REVIEW FOR ACCREDITATION

OF THE

SCHOOL OF PUBLIC HEALTH

AT THE

UNIVERSITY OF CALIFORNIA, BERKELEY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
September 30 - October 2, 2015

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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the School of Public Health at the University of California, Berkeley. The report assesses the school’s compliance with the Accreditation Criteria for Schools of Public Health, amended June 2011. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation, and a visit in October 2015 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The University of California was created in 1868 by state law with the merger of the College of California and the Agricultural, Mining, and Mechanical Arts College, a land grant institution. The new University of California was built in Berkeley. Today, Berkeley is a part of the UC system, which includes 10 UC campuses located throughout the state of California and is governed by the Board of Regents and the UC Office of the President. Although each campus is a member of the University of California system, each maintains its independence. In Fall 2014, there were 37,581 students enrolled at UC Berkeley: 27,126 undergraduates and 10,455 graduate students. The university has a total of 14 schools and colleges; the Colleges of Chemistry, Engineering, Environmental Design, Letters and Science and Natural Resources, and the Schools of Education, Business, Information, Journalism, Law, Optometry, Public Policy, Social Welfare and Public Health.

The School of Public Health was founded in 1943 on the Berkeley campus, where it had its origins more than two decades earlier with the creation of the Department of Hygiene in 1919. The total graduate student enrollment for 2014-2015 was 570, including students enrolled in the online/on-campus MPH program. Of these, 123 were doctoral students and 447 were master's candidates. There were also 435 undergraduate public health majors.

UC Berkeley’s school of public health has been accredited for over 60 years. The last accreditation review occurred in spring 2008. The school received an accreditation term of seven years. The Council accepted interim reports in 2009, 2010, 2012, and 2013.
Characteristics of a School of Public Health

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

a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.

b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.

c. The school shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research, and service. Using an ecological perspective, the school of public health should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem-solving, and fosters the development of professional public health concepts and values.

d. The school of public health shall maintain an organizational culture that embraces the vision, goals and values common to public health. The school shall maintain this organizational culture through leadership, institutional rewards, and dedication of resources in order to infuse public health values and goals into all aspects of the school's activities.

e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.

f. The school shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the School of Public Health at the University of California, Berkeley. The school is a part of a regionally accredited institution. The dean, faculty members, staff and students have the same rights, privileges and status as other schools at the university.

The school's mission, goals and value statements emphasize the importance of instruction, research and service, and its organizational culture embraces core public health values and goals. The school functions as a collaboration of disciplines and addresses the health of populations and the community. The school uses an ecological approach to create a learning environment that promotes a framework for intellectual learning and development of public health core values.

The school's faculty are trained in a variety of disciplines, and faculty ensure that the environment supports interdisciplinary collaboration. The school has adequate resources to offer MPH and doctoral degrees.
1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

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

This criterion is met. The school has a clearly formulated and publicly stated mission with supporting goals, objectives and values. Strategic planning and the development of the mission, goals and objectives began in the spring of 2014 and followed an iterative process that included all constituents.

The school’s mission is as follows:

1. Conduct world class, rigorous research.
2. Apply knowledge to prevent disease and injury and promote the health of individuals and communities in California, the United States and the world.
3. Develop diverse leaders for professional and research careers through undergraduate, masters and doctoral programs.
4. Enhance the knowledge and skills of the public health workforce through continuing education and technical assistance.

The information provided in the self-study was based on the school’s previous 2008-2012 strategic plan. The Strategic Planning Committee oversaw the development of the mission, goals and objectives and included input from students, staff, and members of the broader UC Berkeley campus, alumni, employers and community partners. At the time of the site visit, school administration stated that a 2015-2020 strategic plan has been developed and outlines the priority areas for the school over the next five years and also defines strategic priorities which will enable the school to meet local and global public health needs. The school is currently working to develop a detailed implementation plan in the areas of education, research and community and for the cross-cutting area of diversity. As part of this process, the school has revised its vision and mission.

The school articulates 10 primary goals in the areas of instruction, research and service. The goals are grouped into five thematic categories: impact, growth, diversity, research and resources. Each goal has a range of four to 12 objectives.

The school has developed four value statements which include the following: health as a right, strength through diversity, think forward and impact first. Information on the mission, vision, values, goals and objectives are available on the school’s website. The site visit team validated visible reinforcement and demonstration of values in the school environment as well as familiarity of leadership, faculty and students with these concepts.
1.2 Evaluation and Planning.

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

This criterion is partially met. The school has some processes in place for monitoring and evaluating its overall efforts against its mission, goals and objectives. Evaluation and planning tools include the following: an annual dean’s performance report, summer ‘advances’ similar to an administrative retreat, annual retreats, student exit surveys, individual course evaluations and feedback from alumni and the advisory council.

Planning and evaluation occurs at the school and university level through a variety of meetings, which include the following: monthly meetings of the Dean’s Administrative Council and the Faculty Council, bimonthly school-wide faculty meetings and ad hoc meetings called to address specific issues. The school monitored and collected data through 2012 relative to the 2008-2012 strategic plan. The dean provided progress reports to the faculty members and the school’s constituents. These mechanisms provided opportunities for the faculty, staff, students and other stakeholders to be aware of the school’s progress in meeting its targets. The dean also presented an all-school strategic plan progress report at the annual all-school meeting held in January of each year.

Campus-wide evaluation takes place through six different processes that include development of five-year and annual academic faculty recruitment plans, an annual budget plan and an annual meeting between the dean and the provost. The school also undergoes a UC Berkeley campus academic program review coordinated by the office of the vice provost. This process involves review of a separate school self-study focused on academic programs, which assesses its intellectual agenda, its programmatic goals and resources and identifies critical challenges and opportunities facing the school.

External constituents are included in the strategic planning process via an Alumni Association retreat and Policy Advisory Council meetings. Alumni provide input on competency attainment and the school’s ability to effectively prepare students for the workforce. The Policy Advisory Council meets three times a year and provides input with regard to the schools fundraising campaign. During the meeting with alumni community members and employers, the site visit team confirmed that there is active engagement with the school.

The first concern relates to the lack of baseline targets and measurable objectives for the 2008-2012 strategic plan. The overall school-level objectives are mostly stated in qualitative terms, with targets being the years in which they should be completed. It is not always clear whether or not the objectives listed for
the different years were completed, making it difficult to assess the fulfillment of the goal for that year. Examples of some objectives are: “Establish formal relationships and secure funding to enable students and faculty to collaborate with various agencies, locally, in the state of California, nationally, and internationally to conduct research and evaluation and offer technical assistance and training.” The target was 2010 and one of the outcome indicators, for example is: workforce diversity project with the public health institute (2009-2010). Another example of an objective is: “Enhance the support provided to faculty for preparing and submitting large grant proposals requiring multi-disciplinary research teams and addressing important public health concerns.” The target is 2009 and one of the outcome indicators is: SPH faculty initiated affiliations with the UCB Center for Information, Technology in the Interest of Society (CITRIS) and SPH key participant in Blum Center for Developing Economies (2009-2010). Without baseline and measurable targets it is difficult to assess the school's progress. At the time of the site visit, measurable outcomes for the 2015-2020 strategic plan had not been developed. Administrators provided a proposed implementation plan for the new strategic plan that included an example of task timelines and targets and expected outcomes for the subsequent three years and beyond. Upon completion of the 2015-2020 strategic plan, the school must document that it has developed measurable objectives with targets, where appropriate, for the goals and objectives so that performance against the targets can be assessed.

The second concern is that the school ceased monitoring and assessing the progress in achieving the goals and objectives in 2012. The lack of monitoring and assessment left a significant three-year gap between then and the time that new goals and objectives would be developed as part of the 2015-2020 strategic plan. This criterion requires that a school of public health undertake ongoing, well-documented, systematic evaluation of its activities. The site visitors were informed that while formal monitoring of the goals and objectives ended in 2012, informal monitoring continued and some of the goals and objectives were used to guide the development of the 2015-2020 strategic plan. The 2015-2020 strategic plan should include a process for routinely monitoring and receiving input on meeting all the goals and objectives of the 2015-2020 strategic plan.

1.3 Institutional Environment.

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

This criterion is met. The University of California, Berkeley is accredited by the Accrediting Commission for Senior Colleges and Universities, Western Association of Schools and Colleges. In addition to public health, the university responds to other specialized accreditors in areas such as business, law, psychology and education. The school enjoys the same level of autonomy and authority as all other professional schools and colleges at the university.
Berkeley is a part of the University of California system, which includes 10 UC campuses located throughout the state of California. The university is governed by an institutional Board of Regents and the UC Office of the President. On the Berkeley campus, there are a total of 14 schools and colleges; the Colleges of Chemistry, Engineering, Environmental Design, Letters and Science and Natural Resources, and the Schools of Education, Business, Information, Journalism, Law, Optometry, Public Policy, Social Welfare and Public Health.

The UC Office of the President is responsible for the overall budget of all the institutions in the UC system. The Board of Regents approves the final budget for each institution. After approval of the institution’s budget, the chancellor disperses the funds to the executive vice chancellor/provost who then disperses the funds to the dean. The dean, with input from the associate deans and assistant deans is responsible for the development of the school’s budget and resource allocation.

The dean, in conjunction with the school’s Academic Senate, oversees recruitment, selection and advancement of all faculty and staff.

All faculty members in the Education Policy and Curriculum Committee within the school set academic standards and policies, with regard to the development and implementation of curriculum for all of the school’s degree programs. All faculty members are responsible for student admissions, with the Graduate Division granting final approval.

1.4 Organization and Administration.

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

This criterion is met. The school provides an organizational setting conducive to public health learning, research and service. The school is considered to be one department of the Graduate Division and has six academic divisions: Biostatistics, Community Health and Human Development, Environmental Health Sciences, Epidemiology, Health Policy and Management and Infectious Diseases and Vaccinology. Each division is led by a division head (same function as a department chair), who is appointed by the dean.

The dean has executive authority and is assisted by four associate deans, four assistant deans and other division managers. Collectively, the deans and other administrative officers are responsible for academic affairs, administration, strategy, external affairs, development and communication, research, student affairs and finance.
The school supports collaborative efforts across divisions within the school and across other schools and colleges in the university. School faculty are recognized as productive researchers with a high success rate in receiving extramural support and are often sought by other units as collaborators. The school has embraced the university-wide initiative calling for inter-professional education by creating new partnerships, endorsing faculty exchange with other departments and fostering collaboration. The school collaborates with the Chancellor’s Advisory Council on Biology, the Council of Science and Engineering Deans, The Blum Center for Developing Economics, the Berkeley Diversity Research Initiative and the Center for Public Health Practice (which reside within the SPH as a part of its organizational structure), which support public health teaching, research and service.

