learning objectives defined in this criterion. (self-study document)

Not applicable.

D17.4 Required Coursework

Required Documentation: Identify required coursework and other experiences that address the variety of public health research methods employed in the context of a population health framework to foster discovery and translation of public health knowledge and a brief narrative that explains how the instruction and assessment is equivalent to that typically associated with a three-semester-credit course.
Typically, the school or program will present a separate list and explanation for each degree program, but these may be combined if requirements are identical. (self-study document)

Not applicable.

D17.5 Final Research Project or Paper

Required Documentation: Briefly summarize policies and procedures relating to production and assessment of the final research project or paper. (self-study document)

Not applicable.

D17.6 Production and Assessment of Final Research Project or Paper

Required Documentation: Provide links to handbooks or webpages that contain the full list of policies and procedures governing production and assessment of the final research project or paper for each degree program. (electronic resource file)

Not applicable.

D17.7 Deliverables

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

Not applicable.

D17.8 Assessment in Basic Public Health Knowledge

Required Documentation: Briefly explain how the school or program ensures that the instruction and assessment in basic public health knowledge is generally equivalent to the instruction and assessment typically associated with a three-semester-credit course. (self-study document)

Not applicable.

D17.9 Syllabi

Required Documentation: Include the most recent syllabus for any course listed in the documentation requests above, or written guidelines for any required elements that do not have a syllabus. (electronic resource file)

Not applicable.

D17.10 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Not applicable.

D18. Public Health Academic Doctoral Degrees (SPH and PHP, if applicable)

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

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

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

The program defines appropriate policies for advancement to candidacy, within the context of the institution.
Finally, students complete coursework that provides a broad introduction to public health. This introduction to public health addresses the learning objectives listed in this criterion, at an appropriate level of complexity. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

- **The instruction includes assessment opportunities, appropriate to the degree level, that allow faculty to assess students' attainment of the introductory public health learning objectives. Assessment opportunities may include tests, writing assignments, presentations, group projects, etc.**
- **The instruction and assessment of students' broad introduction to public health are equivalent in depth to the instruction and assessment that would typically be associated with a three-semester-credit class, regardless of the number of credits awarded for the experience or the mode of delivery.**

The program identifies at least one required assessment activity for each of the following introductory public health learning objectives.

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

D18.1 Curricular Requirements

There are four tracks within the SCHS PhD program including Global and Environmental Health, Epidemiology and Biostatistics, Health Services Management and Policy, and Social and Behavioral Health. The PhD program is designed to prepare students for careers in which advanced analytical and conceptual capabilities are required, such as university teaching, research, consulting, policy development, or other high-level positions.

The PhD program was initiated in 2008 in collaboration with the University of Nevada at Reno. While there is no formal memorandum of understanding, these programs were developed simultaneously. This collaboration allows students to be admitted into one university but take classes at the other school as a non-admitted student. Students are required to follow the course requirements for graduation and receive advising at their home university. If a student wanted to switch from one university to the other, they would need to apply, be formally accepted, and the transfer credits evaluated.

Curricular requirements for the four tracks or sub-plans in the PhD program are currently under revision. The number of dissertation credits will be reduced from 24 to 21 beginning in the fall of 2018, and five new courses representing the four tracks have been approved. These, along with the doctoral seminar, will become the core required courses for all sub-plans of the PhD program. These courses will be offered beginning in the fall of 2018 and include:

- HCA 791-Policy Analysis of Health Care Delivery and Financing
- EOH 791-Implementation Science for Global Health
- HED 791-Community Based Participatory Research Methods
- EAB 791-Intermediate Biostatistics
- EAB 756-Epidemiology and Research

These courses, along with the doctoral seminar, will be available to PhD students only, while other courses are available to masters and doctoral level students. Courses have clearly indicated requirements for doctoral level students that align with PhD track specific competencies. New degree sheets have been developed and can be seen in the electronic resource file along with the approved program change form and course syllabi.

The following information is based on the current PhD program.

Table D18.1a Requirements for PhD degree, Global and Environmental Health		
Course number	**Course name**	**Credits**
Doctoral Seminar Course (3 Credits)		
EOH 790	Doctoral Seminar	3
Research Methods and Design Courses (6 Credits) – Choose two of the following:		
EAB 700	Research Methods for Public Health	3
EAB 743	Experimental Design for the Health Sciences	3
EAB 756	Epidemiology and Research	3
HED 791	Community Based Participatory Research Methods	3
EOH 715	Qualitative and Field methods for Public Health	3
EOH 744	Mixed Methods Research for Public Health	3
EOH 795	Special Topics in Public Health	3
EOH 796	Independent Study in Environmental Health	3
EPY 730	Advanced Research Methods	3
HSC 702	Translational Research	3
HSC 705	Clinical Trial Design and Analysis	3
HCA 715	Health Services Research Methods	3
NURS 729R	Translational Evidence for Healthcare Systems	3
EAB 703	Biostatistics Methods for the Health Sciences	3
Analysis Course (3 Credits) – Choose one of the following:		
EAB 733	Survey Sampling for the Health Sciences	3
EAB 753	Nonparametric Statistics for Public Health	3
EAB 763	Linear Statistical Models	3
EAB 773	Survival Analysis for Public Health	3
EAB 783	Multivariate Methods for the Health Sciences	3
EOH 795	Special Topics in Public Health	3
EOH 796	Independent Study in Environmental Health	3
Proposal Writing Course (3 Credits) – Choose one of the following:		
EAB 720	Grant Writing for Epidemiology and Public Health Research	3
HED 720	Program Planning and Grant Writing in Health Promotion	3
HSC 702	Interdisciplinary Grant Writing for Health Sciences	3
NURS 779	Writing a Research Grant Application	3

Table D18.1a Requirements for PhD degree, Global and Environmental Health continued		
Course number	**Course name**	**Credits**
Elective Courses (15 Credits) – Choose five of the following:		
EAB 715	Chronic Disease Epidemiology	3
ENV 711	Risk Assessment and Risk Management	3
ENV 712	Environmental Risk Decision Making	3
EOH 704	Research Integrity & Ethics	3
EOH 705	Social Epidemiology	3
EOH 709	Scientific/Technical Writing for the Health and Life Sciences	3
EOH 711	Diseases that Changed the World	3
EOH 713	Public Health Law	3
EOH 717	Food Safety and Public Health	3
EOH 732	Children, Development, Health, and the Environment	3
EOH 747	Transmission of Infectious Disease	3
EOH 757	Parasitology and Public Health	3
EOH 760	Racial and Ethnic Disparities in Health	3
EOH 765	Seminar in Environmental Justice and Public Health	3
EOH 767	Airborne Pathogens and Human Health	3
EOH 769	Pollution and Health	3
EOH 777	Emerging Infectious Disease	3
HCA 718	Health Care Economics	3
HED 730	Program Evaluation in Health Promotion	3
HPS 680	Industrial Hygiene	3
Dissertation (24 Credits)		
EOH 797	Dissertation Prospectus	3
EOH 799	Dissertation	21
	Total	**54**

Table D18.1b Requirements for PhD degree, Epidemiology and Biostatistics		
Course number	**Course name**	**Credits**
Doctoral Seminar Course (3 Credits)		
EOH 790	Doctoral Seminar	3
Required Courses (6 Credits)		
EAB 756	Epidemiology and Research	3
EAB 715	Chronic Disease Epidemiology	3
Research Courses (6 Credits) – Choose two of the following:		
EAB 733	Survey Sampling for the Health Sciences	3
EAB 743	Experimental Design for the Health Sciences	3
EAB 753	Nonparametric Statistics for Public Health	3
EAB 763	Linear Statistical Models	3
EAB 773	Survival Analysis for Public Health	3
EAB 783	Multivariate Methods for the Health Sciences	3
Methods Course (3 Credits) – Choose one of the following:		
EAB 700	Research Methods for Public Health	3
EOH 715	Qualitative and Field Methods for Public Health	3
Epidemiology Courses (6 Credits) – Choose two of the following:		
EAB 716	The Epidemiology of Obesity	3
EAB 755	Cancer Epidemiology	3
EOH 705	Social Epidemiology	3
Elective Courses (6 Credits)		
Varies	Advisor Approved Coursework	6
Dissertation (24 Credits)		
EOH 797	Dissertation Prospectus	3
EOH 799	Dissertation	21
	Total	**54**

Table D18.1c Requirements for PhD degree, Health Service Management and Policy		
Course number	**Course name**	**Credits**
Doctoral Seminar Course (3 Credits)		
EOH 790	Doctoral Seminar	3
Required Courses (12 Credits) – Choose four of the following:		
HCA 652	Health Politics and Policy	3
HCA 703	Management of Health Service Organizations and Systems	3
HCA 716	Health Care Accounting and Finance	3
HCA 717	Human Resources Management of Health Care Organizations	3
HCA 718	Health Care Economics	3
HCA 719	Operations and Quality Management of Health Services	3
HCA 720	Information Systems in Health Services Management	3
HCA 721	Advanced Health Care Finance	3
HCA 730	Strategic Management of Health Services	3
Methods Courses (6 Credits)		
EOH 715	Qualitative and Field Methods for Public Health	3
HCA 715	Health Services Research Methods	3
Research Courses (6 Credits) – Choose two of the following:		
EAB 733	Survey Sampling for the Health Sciences	3
EAB 753	Nonparametric Statistics for Public Health	3
EAB 763	Linear Statistical Models	3
EAB 773	Survival Analysis for Public Health	3
EAB 783	Multivariate Methods for the Health Sciences	3
ECO 772	Econometrics II	3
MBA 767	Market Opportunity Analysis	3
Elective Course (3 Credits)		
Varies	Advisor Approved Coursework	3
Dissertation (24 Credits)		
EOH 797	Dissertation Prospectus	3
EOH 799	Dissertation	21
	Total	**54**

Table D18.1d Requirements for PhD degree, Social and Behavioral Health		
Course number	**Course name**	**Credits**
Doctoral Seminar Course (3 Credits)		
EOH 790	Doctoral Seminar	3
Required Courses (6 Credits)		
EOH 705	Social Epidemiology	3
EOH 760	Racial and Ethnic Disparities	3
Methods Course (3 Credits) – Choose one of the following:		
EAB 700	Research Methods for Public Health	3
EOH 715	Qualitative and Field Methods for Public Health	3
Research Courses (6 Credits) – Choose two of the following:		
EAB 733	Survey Sampling for the Health Sciences	3
EAB 743	Experimental Design for the Health Sciences	3
EAB 753	Nonparametric Statistics for Public Health	3
EAB 763	Linear Statistical Models	3
EAB 773	Survival Analysis for Public Health	3
EAB 783	Multivariate Methods for the Health Sciences	3
Elective Course (12 Credits)		
Varies	Advisor Approved Coursework	12
Dissertation (24 Credits)		
EOH 797	Dissertation Prospectus	3
EOH 799	Dissertation	21
	Total	**54**

D18.2 Assessment Opportunities

Required Documentation: Provide a matrix, in the format of Template D18-1 that indicates the required assessment opportunities for each of the defined introductory public health learning objectives (a-l). Typically, the school or program will present a separate matrix for each degree program, but matrices may be combined if requirements are identical. (self-study document)

Table 18.2 PhD Introductory Public Health Learning Objectives Assessment

Content	Course number	Specific Assessment Opportunity
1. Explain public health history, philosophy and values	EOH 710	Assignment 1, Q1 Assignment 2, Q1, Q2
2. Identify the core functions of public health and the 10 Essential Services	EOH 710	Assignment 1, Q2
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	EOH 710	Assignment 5, Q3, Q4
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	EOH 710	Assignment 7, Q1, Q2
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	EOH 710	Assignment 3, Q3 Assignment 11, Q3
6. Explain the critical importance of evidence in advancing public health knowledge	EOH 710	Assignment 5, Q2
7. Explain effects of environmental factors on a population's health	EOH 710	Assignment 10, Q1 Assignment 11, Q1, Q2
8. Explain biological and genetic factors that affect a population's health	EOH 710	Assignment 9, Q1
9. Explain behavioral and psychological factors that affect a population's health	EOH 710	Assignment 9, Q2 (group) - Root Cause Analysis Worksheet
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	EOH 710	Assignment 9, Q3, Q4
11. Explain how globalization affects global burdens of disease	EOH 710	Assignment 6, Q1
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	EOH 710	Assignment 13, Q1

Doctoral students are currently remediated if they have not taken courses equivalent to the MPH core classes including EOH 710 or have not come from a CEPH accredited MPH program. This is addressed during admission or as a pre-requisite of the Doctoral Seminar (EOH 790). EOH 710 is intended to cover the twelve introductory public health learning objectives and has specific criteria for doctoral students that are required to take it. Please see electronic resource file for details of the assignments.

D18.3 Competencies

Required Documentation: Provide a matrix, in the format of Template D18-2, that lists competencies for each relevant degree and concentration. The matrix indicates at least one assessment activity for each of the listed competencies. Typically, the school or program will present a separate matrix for each concentration. Note: these competencies are defined by the school or program and are distinct from the introductory public health learning objectives defined in this criterion. (self-study document)

Table D18.3a Assessment of Competencies for Doctoral Degrees in Public Health Fields, Other than DrPH – PhD in Global and Environmental Health

Competency	Specific Assessment Opportunity
1. Design and conduct independent research that generates new knowledge, and is characterized by conceptual and methodological rigor.	HED 791 Community Based Participatory Research Methods* 1. Community Project Dossier EOH 744 Mixed Methods Research for Public Health 1. Research activities for modules 1-4 2. Major project paper
2. Evaluate the role of environmental and global health in the top challenges facing mankind, including overpopulation, energy, pollution, climate change, and infectious disease, to develop research directions and priorities.	EOH 747 Transmission of Infectious Disease 1. Group discussions on the interactions of human hosts, microbial agents, vectors and environment in transmission of infectious diseases EOH 769 Pollution and Health 1. Term project: Critical review for existing pollution-health nexus – identifying knowledge gaps
3. Establish skills to communicate research findings to different audiences and sectors.	EOH 709 Scientific/Technical Writing for the Health and Life Sciences 1. Exams 2. Research paper 3. Oral presentation of research paper EOH 790 Doctoral Seminar* 1. Research Presentations
4. Use environmental and global health research to develop prevention and management strategies and policy recommendations.	EOH 713 Public Health Law 1. Final Group Project: Research a public health issue affecting the state and use scientific evidence to inform a related, law-based intervention, which involves a presentation to stakeholders. EOH 765 Seminar in Environmental Justice and Public Health 1. Case Study Policy recommendation 2. Elevator Speech Presentation
5. Acquire, analyze, and interpret environmental health and global health data from field or laboratory investigations.	EAB 733 Survey Sampling for the Health Sciences 1. Written report analyzing and interpreting survey data EAB 783 Multivariate Methods for the Health Sciences 1. Oral presentation 2. Critical analyses of peer reviewed journal article

*Some courses are either new or significantly revised courses. Work samples may not be available.

Table D18.3b Assessment of Competencies for Doctoral Degrees in Public Health Fields, Other than DrPH – PhD in Epidemiology and Biostatistics Concentration	
Competency	**Specific Assessment Opportunity**
1. Design and conduct independent research that generates new knowledge, and is characterized by conceptual and methodological rigor.	EAB 715 Chronic Disease Epidemiology 1. Mini Grant Proposal EOH 790 Doctoral Seminar * 1. Research Presentations
2. Demonstrate excellence in applying the theoretical and problem solving aspects of public health within epidemiology and biostatistics.	EAB 725 Epidemiology of Infectious Disease* 1. Weekly class exercise discussions, homework assignments, class presentation and course paper
3. Evaluate the natural history and biologic mechanisms of one or more specific diseases or health conditions, including consideration of causation, control, and prevention.	EAB 725 Epidemiology of Infectious Disease* 1. Class presentation and course paper EAB 756 Epidemiology and Research 1. Final Paper
4. Appraise how quantitative and qualitative data can be integrated into mixed methods in epidemiologic research and effectively calculate advanced epidemiological measures.	EAB 700 Research Methods for Public Health 1. Assignment: MI & Hospital EOH 744 Mixed Methods Research for Public Health 1. Mixed methods Research Study Proposal 2. Article Critique
5. Critically evaluate determinants of health and explain predictors and mechanisms of disease or health events.	EAB 700 Research Methods for Public Health 1. Evaluating Scientific Claims Assignment EAB 715 Chronic Disease Epidemiology 1. Twenty Page Paper on an Approved Peer-Reviewed Article

*Some courses are either new or significantly revised courses. Work samples may not be available.

Table D18.3c Assessment of Competencies for Doctoral Degrees in Public Health Fields, Other than DrPH – PhD in Health Service Management and Policy	
Competency	**Specific Assessment Opportunity**
1. Design and conduct independent research that generates new knowledge, and is characterized by conceptual and methodological rigor.	EOH 744 Mixed Methods Research for Public Health 1. Research activities for modules 1-4, 2. Major project paper EOH 790 Doctoral Seminar 1. Research Presentations
2. Demonstrate excellence in applying the theoretical and problem-solving aspects of public health within health care organizations and systems.	HCA 703 Management of Health Service Organizations and Systems 1. Case study discussion questions on test on organizational power, politics, and influence. 2. Case study discussion questions and test on diversity and cultural competence, its effect on healthcare quality outcomes. HCA 728 Foundations of Health Services Organization Theory* 1. Exam 2. Theory paper
3. Apply content specialization to the critical analysis of research literature and the development of independent research questions in healthcare organizations and systems.	HCA 715 Health Services Research Methods 1. Oral presentation 2. Research proposal HCA 728 Foundations of Health Services Organization Theory* 1. Exam 2. Theory paper
4. Specialize in at least one area of research methods, such as epidemiology, survey design, evaluation, qualitative, or econometrics in studying healthcare issues.	EAB 733 Survey Sampling for the Health Sciences 1. Written report (min 15 pages) analyzing and interpreting survey data EAB 743 Experimental Design for the Health Sciences 1. Final Project
5. Be familiar with large healthcare or public health data sets and the ability to prepare and statistically analyze them.	EAB 763 Linear Statistical Models 1. Presentation on Methodology of Final Project EAB 783 Multivariate Methods for the Health Sciences 1. Oral presentation; critical analyses of peer reviewed journal article

*Some courses are either new or significantly revised courses. Work samples may not be available.

Table 18.3d Assessment of Competencies for Doctoral Degrees in Public Health Fields, Other than DrPH – PhD in Social and Behavioral Health	
Competency	**Specific Assessment Opportunity**
1. Design and conduct independent research that generates new knowledge, and is characterized by conceptual and methodological rigor.	EAB 700 Research Methods for Public Health 1. Present research proposal EOH 790 Doctoral Seminar*: 1. Research Presentations
2. Demonstrate excellence in applying behavioral theory to solve problems within public health as well as social and behavioral health.	HED 730 Health Program Evaluation 1. Evaluation Plan HED 791 Community-Based Participatory Research Methods*: 1. Community Project and Dossier
3. Propose appropriate program plan(s) that facilitate behavior change at an individual, interpersonal, or community level.	EOH 715 Qualitative Research Methods for Public Health 1.Qualitative Proposal
4. Plan and implement program evaluations for interventions designed to produce affective, behavioral, and health status changes at an individual, interpersonal, or community level.	HED 730 Health Program Evaluation 1. Evaluation Plan
5. Engage in interdisciplinary groups to address problems within public health as well as social and behavioral health.	HED 720 Program Planning and Grant Writing in Health Promotion 1. Group Project HED 730 Health Program Evaluation 1. Evaluation Plan

*Some courses are either new or significantly revised courses. Work samples may not be available.

D18.4 Required Coursework and Experiences Addressing Research Methods

Required Documentation: Identify required coursework and other experiences that address the variety of public health research methods employed in the context of a population health framework to foster discovery and translation of public health knowledge and a brief narrative that explains how the instruction and assessment is equivalent to that typically associated with a three-semester-credit course. Typically, the school or program will present a separate list and explanation for each degree program, but these may be combined if requirements are identical. (self-study document)

The Global and Environmental Health doctorate degree requires students to successfully complete six credits that are in research methods and design. There are many courses to choose from as students have different needs depending upon their area of interest. Students must take two research methods and design courses out of the following courses:

EAB 700	Research Methods for Public Health
EAB 703	Biostatistics Methods for the Health Sciences
EAB 743	Experimental Design for the Health Sciences
EAB 756	Epidemiology and Research
HED 791	Community Based Participatory Research Methods
EOH 715	Qualitative and Field methods for Public Health
EOH 744	Mixed Methods Research for Public Health
EOH 795	Special Topics in Public Health
EOH 796	Independent Study in Environmental Health
EPY 730	Advanced Research Methods
HSC 702	Translational Research
HSC 705	Clinical Trial Design and Analysis
HCA 715	Health Services Research Methods
NURS 729R	Translational Evidence for Healthcare Systems

For the Epidemiology and Biostatistics, students are required to complete a three-credit research methods course successfully in addition to a three-credit Epidemiology and Research (EAB 756) course. Students must take one of the following three-credit methods courses:

EAB 700	Research Methods for Public Health
EOH 715	Qualitative and Field Methods for Public Health

Health Service Management and Policy students successfully complete a minimum of six credits in research methods courses. Students are required to take two of the following three-credit research methods courses:

EOH 715	Qualitative and Field Methods for Public Health
HCA 715	Health Services Research Methods

The Social and Behavioral Health program students successfully complete a minimum of six credits in research methods courses. Students are required to take the following two three-credit methods courses:

EAB 700	Research Methods for Public Health
EOH 715	Qualitative and Field Methods for Public Health

All doctorate students receive a minimum of six credit hours of research methods courses and most take more. The required courses serve as a foundation for research and as students begin to progress through the degree program they take courses that are specific to their research interests such as various statistical techniques.

Program Update
For the Fall 2018, the doctoral program has been reconfigured to include six core courses that all students must take. In this new configuration, all doctoral students will take Epidemiology and Research (EAB 756) and Intermediate Biostatistics for Public Health Research (EAB 791). The Global and Environmental Health and Epidemiology and Biostatistics tracks both require an additional six credit hours beyond the required courses while the Social and Behavioral and Health Service Management and Policy tracks require an additional three credit hours. See electronic resource file for degree sheets.

D18.5 Final Research Project or Paper

Required Documentation: Briefly summarize policies and procedures relating to production and assessment of the final research project or paper. (self-study document)

The PhD dissertation is the culmination of the student's doctoral research. There are several policies and procedures related to the production and assessment of the dissertation, including the Oral Qualifying Examination, the Written Prospectus, the Oral Prospectus Presentation, the Written Dissertation, and the Final Oral Defense.

After successful completion of all required course work and the written Comprehensive Examination, each student must pass an Oral Qualifying Examination that will focus on assessing the student's knowledge relevant to the proposed dissertation topic as explained in the PhD Program Handbook. The Qualifying exam is administered by the student's Advisory Committee Chair (and Co-Chair, if one exists) and two faculty members outside of the Advisory Committee. The process and instructions for grading the exam are described below. The grading categories are Pass, Pass with Conditions, or Fail, and are documented on the Oral Qualifying Examination form. If the student does not pass, the Oral Qualifying Examination may be repeated once. If a student fails a second attempt, the student will be separated from the program. After passing the examination, the student may proceed with preparation of the Written Prospectus.

After the student and the Advisory Committee determine the topic and methods to be used for the dissertation research, the student will develop and formally present the proposed research plan as a Written Prospectus as explained in the PhD Program Handbook. The Written Prospectus is reviewed by the Advisory Committee Chair and evaluated by the Advisory Committee. The final draft must be provided to the Advisory Committee no less than two weeks before the scheduled Oral Prospectus Presentation. The Oral Prospectus Presentation is a public presentation of the research plan that must be announced two weeks in advance using the prospectus defense announcement form. Students, faculty, and other interested persons are invited to attend the Oral Prospectus Presentation. A succinct, 30-minute oral presentation will be followed by a public question and answer session. The Advisory Committee will excuse the audience and may continue the question and answer session with the student. The Advisory Committee will then deliberate privately to assess the Written Prospectus and the Oral Prospectus Presentation. There are three decisions the Advisory Committee can render as explained in the PhD Program Handbook:

- *Pass* – The student is able to begin their research. The committee may only have minor edits or suggestions.
- *Pass with Conditions* – The committee may ask the student to modify the written document, address additional issues, or respond to any committee questions or concerns. The student will submit the revised written prospectus to the committee. The student does not have to repeat the oral presentation.
- *Fail* – If the student fails the prospectus they must arrange a meeting with their Advisor to discuss options for addressing the identified problems. Students may repeat the prospectus once. If the student fails any part of the prospectus (written/oral or both) a second time they will be separated from the program.

Once the Advisory Committee approves the student's prospectus the student may advance to candidacy and begin their research.

The Written Dissertation presents the totality of the research plan, process, and results in a well-written, detailed manner. It is prepared according to PhD Program and Graduate College guidelines (PhD Program Handbook; http://www.unlv.edu/graduatecollege/thesis). The Written Dissertation is reviewed and assessed by the Advisory Committee Chair. After the student incorporates all required revisions into the Written Dissertation, the final draft is submitted to the Advisory Committee for review at least two weeks in advance of the Final Oral Defense.

The Final Oral Defense is an oral examination and public presentation of the results of the student's PhD dissertation that must be announced two weeks in advance (using the dissertation defense announcement form). Students, faculty, and other interested persons are invited to attend the Final Oral Defense. A succinct, 30- to 45-minute oral presentation will be followed by a public question and answer session. The Advisory Committee will excuse the audience and may continue the question and answer session with the student. The Advisory Committee will then deliberate privately to discuss their assessment of the Written Dissertation and the Final Oral Defense, and make a final decision. Additional revisions to the dissertation may be requested by the committee members and must be completed and approved by the Advisory Committee Chair.

