Criterion 1
The School of Public Health
1.2 Evaluation and Planning

CEPH Criterion

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

CEPH Required Documentation

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

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

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

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

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

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

g. Assessment of the extent to which this criterion is met.
1.2.a. Evaluation Procedures and Planning Processes

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

To maximize strategic planning and resources, the school bases its evaluation procedures and planning processes on principles of continuous quality improvement and evidence-based management, assessing quality on an ongoing basis, and using evidence to identify and implement solutions.

The school employs multiple, integrated methods to conduct planning and evaluation; to assess achievement of its mission, goals, objectives, and outcomes; and to improve the quality of programs and the school overall. A holistic, participatory approach guides the selection of strategies to obtain and integrate data, solicit input, engage in dialogue with a range of key constituencies, make decisions, and take action. An underlying premise is that a comprehensive approach that makes connections across data sets makes it possible to identify patterns that might otherwise be missed. For example, examining student recruitment data, climate surveys, and students' course evaluations may provide clues to understand why some departments are more successful than others in recruiting and retaining racial/ethnic minority faculty, staff, and students. The school's large size and strong tradition of departmental autonomy make it especially important to emphasize bottom-up accountability in contributing to these integrated efforts.

The school has woven the concept of quality assessment into school governance, particularly through the Dean's Council. The Chairs' Committee receives and provides feedback on special assessment reports and monitors data on a variety of indicators such as student enrollment, faculty retention, fundraising, budget, and other areas. The senior associate dean for coordination, planning, and administration oversees implementation and operations of the quality assessment process, coordinating data collection, management, analysis, and reporting to the dean and the Dean's Council on key measures that track progress in the school's offices, departments, and committees.

Figure 1.2 depicts the school's quality assessment model. The framework is consistent with the quality improvement literature as well as the model developed by UNC Chapel Hill for its 2006 reaffirmation by the Southern Association of Colleges and Schools. As the model indicates, the school relies on a number of self-assessment and peer review approaches. Successfully implementing quality assessment and improvement requires good data. The school integrates data from varied sources, including environmental scans; data and metrics relating to research, faculty, students, and administration; special administrative and programmatic reviews; assessment of progress on strategic initiatives; feedback and advice from school boards and committees; Graduate School and discipline-specific reviews; and dean and chair reviews.
The school is developing a set of metrics as a basis for tracking key indicators. These data systems will evolve and improve, allowing the school to generate even more timely data of higher quality and to use those data for quality improvement. The university maintains a finance and human resources data warehouse that assists the school in analyzing its metrics. However, use of university data requires substantial in-house management and augmentation to obtain information sufficient for school-level analyses and reporting. The school is investing resources to create an internal data warehouse to collect and report on time-stamped metric data that will span all areas of the school's operations (e.g., research, students, alumni, services, human resources, finances, and facilities). The data warehouse will be instrumental in enhancing the school's ability to analyze trends and progress in key areas over time. ConnectCarolina, a university-wide system of integrated administrative systems and processes also is under development. The first phase includes student services (admissions, student records, financial aid and student finances), and was rolled out in summer 2009 to support admissions; the next phase encompasses human resources/payroll and finance.

**Strategic Constituencies in Evaluation and Planning: Faculty and Staff**

The school uses a variety of mechanisms to gain insight into issues important to faculty members. Shortly after becoming dean, Dean Rimer conducted focus groups with nearly 70 assistant and associate professors to identify their concerns and gather opinions on the school’s strengths and on areas needing improvement. Focus group discussions highlighted the need for a schoolwide faculty mentoring program, and for greater attention to ensuring
faculty members’ understanding of academic promotion and tenure guidelines. In spring 2008, the dean and the associate dean for academic affairs held two forums to give faculty and staff an opportunity to voice concerns and provide feedback to the school.

In accordance with university policy, the school holds faculty and staff meetings each fall and spring semester; these are accessible in-person and via the web. We solicit topics from faculty and staff as well as feedback after the meetings. The school also holds ad hoc all-hands meetings to discuss important issues. Recent examples include discussions leading up to the school’s announcement of the gift from Dr. Dennis and Joan Gillings, and discussion of the new University Cancer Research Funds.

In March 2006, the dean instituted monthly Lunches with the Dean for faculty. At these events, four to five faculty members of different departments and ranks are invited to present their research. The small lunches have been an excellent way for school leaders to learn about faculty research interests and projects, while simultaneously obtaining faculty input on a variety of topics.

In late spring 2008, several faculty members initiated discussions to assess faculty interest in developing a formal faculty governance structure. The dean has indicated consistently her willingness to include one or two faculty representatives on the Dean’s Council. The April 2009 Dean’s Council meeting included a discussion of governance with two faculty representatives.

