



SUNY
DOWNSTATE
Medical Center

Final
Self-Study Document

submitted to
**the Council on Education for Public Health
(CEPH)**

**for Re-Accreditation
of the**

**State University of New York (SUNY)
Downstate
School of Public Health (SPH)**

October 16, 2015

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Terminology Crosswalk

CEPH Terminology

SUNY SPH Terminology

Specialty/Subject Area	=	Concentration
Social and Behavioral Health Sciences	=	Community Health Sciences
Health Services Administration	=	Health Policy and Management

Other Pertinent Information for Understanding this Self-Study Document

Bright Green	=Tables containing MPH student data (may include MD/MPH data)
Light Blue	=Tables containing MD/MPH student data <u>only</u> .
Blue	=Tables containing DrPH student data
Dark Orange	=Tables containing Advanced Certificate of Public Health (ACPH) student data
Pink	=Tables containing data for Students of All Degrees combined
Lilac	=Tables containing data for SPH Employees: Administration, Faculty and Staff
Rose	=Tables containing data for SPH Budget and Other Resources
Light Orange	=Tables containing Research data
Yellow	=Tables containing Service Activity data
Sea Green	=Tables containing Continuing Education Offerings
Purple	=Totals for Demographics and Enrollment data
Grey	=Tables containing Overall SPH Information

The School of Public Health offers an MPH degree in five concentrations. They are:

1. BIOS=Biostatistics
2. CHSC=Community Health Sciences
3. EOHS=Environmental and Occupational Health Sciences
4. EPID=Epidemiology
5. HPMG=Health Policy and Management

The School of Public Health offers a DrPH degree in three concentrations. They are:

1. CHSC=Community Health Sciences
2. EOHS=Environmental and Occupational Health Sciences
3. EPID=Epidemiology

The School of Public Health has four departments which house the following concentrations:

1. Community Health Sciences
2. Environmental and Occupational Health Sciences
3. Epidemiology and Biostatistics
4. Health Policy and Management

Academic Year: The Academic Year in the SPH runs from June 1st of one year to May 31st of the following year.

Semesters: The SPH has three active semesters: Summer (June-August, Fall (September-December) and Spring (January-May). The Academic Year and all data for the Academic Year is reckoned as totals for the Summer semester, Fall semester and Spring semester, in that order.

The doctoral degree granted by the School of Public Health at SUNY Downstate is a DrPH. However, some of our documentation in the Resource File refers to this degree as a DPH. This is due to the fact that SUNY Central does not recognize the DrPH designation and uses DPH instead.

List of Abbreviations Used in the Self-Study Document and Resource File (In Alphabetical Order)

APHA:	American Public Health Association
ASPPH:	Association of Schools and Programs of Public Health
BIOS:	Biostatistics (Concentration in the School of Public Health)
CAG:	Community Advisory Group (Standing Committee of the SPH)
CAPQ:	Committee on Academic and Professional Qualifications (Part of Faculty Governance Structure)
CDC:	Centers for Disease Control and Prevention
CE:	Culminating Experience
CEPH:	Council on Education for Public Health
CHRP:	College of Health Related Professions (Educational Unit at SUNY Downstate)
CHSC:	Community Health Sciences (Concentration in the School of Public Health)
COM:	College of Medicine (Educational Unit at SUNY Downstate)
CON:	College of Nursing (Educational Unit at SUNY Downstate)
CUGH:	Consortium of Universities for Global Health
DHHS:	Department of Health and Human Services
DMC:	Downstate Medical Center
DPH:	Doctor of Public Health (SUNY Designation) same as the DrPH
DrPH:	Doctor of Public Health
EOHS:	Environmental and Occupational Health Services (Concentration in the School of Public Health)
EPID:	Epidemiology (Concentration in the School of Public Health)
FAPSA:	Faculty and Professional Staff Assembly
FE:	Field Experience
FTE:	Full-Time Equivalent
GPA:	Grade Point Average
HPMG:	Health Policy and Management (Concentration in the School of Public Health)
HSCB:	Health Science Center of Brooklyn
IFR:	Income Fund Reimbursable (account)
IRB:	Institutional Review Board
KAVI:	Kings Against Violence Initiative
MPH:	Master of Public Health
MRLB:	Medical Research Library of Brooklyn
MWBE:	Minority and Women (owned) Business Enterprises
NYC:	New York City
NYCDOHMH:	New York City Department of Health and Mental Hygiene
NYS:	New York State
NYSDOH:	New York State Department of Health
PCMI:	Peace Corps Master's International
PRIDE:	Program to Increase Diversity among Individuals Engaged in Cardiovascular Health-Related Research

RF:	Research Foundation
SEPH:	SPH Committee on Student Evaluation, Promotion, and Honors
SFR:	Student Faculty Ratio
SGS:	School of Graduate Studies (Educational Unit at SUNY Downstate)
SPH:	School of Public Health (Educational Unit at SUNY Downstate)
STAR:	Special Treatment and Research Program, HIV Center for Women and Children
SUNY:	State University of New York
TEDMed:	Technology, Entertainment and Design Global Conferences on Health and Medicine
UHB:	University Hospital of Brooklyn (Hospital at SUNY Downstate)
UUP:	United University Professions

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Introductory Statement about the State University of New York (SUNY) Downstate Medical Center (DMC) School of Public Health (SPH)

The School of Public Health is one of five academic colleges that comprise SUNY Downstate, the only academic medical center in Brooklyn, New York. Brooklyn is one of the five boroughs of New York City, but can be considered a 'city' unto itself, having over 2.8 million inhabitants. The diverse culture and ethnicity of native-born Brooklyn dwellers, coupled with a dynamic population of relatively recent immigrants from around the world creates an environment with varied and extensive public health challenges.