D18.6 Production and Assessment of Final Research Project of Paper

Required Documentation: Provide links to handbooks or webpages that contain the full list of policies and procedures governing production and assessment of the final research project or paper for each degree program. (electronic resource file)

See Electronic Resource File.

D18.7 Deliverables

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

See Electronic Resource File.

D18.8 Assessment in Public Health Knowledge

Required Documentation: Briefly explain how the school or program ensures that the instruction and assessment in introductory public health knowledge is generally equivalent to the instruction and assessment typically associated with a three semester-credit course. (self-study document)

All PhD students are required to take the Doctoral Seminar, EOH 790. The structure of this three-credit course facilitates the public health knowledge required by CEPH. This course is divided into five units, which includes units for each track and a unit for student presentations. The public health knowledge is covered throughout the course by different faculty members.

If a student comes to our program without an MPH (or similar) degree, they are required to take the six core courses of the MPH as remediation. One of these courses is the Fundamentals of Public Health (EOH 710). This three-credit course serves as the public health knowledge course for the MPH program.

As indicated in the PhD in Public Health Program Handbook (see electronic resource file), all students are required to pass a written Comprehensive Examination. The examination is designed to assess the student's ability to synthesize core knowledge in the field of public health. It is currently based on the following MPH foundational coursework, or equivalent:

- EOH 740: Environmental Health
- EAB 703: Biostatistical Methods
- HED 720: Program Planning and Grant Writing
- EAB 705: Fundamentals of Epidemiology
- HCA 701: US Health Care Systems

After completion of this coursework, the student is eligible to register for the Comprehensive Examination. The examination is offered at the beginning of the fall and spring semesters each year. The PhD in Public Health Comprehensive Examination form must be completed and signed by the student and their Academic Advisor and submitted to the Graduate Coordinator. The Graduate Coordinator then contacts the student to schedule the examination and establish the due date for returning the answers to the examination. One of three versions of the examination is sent electronically to the student along with the criteria to be used in grading their answers. The exam is "open book", to be completed individually, and must be returned within a set period after receiving it from the Graduate Coordinator.

Upon receipt of the completed Comprehensive Examination, the Graduate Coordinator de-identifies the exam to protect the identity of the student and distributes each of the five answers to an appropriate subject matter expert among the faculty for grading. There are three levels for the final grade for each question: pass with distinction, pass, and fail. The grades earned by the student for each of the answers are distributed to the student along with any comments from the grader. There is currently a conditional pass used at the discretion of the grader. If a student receives a "pass with conditions", they must revise their answers in response to the comments provided by the grader and resubmit their answer for grading. A student who fails any question must retake the faile d question; this can be in the form of a written or oral re-examination (at the discretion of the Graduate Coordinator). Students who fail more than one question must re-take the failed question. The Comprehensive Examination may only be repeated once and must be repeated within a year of the initial attempt. Students unable to pass the Comprehensive Examination after a second attempt will be separated from the program after meeting with the graduate coordinator and the Department Chair.

After completion of the Comprehensive Examination, the PhD in Public Health Comprehensive Examination form that was initiated prior to the exam is finalized and routed for signatures and submission to the Graduate College. For examples, please see the Electronic Resource file.

D18.9 Syllabi

Required Documentation: Include the most recent syllabus for any course listed in the documentation requests above, or written guidelines for any required elements that do not have a syllabus. (electronic resource file)

See Electronic Resource File.

D18.10 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Research methods and statistical analysis are covered in all tracks of the PhD to facilitate quality research projects.

Weaknesses

- The lack of doctoral level courses is a weakness for this program but all four tracks have been redesigned. Effective Fall 2018, there will be five core doctoral level courses required by all students as well as track specific requirements and electives. These new courses have gained approval and will be available for students beginning in the fall of 2018.

D19. All Remaining Degrees (SPH, if applicable)

Students enrolled in any of the SPH's degree programs that are not addressed in Criteria D2, D3, D9, D13 or D14 complete coursework that provides a broad introduction to public health.

This introduction to public health addresses the learning objectives listed in this criterion, at a level of complexity appropriate to the level of the student's degree program. For example, if an SPH offers bachelor's degrees in concentrations other than public health, it may be more appropriate for courses addressing the competencies listed below to be held separately from those offered for graduate students. This instruction may be delivered through online, in-person or blended methodologies, but it must meet the following requirements while covering the defined content areas.

- **The instruction includes assessment opportunities, appropriate to the degree level, that allow faculty to assess students' attainment of the introductory public health learning objectives. Assessment opportunities may include tests, writing assignments, presentations, group projects, etc.**

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

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

1. **Explain public health history, philosophy and values**
2. **Identify the core functions of public health and the 10 Essential Services18**
3. **Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health**
4. **List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program**
5. **Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.**
6. **Explain the critical importance of evidence in advancing public health knowledge**
7. **Explain effects of environmental factors on a population's health**
8. **Explain biological and genetic factors that affect a population's health**
9. **Explain behavioral and psychological factors that affect a population's health**
10. **Explain the social, political and economic determinants of health and how they contribute to population health and health inequities**
11. **Explain how globalization affects global burdens of disease**
12. **Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)**

D19.1 Assessment Opportunities for Learning Objectives

Required Documentation: Provide a matrix in the format of Template D19-1 that indicates the required assessment opportunities for each of the defined introductory public health learning objectives (a-l). Typically, the school will present a separate matrix for each degree program, but matrices may be combined if requirements are identical. (self-study document)

Table D19.1a Introductory Public Health Learning Objectives Assessment Bachelor of Science in Health Care Administration and Policy		
Content	**Course number(s) and Name**	**Specific component (reading, lecture, discussion)**
1. Explain public health history, philosophy and values	HCA 175 U.S. Health Care System	Lecture – Introduction to the U.S. Health Care system; Readings Assessment: Exam
2. Identify the core functions of public health and the 10 Essential Services	HCA 175 U.S. Health Care System	Lecture – Introduction to the U.S. Health Care system; Readings Assessment: Exam
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	HCA 175 U.S. Health Care System HCA 201 Health Care Law	Lecture: Populations with special health needs. Assessment: Exam 2 Descriptive Epi 4: Health Indicators, Mortality/Measurements, Incidence and Prevalence; Lecture Health Indicators Mortality Assessment; Lecture: Analytical Epidemiology Assessment: Homework Assignments; Exams(1/2)
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	HCA 175 U.S. Health Care System HCA 202 Epidemiological Concepts for Health Care Administration	Lecture – Introduction to the U.S. Health Care system; Readings, Assessment: Exam Lecture: Descriptive Epidemiology Assessment: Exam, group lab report, and video production
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	HCA 175 U.S. Health Care System HCA 202 Epidemiological Concepts for Health Care Administration	Lecture – Foundations of Healthcare Delivery; Text and assigned articles Assessment: Exam Lecture: Infectious Disease, chronic disease, and clinical epidemiology Assessment: Exam, group lab report, and oral presentation
6. Explain the critical importance of evidence in advancing public health knowledge	HCA 175 U.S. Health Care System	Lecture: Cost, access, and quality Assessment: Exam
7. Explain effects of environmental factors on a population's health	HCA 202 Epidemiological Concepts for Health Care Administration HCA 203 Multicultural Diversity and the US Health Care System	Lecture: Chronic and Environmental Disease Epidemiology Assessment: Exam Assessment: Students create websites, e-books and videos that demonstrate their grasp of the various determinants of health
8. Explain biological and genetic factors that affect a population's health	HCA 202 Epidemiological Concepts for Health Care Administration	Lecture: Causal Models Assessment: Exam

Table D19.1a Introductory Public Health Learning Objectives Assessment Bachelor of Science in Health Care Administration and Policy, continued		
Content	**Course number(s)**	**Specific component (reading, lecture, discussion)**
9. Explain behavioral and psychological factors that affect a population's health	HCA 175 U.S. Health Care System	Lecture: Characteristics of the U.S. Health Care System Assessment: Exam 1
	HCA 202 Epidemiological Concepts for Health Care Administration	Lecture: Causal Models Assessment: Exam
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	HCA 175 U.S. Health Care System	Lecture: Health Policy Assessment: Student Group Discussion Exercise
	HCA 201 Health Care Law	Lecture/readings on the role of law in shaping access to healthcare (e.g., the Affordable Care Act, employer-based health insurance, emergency room access, Medicaid and Medicare access) and healthcare quality (e.g., medical malpractice, peer review); Readings and discussions about the American legal system (including legislation, regulation, and litigation) and how it shapes healthcare access, delivery, and quality Assessment: Quizzes and exams
	HCA 452 Health Politics and Policy	Lectures, Reading Assignments, guest lecturers Assessment: Class debates
11. Explain how globalization affects global burdens of disease	HCA 175 U.S. Health Care System	Lecture: Health Care comparative systems Assessment: Exam
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health)	HCA 202 Epidemiological Concepts for Health Care Administration	Lecture: Descriptive Epidemiology, Disease Classification Assessment: Exam

Table D19.1b Content Coverage for Master of Health Care Administration and Policy degree		
Content	**Course name and number**	**Specific Assessment Opportunity**
1. Explain public health history, philosophy and values	EOH 710 Fundamentals of Public Health	Assignment 1, Question 1 Assignment 2, Question 1 and Question 2
2. Identify the core functions of public health and the 10 Essential Services	EOH 710 Fundamentals of Public Health	Assignment 1, Question 2
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	EOH 710 Fundamentals of Public Health	Assignment 5, Question 3 and Question 4
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	EOH 710 Fundamentals of Public Health	Assignment 7, Question1 and Question 2
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	EOH 710 Fundamentals of Public Health	Assignment 3, Question 3 Assignment 11, Question 3
6. Explain the critical importance of evidence in advancing public health knowledge	EOH 710 Fundamentals of Public Health	Assignment 5, Question 2
7. Explain effects of environmental factors on a population's health	EOH 710 Fundamentals of Public Health	Assignment 10, Question1 Assignment 11, Question1 and Question 2
8. Explain biological and genetic factors that affect a population's health	EOH 710 Fundamentals of Public Health	Assignment 9, Question1
9. Explain behavioral and psychological factors that affect a population's health	EOH 710 Fundamentals of Public Health	Assignment 9, Question 2 (group) - Root Cause Analysis Worksheet
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	EOH 710 Fundamentals of Public Health	Assignment 9, Question 3 and Question 4
11. Explain how globalization affects global burdens of disease	EOH 710 Fundamentals of Public Health	Assignment 6, Question1
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	EOH 710 Fundamentals of Public Health	Assignment 13, Question1

Table D19.1C Content Coverage for Executive Master of Health Care Administration and Policy degree		
Content	**Course name and number**	**Specific Assessment Opportunity**
1. Explain public health history, philosophy and values	EOH 710 Fundamentals of Public Health	Assignment 1, Question 1 Assignment 2, Question 1 and Question 2
2. Identify the core functions of public health and the 10 Essential Services	EOH 710 Fundamentals of Public Health	Assignment 1, Question 2
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	EOH 710 Fundamentals of Public Health	Assignment 5, Question 3 and Question 4
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	EOH 710 Fundamentals of Public Health	Assignment 7, Question1 and Question 2
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	EOH 710 Fundamentals of Public Health	Assignment 3, Question 3 Assignment 11, Question 3
6. Explain the critical importance of evidence in advancing public health knowledge	EOH 710 Fundamentals of Public Health	Assignment 5, Question 2
7. Explain effects of environmental factors on a population's health	EOH 710 Fundamentals of Public Health	Assignment 10, Question1 Assignment 11, Question1 and Question 2
8. Explain biological and genetic factors that affect a population's health	EOH 710 Fundamentals of Public Health	Assignment 9, Question1
9. Explain behavioral and psychological factors that affect a population's health	EOH 710 Fundamentals of Public Health	Assignment 9, Question 2 (group) - Root Cause Analysis Worksheet
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	EOH 710 Fundamentals of Public Health	Assignment 9, Question 3 and Question 4
11. Explain how globalization affects global burdens of disease	EOH 710 Fundamentals of Public Health	Assignment 6, Question1
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	EOH 710 Fundamentals of Public Health	Assignment 13, Question1

D19.2 Assessment in Public Health Knowledge

Required Documentation: Briefly explain how the school ensures that the instruction and assessment in introductory public health knowledge is generally equivalent to the instruction and assessment typically associated with a three-semester-credit course. (self-study document)

The content for public health knowledge is covered through four different courses in the undergraduate program. Epidemiological Concepts for Health Care Administration (HCA 202) is the primary source for at least 1.5 credit hour equivalents; U.S. Health Care System (HCA 175) provides substantial content greater than one credit hour related to the public health components, and the balance is covered in Multicultural Diversity and the US Health Care System (HCA 203) and Health Politics and Policy (HCA 452). Not included in this assessment is Introduction to Public Health (PBH 205), which is a second-year seminar course taken by the majority of the health care administration students. Currently, second year seminar courses such as Introduction to Public Health (PBH 205) are open to all university students and UNLV policy does not require students to take specific second year seminar courses. The program will look for a waiver to this policy to require all undergraduate students to take the second-year seminar course. In this way, the program can assure that all 12 introductory public health learning objectives are covered in one single three credit course.

Beginning in the fall of 2018, all MHA students will be required to take Fundamentals of Public Health (EOH 710) which easily covers the public health knowledge. In the current MHA program, the content is covered through U.S. Health Care System: Programs and Policies (HCA 701) and Epidemiology in Health Services Management (HCA 702). Additional content is available through the MHA elective course Health Politics and Policy (HCA 652). U.S. Health Care System: Programs and Policies (HCA 701) has at least one credit equivalence related to the public health content while Epidemiology in Health Services Management (HCA 702) (cross listed as EOH 705), is primarily a public health course and addresses at least two credit equivalents. Other public health components will be added to those HCA graduate courses that are included as part of the MPH HCA track (in addition to U.S. Health Care System: Programs and Policies (HCA 701) and Epidemiology in Health Services Management (HCA 702), these include, Management of Health Service Organizations and Systems (HCA 703), Health Care Accounting and Finance (HCA 716), Operations and Quality Management of Health Services (HCA 719), and Strategic Management of Health Services (HCA 730).

Beginning in the fall of 2018, all EMHA students will be required to take Fundamentals of Public Health (EOH 710) which easily covers the public health knowledge. Currently, Survey of U.S. Health Care System: Programs, Policies and Politics (EMHA 701) and Epidemiology in Health Services Management (EMHA 702) cover the content for the Executive Master of Health Care Administration Program. Primary coverage is through Epidemiology in Health Services Management (EMHA 702), with additional content related to public health introductory information, policy, population health, prevention, and behavioral health issues covered as themes through many of the lecture topics in Survey of U.S. Health Care System: Programs, Policies, and Politics (EMHA 701). Because the EMHA is a new health care executive targeted degree, coverage of the public health competencies was not originally built into the program, but is substantially covered through Health Services Management (EMHA 702).

D19.3 Syllabi

Required Documentation: Include the most recent syllabus for any course listed in the documentation requests above, or written guidelines for any required elements that do not have a syllabus. (electronic resource file)

See Electronic Resource File.

D19.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The undergraduate HCA program and the graduate MHA program have ample content to cover the introduction to public health components and adequate assessment of those components. The undergraduate program has more course availability to cover the content through guided electives and second year seminars.
- The MHA has recently undergone the self-study process with CAHME with a final determination expected in May 2018. The undergraduate health care degree has recently be reaccredited through AUPHA.
- The MHA program has several courses that are part of the public health MPH track and therefore, covers the breadth of the introductory learning objectives.
- The Executive Master of Health Care Administration Program provides breadth of public health content to health care professionals, executives and managers that they may not have had prior to enrolling in the program.

Weaknesses

Bachelor of Science (BS) in Health Care Administration

- The BS in Health Care Administration has limited course availability options to provide more depth to the public health knowledge. UNLV students are required to complete 120 hours of course work in order to graduate, many of which are general education and required seminars (49 credits). Of those, health care administration courses account for 39-42 core credits within the HCA program. The program supplements these credits with 9 credits of guided electives that allow students to develop skill sets in health care specific areas including health policy, long-term care, quality management and patient safety. An additional 24 credits are required through the program's foundation courses (9 credits in the social sciences, 6 accounting credits, 6 economics credits, and three information technology credits).

Master of Health Care Administration (MHA)

- Depth of public health knowledge is also a challenge in the MHA Program. The challenge for providing more depth to the public health content in the MHA program is based on the limited number of credits required for the degree. Since the MHA degree is intended to provide more of the business and management skill sets, the addition of EOH 710 – Fundamentals of Public Health was necessary. This will be implemented in fall 2018 as a required course.

Executive MHA (EMHA)

- The EMHA program is a new program targeted to health care executives who make a substantial financial investment to focus specifically on health care administration-related content. Fundamentals of Public Health (EOH 710) will be added to the EMHA in fall 2018 as a required course.

D20. Distance Education (SPH and PHP, if applicable)

A degree program offered via distance education is a curriculum or course of study designated to be accessed remotely via various technologies, including internet-based course management systems, audio or web-based conferencing, video, chat or other modes of delivery. All methods support regular and substantive interaction between and among students and the instructor either synchronously and/or asynchronously and are a) consistent with the mission of the school or program and within the school or program's established areas of expertise; b) guided by clearly articulated student learning outcomes that are rigorously evaluated; c) subject to the same quality control processes that other degree programs in the university are; and d) providing planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of online learners.

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

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

The school or program has processes in place through which it establishes that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit. Student identity may be verified by using, at the option of the institution, methods such as a secure login and passcode; proctored examinations; and new or other technologies and practices that are effective in verifying student identity. The university notifies students in writing that it uses processes that protect student privacy and alerts students to any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

D20.1 Public Health Distance Education Degree Programs

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

Not applicable.

D20.2 Description of Public Health Distance Education Degree Programs

Required Documentation: Describe the public health distance education programs, including a) an explanation of the model or methods used, b) the school or program's rationale for offering these programs, c) the manner in which it provides necessary administrative, information technology and student support services, d) the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and e) the manner in which it evaluates the educational outcomes, as well as the format and methods. (self- study document)

Not applicable.

D20.3 Verification of Distance Education Students

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

Not applicable.

D20.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study)

Not applicable.

Criterion E

E1. Faculty Alignment with Degrees Offered

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

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated. Education refers to faculty members' degrees, certifications, fellowships, post-doctoral training, formal coursework completed, etc.

Experience refers to a range of activities including substantial employment or involvement in public health activities outside of academia. Experience also refers to the depth of service provided to professional and community-based public health organizations and to peer-reviewed scholarship in a discipline. Finally, experience relates to the individual's record of excellence in providing instruction in a discipline.

E1.1 Primary Instructional Faculty

Table E1.1 Primary Instructional Faculty Regularly Involved in Instruction

Name	Title/ Academic Rank	Tenure Status /Classification	Graduate Degrees Earned	Institution	Discipline	Concentration
Bhandari, Neeraj	Assistant Professor	Tenure Track	MD	Government Medical College, Amritsar, India	Medicine	Health Care Administration and Policy
			PhD	Pennsylvania State University, University Park, PA	Health Policy and Administration	
Bungum, Timothy	Professor	Tenured	DrPH	University of South Carolina, Columbia, SC	Public Health	Epidemiology and Biostatistics
Buttner, Mark	Professor	Tenured	PhD	University of Nevada, Reno, Reno, NV	Environmental Science and Health	Environmental and Occupational Health
Chen, Lung-Wen	Assistant Professor	Tenure Track	PhD	University of Maryland, College Park, MD	Chemical Physics	Environmental and Occupational Health
Chien, Lung-Chang	Assistant Professor	Tenure Track	DrPH	University of North Carolina, Chapel Hill, NC	Public Health	Epidemiology and Biostatistics
			MS	National Tsing-Hua University, Hsinchu City, Taiwan	Statistics	
Clark, Sheila	Faculty in Residence	FIR	PhD	University of Nevada Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Coughenour, Courtney	Assistant Professor	Tenure Track	PhD	University of Nevada Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Cruz, Patricia	Professor/Interim Associate Dean	Tenured	PhD	University of Nevada, Reno, NV	Environmental Science and Health	Environmental and Occupational Health
Dodge-Francis, Carolee	Associate Professor	Tenured	EdD	University of St. Thomas, Saint Paul, NM	Educational Leadership	Social and Behavioral Health
Epané, Josué	Assistant Professor	Tenure Track	PhD	University of Alabama at Birmingham, Birmingham, AL	Strategic Management	Health Care Administration and Policy
Houser, Kurt	Visiting Lecturer	Non tenure track	MBA	Gannon University, Erie, PA	Business Administration	Health Care Administration and Policy
			MS	Naval Postgraduate School, Monterey, CA	Manpower Systems Analysis	

Table E1.1 Primary Instructional Faculty Regularly Involved in Instruction, continued						
Name	**Title/ Academic Rank**	**Tenure Status /Classification**	**Graduate Degrees Earned**	**Institution**	**Discipline**	**Concentration**
Labus, Brian	Visiting Research Professor	Not tenure track	PhD	University of Nevada Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Lin, Ge	Professor	Tenured	PhD	State University of New York at Buffalo, Buffalo, NY	Spatial Epidemiology, GIS	Epidemiology and Biostatistics
Moonie, Sheniz	Associate Professor	Tenured	PhD	Saint Louis University, Saint Louis, MO	Public Health Studies	Epidemiology and Biostatistics
Morgan, Amanda	Faculty in Residence	FIR	DHS	The Institute for Advanced Study of Human Sexuality, San Francisco, CA	Human Sexuality	Social and Behavioral Health
			MPH	University of Nevada, Las Vegas, Las Vegas, NV	Public Health	
Pharr, Jennifer	Assistant Professor	Tenure Track	PhD	University of Nevada, Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Pinheiro, Paulo	Associate Professor	Tenured	MD	University of Coimbra, Coimbra, Portugal	Medicine	Epidemiology and Biostatistics
			PhD	University of Miami, Miami, FL	Epidemiology	
			MSc	Netherlands Institute for Health Sciences, Erasmus University of Rotterdam , The Netherlands	Epidemiology	
Regin, Charles	Assistant Professor	Tenured	PhD	Southern Illinois University, Carbondale, IL	Health Education	Social and Behavioral Health
Rodriguez, Rachelle	Assistant Professor	Tenure Track	PhD	University of California, Los Angeles, Los Angeles, CA	Epidemiology	Epidemiology and Biostatistics
			MPH	University of California, Los Angeles, Los Angeles, CA	Public Health: Epidemiology	
Shan, Guogen	Associate Professor	Tenure Track	PhD	The University of New York at Buffalo, Buffalo, NY	Biostatistics	Epidemiology and Biostatistics
Shen, Jay	Associate Dean/ Professor	Tenured	PhD	Virginia, Commonwealth University, Richmond, VA	Health Services Organization and Research	Health Care Administration and Policy
			MS	Harvard University, Boston, MA	Health Policy and Management	
Sotero, Michelle	Assistant Professor	Tenure Track	PhD	University of Nevada Las Vegas, Las Vegas, NV	Public Health	Health Care Administration and Policy
Sy, Francisco S.	Professor	Tenured	MD	University of the Philippines, Manila, Philippines	Medicine	Environmental and Occupational Health
			DrPH	Johns Hopkins University, Baltimore, MD	Public Health	
			MSc	Harvard University, Boston, MA	Tropical Public Health	
Thompson-Robinson, Melva	Professor	Tenured	DrPH	University of South Carolina-Columbia, Columbia, SC	Health Promotion and Education	Social and Behavioral Health
Upadhyay, Soumya	Assistant Professor	Tenure Track	PhD	University of Alabama at Birmingham, Birmingham, AL	Health Services Research /Health Administration	Health Care Administration and Policy

E1.2 Other Faculty

Table E1.2 Non-Primary Instructional Faculty Regularly Involved in Instruction							
Name	**Academic Rank**	**Title and Current Employment**	**FTE or % Time Allocated**	**Graduate Degrees Earned**	**Institution(s) from which degree(s) were earned**	**Discipline in which degrees were earned**	**Concentration**
Burns, Mackenzie	Part Time Instructor	PTI	0.2	PhD	University of Nevada Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Brezinski, Paul	Part Time Instructor	PTI	0.2	PhD	University of Iowa	Health Services and Policy	Health Care Administration and Policy
Burston, Betty	Faculty In Residence	FIR	1.0	PhD	American University, Washington, D.C.	Economics	Health Care Administration and Policy
Bussman, Sarah	Adjunct Faculty	PTI	0.2	MHA	University of Nevada, Las Vegas, Las Vegas, NV	Health Care Administration	Health Care Administration and Policy
Cochran, Christopher	Professor	Tenured	1.0	PhD	University of South Carolina, Columbia, SC	Health Services Research	Health Care Administration and Policy
Cross, Chad	Visiting Associate Research Professor	Not tenure track	0.25	PhD	Old Dominion University, Norfolk, VA	Ecological Sciences - Statistics	Environmental and Occupational Health
Ezeanolue, Echezona	Professor	Tenured	1.0	MD	College of Medicine, University of Nigeria	Bachelor of Medicine; Bachelor of Surgery	Environmental and Occupational Health
				MPH	UMDN/New Jersey School of Public Health	Public Health	
Fraser, Barbara	Part Time Instructor	PTI	0.2	MHA	University of St. Francis, Joliet, IL	Health Care Administration	Health Care Administration and Policy
Haboush-Deloye, Amanda	Full time staff	Professional Staff	1.0	PhD	University of Nevada, Las Vegas, Las Vegas, NV	Psychology	Environmental and Occupational Health
Hunt, Aaron	Part Time Instructor	PTI	0.2	MPH	University of Nevada, Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Hurst, Larry	Part Time Instructor	PTI	0.2	MA	Drake University, Des Moines, IA	Business and Public Administration	Health Care Administration and Policy
Gakh, Maxim	Assistant Professor	Tenure Track	0.75	JD	The Ohio State University Columbus, OH	Law	Environmental and Occupational Health
				MPH	John Hopkins University, School of Public Health, Baltimore, MD	Public Health	
Gbadamosi, Semiu	Part Time Instructor	PTI	0.2	MPH	Texas A & M, College Station, TX	Epidemiology	Environmental and Occupational Health
Gerstenberger, Shawn	Dean/ Professor	Tenured Dean	1.0	PhD	University of Illinois, Champaign, IL	Toxicology	Environmental and Occupational Health
Lauckner, Kathleen	Part Time Instructor	PTI	0.2	PhD	University of Nevada, Las Vegas, Las Vegas, NV	Higher Education Leadership	Environmental and Occupational Health

Table E1.2 Non-Primary Instructional Faculty Regularly Involved in Instruction, continued							
Name	**Academic Rank**	**Title and Current Employment**	**FTE or % Time Allocated**	**Graduate Degrees Earned**	**Institution(s) from which degree(s) were earned**	**Discipline in which degrees were earned**	**Concentration**
Meléndrez, José	Administrative Faculty	Professional Staff PTI	1.0	MSW	University of Michigan	Social Work	Environmental and Occupational Health
Papesh, Chris	Part Time Instructor	PTI	0.2	MBA	San Francisco State University, San Francisco, CA	Finance	Health Care Administration and Policy
Rodriguez, Raymond	Part Time Instructor	PTI	0.2	MPH	University of Nevada, Las Vegas, Las Vegas, NV	Public Health	Environmental and Occupational Health
Shaps, Jennifer	Part Time Instructor	PTI	0.2	MA	University of Nevada, Las Vegas, Las Vegas, NV	Health Promotion	Environmental and Occupational Health
Shegog, Marya	Assistant Professor	Tenure Track	0.51	PhD MPH	University of South Carolina, Arnold School of Public Health, Columbia, SC	Health Promotion, Education, and Behavior	Social and Behavioral Health
Stephens, Glen	Part Time Instructor	PTI	0.2	JD	Drake University Law School, Des Moines, IA	Law	Health Care Administration and Policy
Wolff, Carissa	Adjunct Faculty	PTI	0.2	MEd	University of Nevada, Las Vegas, Las Vegas, NV	Health Promotion	Environmental and Occupational Health
Woodard, David	Full Time Staff	Professional Staff PTI	0.3 Lab 0.2 SCHS	MSc	New Mexico State University, NM	Microbiology	Environmental and Occupational Health
Wu, Qing	Associate Professor	Tenured	0.51	MD Sc.D.	Wannan Medical College, Anhui, China Tulane University School of Public Health and Tropical Medicine, New Orleans, LA	Clinical Medicine Biostatistics	Epidemiology and Biostatistics

E1.3 Faculty CVs

Required Documentation: Include CVs for all individuals listed in the templates above. (electronic resource file)

See Electronic Resource File.