Aside from the SPH Faculty and Staff Meeting each semester, there are a number of formal and informal avenues for input, feedback, and consultation with the staff of the school. The senior associate dean meets with administrative staff members monthly to discuss operational issues and exchange information. The associate dean for business and finance holds a monthly meeting with department and administrative unit business managers to exchange information and develop methods of supporting the school’s business needs.

**Strategic Constituencies in Evaluation and Planning: Students**

Students play a fundamental role in school planning and evaluation activities. They are represented on the Dean’s Council, Web Council, Global Health Advisory Committee, and most other key leadership groups for the school (see Criterion 1.5.e.). Bi-monthly Dean’s Council meetings include representatives from both SPH Student Government and the Minority Student Caucus, who report to the Council about student concerns and provide feedback about actions the school has taken to respond to student-identified issues. In addition, the dean, senior associate dean, and assistant dean for students meet each term with representatives of these student organizations and the Global Health Student Committee to obtain feedback and provide input into their activities. These are open discussions in which the student groups are comfortable raising concerns and issues.
These periodic discussions have helped the school identify easily solvable problems (e.g., quality of computers in the Computer Center), as well as more difficult problems (e.g., lack of adequate student aid, concerns about the school climate for minority students, perceived need of students for more support for global summer internships). The assistant dean for students meets weekly with leaders of student organizations, and each semester attends executive board meetings of the SPH Student Government and the Minority Student Caucus.

At both the school and department levels, the school uses several additional tools to elicit input and involvement from students. The Office of Student Affairs (OSA) conducts annual schoolwide surveys to gather data on a range of student services, including academic advising and OSA effectiveness. Many departments also gather exit data from their students at graduation to refine their programs. Each department and school unit has strategies to involve students in planning, evaluation, and decision-making processes. For example, Health Behavior and Health Education (HBHE) extensively involved students on committees and in student surveys during the recent departmental review and revision of its master’s program. (See Criterion 4.6.b. for additional discussion of student feedback mechanisms.)

**Strategic Constituencies in Evaluation and Planning: Alumni**

Alumni are represented on internal and external advisory committees, and the school encourages their participation in school standing committees. Most search committees and administrative reviews of senior UNC Chapel Hill leaders, including deans and center directors, also include alumni (and students). At least annually, and, usually twice each year, the dean, representatives from External Affairs, and the senior associate dean meet with the school’s Alumni Association, which serves the interests and needs of alumni, to present updates on the school and to get feedback on a variety of topics. The association currently is conducting several activities to improve its services, including a review and critique of its communications with alumni.

The school’s External Affairs staff and Dean Rimer visit with many alumni each year as part of the school’s outreach efforts. The visits—and other methods ranging from formal surveys to email—provide vital opportunities for the school to solicit honest feedback and valuable input from alumni on the school’s strategic planning and self-assessment processes. In fall 2007, the school surveyed 2280 alumni (32% response rate) to examine perceptions and needs at both the school and department levels. For comparison purposes, the school used a survey instrument identical to that used in 2000. (The survey instrument, survey results, and specific follow-up by departments are in the Resource File.)

Each department also has its own alumni group. Several departments (including EPID, HBHE, HPM, and MCH) have conducted ad hoc surveys with alumni to obtain recommendations on program improvement.
Strategic Constituencies in Evaluation and Planning: Practice Communities

As part of its strong commitment to service and practice, the school seeks input from public health practitioners on specific projects and initiatives as well as the school’s strategic directions. Much of this input is obtained through facilitation by the North Carolina Institute for Public Health, the school’s service and outreach arm; (see Criterion 3.2.b. for a discussion of the institute). For example, the institute’s Office of Continuing Education (OCE) coordinates the work of continuing education “state of practice” committees. The committees, comprising practitioners in select public health fields, conduct workforce training needs assessments and plan practitioner training programs to be carried out by OCE. In addition, the school leadership has used information from the practice community to assess local health department training and education needs.

Departments also involve their practice communities in planning and evaluation activities. For example, HBHE solicited intensive feedback from mentors and employers as part of their master’s program review and revision.

Formal Structures and Processes for Evaluation and Planning

Graduate School Reviews

The Graduate School conducts regular reviews of all degree-granting units. These reviews, now on a nine-to-ten-year cycle (formerly a five-year cycle), often result in substantive recommendations for program improvement. The process begins within the academic unit, which develops and reviews a comprehensive self-study.