Though discussion for establishing a School of Public Health at SUNY Downstate dates back to the 1950's, serious planning for the SUNY Downstate Master of Public Health (MPH) Program began approximately twenty-five years ago. The process intensified during the late 1990's and in the early 2000's, the MPH Program became one of the top three strategic planning objectives of SUNY Downstate under the Presidency of Dr. John C. LaRosa. This process culminated in the official establishment of the SUNY Downstate MPH Program in 2001 with accreditation by the New York State Education Department, and the admission of the first twelve students in the Summer 2002 semester. The MPH Program was established within the Department of Preventive Medicine and Community Health in the College of Medicine, and had a focus on Urban and Immigrant Health.

Since its inception, the MPH Program grew rapidly. Total enrollment and applications received continued to increase. To accommodate the demands of an expanding student body, more faculty were engaged, more classes added and the program was solidified. As the MPH Program flourished, it necessarily became the major mission of the Department of Preventive Medicine and Community Health. The administration of the MPH Program and SUNY Downstate were committed to the continued development of a premier MPH Program; toward that end, the program was developed along the guidelines of the Council on Education for Public Health (CEPH). The Program sought and received CEPH Accreditation in June of 2005.

From 2005, the Program initiated four additional MPH concentrations and four Doctor of Public Health (DrPH) concentrations. The original Urban and Immigrant Health MPH concentration was merged into the newly developed Community Health Sciences (CHSC) concentration and the other concentrations were developed to coincide with the five core public health areas promoted by CEPH. They are: Biostatistics (BIOS), Community Health Sciences, Environmental and Occupational Health Sciences (EOHS), Epidemiology and Health Policy and Management (HPMG). The four DrPH concentrations added include: Community Health Sciences, Environmental and Occupational Health Sciences, Epidemiology and Health Policy and Management. It was decided that Urban and Immigrant Health would be the focus of the entire academic curriculum, and therefore became integrated into all concentrations.

These significant changes were submitted to, and accepted by the CEPH Board in 2007 and 2008. The name of the MPH Program was changed in 2008 to the Graduate Program in Public Health (GPPH). In April of 2009, the Graduate Program in Public Health applied to CEPH, and was accepted into applicant status for accreditation as a School of Public Health.

The administration of the SUNY Downstate School of Public Health has made a concerted effort

to use the CEPH Accreditation Criteria as a guide to developing the infrastructure and curricula for the original MPH program, the intervening graduate program and then, the school.

In 2010, the School of Public Health was accredited by CEPH for the maximum five year period allowed for newly accredited schools of public health. The self-study process enabled the school to codify and strengthen policies and procedures and to clarify the next steps in our growth process.

At the end of Spring 2011, the School of Public Health discontinued its DrPH in Health Policy and Management, leaving three concentrations in our DrPH degree program:

1. Community Health Sciences
2. Environmental and Occupational Health Sciences
3. Epidemiology.

The five concentrations in the MPH degree program were not affected. They remain:

1. Biostatistics
2. Community Health Sciences
3. Environmental and Occupational Health Sciences
4. Epidemiology
5. Health Policy and Management.

The School of Public Health has grown tremendously in the years since our inception. We currently have the following numbers of students in each of the degrees and concentrations listed:

Table Intro.1: Quantitative Information on MPH (including MD/MPH) Enrollment by Concentration for Academic Year 2014-2015 Data is a compilation of enrollment data included in Tables 4.3e.1 and 4.3e.2		
	2014-2015	2015-2016
Concentration Area #1 Biostatistics	7	4
Concentration Area #2 Community Health Sciences	47	41
Concentration Area #3 Environmental and Occupational Health Sciences	4	4
Concentration Area #4 Epidemiology	41	32
Concentration Area #5 Health Policy and Management	66	52
TOTALS	165	133

Table Intro.2: Quantitative Information on DrPH Enrollment by Concentration for Academic Year 2014-2015 Data is also included in Table 4.3e.3		
	2014-2015	2015-2016
Concentration Area #1 Community Health Sciences	18	23
Concentration Area #2 Environmental and Occupational Health Sciences	10	9
Concentration Area #3 Epidemiology	12	19
TOTALS	40	51

This Self-Study document is submitted in application for Re-Accreditation of the SUNY Downstate School of Public Health.

Criteria and Documentation

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.