E1.4 Narrative Explanation

Required Documentation: If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates. (self-study document)

Using the definition of Primary Instructional Faculty outlined in the Accreditation Criteria handbook (amended October 2016) if faculty were full-time employees of the SCHS and taught at least one of the courses identified in one of the four concentrations in Public Health, then they were included on the list of Primary Instructional Faculty (E1.1). If faculty were part-time and taught in one of those concentrations, they were included on the list of Non-Primary Instructional Faculty, identified in E.1.2.

How FTEs Are Calculated at UNLV:
Refer to C2.2 for how FTEs are calculated at UNLV. Certain faculty found on the E1.2 table are split between the school and other units within UNLV. For example, Max Gakh has a .75 appointment within the SCHS and a .25 appointment within the Law School. Dr. Qing Wu is .51 within the school and .49 at the Nevada Institute of Personalized Medicine. Dr. Chad Cross is .25 within the school and .75 at UNLV's School of Medicine. Dr. Marya Shegog is the Director of Health Programs at the Lincy Institute (.49 FTE) and .51 for the school. David Woodard splits his time between the lab (.3 FTE) and teaching (.20 FTE).

E1.5 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Four SCHS faculty have dual appointments with other academic programs on the UNLV campus, which provides the SCHS with experts working in multiple fields bringing collaborative relationships into the SCHS.

Weaknesses

- The SCHS has hired additional faculty over the past three years but these faculty are new and focusing some of their efforts on gaining tenure. More tenured faculty would be of benefit. There are currently open lines in the area of health disparities and social and behavioral health as well as one health care faculty in residence line, and two epidemiology positions. Some of these positions may be filed by tenured faculty.

E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the school or program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Schools and programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, schools and programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

E2.1 Integration of Perspectives from Field of Practice

Required Documentation: Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified. (self-study document)

Many of the School of Community Health Sciences faculty had significant professional experience and accomplishments before working in their current academic positions. The school has attracted faculty that have worked as research scientists, epidemiologists, attorneys, medical doctors, microbiologists, consultants, grant writers, executives, and statisticians for local, state, and federal agencies. Some examples are listed below.

Dr. Michelle Sotero worked for three years as a Senior Health Educator/Program Coordinator for the Southern Nevada Health District (SNHD) as well as in human resources at University Medical Center. She oversaw a one million dollar US Department of Health and Human Services Office of Adolescent Health teen pregnancy prevention grant while with SNHD. In that capacity, she ensured the implementation of evidence based, culturally sensitive curricula to program partners, including fidelity to the model, developed strategy and work plans to achieve stated program goals and measurable objectives, designed, and implemented sustainability projects including community coalition, and social media/marketing/branding campaigns.

Dr. Neeraj Bhandari became a Medical Doctor in 1997 and worked for the next twelve years in India as a Medical Officer at the Health and Family Welfare Department. He then worked as a Medical Consultant before working for four years in the Intensive Care Unit at a nursing home in New Delhi, India.

Dr. Mark Buttner worked for twenty years at the Harry Reid Center for Environmental Studies, University of Nevada, Las Vegas in the Microbiology Division. Dr. Patricia Cruz also worked as a Microbiologist in the Microbiology Division for fourteen years before becoming a professor. This Division functioned as a 100% soft-money funded group with four to a dozen professional staff. Research studies focused on the quantification and detection (by culture analysis and enhanced molecular methods) of environmental microorganisms of human health concern, decontamination efficacy, and comparison of surface/air sampling and DNA extraction methods. Clients included the EPA, DOD, National Laboratories, and private industry, among others. Over twenty undergraduate students worked on wages in the laboratory over a period of 15+ years.

Dr. Lung Chang-Chien worked for four years as a Statistical Consultant at the University of North Carolina, Chapel Hill in the School of Nursing while working on his Doctorate in Public Health. After graduation, he worked over the next two years as a statistician in various locations.

Dr. Carolee Dodge Francis worked as an Executive Director for twenty years, first at the Dickinson Area Community Foundation and then at the American Indian Research and Education Center at UNLV. Prior to that, she worked as a Health Promotion Director and a Public Health Consultant for the Centers for Disease Control and Prevention.

Dr. Echezona Ezeanolue was the Robert Wood Johnson Health Policy Fellow in the Office of the Secretary, Health and Human Services for one year before becoming a PRIDE Scholar in the NIH Program to Increase Diversity in Health-Related Research. Under his purview, the Global Health Initiative was established at the School. Global Health research areas include Implementation Science Research, Maternal-Child Health, Community-Based Participatory Research, Health Disparity Research, and Population/Global Health.

Dr. Francisco Sy worked for almost ten years in a Director role in different offices at the National Institute on Minority Health and Health Disparities (NIMHD) for the National Institutes of Health. In his 12 years at NIH/NIMHD, he served in various leadership positions including Director, Office of Community-Based Participatory Research & Collaboration; Director, Office of Extramural Research Administration; and Director, Division of Extramural Activities & Scientific Programs. He was also the President of NIH Asian Pacific American Organization (APAO). At the Centers for Disease Control and Prevention (CDC), Dr. Sy was a Senior Health Scientist in the Division of HIV/AIDS Prevention for 4 years. In 2003, he volunteered and led the CDC SARS Community Outreach Team in Asian communities in the U.S. to mitigate the fear and stigma associated with SARS.

Dr. Brian Labus worked as an epidemiologist at the Southern Nevada Health District for fifteen years before working for UNLV. He served as the Senior Epidemiologist for thirteen of those years. In that position he created, implemented, maintained and evaluated disease surveillance systems, including the development of a novel patient complaint-based syndromic surveillance system for communicable diseases and a sentinel physician respiratory disease surveillance system. Dr. Labus lead investigations of numerous outbreaks of foodborne disease, respiratory disease, vaccine preventable disease, and healthcare-acquired disease in Las Vegas, including leading the investigation of the largest outbreak of healthcare-acquired hepatitis C in United States history, with 63,000 exposed patients. He conducted the field investigation, developed, implemented, and analyzed questionnaires, responded to media requests for information and interviews, testified to the state legislature and briefed Nevada's congressional delegation, and assisted in the development of new statutes and regulations. He developed public health informatics projects including a foodborne illness complaint system, the health alert network system, systems for tracking information during outbreaks, and electronic laboratory report processing.

Dr. Rachelle Rodriguez worked for Mapi Real World Evidence as their Senior Epidemiologist in the Epidemiology Department. As part of this role, she designed prospective and retrospective observational studies, had oversight for execution of studies, analyzed retrospective observational database studies, and conducted epidemiologic literature reviews. Prior to that position, she worked for Eli Lilly and Company as a research scientist. She represented the product team for Health Outcomes Department, developed global Health Outcomes / Health Economics strategies, conducted literature reviews and epidemiologic studies, evaluated and analyzed clinical trial data, and developed strategies to tailor diabetic therapies to relevant populations.

Kurt Houser worked for over three years as a Chief Operating Officer for two different hospitals before starting to work for the Health Care Administration and Policy Department as their Internship Coordinator. At the Naval Hospital, Camp Lejeune, NC he worked as a senior leader of a 12-member Board of Directors with 2,200 staff in a 90-bed inpatient Joint Commission accredited Graduate Medical Education Family Medicine Teaching Hospital employing 390 providers with multispecialty inpatient and outpatient services. As the COO for a local hospital, University Medical Center of Southern Nevada (UMCSN), he was the operational leader of a 541-bed hospital, Nevada's only level 1 trauma center, burn center, and designated children's trauma center, supporting over 5,100 employees and providers. He helped to create the ICARE4U patient and staff experience model, training all employees, which resulted in improved Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) and staff engagement scores. He led collaborative quality and safety initiatives resulting in a 74% reduction in reportable hospital acquired complications, improving the composite safety score by 40%. He also re-negotiated several provider and vendor contracts resulting in over $5M in savings, contributing to UMCSN's first ever year with a positive net operating income. He also collaborated with the University of Nevada, Las Vegas, School of Medicine toward an integrated academic health center.

Max Gakh worked as an attorney for eight years prior to joining the faculty in the SCHS. He was a Visiting Attorney, completing the Robert Wood Johnson Foundation Fellowship, Partnership for Public Health Law, in Washington, DC from 2012-2014. He assisted staff and members of the American Public Health Association (APHA), Association of State and Territorial Health Officials (ASTHO), National Association of County and City Health Officials (NACCHO), and National Association of Local Boards of Health (NALBOH) to use the law to advance public health. In this role, he also provided training and legal technical assistance to partnership organizations on implementation of the Affordable Care Act, reduction of violence, local health department authority, cross-jurisdictional resource sharing, and other issues. He also researched legal mechanisms to facilitate "Health in All Policies" (HiAP), a cross-cutting approach fostering inclusion of public health analysis in all government decisions. Prior to his Fellowship Mr. Gakh worked as a Law and Policy Analyst for the University of Maryland Center for Health and Homeland Security where he analyzed public health preparedness law and produced reports and memoranda for state and local government agencies. He has also conducted trainings and presentations on legal liability, public-private partnerships, and preparedness.

E2.2 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths:

- The school has an excellent mix of traditional academics and practitioners with many years of experience in their respective fields.
- Several faculty members have many years of experience in federal level agencies.
- SCHS faculty are from different backgrounds and their work experience enriches classroom teaching and provides students with real world perspectives on public health.
- Faculty from different industries/fields build connections with their respective fields more easily including arranging guest speakers and field visits, which benefits students
- Several of our faculty demonstrate the effects of their prior work experience in improving teaching, which is well received by students.
- Faculty experiences provide them with the ability to offer career counseling to students about jobs outside of academia.

Weaknesses:

- There are no appointment tracks for practitioners offered in the SCHS.
- All faculty with industry experience may not be able to effectively translate their working experience in enhancing teaching practices

E3. Faculty Instructional Effectiveness

The school or program ensures that systems, policies and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The school or program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The school or program supports professional development and advancement in instructional effectiveness.

E3.1 Informing and Maintaining Currency of Faculty

Required Documentation: Describe the means through which the school or program ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant. (self-study document)

In addition to university allocated operating budgets, the department receives revenue, including indirect cost allocations from external and summer school revenue. These funds are used to enhance operating budgets, including travel allocations for faculty to participate in scholarly proceedings for all faculty. These funds are also used to pay for employee travel for conferences and professional meetings. These conferences are an excellent opportunity for networking and professional development.

UNLV also has an active Office of Instructional Development and Research that provides opportunities for development on campus. Please see https://www.unlv.edu/provost/idr/events for more details regarding the types of opportunities available including peer mentoring, research mentoring, technology training, and teaching development opportunities.

When new faculty are hired they are generally provided start-up funds, in the range of $10,000-$600,000 with most faculty receiving $50,000-$100,000. The funds are to be used for additional research needs (i.e., software, data, equipment), or for additional travel that the department is unable to provide through its operating budget. The amount varies depending upon the nature of the research, equipment needed, etc. The department's goal is to provide travel to at least one conference per year per faculty. Faculty can also request travel funds through the University.

To document continuous faculty development, the school uses a program, Digital Measures, to track faculty productivity and accomplishments each year. For example, Dr. Qing Wu documented in 2016 that he completed a Quality Bone Densitometry course through The International Society for Clinical Densitometry in this program. Drs. Cochran and Sy also documented their attendance at a seminar for Department Chairs.

E3.2 Evaluating Faculty Instructional Effectiveness

Required Documentation: Describe the school or program's procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable. (self-study document)

Tenured/tenure track faculty and full-time instructors in the program are evaluated annually by the department chair using the annual workload reports. This evaluation includes teaching, research, and service for tenure/tenure track faculty and teaching for faculty-in-residence (full-time instructors). Assistant professors submit a mid-tenure review in their third year to be evaluated at the department and school level. This review evaluates teaching (and research and service) performance. During the annual review, faculty teaching evaluations, which are completed by students in both the Fall and Spring semesters, are reviewed. This evaluation is usually conducted by one of the SCHS's Administrative Assistants without the instructor present. Examples of questions, in addition to a comments section, from the evaluation are:

- "The instructor's presentation of the goals and purpose of the course was…"
- "The instructor's command of the subject matter was…"
- "The instructor's presentation of course material was…"
- "The instructor's evaluation methods were…"
- "The instructor's provision of opportunities to increase student's knowledge of the subject was…"
- "Overall, I would rate the instructor's performance in the course as…"

E3.3 Support for Improvement in Instructional Roles

Required Documentation: Describe available university and programmatic support for continuous improvement in faculty's instructional roles. Provide three to five examples of school or program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty. (self-study document)

In the school, faculty development includes informal mentoring (senior faculty guidance of junior faculty in the areas of teaching, professional development, and research), departmental meetings, and faculty retreats. The SCHS has adopted a peer teaching evaluation committee to review new faculty in their first and third years in order to help them improve their teaching methods. This includes an in-class observation of teaching and appropriate feedback, which should facilitate improvement.

The Department Chair also conducts annual faculty evaluations, which include an examination of productivity, teaching evaluations, and progression towards tenure, if applicable. These are submitted to the SCHS Dean for approval and discussion. The Dean's office makes resources available for training and grant writing when available.

Faculty are also supported through travel funds when they are attending an academic conference with the approval from their department chair. Many faculty have extensive grants, which pay for travel to meetings and conferences. These conferences are an excellent opportunity for networking and professional development. We recently created a faculty development fund that allocates $2,500 annually per faculty member allowing them to participate in professional development of their choice. This can include but is not limited to professional conferences, online teaching trainings, grant writing seminars, mentorship, or other appropriate activities. A formal policy for eligibility was distributed by the department chairs in March 2018; and funds were transferred to the departmental accounts to support these efforts.

UNLV also has an active Office of Instructional Development and Research that provides opportunities for development on campus, details regarding the types of opportunities can be found at https://www.unlv.edu/provost/idr/events. These include peer mentoring, research mentoring, technology trainings and teaching development opportunities.

UNLV offers many programs aimed at faculty development. Programs range from release time to faculty mentoring and are aimed at different stages of faculty development (junior to senior). For example, the Office of Academic Assessment offers workshops and colloquia on assessment, teaching and learning, and related topics, which are open to all faculty. UNLV provides a number of resources, including the faculty development program, the faculty mentoring program, workshops, "brown bag sessions," grant writing consultations, and other collaborative meetings to help faculty improve their research. For example, Dr. Epané received a $5,000 grant in 2015 and Drs. Chen, Gakh, and Pharr received $5,000 in 2016 to attend the grant writing boot camp organized by UNLV Office for Sponsored Programs. Dr. Shan obtained $10,000 through the Mountain West Clinical and Translational Research Infrastructure Network (CTR-IN) to work with his mentor at University of Hawaii School of Medicine on clinical trial methodology as a visiting faculty member in 2015. Dr. Epané and Dr. Sotero were both chosen to attend the Established Program to Stimulate Competitive Research (EPSCoR) Early Career Faculty Workshop in 2017.

UNLV also offers support for pedagogical development through the Office of Online Education (OE), which supports faculty developing and teaching both online and hybrid courses. The Department of Health Care Administration and Policy used this office to support the development of the entire Executive Master of Health Care Administration program and some of the Bachelors and Master of Health Care Administration courses. Mr. David Woodard has also developed several classes for the Infection

Prevention Certificate with OE's assistance (more details in E3.5).

Another example of programs aimed at faculty development is the Best Teaching Practices Expo, sponsored by Instructional Development & Research, Academic Success Center, and the University Libraries, which is scheduled for January 2018. This expo is open to all UNLV faculty and encourages them to explore new innovative teaching techniques.

Instructional support for faculty is available through grants regarding teaching and assessment practices, including College of Education institutional grants and the Office of Assessment mini-grants. The UNLV administration collaborated with the program to provide a training workshop on the "Harvard Case Study Method" in 2014.

UNLV also offers a WebCampus Support Site which is a helpful repository of WebCampus tip sheets, known issues and workarounds, plus other useful information to help get faculty started using this learning management system. In Fall 2018, this system will transition to Canvas, and the university will offer the same kind of support offered with WebCampus. They are offering open labs and training sessions where faculty can work on preparing courses and ask for assistance when they need it. Also UNLV faculty and staff have access to a huge library of software training videos (including Canvas) through Lynda.com using their employee access (ACE) accounts.

Also offered at the University level, the Office of Instructional Development and Research is a resource for faculty members seeking to improve their instructional practices. The Office conducts research on best practices in teaching and learning, organizes regular workshops, and offers consultative services. Instructional librarians from the UNLV Libraries offer classroom support on a variety of subject matters, including informational literacy and research skills. The Libraries also provide instructional training to faculty through workshops and individual consultations. The brand new Academic Multicultural Center provides faculty members with instructional development assistance regarding concerns specific to diverse and multicultural students.

E3.4 Role of Evaluations in Decisions

Required Documentation: Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement. (self-study document)

The Nevada System of Higher Education Code identifies Standards for Recommending Appointment with Tenure. The consideration of a recommendation for appointment of an academic faculty member with tenure shall include the application of three standards and the ratings contained in this subsection, which shall be applied in consideration of the conditions for appointment with tenure stated in Subsection 3.1.2 of the Nevada System of Higher Education Code. The burden of demonstrating that these standards have been met lies with the applicant for appointment with tenure. In standards one and two, an academic faculty member being recommended for appointment with tenure must receive an "excellent" rating in one of these standards and no less than a "satisfactory" rating in the other. Standard one addresses teaching/performance of assigned duties. Either of the following apply depending upon the faculty member.

> A. If applying for tenure as a university instructor, a record of effectiveness as a teacher, including, but not limited to, demonstrated teaching competence and efficiency in a classroom, laboratory, and/or clinical setting, the ability to communicate effectively with students and demonstrated skill in handling classroom and other duties related to teaching. Such a record may include, for example, a showing of the ability to impart knowledge, to excite students' interest in the subject matter, to evoke a response from students and to demonstrate competence in advising students.
> B. If applying for tenure as a member of the academic faculty whose role does not include instruction, a record of effectiveness, efficiency and ability to perform assigned duties.

Standard two pertains to research, scholarly, creative and entrepreneurial activity and standard three pertains to service.

In addition, SCHS faculty follow the P&T guidelines specific to the school, approved in 2016. The SCHS workload policy and promotion and tenure guidelines define the metrics and measures used to evaluate instructional effectiveness. The SCHS Faculty Review Committee reviews applications of faculty seeking promotion and/or tenure, and submits recommendations, including rationale, to the Dean. The Committee follows the promotion and tenure procedures for academic faculty in reviewing promotion and/or tenure applications. The mid-tenure review focuses on the individual's activities since appointment, and evaluates the quality and quantity of the individual's productivity related to teaching, scholarship, and service. Strengths and areas of needed improvement are identified. The mid-tenure review is completed by the Department and the Faculty Review Committee who provide input to the Dean of the SCHS. Suggestions for strengthening the overall record of productivity are provided by the Dean. All annual evaluations, mid-tenure evaluations, and teaching evaluations are required components of promotion and tenure packets. These are reviewed, discussed and required documentation at all levels (department, school, faculty senate, provost, and president).

E3.5 Instructional Quality

Required Documentation: Select at least three indicators, with one from each of the listed categories that are meaningful to the school or program and relate to instructional quality. Describe the school or program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists that follow, the school or program may add indicators that are significant to its own mission and context. Schools should focus data and descriptions on its public health degree programs. (self-study document)

Faculty currency

- *External reviews of proposed or existing courses or curricula, outside of normal university processes*
- *Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc.*
- ***Annual or other regular reviews of faculty productivity, relation of scholarship to instruction***
- *Faculty maintenance of relevant professional credentials or certifications that require continuing education*

Faculty instructional technique

- *Frequency of internal quality reviews of existing courses or curricula*
- *Participation in professional development related to instruction*
- *Peer evaluation of teaching*
- *Student satisfaction with instructional quality*

School- or program-level outcomes

- *Courses that are team-taught with interprofessional perspectives*
- *Courses that integrate technology in innovative ways to enhance learning*
- *Courses that involve community-based practitioners*
- *Courses that integrate service learning, as defined by the school or program*
- *Courses that integrate community-based projects*
- *Courses that use higher-level assessments*
- *Courses that employ active learning techniques*
- *Teaching assistants trained in pedagogical techniques*
- *Implementation of grading rubrics*
- *Any other measure that tracks use of pedagogical techniques and is meaningful to the school or program*

Faculty Currency: Annual or other regular reviews of faculty productivity, relation of scholarship to instruction

The school's workload policy is a vital instrument for assuring that faculty members are completing the activities necessary for achieving success as well as tenure and promotion. The workload policy was approved by the SCHS faculty in 2016 and describes the requirements related to research, teaching and service. The workload policy serves as the basis for annually evaluating faculty regarding their progress towards tenure and/or promotion. Besides the annual reviews conducted each spring, department chairs generally meet informally with faculty members to discuss potential collaborations and/or funding opportunities.

A formal review process is also conducted each year for all faculty members. This includes tenured faculty, tenure-track faculty, and full-time non-tenured faculty and instructors. At the end of each calendar year, faculty members submit an annual workload report that describes their scholarship, teaching, and service activities as set forth in the school's workload policy. Faculty members describe all of their scholarship activities completed each year, teaching activities and evaluations, and service activities. The report is submitted to the department chairs for review. This report is used for documentation to assess the faculty member's progress towards tenure and/or promotion. The department chair evaluates the workload report and any documentation provided and completes an annual evaluation for each faculty member. As part of that process, the department chair meets with each faculty member to review his or her annual report. The department chair's written evaluation summarizes the faculty member's accomplishments as well as areas for improvement. Faculty members are also given the opportunity to add information when they disagree with some or all of the content in the review. Faculty members and their chairs sign the annual evaluation, which may include recommendations for improving the faculty member's performance. The reviews are also submitted to the SCHS Dean. This information is important for assisting the faculty member achieve their tenure and promotion goals.

In 2017, the SCHS implemented a peer teaching evaluation for tenure-track and non-tenure track faculty members (faculty-in-residence) to assist them in improving their teaching. This evaluation is completed by a team consisting of no fewer than two tenured faculty during the faculty member's first and third years. The process applies to all tenure-track faculty and faculty-in-residence, as part of the tenure and/or promotion process.

Tenure-track faculty must also complete a mid-tenure report during the middle of the faculty member's third year. The mid-tenure report is reviewed separately by the faculty member's department chair, a department committee of tenured faculty, and the SCHS Faculty Review Committee to assess the faculty member's progress towards tenure. These reviews are also submitted to the SCHS Dean for review and input. The information from those reviews is then shared with each faculty member to discuss their progress towards tenure.

For tenure and promotion, the faculty member again submits an application for tenure and promotion that undergoes a similar review process at the end of the faculty member's fifth year. At this juncture, the faculty member's tenure and promotion portfolio is also submitted to peers from four outside institutions for their input. Feedback from those reviewers is included in the application by the department chair before the internal review process is completed. The internal process is completed by the Department Chair, a departmental tenure and promotion committee, the SCHS Faculty Review Committee and ultimately the SCHS dean for recommendation to the UNLV Executive Vice President and Provost and the UNLV Faculty Senate Tenure and Promotion Committee.