The stringent review process of the academics units conducted within the School of Public Health constitutes one of the most thorough examinations of academic programs within the university. The SPH dean and the associate dean for academic affairs review the self-study initially. Next, a review team appointed by the Graduate School and comprising both internal and external faculty members receives the self-study and conducts a one-to-three-day site visit. The visit concludes with a debriefing meeting that involves key department leaders, the SPH dean and associate dean for academic affairs, and selected university leaders including the dean of the Graduate School. The review team then prepares and submits a draft report for the dean of the Graduate School and others. A group consisting of the dean of the School of Public Health, the department chair or program director, and the school’s associate dean for academic affairs reviews the draft report and meets to discuss results and recommendations. The department or program head provides a formal response to the Graduate School, followed by another debriefing meeting with the Graduate School dean and other administrators. This meeting provides an important opportunity to review the department’s response, examine performance, consider changes of course, and plan for the future. Follow-up discussions with the dean continue even after the review’s formal conclusion.
Since the last CEPH accreditation, the Graduate School has reviewed six academic units: MCH (2005), NUTR (2006), EPID (2007), PHL (2007), HBHE (2007), and BIOS (2008). (Reports are available in the Resource File.) Reviews are scheduled for ESE in 2009 and HPM in 2011.

Regular Reviews of Deans, Chairs, and Institute and Center Heads

Deans, department chairs, and university center directors are reviewed every five years in an extensive and intensive process that produces written reports used for evaluation and planning. The reviews are a major source of accountability for university leaders and provide timely opportunities for feedback from a broad range of constituencies.

The provost conducts the review of the dean who, in turn, is responsible for reviewing department chairs. The vice-chancellor for research and development oversees center and institute directors’ reviews. The lead administrator for the review (i.e., the provost, dean, or vice-chancellor) selects and delegates the practical work of the review to a committee, which is accountable to the administrator. The review committee then invites participation by key constituencies and offers opportunities for public comment, which allow constituents to raise questions about leadership and broader issues related to priorities, funding, and governance. In most cases, alumni and students are members of these committees. These regular assessments result in concrete suggestions for improvement, and also provide a mechanism for removal of the individual being reviewed, if indicated.

Specialty Review Processes

Several departments are subject to accreditation and review processes specific to their discipline. For example, HPM’s MHA program is accredited by the Commission on Accreditation of Healthcare Management Education (CAHME); its current accreditation period runs until the completion of the program’s next review—the site visit will take place in December 2009.

Public Health Nursing (PHN) (a component of the Public Health Leadership Program—PHLP) is accredited by the National League of Nursing to provide an MPH and MS in Occupational Health Nursing, as well as a public health nursing focus area in the PHLP MPH program. The most recent National League of Nursing site visit, in January 2008, awarded the PHN program full accreditation.

The American Dietetic Association (ADA) provides accreditation for Nutrition’s MPH/RD program, which was accredited most recently in 2004, for ten years. In the past, Nutrition’s BSPH program offered two core concentrations, one of which was accredited by the Commission on Accreditation for Dietetics Education (CADE), ADA’s accrediting agency for education programs preparing students for careers as registered dieticians or dietetic technicians. However, a change in CADE standards has led to a department decision to
close that concentration (effective August 2010), and students are no longer being accepted into the program.

**External Leadership Boards and Committees**

Recommendations from several formal, external boards are central to the school’s evaluation and planning processes. External groups include the External Advisory Committee, the Advisory Council, the Board of Directors of the Public Health Foundation, and the Acceleration Advisory Committee. (The groups’ mandates and membership are included in Criterion 1.5.a.)

**Internal Leadership Groups**

Internal leadership committees play central roles in evaluation, planning, and quality improvement, serving as the main decision-making bodies for the school on a range of issues. These groups meet regularly and are responsible for assessing the school’s progress and performance in key areas as well as suggesting appropriate remedies when problems are identified. They include the Dean’s Council; Chairs’ Committee; Committee on Appointments, Promotion, and Tenure; Academic Programs Committee; and Research Council. (Criterion 1.5.a. describes these committees in detail, including membership.)

Three additional groups that focus primarily on operations also play a role in evaluation, planning, and quality improvement. They are the Web Council, the Administrative Coordination Group, and the Administrative Operations Group. (The membership of each group is included in Appendix 1.2.a.2.) The Web Council meets quarterly to consider the goals of the school website and make recommendations for its improvement. The council’s broad group of stakeholders includes faculty, students, staff, and representatives from every unit in the school. The Administrative Coordination Group serves a high-level planning function and meets monthly to monitor progress in achieving strategic administrative objectives. The group consists of the heads of school administrative units (Business and Finance, Communications, External Affairs, Instructional and Information Systems, Student Affairs, Carolina Public Health Solutions), along with the senior associate dean. Finally, the Administrative Operations Group is focused on execution and monitors the operations of all administrative groups (Finance Office, Communications, External Affairs, Human Resources, Facilities, Institutional Research, Instructional and Information Systems, Student Affairs, Research, Global Health, Carolina Public Health Solutions, NC Institute for Public Health). The latter group shares information and coordinates efforts on a wide range of administrative issues, including events, projects, changes in business procedures, standards for publications, building and renovation issues, and budget development.
“Engaged Institution”—Communities

The school has a strategic plan for community engagement, developed as a product of its participation in the Kellogg Foundation’s Engaged Institutions Initiative. That initiative seeks to move the school and university away from a direct service (one-way) model to a two-way model in which the school and various communities interact for mutual benefit, and community input is enhanced; (see further details in Criterion 3.2.a.).