Required Documentation. The self-study document should include the following:

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

School of Public Health Vision Statement:

Grow the SUNY Downstate School of Public Health into a nationally recognized School of Public Health that is known for:

- advancing Global Health
- creating innovative models to empower communities to address health disparities
- fostering the development of new knowledge and public health practices
- leadership in Urban and Immigrant Health
- promoting health equity
- training diverse public health professionals

School of Public Health Mission Statement:

The mission of the SUNY Downstate School of Public Health is to advance public health knowledge, promote health and well-being, and prevent disease and disability within communities, particularly in urban and immigrant ones. Such actions are accomplished through excellence in the education of public health professionals, scientific investigation of public health issues, and service to communities through collaborative partnerships.

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

Core values, concepts and ethics were developed for the program by the faculty.

SPH Professional Public Health Values

The SPH is committed to the following professional public health values:

1. Advancement of public health knowledge
2. Promotion of health and well-being
3. Prevention of disease and disability
4. Reduction of premature mortality
5. Health Equity
6. Academic excellence in the education of public health professionals
7. Academic integrity
8. Grounded scientific research in public health problems
9. Partnerships with local and regional community organizations to effect health promotion and disease prevention
10. Provision of service to local and regional populations and communities to improve health and prevent disease and disability.
11. Protection of, and respect for participants involved in public health research, for example: conducting research with 'informed consent' per National Institutes of Health (NIH) guidelines
12. Compliance with Health Insurance Portability and Accountability Act (HIPAA) guidelines

13. Medical and Public Health Ethics
14. Diversity of the Student Body
15. Diversity of the Faculty and Staff
16. Community Service
17. Faculty Participation in School Governance
18. Student Participation in School Governance

These values are operationalized through a curriculum of public health core courses, concentration core courses and a wide array of electives, student fulfillment of the required Field Experience, culminating experience. In addition, these values are maintained through community linkages, faculty, student and community representation on a variety of committees, and the exchange of ideas through continuing public health education presentations and forums. [See Criterion 1.1e for more detail.]

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

Goals:

Instruction:

- To provide an academic environment for public health education, research, and practice in an urban setting with an emphasis on urban and immigrant health.
- To educate individuals through an academic program that prepares graduates to identify, address, and resolve public health issues and manage public health programs in different settings, especially urban environments with diverse racial, ethnic, cultural, religious, and socioeconomic groups.

Research:

- To advance public health knowledge through scientific investigation of health and disease, with a focus on urban and immigrant health issues.
- To disseminate and interpret research results to professionals, patients, individuals and their families, and the public.

Service:

- To advance the health of underserved communities, both locally and globally, through collaborative public health approaches to health promotion and disease prevention and intervention.

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

Goal: Provide an academic environment for public health education, research, and practice in an urban setting with an emphasis on urban and immigrant health.

1. To maintain a strong curricular, research and practice focus on urban and immigrant health in our degree offerings, scientific studies and Field Experiences, as measured by syllabus content of required and elective courses, nature of research activities and practice experiences.

2. To continue to matriculate a minimum of 45 Master of Public Health (MPH) students each year. (Criterion 4.3d)
3. To continue to matriculate a minimum of 6 Downstate medical students per year in the concurrent MD/MPH Program. (Criterion 4.3d)
4. To continue to matriculate a minimum of 3 Doctor of Public Health (DrPH) students per year. (Criterion 4.3d)

Goal: Educate individuals through an academic program that prepares graduates to identify, address, and resolve public health issues and manage public health programs in different settings, especially urban environments with diverse racial, ethnic, cultural, religious, and socioeconomic groups.

1. To continue to ensure that our student body reflects diversity. (Criterion 1.8e)
2. To graduate 90% of MPH students within 6 years of matriculation by 2016. (Criterion 2.7b)
3. To graduate 90% of DrPH students within 8 years of matriculation by 2016. (Criterion 2.7b)
4. To ensure that all students have a 3.0 or better average at the time of graduation. (Criterion 2.7b)
5. To regularly evaluate and assess all graduating students through the Culminating Experience for their mastery of the subject matter referred to in this goal. (Criterion 2.5a)

Goal: Advance public health knowledge through scientific investigation of health and disease, with a focus on urban and immigrant health issues.

1. To have 60% of Full-time faculty engaged in community based public health research by 2017. (Criterion 3.1d)
2. To have 55% of Full-time faculty secure extramural or other public health grant or contract funding each year by 2017. (Criteria 3.1d and 4.1d)
3. To conduct bench-to-population translational research with basic science or clinical partners by 2018. (Criterion 3.1d)

Goal: Disseminate and interpret research results to professionals, patients, individuals and their families, and the public.

1. To have faculty publish at least 30 articles in peer-reviewed journals, books or book chapters per year on public health issues by 2016. (Criterion 3.1d)
2. To have faculty make at least 25 scientific presentations or poster presentations annually at national meetings by 2016. (Criterion 3.1d)
3. To continue holding an average of 1 continuing public health education/research seminar per month, to which professionals from throughout the Medical Center and the community are invited. (Criterion 3.1d)

Goal: Advance the health of underserved communities, both locally and globally, through collaborative public health approaches to health promotion, disease prevention and intervention.