Faculty Instructional Technique: Peer evaluation of teaching

Over the last year (2016-17) the SCHS developed a peer observation of teaching process that is going into effect during the 2017-18 AY. All faculty members who have reached the rank of Associate Professor or higher and have tenure will be part of a pool of faculty who can serve as observers. All eligible faculty members are expected to participate in this process. Peer observation of teaching should be completed within a faculty member's first year of hire and during the academic year in which a faculty member submits their mid-tenure packet for review. In the 2017-18 AY, Dr. Francisco Sy already summoned two tenured faculty who conducted the evaluation of Dr. Amanda Morgan (Faculty in Residence). By the end of this semester, Dr. Chris Cochran will be evaluating Dr. Soumya Upadhyay (Assistant Professor). See Electronic Resource file for procedures and forms.

School- or program-level outcomes: Courses that integrate technology in innovative ways to enhance learning

The Infection Prevention Certificate may be completed fully online, and is comprised of four courses: Principles of Infection Prevention, Healthcare Associated Infections: Surveillance, Data, and Reports, Infection Prevention in Healthcare Facilities, and the choice of either Infectious Disease Epidemiology or Transmission of Infectious Diseases. Transmission of Infectious Diseases is the only course not offered online. Mr. David Woodard has developed several of these classes. The teaching modules are based on PowerPoint presentations prepared by the instructor. The Online Education (OE) department then has talented artists who prepare each slide for esthetics, accessibility, and readability. The instructor records the lectures, which are then retained as a YouTube video. The OE department also prepares a closed-caption addition to each lecture. Each week of class has a combination of modules, direct feedback quizzes to assess understanding and knowledge embedded in the module, as well as links to other online material such as YouTube videos and links to publications (required reading). All of the material is considered as testable for the four examinations. Additionally, WebCampus is utilized to communicate with the students for assignments, clarification, and examination feedback. The instructor is also able to incorporate "open access" materials from the Internet that are pertinent to the material being presented. The examinations are also given via WebCampus, a test library is created, and the system will not only scramble the answers, but also the questions so that it is extremely difficult to have a "cooperative" effort with the examinations. This permits the student to write their exam at any time during a prescribed exam period, but the instructor can control the time available to complete the process.

Dr. Rachelle Rodriguez also uses new technology in her lectures. She uses an internet scavenger hunt to have students become more familiar with different types of public health organizations and has students complete Kahoot! mini-quizzes (to assess understanding) throughout her lectures using their smart devices. This gives real time information for informal assessment. Students are asked to login to the Kahoot! (a quiz) and as each question is presented, the students have 30 seconds to provide an answer. Students are allowed to work in pairs for students who do not have a smart device to connect to the internet. After the students' time is up, the answer is revealed as well as the breakdown of all students' responses. Dr. Rodriguez can analyze the students' responses and adapt instruction. See Electronic Resource file for login information and examples.

Dr. Rodriguez also uses FlipQuiz, a Jeopardy-style game, for exam reviews in her instruction. Students are organized into groups for weekly case studies or other in-class activities. There are questions from all of the material that will be covered on the exam. One group chooses the first category and value (100, 200, 300, 400, or 500). Typically, the questions are organized so that the higher values are questions that are more difficult. Then whichever group raises their hand first gets to try to answer the question. If the first group does not answer correctly, then another group has a chance to answer the question. The group who answers the question correctly has an option to select the next category and value for the next question. After the game, the instructor provides the link for the electronic flashcards for the game. See https://flipquiz.me/cards/212240 for an example. See Electronic Resource file for midterm review questions.

E3.6 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Relationship between the SCHS and Online Education is strong
    - More classes each semester being developed online with the help of an instructional designer, artist, and programmer in addition to the subject matter expert (faculty member).
- Innovative techniques that engage students through technology and provide informal assessments that inform teaching.
- The evaluation process for all tenured, tenure-track and non-tenured faculty is thorough and supported by a workload policy that was developed and approved through a vote by the school's faculty members then vetted and submitted for approval by the Office of the Executive Vice President and Provost. The activities for review are also covered in the SCHS by-laws. For the annual evaluation of the tenured-track faculty, the department chairs submit written comments regarding progress toward tenure and indicate their rating (excellent, commendable, satisfactory and unsatisfactory) for the teaching, research and service sections. Overall, SCHS faculty have done a good job of including research or service related activities into their instructional activities as it applies to the courses.
- Faculty currency is a part of the faculty annual evaluation and promotion & tenure evaluation.
- The newly developed faculty teaching observation and evaluation policy and procedure have been supported by faculty, and implementation has started.
- Some health care courses have been standardized and developed as the department master courses whose syllabi were developed by the department faculty as a whole
- SCHS recently started evaluating newly adopted MPH and Ph.D. competencies for each of the graduate courses.

Weaknesses

- More faculty members need to incorporate technology and utilize the university's learning management system in their classes – this will aid in the collection and storage of student work and facilitate prompt faculty feedback. UNLV is transitioning to Canvas as their new LMS system (Fall 2018) which is a more student-faculty friendly platform (i.e., easier to update, track assignments, integrate technology, improved communication features). Plans are to continue developing HCA undergraduate and graduate level courses online (HCA 701 slated for development in spring 2018).
- One weakness in the annual evaluation of tenured faculty is that the evaluation form only provides the rating of satisfactory and unsatisfactory per UNLV policy. It would be helpful for the tenured faculty to be evaluated using the four-point rating scale (i.e., excellent, commendable, satisfactory, and unsatisfactory).
- The faculty teaching peer observation and evaluation is in its early stage of implementation and its effectiveness remains to be seen.
- The competency assessment of each course based on recently adopted competencies is in its early stage.
- Competency-based course assessment for undergraduate courses is relatively recent and not as sophisticated as that for graduate courses.
- A plan needs to be made for tracking faculty participation in the teaching programs offered by the university.

E4. Faculty Scholarship

The school or program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and school or program missions and relate to the types of degrees offered. For example, when doctoral degrees are offered, the school or program's research portfolio in those areas take on greater importance. All types of research are valuable, whether conducted with the purpose of improving public health practice or for generating new knowledge.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

E4.1 Faculty Research and Scholarly Activity

Required Documentation: Describe the school or program's definition of and expectations regarding faculty research and scholarly activity. (self-study document)

Research and Scholarship are measured annually but use a two-year rolling calendar model, beginning with the current year and going backwards one year, to allow for flexibility. The two-year model recognizes the nature of the research, grant seeking, writing, and publishing process. Expectations and results are measured within the context of the 2-year model. The faculty member has primary responsibility for communicating and documenting progress towards meeting the established standards. Acceptable research/scholarly products include: refereed journal articles, refereed conference proceedings, academic conference presentations, non-refereed publications, grants or grant applications, reports to sponsor, or other scholarly or creative activities that relate to the faculty member's academic area. The SCHS Workload Assignment Policy and Guidelines document provides expectations regarding faculty research and scholarly activity. SCHS faculty can teach six courses (3/3), five courses (3/2), or four courses (2/2) per academic year. This is based on the number of refereed publications or funded grants that they produce (see table below) and level of research effort, and it is discussed with and approved by the department chairs.

Table E4.1 Summary of Workload Expectations (2-year model)

Teaching Workload[1]	Refereed Publications[2,3]
3/3	2
3/2	3
2/2	4

[1] Additional release time may be negotiated with the Department Chair and approved by the Associate Dean or Dean based on the nature of the work (e.g., secured national competitive funding as PI but without buyout or summer salary budgeted), deliverables or services, and needs of the department or school.
[2] Grant funding ≥$30,000 (coming to UNLV) may substitute for 1 refereed publication per year.
[3] Impact factors and citations will be taken into account in the context of research production.

E4.2 Support for Research and Scholarly Activity

Required Documentation: Describe available university and school or program support for research and scholarly activities. (self-study document)

Faculty development opportunities are some of the most important ways that UNLV invests in faculty success. SCHS faculty are expected to prioritize research and scholarship in concert with the SCHS's workload policy of 45% of time devoted to research activities, and in concert with tenure-track faculty's goals of attaining tenure. Recently SCHS revised its promotion and tenure guidelines and workload policy to assist faculty in meeting their research requirements as described above.

The Department Chairs meet annually with faculty to review progress toward research goals, and to provide feedback to faculty on developmental activities that will support this achievement. In preparation for the annual performance review, a summary self-assessment of research activity progress (worload report) is conducted by respective faculty, and then discussed with the Chairs as part of the annual review assessment.

In addition, informal mentoring occurs in the SCHS directed at faculty relative to their teaching and research. UNLV administration is currently reinstating a revised mentoring program for junior faculty. The purpose of the mentoring program for junior faculty is to help them navigate the resources available through the university as well as to help them develop a strong program of research.

The school provides start-up funds to new faculty to support their research activities. This includes funding to pay for additional equipment or software, support student workers, purchase data, travel to conferences to present research and learn from colleagues, or other research-related expenses such as paying research assistants. Use of start-up funds is monitored periodically by the Department Chairs and the SCHS Business Manager to ensure that funds are being actively used for research purposes and within a prescribed time frame.

To ensure faculty are keeping up with their respective fields, they are encouraged to attend at least one professional or industry conference per year to present their current research, and to benefit from professional industry collaboration. The department expects faculty to use their start-up funds to attend conferences and supplements travel arrangements when possible.

To assist faculty in securing grants, the UNLV Office of Sponsored Programs announces research opportunities and provides direct support in development of grants. This includes workshops on finding grant opportunities, writing and submitting grant applications, and assembling budgets. Annually, OSP announces the availability of faculty opportunity awards ranging from $10,000 - $50,000 to support faculty research efforts. These are awarded through a competitive process throughout the entire university. Dr. Ezeanolue received one of these awards for the Global Health Initiative. In addition, the UNLV Foundation assists faculty seeking funding opportunities originating in the philanthropic sector. UNLV’s Division of Research and Economic Development also supports faculty research by, among other activities, hosting an annual research week that allows faculty to learn new research methods, connect with colleagues, and learn new research techniques. The Division also supports faculty research that involves human subjects through the IRB.

SCHS faculty is supported by a Health Sciences Librarian who assists with curriculum design, research support, and other inquiries. Xan Goodman, is assigned by the Dean of Libraries to the SCHS. In addition to supporting faculty on specific projects, Dr. Goodman sets up and runs workshops that help faculty learn effective techniques to use existing literature and library resources.

E4.3 Examples of Faculty Research Activities

Required Documentation: Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students. (self- study document)

Integrating Faculty Research:
Faculty members routinely incorporate their own recent research in their teaching. For example, Dr. Ge Lin uses his book, titled "Smart Use of State Public Health Data for Health Disparity Assessments," to enrich discussion in several classes. Dr. Lin's book focuses on poverty, which is an important social determinant of health. In Introduction to Epidemiology (EAB 202), Dr. Lin uses examples from his publications to highlight the importance of the social environment in health disparity assessments. He also uses this book to highlight the importance of understanding determinants of vulnerable populations, such as the elderly. Another publication of his, which relates to breast cancer screening, is used to show students how to use screening probability to assess its impact in EAB 703, Biostatistical Methods for the Health Sciences (Bhuyan, Stimpson, Rajaram, & Lin, 2014).

As another example, Dr. Courtney Coughenour incorporates her most recent research findings into her lectures. For example, in PBH 340, Built Environment and Health, she exposes her students to the interview that NPR did which featured her research on minority pedestrians being at greater risk of injury while crossing the street. She also discusses data from her report that was prepared for the Mineta Transportation Institute that relates to perceived barriers and likelihood of use of different biking infrastructures in Clark County, Nevada. Similarly, she published an article on this topic that she refers students to. She also presents data on the influence that sprawl characteristics have on walkability. The peer-reviewed article analyzing these data is currently in press. All of these data are also included in PBH 205, Introduction to Public Health and EOH 710, Fundamentals of Public Health when she presents on healthy communities. The pedestrian risk data are also included in her pedestrian and motor vehicle injury lecture in PBH 275, Injury Prevention and Control.

As part of HED 720, Program Planning and Grant Writing, Dr. Melva Thompson-Robinson shares copies of grant proposals she has written as well as her previous experiences working with interventions and programs. These provide students with the opportunity to see real-world examples of public health in action.

Using Data:
Another way that faculty members integrate research and scholarly activities and experiences into their instruction of students is to bring the data they acquire as part of their research into the classroom. For example, Dr. Chad Cross has used data from past research projects for students to analyze in EAB 703, Biostatistical Methods for the Health Sciences.

In EOH 769, Pollution and Health, Dr. Lung-Wen Chen has used real-world air quality monitoring data to show students the measurement principles, quality assurance/quality control, and the use of multiple tools to analyze data. His students have a chance to see and work with portable air quality sensors to acquire data for their homework assignments.

Leveraging Research Contacts as Guest Speakers:
Faculty members can often use their research networks to bring in guest lecturers to the classroom. For example, Dr. Brian Labus scheduled nine guest lectures from people he worked with on outbreak investigations in his EAB 735, Outbreak Investigation, course this semester. In PBH 445, Food Systems and Health, Dr. Shelia Clark uses her experience and research contacts to bring in guest speakers who present about potential alternatives to the dominant food system.

Leveraging Faculty Experience:
Dr. Brian Labus teaches EAB 735, Outbreak Investigation, a class focusing on applied epidemiology. The majority of the lectures and exercises use examples from his personal experience conducting outbreak investigations. Dr. Labus routinely presents to his students on three different outbreak investigations he led. Dr. Labus also uses his previous experience in EAB 725, Epidemiology of Infectious Disease. The

course includes considerable discussion of applied infectious diseases, and he routinely uses examples of investigations he has conducted as part of his lectures.

Dr. Melva Thompson-Robinson shares her experiences in working with programs to conduct and plan evaluations as part of HED 730, Program Evaluation in Health Promotion. She also shares evaluation plans that she has created as part of her funded projects.

In the Research Methods for Public Health (EAB 700) and Epidemiology and Public Health (EAB 705), Dr. Timothy Bungum brings in his previous research experience to highlight research issues for students. For example, while discussing survey construction, Dr. Bungum discusses mistakes he had made in wording questionnaire items.

Previous experience on consulting cases also supplements classroom lectures. Dr. Lung-Chang Chien uses his previous consulting cases as examples of the influence of violating assumptions in ANOVA and the linear regression in his Biostatistics for Health Sciences (EAB 703) class. In Nonparametric Statistics for Public Health (EAB 753), Dr. Chien discusses the influence of small sample size on statistical analysis using his past consulting cases as examples.

E4.4 Examples of Student Opportunities in Faculty Research Activities

Required Documentation: Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities. (self-study document)

Many faculty members describe their research in the classes they teach to encourage student involvement in research. Presenting their research in class often leads to faculty mentoring student research projects, hiring them as Graduate Assistants when possible, applying for student research grants and awards, and student involvement in poster presentations or preparing manuscripts for publication.

Mentoring Student Research:
Dr. Courtney Coughenour is currently mentoring three undergraduate pre-GA capstone students, which came about as a result of presenting her own research in class. One student developed a survey on walkability and social capital, which was distributed to UNLV students. The student will be analyzing the data, drafting a paper and presenting a poster before the end of the fall 2017 semester. Another student is doing policy-related research examining the relationship between high school absenteeism and health. Another is completing a systematic review on Clostridium difficile infections in long-term care facilities related to antibiotic use. She has also mentored two undergraduate students through the INBRE (IDeA Network of Biomedical Research Excellence) program, one in summer 2015 and one in summer 2016. Both students helped design the research question and collect data that resulted in a publication (of which, one student is an author) examining distribution of risk while crossing the street. Dr. Coughenour also mentored two undergraduate students who received Office of Undergraduate Research scholarships in the summer of 2017. One examined the relationship between eating behaviors and food store locations and one examined the correlations between walkability audits collected from Google maps and in person. Both will present a lightning talk at the Fall UG Research symposium and a poster during research week.

In PBH 445, Food Access and Health, Dr. Sheila Clark has her students conduct a built environment audit of a street segment using a reliable and valid tool. These street segments are usually connected to a larger research project she is conducting. In the same course, students also conduct a food audit of a retail food establishment using a reliable and valid tool that is also usually connected to a larger research project.

Preparing Publications with Students:
Max Gakh hired two students taking the Health Impact Assessment (HIA) course (EOH 795, Special Topics in Public Health) in the spring of 2017 to work with him and Drs. Coughenour and Pharr on a media analysis related to health impact assessments. The resulting manuscript has been published with

the two students as co-authors. He has also hired a law student to work with him and Dr. Labus on a legal research and scholarship paper that, through a case study, examines mandatory reporting laws in Nevada. The results are currently published online ahead of print. The law student who worked on this project is a co-author of this paper.

Dr. Jennifer Pharr has published eight peer-reviewed manuscripts with five students who worked with her on research. Four students were co-authors of peer-reviewed journal articles through working with Dr. Jay Shen in several of his research projects.

Dr. Timothy Bungum has opportunities for students to help with research almost every semester. He currently has a student as a part of EAB 700, Research Methods for Public Health, helping to collect data and design a questionnaire for a project on bike lane use. The student will also help with writing resulting manuscripts. In preparation for publication, Dr. Chad Cross has provided opportunities for students to get individual instruction in statistical techniques.

Applying for Awards and Grants:
Max Gakh and Dr. Coughenour, together, applied for and received a Top Tier Graduate Research Award. They are now working with a PhD student on a three-year project that involves grant applications and publications. The PhD student is involved in identifying grant opportunities and will assist with grant applications. They are also mentoring an undergraduate public health student as part of this project. Dr. Shelia Clark has also recommended and sponsored students for summer research grants over the last several years.

E4.5 Role in Research and Scholarly Activity in Faculty Advancement

Required Documentation: Describe the role of research and scholarly activity in decisions about faculty advancement. (self-study document)

The Nevada System of Higher Education Code identifies Standards for Recommending Appointment with Tenure. Standard Two, which relates to “Research, Scholarly, Creative and Entrepreneurial Activity”, indicates that faculty must demonstrate continuing professional growth related to the academic faculty member's discipline or program area as shown by a record of research, scholarly, creative or entrepreneurial activity resulting in publication or comparable productivity.

The UNLV Bylaws (p. 33) also discuss guidelines for promotion or appointment to academic rank for academic faculty. One of the qualifications Associate Professors and Professors must meet is continuing satisfactory productivity in creative or research activity, resulting in significant contributions to the discipline. Due recognition is given to the different forms such productivity may take in the various disciplines (see E4.1 for research and scholarly activity expectations). Review of this productivity includes the use of external referees. The use of external referees is governed by the following regulations: (a) For promotion to professor, the department obtains at least four letters from outside the university. At least two of these are from persons drawn from a list of names suggested by the candidate, and at least two shall be from persons not suggested by the candidate. (b) All letters that departments solicit must be forwarded with the recommendation regarding promotion.

E4.6 Success in Research and Scholarly Activity

Required Documentation: Select at least three of the following measures that are meaningful to the school or program and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. In addition to at least three from the list that follows, the school or program may add measures that are significant to its own mission and context. Schools should focus data and descriptions on faculty associated with the school's public health degree programs.

- *Percent of faculty (specify primary instructional or total faculty) participating in research activities*
- *Number of faculty-initiated IRB applications*
- *Number of students advised*
- *Number of community-based research projects*
- ***Number of articles published in peer-reviewed journals***
- ***Total research funding***
- ***Number of citation referen**ces*
- *Presentations at professional meetings*
- *Support for development and mentoring of new faculty*
- *Number of grant submissions (self-study document)*

Table E4.6 Outcome Measures for Faculty Research and Scholarly Activities

Outcome Measure	Target	2015	2016	2017
Number of articles published in peer-reviewed journals	60	60	101	64
Number of citation references	120	*	143	134
Total research funding	$6,000,000	$9,681,529	$5,152,034	$6,604,427

* The citation references review was not conducted in 2015. We will report this information annually going forward.

E4.7 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The number of publications in 2015 met our goal while publications in 2016 and 2017 exceeded our goal with 101 and 64 publications respectively.
- We regularly exceed our goal for total research funding, however, in 2016, we fell slightly below the target.
- The number of citations exceeded our goal two years in a row.

Weaknesses

- No data were available for citations in 2015 and these data needs to be reported each year going forward.
- Additional opportunities are needed for student to work with faculty on research activities.
  - To increase research opportunities, hiring of a full-time laboratory manager could assist with the upkeep of the Toxicology Laboratory, Emerging Diseases Laboratory, Air Quality Laboratory, and Pollen Laboratory.
  - Creation of more post-doctoral positions could bring expertise, collaboration, and funding to our laboratories.
  - Acquisition of state/national data are needed for research.
  - Development of a laboratory methods course involving a laboratory rotation through our four laboratories would help produce more well-rounded researchers.

E5. Faculty Extramural Service

The school or program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the school or program's professional knowledge and skills. Faculty engage in service by consulting with public or private organizations on issues relevant to public health; providing testimony or technical support to administrative, legislative and judicial bodies; serving as board members and officers of professional associations; reviewing grant applications; and serving as members of community-based organizations, community advisory boards or other groups. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

E5.1 Faculty Extramural Service Activity

Required Documentation: Describe the school or program's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations. (self-study document)

The SCHS and Community Service

The school's mission is to advance the science of public health, improve the health and quality of life of people in our communities, and work to eliminate health disparities in Nevada, the nation, and the world by providing leadership in quality education, research, and service.

In conjunction with the SCHS' workload policy, faculty are required to devote 20% of their time to service and community-based activities. While non-tenure track faculty are exempt from this requirement, it is normal for them to be involved in service activities as well. Service includes board appointments and committee and association membership, and involvement in local/regional community-based organizations.

The SCHS workload policy outlines expectations for teaching, research, and service based on course load. The expectations for service, regardless of course load include:

- Active member of one educational or professional society, and
- Evidence of industry interaction and involvement (e.g., seminars, conferences, faculty internships, consulting, holding an office, etc.)

The faculty's community service activities are reviewed as part of their annual performance evaluation, to ensure that community service is prioritized. The level of participation in service activities will likely depend on the stage of the faculty member's career. The Department Chairs try to keep service workload requirements for junior faculty to a minimum in order for those faculty members to dedicate more time to research and teaching. However, all faculty are involved in community service at some level. In general, the more senior the faculty member, the greater the extent of involvement in community service.

The University's Role in Community Service

UNLV has been an integral part of the growth and prosperity of Southern Nevada. For more than 60 years, UNLV has helped improve the business, social, and cultural climate at the local, state, and regional level. The UNLV Bylaws state, "Faculty members are encouraged to participate in community service in the areas of their expertise or interest, so long as such community service does not unreasonably

interfere with their institutional responsibilities." UNLV defers to the school's workload policy for service expectations.

E5.2 Support for Extramural Service Activity

Required Documentation: Describe available university and school or program support for extramural service activities. (self-study document)

The University supports initiatives, which serve to support community interests effectively, and allows faculty and staff to engage with community members. The UNLV Office of Community Engagement seeks to support, facilitate, and promote collaboration, partnership, and engagement between the university and its many constituent groups. This office administers awards that recognize campus individuals for exceptional community engagement in the areas of: 1) service learning, 2) community-based research, 3) staff support of community engagement activity, and 4) student service.

These awards recognize community engagement activities (listed below) that align with UNLV's Top Tier Initiative and Community Partnerships Strategic Plan:

1. Community support for student opportunities
2. Engage with the community to support economic development
3. Invite the community to advance development and fundraising
4. Engage with partners to help build intellectual and cultural vitality in the community
5. Build relationships through and invite support of athletics
6. Encourage and facilitate greater community engagement
7. Help solve community problems

UNLV's Top Tier strategic planning effort identified action plans for the institution's development of community partnerships and engagement. These action plans are guiding institutional goal setting in this area.

The SCHS oversees the following centers and institutes that have been approved by the Board of Regents to provide research, specialized scholarly activity, education, and or public service in furtherance of interdisciplinary study, outreach, and acquisition of extramural funding.

- American Indian Research and Education Center
- Center for Health Disparities Research
- Center for Health Information Analysis
- Nevada Institute for Children's Research and Policy

In addition, all SCHS faculty are encouraged to engage in community service and are able to document this service in their annual evaluation and toward promotion and tenure, per UNLV and SCHS bylaws.

E5.3 Examples of Faculty Extramural Service Activities

Required Documentation: Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students. (self-study document)

Dr. Cochran uses specific board agenda items from his service to the Nevada State Employee Benefit Plan (PEBP) meetings as class material, and incorporates them into discussion boards, debates, and presentations, to leverage current industry issues in HCA 701, U.S. Health Care System: Programs and Policies and HCA 779, the Health Care Administration Capstone course.

Mr. Max Gakh has served as part of an effort at the Southern Nevada Health District to work on a community health improvement plan. The basis for this plan was used as the core of a group project completed by students in EOH 781, Public Health Policy: Integrating Research and Practice. This culminated in the students presenting their work to the Southern Nevada Health District leadership and an analysis of over sixty-pages that students also provided to the District, which the District posted on its website. Also, as a member of the Nevada Crisis Standards of Care Legal & Ethical Issues Working

Group, Mr. Gakh helped advise the state health department on public health legal preparedness issues. This work was used to inform a public health preparedness lecture in Public Health Law (EOH 713). As a member of the 2017 Nevada Population Health Conference planning committee, Mr. Gakh helped organize this conference and ensure that SCHS students were able to attend for free. The conference brought together professionals, leaders, policymakers, and students in the community to discuss a range of health topics, which can then also be discussed in class. Students in EOH 713 were required to attend the conference. In addition, Mr. Gakh is involved in the leadership of the Law Section of the American Public Health Association (currently as Secretary). Through his work in this organization, he was able to share with students an opportunity for externships to work on public health law and policy at the Centers for Disease Control and Prevention.