1.2.b. Using Results To Enhance Quality

Required Documentation: Description of how the results of evaluation and planning are regularly used to enhance the quality of programs and activities

Quality assessment and improvement are an iterative process in the school. To enhance the quality of its programs and activities, the school actively uses a variety of information sources. These include survey and other data, feedback from internal and external bodies, and results of assessments and reviews, including special reviews of programs and operations. As outlined in the previous section, the school has used evaluation and feedback results to address student and faculty concerns, implement program improvements suggested by Graduate School reviews, and address topics of common concern to departments and other units. Strategic planning is a particularly vital component of the school’s quality improvement efforts.

Strategic Planning

Strategic Initiatives

The School of Public Health conducts strategic planning efforts at regular intervals, along with environmental scans in high priority domains. In 2005, the dean worked with several people in the school to map recommendations from prior strategic planning efforts. We concluded that several different strategic planning efforts, including a comprehensive process conducted while Dr. Roper was dean, had identified nearly identical priorities, including overcoming the obesity epidemic, improving global health, eliminating health disparities, and improving global environmental health. We discovered some frustration that little had happened in terms of follow-up to prior recommendations. Dean Rimer shared this information with the Dean's Council and also met with a strategic planning consultant to discuss how to proceed.

Instead of beginning the process anew, we decided to build on prior strategic planning exercises and experiences and to move forward to develop plans in several key areas we identified as strategic initiatives. Faculty leads have developed strategic initiative plans for global health, health disparities, and overcoming obesity. (Strategic initiative statements completed to date are in the Resource File.) These have included slightly different but wide-ranging efforts to solicit and integrate input from a variety of stakeholders across the school
and beyond. We have added cancer as an additional initiative and have been a leader in investigating a wide range of important issues in cancer, including determining risk factors for cancer, ways to reduce cancer risk, informing treatment options, improving quality of life among cancer survivors, and disseminating information and best practices to stakeholders. Moreover, the school’s cancer research and practice community has placed a high priority on reducing disparities in cancer risk, prevention, and survival among the citizens of North Carolina. The school’s efforts have been greatly aided by a long-standing relationship with UNC’s Lineberger Comprehensive Cancer Center and the school is participating in the Lineberger Comprehensive Cancer Center’s strategic planning process, playing a major role in the planning and implementation of the major goals to develop a cancer-related plan for the population sciences (available in the Resource File). We are also launching a new Global Water Institute, the planning process initiated by ESE faculty member Jamie Bartram, formerly coordinator of WHO’s program, Managing Environmental Risks to Health, and their Water, Sanitation and Health Program. Development staff also are conducting fundraising in these areas.

We will begin new strategic planning efforts after completion of the reaccreditation process, so that feedback from the assessment will be an integral part of these efforts. We will build on where we are, asking what is missing and what will be public health challenges in the future. As a final element of our planning efforts, we are gearing up for a major examination of teaching for the 21st century. This began within HPM but will be expanded across the school in 2009-2010.

**Strategic Tracking**

Data sources and efforts are coordinated through the quality assessment work of the Dean’s Council. Since academic year 2006-2007, the council has received periodic updates on the school’s financial health, fundraising, student recruitment, race/ethnicity of faculty and students, and research portfolios. Although helpful, this information sometimes lacks the frequency and depth needed for sustained strategic tracking. The council examines metrics including the following:

- Research funding (school total, by department, by strategic initiative, by PI)
- Research impact (traditional scholarly impact assessment, chairs’ assessment of impact)
- Progress in fundraising, including by key priority areas of the school
- Education and training assessments (student course evaluations, peer teaching evaluations and mentoring, teaching, alumni surveys, fulfillment of competencies), and
- Service and outreach assessments (service activities by type, duration, and purpose)

The Dean’s Council also regularly assesses more general strategic issues pertaining to the school’s research, teaching, and service missions, and, in 2008, the school added an opportunity for academic unit leaders to brief the council about their unit’s strategic mission, objectives, and activities, so that participants would gain a common understanding of the priorities and pressures of each group.
Evaluation and Change

Course Evaluation

The school is encouraging a schoolwide approach to online course evaluation as an important step in improving instructional effectiveness. Since fall 2007, the school has served as a pilot site for an online course evaluation instrument developed by the university; the instrument combines core questions with questions selected and/or developed by the school, departments, and individual course instructors. Instructors and their department chairs can review the evaluation results to identify quality improvement activities, and share key results broadly with students to inform course selection decisions. The university did not make a permanent decision on a vendor during the 2008-09 academic year, however, and so the school has been unable to make full use of this potential source of information. This will change when the new system is selected and operationalized.