1. To have 75% of faculty participating in external community service activities, including serving on advisory boards by 2016. (Criterion 3.2d)
2. To continue to sponsor/co-sponsor at least one conference per year for community stakeholders on a major issue in urban or immigrant health. (Criterion 3.2d)

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

How the Values of the School of Public Health were Developed and Operationalized

The values of the School of Public Health were originally determined by faculty during periodic retreats. They are reviewed and modified (as necessary) during regular faculty meetings, meetings of the Committee of Deans and Chairs, and in consultation with students as represented by the Student Council, alumni, and the Community Advisory Group.

These values are operationalized through a curriculum of public health core courses, concentration core courses and a wide array of electives, student fulfillment of the required Field Experience, culminating experience, maintenance of community linkages, and the exchange of ideas through continuing public health education presentations and forums.

1. **Advancement of Public Health knowledge**
2. **Promotion of health and well-being**
3. **Prevention of disease and disability**
4. **Reduction of premature mortality**
5. **Health Equity**

These first five values are achieved through active participation in the communities surrounding Downstate where evaluation of health disparities and public health interventions have positively impacted the community by providing public health knowledge, and working with the community members to promote health and reduce disease and unhealthy conditions.

6. **Academic Excellence in the Education of Public Health Professionals** is assured through adherence to the Committee on Admissions policies and procedures, through faculty advisement, regular curriculum review, revision and approval, the inclusion of Association of Schools and Programs of Public Health (ASPPH) core competencies as reflected in five core MPH courses, and adherence to the policies and procedures of the Committee on Student Evaluation, Promotion and Honors.
7. **Academic Integrity** is assured through adherence to the Academic Policies outlined in the SPH Student Manual and reflected in the SUNY Downstate Student Manual.

Values 6 and 7 reflect policies that are enforced through the Committee on Student Evaluation, Promotion and Honors. Academic integrity is stressed in all student orientation sessions and in all course syllabi.

8. **Grounded Scientific Research on Public Health Problems**
9. **Partnerships with local and regional community organizations to effect health promotion and disease prevention**
10. **Provision of service to local and regional populations and communities to improve health and prevent disease and disability.**

Values 8, 9 and 10 are assured through frequent needs assessments of community organizations and research and service efforts targeted to current public health issues in the community.

11. **Protection of and respect for subjects involved in public health research, for example: conducting research with ‘informed consent’ per National Institutes of Health (NIH) guidelines**
12. **Compliance with Health Insurance Portability and Accountability Act (HIPAA) guidelines**
13. **Medical and Public Health Ethics**

Values 11, 12 and 13 are ensured through extensive training in medical ethics, and the policies and procedures of the SUNY Downstate Research Foundation which includes the policy for the protection of human subjects in research projects [See Resource File: Downstate Medical Center State University of New York Institutional Review Board (IRB) - Principal Investigator's Procedure Manual for the Protection of Human Subjects in Research.] All students, faculty and staff are required to participate in HIPAA training prior to commencing their responsibilities.

In addition, public health ethics are incorporated into numerous courses, core courses, concentration core courses and electives:

- Introduction to Public Health Theory and Practice
- Issues in Environmental Health
- Principles of Epidemiology
- Design and Analysis of Clinical Trials
- Health Behavior and Risk Reduction
- Sex, Gender, Race and Ethnicity

14. **Diversity of the Student Body** is ensured through extensive recruitment efforts involving solicitation of potential students from all types of backgrounds. Recruitment activities involve sending faculty and staff to numerous local colleges, universities, community-based organizations, health departments, pharmaceutical companies, managed care organizations and hospitals, as well as wide-net advertising on the internet. [See sections on student recruitment: *Criterion 1.5b-student recruitment, admission and award of degrees* (p. 70), *Criterion 4.3a Description of the School's Recruitment Policies and Procedures* (p. 244) and *Criterion 4.3c Examples of Recruitment Materials...*(pp.254)] 38% of Brooklyn's population is made up of immigrants. The student body of the School of Public Health is widely diverse, including 62% underrepresented minorities for the 2014-2015 academic year, which correlates closely to the 63% of Brooklyn's population which is made up of underrepresented minorities according to the 2010 US Census. [See Table 1.8e.1 Outcomes Measures for a Demographically Diverse Student Body (p. 105 and 2010 US Census Data (pp. 14-16) in the Resource File]

15. **Diversity of the Faculty and Staff** is ensured by casting a wide net when recruiting. Ads are placed on public health and news websites with wide circulations. [See *Criterion 1.5b. Description of the school's governance and committee structure and processes, particularly as they affect - faculty recruitment, retention, promotion and tenure* (pp.70-72). There is a strong commitment to achieving and maintaining a diverse faculty by the SPH and SUNY Downstate Medical Center generally.

16. **Community Service** is a large part of the daily operations of the School of Public Health. Faculty are routinely involved with community-based organizations and collaborations with community constituents. Regular cable television broadcasts and other media articles and spots address the ongoing public health needs of the community. The SPH has periodic meetings of its Community Advisory Group which advises the school on these needs. In

addition, the students are involved in field work experiences as part of their coursework or their culminating experience, many of which involve service to the various communities and neighborhoods within and beyond the borders of Brooklyn.