Dr. Sheniz Moonie has been a contributing member of many service organizations. She has used her work as a member of the Positively Kids-Asthma Working Coalition, the Nevada State COPD Coalition, and the American Lung Association of Southern Nevada to influence her teaching of EAB 715, Chronic Disease Epidemiology.

In PBH 455, Dr. Coughenour has students conduct a food audit of a retail food establishment using a reliable and valid tool. These food audits are usually connected to a larger research projects that are ongoing, and encourage students to pursue additional research of their own.

Students are encouraged to participate in National Rebuilding Day, where they volunteer to help renovate and remodel a home for a local family. Each of the home repairs are then linked to health outcomes, policies, lectures throughout the year in various courses. For example, housing laws and policies may be discussed in a law class, where the removal of weeds and pests would be discussed in EOH 740 Environmental Health. We are currently in discussion with the Office of Community Engagement and the College of Engineering Construction Management program and hope to develop an interdisciplinary service learning course around this topic.

E5.4 Student Opportunities for Involvement in Faculty Extramural Service

Required Documentation: Describe and provide three to five examples of student opportunities for involvement in faculty extramural service. (self-study document)

As a member of the Nevada Population Health Conference planning committee, Mr. Max Gakh has helped organize a conference that students were able to attend for free and thus benefit from the experience. The conference also included a student "boot camp" on medical-legal partnerships.

As mentioned in the previous section Mr. Gakh was also part of an effort at the Southern Nevada Health District to work on its community health improvement plan. The basis for this plan was used as the core of a group project in EOH 781 (Public Health Policy: Integrating Research and Practice). This assignment provided students the opportunity to develop a community health improvement plan and culminated in the students presenting their work to the Southern Nevada Health District leadership and a subsequent analysis, which the District posted on its website.

Dr. Jennifer Pharr works with a non-profit organization called Green Our Planet. Through this relationship she has been able to provide research and internship opportunities for MPH students. Thus far, four MPH students have completed their internship with Green Our Planet and three have leveraged this opportunity with the organization to complete their Thesis or Professional Paper.

Dr. Patricia Cruz served as guest speaker for a hands-on experiment (on hand hygiene) for the STEM Program at a local elementary school. A graduate assistant in the MPH program helped to incubate Petri dishes and photograph microbial colonies for sharing with the schoolteachers.

Dr. Courtney Coughenour had two students present their research projects at a session on the connection between planning and health at the American Planning Association Nevada Chapter conference in the spring of 2017. Another student was requested by a community partner to present at

the APA luncheon. The APA luncheon was during spring break and students from PBH 340 were invited to attend, many did.

Dr. Jay Shen had two students present their research projects at two sections on the Nevada Public Health Association annual conference in September 2017.

In PBH 205, PBH 429, HED 629, and EOH 765 Dr. Amanda Morgan invites students to come to public hearings related to various sexual health issues in our community, on a school board level and a state legislative level. Students are also encouraged to write letters or emails to their political representatives about public health issues that are important to them. Dr. Morgan also encourages students to volunteer for organizations that support public health and sexual health in the local community.

E5.5 Service Within the School

Required Documentation: Select at least three of the following indicators that are meaningful to the school or program and relate to service. Describe the school or program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list that follows, the school or program may add indicators that are significant to its own mission and context. Schools should focus data and descriptions on faculty associated with the school's public health degree programs.

- ***Percent of faculty (specify primary instructional or total faculty) participating in extramural service activities***
- ***Number of faculty-student service collaborations***
- *Number of community-based service projects*
- *Total service funding*
- *Faculty promoted on the basis of service*
- *Faculty appointed on a professional practice track*
- ***Public/private or cross-sector partnerships for engagement and service (self-study document)***

Percent of faculty (specify primary instructional or total faculty) participating in extramural service activities:

A survey was completed in 2017 inquiring about how all SCHS faculty integrate students into their research, as well as identifying how many faculty participate in extramural service activities. Twenty out of thirty (~67%) of faculty indicated they participated in extramural activities, these contributions fell into six major categories including:

1. Consulting with public or private organizations on issues relevant to public health
2. Providing testimony or technical support to administrative, legislative and judicial bodies
3. Serving as board members and officers of professional associations
4. Reviewing grant applications
5. Serving as members of community-based organizations, community advisory boards or other groups
6. Other opportunities.

Number of faculty-student service collaborations:

In addition to the examples provided in E5.4, faculty also help oversee the school's student associations. The school has two student clubs, the Public Health Student Association (PHSA) and the Health Care Administration Student Association (HCASA). The PHSA has over ninety students registered through the involvement center. Dr. Rachelle Rodriguez oversees the PHSA and Dr. Michelle Sotero oversees the HCASA. Below is the list of service events that each student association, with the help of many SCHS faculty, have participated in over the last three years.

Public Health Student Association Service:

- Fall 2016 Involvement Fair
- Make a Difference Day 2016
- Healthy Heart Bake Sale
- Thanksgiving Food Drive
- AHA Heart Walk
- Holiday Toy Drive
- Spring 2017 Involvement Fair
- Three Square Volunteer Day
- Planned Parenthood Corks and Forks
- Resource Fair
- Walk and Talk with Dean Gerstenberger

- Healthy Rebels Stress Management Presentation
- Panel on Graduate Programs in Public Health
- SCHS Job Fair
- AFAN Walk
- National Rebuilding Day
- UNLV Thrives Kick-Off Event
- October 1st Donation Drive
- Make a Difference Day 2017
- CASA Foundation Toy Drive
- HELP of Southern Nevada Food Drive

Health Care Administration Student Association Service:

- 2017 Southern Nevada Youth Homelessness Summit
- Red Rebel 5K Color Run
- Health Care Career Night
- Nevada Health Care Forum
- Las Vegas HEALS Gala
- UNLV Involvement Fair
- Halloween Safe-tacular by UMC
- UMC Strong Luncheon for first responders
- Light the Night Walk for Cancer Awareness

Public/private or cross-sector partnerships for engagement and service:

Students involved in Internships or Capstone projects (EOH 793, HCA 793 and HCA 779) are involved in service to their community through their various projects. Dr. Cruz and Dr. Labus have taught the EOH 793 course. Kurt Houser is the instructor for the internship in Health Care Administration (HCA 793) and Dr. Chris Cochran, Dr. Jay Shen and Kurt Houser are the instructors for the Capstone (HCA 779). Over the last three years, students have completed numerous internships and capstone projects, ranging in locations from major hospital systems to smaller physician practices.

Over the past three years, 31 BSPH students have completed internships in various agencies. In 2015, students interned at Healthy Homes, AFAN, Girls on the Run, American Heart Association, and Nellis Air Force Base. In 2016, students interned at Immunize Nevada (3), Girls on the Run, Three Square (2), Southern Nevada Health District, and UNLV (3). In the spring of 2017, students interned at the American Lung Association, AFAN (3), UNLV (9), EPA, Battle Born Progress, Immunize Nevada, Sletten Construction, American Heart Association, Three Square, and Girls on the Run.

For the MPH degree, various locations hosted 63 interns over the past three years. In 2015, agencies that hosted interns (20) included Green our planet (3), Southern Nevada Health District (2), UNLV (2), American Heart Association, BattleBorn Progress, Centers for Disease Control and Prevention, Foundation for Positively Kids, Girls on the Run, Moonridge Group, Mountain View Hospital, Nevada State Health Division, NICRP, Urban Air Quality Laboratory, U.S. Environmental Protection Agency, Young Women's Christian Association, and Zero Level McCarran.

In 2016, 23 students completed internships at 17 locations including the Southern Nevada Health District (3), Green Our Planet (2), Immunize Nevada (2), Nevada State Health Division (3), Summerlin Hospital Medical Center (2), American Indian Research and Education Center, City of Henderson, Clark County Department of Air Quality, Clark County Law Foundation, Foundation for Positively Kids, Global Health Initiative (UNLV), Navy Environmental and Preventive Medicine Unit FIVE, Nellis Air Force Base Public Health, Southern Nevada Water Authority, Volunteers in Medicine of Southern Nevada, and Zero Level McCarran.

Nineteen students completed the internship in the MPH program in 2017 at locations such as University of Nevada, Reno, School of Medicine (2), Cleveland Clinic Lou Ruvo Center for Brain Health (3),

Southern Nevada Health District (3), UNLV School of Dental Medicine (3), Nevada Care Program, American Heart Association, Nevada Medical Center, American Indian Research and Education Center, Volunteers in Medicine of Southern Nevada, Trac-B Exchange, Immunize Nevada, and PACT Coalition.

In the health care internship program (MHA and MPH Health Care Administration and Policy), 44 internships have been completed in the past three years.

In 2015, agencies included Health Insight (2), UHS/Spring Valley Hospital, Harmon Hospital, Optum Health/ Southwest Medical, Health Care Partners, HCA Corporation, and Caring Nurses. In 2016, internships were at Southern Nevada Health District, United Health Care (2), Spring Valley Hospital, Desert Springs Hospital, VA of Southern Nevada, Dignity Health, Sunrise Hospital (2), University Medical Center of Southern Nevada, Harmon Hospital, South West Medical, Dignity Health/St Rose (2), Immunize Nevada, and Health Care Partners.

Internships locations in 2017 include Centennial Hospital, Horizon Specialty Hospital (2), Iora Health (2), Optum Care/Southwest Medical (2), Health Care Partners, Sunrise Hospital (5), Summerlin Hospital (4), University Medical Center of Southern Nevada (2), and the Nevada Division of Public Health.

E5.6 Role of Service in Faculty Advancement

Required Documentation: Describe the role of service in decisions about faculty advancement. (self-study document)

As stated in the UNLV Bylaws, faculty members are encouraged to participate in community service in the areas of their expertise or interest, so long as such community service does not unreasonably interfere with their institutional responsibilities.

The SCHS has adopted the tenure policies and procedures identified in the current Nevada System of Higher Education Code (Title II, Chapter 3). In addition to meeting the requirements for Standard One: “Teaching/Performance of Assigned Duties” and Standard Two: “Research, Scholarly, Creative and Entrepreneurial Activity” faculty being recommended for appointment with tenure must receive a "satisfactory" rating or better in the third standard, “Service”, which may include, but not be limited to: (A) Membership and participation in professional organizations; (B) Ability to work with the faculty and students of the member institution in the best interests of the academic community and the people it serves, and to the extent that the job performance of the academic faculty member's administrative unit may not be otherwise adversely affected; (C) Service on university or System committees; (D) Recognition among colleagues for possessing integrity and the capacity for further significant intellectual and professional achievement; and (E) Recognition and respect outside the System community for participation in activities that use the faculty member’s knowledge and expertise or further the mission of the institution, or that provide an opportunity for professional growth through interaction with industry, business, government, and other institutions of our society, within the state, the nation or the world.

The SCHS bylaws and workload policy identifies that faculty should by an active member of two college, or university level committees, independent of any other committee assignments used for the purpose of other release time (e.g., Graduate Coordinator), an active member of one educational or professional society and be able to show evidence of industry interaction and involvement (e.g., seminars, conferences, faculty internships, consulting, holding an office, etc.).

E5.7 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- 20/30 SCHS faculty participate in community based activities that support the mission and vision of the SCHS, they also integrate students into these activities and use the experiences to enhance and update classroom experiences.
- The School's student associations are very active within the community.

Weaknesses

- While the percentage of primary instructional school faculty participating in extramural service was very high, it does not necessarily always easily relate to or inform classroom instruction.
- More faculty involvement in student clubs would help the student's build relationships with community partners already involved with the respective programs through programs' advisory boards or preceptor/internship relationships.

Criterion F

F1. Community Involvement in School or Program Evaluation and Assessment

The school or program engages constituents, including community stakeholders, alumni, employers and other relevant community partners. Stakeholders may include professionals in sectors other than health (e.g., attorneys, architects, parks and recreation personnel).

Specifically, the school or program ensures that constituents provide regular feedback on its student outcomes, curriculum and overall planning processes, including the self-study process.

With regard to obtaining constituent input on student outcomes and on the strengths and weaknesses of the school or program's curricula:

- **The school or program defines qualitative and/or quantitative methods designed to provide useful information.**
- **Data from supervisors of student practice experiences may be useful but should not be used exclusively.**
- **The school or program documents and regularly examines its methods for obtaining this input as well as its substantive outcomes.**

F1.1 Formal Structures for Constituent Input

Required Documentation: Describe any formal structures for constituent input (e.g., community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations. (self-study document)

There are several formal structures in place for constituent input. Constituents are included in many SCHS activities such as networking events (e.g., tailgating, trivia night, career nights, etc.), awards ceremonies, the Assessment Summit, internship poster sessions, etc.

Each department within the SCHS has an advisory board, which provides valuable insight into the needs of our community. The advisory boards meet formally and informally to provide feedback on SCHS programs and curricula. Advisory Board members are respected members of the community who are willing to use their influence and contacts to benefit SCHS by introducing interested parties to SCHS and fostering relationships. Advisory Board members often help with placement of students in internships, research and other activities, and help identify areas of critical community health needs, and communicate these needs to SCHS.

Public Health Advisory Board

Johanna Andrews, SCHS PhD Student
Brianna Barber, BS, Director, YMCA
Melissa Bartshe, SCHS MPH Student (BSPH Alumni)
Charles Bernick, MD, Neurologist, Luo Ruvo – Cleveland Clinic (MPH Alumni)
Kelly Brockman, Vice President/Relationship Manager, Nevada State Bank
Kathi Thomas Gibson, MPA, Community Outreach Manager, City of North Las Vegas
Mary Beth Hogan, MD, Professor of Pediatrics, Vice Chair of Pediatric Research and Chief of Allergy and Immunology, UNLV School of Medicine
Joseph Iser, MD, Director, SNHD
Vickie Ives, MA, Maternal, Child, and Adolescent Health Section Manager, State Health Division
Jeffrey Klein, FACHE, MBA, President and CEO, Nevada Senior Services, Inc.
Margaret Rafferty, DHA, RN, Chief Patient Experience Officer, Dignity Health, St. Rose Dominican Hospital
Vivek Raman, MPH, Environmental Health Supervisor, SNHD (alumni)
Lynn Rowe, Chief Nurse, CCSD
Jody Tyson, MPH, Three Square (alumni)

Deb Williams, MPH, Manager, SNHD – Chronic Disease and Health Promotion
Nevin Wilson, MD, Professor and Chair Department of Pediatrics, UNLV School of Medicine

HCAP Advisory Board

Jennifer Bergdoll, BS, Senior Human Capital Partner, Optum
Jeremy Bradshaw, MHA, CEO, Mountainview Hospital
Paul R. Brezinski, PhD, Lt Col, USAF, MSC, FACHE/Instructor, Commander, 99th Medical Support Squadron, Mike O'Callaghan Federal Medical Center
Sarah Bussmann, MHA, Alumni Association President, AVP, P3 HealthGroup (MHA Alumni)
Teressa Conley, DPA, COO, Dignity Health – St. Rose Dominican Hospital
John Espinoza, MPA, Chief Human Resources Officer, University Medical Center of Southern Nevada
Jessica Hensler, MBA, Associate Administrator, The Valley Health System
Scott Hillegass, BS, CEO, Fundamental Clinical and Operational Services (HCAP Alumni)
Leslie Johnstone, MBA, Vice President of Nevada Operations, Health Insight
Jessica Jose, EMHA Student
Jeffrey Klein, FACHE, MBA, President & CEO, Nevada Senior Services, Inc.
Todd Lefkowitz, MHA, P3 Health Group
Margaret Rafferty, DHA, RN, Chief Patient Experience Officer, Dignity Health, St. Rose Dominican Hospital
Jerry Reeves. MD, SVP of Medical Affairs, Health Insight
David Schweer, MBA/MHA, FACHE, Director of Planning, Renown Health
Todd P. Sklamberg, MBA, CEO, Sunrise Hospital and Medical Center
Kim Sonerholm, Vice President, Marketing and Sales – Nevada Market United Healthcare
Russell N. Suzuki, MSCIS, President / CEO, Falcon Technology

Internship preceptors are another formal constituent group that influence the SCHS and provide regular feedback. Internships are an important component for several of the SCHS programs. The preceptor has the opportunity to engage with a student in a workplace environment, provide the student with valuable workplace insight, rate the student's success in areas such as professionalism and competency attainment, as well as provide feedback to the SCHS. All internship sites have preceptors that are selected for their experience and the goals of the specific internship project. The preceptors evaluate students and are invited to attend events such as the annual SCHS awards ceremony and the Assessment Summit. Preceptors frequently report to the internship coordinator about the internship and what the agency might need from SCHS graduates in terms of curriculum and training. See list of current internship sites in criterion F3.1.

Another formal structure that was recently developed is the SCHS Chapter of the UNLV Alumni Association. The Alumni Chapter was officially formed in 2016 with several goals in mind. One of the goals was to develop the growing SCHS community and provide a resource for alumni to engage in on a regular basis. The alumni are now in the workforce, not only representing the SCHS, but also in a position to provide invaluable feedback, internship opportunities, and mentoring.

Alumni Association Officers

Sarah Bussmann, MHA, President
Pearl Kim, MHA, Vice President
Dominic Henriques, MHA, Treasurer
Tanvi Patel, PhD, MPH, Secretary
Matthew Kappel, MPH, Marketing

F1.2 External Constituents

Required Documentation: Describe how the school or program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

While the Public Health Advisory Board has been recently reconfigured as part of our self-study year, the Health Care Advisory Board has been hard at work since 2014, reevaluating program competencies and providing essential input. The Health Care Advisory Board was more active in 2016 and 2017 due to the self-study for accreditation of the Master of Health Care Administration degree through the Commission on Accreditation of Healthcare Management Education (CAHME). The Public Health Advisory Board has been recently reconfigured in order to maintain the most current information and the availability of community partners. They have met informally on several occasions and formally in the spring of 2016 and the fall of 2017. Both Advisory Boards are an important component of the biennial Assessment Summit.

During the Assessment Summit, advisory board members participate in focus groups to provide valuable input regarding curriculum, current workplace practices and needs, and future needs. They provide feedback for continuous program improvement. Other constituents that participate in the Assessment Summit include alumni, faculty, preceptors, state health officers, and students. All constituents are notified of the Assessment Summit and informed of school updates, the data acquired at the summit, and our plans to address needs presented at the summit.

The SCHS also administers alumni surveys each winter in order to collect feedback from alumni. While these surveys usually have a low response rate, the information we receive is used in our Annual Assessment meeting, and in even years at the Assessment Summit. Alumni express needs that they have discovered since graduating, employment status, overall satisfaction with their program, etc.

F1.3 External Partners' Contribution

Required Documentation: Describe how the program's external partners contribute to the ongoing operations of the school or program. At a minimum, this discussion should include community engagement in the following:

Development of the vision, mission, values, goals and objectives
Development of the self-study document
Assessment of changing practice and research needs
Assessment of program graduates to perform competencies in an employment setting
(self-study document)

Development of the vision, mission, values, goals, and objectives
The vision, mission, values, goals, and objectives for the SCHS were developed during an integrated strategic planning process that took place in 2014 and 2015. Discussions, breakout sessions, small groups, and data from preceptors, alumni, Advisory Board members, community partners, faculty, staff, and students were compiled and used to draft the strategic plan, which was approved in 2015. This was a three-year plan focusing heavily on accreditation and Top Tier metrics and measures of excellence.

Development of the self-study document
Alumni, community partners and the Advisory Board were engaged in the development of the self-study document through several formal events and meetings. One of the most notable is the biennial Assessment Summit, which allows them to have input and discussions about key elements of SCHS programs. These interactions happen in small breakout sessions, as well as in larger group discussions. Although these discussions did not cover the entire self-study document, we focused the efforts on areas of need, or areas of concern that were identified in prior meetings and assessment efforts. For example, in 2016 we focused on three key areas including: 1) alumni engagement, 2) workforce development and

workforce needs, and 3) identifying barriers to access and collaboration. In addition, alumni/students are often involved in the weekly Accreditation Committee meetings and participate in active discussions regarding the direction of the SCHS. We also circulated drafts of the self-study document to select alumni, university personnel, and Advisory Board members for review and comment. See Electronic Resource File F1.3 for documentation.

Assessment of changing practice and research needs
Similar to the development of the self-study document, the biennial Assessment Summit provides a wealth of information regarding the changing practices and research needs. In fact, the Assessment Summit specifically addressed this topic area in both 2014 and 2016 with detailed discussions and breakout sessions. Specific changes to the program, such as the inclusion of new classes to the curriculum (e.g., GIS for Public Health), were made as a result of these meetings and discussions. Another notable source of information used to address practice and research needs are the preceptor surveys that are completed as part of the required internship. These data are evaluated and presented at our annual assessment meeting. Finally, discussions about the changing practice and research needs are held during advisory board meetings, and most recently representative syllabi from core classes were distributed and discussed. These discussions were important, as we had to explain to the Advisory Board that even though new MPH foundational competencies were provided to us by CEPH, MPH and PhD track specific competencies are still developed by faculty, staff, and community partners.

Assessment of program graduates to perform competencies in an employment setting
Each winter, we conduct an annual alumni survey that inquires about employment competencies, classes they feel would have been beneficial to their career, and advice they would give to incoming students. In addition, graduates are required to self-evaluate their ability to address all competencies as part of our exit survey, and we compare these data to a faculty assessment of each student's abilities to comprehend and master program competencies. A summary of these data are presented to the faculty at the Annual Assessment Meeting each spring and we prioritize where changes need to be made based on those results. For example, 89% of graduate student alumni and 58 % of undergraduate alumni reported that obtaining their degree sufficiently trained them to perform their job, which led to discussions regarding relevancy in the undergraduate programs. Changes including the elimination of the requirement for a minor were reevaluated and eliminated, which allows students to take more public health or health care electives. Finally, specific competencies are identified and evaluated as part of the internship experience. Preceptors provide both qualitative and quantitative data on each student and are invited to discuss and strengths and weakness with the instructor of record.

A survey was also implemented at the 2018 Assessment Summit to gauge employers' perceptions of graduates' abilities to apply competencies in the workplace. Community partners, employers in the public health and health care fields, were asked to rate graduates' preparedness for the workforce by asking them to rate graduates on the 22 foundational competencies using a scale where one is very poor and five is very well. Community partners rated graduates between 3.8/5 to 4.5/5 for the competencies with an average rating of 4.2/5. Some community partners did not rate each competency as some competencies were outside of their experience with graduates.

F1.4 Documentation of External Contribution

> *Required Documentation: Provide documentation (e.g., minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3. (electronic resource file)*

See Electronic Resource File.

F1.5 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- We have several formal events that are specifically designed to garner information from our community partners, alumni, preceptors, and advisory board.

Weaknesses

- Although we conduct an alumni survey each year, we do have poor response rates. In addition, with the new competencies, most of the data we have acquired addresses the competencies we developed previously. This will of course change over time, but limits our ability to make substantive changes for a semester or two until we are confident in the data.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

F2.1 Student Involvement

Required Documentation: Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate. (self-study document)

Students are introduced to service, community engagement, and professional development activities through the SCHS new student orientation, Public Health Student Association (PHSA), Health Care Administration Student Association (HCASA), Internship Courses (HCA 493, EOH 793, and HCA 793), capstone courses (PBH 495 and HCA 779) as well as other public health classes. The student associations consistently take part in service and community engagement as well as professional development seminars or classes for students. Students are encouraged to participate through in person meetings and informed via email. Furthermore, both student associations also organize or co-organize job fairs and career night events each year to help students plan their career and find jobs. They are informed of the importance of networking with future employers through these events. The University has several organizations, student associations, and events that have public health themes. There are also two student representatives to the UNLV Graduate and Professional Student Association, which serves to support graduate students in all ways. Generally, the PHSA and HCASA collaborate with other organizations around campus to hold these events or encourage their students to participate. For example, the student associations team up with Prevent Child Abuse Nevada for their Pinwheels for Prevention events annually. By collaborating with other groups, students have access to more opportunities for service, community engagement, and professional development.

Students are also encouraged to join professional organizations to aid in career advancement. Professional organizations that current/former public health students have been members of include: Nevada Public Health Association, American Public Health Association, American College of Healthcare Executives (ACHE), Society for Epidemiology, and merit organizations such as Delta Omega and Phi Kappa Phi.

The SCHS facilitates events aimed at professional development for students throughout the year. Some examples of this include:

- The Future of Public Health Panel is a new series of events where students in undergraduate and graduate courses can come together to speak with public health professionals about job opportunities, what skills are needed to work in the field, and new trends in public health careers. This also provides an opportunity for undergraduate students to speak with graduate students about how to prepare for graduate studies. Two of these events have been held this spring with great success.
- National Public Health Week includes events like bake sales, seminars on relieving stress during the semester, as well as panels introducing students to graduate school and public health professions. This is a great way for students to come together and celebrate public health as well as introduce other students to the field.
- NIH and NPHA Seminars are offered each semester and include various topics that appeal to students, alumni, and faculty. For example, EOH Department Chair, Dr. Francisco Sy, offered a seminar entitled, “Navigating NIH Research Training Programs to Advance Your Career and NIH Loan Repayment Programs.”
- The HCASA works with the Nevada Chapter of ACHE to organize Career Night. Many local health care organizations participate in this event with their representatives talking to students

after the general session. During the general session, the keynote speaker(s), many of them are alumni, provide career development advice to students. The participating healthcare organizations also provide employment information to students, take résumés, and even arrange potential interviews.

- The undergraduate Internship/Capstone course has various assignments such as résumés, professional papers, as well as a final project on internship sites. These assignments not only prepare students to become professionals, but also provide hands-on experience in the public health field.
- Graduate Pre-Practicum/Practicum/Internship/Capstone courses have various hands-on assignments as well as final project on internship sites. These assignments prepare students to become professionals.
- The SCHS Job Fair/Career Night allows students to engage with public health and health care employers. It also provides a great opportunity for students to gain information about future internships as well as network with professionals.
- Résumé and interview workshops are held to prepare students for the job fair and the workforce in general. This past year, Christine Wunderlin, a seasoned career coach led two group seminars on résumé development and interview skills (http://christinewunderlin.com).
- Students team up with local hospitals that put on charity and awareness events where they request volunteers from our organization.
- Professional organizations also approach us requesting volunteers to assist with events such as the Nevada Healthcare Forum and the Las Vegas HEALS gala. At these events, students have the opportunity to engage with experienced executives from the community.