Special Internal Administrative Reviews

The school sometimes conducts special reviews that extend beyond assessments required by the university. This strategy, implemented by Dean Rimer, assures that critical functions within the school are maximally effective and responsive to key constituencies. In 2006-2007, Dean Rimer commissioned two special assessments, one of the North Carolina Institute for Public Health (NCIPH) and the other of the school’s student services operations. For the NCIPH review, the dean appointed a 21-member committee with broad participation from within the school as well as from the external public health community and other stakeholders. Chaired by Jo Anne Earp (HBHE), the assessment team made a number of recommendations to strengthen the already strong NCIPH and enhance its integration with other school units. One committee recommendation led to the creation of a Liaison Committee composed of department faculty who identify opportunities for department and NCIPH collaboration. The report’s summary is online at http://tinyurl.com/nciph.

The committee that examined student services operations, chaired by Ned Brooks (HPM) and with UNC-wide membership, recommended that the school build on existing organizational arrangements to achieve improvements in services, while also sharing and implementing best practices across departments, modifying and coordinating information management systems, and possibly rearranging clerical functions. The special review also highlighted the need further to assess career services functions and faculty advising. The process led to better integration of schoolwide and departmental student services activities, including regular meetings between the assistant dean for students and department student services managers.
1.2.c. Outcome Measures

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

In an extended and iterative self-assessment process in preparation for its reaccreditation review, the school’s academic and administrative leadership developed a comprehensive list of metrics to capture the school’s effectiveness in reaching its intended outcomes. School leaders reviewed multiple metrics for each of the objectives, ultimately focusing in many cases on a single critical success factor (CSF) for each objective that allows the school to take its “pulse” at any given time. Table 1.2.c. (placed at end of Criterion 1.2.) enumerates the CSFs, along with target levels and performance data for each of the last three years. In two cases, metrics are still under development. The dissemination metric (objective 4 of the research goal) is discussed in Criterion 3.1.a. Objectives 2 and 3 of the education goal are issues that will be discussed during the academic visioning process (AVP) that has already started and will continue through the next year. It is expected that the Academic Programs Committee will be engaged in examining how we teach millennial students and recommending an overall approach for adapting our teaching and learning strategies to millennial students. Departments will also be supported in considering how they should adapt their teaching and learning for millennial students and in beginning to develop appropriate teaching innovations.

1.2.d. Self-Study Document

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

Preparation of this self-study document has provided a structured approach to jumpstart development of an integrated series of mechanisms and processes for continuous quality improvement. Such mechanisms had been previously discussed but not systematically pursued. The self-study process and document also have allowed the school to critically reexamine its mission, goals, and objectives to ensure that the latter are understandable and acceptable to the school’s key constituencies. The process of developing measurable goals and objectives has vastly improved the school’s ability to assess its strengths and weaknesses. We are confident that our assessment of our performance against the CEPH criteria provides an accurate look at where we are, as well as a secure platform for launching future activities.

1.2.e. Responses to 2001 Accreditation Report

**Required Documentation:** An analysis of the school’s responses to recommendations in the last accreditation report (if any).
At its October 2001 meeting, the CEPH Board of Councilors continued the accreditation of the UNC-Chapel Hill School of Public Health for the maximum term possible. The official report indicated that all criteria had been met.

In the 2001 report, (then) Criterion V.B. (Core Knowledge, Practice and Culminating Experiences) was the only criterion met with commentary, but there was no formal recommendation. The commentary stated: “A few departments were found to use the [field experience] waiver option more frequently than others, and, in the opinion of the site visit team, without always ascertaining the competencies that would otherwise be developed in the practicum.” Criterion 2.4.c. in this self-study documents the extremely rare use of the waiver. Moreover, changes in expectations regarding practica mean that all departments now comply with this requirement.

A new dean has been on board since June 2005. In addition to supporting activities already in place to address the 2001 site visit team’s observations, Dean Rimer has acted proactively to take the school from good to great. Activities undertaken by the school since 2001 include increasing available space, particularly to support the school’s expanding research agenda; creating an environment that enhances staff retention within the constraints of a public institution operating in a very competitive economic region; seeking increased funding for students through research grants and privately funded scholarships; and aggressively pursuing the development and implementation of information management systems. More detailed descriptions of these actions are woven into our responses to specific accreditation criteria throughout this self-study document.