17. Faculty Participation in School Governance is achieved through periodic meetings of the Faculty and Professional Staff Assembly, during which policy decisions are discussed and recommendations made. Each department has regular faculty meetings led by the Chair, in which faculty are encouraged to voice their opinions about departmental issues. Faculty retreats are periodically held in order to focus on specific strategic planning objectives and to review specific aspects of the School of Public Health in depth, such as the curriculum. Faculty participation in the SPH governance is also achieved through

- Faculty membership on the standing and ad hoc committees in the School of Public Health, whose members are appointed by the Dean, include:
 - Committee on Admissions
 - Committee on Outcomes, Evaluation and Assessment
 - Committee on Student Evaluation, Promotion and Honors
 - Steering Committee for the Self-Study Process for the Council on Education for Public Health (CEPH) Site Visit, November 16-18, 2015.
- Faculty membership in the Faculty Governance structure, which includes the following Committees and Sub-Committees, whose members are elected by the faculty:
 - Executive Committee
 - (Sub-) Committee on Academic and Professional Qualifications (CAPQ)
 - Sub-Committee on Educational Policy and Curriculum
 - Sub-Committee on Nominations, Elections, and By-Laws
 - Sub-Committee on Research, Resources, and Budget
 - Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations

18. Student Participation in School Governance is achieved through consultations with members of the Student Council and having student representatives on standing and ad hoc committees where appropriate. Committees with student representatives are as follows:

- Sub-Committee on Educational Policy and Curriculum
- Committee on Outcomes, Evaluation and Assessment
- Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations
- Steering Committee for the Self-Study for the Council on Education for Public Health (CEPH) Site Visit, November 16-18, 2015.

Student input is also elicited through the SPH Student Council, course evaluations for each course taught, planned end of semester discussion forums with the Dean and Vice Dean, and ongoing informal discussions.

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

The SUNY Downstate School of Public Health's mission, values, goals and objectives are made available to the school's constituent groups, including the general public in a variety of ways, the main one being that they are listed on our website for anyone to view. These guiding principles of the School are printed in the SPH Student Handbook which each student is given upon entering the SPH. In addition, the Vision, Mission and Goals are printed in our Viewbook, and presented in our annual newsletter, *Public Health in Action*, as well as other recruiting materials which are widely distributed. (See Resource File for Recruitment Materials) These principles are also listed and integrated into the Strategic Plans for the School of Public Health which are included in the overall Strategic Plan of the Downstate Medical Center for Senior Management of all the academic institutions of Downstate, as well as the hospital and the Central Administration.

The SPH Vision, Mission, Values, Goals and Objectives are periodically reviewed by the faculty, staff and administration at milestone meetings, including strategic planning meetings and CEPH/ASPPH annual report submission meetings for relevance to new developments in public health, urban and immigrant health and global health. They are reviewed by the Community Advisory Group at least once a year at their meetings. The guiding principles of the school are continually assessed as we prepare recruitment materials and implement new initiatives, such as Advanced Certificates.

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

This criterion is met.

Strengths:

Following the SUNY Downstate tradition, the School of Public Health is committed to providing the highest quality public health education and service to the underserved communities in its urban catchment area and beyond. Our mission, goals, objectives and values are based on this underlying premise. Our faculty and staff focus on community public health initiatives and are continually seeking increased participation of all constituents in monitoring and revising our goals and objectives in order to decrease health disparities and achieve health equity.

Weaknesses:

None

Plans:

To continue to periodically review goals and objectives and make revisions if necessary.

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

Required Documentation. The self-study document should include the following:

1.2a. Description of the evaluation processes used to monitor progress against objectives defined in Criterion 1.1.d, including identification of the data systems and responsible parties associated with each objective and with the evaluation process as a whole. If these are common across all objectives, they need be described only once. If systems and responsible parties vary by objective or topic area, sufficient information must be provided to identify the systems and responsible party for each.

The continued development of the School of Public Health is a major objective of the global SUNY Downstate Strategic Plan for 2001-2006, and of the 2008-2012 and the 2012-2015 Addenda to this Strategic Plan. The mission of SUNY Downstate has always been to meet the needs of the underserved minority groups in our urban setting. The School of Public Health was created with a strong focus on urban and immigrant health to be in line with the larger objectives of the Medical Center. The School of Public Health has met and exceeded all development benchmarks outlined in the 2001-2006 Strategic Plan, its 2008-2012 Addendum and the 2012-2015 Addendum. In addition, the SPH created a Strategic Business Plan for the period 2013-2018 which has a special focus on enrollment growth and revenue generation. (See Resource File for SPH Strategic Business Plan)

The growth and direction of development of the School of Public Health has been strongly guided by the criteria outlined by CEPH for accreditation of schools of public health and the results of the CEPH Accreditation Site Visit Report of 2010. The progress of the development of the School is continually measured against these criteria and the measurable objectives relevant to our mission and goals.