During the site visit team’s meeting with the provost, he spoke highly of the school and stated that the SPH is very important to the university and has a very strong dean.

1.5 Governance.

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

This criterion is met. The school has clearly defined rights and responsibilities concerning governance and academic policies. The school has four standing and two ad hoc committees that contribute to school governance. Faculty, staff, students and alumni are involved in the school’s operations.

The dean, associate and assistant deans, in conjunction with the Faculty Council and the Dean’s Administrative Council, are responsible for developing school policies. Members of the Faculty Council include the chair of the faculty, the vice chair of the faculty, six elected faculty members and three students one representing the master’s program, one representing the doctoral program and one representing the undergraduate program. The Faculty Council also has the authority to propose legislation to the school’s Academic Senate, which includes all faculty holding the titles of instructor, assistant professor, associate professor and professor. The Dean's Administrative Council includes all of the associate and assistant deans of the SPH.

All faculty members including the school’s administration are involved in the development of strategic plans and the annual faculty recruitment academic plan. The dean oversees the entire evaluation process with the development of an annual dean’s performance report.

The dean, with input from the Dean’s Administrative Council and the Academic Senate, is responsible for budget and resource allocation. According to the UC system’s reporting lines, the provost distributes the proposed budget for each school to the deans.
The Student Services Unit conducts student recruitment. Admissions decisions are delegated to the Faculty Admission Committees for each program. Members of each program committee include representatives from each degree program, and student membership is encouraged. Each Admissions Committee forwards its recommendations to the Student Services Unit, and the recommendation is then forwarded to the university’s Graduate Division which makes the final decision. Prior to awarding any of the school’s degrees, the faculty advisor must certify that all degree requirements have been met. The school awards professional degrees, and the Graduate Division awards academic degrees.

The School of Public Health Academic Personnel Committee oversees the process for faculty recruitment. The dean sends a request to campus administration during the annual budget process for approval of the new faculty positions. A Search Committee is formed within the school to recruit and interview potential candidates. The Search Committee’s report for potential hires is forwarded to the dean, and then to campus administration for final approval. Members of the School of Public Health Academic Personnel Committee include one faculty member from each division, the dean and academic personnel manager. The dean oversees promotion and tenure in conjunction with the School of Public Health Academic Personnel Committee. An ad hoc committee is formed to evaluate each candidate for promotion or tenure. Members of the ad hoc committee include two members of the candidate’s division and an outside member from another division within the school. Campus administration has final approval for the appointment of new faculty and the promotion and tenure of existing faculty.

The Graduate Council and the Committee on Courses (campus-wide Academic Senate bodies) develop and implement campus-wide academic standards and polices, which the SPH uses as its standard. Faculty members in the SPH can also participate in these committees, and the school can amend and request exceptions to minimum standards when necessary.

To include external constituents in the governance of the school, the chair of the Faculty Council may appoint additional non-voting members such as alumni, community members and public health professionals. At the beginning of the self-study process, the Undergraduate Management Advisory Committee provided feedback on the information in the self-study, and community members on the Dean’s Policy Advisory Board were involved in the development process of the school’s most recent strategic plan and also provided feedback on the self-study document. The Alumni Association also plays a role in curricular development by assisting with mapping the courses to concentration competencies and by proving feedback to the dean in regards to the skills needed in the workforce.

Faculty members hold leadership positions and are members of seven university committees including the Graduate Council, the Status of Women & Ethnic Minorities Committee and the Student Diversity & Academic Development Committee.
Students have input into the school’s governance through participation on a variety of committees. Students are represented on the Faculty Council, a SPH committee. Students also participate in student-led committees and associations including, the Association of Public Health Infectious Diseases Students, Public Health Student Sports Committee, Health in All Policies, Institute for Healthcare Improvement, Multicultural Health in Action and the Multicultural Student Organization and Queering Public Health.

Students who met with the site visit team stated that faculty members are very open to receiving student input on different topics. One student mentioned that she was able to have a one-on-one meeting with the dean to express an area of concern that she had.

1.6 Fiscal Resources.

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

This criterion is met. The school currently has sufficient resources to fulfill its mission. The school’s budget is based on six sources: campus support from state allocations, professional degree fees, a self-supporting degree program, private gifts, sales and services and regents’ endowment income. The school’s sources of funds and expenditures are shown in Table 1.

The school receives funds from the university from a general fund that includes state funds, tuition, overhead funds and other resources. These funds are not distributed by a formula but on the basis of prior years’ “ongoing” funding decisions, viewed as the permanent budget. Requests are made only for incremental needs. In 2005, the school implemented the Professional Degree Supplemental Tuition Fee, which is $3,616 and can be retained by the school to fund increased expenses.

Indirect cost recovery funds are distributed based on a memorandum from the executive vice chancellor and provost starting in August 2013 as a pilot based on the transition to research administration through shared services at the university level. A working group recommended that 1.4% be used to avoid inequities among units, 2.6% be distributed to individual faculty members and 6.0% be distributed to vice chancellor for research and deans to address shared faculty research needs. The working group later suggested that qualified faculty receive $4,000 per year and that other funds be found if the 2.6% allocation was insufficient.

As a result of the economic downturns, there have been cuts to the university’s state allocation, which resulted in a $178 million decrease between fiscal year 2003 and 2014 ($497 million in FY2003 and $319 million in FY2014). To date, the university has absorbed these costs. Funds are distributed to individual campuses of the University of California System based on varying methodologies and not to individual schools on campuses. In a meeting with the chancellor, the site visit team learned that university
resources would be limited in the foreseeable future and that growth of faculty by any school, including the School of Public Health would be limited.

Overall, the school has sufficient fiscal resources, with ending balances growing over the past five years from $14 million to $16 million. Grant and contract expenditures have also grown from $54 million to $60 million.

Table 1. Sources of Funds & Expenditures By Major Categories

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<td>Campus Support</td>
<td>$10,161</td>
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<td>Professional Degree Fees</td>
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<td>Private Gifts</td>
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<td>Sales &amp; Services</td>
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<td>Regents Endowment Income</td>
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<td>0</td>
<td>$1,451</td>
<td>$1,658</td>
<td>$1,675</td>
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<td>All Other</td>
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<td>$6,445</td>
<td>$1,199</td>
<td>$628</td>
<td>($444)</td>
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<td>Total Sources - Non C&amp;G</td>
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<td>$32,272</td>
<td>$33,609</td>
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<td>Total Sources - Contracts &amp; Grants</td>
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<td>Grand Total Sources</td>
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<td>Academic Salaries</td>
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<td>Staff Salaries</td>
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<td>Fringe Benefits</td>
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<td>Scholarships and Fellowships</td>
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<td>Fee Remission</td>
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<td>Travel</td>
<td>$650</td>
<td>$751</td>
<td>$631</td>
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<td>All Other</td>
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<td>$5,487</td>
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<td>Total Expenditures - Non C&amp;G</td>
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<td>Total Expenditures - Contracts &amp; Grants</td>
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<td>Grand Total Expenditures</td>
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<td>Total Change in Net Assets</td>
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<td>Ending Balance</td>
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<td>$15,731</td>
<td>$15,095</td>
<td>$15,506</td>
<td>$16,731</td>
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</table>

1 Elements of ‘campus support’ prior to 2012-13 mapped to ‘other’ due to implementation of new reporting tool.
2 Net negative source of funds due to repayment of start-up loan for online/on-campus MPH program.

1.7 Faculty and Other Resources.

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

This criterion is met. The school has personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

Faculty headcount data show a steady increase in the number of faculty over the last five years. Most of the growth has been in the Division of Health Policy and Management. As of September 2015, the school
has a total of 73 primary faculty members and 63 other faculty members. The school offers doctoral programs in each core area and has an adequate faculty complement for each. The biostatistics area has eight primary faculty members, community health and human development has 22, environmental health sciences has 12, epidemiology has 12, health policy and management has 12 and infectious disease has seven. All primary faculty members support school-wide programs which include the DrPH, interdisciplinary MPH, on-campus/online MPH and undergraduate programs.

The student-faculty ratios are below 10:1 and support effective and regular student/faculty interactions. The SFR for FY 2015 was 6.29 based on primary faculty and 4.75 for all faculty. The SFR has declined slightly over the past four years, indicating the availability of consistently adequate numbers of faculty in virtually all areas of study over time.

The number of staff members to support the school is also adequate to provide services to students and faculty in all areas of need. The school has a total of 182 staff members who contribute 152.52 FTE. The staff complement includes a communications manager, finance, IT, research and student services personnel. The largest numbers of these staff support general administration (62), information technology (10), research administration (21), research and laboratory activities (39) and student services (15).

The school occupies 102,000 assignable square feet of administrative, instructional and research space largely in two campus buildings, University Hall and Haviland Hall. Classroom space is shared with other schools on the campus. The school has some research space off-campus and in the Li Ka-Shing Center for Biomedical and Health Sciences. In 2014, the governor and legislature approved $75 million in funding to build a new home for the School of Public Health, which they will share with the School of Education and the Department of Psychology.

Of the 102,000 available square square feet, the school has 43,926 square feet of on-campus research space and 13,407 square feet of leased space, including both dry and wet laboratory space. Wet space is located in three buildings on campus. Equipment is located in laboratories and research lab service areas for common use.

All students are required to own or have access to a personal computer. Students also have access to wireless connections across campus and in public health classrooms, lounges and libraries. Students may also use all campus computing facilities and services, and the school has two computerized classrooms for courses in biostatistics, epidemiology and environmental health. The school also provides formal instruction and consulting, technical support and web based resources. The school provides computer hardware, software, networking and technical support though campus-wide and on-site services for all faculty, staff and administration.
Library facilities for the school are unique in that the school is associated with the Sheldon Margen Public Health Library, one of the two stand-alone public health libraries in the country. This library contains more than 108,000 volumes and receives approximately 300 print serial titles, with an increasing number of serials and books available in electronic format. The library has dedicated librarians and staff and provides access to specialized databases, relevant training and consultation and seating space for 57 readers with access to free software. Faculty, staff and students also have access to the resources of other campus specialized libraries and the UC Berkeley library licenses.

The school has identified four outcome measures to assess the adequacy of its resources. The objectives are as follow: to ensure that the total number of applicants for all degree programs are above 1000 each year, to ensure that there are more than 139 students that graduate from the undergraduate programs each year, to increase the number of primary faculty and to increase the number of other teaching faculty. The school has met all of its targets for the most recent academic year.