1.2.f. Development of the Self-Study Document

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

The development of the self-study document was the impetus for a three-and-a-half-year period of intense introspection. This self-assessment allowed the school to take stock of current and future directions, as well as to consider how better to achieve its goals, not only for accreditation purposes but also for improved organization and administration.

In 2006, the dean appointed Dr. Peggy Leatt, associate dean for academic affairs, and Dr. Laurel Files to serve as co-directors of the self-study effort. Together they assembled the Self-Study Committee, chaired by Dr. Files, including relevant administrative staff, faculty, students, alumni, and public health community representatives. The Self-Study Committee’s membership has changed only slightly over time. The full committee met three times the first year, during which brainstorming and discussing alternative approaches to the process were the focus. After the first year, the committee primarily met in subgroups that were established to address specific criteria and functional areas. Subgroups comprised work
groups focused on specific criteria and teams focused on data gathering and analysis relevant to all of the criteria:

- **Work Groups**
  1. Mission and Goals, Organization and Administration, Resources, Governance: Senior associate dean, plus business/finance and HR staff
  2. Students: Assistant dean for students and Office of Student Affairs staff
  3. Service: NC Institute for Public Health staff
  4. Research: Associate dean for research, and staff
  5. Instructional Programs: Chair, Academic Programs Committee
  6. Faculty: Associate dean for academic programs

- **Teams**
  1. Data: Instructional and Information Systems Staff
  2. Surveys
     Representative research faculty (BIOS, ENVR, EPID, HBHE, HPM)
  3. Outcomes/Evaluation
     Representative evaluation specialists (HPM, MCH, NCIPH)

The contribution of the teams was concentrated in the early phase of the self-study and provided guidance for the much longer period of data collection and analysis that would be carried out by the work groups. (The Resource File includes Self-Study Committee membership at the time of the final report, membership of the work groups and teams, and the periodic activity updates prepared for the committee.)

As noted in Criterion 1.1.d., the Self-Study Committee’s stream of activities and its focus on the work of developing specific objectives merged by 2007 with the process of redeveloping the mission, goals, objectives (and metrics) begun by Dean Rimer. The incorporation and input of a variety of internal and external constituencies for both activities became part of the day-to-day process of the multiple work groups of the CEPH Self-Study Committee, as they conceptualized their tasks, and generated, organized, and analyzed data. In 2007 and 2008, the Self-Study Committee met annually for a comprehensive update, but by that point the committee was functioning as a coordinated set of work groups (or task forces) rather than as a single body. Rather than call the full committee together on a regular basis, broader meetings included only the work group chairs (occasionally accompanied by staff). They met often as a group, supplemented by meetings with the self-study codirectors of either individuals or single work groups.

During the self-study process, Dr. Files provided periodic work group activity updates to the full committee. The self-study codirectors also made regular presentations to the school’s constituencies, particularly during the final year of work, at semi-annual Faculty and Staff Meetings, and at meetings of the Dean’s Council, Chairs’ Committee, and External Advisory Committee. On request, Dr. Files also provided updates at individual department faculty meetings.
Committee members and other critical constituencies were invited to review the preliminary draft of the self-study and share comments that would improve the final document. Many, including alumni and practitioner members, provided in-depth feedback on key criteria in their areas of expertise, as did volunteers from NC Citizens for Public Health (http://www.nccph.com/members.htm). The school posted the final self-study on its website, and has welcomed continuing comments and suggestions.
1.2.g. Assessment of Evaluation and Planning

**Required Documentation:** Assessment of the extent to which this criterion is met.

**Strengths**
- Focused approach to quality assessment and improvement around academic units
- Strong focus on using data for quality improvement
- Leadership attention to all aspects of evaluation and to developing metrics that are used consistently
- The majority of resources are focused on strategic objectives and outcomes
- Regular attention to overarching strategic initiatives, as well as reporting on schoolwide and unit-level outcomes, providing a multilayered understanding of progress in achieving the school’s mission
- Recognition of the need to develop better data systems and allocation of resources to process

**Challenges**
- Working with a university data warehouse that is not fully developed and legacy data systems that are extremely cumbersome
- Addressing inadequacies in the availability and accessibility of real-time data for decision making
- Generating sufficient resources to create an in-house (school) data mart that will mitigate the school’s immediate reporting and metric tracking needs

**Future Directions**
- Finish developing an internal data mart to collect and report on data required for high-quality evaluation and planning
- Increase the range of reliable and valid indicators. Continue to develop processes and methods to assess quality and outcomes at the aggregate, school level
- Achieve increasingly greater integration of data and analysis so that we can use evidence-based measures for real-time decision making and setting strategic directions