Overall evaluation of the SPH as measured against the objectives in Criterion 1.1d is overseen by the senior administration of the School in conjunction with the Committee on Outcomes, Evaluation and Assessment, which provides data on outcomes measures. Evaluation is accomplished through ongoing examination of the school's educational, research and service activities. Data is continually collected on all aspects of the school's operation, analyzed and measured against the school's goals and objectives. Student demographic and academic performance data are regularly generated by the central Office of the Registrar and the Office of Admissions. These data are communicated to the administration of the SPH. Faculty are evaluated annually by their respective Chairs, and course evaluations indicate how students experience the course instructor's ability to communicate the subject matter. (see Resource File for Annual Faculty Evaluation Documents and Course Evaluations) Student performance is evaluated throughout each course and aggregated data are collected and reviewed by the Committee on Outcomes, Evaluation and Assessment for use in planning.

The school's educational enterprise, research program and service activities are evaluated through these regular mechanisms:

- Faculty Evaluations by the respective Chairs, which include teaching, research and service activities of each faculty member (Annually)
- Applicant, Acceptance and Enrollment data for each of the SPH degree programs (Bi-annually)
- Assessment of the needs of the communities served by SUNY Downstate (Continually)

- Comparison of CEPH curricular criteria for coverage of required areas (Tri-annually)
- Comparison of research subject areas to current public health priorities (Bi-monthly)
- Consultation with the Community Advisory Group and various community stakeholders (Annually and Continually)
- Course Evaluations (Tri-annually at the end of every semester)
- Meetings between the officers of the Student Council and the Deans (Bi-annually)
- Meetings of the Committees and Sub-Committees of the Faculty and Professional Staff Assembly (FAPSA) (Bi-Annually and as needed)
- Review and recommended revision of course curricula by Course Directors and the Sub-Committee on Educational Policy and the Curriculum (Tri-annually and as needed)
- Review of current field based practical experiences by students (Continually)
- Review of extramural funding levels (Bi-annually)
- Student/faculty ratio by concentration area (Annually)
- Student feedback forums (Bi-annually)

Table 1.2a.1: Processes for Collecting Relevant Data for Each Objective in Criterion 1.1d		
Measurable Objective	Process for Collecting Data	Timeframe
Goal: Provide an academic environment for public health education, research, and practice in an urban setting with an emphasis on urban and immigrant health.		
1. To maintain a strong curricular, research and practice focus on urban and immigrant health in our degree offerings, scientific studies and Field Experiences, as measured by syllabus content of required and elective courses, nature of research activities and practice experiences.	Review of syllabi by faculty course directors, departmental chairs, Committee on the Curriculum and the Vice Dean for Academic and Student Affairs.	Tri-annual meetings of the Committee on the Curriculum to review syllabi of all courses to be taught. On-going review by faculty course directors, departmental chairs and the Vice Dean for Academic and Student Affairs.
2. To continue to matriculate a minimum of 45 Master of Public Health (MPH) students each year. (Criterion 4.3d)	Committee on Admissions, Vice Dean for Academic and Student Affairs, and Assistant Dean for Enrollment and Student Affairs regularly monitor applications, acceptance and enrollee data provided by the Office of Admissions and the Office of the Registrar.	Bi-monthly
3. To continue to matriculate a minimum of 6 Downstate medical students per year in the concurrent MD/MPH Program. (Criterion 4.3d)	Several SPH faculty interview applicants to the College of Medicine in order to promote their also applying for the MPH Program. These faculty interview approximately 110 applicants out of the 700 applicants who are annually interviewed by the College of Medicine.	Annually between the months of September and July.

Table 1.2a.1: Processes for Collecting Relevant Data for Each Objective in Criterion 1.1d		
Measurable Objective	Process for Collecting Data	Timeframe
4. To continue to matriculate a minimum of 3 Doctor of Public Health (DrPH) students per year. (Criterion 4.3d)	Committee on Admissions, Vice Dean for Academic and Student Affairs, and Assistant Dean for Enrollment and Student Affairs regularly monitor applications, acceptance and enrollee data provided by the Office of Admissions and the Office of the Registrar.	Bi-monthly
Goal: Educate individuals through an academic program that prepares graduates to identify, address, and resolve public health issues and manage public health programs in different settings, especially urban environments with diverse racial, ethnic, cultural, religious, and socioeconomic groups.		
1. To continue to ensure that our student body reflects diversity. (Criterion 1.8e)	A number of methods are employed to specifically recruit diverse students. These events are overseen by the Assistant Dean for Enrollment and Student Affairs. They include: <ul style="list-style-type: none"> • Open House Events; • sending faculty and staff to local college graduate fairs; • hiring a Recruiter with the express purpose of reaching out to diverse students; • developing and distributing hardcopy literature which reflects the diversity of our student population • maintaining a website which reflects our diversity and sends a message that we welcome diverse students. 	On-going
2. To graduate 90% of MPH students within 6 years of matriculation by 2016.(Criterion 2.7b)	Data are retrieved from the Office of the Registrar and transcripts are reviewed by the Committee on Student Evaluation, Promotion and Honors to determine who has completed the MPH degree.	Tri-annually
3. To graduate 90% of DrPH students within 8 years of matriculation by 2016. (Criterion 2.7b)	Data are retrieved from the Office of the Registrar and transcripts are reviewed by the Committee on Student Evaluation, Promotion and Honors to determine who has completed the DrPH degree.	Tri-annually
4. To ensure that all students have a 3.0 or better average at the time of graduation. (Criterion 2.7b)	Data are retrieved from the Office of the Registrar and transcripts are reviewed by the Committee on Student Evaluation, Promotion and Honors to determine if any student's GPA has fallen below 3.0.	Tri-annually