1.8 Diversity.

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

This criterion is met. The school demonstrates a commitment to diversity and evidences an ongoing practice of cultural competence in learning, research and service practices.

The school defines its underrepresented minority populations as Chicano/Latino, African American, Native American-Alaska Native, Vietnamese/Thai/Cambodian/Pacific Islander, Laotian, Filipino and Hmong. According to 2014 data provided in the self-study, 10% of the undergraduate student population were Chicano/Latino, 9% of graduate students were African/Americans, 48% of the faculty were female and 13.3% of the staff were Chicano/Latino. The 2014-2015 data received during the site visit indicates an overall undergraduate and graduate URM population of 34% and 21% within the SPH.

The university and school have clear, well documented policies and procedures to address discrimination and harassment. Codes of conduct for students, faculty and staff, as well as personnel policies and academic policies are readily available. The UC Berkeley Office for the Prevention of Harassment and Discrimination ensures an environment free of discrimination and harassment on the basis of race, color, national origin, gender, age and sexual orientation. The Academic Compliance and Disability Standards Office handles disability complaints and the Office of Human Resources handles non-academic staff complaints in accordance with personnel policies and contracts. The SPH subscribes to the University of California’s Principles of Community that support diversity, dignity and communities of justice. The school has developed a campus-wide collaborative statement with students, faculty, staff and alumni that serves as an affirmation of the intrinsic values of each member of the community.
The self-study documents a variety of opportunities to address diversity in the curriculum. Policies and procedures are in place to develop, review and maintain curricula that address diversity and cultural competence and service learning opportunities. Students have the opportunity to take courses in ethnic and cultural diversity and obtain a multicultural health certificate in addition to their degree. This specialty area requires nine units. The Multicultural Health in Action Student Group is active in "local communities of need" and an annual 'Faculty Tea' is held to introduce multi-cultural opportunities. Students are also exposed to multi-cultural concerns, participate in community partnerships to address health inequities, and engage in research to resolve health issues. The SPH also maintains a webpage dedicated to student groups, including Multicultural Health in Action, a student-run organization that provides health education and academic support to disadvantaged populations in the East Bay.

The SPH strives to support and maintain a diverse faculty by following the university's guidelines. When permission is received for new appointments, faculty members form a search committee, and the position is advertised through publications, notices at meetings, letters to other schools and networking processes. Once potential candidates are identified, the committee contacts the candidate. In efforts to recruit diverse faculty, new faculty positions are vetted through a clearly defined process that address affirmative action and seeks to find and hire minorities. However, the SPH acknowledges the challenge to reach diversity goals for gender and minority recruitment due to a limited number of diverse candidates. During the site visit, the team learned that in a recent recruitment process, the diversity in the applicants was greater than in the past, suggesting that what they are doing is working.

Student diversity efforts are centered in the SPH Office of Diversity Services. The school’s diversity planning and policy development are on-going and reflective of the university’s and school’s commitment. The director and outreach coordinator provide admission advising, career workshops and application assistance. Multiple programs and services directed toward prospective students include a summer preparatory seminar, one-on-one advising, admissions information sessions, GRE preparation, application assistance and summer research opportunities. The Graduate Advising & Diversity Services is a volunteer student ambassadors program that works with prospective students during the application process. During the site visit, representatives from the Diversity Office indicated that they provided advising service to minority students and elaborated on the summer preparatory course and explained that it provides opportunities for the minority cohort to bond and form a reliable cohort among students. The SPH also partners with several HCBUs to offer mentoring programs and has recently initiated African Male Pipeline Project to create a pipeline for 30 8th grade students from the West Contra County and Oakland Unified School Districts to engage in robust academic preparation.
Under-represented minority information is obtained from applications and enrollment date, aggregated for applications, admits and matriculates, then compared to yearly data to measure progress toward the diversity goals. A qualitative analysis of the Summer Preparatory Seminar is used to evaluate the components of the program. Modifications are made based on the analysis to meet goals and objectives to increase student diversity. Although the self-study does not define outcome measures for diversity and the last data reported is from 2011-2012, site visitors were told that measurable goals and objectives are being developed and that the new 2015-2020 Strategic Plan will have baseline data and benchmarks to measure progress.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

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

This criterion is met. As illustrated in Table 2, the school offers a BA in public health; an MPH in 11 concentrations; an MA in biostatistics; an MS in environmental health sciences and epidemiology; a PhD in biostatistics, environmental health sciences, epidemiology, health policy and infectious diseases and immunity; a DrPH; and five joint degree programs. An accelerated 11-month MPH program is offered in maternal and child health, environmental health sciences, epidemiology, health policy and management and in the interdisciplinary program; 11-month programs are generally limited to students with a prior doctoral degree or concurrently enrolled in a doctoral degree program who have completed undergraduate and graduate work in specific courses outlined by each program.

Site visitors’ review of MPH syllabi from the concentration areas show appropriate breadth and depth of content. In addition to coursework in the five core public health knowledge areas, concentration-specific required coursework include topics in indoor air quality, molecular and genetic epidemiology, theoretical statistics, and risk analysis. Students complete the degree with advisor-approved electives, a practicum and a culminating experience.

During the site visit team’s meeting with students, they stated that they liked the flexibility of the curricula and being able to take courses that they are interested in.
Table 2. Instructional Matrix

<table>
<thead>
<tr>
<th>Degree</th>
<th>Academic</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bachelor Degrees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bachelor of Arts in Public Health through UC Berkeley College of Letters and Science</td>
<td></td>
<td>BA</td>
</tr>
<tr>
<td><strong>Masters Degrees</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biostatistics</td>
<td>MA</td>
<td>MPH</td>
</tr>
<tr>
<td>Epidemiology/Biostatistics</td>
<td></td>
<td>MPH</td>
</tr>
<tr>
<td>Environmental Health Sciences***</td>
<td>MS</td>
<td>MPH, 11-mo MPH</td>
</tr>
<tr>
<td>Epidemiology</td>
<td></td>
<td>MPH, 11-mo MPH</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>MS</td>
<td></td>
</tr>
<tr>
<td>Health and Social Behavior*</td>
<td></td>
<td>MPH</td>
</tr>
<tr>
<td>Health Policy and Management</td>
<td></td>
<td>MPH, 11-mo MPH</td>
</tr>
<tr>
<td>Infectious Diseases &amp; Vaccinology</td>
<td></td>
<td>MPH</td>
</tr>
<tr>
<td>Interdisciplinary Program</td>
<td></td>
<td>MPH</td>
</tr>
<tr>
<td>Maternal and Child Health*</td>
<td>MPH, 11-mo MPH</td>
<td></td>
</tr>
<tr>
<td>On-Campus/Online Program</td>
<td>MPH</td>
<td></td>
</tr>
<tr>
<td>Public Health Nutrition</td>
<td>MPH</td>
<td></td>
</tr>
<tr>
<td><strong>Combined Degrees</strong></td>
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<td></td>
</tr>
<tr>
<td>Business/Public Health</td>
<td>MBA/MPH</td>
<td></td>
</tr>
<tr>
<td>City Planning/Public Health</td>
<td>MCP/MPH</td>
<td></td>
</tr>
<tr>
<td>Journalism/Public Health</td>
<td>MJ/MPH</td>
<td></td>
</tr>
<tr>
<td>Public Policy/Public Health</td>
<td>MPP/MPH</td>
<td></td>
</tr>
<tr>
<td>Social Welfare/Public Health</td>
<td>MSW/MPH</td>
<td></td>
</tr>
<tr>
<td><strong>Intercampus Doctoral Level Programs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint Medical Program (Joint Degree/UCSF)</td>
<td>MS/MD</td>
<td>MPH/MD</td>
</tr>
<tr>
<td>UC San Francisco MD/MPH</td>
<td>MPH/MD</td>
<td></td>
</tr>
<tr>
<td>Stanford University MD/MPH</td>
<td>MPH/MD</td>
<td></td>
</tr>
<tr>
<td><strong>Specialty Areas</strong>**</td>
<td></td>
<td>Minor</td>
</tr>
<tr>
<td>Maternal and Child Health* - Aging</td>
<td>Minor</td>
<td></td>
</tr>
<tr>
<td>Maternal and Child Health* - International Health</td>
<td>Minor</td>
<td></td>
</tr>
<tr>
<td>Maternal and Child Health* - Multicultural Health</td>
<td>Minor</td>
<td></td>
</tr>
<tr>
<td><strong>Doctoral Degrees</strong></td>
<td></td>
<td>DrPH</td>
</tr>
<tr>
<td>Biostatistics</td>
<td>PhD</td>
<td></td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>PhD</td>
<td></td>
</tr>
<tr>
<td>Epidemiology</td>
<td>PhD</td>
<td></td>
</tr>
<tr>
<td>Health Services &amp; Policy Analysis</td>
<td>PhD</td>
<td></td>
</tr>
<tr>
<td>Infectious Diseases &amp; Immunity</td>
<td>PhD</td>
<td></td>
</tr>
</tbody>
</table>

*Housed in the SPH Division of Community Health and Human Development

**MCH masters and doctoral students may add a specialty area requiring nine units of course work. A minor is offered to students enrolled in other SPH two-year MPH or doctoral programs.

***A campus entity titled the Health, Environment and Development Program offers the MS Global Health and Environment degree which involves a cross-campus curriculum.

2.2 Program Length.

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

This criterion is met with commentary. All MPH degrees offered by the school require a minimum of 42 semester units. The accelerated 11-month MPH programs require 42 units while the professional MPH
program requires 48 semester units of coursework and public health practice. Fifteen contact hours equals one semester unit for didactic courses.

After review of the school’s website and the student handbooks for each program, site visitors noted an inconsistency among the curricular information provided to the students on the website and in the information provided in the student handbook. Though the information provided in the self-study states the required units for each degree, the curricula provided on the website does not account for all of the units. The school’s website indicates for example, that the online MPH in biostatistics requires 48 units for completion, however the curriculum provided only accounts for 36 units, and the student handbook does not list units for each individual course. This was also the case for the 11-month MPH degrees. The curriculum provided on the website listed all of the required 42 units, however the units for the practicum are not included.

The commentary relates to the potential for confusion as students matriculate through the programs. While it is true that during the meeting students expressed their satisfaction with the clarity of the curriculum, and they noted that their advisors were helpful in providing curricular information and keeping them on track, website and handbook information should be cleaned up and aligned to ensure consistency.

No MPH degrees have been awarded for fewer than 42 semester credit hours in the past three years.

2.3 Public Health Core Knowledge.

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

This criterion is met. All master's-level professional degree programs require that students take at least one course in each of the five core areas of public health (breadth courses) as displayed in Table 3. Many students enter the DrPH program with an MPH. Students without an MPH must take prerequisite courses, which include the school’s master’s-level breadth courses, in addition to their required doctoral level courses.