UNLV also offers opportunities for students to engage in community and professional service including:

- There are over 360 Registered Student Organizations (RSOs) at UNLV. These RSOs cover a wide variety of interests, activities, and beliefs. The Public Health Student Association and Health Care Administration Student Association are both Registered Student Organizations although there are several organizations around campus that have public health goals and missions. These RSOs include, but are not limited to Healthy Rebels, Association of Pre-Health Professionals, and Environmental Sustainability. Students of these groups usually participate in events around campus and encourage people with similar interests to sign up.
- Alternative Breaks are held during Spring Break through the Service Learning and Leadership department to introduce students to social justice issues and help communities. Students travel while learning topics such as immigration, housing, and food insecurity. While these alternative breaks are of some cost to students, the school subsidizes most of the costs. Students are encouraged to participate with announcements placed around campus as well as in classes and social media. The Service Learning and Leadership department also has service programs and service-learning opportunities for students.
- UNLVolunteers is a student-led organization that focuses on five important areas: environment, hunger and homelessness, youth and education, health, and general programs. The mission of this group is to promote awareness and social change through service opportunities to UNLV students. Various schools within the University team up with this organization for community events. Students are encouraged to sign up for events in the MyUNLV Involvement Center as well as information booths around campus.
- UNLV Career Services holds job fairs for the entire university every semester in addition to the job fair that the School of Community Science holds in the spring. This job fair engages employers from every sector, including local hospitals, health care, and public health institutions. This event is usually broadcasted around campus months in advance and students are encouraged to attend and have their résumé reviewed and receive interviewing tips.
- UNLV's Student Engagement and Diversity (SED) center also introduce students to service, community engagement, as well as professional advancement. The SED has four core values: leadership, service, diversity, and involvement. Through these values, the center engages students in community building, leadership, and civic engagement events.

F2.2 Examples of Community and Professional Service

Required Documentation: Provide examples of professional and community service opportunities in which public health students have participated in the last three years. (self-study document)

Various volunteer events are held during the semester to introduce students to community service relating to the public health field. The SCHS, PHSA, and HCASA have collaborated with other student organizations and local partners every semester to participate in National Rebuilding Day and Rebuilding Southern Nevada to help local community members who are either low-income, elderly, or military/veterans. Throughout the year, various food, toy, and clothing drives are sponsored by the SCHS or the student clubs for the Court Appointed Special Advocate (CASA) Foundation, HELP of Southern Nevada, and most recently the victims and families of tragedies within the valley. The majority of volunteer opportunities, at least service, is through student clubs, PHSA and HCASA. See Electronic Resource file and the PHSA Facebook page (https://www.facebook.com/PHSAUNLV/) for PHSA event documentation.

Other examples of community service include, but are not limited to:

- Three Square Food Bank
- Nevada Moves Day with Safe Routes to School
- Corks & Forks with Planned Parenthood
- ACHE College Bowl
- 2017 Southern Nevada Youth Homelessness Summit
- Red Rebel 5K Color Run
- Nevada Health Care Forum
- Las Vegas HEALS Gala
- UNLV Involvement Fair
- Pinwheels for Prevention
- HCA Career Night
- Halloween Safe-tacular by UMC
- UMC Strong Luncheon for first responders
- AIDS walk (AFAN)
- American Heart Association Heart and Stroke Walk
- ONE DROP's Walk for Water Heart Healthy Bake Sales
- Make a Difference Day
- National Rebuilding Together Day
- PHSA 10/1 Food Drives for Local Hospitals
- UNLV Pantry Annual Food Drive
- Landlord Tenant Hotline
- UNLV Thrives Kickoff Event
- Fall 2017 UNLV Involvement Fair
- CASA Foundation Toy Drive
- HELP of Southern Nevada Food Drive

F2.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The SCHS actively promotes community and professional service as part of our strategic plan. Faculty and students participate in numerous community and professional service opportunities as well as work to engage others in service. These opportunities are widely broadcasted to all students and faculty throughout the year and are often in collaboration with other service groups.

Weaknesses

- Opportunities for professional and community service in collaboration with other groups are sometimes difficult for students to attend as the times and dates are set by other service organizations. Earlier collaboration on service and professional opportunities might improve the chance for our students and faculty to participate. While some classes feature service prospects regularly, this should be done in all classes at all levels. The student and alumni organizations have made this a priority for future opportunities.
- The number of volunteers/service hours is not tracked by the School, and students often struggle to answer this question in the Exit Survey accurately. A more effective system needs to be put into place to track this information.

F3. Assessment of the Community's Professional Development Needs (SPH and PHP)

The school or program periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.
Examples could include periodic meetings with community members and stakeholders, formal or informal needs assessments, focus groups with external constituents, surveys that are administered or co-administered to external constituents and use of existing data sets.

F3.1 Professional Community

Required Documentation: Define the school or program's professional community or communities of interest and the rationale for this choice. (self-study document)

The School of Community Health Sciences includes several centers and programs that offer students specialized research and real-world training opportunities. Through the internship programs, the SCHS has several community partners that work closely with our programs and its students. The MPH Internship Program is designed to bridge the gap between classroom learning and the practice of public health. By working alongside experienced public health professionals in a variety of agencies and organizations to address current public health problems, students gain valuable experience and begin to develop the applied skills crucial to their success as public health professionals. The internship also provides students with the opportunity to network and gain perspective on the profession from people outside of the academic setting. For many students, the internship is their first opportunity to work in the field of public health outside the classroom. Because of the crucial role that internship agencies play on the formation of our graduates, the professional community of interest for our School is composed of approximately 50 partner agencies where students can complete their internship or practicum. Community partners are also a valuable source of feedback for the SCHS. For example, the Advisory Board comprised of community leaders and students, meets at least annually to discuss the school's goals and objectives as well as new community needs. A current list of community partners includes:

Aid for AIDS of Nevada (AFAN)
American Cancer Society Cancer Action Network Nevada
American Heart Association, Las Vegas Division
American Lung Association
Battle Born Progress
Centennial Hills Hospital
Cleveland Clinic Lou Ruvo Center for Brain Health
Delta Academy (The)
Desert Springs Hospital
Environmental Protection Agency (EPA)
Fundamental - Horizon Specialty Hospital
Girls on the run
Guinn Center for Policy Priorities
Green our Planet
HCP Davita
Health Plan of Nevada, Inc. (United Healthcare)
Henderson Fire and Rescue Department
Immunize Nevada
Iora Health, dba. Culinary Extra Clinic
Las Vegas CHIPs (Southern Nevada CHIPs)
Las Vegas Fire and Rescue
Las Vegas Urban League
Lucine Biotechnology, Inc.

Moonridge Group
MountainView Hospital
MWH Americas, Inc.
Nathan Adelson Hospice
National Environmental Health Association
Navy Environmental and Preventive Medicine Unit FIVE
Nellis AFB, Epidemiology
Nevada AIDS Research and Education Society (NARES)
Nevada Senior Services
Nevada Rural Hospital Partners
Nevada Senior Services Inc.
Nevada State Health Division
Nevada Division of Public and Behavioral Health
Positively Kids (Foundation for) - Neopediatrics Clinic
Safe Routes to School, CCSD
Saint Rose Dominican Hospitals (Dignity Health)
Sletten Companies, Divisional VP Safety/Environmental
Southern Nevada Adult Mental Health Services, Division of the Dept. of Health and Human Services
Southern Nevada Health District
Southwest Medical Associates
Summerlin Hospital
Sunrise Hospital
Optum/Collaborative Care Services.
Regional Transportation Commission
SWCA Environmental Consultants
The Gay and Lesbian Community Center of Southern Nevada
Three Square Food Bank
UHS, Inc.
University of Nevada, School of Medicine, Dept. of Emergency Medicine
University Medical Center of Southern Nevada (UMC)
Valley Health System
Veterans Administration of Southern Nevada Healthcare System
Volunteers in Medicine of Southern Nevada
Zero Level Fitness and Wellness - McCarran

F3.2 Assessing Professional Development Needs

Required Documentation: Describe how the school or program periodically assesses the professional development needs of its priority community or communities, and provide summary results of these assessments. Describe how often assessment occurs. Include the description and summary results in the self- study document, and provide full documentation of the findings in the electronic resource file.

While our centers and programs engage in periodic assessments of professional development needs for our community, we describe several examples of workforce assessment efforts at the UNLV School of Community Health Sciences.

Community Partners and Assessment Involvement during academic years: once per semester

This approach is mainly applied through internship courses of different degree programs. Internship preceptors act as supervisors during student internships and evaluate student success as they apply their knowledge in a real-world setting. At the end of the internship experience, each student is evaluated by his preceptor, and the internship coordinators review preceptor responses. The internship coordinators

compile the preceptor evaluations once a year and presents these data at the School's Annual Assessment Meeting. The survey administered to preceptors indicates that, in general, preceptors believe that students are performing well. However, through evaluation of this measure, a new need for a midterm internship evaluation was recognized and discussed during the annual assessment meeting. A mechanism for remediation was developed for those students who got off track and will be evaluated mid-internship.

At the 2017 Annual Assessment meeting, these surveys had a 91% response rate. The majority of preceptors (13/20) indicated that the internship experience was "Excellent"; the remaining seven indicated that the internship experience was "Good." Students reported that the most valuable aspects of the internship experience were networking/interacting with professionals in the field, and obtaining practical experience/expanding their knowledge. Interns also reported that their coursework prepared them well for the internship experience but that in the majority of the placements, the internship experience differed from the student's expectations.

Assessment Summits: biennially

As part of its iterative assessment cycle, the SCHS holds a biennial (in even years) Assessment Summit to examine the SCHS programs and assessment practices. The Assessment Summit involves faculty, staff, students, alumni, community partners, and university leaders, and it is an effective tool to improve the SCHS. Part of the Assessment Summit involves the use of focus groups for collecting data on professional development and workforce training needs and then using these data to improve the SCHS.

At the 2016 Assessment Summit, three focus group sessions were conducted with questions aimed at both students and employers. At a minimum, each group consisted of faculty, students, alumni, and community partners. The initial qualitative question posed to the group was, "What deficiencies are you noticing in your organization or education (i.e.: training, education, emerging skills)?" The second in this session was, "What skills are you looking for as a student? As an employer?" Responses included professional readiness, experience, and employer needs. Within professional readiness, professional development areas needing attention were identified including a mentorship program and specific courses including statistical packages (SAS/SPSS) and grant writing. More hands-on experience was requested including networking, real life situations, getting students into the field sooner, more time for internships, opportunities for undergraduate research, and teaching training for PhD students. Within employer needs, responses included a need for better communication skills (oral and written), program evaluation skills, and data management skills. Some of actions based on findings from this summit include the development of a SAS course, strengthening the school's annual job fair and career night activities, and increasing the number of gatherings and activities of two student associations. Moreover, the departments and school also encourage students attending a variety of professional events and activities in local areas. For example, the school paid the registration fee for students who made presentations or posters at the Nevada Public Health Association annual meeting. Another example is that the Department of Health Care Administration and Policy requires the students in the Capstone Class to attend some of the monthly Healthcare Mixers organized by the Nevada Chapter of ACHE and other national professional organizations, where the professional networking is one of the main purposes.

The 2018 Assessment Summit was held in March 2018. The goals and progress from the 2016 Assessment Summit were presented to 69 attendees, which included faculty, other UNLV personnel, alumni, students, community partners, and staff. The goals for the 2018 Assessment Summit were to discuss ways to improve professional development, including mentorship, improve engagement, participation, and collaboration, and identify effective communication strategies. Focus groups were conducted and each group contained a mix of community partners, faculty, staff, students, and alumni. These data provided great insight into the needs of various groups that interact with the SCHS including ways to foster engagement, communicate, and build a mentorship program. Immediate goals include development of a communication plan, development of a mentorship program within the community, and adopting school wide policies for participation. See the electronic resource file for the executive summary.

Advisory Boards' and Community Partners Involvement in Professional Development and Assessment: ad hoc during a year

Two advisory boards exist in the school, one for Public Health and the other for Health Care Administration, and their meeting frequencies vary (e.g., annual, twice a year, every other month, or even monthly), depending upon needs of the programs in the school. Furthermore, the school also works with individual advisory board members and community partners separately on specific areas through which potential needs and areas in professional development are identified. For example, when talking to the Southern Nevada Health District's Director, Dr. Iser, who is also a member of the Public Health Advisory Board member, he mentioned that some of his employees have a non-public health graduate or undergraduate degree but lack of fundamental knowledge of public health. As a result, the school developed a 15-credit Public Health certificate program starting in 2017 to meet this workforce development need in our community. An infection control certificate program was developed after the school heard from local hospitals that they need more skills to control hospital-acquired infections. Another example is the HCA department's redesign of MHA's internship and capstone courses to make them a sequence. After receiving feedback from students, alumni, and community that internship and capstone had quite some repetitive experience, the department made the internship more like a pseudo-employee format and the capstone more like a problem-solving group project for a specific healthcare facility. The revised models and courses were presented to the HCA Advisory Board and the board supported the change because they felt that students would be better prepared for the market with this two-tier hand-on experience.

F3.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- One of our strengths in the Assessment of the Community's Professional Development Needs is the SCHS biennial Assessment Summit. This is an event that is well received by faculty, students, alumni, and community partners, and this event allows those involved to network, partake in friendly conversation over lunch, and informs all of the community needs in terms of producing well-rounded public health professionals.
- Additional strengths include the creation of two certificate programs at the SCHS. The Certificate in Infection Prevention is designed to enhance the knowledge and skills of healthcare professionals, by examining cutting-edge infection prevention techniques and science as taught by leaders with more than twenty-five years of industry experience. The program of study advances students' knowledge and skills to become tomorrow's leaders in combating the spread of infections. Our Certificate in Public Health provides an alternative for professionals with a Bachelor's degree working in a public health related field who want recognition for foundational knowledge in public health. This program prepares participants to take the National Certification in Public Health (CPH) exam.

Weaknesses

- Increased visibility/opportunities are needed with the California-Nevada Public Health Training Center (CA-NV PHTC) so that our students can take full advantage of this resource. The CA-NV PHTC is a consortium of public health schools and programs in California and Nevada that engages in training activities designed to strengthen the core competencies and capabilities of the public health workforce. The Center works closely with public health organizations to provide a variety of different training opportunities, including: face-to-face training, online courses, and webinars; student internship opportunities; and collaborative projects with community partners. As an added incentive, most training opportunities are offered at no charge to public health professionals.

F4. Delivery of Professional Development Opportunities for the Workforce (SPH and PHP

The school or program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

F4.1 Developing and Implementing Professional Development Activities

Required Documentation: Describe the school or program's process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3. (self-study document)

The School of Community Health Sciences provides professional development activities for the workforce based on feedback from alumni and community partners (e.g., biennial Assessment Summit, advisory boards, and individual community partners). A few of our faculty have worked with the California-Nevada Public Health Training Center (CA-NV PHTC), a regional center developed by three California Schools of Public Health and the SCHS, and funded through the U.S. Health Resources and Services Administration (HRSA) agency. The CA-NV PHTC provides free mini-series training sessions to students, staff, and faculty. In addition, the CA-NV PHTC works with the School to provide online tutorials, webinars, and in-person training to faculty and staff. The CA-NV PHTC also provides paid student internships and faculty-student-community partner collaborative project support.

To strengthen the community involvement in public health education and workforce development for our community, the school created a Community Engagement position, the Executive Director of Community Engagement. Mr. José L. Meléndrez is the current director. One of the main responsibilities of the director is to maintain and expand internship sites for all programs in the school. The number of internship sites has been continually growing, exceeding seventy sites by the end of 2017. Another big task of the director is to reach out high school seniors to introduce the Public Health field to them, and to encourage and inspire them to become a public health major or health care administration major when they apply for college. These types of activities facilitate the long-term workforce development for our community. In 2017, Mr. José L. Meléndrez spoke to hundreds of students at seven local high schools.

As mentioned in Criterion F3.2, the school recently developed two certificate programs to meet the workforce developmental needs in the community. The first is a 15-credit Public Health certificate program targeting those who are working in the public health field with a non-public health graduate or undergraduate degree but lacking fundamental knowledge of public health. The other is a 12-credit Infection Prevention certificate, which provides healthcare professionals with the formal training and knowledge they need to manage an effective infection prevention program to combat health care-associated infections.

Another example is that our school joined with several other colleges/schools to offer an interdisciplinary Master of Science in Data Analytics degree, given that the big data and data analytics are becoming increasingly important in health care and public health fields but lack of qualified personnel to do so exists. Our school will offer a health concentration under the master's degree. The degree proposal has been approved by UNLV and is in the process of being approved by the Nevada System of High Education (NSHE).

F4.2 Education/Training Activities

Required Documentation: Provide two to three examples of education/training activities offered by the school or program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (ie, individuals who are not faculty or students at the institution that houses the school or program). (self-study document)

The SCHS provides several education/training activities that have been developed in response to community-identified needs. One such example is our Certificate in Public Health, which prepares students for careers and advanced degrees in public health. This certificate is comprised of six classes: Fundamentals of Public Health, Fundamentals of Environmental Health, Epidemiology and Public Health, U.S. Health Care System: Programs and Policies, Program Planning and Grant Writing in Health Promotion, and Biostatistical Methods for the Health Sciences. Full-time students (9 credits per semester) are able to complete this Certificate in two semesters. Should the student desire to pursue an MPH degree at our School, all courses successfully completed for the Certificate would transfer into our MPH degree. This program began in the Fall of 2016, and as of Spring 2018, there are eight students in this program.

Another example of an education/training opportunity is our Certificate in Infection Prevention. This Program provides health care professionals with the formal training and knowledge they need to manage an effective infection prevention program to combat health care-associated infections. This certificate is comprised of four courses: Principles of Infection Prevention, Healthcare Associated Infections: Surveillance, Data, and Reports, Infection Prevention in Healthcare Facilities, and the choice of either Infectious Disease Epidemiology or Transmission of Infectious Diseases. The Certificate is open to applicants with at least a Bachelor's degree or recognized equivalent from a regionally accredited institution in a scientific discipline such as Nursing, Microbiology, or Public Health. Students are able to complete this Certificate in two semesters. This program began in the Fall of 2016, and as of Spring 2018, there are four students in this program.

F4.3 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- One of our strengths is that our certificate in public health provides an alternative for professionals with a bachelor's degree working in a public health related field who want recognition for foundational knowledge in public health. In addition, this Certificate program prepares participants to take the National Certification in Public Health (CPH) exam.
- Another strength related to this criterion is the fact that the Certificate in Infection Prevention is the only one of its kind in Nevada. It is also designed to enhance the knowledge and skills of healthcare professionals and it examines cutting-edge infection prevention techniques and science as taught by leaders with more than twenty-five years of industry experience. This program of study advances students' knowledge and skills to become tomorrow's leaders in combating the spread of infections.

Weaknesses

- Education/training opportunities are not prominently highlighted on our website. These need to be easy to find; and perhaps they can be showcased in a new section under this name. The Director of Communications will determine how to better highlight these activities and opportunities.

Criterion G

G1. Diversity and Cultural Competence (SPH and PHP)

The school or program defines systematic, coherent and long-term efforts to incorporate elements of diversity. Diversity considerations relate to faculty, staff, students, curriculum, scholarship and community engagement efforts.

The school or program also provides a learning environment that prepares students with broad competencies regarding diversity and cultural competence, recognizing that graduates may be employed anywhere in the world and will work with diverse populations.

Schools and programs advance diversity and cultural competency through a variety of practices, which may include the following:

- **incorporation of diversity and cultural competency considerations in the curriculum**
- **recruitment and retention of diverse faculty, staff and students**
- **development and/or implementation of policies that support a climate of equity and inclusion, free of harassment and discrimination**
- **reflection of diversity and cultural competence in the types of scholarship and/or community engagement conducted**

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.20

Cultural competence, in this criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the school or program's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the school or program's scholarship and/or community engagement.

G1.1 Under-Represented Populations

Required documentation: List the school or program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the school or program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups. (self- study document)

We try to recruit as many under-represented students as we can, in particular, Hispanics/Latinos, Asians/Pacific Islanders, and Native Americans. Hispanics/Latinos and Asians/Pacific Islanders are the two fastest growing populations in Southern Nevada. Based on the latest estimate from the Census Bureau, about 29% and 10% of the population in Nevada are Hispanics/Latinos and Asians/Pacific Islanders, respectively. There is also a low percentage of high school graduates going to college among American Indians/Native Americans.

G1.2 Goals

Required documentation: List the school or program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1. (self-study document)

The university is ranked as one of three of the most diverse university in the U.S. by the U.S. News & Report in 2017. Diversity is embedded into the University's Top Tier mission including the following statement: "UNLV's diverse faculty, students, staff, and alumni promote community well-being and individual achievement through education, research, scholarship, creative activities, and clinical services." This is measured by criteria including student, faculty, and staff diversity, including maintaining UNLV's Minority Serving Institution (MSI) status and Hispanic Serving Institution (HSI) status, and a deeper engagement of UNLV with Las Vegas and our region to ensure ongoing alignment with our diverse community's needs and interests.

Our school also emphasizes diversity. This emphasis is reflected in the SCHS mission "to advance the science of public health, improve the health and quality of life of people in our communities, and work to eliminate health disparities in Nevada, the nation, and the world by providing leadership in quality education, research, and service."

The SCHS has three goals pertaining to the success of our priority populations.

1. Maintain and support diversity infrastructure in the SCHS.
2. Facilitate SCHS participation on initiatives regarding priority populations including attendance at all recruiting events, job fairs, and other opportunities that engage members of the priority populations as well as all underserved populations.
3. Develop partnerships in and out of the university that offer tools for success to underserved students.

G1.3 Actions and Strategies

Required documentation: List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of school- or program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies. (self-study document)

Goal 1

Our general strategy is to elevate diversity infrastructure and culture in our school. Since the school was founded in 2004, we have created two centers dedicated to serving the university's and school's mission as well as underrepresented students, the Center for Health Disparities Research and the American Indian Research and Educational Center. More recently, we have hired a full time Executive Director of Community Partnerships, José L. Meléndrez, who engages the diverse Southern Nevada community including stakeholders from across the spectrum from community partners to high school students from local schools. The Department of Health Care Administration and Policy's Master of Health Care Administration Program was formally reviewed for accreditation purposes by the Commission on Accreditation of Health Care Management Education (CAHME) in October 2017, and the accrediting committee cited the department's particular strengths in its diversity of its faculty and students.

The Center for Health Disparities Research (CHDR), directed by Dr. Melva Thompson-Robinson and the American Indian Research and Education Center (AIREC) directed by Dr. Carolee Dodge-Francis were created through the NIH's EXPORT program. The Nevada System of Higher Education Board of Regents approved both Centers in 2004 to be housed within the School of Community Health Sciences, University of Nevada, Las Vegas. CHDR addresses health disparities through its research, leadership, advocacy, education, evaluation, capacity building, collaboration, community engagement, evaluation, communication, partnership, and cultural competence. To support the CHDR mission, large funding resources have been garnered from the National Institutes of Health, state funding, Department of Health and Human Services, and the Centers for Disease Control and Prevention. AIREC has been continuously

supported by the National Institutes of Health, along with state funding. AIREC's mission strives to enhance the ability of tribes, the university community, and the general public to understand and address issues affecting American Indian populations. AIREC conducts community-based research, promotes educational and research opportunities for American Indian students, provides training and technical assistance and serves as an informational resource for the campus, community, tribal populations, and the general public.

AIREC is one of four national Coordinative Centers for the National Institute of Diabetes, Digestive, and Kidney Diseases (NIDDK) Short-Term Research Experience Program for Underrepresented Persons (STEP-UP). STEP-UP pairs 11th & 12th grade high school students with experienced researchers throughout the country for a summer research experience. AIREC targets the recruitment and mentoring of American Indian/Alaska Native and Puerto Rican students. The summer experience ranges from eight to ten weeks and students receive a stipend for their participation. Students also attend an all-expenses paid trip to the annual High School STEP-UP Research Symposium held on the National Institute of Health's main campus in Bethesda, Maryland. Students have the opportunity to present their research within oral and/or poster presentation format and receive critique from their peers and NIH scientists.

Goal 2
Recently, the SCHS hired a full time Executive Director for Community Partnerships, Mr. José L. Meléndrez. He formerly served as the Assistant Vice President in the Office of Diversity Initiatives where he was responsible for Community Engagement and Title III & Title V programs. He is now responsible for coordinating and building partnerships that promote internships for student experiential learning and success in local agencies. Mr. Meléndrez collaborates with the CHDR and AIREC in regards to research and development. He supports the development of new recruitment strategies to increase the diversity of students enrolling in the SCHS. On behalf of the SCHS, Mr. Meléndrez is the liaison for Title III and Title V initiatives. This includes service within UNLV and the Nevada System of Higher Education (NSHE) Hispanic Serving Institutional initiatives.

Mr. Meléndrez also attends recruitment events at local high schools that allow him to connect with diverse students. Building on the current efforts of UNLV Admission and Recruitment strategies, the SCHS works in collaboration to coordinate and support campus wide efforts. This includes attending all career and college fairs held through the year in partnership with Clark County School District. These efforts include high school and middle school student visits to UNLV. SCHS faculty, staff, and students participate in these visits that include campus tours and visits with specific colleges. During these college visits, students have the opportunity to visit working laboratory facilities, engage in conversations with faculty about program highlights and career pathways in Public Health. Current UNLV students provide perspectives on student life and organization participation opportunities. In 2017, he visited seven high schools, as well as attended and had recruitment tables at the Nevada Public Health Conference, Nevada Conference on Health-Immunize Nevada, 2017 Latino Youth Leadership Conference, and the STEM Alliance high school student library program. The school also participated in the recent Graduate and Professional Student Association college fair hosted by UNLV.