Table 1.2a.1: Processes for Collecting Relevant Data for Each Objective in Criterion 1.1d		
Measurable Objective	Process for Collecting Data	Timeframe
5. To regularly evaluate and assess all graduating students through the Culminating Experience for their mastery of the subject matter referred to in this goal. (Criterion 2.5a)	Students completing the Culminating Experience are required to submit a written scientific paper and to present it orally to the faculty and others. The assembled faculty then question the student to assess their mastery of the five core subject area competencies. A qualitative evaluation tool is used by the faculty present and an overall qualitative assessment given. Details concerning the Culminating Experience and the process governing it are presented in detail in Instructions for Completing the Required Master of Public Health (MPH) Culminating Experience in the Resource File.	Prior to each student's graduation.
Goal: Advance public health knowledge through scientific investigation of health and disease, with a focus on urban and immigrant health issues.		
1. To have 60% of Full-time faculty engaged in community based public health research by 2017. (Criterion 3.1d)	Departmental chairs review each faculty member's performance. In addition, an end of academic year faculty evaluation is conducted by the Chair and a performance plan for the upcoming year established for each faculty member. Reports of all faculty research, service, publications and scientific presentations are compiled by the SPH Contract Manager.	Periodic and annual faculty evaluations. Bi-annual reports by Contract Manager.
2. To have 55% of Full-time faculty secure extramural or other public health grant or contract funding each year by 2017. (Criteria 3.1d and 4.1d)	Departmental chairs review each faculty member's performance. In addition, an end of academic year faculty evaluation is conducted by the Chair and a performance plan for the upcoming year established for each faculty member. Reports of all faculty research, service, publications and scientific presentations are compiled by the SPH Contract Manager.	Periodic and annual faculty evaluations. Bi-annual reports by Contract Manager.
3. To conduct bench-to-population translational research with basic science or clinical partners by 2018. (Criterion 3.1d)	Reports of all faculty research, service, publications and scientific presentations are compiled by the SPH Contract Manager.	Bi-annual reports by Contract Manager.
Goal: Disseminate and interpret research results to professionals, patients, individuals and their families, and the public.		
1. To have faculty publish at least 30 articles in peer-reviewed journals, books or book chapters per year on public health issues by 2016. (Criterion 3.1d)	Departmental chairs review each faculty member's performance. At the end of academic year, faculty evaluation is conducted by the Chair and a performance plan for the upcoming year established for each faculty member. Reports of all faculty research, service, publications and scientific presentations are compiled by the Contract Manager.	Periodic and annual faculty evaluations. Bi-annual reports by Contract Manager.

Table 1.2a.1: Processes for Collecting Relevant Data for Each Objective in Criterion 1.1d		
Measurable Objective	Process for Collecting Data	Timeframe
2. To have faculty make at least 25 scientific presentations or poster presentations annually at national meetings by 2016. (Criterion 3.1d)	Departmental chairs review each faculty member's performance. In addition, an end of academic year faculty evaluation is conducted by the Chair and a performance plan for the upcoming year established for each faculty member. Reports of all faculty research, service, publications and scientific presentations are compiled by the SPH Contract Manager.	Periodic and annual faculty evaluations. Bi-annual reports by Contract Manager.
3. To continue holding an average of 1 continuing public health education/research seminar per month, to which professionals from throughout the Medical Center and the community are invited. (Criterion 3.1d)	A faculty member is assigned the responsibility of organizing and reporting on these monthly seminars.	On-going.
Goal: Advance the health of underserved communities, both locally and globally, through collaborative public health approaches to health promotion, disease prevention and intervention.		
1. To have 75% of faculty participating in external community service activities, including serving on advisory boards by 2016. (Criterion 3.2d)	Departmental chairs review each faculty member's performance. In addition, an end of academic year faculty evaluation is conducted by the Chair and a performance plan for the upcoming year established for each faculty member. Reports of all faculty research, service, publications and scientific presentations are compiled by the SPH Contract Manager.	Periodic and annual faculty evaluations. Bi-annual reports by Contract Manager.
2. To continue to sponsor/co-sponsor at least one conference per year for community stakeholders on a major issue in urban or immigrant health. (Criterion 3.2d)	The Associate Dean for Community Public Health Affairs is responsible for arranging and reporting on one conference per year.	Annual

The findings of ongoing evaluation are used for planning purposes regarding revision of curriculum, extramural grant funding levels, enrollment projections, resource requirements, community based service activities, policies and procedures, staffing, space allocation and equipment needs.