Site visitors noted concerns with the core biostatistics course (PH 142). At the time of the review, this course was an undergraduate course that both undergraduate and graduate students take as one of the five breadth courses. Site visitors’ review of the syllabus and competencies indicated that the competencies and learning objectives appeared to be set at an undergraduate level rather than at a master’s level. Faculty stated that there were two distinct sections of the course, allowing the undergraduate students to be taught separately from the MPH students. However, the section of the PH 142 biostatistics course that the master's students take did not allow the master's students to gain
experience in using statistical software. Students stated that they were unsatisfied with the fact that they were not using statistical software and had to learn different statistical methods by hand, and that the course does not provide the skills that they think a master's student should acquire. Faculty members stated that they do not consider it a disadvantage to have both undergraduate and graduate students in the same classroom. Faculty members also stated that they have noticed the MPH students benefiting from the undergraduate students’ skills in manipulating formulas, and the undergraduate students benefiting from the experience of the graduate students. Some students also expressed that it was not logical to take the course because it was at such a beginner level, so they tested out of having to take it. Site visitors concluded that the existing arrangement may have a negative effect on the level of public health training graduate students were receiving.

The school’s response to the site visit team’s report noted that the school has updated both the MPH competencies and the spring semester offering of PH142 to emphasize computer software training.

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>PH142: Introduction to Probability and Statistics</td>
<td>4</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>PH250A: Epidemiologic Methods</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>PH200C2: Environmental Health Sciences Breadth Course</td>
<td>2</td>
</tr>
<tr>
<td>Social &amp; Behavioral Sciences</td>
<td>PH200C3: Health and Social Behavior Breadth</td>
<td>2</td>
</tr>
<tr>
<td>Health Services Administration</td>
<td>PH200C1: Health Policy and Management Breadth Course</td>
<td>2</td>
</tr>
</tbody>
</table>

### 2.4 Practical Skills.

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

This criterion is met. All graduate professional public health degree students develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students’ areas of specialization. The SPH’s Center for Public Health Practice (CPHP) oversees all practicum placements and has a defined process for waiver requests. The requirements are outlined in the student handbook, which states that the waiver must be approved by the faculty graduate advisor. No waivers have been granted for the past seven years.

The practice requirement generally consists of a twelve-week experience, typically 480 hours, although specific requirements vary by program. The two-year professional MPH requires a three-month internship experience; the MPH Health Policy and Management concentration may opt to complete a six-month
internship. The one-year MPH requires students to complete a year-long research or leadership project focused on a student's concentration area while completing coursework. The on-campus/online MPH requires a 130-hour practicum. The concurrent and dual degree MPH includes a full-time summer field experience based on the same procedures and processes outlined for the two-year MPH student.

The SPH has two residency programs offered in conjunction with University of California San Francisco (UCSF): the two-year General Preventive Medicine and Public Health residency program and the Occupational and Environmental residency program which also requires two years of training. A total of five students have graduated from the General Preventive Medicine and Public Health residency program between 2011 through 2013. A total of four students have graduated from the Occupational and Environmental residency program between 2010 through 2012.

DrPH students complete a professional and/or research residency in a public health setting after their first full year of study that affords the opportunity to identify data for dissertation research, conduct analysis and participate in projects of interest.

Practice experiences are scheduled for the summer after the first year of study. The CPHP maintains a data base of approximately 4000 potential contacts based on relationships with community partners, employers, alumni and recruits. The SPH identifies 167 participating agencies and preceptors during fiscal year 2012/2013 by program: health policy management (24 reported activities), environmental health sciences (10 reported activities), maternal and child health (18 reported activities), health and social behavior (46 reported activities), infectious diseases and vaccinology (29 reported activities) and epidemiology/biostatistics (40 reported activities).

The CPHP has a staff of field supervisors, one for each concentration, who are typically master's trained individuals. Field supervisors have principal oversight for the public health practice requirement, while academic faculty develop the learning objectives, align the competencies and assist with site selection. CPHP begins recruitment for internships in November and posts opportunities in January. After formal interviews, CPHP field supervisors make the final placement decisions based on the organizations' placement matching recommendations and the students' ranking and placement preferences.

The SPH has written student guidelines that clearly establish the internship requirements and expectations. Preparation for the internship begins with orientation and spans the school year. Students complete a pre-internship self-assessment to identify areas in which they need help to strengthen the competencies required for their individual program. This four-page assessment clearly defines public health skills and competencies and allows students to rank their abilities on a five point Likert scale. During the development process, the career services manager is available to assist students to refine
their career options, internship options and resume development. Weekly workshops titled “What can you do with a public health degree?” expose students to public health professionals from all concentrations and a variety of health organizations. Students are also encouraged to conduct informational interviews with organizations of interest.

Written preceptor guidelines clearly state the internship requirements and expectations. A host organization is expected to have core public health concepts as its mission, expose students to a variety of disciplines and provide opportunities to develop a professional network and have capacity to manage the student. Agencies may be governmental, community based, educational, volunteer, non-profit and private; local, state, national or international; or research based. Preceptors are preferred to have an MPH or degree in a related field, are required to have professional expertise and demonstrated ability to mentor and teach students. CPHP provides all preceptors with written guidelines detailing the preceptor and student responsibilities. Webinars are available to introduce the field supervisors and review roles, responsibilities, timelines, and deliverables.

All students complete a formal internship agreement that establishes and clearly defines the competencies for their areas of concentration, objectives, activities, timeline and deliverables. The agreement is used both as a planning and communication tool and to evaluate progress and accomplishments. Upon completion, students are expected to complete a final project (case study, poster, presentation, or journal article) and submit a student evaluation of the internship site, preceptor, process and preparation. Preceptors are asked to review the evaluation with students to enhance professional growth.

Students and preceptors had high regard for the practicum process, and stated that the process was easy and beneficial to both interns and the organization.

In response to inquiries concerning the practice skills for the on-campus/on-line MPH practice requirements, site visitors were told that the preference is that students complete their practicum outside of their current professional activities and knowledge base to build a new network base and to experience other aspects of public health practice. However, students may perform the 130 hour practicum in their current place of work only if it is for separate activities that report to a different supervisor. Students in the 2105 summer cohort will be the first students required to complete the practicum. The online program also has a dedicated advisor who is responsible to assist the cohort through the field placement process.

2.5 Culminating Experience.

All graduate professional degree programs, both professional public health and other professional degree programs, identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.
This criterion is met with commentary. All students seeking a graduate professional degree are required to complete a culminating experience that is designed to demonstrate the ability to synthesize and integrate knowledge obtained through course work and the practicum.

Culminating experience requirements vary by degree program. For the two-year MPH degree, the culminating experience is a comprehensive examination and a thesis. The nature of the exam differs among the divisions and ranges from essay-based answers to short answer questions, to students writing a grant proposal, a critical review or conducting a meta-analysis. Other options include an oral presentation accompanied by an oral examination by faculty.

Site visitors reviewed student examples of various comprehensive exam options. The environmental health sciences comprehensive exam, which consists of four broad essay-styled questions, each of which covered a particular area of environmental health. Students provided responses, citing the research literature in their answers, but it was not apparent that the students are expected to draw from the five core areas of public health in presenting their answers to demonstrate integration of skills from across the curriculum.

For the 11-month MPH degree in environmental health sciences, epidemiology, health policy and management and the interdisciplinary MPH, students are required to complete a comprehensive examination consisting of written and oral components. Maternal and Child Health requires either a comprehensive examination or a capstone research project similar to the two-year student thesis. A written comprehensive proctored examination is also required for the on-campus/online MPH degree.

The commentary relates to the potential for variability of depth and breadth of competency assessment across comprehensive exam options. It is important to ensure that all options consistently require students to draw from skills across core and concentration areas.

The final degree requirement for the DrPH is a dissertation. As part of the dissertation, the student is expected to examine, analyze, and suggest a solution to a problem in public health practice. The dissertation format typically takes one of two forms: 1) a unified thesis; or 2) three publishable papers based on research bracketed by introductory, transitional and concluding sections within the papers.

### 2.6 Required Competencies

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The school must identify competencies for graduate professional public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).
This criterion is met. The school has identified a set of competencies for each concentration and developed accompanying matrices for each set of competencies.

The core competencies were originally developed in 2008, using the ASSPH core competencies as a framework. Faculty members had an opportunity to review the core competencies and provide input. All faculty members were involved in the process of reviewing and implementing the concentration competencies.

Site visitors identified a number of concerns relating to the school’s competencies. The school was aware of the compliance issues and had already begun a comprehensive process to address deficiencies during the site visit. The school’s response to the site visit team’s report indicates that the revision process is complete. The response addressed a fragmented and disorganized mapping process that had been in need of updating since 2008 and presented an updated, streamlined set of competencies. The issues identified by site visitors have been resolved by the replacement of the competency sets that were present at the time of the review, but the site visit team’s observations are presented below for documentation purposes.

The site visitors’ first concern related to the BA core competencies. The school identified an extensive list of 39 core competencies for the BA degree program. The competencies were mapped to the five core courses that undergraduate students are required to take and ranged in a list of one to 22 for each course. The competencies varied in specificity and skill level. For example, one of the competencies mapped to the epidemiology core course stated “Understanding of study design, including exposure outcome, problems of error and bias” and a competency mapped to the health policy core course stated “Understand Pharmaceuticals and Medicare Part D.” The school attempted to map two core competencies to the health policy course (3 units), while mapping only one competency to the biostatistics course (4 units). Site visitors found it difficult to verify that all of the competencies are thoroughly addressed throughout introductory coursework.

The school had identified 25 concentration competencies, categorized as either critical thinking skills, quantitative skills, communication skills, problem-solving skills, or specialized knowledge and lifelong learning skills. Each category had a range of three to six competencies.

Site visitors’ second concern related to the revision of the all core and concentration competencies. As stated by faculty members, the core competencies had not been significantly reviewed or updated since the last accreditation review cycle in 2008. This was also the case for most of the concentration competencies. Site visitors noted that environmental health, health policy and management and the
online MPH had developed best practices in regards to competency development and framing the curricula around the competencies, but other degree programs had not yet followed suit.

Site visitors’ third concern related to the core competencies. The school provided an extensive list of 72 core competencies (including 35 cross-cutting competencies), written across widely varying levels of specificity and skill level. For example, one of the biostatistics core competencies stated “Have a basic understanding of biostatistics” and another cross-cutting core competency stated “Integrate general biological and molecular concepts into public health.” The school attempted to map 32 core competencies to one three unit course, while mapping only three competencies to another three unit course. Site visitors found it difficult to verify that all of the competencies are thoroughly addressed in 16 credits of introductory coursework. Faculty acknowledged the need to streamline and consolidate the number of competencies into a more appropriate, effective and manageable system.