**This Criterion is met.**
### Table 1.2.c. Outcome Measures, Targets, and Performance Data, AY 2006-07 to 2008-09

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<td>Prepare the next generation of leaders who will improve the public’s health through innovations in research, policies, systems, programs, and service</td>
<td>Average verbal and quantitative GRE scores at matriculation</td>
<td>Master's V = 72 Q = 55</td>
<td>Above the 65th percentile (Master’s)*</td>
<td>Master's V = 78 Q = 61</td>
<td>Master's V = 73 Q = 61</td>
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<td></td>
<td>Above the 70th percentile (Doctoral)*</td>
<td>Doctoral V = 80 Q = 64</td>
<td>Doctoral V = 85 Q = 73</td>
<td>Doctoral V = 83 Q = 74</td>
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<td>Degree completion rates* for all students and for underrepresented minority students (CF. Table 4.5.d.)</td>
<td>95% (All students)</td>
<td>UG = 92% M = 90% D = 74%</td>
<td>UG = 90% M = 89% D = 72%</td>
<td>UG = 89% M = 92% D = 83%</td>
</tr>
<tr>
<td></td>
<td>Proportion of underrepresented minority students in the student body (fall) (CF. Table 4.5.d.)</td>
<td>95% (Underrepresented minority students)</td>
<td>UG = 100% M = 88% D = 60%</td>
<td>UG = 89% M = 85% D = 69%</td>
<td>UG = 100% M = 79% D = 83%</td>
</tr>
<tr>
<td>Objective 1: Recruit and retain a diverse, accomplished student body.</td>
<td>Proportion of underrepresented minority students in the student body (fall) (CF. Table 4.5.d.)</td>
<td>Maintain or increase</td>
<td>UG = 12% M = 14% D = 15%</td>
<td>UG = 17% M = 15% D = 13%</td>
<td>UG = 18% M = 14% D = 11%</td>
</tr>
<tr>
<td>Objective 2: Provide world-class, innovative educational opportunities, grounded in evidence-based practices and the school’s mission.</td>
<td>See Criterion 1.2.c. text</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Objective 3: Sustain a supportive, active learning environment.</td>
<td>See Criterion 1.2.c. text</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Objective 4: Produce graduates who contribute to individual well-being and the health of the public through application of evidence-based practices, innovations, and leadership in research, policies, systems, programs, and service.</td>
<td>Public health job placement rates within 12 months (Cf. Table 2.7.b.2.)</td>
<td>100%</td>
<td>99%</td>
<td>99%</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Time to completion is designated by the University: undergraduate (UG) degrees = 2 years (in major, i.e., junior and senior years), master’s (M) degrees = 5 years, and doctoral (D) degrees = 8 years. Degree completion rates were calculated by identifying the cohorts of students who matriculated two, five, or eight years in advance of the May graduation dates (depending on the degree level) and calculating the proportion of students who completed their degree within that time period. TBD: To be determined, NA: Not yet available.
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<tr>
<td><strong>Discover new knowledge that will lead to the creation and improvement of programs, policies, and practices that will have a maximum, positive, sustainable impact on the public’s health</strong></td>
<td>Maintain or increase grant and contract funding to SPH faculty PIs (Cf. Table 3.1.d.)</td>
<td>Increase</td>
<td>$117.4 million</td>
<td>$103.8 million</td>
<td>$150.2 million</td>
</tr>
<tr>
<td><strong>OBJECTIVE 1: Maintain the school’s strong productivity in research grants and contracts.</strong></td>
<td>Percentage of school tenure-track assistant professors who are PIs on awarded grants and/or contracts (Cf. Table 3.1.d.)</td>
<td>Increase</td>
<td>70%</td>
<td>62%</td>
<td>62%</td>
</tr>
<tr>
<td><strong>OBJECTIVE 2: Strengthen research productivity and research training experience among emerging faculty and student scholars.</strong></td>
<td>Percentage of SPH faculty-led grants or contracts that have a coinvestigator listed who is not appointed in the PI’s home department (Cf. Table 3.1.d.)</td>
<td>Increase</td>
<td>42.5%</td>
<td>42.2%</td>
<td>45.4%</td>
</tr>
<tr>
<td><strong>OBJECTIVE 3: Facilitate innovative, interdisciplinary research that contributes to public health improvements in North Carolina and worldwide.</strong></td>
<td>See Criterion 3.1 text</td>
<td>TBD</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
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TBD: To be determined; N/A Not available
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<tr>
<td><strong>Serve North Carolina and beyond through outreach, engagement, education of citizens and health professionals, and application of solutions to health threats and problems</strong></td>
<td></td>
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<tr>
<td><strong>OBJECTIVE 1: Maintain or increase overall service outreach effort of faculty and staff, with a focus on reducing health threats and problems.</strong></td>