Goal 3
The SCHS is committed to serving these populations as it pertains to public health and education. As indicated earlier, UNLV currently is designated as Minority Serving Institution holding designations as Title III -Asian American, Native American and Pacific Islander designated institute and a Title V – Hispanic Serving Institute. Specific initiatives are currently under development to provide key opportunities for student education, engagement and development.

The UNLV Office of Diversity Initiatives will be engaging the Minority Serving Institution task force to address student needs and success initiatives. The SCHS will be a participating member in this effort. This will include planning and implementation of this campus wide effort. SCHS staff member José L. Meléndrez currently serves on the Nevada System of Higher Education Hispanic Serving Institution Task Force that provides oversight and direction for all institutions of higher education in Nevada as it pertains HSI programming and services. Under MSI efforts staff from the SCHS recently met with the Paiute Tribe of Southern Nevada. Discussions have begun about opportunities for collaboration and engagement with

the Paiute Tribe. Engagement efforts could include recruitment of Paiute Tribe members into the SCHS academic programs, Paiute Tribe community and health centers utilization of the SCHS internship programs, identification and promotion of new research and academic programs coordinated with faculty of SCHS. Mr. Meléndrez

The SCHS has also reached out to the UNLV Center for Academic Enrichment and Outreach (CAEO) for collaborating to bring new resources services for student success. The CAEO currently coordinates major programs that include TRiO, GEAR Up, and LSAMP (Lewis Stokes Alliance for Minority Participation in STEM). Students registered in the CAEO programs would be introduced to SCHS educational programming and careers. Students from the SCHS would be introduced and have the opportunity to participate in CAEO programs that include Student Support Services (SSS) Programs. SSS program provide students with priority registration, scholarships, career development, graduate school counseling, book loan programs, tutoring and key professional development workshops.

G1.4 Creating and Maintaining a Culturally Competent Environment

Required documentation: List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers, and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities. (self-study document)

The overarching theme of the school is to eliminate health disparities, which is supported by student activities, faculty teaching, and research. Through teaching, research, service, and student and community engagement we work to create a culturally competent environment. There are two student organizations in the school: the Public Health Student Association and the Health Care Administration Student Association. The officers of the student organizations are demographically diverse, which reflects our student bodies well. Students are very active in participating in a variety of university-level and culturally oriented student organizations. For example, faculty member Dr. Sy is very involved in the local Filipino community and some SCHS Filipino students are heavily involved in the UNLV Filipino student group's activities. The student clubs engage in UNLV activities regularly with other clubs that are culturally based, such as the UNLV Filipino Student Group. Students are encouraged to participate in one of the 350 highly diverse student clubs registered through the UNLV Involvement Center on campus as well. These clubs represent the diversity of the university.

Faculty members in our school incorporate diversity in teaching and conduct research on health and health disparities. Undergraduate students have required courses that are focused on understanding either public health or health care in the context of culturally competency. These courses include Multicultural Diversity and the US Health Care System (HCA 203) for the BS HCAP degree and Multicultural Health (PBH 200) and Global Health (PBH 330) for the BSPH degree. For graduate students, classes are offered including Social Epidemiology (EOH 705) and Racial and Ethnic Disparities for Public Health (EOH 715). Cultural competency is covered in other courses as well. For example, Dr. Michelle Sotero covers diversity issues related to health care workforce in her course, Human Resource Management for Health Care Organizations (HCA 719). Dr. Betty Burston addresses health disparities and special populations in her undergraduate classes (HCA 175 and HCA 203).

As for research, Dr. Melva Thompson-Robinson engages African Americans for health education and disease prevention through NIH funded projects. Dr. Marya Shegog is the Director of Health Programs at the Lincy Institute, an entity within UNLV focused on health, education, and social services in the state. Dr. Carolee Dodge Francis, supported by NIH, makes great efforts to encourage and help American Indian high school students to go to college through, among other efforts, a program that encourages American Indian students to consider careers in STEM and in research. Dr. Jay Shen uses his PCORI funded project to engage patients with life-limiting illnesses to receive palliative care, with a special focus on reaching out to the Hispanic/Latino and Asian communities where people are less likely to access palliative care.

Faculty also have the opportunity to participate in training that is focused on cultural competency. For example, The Intersection: Academic Multicultural Resource Center at UNLV, along with the Institute for Evidence-Based Change and the Educational Testing Service, offered a 2-day training entitled "Integrating Cultural Competence into Instruction, Assignments & Assessment" in August 2017. This was customized specifically for UNLV teaching faculty, with training to help UNLV educators develop and sharpen their skills and deliver culturally competent instruction, assignments, and assessments of student learning. UNLV also offers courses through the Continuing Education Division of Educational Outreach such as the November 2017 course, Cultural Competency in the Workplace.

G1.5 Documentations of Approaches, Successes and/or Challenges

Required documentation: Provide quantitative and qualitative data that document the school or program's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s). The data must include student and faculty (and staff, if applicable) perceptions of the school or program's climate regarding diversity and cultural competence. (self-study document)

Recruiting diverse students is addressed in multiple ways. First, the university recruits students through forward thinking media presence and dynamic engagement in the community such as giving interviews, and service in the community. Second, the Graduate College has allocated recruitment scholarships focusing on diversity for the last four years. The main criterion requires the scholarship be provided to newly admitted minority, female students or/and other students who represent diversity. Each year, our school awards this scholarship to 6-10 new masters and doctoral students. Third, the school adds to this by maintaining a high profile on social media and the university's website. The school has recently hired a full time Director of Communications to increase these efforts. The website clearly indicates the school's mission statement, which includes reducing health disparities. The Academic and Research Faculty Booklet includes of all academic and research faculty with their photos, research interests, current projects and recent publications has been compiled and will be maintained on our website. We believe that our diverse faculty with their varied research interests will attract diverse applicants. The number of faculty addressing health disparities in their research may also attract ethnic and racial minority students. Faculty members also participate in recruiting through community-based organizations, regional organizations, and at national meetings such as APHA where we have a table for students to ask questions and learn about our school and programs.

Recruiting diverse faculty is addressed in several ways. Each college/school is required to have a diversity-hiring plan that is submitted to Provost's office, this plan is reviewed and updated each year and is completed by the Associate Dean of the School of Community Health Sciences. One of our objectives highlighted in this document is to have faculty diversity that mirrors the diversity in our community. One emphasis areas we have been trying to address over the last few years is to increase the number of Hispanic/Latino faculty members, as our local community is over 30% Hispanic/Latino. We have also been successful in the past, although the program no longer exists, in hiring faculty through a program entitled the "Target of Opportunity Hire." This program allowed us to identify, recruit, and hire diverse faculty to meet the needs of our individual units. To try to attract the most diverse candidates, the university's standardized job announcement template emphasizes diversity by including "Equal Opportunity/Affirmative Action Educator and Employer Committed to Achieving Excellence through Diversity." This required information encourages applicants with different backgrounds to apply for any open faculty positions. The university also encourages each unit (i.e., department, college/school) to look at the national data on faculty demographics in their respective disciplines (e.g., the Nebraska Faculty Survey Database) when making faculty hiring. At our school's level, faculty search committees always make efforts to let applicants know the Las Vegas metropolitan is greatly diverse. Both SCHS student bodies and faculty are very diverse, and a core theme of the SCHS is Health Disparities.

Table G1.5a Undergraduate Demographic Characteristics of Student Body from 2015-2017 (%)						
	2015-2016		2016-2017		2017-2018	
	M	F	M	F	M	F
African American/Black	3%	12%	2%	12%	2%	14%
American Indian/Alaska Native	0%	0%	0%	0%	0%	0%
Asian/Pacific Islander	5%	13%	8%	15%	7%	13%
Caucasian	8%	22%	5%	21%	6%	17%
Hispanic/Latino	7%	18%	4%	24%	7%	24%
Unknown/Other	4%	7%	3%	6%	2%	8%
TOTAL REPORTED	27%	73%	22%	78%	24%	76%

Table G1.5b Graduate Demographic Characteristics of Student Body from 2015-2017 (%)						
	2015-2016		2016-2017		2017-2018	
	M	F	M	F	M	F
African American/Black	2%	5%	3%	7%	3%	5%
American Indian/Alaska Native	0%	2%	0%	1%	0%	1%
Asian/Pacific Islander	4%	10%	4%	12%	3%	12%
Caucasian	12%	34%	12%	31%	11%	29%
Hispanic/Latino	3%	8%	4%	8%	7%	9%
Unknown/Other	9%	12%	7%	11%	7%	13%
TOTAL REPORTED	30%	70%	30%	70%	31%	69%

Table G1.5c Full-Time Faculty Demographic Characteristics from 2015-2017 (%)						
	2015-2016		2016-2017		2017-2018*	
	M	F	M	F	M	F
African American/Black	7.7%	11.5%	6.9%	10.3%	TBD	TBD
American Indian/Alaska Native	0.0%	3.8%	0%	3.4%	TBD	TBD
Asian/Pacific Islander	19.2%	0.0%	20.7%	3.4%	TBD	TBD
Caucasian	26.9%	26.9%	24.1%	27.6%	TBD	TBD
Hispanic/Latino	0.0%	3.8%	0.0%	3.4%	TBD	TBD
Unknown/Other	0.0%	0.0%	0.0%	0.0%	TBD	TBD
TOTAL REPORTED	53.8%	46.0%	51.7%	48.1%	TBD	TBD

*These data are collected the university and currently unavailable.

UNLV conducted a study in 2016 regarding campus climate. Please see results in the electronic resource file or at https://www.unlv.edu/sites/default/files/page_files/27/2016-Report-70-pages.pdf.

Data were also collected at the 2018 Assessment Summit pertaining to student and faculty perceptions of the school's climate regarding diversity and cultural competence. Faculty and students rated three items on a five-point scale with strongly disagree (1) and strongly agree (5). Both students (91%) and faculty (88.2%) agreed or strongly agreed that cultural competency was an integral part of public health and the majority of students (72.8%) and faculty (60.5%) also agreed or strongly agreed that cultural competency is part of the SCHS climate. Students (81.9%) and faculty (70.7%) also strongly agreed or agreed that the diversity within the SCHS is representative of the community. See results in Table G1.5d.

Table G1.5d Faculty and Student Perceptions of School Climate in percentages												
	Students (N=11)						Faculty (N=17)					
	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree	No Response	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree	No Response
The cultural diversity of the faculty and staff in the SCHS represents the cultural diversity seen in our community.	45.5	36.4	9.1	9.1	0	0	29.5	41.2	5.9	17.6	0	5.9
Cultural competency is part of the climate in the SCHS.	45.5	27.3	18.2	9.1	0	0	7.6	52.9	11.8	11.8	0	5.9
Cultural competency is an integral part of public health and health care.	45.5	45.5	9.1	0	0	0	52.9	35.3	5.9	0	0	5.9

G1.6 Strengths and Weaknesses

Required documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Our strengths in diversity include placing health disparities as an essential part of the School's mission, achieving recruitment of high percentages of minority and female students and faculty, establishing infrastructure through SCHS centers, which reach out to minority communities, and conducting health and health care disparity research projects engaging minority communities.
- The Southern Nevada community is very diverse. Hiring Mr. Meléndrez to aid the SCHS in reaching out to local minority communities as well as to facilitate community partnerships that expose our internship students to underserved populations has helped the SCHS to reach more underserved students, agencies, and persons.

Weaknesses

- Although we offer several undergraduate courses in health disparities, more courses such as these need to be offered at the graduate level.

Criterion H

H1. Academic Advising

The school or program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the school or program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

H1.1 Academic Advising Services

Required Documentation: Describe the school or program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering. (self-study document)

Advising at the undergraduate level is facilitated through the university's undergraduate academic advising program. The mission of academic advising at UNLV is to assist students by collaborating with them in identifying and pursuing their educational goals, providing accurate and timely information, and promoting student responsibility and accountability for their academic success. Undergraduate public health students are advised at the Division of Health Sciences Advising Center. The advising center is staffed with a Director, Assistant Director, two Administrative Assistants, a Senior Academic Advisor, and four Advisors, including one advisor dedicated to retention, progression, and completion. The Division of Health Sciences Advising Center advises for the largest student population on campus compared to other advising centers. They advise approximately 4,300 students. The Division of Health Sciences Advising Center has been named one of the top three advising centers on campus and two of the advisors within the center were recognized as being in the top ten advisors on campus two years in a row (2016 and 2017).

Advising for all graduate students is handled within the school by the graduate coordinators. When students are accepted into our programs, they are assigned a temporary faculty advisor and encouraged to meet with them as soon as possible as well as to attend the SCHS orientation. Students are encouraged to speak with their advisors at least every semester, and all advisors and graduate program coordinators have an open-door policy. Advisors provide guidance on course scheduling, academic goals, professional goals, project topics, choosing a specialty, etc. Students also select an advisory committee, which is chaired by the student's academic advisor. In addition to the academic advisor, two other faculty members and one graduate college representative are on the committee. They review all courses and approve the prospectus and defense, ultimately accepting the student's culminating project or paper by unanimous vote.

H1.2 Selection and Orientation of Advisors

Required Documentation: Explain how advisors are selected and oriented to their roles and responsibilities. (self-study document)

The advising center uses a comprehensive training manual as a guide for training new advisors as well as acts as a resource for current advisors. This manual includes everything from organizational charts for the three schools they advise to student forms (see Electronic Resource file H1.3).

Undergraduate advisors at the Division of Health Sciences Advising Center have at least a Bachelor's degree and three years of comparable professional experience. Among the six advisors, there are six Bachelor's degrees, four master's degrees, and one doctorate degree as well as over 22 years of advising experience. Advisors are required to have good interpersonal skills including patience, tact, flexibility, and discretion as well as experience with student information management systems, communication skills, accuracy, time management skills, Family Educational Rights and Privacy Act (FERPA) knowledge, and attention to details. Advisors are also required to know university policies, programs, procedures, academic requirements, and any potential barriers to students' success.

Temporary faculty advisors are assigned to students by the graduate coordinators with approval of the Associate Dean based on academic interests, if possible. Graduate level advising has been discussed at faculty meetings regularly to ensure that faculty advisors are aware of their responsibility and best practices. These advisors may change during the course of a student's program based on interests. Faculty advisors make sure that students are meeting all program requirements such as course selection and sequencing, internship, and culminating project. Advising packets have been created for each student, which document student contact, any issues or concerns, and career advising. The advising packets contain all forms required for students to complete their program successfully for both the SCHS and the Graduate College. Faculty receive training for advising in faculty meetings as well as attend specific training regarding student advising which includes use of the advising packet, advising policies, and procedures.

H1.3 Sample Advising Materials and Resources

Required Documentation: Provide a sample of advising materials and resources, such as student handbooks and plans of study that provide additional guidance to students. (electronic resource file)

See Electronic Resource File.

H1.4 Student Satisfaction of Academic Advising

Required Documentation: Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable. Schools should present data only on public health degree offerings. (self-study document)

All graduating seniors are asked to complete the GSES exit survey through the Office of the Vice Provost for Undergraduate Education. Response rates for this survey average around 40%. Within this survey, satisfaction of undergraduate advising is measured through self-response items. Students rate items such as "Quality of academic advising by advising center," and "Quality of academic advising by faculty" on a scale four point scale where one is strongly disagree and four is strongly agree. The SCHS specific results indicate that students agree or strongly agree with the statements regarding both faculty advisors and advising center advisors.

Table H1.4a GSES Student Satisfaction of Academic Advising Results

	All Graduating Seniors			SCHS Graduating Seniors		
Academic Year	**2014 - 15**	**2015 - 16**	**2016 - 17**	**2014 - 15**	**2015 - 16**	**2016 - 17**
Quality of academic advising by advising center	2.96	3.03	3.09	2.81	3.21	3.29
Quality of academic advising by faculty	3.13	3.16	3.14	2.90	3.21	3.22

Graduate advising satisfaction is measured in the graduate programs' exit surveys. Response rates for this survey are around 52% for 2014-2016 and 70% for 2017. Students are asked to rate their faculty advisors on advisor's performance in the areas including availability, ability to communicate, understanding my academic goals, helping to create a program geared toward my interests, effectiveness as an academic mentor, effectiveness as a career mentor, and overall satisfaction on a scale where one is very poor and five is outstanding. Results indicate that on average students rate their advisors as good or outstanding with overall satisfaction at 4.8 to 4.9 and all other areas ranging between 4.6 and 4.9.

Table H1.4b SCHS Graduate Student Exit Surveys				
How would you score your adviser's performance in the following areas?	**2014-15**	**2015-16**	**2016-17**	**2017-18***
Availability	4.4	4.6	4.8	4.8
Communication	4.8	4.7	4.7	5.0
Understanding of Academic Goals	4.8	4.8	4.9	5.0
Creating Programs Geared to Students' Needs	4.8	4.8	4.9	5.0
Effectiveness as an Academic Mentor	4.8	4.8	4.8	5.0
Effectiveness as a Career Mentor	4.7	4.7	4.8	5.0
Overall Satisfaction	4.8	4.8	4.8	5.0

*2017 Data do not include MHA students.

Results from the 2016 MPH/PhD alumni survey, which had a 19% response rate, included suggestions to improve academic advising. The 2016 MHA alumni survey, which had a 12% response rate, also indicated concerns about advising and included suggestions such as more interaction between students and faculty and advisor assignment upon program admittance for early advising.

Qualitative results from the 2018 MPH alumni survey, which had a 25% response rate, revealed that MPH graduates recognize that advising has changed in the last couple of years. MPH students rated academic advising quantitatively as satisfied with an average of 3.4/4. Results for the 2018 PhD alumni survey, which had a 63% response rate, rated academic advising as satisfied with an average of 3.17/4. MHA alumni responded with satisfied as well with an average rating of 3.4/4 on academic advising (28% response rate).

This information was included in focus group discussions at the 2016 Biennial Assessment Summit. The Summit addressed advising through focal groups comprised of students, alumni, staff, faculty, community partners, and stakeholders. During focal groups, it was reported that there were areas pertaining to advising where the SCHS could improve. Data revealed that there was a desire for more interaction between students and faculty, checklists to make matriculation smoother, encouragement for regular advising, and assignment of faculty advisors on admittance into SCHS programs. These data were brought back for review into the weekly Accreditation Committee meetings and changes were put into place including the creation of new advising packets, which encourage communication between students and advisors and assignment of faculty advisors upon admittance into SCHS graduate programs.

H1.5 Orientation Process

Required Documentation: Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each. (self-study document)

Each semester, new undergraduate students attend a UNLV new student orientation as facilitated through the Division of Health Sciences Advising Center. This orientation familiarizes students with their major, university policies and procedures, and campus resources. The advisors conduct orientations before classes start each semester and advising sessions throughout the year. The orientation includes a one-hour general presentation that overviews the schools within health sciences, university policies and procedures, campus resources, and general education for their degree. Students then attend a separate

30-45 minute presentation (major specific) to discuss more details about what their major requires. At the end, students are given their schedules for the next semester. New first time freshman attending UNLV are administratively enrolled into 15 credits by their academic advisor. Students are given a USB flash drives with a lanyard (purchased by DHS Advising), which includes important documents and resources to assist them through their first semester as well as a UNLV folder. They use program approved degree sheets in order to guide students through their program.

These students, as well as all new SCHS graduate students, are also invited to attend the SCHS New Student Orientation held the week before classes start. This orientation includes introductions of SCHS administration, faculty, staff, research laboratories and centers, the health sciences librarian, and student clubs (HCASA, PHSA, Alumni Association, and Delta Omega honor society). After introductions, time is set aside for faculty and students to network. It is during this time that new SCHS Graduate Students connect with their pre-assigned faculty advisors to discuss their expectations for their academic career and to set up an advising schedule. After the faculty meet-and-greet portion of the evening is over, the students are guided into separate rooms organized by program where they are given a presentation by their respective graduate/program coordinators. Students are given a packet of information including the student handbook, degree sheet, a presentation on their program, the policies and procedures of the SCHS (see electronic resource file), and other important information pertaining to their time at UNLV.

H1.6 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- The Division of Health Sciences Advising Center is a comprehensive resource for undergraduate students in the SCHS. They have won numerous awards as a center and as individual advisors. The SCHS undergraduate committee works closely with the advising center to keep them informed of any changes or issues. This relationship has created an environment where advisors can participate in SCHS committees and the faculty communicate with advisors.

Weaknesses

- Graduate level advising has been reported as inconsistent in multiple data sets. Some students resist receiving advising until a problem arises. Due to this, the past two years have been spent formulating and enacting a proactive advising approach for graduate students. This plan includes assigned advisors upon acceptance into SCHS programs, the advising packet, and advising training for faculty. Faculty are still learning to use the advising packet and tracking tools yet they are open to facilitating the advising process for students. Hopefully, as these elements are implemented and utilized, data will report greater satisfaction in graduate advising.

H2. Career Advising

The school or program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, résumé workshops, mock interviews, career fairs, professional panels, networking events, employer presentations, and online job databases.

The school or program provides such resources for both currently enrolled students and alumni. The school or program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

H2.1 Career Advising Services

Required Documentation: Describe the school or program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs. Schools should present data only on public health degree offerings. (self-study document)

Undergraduate

Career advising is available at the Division of Health Sciences Advising Center in many types of advising including individual, phone, freshman group, international, Honors, and open advising. The Advising Center has prepared handouts, which are entitled "Major to Career Guides" that outline what careers are associated with different degrees (see Electronic Resource file H1.3). Advisors are regularly asked to identify possible careers for degrees and to advise students on the various career opportunities that suit student's aspirations.

Undergraduate students also have access to the UNLV Career Services unit. The Hire a Rebel program, which strives to educate and equip UNLV students and alumni with the knowledge and tools to navigate the increasingly global and dynamic workforce successfully. Career Services also works to create beneficial community partnerships to connect UNLV students and alumni with their respective industry. The UNLV Career Services unit offers a listing of 1,300 vetted employers through its program. Of that number, 800 are, in some way, tied to health as an occupational descriptor. In fact, Career Services has agreed to send out a résumé blast of public health résumés for graduating public health students to the 800 agencies to encourage the sites to hire UNLV public health graduates. They provide students with a Career Services Handbook that provides valuable resources in terms of developing skills for employment, career development, searching for employment, résumés, and internships, etc. Students can meet with an advisor, participate in mock interviews, or take an online, interactive, self-guided career and education planning assessment designed to help students make decisions about their future career goals and education plans.

The pre-internship and internship experiences also provide students with career advising. The internship coordinator discusses career aspirations with students when placing them into an internship. Internship preceptors expose students to employment in the public health field and discuss students' goals for the internship as well as beyond graduation. The students selecting the pre-GA option in the capstone trilogy of choices are fully exposed to systematic career services advising. In addition to career services personnel reviewing and providing written feedback to their initial resume', the pre-GA student participates in the course's mock interview process. This process includes a) three interviews with three different public health-related community employers, b) responding to a set of public health related questions presented by the employers in each interview, and c) receiving both verbal and written feedback (structured evaluation forms used here) of their interviews. Finally, following a debriefing of the mock interview process with the employers (structured evaluation forms used here), a summary is presented to all the members of the class citing class-wide strengths and weaknesses.

Graduate

Graduate students are advised primarily by faculty using a faculty advising packet regardless of the type of advising, academic or career. Faculty advisors discuss varying paths that a student can take after graduation. Many faculty members guide students into internships that fit the aspirations of the student in hopes that it will yield employment placement. The internship coordinators also discuss career aspirations with students when placing them into an internship. Internship preceptors expose students to employment options in the public health field and discuss the students' goals for the internship and post-graduation.

The Faculty Advisor Contact Form is filled out each semester by faculty advisors when they meet with students. Included in this form is a reminder regarding career advising. The discussion of scholarly activity on the Graduate Program Progress Check Form often facilitates a discussion of career aspirations based on community projects and research areas selected by the student.

All Students

All students and alumni within the SCHS receive access to several career related events. Each year a SCHS job fair is held in which students and alumni can meet potential employers in the public health field. The UNLV Career Services job fair is held each semester and is open to all UNLV students and alumni. The UNLV Career Services runs the Hire a Rebel program, which helps UNLV students and alumni find employment. This same office offers students with assistance in the following areas: résumé formatting, developing a cover letter, and utilizing LinkedIn. In addition, the SCHS website has links to employment resources. Furthermore, current public health employment opportunities are shared via email with students and alumni.

H2.2 Selection and Orientation of Career Advisors

Required Documentation: Explain how individuals providing career advising are selected and oriented to their roles and responsibilities. (self-study document)

Undergraduate advisors at the Division of Health Sciences Advising Center have at least a Bachelor's degree and three years of comparable professional experience. Most of the advisors have a degree in a health related field. Advisor requirements are listed in criterion H1.2. Advisors use a handbook of resources to provide students with the most current information about public health programs and potential careers.

At Career Services, advisors are qualified individuals that have undergone a training process that involves shadowing a career advisor and then having the career advisor shadowing the new advisor. Training is done by the Director of Career Services and the Career handbook acts as a resource for advisors.

Faculty advisors are assigned graduate students by graduate coordinators based on academic interests if possible. These advisors may change during the course of a student's program based on interests. Advising packets have been created for each program, which documents student contact, any issues or concerns, and career advising. Faculty receive training for advising in faculty meetings as well as attend specific training regarding student advising which includes use of the advising packet, advising policies, and procedures.