Site visitors’ fourth area of concern related to the extensive repetition among some of the epidemiology/biostatistics MPH, epidemiology MPH and health and social behavior MPH concentration-specific competencies. Six out of the eight biostatistics/epidemiology MPH concentration competencies were exactly the same competencies as the core competencies that are mapped to the undergraduate biostatistics core course PH142. Nine of the 10 epidemiology concentration competencies were exactly the same as the core competencies that were mapped to the epidemiology core course. All of the health and social behavior concentration competencies were exactly the same competencies that were listed as core competencies that mapped to the health and social behavior core course. Only the environmental health concentration competencies were different from the core competencies. Faculty members stated that it was assumed that the core competencies should have crossed over into the concentration competencies.

Site visitors’ fifth concern related to the MPH biostatistics concentration competencies. After careful review of the information provided in the self-study document, site visitors found that the biostatistics concentration did not have a distinct set of competencies. The competency set was identical to the epidemiology/biostatistics concentration.

Site visitors’ sixth concern relates to the apparent disconnect in using the competencies to guide the curriculum planning process as it related to the curricula for the academic biostatistics degrees. According to the matrices, several of the biostatistics MA and biostatistics PhD concentration competencies were not mapped to any of the courses, and the PhD competencies lacked an appropriately advanced and complex scope of knowledge. Examples of the MA competencies included “computational statistics,” “conduct research independently,” “longitudinal data analysis” and “causal inference.” The PhD concentration competencies included “conduct research independently” and “teach statistics at the
university level,” along with the concentration competencies for the MA degree. Faculty members admitted that they have had difficulty in developing the competencies and differentiating them from course-specific learning objectives, and that the idea of competencies was new to them because they do not consider the academic degrees to be public health degrees. Faculty also stated that it was difficult to map the courses to the competencies because the curriculum is flexible in that students choose which courses they want to take. Faculty members acknowledged that the process of developing the competencies highlight the inconsistencies in mapping the courses to the competencies and linking the competencies to assessment activities.

Site visitors’ final concern related to the large number of DrPH and interdisciplinary MPH competencies. The DrPH competencies did not show evidence of appropriate mapping of courses to the competencies. Competencies were mapped to a list of nine courses. The other 115 courses that students have the option to choose from to fulfill the degree requirements were not mapped to competencies at all. Site visitors could not verify, for example, that the course NST 103-Nutrient Function and Metabolism, one of the offered courses that is not mapped to the competencies, addresses the competency that states, “Initiate, organize, and pursue the investigation of significant problems in public health practice” or “Identify policy issues in public health and contribute to policy analysis and decision making”. Faculty members in the DrPH division stated that they review the courses, especially those that are not offered by the SPH, and they try to ensure that the courses will allow students to attain the DrPH competencies. This is also the case for the interdisciplinary MPH. The list of concentration competencies for the interdisciplinary MPH was long and covered a wide array of topics that were also difficult to map to all courses. The competency matrix mapped the competencies to only three courses, and all three syllabi indicate that the list of 41 competences will be covered in all three courses. Some examples of the interdisciplinary concentration competencies included “Prepare public health manuscript for peer reviewed publication” and “actively synthesize and reflect on course and project work across the MPH program to inform future career.” The self-study acknowledged the variability of the interdisciplinary competencies and noted that each individual student’s curriculum will be highly variable and dependent on their specific interest, which is the reasoning behind an extensive list of competencies. Faculty members in the interdisciplinary division stated that they develop a learning plan with each student, in which the student and faculty member maps out the courses that the student will take throughout the program and ensures that each course will provide the necessary competencies. Faculty also stated that they planned to work on streamlining the competencies.

Competencies are made available on the SPH website and are outlined in the student handbook for each degree program. In addition, the course syllabi list learning objectives for each required course within in each program.
2.7 Assessment Procedures.

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

This criterion is met with commentary. The school has established procedures beyond course grades to assess students’ mastery of competencies for each degree program and concentration.

According to the information provided in the self-study, the school uses evaluations and written reports from students, preceptors and field program supervisors and post-residency seminars to monitor competency attainment for each student. The school also uses the employer survey for gathering information about students’ mastery of competencies. The self-study mentions a competency portfolio that allows students to self-assess their competency attainment, however, this was not consistent across divisions, and when asked, students who met with the site visit team either did not know about the portfolio or stated that there was no follow up from faculty after the initial self-assessment. The self-study also mentions the exit survey and alumni survey as tools that are used to assess competency attainment, however after careful review of both surveys, site visitors noted that the exit survey assesses general skills, and the alumni survey does not ask students to assess competency attainment.

The school’s response to the site visit team’s report describes an updated method of assessing competencies within the BA degree. The degree now includes a capstone course piloted in the spring of 2016. It is designed to review, integrate and apply concepts and methods in the public health core courses. The school is also piloting an honors thesis seminar in 2016 composed of two courses, fall and spring, that address the conduct of research and technical skills aimed at assessing undergraduate knowledge in core courses.

The school has a systematic and consistent process for assessing competency attainment for MPH and DrPH students through the completion of the practicum across all divisions. Once a student has secured a field experience, the field supervisor assists the student with determining the competencies that they will achieve throughout their field experience. In the online MPH program, competency attainment is also assessed through the comprehensive exam. The health policy and management division also assesses competency attainment by creating a proposal document for the comprehensive exam that denotes the skills that students want to demonstrate.

The commentary relates to the perceived gap between the school’s well-articulated assessment process of doctoral and academic degree candidates and the operational reality, as some students and faculty had difficulty describing or characterizing the competency assessment process. The self-study states that the school monitors competency attainment for PhD students through the completion of a qualifying exam.
(written and oral components) and a dissertation. Each student must have a faculty committee, which provides guidance throughout the qualifying exam and dissertation and monitors the progress each student makes towards competency attainment. Academic degree faculty members stated that it was never on the agenda to assess the competencies beyond the course work, specifically through the dissertation. Faculty members also stated that they assessed proficiency in general content area such as students’ ability to conduct research, for example, but assessment methods for the concentration competencies were not specifically linked to the qualifying exam or the dissertation. During the meeting with students, several students stated that they were not required to link the concentration competencies to their dissertation or qualifying exams; they were only required to choose another area of public health outside of their degree concentration to be included in their dissertation.

Undergraduate students normally graduate from the BA program two years after enrollment. Students have the option of graduating at the end of any of the three semesters (spring, summer, and fall), and applying/matriculating at the beginning of any of the three semesters as well. Of the most recent academic year 2014-2015, there was graduation rate of 96%, with 25 students continuing.

All master’s-level students have a maximum allowable time of two years to graduate. PhD and DrPH students have five years. The graduation rate for the 2013-2014 cohort in the MPH programs is 88%. For the most recent academic year (2014-2015), there are a total of 152 continuing students in the MPH programs, 24 students have graduated. The 2013-2014 cohort in the MA program has achieved a graduation rate of 100%. For the most recent academic year (2013-2014), there are a total of 11 continuing students. The 2013-2014 cohort in the MS program has achieved a graduation rate of 100%, with six students continuing.

The 2010-2011 cohort in the DrPH program has achieved a graduation rate of 60%, with eight continuing students. The 2009-2010 cohort in the PhD programs has achieved a graduation rate of 84%, with 18 continuing students.

The school collects job placement data for all programs through the exit survey conducted at the time of graduation and then through follow-up emails to non-responders within six months of graduation. The school receives most of its job placement data through the annual career destinations survey of graduate degree students, administered by career services. There were a total of 141 MPH students who graduated in the academic year 2013-2014; 78% were employed; 15% were continuing education; 6% were actively seeking employment; and 1% was not seeking employment by choice. MA students who graduated during this same academic year had a 100% employment rate. Among the five MS students who graduated during this same academic year, 60% were employed, 20% were continuing education and 20% were not seeking employment. Among the 26 PhD students who graduated during this same
The school conducts assessments of its graduates’ ability to perform competencies through an employer survey. In summer 2014, the SPH distributed the employer survey to 1000 employers and asked them to provide feedback on the graduates’ level of proficiency the five core areas of public health, and to provide any curricular improvements that the school could make. A total of 159 employers responded to the survey. Twenty-five skills and competencies were listed and employers were asked to rank their employees proficiency within each skill and competency from 1-5, with 5 being the most proficient. The average percentage of rankings for SPH students was 3.89% with the highest rankings (4.25% or higher) in the following categories: cultural competency, problem solving, critical thinking, initiative, teamwork, and both oral and written communication. Five of these particular skills and competencies were noted as the most important for long-term success. Of the responders, 100% indicated they would recommend hiring SPH graduates to their colleagues.

During a meeting with employers and community stakeholders, employers, community partners and preceptors stated that graduates from the school were hardworking, dedicated and very competent, and that having interns and graduates from the SPH is very beneficial for their organizations.

2.8 Other Graduate Professional Degrees.

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

This criterion is not applicable.

2.9 Bachelor’s Degrees in Public Health.

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

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

Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses. Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.
Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor’s degree at the parent university. The experience may be tailored to students’ expected post-baccalaureate goals (e.g., graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

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

This criterion is met. The school offers one Bachelor of Arts degree (BA). Undergraduate students in the College of Letters and Science at UC Berkley can apply to major in public health after completing the lower division requirements, generally at the end of the sophomore year.

Beginning in the fall 2015, the BA students are required to take five, three- to four- semester unit core courses taught by school of public health faculty in order to become familiar with key public health concepts and methods. The core courses are: PH 142 Introduction of Probability and Statistics in Public Health, PH 150 an Introduction to Epidemiology, PH 150 B Introduction to Environmental Health, PH 150 D Introduction to Health Policy and Management and PH 150 E Community Health And Human Development.

In addition to the required coursework, undergraduate students are advised to choose elective courses in one or two areas of study. These elective undergraduate courses include statistics, public health-relevant courses such as arthropod-borne zoonotic diseases, air pollution emission and controls, environmental microbiology, energy and society, health economics and public-policy and population and poverty.

The Student Services Office provides advising services for undergraduate students. A peer counseling group provides a chance for potential students to learn from and share concerns with a peer. This group estimates that 25% of potential students take advantage of this opportunity. When appropriate, undergraduate students are connected to faculty for advising and participation in research. The school offers a health career opportunity program that provides the public health majors with career and graduate school advising, mentorship, practice based coursework and enrichment programs. The enrichment programs include a primary care and public health exposure course, a summer research program with school of public health faculty, a GRE preparation program and a minorities in health conference.
The school has an informative website for the undergraduate program which describes the program, addresses course requirements and provides examples of the curricula students can follow.