<td>Number of service activities reported (Cf. Table 3.2.c.)</td>
<td>327</td>
<td></td>
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<tr>
<td></td>
<td>Number of service hours reported (Cf. Table 3.2.c.)</td>
<td>6,800</td>
<td>8,277</td>
<td>6,703</td>
<td></td>
</tr>
<tr>
<td><strong>OBJECTIVE 2: Improve measurement and documentation of the school’s service outreach efforts in applying solutions to health threats and problems.</strong></td>
<td>Number and percentage of faculty who provide information about service outreach efforts (Cf. Table 3.2.c.)</td>
<td>8,277</td>
<td>6,703</td>
<td></td>
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<tr>
<td></td>
<td>Maintain State of Practice Committees; maintain current diversity of service agreement partners despite difficult economic climate</td>
<td></td>
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<tr>
<td><strong>OBJECTIVE 3: Increase opportunities for health professionals and citizens to contribute to the school’s work and service.</strong></td>
<td>State of Practice Committees; Description of service agreements initiated with the school by NC Division of Public Health and others (e.g., Local Public Health Department Accreditation Program)</td>
<td>8,277</td>
<td>6,703</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OBJECTIVE 4: Offer an outstanding program of lifelong learning that enhances the knowledge, skills, and practices of public health workers and their capacity to apply solutions to health threats and problems.</strong></td>
<td>Enrollment in continuing education courses</td>
<td>6,800</td>
<td>8,277</td>
<td>6,703</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Repeat participants (≥2 courses)</td>
<td>24%</td>
<td>27%</td>
<td>23%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Enrollments among “public health workers” (Table 3.3.c.1.)</td>
<td>3,969</td>
<td>4,686</td>
<td>3,992</td>
<td></td>
</tr>
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<table>
<thead>
<tr>
<th>Faculty/Staff Goal</th>
<th>Metric</th>
<th>Target</th>
<th>2006-2007</th>
<th>2007-2008</th>
<th>2008-2009</th>
</tr>
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<tbody>
<tr>
<td><strong>Sustain the highest quality faculty and staff and their ability to contribute to public health</strong></td>
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<tr>
<td><strong>OBJECTIVE 1:</strong> Recruit and retain a diverse faculty who are leaders in research, scholarship, education, service, and the global application of public health to human welfare.</td>
<td>Maintain or increase percentage of core faculty from underrepresented minorities (Cf. Table 4.3.f.)</td>
<td>Increase</td>
<td>7%</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td><strong>OBJECTIVE 2:</strong> Recruit and retain a diverse staff that can support the mission, goals, and values of the school.</td>
<td>Maintain or increase percentage of underrepresented minorities on staff (Cf. Table 4.3.f.b)</td>
<td>Increase</td>
<td>13%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td><strong>OBJECTIVE 3:</strong> Balance the ratio of tenure-and tenure-track faculty to fixed-term faculty</td>
<td>Number of Core tenured/tenure track faculty to Core fixed-term faculty (Cf. Table 4.1.d.)</td>
<td>2:1</td>
<td>126:81</td>
<td>124:84</td>
<td>130:78</td>
</tr>
<tr>
<td><strong>OBJECTIVE 4:</strong> Maintain faculty with public health practice experience</td>
<td>Balanced ratio between faculty with and without public health practice experience (Cf. Table 4.1.d.)</td>
<td>50%</td>
<td>67%</td>
<td>N/A</td>
<td>50%</td>
</tr>
<tr>
<td><strong>OBJECTIVE 5:</strong> Increase the number of Professors of the Practice</td>
<td>Number of Professors of the Practice (Cf. Table 4.1.d.)</td>
<td>Minimum of 1/department/program</td>
<td>2:2</td>
<td>3:2</td>
<td>5:3</td>
</tr>
<tr>
<td><strong>OBJECTIVE 6:</strong> Increase the number of distinguished/named professors</td>
<td>Number (Cf. Table 4.1.d.)</td>
<td>30</td>
<td>25</td>
<td>25</td>
<td>28</td>
</tr>
<tr>
<td><strong>OBJECTIVE 7:</strong> Cultivate the School of Public Health as an environment conducive to outstanding productivity, and discovery and the application of discovery, within a collegial and collaborative context</td>
<td>Demonstrable impact of teaching, research, and service (Cf. Table 4.1.d.)</td>
<td>N/A</td>
<td>See Appendix 3.1.a. for impact summaries of research/projects</td>
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</tr>
<tr>
<td><strong>OBJECTIVE 8:</strong> Mentor faculty to optimize their success and promote excellence</td>
<td>New tenure track assistant professors assigned to mentors (Cf. Table 4.1.d.)</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%*</td>
</tr>
</tbody>
</table>

NA: Not applicable; not available

* This included one BIOS, four ENVR, two EPID, four HBHE, one HPM, and one NUTR faculty member.