H2.3 Examples of Career Advising Services

Required Documentation: Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating. (self-study document)

The SCHS Job Fair is a well-attended event that draws undergraduate, graduate students, and alumni. The spring 2016 SCHS job fair included a panel discussion of industry leaders and career advising. There were 63 attendees and numerous agencies including Dignity Health, University Medical Center (UMC), Immunize Nevada, Nevada Division of Public Behavioral Health, Nellis Air Force Base, Southern Nevada Health District, and Healthcare Partners.

The spring 2017 job fair was preceded by two small group sessions with a top human resources career coach, Ms. Christine Wunderlin. The career coach reviewed résumés, discussed employer expectations, and prepared students for the one-on-one sessions with representative agencies at the upcoming job fair. The job fair was attended by 55 students, and 13 agencies were represented. The UNLV Career Services department also holds job fairs each semester. The Fall 2017 job fair included potential public health employers such as the Clark County School District (CCSD), Clark County Water District, and the City of Las Vegas.

In Fall of 2017, the first of a series of seminars entitled, "Your Future in Public Health" was offered. These seminars will be offered at least once per semester providing a framework for thoughtful public health discourse. The first seminar included a panel of experts in the public health field and a question and answer period for undergraduates to ask graduate students questions. Four faculty, one professional staff member, one alumnus, and 32 students attended.

Another excellent example of career advising is the seminar hosted by EOH Department Chair, Dr. Francisco Sy, entitled, "Navigating NIH Research Training Programs to Advance Your Career and NIH Loan Repayment Programs." In Spring 2017, Dr. Sy, drawing from his experience at the NIH, explained to over 25 students, faculty, and alumni where to find and apply for the appropriate funding opportunities to support students' career goals, helped students prepare a successful research training application, and discussed opportunities for loan repayment through NIH.

H2.4 Student Satisfaction of Career Advising

Required Documentation: Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable. Schools should present data only on public health degree offerings. (self-study document)

All graduating seniors are asked to complete an exit survey through the office of the Vice Provost for Undergraduate Education (GSES). Response rates for this survey are approximately 40%. Within this survey, satisfaction of undergraduate career services is measured through self-response items. Students rate items such as "Quality of service from career services" on a four-point scale, where one is "strongly disagree" and four is "strongly agree". The SCHS specific results indicate that students agree or strongly agree with the statements regarding both faculty advisors and career services in comparison to university level results.

Table H2.4a GSES Career Advising Survey Results

	All Graduating Seniors			SCHS Graduating Seniors		
Academic Year	**2014 - 15**	**2015 - 16**	**2016 - 17**	**2014 - 15**	**2015 - 16**	**2016 - 17**
Quality of service from Career Services	2.98	2.97	3.00	2.78	2.32	2.98

Exit survey data from MPH and PhD students report that students rate the effectiveness of their advisor as a career mentor on a five-point scale, where one is "very poor" and five is "very well". While these response rates are low, around 50%, students rated their faculty advisors positively in this area.

Table H2.4b SCHS Exit Survey Career Advising Results

	All Graduating MPH/PhD			
Academic Year	**2014 - 15**	**2015 - 16**	**2016 - 17**	**2017-18**
Effectiveness of their advisor as a career mentor	4.64	4.86	4.78	5.0

H2.5 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Graduate student exit surveys report that faculty advisors are effective career mentors. These students are more likely to attend job fairs, panel discussions, and seminars as well.

Weaknesses

- Undergraduate exit surveys report that UNLV Career Services provides only adequate career guidance.
- Students need to be encouraged to join one our Public Health Student Association, visit our Employment Resources in our website, and check their Rebel Mail for current employment opportunities shared via email.
- Events need to be promoted more to increase awareness of services and opportunities. Opportunities are often posted on the Public Health Student Association social media site but this only reaches members. The Alumni Association could play a more active role in attracting alumni to events.

H3. Student Complaint Procedures

The school or program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to school or program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

H3.1 Complaint Procedures

Required Documentation: Describe the procedures by which students may communicate any formal complaints and/or grievances to school or program officials, and about how these procedures are publicized. (self- study document)

Students should follow the following procedures to resolve any issue related to faculty and/or the program they study.

1. Talk to the faculty or staff member first. Students should attempt to resolve the situation with a face-to-face meeting with the faculty member. Bring all documents to the meeting that pertain to the disagreement. Once completed, compose a written summary of what was said – especially important if the situation was not resolved to the level of satisfaction.
2. Talk to the department chair. If the face-to-face meeting with the faculty member is unsatisfactory, students are encouraged to meet face to face with the faculty member's department chair. Bring the summary of the face-to-face meeting and any other pertinent documents (e.g., official summary forms provided by the Office of Student Conduct) to this meeting.
3. Talk to the Dean of the school. If the meeting with the department chair is unsatisfactory, students may ask to meet face to face with the school's Dean/Associate Deans. Bring summary documents about previous meetings and any other information applicable to the issue.
4. If the issue is resolved internally, the student will be contacted via university email sent by the school / department. The email will verify the outcome of the meeting and summarize the procedure. The school / department will retain a copy of the email. If the meeting with the Dean/Associate Deans is unsatisfactory, students should follow the protocol detailed on the Office of Student Conduct for the next step.

These procedures are publicized in the Student Handbooks (see below for links), and contain information on Ethics and Behavior, Complaints, Grievances, and/or the UNLV Office of Student Conduct.

BSPH:
https://www.unlv.edu/sites/default/files/degrees/downloads/Handbook-BS-PublicHealth.pdf

MPH:
https://www.unlv.edu/sites/default/files/assets/degrees/community-health/Handbook-MPH.pdf

MHA:
https://www.unlv.edu/sites/default/files/assets/degrees/community-health/Handbook-MHA.pdf

EMHA:
https://www.unlv.edu/sites/default/files/assets/degrees/community-health/Handbook-EMHA.pdf

PhD:
https://www.unlv.edu/sites/default/files/assets/degrees/community-health/Handbook-PhD-PublicHealth.pdf

H3.2 Progression of Complaint of Grievance

Required Documentation: Briefly summarize the steps for how a complaint or grievance filed through official university processes progresses. Include information on all levels of review/appeal. (self-study document)

If the situation is not resolved satisfactorily within SCHS, the following considerations are recommended to students to contact the UNLV Office of Student Conduct.

1. Write / keep a chronology of the events in a dedicated file. If the issue is course-related, address the standards that were set for the work in the student's narrative – avoid comparisons with other students. If the issue is directly about a person's alleged behavior, students are suggested to be as precise as possible in their descriptions.
2. If any meetings/discussions with the Office of Student Conduct or another office take place, students are suggested to write a brief summary of the interaction as soon after the meeting as possible and save in her/his dedicated file.
3. The student will have the opportunity to submit a university approved form that details the situation or disagreement between the student and another party. The student will then submit the form to the Office of Student Conduct. The final review and resolution of the issue will be conducted by a university committee and the student will be notified of the outcome within 30 days of submission.

H3.3 *Formal Complaints / Grievances*

Required Documentation: List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution. (self-study document)

There have been sporadic student complaints and no formal grievance has been filed in SCHS during the last year. There were two student complaints each year in 2015, 2016, and 2017. The issues being complained included faculty course instruction, academic advising, and research publications. All of the complaints were satisfactorily resolved at the departmental level.

There were appeals from two students on their student misconduct charges initiated by faculty. The first was regarding plagiarism of a course assignment, initiated by the instructor. The Office of Student Conduct held a hearing about the case and eventually upheld the student's appeal. The other case was about the corresponding authorship between the student as the lead author and the faculty as a co-author in a research manuscript being submitted for publication to a peer-reviewed journal. The department chair organized a committee to review the case, and the committee supported the student's appeal and dismissed the charge.

H3.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- This multi-level conflict solving procedure intends to resolve the issue at the lowest possible level, which would be easier and faster. The procedure also provides mechanisms for issues that cannot be resolved at the lower level to be moved the next higher level.

Weaknesses

- Although the procedure is mentioned at the new student orientation, and related documents (i.e., student handbooks) are provided to students, some students still may not follow the grievance procedure. Some students skipped the first levels and went directly to the university representative (e.g., the Provost's office) to report the matter. Better communication and making students aware of the grievance procedures and steps should improve this issue.

H4. Student Recruitment and Admissions

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

H4.1 Recruitment Activities

Required Documentation: Describe the school or program's recruitment activities. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each. Schools should discuss only public health degree offerings. (self-study document)

Recruitment within the School of Community Health Sciences is a priority. In 2016, the Office of Community Partnership (OCP) was created in the Dean's office. Among the multiple responsibilities of OCP is the recruitment of both undergraduate and graduate students. Recruitment efforts are in alignment with the UNLV Office of Enrollment and Student Services (ESS). As described by ESS's working document on recruitment strategies, the SCHS is focused on engaging recruitment activities that support UNLV efforts towards Top Tier designation and fully embracing UNLV's designation as a Minority Serving Institution under which UNLV is designated a Title III – Asian American Native American and Pacific Islander Serving Institution and Title V- Hispanic Serving Institution. Such dual objectives are not fully congruent without the use of targeted strategies for goals' reconciliation.

The ESS strategic plan identifies that "Achieving Top Tier status warrants a shift in the type of student UNLV successfully recruits. Recruiting high achieving students is goal that requires involvement by the entire campus..." Identifying and recruiting high achieving students is a priority for SCHS but we are also very mindful of engaging all students including diverse populations, first generation, and low income/SES challenged. SCHS in alignment with UNLV campus efforts is consistently working focused on Recruitment, Retention/Progression, and Completion (RRPC).

As ESS has stated "UNLV is a Minority Serving Institution (MSI) and a Hispanic Serving Institution (HSI) with a very diverse student body. The institutional need and desire to retain a diverse student body that reflects and supports southern Nevada is very high. Despite the national declines in high school graduates and the highly competitive recruitment market for high achieving minority students, UNLV has benefited from increasing numbers of diverse high school students residing in the southern Nevada. College readiness among Las Vegas high school graduates is in need of improvement with over 55% of Nevada high school graduates placing into English and mathematics below college level. In addition to establishing the goal to increase the number of high achieving students enrolling at UNLV, it is imperative that recruitment efforts also keep in mind the mission of the institution, which is to provide opportunities to local students to earn a college degree." Keeping this in mind SCHS recruitment supports efforts to diagnose and address academic deficiencies in our students; therefore, it is critical that recruitment strategies support RRPC efforts. It is suggested that, as we attempt recruit and enroll more high achieving students, that we also continue to serve and support academically challenged students. (Recruitment initiatives for SCHS are in alignment with UNLV Enrollment and Student Services, thus language and recommendations from ESS are imbedded and utilized by SCHS efforts. Key information used from the ESS Recruitment Strategy Fall 2017 plan.)

SCHS participates in undergraduate recruitment and outreach efforts that include:

- High School visits
- College Career Fairs
- Community programs and events

SCHS supports and participates with on campus events that include:

- Career Fairs
- Graduate College Fairs
- Campus Visits and Tours

Coordination and collaboration with the Center for Academic Enrichment and Outreach TRIO and GEAR Up program school sites.

SCHS Recruitment efforts focus on traditionally underserved diverse populations that include African American, American Indian, Hispanic, Asian - Pacific Islander and other mixed race and equity populations-LGBTQ, Veterans, non-traditional students.

Recruitment efforts include and utilize community engagement methods as well. Community partnerships create opportunities for student identification and information sharing that included programming with:

- Health Care Advisory Board
- Henderson Chamber of Commerce "I Can Be" career awareness programs
- City of Henderson Fire Department Community Expo
- Latin Chamber of Commerce Scholarship Program
- Latino Youth Leadership Conference
- Nevada Public Health Association State Conference
- Nevada Health Conference
- Nevada Minority Health and Equity Coalition Leadership Institutes
- National Association for Public Health Conference
- SCHS Advisory Board

Other recruitment includes maintaining a high profile on social media and through the school's website. The school has recently hired a full time communications director to increase these efforts. The website clearly indicates the school's mission statement, which includes reducing health disparities. A booklet of all academic and research faculty with their photos, research interests, current projects, and recent publications has been compiled. This booklet also includes information on all of the SCHS research centers. Our two research units that work on minority health issues, the American Indian Research and Education Center and the Center for Health Disparities Research are clearly identified. The directors of these units, Dr. Carolee Dodge-Francis and Dr. Melva Thompson-Robinson work hard to recruit underrepresented minority students to the MPH program. We believe that our diverse faculty will attract diverse applicants to the SCHS. The number of SCHS faculty addressing health disparities in their research may also attract ethnic and racial minority students. Faculty also participate in recruiting through community based organizations and in national meetings

H4.2 Admissions Policies and Procedures

Required Documentation: Provide a 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. Schools should discuss only public health degree offerings. (self-study document)

Undergraduate Admissions Policy

Undergraduate admissions are regulated by the university including their policies and requirements. Students are admitted to our programs based on those requirements. Admission requirements for an undergraduate degree at UNLV for incoming high school students requires a minimum weighted grade point average of 3.00 on a 4.00 scale in the following required high school courses: 4 units of English (composition/rhetoric; American, English and world literature), 3 units of Mathematics (algebra or higher-level), 3 units of Natural Science (at least 2 years in laboratory sciences), and 3 units of Social Science Studies (world history, geography, U.S history, economics, government or law). For students who have not met these requirements, they may be admitted if they have a composite score of 1120 on the SAT (post March 2016) or 1040 (pre-March 2016), a composite score of 22 on the ACT, or a Nevada Advanced High School Diploma.

Transfer students may be admitted from another regionally-accredited college or university if 24 transferable semester credits have been completed, the student has a minimum grade point average of 2.50, and is in good standing with the last institution attended. Students transferring to UNLV from an in-state university or college must meet the same transfer student requirements with one exception:

students with an Associate of Arts, Associate of Science, or Associate of Business degree require only a 2.0 minimum grade point average for admission.

Students applying to UNLV with a General Equivalency Diploma (GED) are admissible if they have received a 22 on the ACT or 1120 on the SAT (post March 2016). GED recipients who have not met these criteria may be reviewed on a case-by-case basis. Home-schooled students' applications will be reviewed in the same manner first-time freshman high school students are.

UNLV has been authorized to admit a limited number of students each year who do not meet the minimum requirements for admission. Criteria for alternative admission includes: test scores and a grade point average indicative of potential for success, special talents / abilities (such as visual performing arts or athletic abilities), other evidence indicative of potential for success, improvement in high school record, overcoming adversity or hardship, or other special circumstances. The Faculty Senate Admissions Committee will review all alternative admission applications. Other forms such as transcripts, test scores, personal explanation of circumstances, and two-letters of recommendation, will also need to be submitted. Students admitted by the Faculty Senate Admissions Committee are required to meet with an Academic Success Center success coach at least twice in their first semester and must maintain a 2.0 grade point average for six or more bachelor's level courses.

The Bachelor of Science in Public Health program provides students with a comprehensive program of study in preparation for careers and advanced degrees in public health. Public health majors take a set of core classes that span the broad scope of health promotion, disease prevention, and eliminating health disparities. Students will also complete a set of classes in one of four areas of emphasis: environmental health, social/behavioral health, epidemiology, or public health generalist. Students are allowed to become majors when the criteria and prerequisite courses determined by the undergraduate committee and curriculum committee are met satisfactorily for each program. The GPA requirement for full admission to the Public Health Major is 2.75.

Graduate Admissions Policy

Graduate admissions are initially handled through the Graduate College and once the admissions requirements for the Graduate College are satisfied, the admissions packet is forwarded to the department. Minimum standards for admissions for all advanced degrees includes a bachelor's degree from a regionally accredited institution or approved equivalent. The GPA of for that bachelor's degree should be 2.75 or above or 3.0 for the past two years (60 semester hours). All transcripts must be presented at the time of application and they must include all coursework and degrees with dates and grades. International transcripts may require a foreign credential evaluation.

The Master of Public Health degree is designed to prepare students to be Public Health professionals in the private and public sectors with the overall goal of promoting and protecting the health of individuals in our society. Admission requirements for this program include all Graduate College requirements as well as a résumé and a personal essay describing what the applicant perceives to be pressing public health issues, why a career in the field appeals to them, and how it will use their strengths and commitment. Also required are three letters of recommendation and GRE scores from within five years (LSAT or MCAT scores can be substituted).

The Master in Health Care Administration (MHA) prepares students to assume leadership roles in health care organizations and to meet the challenges of the rapidly changing field of health care. Applications for admission require a résumé, personal statement, three letters of recommendation, a GRE or GMAT score from the past five years, and copies of all college transcripts. No experience is required, but can help support an application that is lacking in other elements. A personal interview may be required.

The Executive Master of Health Care Administration (EMHA) is intended to facilitate the advancement of current professionals in health care administration. Applications for admission require a résumé, personal statement, copies of all college transcripts, and three letters of recommendation. GRE/GMAT test scores are not required of executive students, as experience is accepted in lieu of these scores. Applicants must have a bachelor's degree in any field, 3 years of management or supervisory experience in any field, or

have 5 years of clinical experience, or a terminal degree (MD, DO, PharmD, JD, etc.) with practice experience. A personal interview is required.

The Doctor of Philosophy in Public Health is designed to prepare students for careers in which advanced analytical and conceptual capabilities are required, such as university teaching, research, consulting, policy development, or other high-level positions. Admission requirements for this program include all Graduate College requirements including a Master of Public Health (MPH) or other master's degree in an appropriate field. A minimum GPA for graduate coursework is 3.0. Three letters of recommendation are required as well as written self-presentation, which includes a written statement of personal career, educational and scholarship goals including identification of research interests. The most competitive students will clearly identify their plan for dissertation research and its contribution to the field of public health. Also required are three letters of recommendation and GRE scores from within five years. LSAT or MCAT can be substituted. Interviews may be conducted and a writing sample may be requested. Applicants must identify an area of interest at the time of application and have taken six core public health courses if they have not taken them previously.

Graduate applications are received by the SCHS and the Graduate Coordinator. After review by the Graduate Coordinator, the applications are disseminated to the Graduate Studies Committee member liaison to each track and/or shared with Graduate Admissions Committees, as applicable. Recommendations are made on admissions and returned to the Graduate Coordinator.

H4.3 Enrolling Qualified Student Body

Required Documentation: Select at least one of the following measures that is meaningful to the school or program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list that follows, the school or program may add measures that are significant to its own mission and context. Schools should present data only on public health degree offerings. (self-study document)

- *Quantitative scores (e.g., GPA, SAT/ACT/GRE, TOEFL) for newly matriculating students*
- *Percentage of designated group (e.g., undergraduate students, mid-career professionals, multi-lingual individuals) accepting offers of admission*
- ***Percentage of priority under-represented students (as defined in Criterion G1) accepting offers of admission***
- *Percentage of newly matriculating students with previous health- or public health-related experience*
- *Number of entering students with distinctions and/or honors from previous degree (e.g., National Merit Scholar)*
- *Percentage of multilingual students*

The University of Nevada, Las Vegas (UNLV), along with other research-intensive public universities in the United States, recognizes that a student body that is diverse with respect to race, ethnicity, socioeconomic class background, and geography, among other dimensions of cultural difference, benefits and enriches the educational experiences of all students, faculty, and staff. Accordingly, UNLV strives to recruit students who will further enrich this diversity and to support their academic and personal success while they are a part of our campus community. The presence and achievement of racial and ethnic minority students at UNLV not only benefits these students individually, it enhances the educational and interpersonal experiences of everyone in our campus community. UNLV actively encourages applicants whose racial and ethnic backgrounds are underrepresented in higher education in Nevada, who are first-generation college students, and those with demonstrated financial need. Refer to the "University Community and Libraries" section of this catalog or www.unlv.edu/about/statements to review UNLV's Reaffirmation of Commitment to Equal Educational and Employment Opportunity (EEO).

The Office of Community Partnerships is new addition to the School of Community Health Sciences and has been assigned the official role of recruitment for the school. In its first year, it has coordinated efforts with the undergraduate and graduate recruitment teams of UNLV. Data are currently being reviewed to help establish best methods and practices for recruitment of undergrad and graduate students to the School of Community Health Sciences. In order to comply with and support UNLV Top Tier objectives and Minority Serving Institutional programs under Title III and Title V, OCP is adopting recruitment strategies as identified by Enrollment and Student Services and the Graduate College recruitment staff. As the office develops and fine tunes our approach to recruitment accounting for the specific needs and requirements of the field of Public Health and the students we will serve strategies will be adapted to create student focused opportunities to attend UNLV. Again, our priority will be to create strategies that include Recruitment, Retention/Progression and Completion.

The data presented below show progressive growth in student enrollment into the School of Community Health Sciences over the past three years. With this new concentrated effort lead by the office of Community Partnerships and if critical resources needed to support these can be allocated to recruitment efforts it is anticipated that growth of diverse student enrollment should stay on the same path. Also shown below is the diversity of graduates of the SCHS.

Table H4.3a Outcome Measures for Recruitment and Admissions: Percentage of priority under-represented students (as defined in Criterion G1) accepting offers of admission

	Target	**Year 1 2014-2015**	**Year 2 2015-2016**	**Year 3 2016-2017**
American Indian/Alaska Native	2%	2.7%	2.7%	0.5%
Asian	18%	19.6%	16.9%	21%
Black/African American	15%	14.3%	19.9%	9.2%
Hispanic/Latino	24%	22.3%	18.2%	21%
Native Hawaiian/Other Pacific Islander	6%	6.3%	3.4%	6.2%
Caucasian	35%	34.8	37.8%	39.5%
Unknown	-	0.0%	0.7%	2.6%

Table H4.3b Outcome Measures for Recruitment and Admissions: Percentage of priority under-represented students (as defined in Criterion G1) graduating

	Target	**Year 1 2014-2015**	**Year 2 2015-2016**	**Year 3 2016-2017**
American Indian/Alaska Native	2%	1%	1%	1%
Asian	18%	15%	18%	17%
Black/African American	15%	13%	13%	14%
Hispanic/Latino	24%	21%	23%	26%
Native Hawaiian/Other Pacific Islander	6%	2%	2%	1%
Caucasian	35%	35%	32%	29%
Multiracial	-	11%	9%	9%
Unknown	-	1%	3%	2%

H4.4 Strengths and Weaknesses

Required Documentation: If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)

Strengths

- Recruitment activities have been an intricate component of the School of Community Health Sciences being the responsibility of all faculty, staff, and even students. With the establishment of the Office of Community Partnerships recruitment has now been centralized providing a great opportunity to professionalize these efforts bringing best practices for student recruitment and engagement. These efforts include intentional collaboration and alignment with UNLV campus wide efforts. Alignment with enrollment and student services and graduate college recruitment strategies will provide direction and critical tools for growing continued success of recruitment initiatives. Alignment with Top Tier and MSI initiatives b of ring new opportunities for establishing student success program that embraces diversity and equity in SCHS programs and services. The diversity of faculty and staff at SCHS contributes to the ability to bring diversity of students into the program.
- Another strength is the SCHS' hiring of professional staff with a background in education who have infused our recruitment and admissions processes with evidence-based practices and who continually search for promising practices that can be tweaked and tested in meeting our recruitment, retention, and graduation efforts.
- Another strength is the strong involvement of our students in our overall program, and in the research of our faculty members. This strength increases our appeal to higher-performing students.
- A final strength is the diversity of faculty, which the Department of Health Care Administration & Policy was recently recognized for during its Commission on Accreditation of Health Care Management Education (CAHME) Site Accreditation Visit.

Weaknesses

- Recruitment is now the responsibility of the Office of Community Partnerships. New goals, objectives, and benchmarks are currently being established in order to ensure our best efforts are moving forward. Funding and other resources are needed to support these new initiatives by OCP fully.

H5. Publication of Educational Offerings (SPH and PHP)

Catalogs and bulletins used by the school or program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

H5.1 Information and Descriptions of All Degree Programs

Required Documentation: Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. (self-study document)

Academic Calendar
https://www.unlv.edu/registrar/calendars
https://catalog.unlv.edu/content.php?catoid=19&navoid=3499

Admissions Policies
Undergraduate
https://www.unlv.edu/admissions
https://catalog.unlv.edu/content.php?catoid=19&navoid=3500
Graduate
https://www.unlv.edu/graduatecollege/futurestudents
https://catalog.unlv.edu/content.php?catoid=20&navoid=3586

Grading Policies
Undergraduate
https://catalog.unlv.edu/content.php?catoid=19&navoid=3501&hl=%22grade%22&returnto=search
Graduate
https://catalog.unlv.edu/content.php?catoid=20&navoid=3586#Grading_System

Academic Integrity Standards
Undergraduate
https://www.unlv.edu/studentconduct
https://catalog.unlv.edu/content.php?catoid=19&navoid=3507&hl=%22integrity%22&returnto=search#Stud_Acad_Misc
Graduate
https://www.unlv.edu/studentconduct
https://catalog.unlv.edu/content.php?catoid=20&navoid=3589&hl=%22integrity%22&returnto=search#Academic_Integrity

Degree Completion Requirements
BS Health Care Administration and Policy
https://catalog.unlv.edu/preview_program.php?catoid=19&poid=4751&returnto=3511
https://www.unlv.edu/degree/bs-health-care-admin-policy
BS Public Health
https://catalog.unlv.edu/preview_program.php?catoid=19&poid=4831&returnto=3511
https://www.unlv.edu/degree/bs-public-health
MPH
https://catalog.unlv.edu/preview_program.php?catoid=20&poid=5002
https://www.unlv.edu/degree/mph
MHA
https://catalog.unlv.edu/preview_entity.php?catoid=20&ent_oid=1516&hl=%22MHA%22&returnto=search
https://www.unlv.edu/degree/master-hca

EMHA
https://catalog.unlv.edu/preview_program.php?catoid=20&poid=5055&hl=%22EMHA%22&returnto=search
https://www.unlv.edu/degree/emha
PhD
https://catalog.unlv.edu/preview_program.php?catoid=20&poid=5003
https://www.unlv.edu/degree/phd-publichealth