In addition to the Health Career Opportunity Program and the Center for Public Health Practice, the undergraduates have opportunities for paid and volunteer research participation through summer internships and other experiences. These include the Health Career Opportunity Program Summer Research Program, which offers undergraduate students opportunity to conduct research with a faculty member, and the Educational Experiences for Research Program, which allows students to conduct environmental health research with a faculty member.

Although the capstone was in development at the time of the site visit, the school’s response to the site visit team’s report documents that BA students now complete an appropriate capstone experience with coursework that integrates and synthesizes public health knowledge and competencies.

2.10 Other Bachelor’s Degrees.

If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

This criterion is not applicable.

2.11 Academic Degrees.

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

This criterion is partially met. The school offers academic degrees at the master’s and doctoral levels which include the MA and PhD in Biostatistics, MS and PhD in Environmental Health Science, MS and PhD in Epidemiology, MS/MD, PhD in Health Services and Policy Analysis and a PhD in Infectious Diseases and Immunity. The Graduate Division is responsible for awarding all academic degrees. All students in the academic degree programs are required to complete course content in only two of the five core areas of public health and to have professional experience prior to admission.

Each academic degree program requires a culminating experience. For the MS and MA degrees, the experience may be in different forms for each degree program. The most commonly used method is a thesis. All PhD students are required to pass a qualifying examination and develop a written research dissertation concluding with an oral dissertation defense. These requirements provide an adequate level of rigor as culminating experiences.

The concern is that academic degree students are not being exposed to concepts in the areas of environmental health, the social and behavioral sciences and health management and policy either
through individual courses or inclusion of concepts in these areas in other courses that they are required to take. During the site visit, a faculty member stated that the PhD is an academic degree and not a public health degree. However, the doctoral degrees are included in the unit of accreditation and thus they must meet these requirements even though the PhD is provided through the Graduate Division.

School administration noted that the granting of these degrees by the Berkeley Graduate Division does create challenges with regard to decision-making and governance of these degrees for students and faculty. However, the Office of the Assistant Dean for Students is responding effectively to these challenges.

2.12 Doctoral Degrees.

The school shall offer at least three doctoral degree programs that are relevant to three of the five areas of basic public health knowledge.

This criterion is met. The school offers a school-wide DrPH and PhD degrees in five areas: biostatistics, environmental health sciences, epidemiology, health services & policy analysis, and infectious diseases and immunity.

For academic year 2013 to 2014, there were 113 PhD and 27 DrPH doctoral students. The school’s PhD students receive support for tuition and stipends from a variety of sources, which include serving as graduate student instructors and graduate student researchers. Other sources of funding are available, including training grants in epidemiology and positions funded by faculty research grants.

Both doctoral and master's-level course numbers are labeled as 200-level courses. Though this is the case, doctoral-level courses are distinguishable from master's-level courses. For example, PH 224A Healthcare Organizations and Environments is a master's-level course and PH224C Advanced Healthcare Organizations and Environments is a doctoral-level course. Master level students are able to enroll in doctoral-level courses, and with the permission of the instructor doctoral students could opt to take a master's-level course if needed. Each doctoral student works with his or her advisor to determine the course work that should be taken to reach the student's goal for the degree.

The course requirements for the PhD students differ for each of the five degree programs, although there are some common courses across the degree programs, such as the epidemiology course requirement. Doctoral students in each program are required to complete a doctoral seminar along with advanced courses appropriate to the student's area of interest and concentration.

DrPH students are required to attend the DrPH seminar every semester of their first two years in the program and then attend a post qualifying exam seminar. Students are also required to participate in a DrPH leadership seminar during the first two years of the program. The DrPH students also complete a
professional and or research residency in a public health setting during the summer after their first year. This provides an opportunity to identify data for dissertation research and conduct analyses and participate in specific projects of interest to them.

2.13 Joint Degrees.

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

This criterion is met. The college has developed twelve joint degree programs. Five of these programs are viewed as concurrent degrees, two of the concurrent degrees are also offered as dual degrees and five others are referred to as joint degree programs.

Concurrent degrees require that students are accepted and enrolled in both degree programs. The concurrent degree programs include: the MBA/MPH, the MCP/MPH, the MPP/MPH, the MSW/MPH and the MJ/MPH. The MSW/MPH and the MJ/MPH are also offered as dual degrees. Students acquiring a dual degree must be already enrolled in one school or department and do not have the option of sharing credits. Each of these degree programs has been negotiated with and approved by the collaborating college and the university. Students must meet all the requirements for the MPH degree that is taken concurrently with the other professional degree. Both concurrent and dual degree programs require that students complete SPH core knowledge breadth courses, concentration-specific courses, an approved public health practice experience and the culminating experience requirement specific to their concentration.

The school participates with the University of California-San Francisco and Stanford University in three joint degree programs for medical students. During their medical school years at each university, students may apply to the MD/MPH joint degree program. The MPH in both cases is offered as an 11-month, 42 credit hour intensive program and requires the completion of course work in the five core areas, concentration-specific courses, a comprehensive exam as the culminating experience and a practice experience through a yearlong leadership or research project with a public health agency or a research group. The school also offers residents at UCSF in the preventive medicine and occupational and environmental health residencies the opportunity to complete the MPH degree. In both cases, students complete the 11-month MPH program and one year of supervised practice experience. The school also has a five-year MS/MD program with the UCSF campus. Students are required to complete all of the course requirements, including a practice experience and culminating experience, for the standalone MS degree.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is met. The college has one online program: the On-Campus/Online Professional MPH degree. The school offers this program in response to the state, national and global shortage of trained public health professionals.

The degree program consists of 42 credit hours and is intended to be completed in 2.5 years. Students are required to take a total of 14 courses, including the breadth courses. The school recommends that students take four additional courses in their second year (Evaluation of Health and Social Programs, Mass Communication in Public Health, Ethnic and Cultural Diversity in Public Health, and Health Care Organizations and Management). The program also includes two mandatory eight-day on-campus experiences associated with two courses: Health Policy and Management and the Interdisciplinary Seminar. The online courses are primarily asynchronous, and the school provides appropriate methods to verify student registration and participation by requiring students to log into their accounts using their CalNet ID credentials. Beginning with the summer 2015 cohort, students are required to complete a 130 contact hour practicum. A detailed structure has been created for this practicum including a proposal, an MOU, reflection papers, a final placement report and a preceptor affidavit.

Courses are taught by school faculty with the assistance of graduate student instructors in a 27:1 ratio. Course material is available 24/7 and students may review material presented at any time. Students have access to all library resources through a proxy server or the campus VPN.

The methods of evaluating student performance are the same as those used for the on-campus degree. Online students must complete a proctored final examination for each course and a comprehensive examination at the end of the program. Students have the same opportunity to evaluate course content, format and instructors in the same manner as on-campus students. Like campus-based courses, students complete a mid-course evaluation to provide course instructors with insights about course delivery methods and instructional approaches. Alumni of the program who met with site visitors indicated high levels of satisfaction with the content, delivery and flexibility of the degree program.
3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The Berkeley School of Public Health has a strong research program. Review of the data provided in the resource file indicated that between academic year 2011-2012 and 2013-2014 there have been 286 funded research projects for 54 members of the faculty complement, which ranged in size from 67 to 73 over this period.

The school follows the well-established policies and procedures of the university for its research activities. The school receives administrative support for research from a newly-instituted Campus Shared Services Unit, which oversees both pre-and post-award processes for all SPH research awards and extramural funding. Faculty members expressed that though centralization has improved some services, research support for the school still needs to be refined. Purchasing, hiring and payroll processes are done by other units within the Shared Services Unit. Staff are devoted to supporting the research conducted by the school’s faculty.

The school evaluates the success of its research activities by tracking the number of research proposals submitted, the total dollar amounts requested and the total dollar amounts awarded. As documented in the self-study, the school compares itself in these categories with four other UC Berkeley units that rank highly at the university. They are the College of Engineering, the College of Natural Resources, the School of Social Welfare and the Department of Chemistry. The school does not present targets for performance; rather they list the number of proposals and total dollar amounts. The school ranks second in all three categories and during the site visit administrators revealed that on a per capita basis the school ranks number 1 in research grant dollars generated by its faculty.

Another measure of research success is the number of publications stemming from the faculty. Since 2009, School Academic Senate faculty members have authored nearly 1700 publications and obtained over 28,000 citations. When considering both Academic Senate and non-senate faculty, publications reach above 4000 and citations over 50,000. However data was not presented with regard to the percent of faculty who are publishing.

Students are actively involved in the research projects of the faculty. All doctoral and most academic master’s degree students engage in public health research. A thesis or dissertation is required of all doctoral students. Opportunities for research are available to master’s students through courses and
graduate student research appointments in the school as well as through the internship placement programs. Of the 90 internship placements that occurred in the summer of 2013, 29% were in university community-based research programs. Faculty are encouraged to include graduate student research positions in the budgets of their research proposals. Analysis of the 286 funded research projects listed in the resource file indicated that 68% or 193 involved students. The number of graduate student research appointments in school has decreased from 100 in 2012 to 76 in 2015. During the site visit discussion, faculty members did not know the reasons for this decline.

The research of the faculty also involves collaboration with various health agencies and community-based organizations. Analysis of the 286 research projects listed in the resource file indicated that 31% or 88 of the projects were considered to be community-based. The school has numerous programs and centers focused on community-based research, collaboration and interaction which includes the Best Babies Zone initiative, the Bixby Center for Population, Health and Sustainability, the Petris Center On Health Care Markets & Consumer Welfare, the Alcohol Research Group, the Center for Family and Community Health, The Forum for Collaborative HIV Research, the Center for the Health Assessment of Mothers and Children of Salinas and the Center for Global Public Health.

3.2 Service.

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

This criterion is met. The SPH states that service is integral to the school’s tripartite mission of teaching, research and service with and a commitment from faculty, staff and students. Faculty are expected to participate in professional and community service outside the university as part of their requirements for promotion and tenure and to include specific details on their curricula vitae when seeking promotion.

The UC Academic Senate policies state that a candidate for promotion or tenure must be assessed on their level of university and public service. These policies are provided and outlined in the UC Academic Personnel Manual and the General University Policy Regarding Academic Appointees. The SPH does not set standard measures for faculty involvement in service because that element of a faculty member’s career is distinguished during the review process for advancement and is based on individual plans and goals. The SPH identifies qualitative measures of success for the faculty service activities in comparison to the 2008-2012 strategic plan. These reported service activities for academic years 2009-2010 through 2012-2013 are considered on-going. The outcome measures are based on years of achievement and the data predominately details state and national activities.

A review of primary faculty CVs confirms involvement in a wide variety of activities including: professional and scientific organization memberships, editors and reviewers of scholarly journals and other
publications, advisory board and panel members, government service and service to non-profits and private committees and consultations with public and private organizations. As recorded for academic year 2011-2012 to 2103-2104, 62 faculty members, were involved in unfunded service activities in the state, national and international arenas. The self-study reports 24 funded service activities conducted by five faculty for the last three academic year academic years with a total of $3,250,778 during 2013-2014. Of these funded activities, 22 are community-based efforts and 19 afforded student involvement.

The SPH supports community-based service thorough a variety of methods including the Resource Center on Aging which provides resources for field research and current information on aging in the community; the Health Research for Action (HRA), which translates the SPH’s research findings into resources and programs for the public and works to reduce health disparities and empower communities; and the UC Berkeley Wellness Letter which provides the public with practical advice for daily living.

A review of the funded service activities documents approximately 80% student involvement. Student service activities include collaboration with local health departments and non-profit organizations, including: the Asian Pacific Environmental Network, LaClinica de la Raza, and the West Oakland Environmental Indicators Project. Students participate in the Multicultural Health in Action group focused on the professional development of students in projects related to multi-cultural health and health disparities. Students have partnered with the City of Berkeley Public Health Division, and have participated in the Center for Health Leadership Fellows program which requires students to participate in community projects as part of their program deliverables. Students also have opportunities for paid summer internships such as the Bixby Center for Population, Health and Sustainability. In 2015, two awards were given for international work in Mexico and Niger. A component of freshman student orientation includes a Volunteer Mobilization Day held in conjunction with the City of Berkeley to work with childcare, homeless, and public health sites.

During the site visit, discussions were held concerning service activities by faculty and students. Faculty indicated that they believe student involvement to be significant but they don’t believe there is one location or mechanism to track service across concentrations. Although quantitative data is not available and tracking faculty and student service activities has been a challenge, faculty indicate they believe that approximately 50% of the students are involved in volunteer service activities outside their internships and practice experience and that approximately 80% of epidemiology and biostatistics students participated in addressing the recent California measles outbreak.

Community partners indicated that they rely on the faculty, request assistance frequently and provided an example for dealing with asthma for low income residents throughout the county.
3.3 Workforce Development.

The school shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

This criterion is met. The SPH has a robust workforce development program that assesses and provides competency-based continuing education and workforce development for alumni and local and statewide practitioners. Training is provided by a series of centers and organizations with a reported outreach in 2013-2014 of over 80 trainings to 8,485 participants. Training activities are provide by a variety of methods including accredited continuing education courses, community and professional development continuing education conferences, workshops, lectures, seminars, webinars and face-to-face and online training classes.

The California-Pacific Public Health Training Center conducted assessments of health employer training needs in California, Hawaii and the Pacific Islands using the Council on Linkages Competencies. The SPH developed work with three surrounding local health departments and local community health centers to deliver custom trainings based on their priority assessed needs.

The SPH has several major programs and centers to address workforce development including the following:

- The Center for Public Health Practice has been assessing the needs of the public health workforce and providing competency based trainings to address them through participation in the National Public Health Training Center Network.
- The UC Berkeley Extension Office manages the concurrent enrollment process for 18 regularly scheduled SPH public health courses accessible by health professional and community individuals.
- The Center for Occupational and Environmental Health offers a variety of courses, symposia and summer institutes for continuing education in multidisciplinary areas like industrial hygiene, occupational safety, hazardous substance training and agricultural safety and health.
- The Labor Occupational Health Program is a community outreach program that addresses health and safety needs in nearly every industry, from healthcare to agriculture to construction.
- The Maternal and Child Health Nutrition Training Program provides a series of public health nutrition and leadership online training modules to provide continuing education to place-based public health nutritionists in the field.

Faculty members provided additional examples of community health partnerships and projects including emergency preparedness communications for deaf and hard of hearing populations; screening for developmental disabilities among children in San Francisco clinics, a partnership with Sutter Health Care
system; statewide education of parents of children 0-5 to improve parenting skills; and needs assessments of Hmong, Korean and Chinese communities, a collaboration with local health departments and the Contra Costs Regional Medical Center.

The SPH also provides trainings to students and professionals as part of its on-campus “Professional Development and Workshop Series.” Faculty involvement includes providing expert advisors to the Let’s Get Healthy California Task Force; leadership roles in the State Innovation Model; and serving as expert advisors and analytic staff for the Berkeley Forum for Improving California’s Healthcare Delivery System.

Evaluations are used to assess the quality of training and future training needs. During the site visit, school administration provided a five-year continuing education programs progress summary (2010-2014 reporting years) to the team. The progress summary reports 3121 course offerings, a total of 9,869 trainees by occupations such as physicians, industrial hygienists, safety professionals and health occupations. The data also shows that there were approximately 771 participants in the UCB extension courses. The SPH reports 24 funded activities by eight faculty including 13 (54%) community based activities and 13 (54%) with student participation.

The SPH offers certificate programs in Alcohol and Drug Studies and the Global Health Leadership Forum. The Certificate Program in Alcohol and Drug Abuse Studies prepares students for a career in addictions counseling or enhances expertise of those currently doing counseling and is approved by the California Foundation for the Advancement of Addiction Professionals and the educational board for California Association of Alcoholism and Drug Abuse Counselors. The Global Health Leadership Forum is an executive education certificate program being offered in partnership with the Economics and Health Research Center of Barcelona’s Universitat Pompeu Fabra, The King’s Fund in London and the Healthcare Leadership College in Singapore. This program is for experienced healthcare leaders/executives and focuses on globally-sourced innovations in health policy, technology, and management. In the past decade, there have been 456 session attendees from fifty-seven countries; 136 of the 456 participants attended two sessions and received an earned certificate from UC Berkeley. In order to receive a certificate, leaders must give a presentation at their second session on a pertinent project or program. Certificates were awarded to 13 participants in 2010, 15 in 2011, 23 in 2012, three in 2013, and five in 2014.

The school’s response to the site visit team reports documents the establishment of a continuing education committee with a focus on workforce development.
4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The school has primary faculty that are highly qualified to carry out its mission, research practice and academic responsibilities. Their training provides depth in the disciplines central to the research, teaching and practice activities of the school. The school’s primary faculty includes the ranks of assistant, associate and full professor; assistant, associate and full adjunct professor; assistant, associate and full professor in residence; clinical professor; and lecturer. The assistant, associate and professor faculty are either tenure-track or tenured. The other faculty ranks are non-tenure track. Seventeen of the 73 faculty are non-tenure. All but two of the 73 faculty have doctoral degrees which include PhD, MD, ScD and DrPH.

In addition to the primary faculty, the school has a total of 63 other faculty. These faculty devote a range of 0.05 to 0.5 FTE to the school. They hold titles that include adjunct assistant, associate or full professor and instructor. The majority of the faculty have doctoral degrees, eg, PhD, MD, JD, DrPH; only 11 had master’s-level degrees (MS, MSW, MA, MBA, MPH). Faculty members have training in areas central to the teaching disciplines of the school and as such they add important expertise and increase the depth in the disciplines. Most of the faculty are from the UC Berkeley campus and UCSF, but some are practitioners who work in the local community. Their participation in the teaching and research programs of the school complements the expertise of the primary faculty and enriches opportunities for students for practica, obtaining jobs after graduation and increasing their networking.

The self-study provides a table showing outcome measures used to evaluate the qualifications of the faculty. It includes measures such as continuing promotion for academic senate rank faculty and success in research as indicated by the total amount of research project dollars, which declined in 2013-2014. However, the targets are indicated as ongoing and thus lack quantitative targets or a baseline from which to assess progress.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The school has well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty and to support the professional development and advancement of faculty.
The employment relationship of faculty with the university is developed, implemented and managed by the office of Academic Personnel and Programs and is published in hard copy and online in the Academic Personnel Manual (APM). The university also publishes a University of California Faculty Manual, which describes faculty rights and responsibilities. The appendix of the handbook contains sections of the APM regarding appointment, advancement, teaching, student relations, research, outside professional activities and grievance procedures. The school has developed the Procedures for Academic Advancement guide, which describes actions needed for merit increases and promotions for all faculty at all levels except lecturers. Lecturers are represented by the American Federation of Teachers through an MOU with the university.

The school measures faculty performance through criteria which vary with the type of faculty appointment. Senate faculty and adjunct faculty employ the same criteria regarding teaching, research and service but adjunct faculty weighting may vary depending on their emphasis on teaching or research. The criteria for clinical professors are based on expertise in public health practice and the direct provision, management, and evaluation of services to the public. Lecturer criteria rely on teaching ability and professional competence in specialized curricular areas. Faculty members are judged by their colleagues at the time of appointment, for merit increases, through a mid-career appraisal and for promotion. The Faculty Senate, campus and school committees play an important role in this process. A uniform system of course evaluation is used by the school for all courses and provides feedback to faculty for evaluation and development.

For junior faculty members, development begins through initial start-up funds which may include summer salary, reduced teaching or participation in two endowed chairs for junior faculty. In addition, each junior faculty member chooses a mentor who is a full or emeritus professor. The mentors review teaching evaluations, research proposals and research products and provide an overall evaluation to the junior faculty members. Other resources are provided to all faculty members through the Berkeley Campus Office of Educational Development, the Academic Senate Committee on Teaching and the Academic Senate Committee on Research. These units provide special resources and grants to support development of both junior and senior faculty members. Faculty indicated that this system of development was adequate and effective for their advancement and growth as professionals.

4.3 Student Recruitment and Admissions.

The school shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the school’s various learning activities, which will enable each of them to develop competence for a career in public health.
This criterion is met. The school has a well-defined process to recruit students for public health enrollment and maintains a functional, informative website to assist prospective applicants with the application process, application requirements, prospective student events, and fees and financial aid.

The multi-faceted recruitment process includes a professionally developed, comprehensive compendium that outlines concentration areas, financial aid, life at Berkeley, a summary of available resources, recruitment fairs, special invitation to career events sponsored by pre-health advisors and student organizations, a one-day annual public health conference for prospective students, a two-day Graduate Student Diversity Day, pre-applications advising group sessions offered three times per year and exhibitions at professional associations and organizations. The self-study included samples of recruitment materials as well as copy of the compendium that was given to each site visitor.

The SPH’s Educational Policy and Curriculum Committee has overall responsibility for admissions to all degree programs. This committee is comprised of a representative from each area of concentration and is chaired by a faculty member appointed by the dean. This committee oversees admission decisions, approves/disapproves requests for exception and redirects applicants for alternate review by other concentrations if appropriate. The SPH appoints a head graduate advisor (associate dean for student services) to oversee all degree programs, monitor the impact of admissions on students and faculty and serve as liaison with the Graduate Division. The Student Services Unit assists in receiving and assembling applications and determines admissibility/non-admissibility according to UC Berkeley standards. All complete applications regardless of admissibility, are sent to the faculty admissions committee in the appropriate area of concentration for review. Each academic group has its own faculty admissions committee and a set of standards explicit to the degree. The Graduate Division designates the number of degree offers of admission the SPH may make for the next academic year based on statistical records maintained over previous admission cycles.

For admission to the MPH degree, applicants must hold a bachelor’s degree or equivalent from an institution of acceptable standing and have knowledge in the biological, physical or social sciences and must have attained a B (3.0) grade point average for work completed after the first two years of a bachelor’s program and in all post-baccalaureate course work. On average, successful applicants have a GRE score above the 60th percentile and a grade point average of 3.5. Applicants from non-English speaking countries must pass the TOEFL within two years of application and score 570 for the paper-based test or 90 for the internet-based test. Applicants also submit three letters of recommendation, a statement of purpose and a personal history statement. Applicants are accepted for the fall semester only.

The online/on-campus MPH program requires at least two-years of post-baccalaureate work experience, although prospective students may petition for an exception based on exemplary work experience.
completed before attain a bachelor’s degree. The alternate work experience does not have to include public health but can include advocacy, environmental sciences, marketing, journalism, housing and municipal administration.

DrPH program applicants must typically have an MPH degree from an accredited school of public health and must have completed two years or more of professional experience in the public health fields showing evidence of leadership. Applicants with a master’s degree or higher outside the public health must make up any deficiencies in course content once accepted.

To declare an undergraduate major in public health, prospective students must complete all of the lower division prerequisites (mathematics, biology, and social sciences) and obtain a grade of at least a B- in general biology and submit an application essay. In the application essay, students describe the pathway that led them to an interest in this field of study, their experience relevant to public health (including volunteering) and their long-term public health ambitions. All applications are reviewed by public health faculty.

As documented in the self-study, the undergraduate public health BA program increased from a headcount of 128 in 2011-2012 to 169 in 2013-2014. Several MPH concentration areas experienced increases in headcount over a similar timeframe: epidemiology increased from 14 to 22, epidemiology/biostatistics increased from 22 to 31, health & social behavior increased from 28 to 37. The online/on-campus program experienced rapid growth and increased from eight in 2011-12 to 76 in 2013-2014.

During a meeting with students, they expressed satisfaction with the admissions process and stated that the process was easy and clear, that faculty are willing to answer questions and are open to communicating through email.

The SPH notes that financial assistance is a challenge. The school desires to improve its yield by identifying funding sources and making financial assistance offers early in the admission process.

4.4 Advising and Career Counseling.

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

This criterion is met. The SPH recognizes student advising as an important part of the faculty teaching role and requires that all faculty serve as faculty advisors and assist students in developing an optimal program that meets the degree requirements and ensures flexibility to meet individual goals. The SPH has a mentorship program to train new faculty without prior advising experience.
Faculty advising responsibilities are defined in the Faculty Code of Conduct, with the expectation that all faculty post and keep regular office hours open to students without appointments. Faculty and students are expected to meet during the first week of school to review core and cross-cutting competencies required for the degree program and any program specific competencies. The student and advisor meet periodically throughout the school year and again at the end of the final year in the program to assess the attainment of the core competencies. The SPH supplements the one-on-one advising and promotes mechanisms to increase student/faculty interaction via social events and program seminars to address student questions and concerns. On occasion faculty will conduct group advisement sessions.

In response to inquiries about advising undergraduate students, faculty and the leadership team responded that the overarching goal is for students to have the opportunity for academic advisement by faculty but general advising is provided by the assistant dean of student services. Undergraduate advising starts the first year that students show interest in the public health major. Once they declare the major, guidance is given to map out the courses and a career trajectory. Currently, staff members manage a case load of 440 students. Finally, there are other options for the undergraduate to have non-classroom interaction with faculty, such as events sponsored by the Undergraduate Management Committee for Public Health Majors.

When asked about integrating advising into the planned baccalaureate capstone field experience, faculty indicated the intent to integrate across areas in a new course that uses a case-based approach to collect information and develop strategies and to invite community partners to join team meetings and provide real world topic areas such as the development of options for homeless people. Furthermore, they indicated that the cohort is too big for individual placement and that the faculty are pilot testing the class now.

The SPH Center for Public Health Practice Career Services Office assists graduate students and alumni to pursue gainful public health employment. Career Services sponsors programs in career planning, interview preparation, resume writing and job search strategies and workshops that allow students to interact with employers and public health professionals. A weekly newsletter is emailed to students with upcoming deadlines, career exploration opportunities and career resources for students conducting research. Individual career counseling appointments include career decision-making and job search strategies, resume and cover letter reviews, mock-interviews, support to evaluate job offers, assistance to complete medical school applications and assessments instruments to evaluate personality, interests, skills, strengths and values as they relate to career choices. Because the Career Services Office is located within the Center for Public Health Practice, the SPH is able to integrate the career services with
field supervisors, the leadership team, staff and academic advisors to create a student-centered approach to career, professional and leadership development of the student.

To assist with career counseling services for the newly developed on-campus/online MPH program, the Career Services Office expanded networking opportunities with alumni and employers to the geographical areas where the students reside. Career Services also conducted a needs assessment survey of the online students and developed a plan to provide comparable services in a variety of delivery modes including phone, Skype, email, webinar, and video conferencing. These new delivery modes are now available to all students.

In spring 2014, the SPH surveyed 92 students who participated in individual counseling appointments to provide feedback and make recommendations for improvements. A total of 41 (44.5%) students responded. All respondents indicated that “the counselor was supportive and helpful” and “my questions and concerns were addressed.” The qualitative request for feedback or suggestions was overwhelmingly positive and supportive of the career counseling services.

Students told site visitors that they were satisfied with advising services, believed that faculty made concerted efforts to be available and confirmed that faculty assisted students with individual course sequences.

The SPH has a clearly defined process to address student grievances. The procedures are outlined in the student handbook and include possible resolution through an informal, formal or appeal process. The student handbooks are readily available to students on the university website. UC Berkeley regulations state that the grounds for grievances are as follow: application of non-academic criteria, such as: considerations of race, politics, religion, sex or other criteria not directly reflective of performance related to course requirements; sexual harassment; improper academic procedures that unfairly affect a student’s grade. In the event of a grievance or dispute, students are encouraged to contact the university’s Ombudsman Office for Student and Postdoctoral Appointees. The SPH has not had a formal grievance in the last three years.
Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH
ACCREDITATION SITE VISIT

University of California, Berkeley
School of Public Health

September 30 – October 2, 2015

Wednesday, September 30, 2015

9:15 am  Meeting with Self-Study Committee
Stef Bertozzi
Joan Bloom
Jeff Oxendine
Bill Satariano
Abby Rincon
Sylvia Guendelman
Mark Horton
Katharine Hammond
Shederick McClendon
Lia Fernald
Darlene Francis
Kris Madsen
Emily Ozer
Priya Mehta
Stephen Shortell

10:15 am  Break

10:30 am  Meeting with Core Leadership Team
Katharine Hammond
Ann Keller
Emily Ozer
Bill Jagust
John Balmes
Lee Riley
Kris Madsen
Ellen Eisen
David Declercq
Theresa Richmond
Stef Bertozzi
Abby Rincon
Darlene Francis
Shederick McClendon
Joan Bloom
Lisa Barcellos

11:45 am  Break

12:00 pm  Lunch with Students
Cailey Gibson
Lee Ann Hill
Jennifer Sisto
Dustin Glasner
Lauren Valdez
Vicky Gomez
Alasdair Cohen
Sam Gunther
David Molmen
Samantha Ngo
Ajay Pillariesette
Lucia Catherin Petito
Louisa Smith
Robert Snyder
1:30 pm  Break

1:45 pm  Meeting with Instructional Programs Group 1
Bill Satariano  
Lisa Barcellos  
Maureen Lahiff  
Charlotte Smith  
Katharine Hammond  
Kirk Smith  
Jennifer Ahern  
Richard Stephens  
Coco Auerswald  
Joan Bloom  
Shederick McClendon

3:00 pm  Break

3:15 pm  Team Executive Session and Resource File Review

5:00 pm  Adjourn

Thursday, October 1, 2015

8:30 am  Meeting with Faculty Related to Research, Service, Workforce Development
Lia Fernald  
Priya Mehta  
Richard Scheffler  
Jeff Oxendine  
Jennifer Lachance  
John Baines  
Laura Stock  
Sylvia Guendelman

9:45 am  Break

10:00 am  Meeting with Instructional Programs Group 2
Lisa Barcellos  
Shederick McClendon  
Kris Madsen  
Joan Bloom  
Alan Hubbard  
Ellen Eisen  
Jennifer Ahern  
Kim MacPherson  
Nap Hosang  
Michael Sholinbeck  
Abby Rincon

11:15 am  Break & Resource File Review

12:00 pm  Lunch with Alumni and Community Stakeholders (preceptors, community advisors, employers of alumni)
Mark Horton  
Mary Jo Potter  
Ken Taymor  
Heidi M Bauer  
Karen Ben-Moshe  
Catherine A. Cella  
Chuck McKinney  
Pracilla Chu  
Mariah Lafleur  
Gabino Arredondo  
Edward L. Murphy  
Iman Nazeer-Simmons  
Lucinda Bazile  
Sharon O'Hara  
Sheila Baxter  
Amanda Clarke  
Daniel Madragal
1:30 pm  Break
1:45 pm  Meet with Leadership of University
Claude Steele
2:45 pm  Break
3:00 pm  Meeting with Faculty Related to Faculty Issues, Student Recruitment and Advising
Nick Jewell
Eva Harris
Jodi Halpern
Ray Catalano
Trudy Buehring
Julie Niedermayr
Barbara Abrams
Shederick McClendon
Joan Bloom
Abby Rincon
Darlene Francis
Jeff Oxendine
Ruthann Haffke
4:00 pm  Break
4:15 pm  Executive Session & Resource File Review
5:30 pm  Adjourn

Friday, October 2, 2015
8:30 am  Executive Session and Report Preparation
11:00 am  Exit Interview