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

The Committee on Outcomes, Evaluation and Assessment develops outcomes measures based upon CEPH guidelines and in line with the stated mission and goals of the school. The Committee on Admissions and the Committee on Student Evaluation, Promotion and Honors also generate outcomes data. The outcomes and data generated by all groups are communicated to the school administration. These outcomes measures are discussed in The Committee of Deans and Chairs bi-monthly meetings, annually or bi-annually with the Community Advisory Group, bi-annually with the Faculty and Professional Staff Assembly, and bi-annually with the Student Council leadership. In addition, the Chairs of the four departments discuss these measures and related data with their faculty. These measures guide the administration in the development of the school's policies and procedures, and strategic planning endeavors.

Stakeholders are very much involved in the evaluation and planning processes of the School of Public Health. The administration meets frequently with faculty, students and community members to discuss strategic initiatives, staffing, budgetary issues, progress toward goals and objectives, and any other issues relevant to the development of the school. Faculty and staff are regularly involved through departmental meetings, Faculty and Professional Staff Assembly Committees, other school-wide committees, working groups and retreats.

Student input into the school's evaluation and planning are considered vital to the development of the School of Public Health. This is achieved through the SPH Student Council, which represents student interests and promotes student involvement in a variety of activities including evaluation and planning for the school. The Student Council plans regular student events and makes recommendations for student representation on appropriate standing and ad hoc committees, e.g. the Steering Committee for the Self-Study Process for the Council on Education for Public Health (CEPH) Site Visit November 16-18, 2015, convened in April 2014. In addition, students complete course and course director evaluations at the end of every course given, participate in periodic student-administration forums, held at a minimum, once a semester, and submit anonymous suggestions to the administration on a regular basis.

The CEPH Self-study process has informed a number of improvements in the quality of SPH programs and activities. Discussions with CEPH staff at the Consultation Site Visit on October 1, 2014, and further discussions with CEPH staff reinforced our decision to revise and streamline the competencies for each degree and each concentration. The process of revising the competencies took place over several months with ongoing meetings of faculty, Chairs and administration. Faculty for each concentration were charged with developing competencies appropriate to their curricula. Numerous iterations were considered, distributed for comment and finalized. Then, all the syllabi for the public health core and concentration courses were reviewed by the Sub-Committee on Educational Policy and the Curriculum and revised by the Course Directors to include the new competencies and learning objectives designed for each competency.

In addition to the competency revisions, all major student and faculty manuals were reviewed again to ensure accuracy and currency. Although these manuals are reviewed periodically, some of these, e.g. the Field Experience Manuals for each degree were enhanced by tweaking the procedural information and forms for students to complete.

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

**Table 1.2c.1 Outcome Measures Related to Measureable Objectives
Stated for Goals for 2012-2013-2015-2016 in Criterion 1.1d**

Table 1.2c.1 Goal Related Outcome Measures for 2012-2013-2015-2016 (Projected)					
Criterion 1.1d: Education Goal: Provide an academic environment for public health education, research, and practice in an urban setting with an emphasis on urban and immigrant health.					
Criterion 1.1d: To continue to matriculate a minimum of 45 Master of Public Health (MPH) students each year.					
Outcome Measure (Criterion 4.3d)	Target	2012-2013	2013-2014	2014-2015	2015-2016
To maintain a strong curricular, research and practice focus on urban and immigrant health in our degree offerings, scientific studies and Field Experiences, as measured by syllabus content of required and elective courses, nature of research activities and practice experiences.	To expose all students to the diverse issues related to the health and well-being of urban and immigrant populations. This is achieved through dedicated courses in the MPH and DrPH curriculum covering these subjects. Also, this subject content is suffused throughout the curriculum. Among the five core MPH courses, CHSC 5200: Health Behavior and Risk Reduction places an emphasis on health promotion programs in urban and immigrant settings and EPID 5200: Principles of Epidemiology addresses public health problems in urban and immigrant landscapes. In the DrPH core courses, BIOS 7200: Quantitative Research Methods for Public Health Practice focuses on the public health research literature on urban and immigrant health and PUBH 7201: Study Design in Public Health emphasizes public health research among urban and immigrant populations.				
Number of Newly Matriculated MPH Students	45	47	62	46	48
Criterion 1.1d: To continue to matriculate a minimum of 6 Downstate medical students per year in the concurrent MD/MPH Program.					
Outcome Measure (Criterion 4.3b)	Target	2012-2013	2013-2014	2014-2015	2015-2016
Number of Newly Matriculated MD/MPH Students	6	7	5	7	3
Criterion 1.1d: To continue to matriculate a minimum of 3 Doctor of Public Health (DrPH) students per year.					
Outcome Measure (Criterion 4.3b)	Target	2012-2013	2013-2014	2014-2015	2015-2016
Number of Newly Matriculated DrPH Students	3	9	13	5	12

Table 1.2c.1 Goal Related Outcome Measures for 2012-2013-2015-2016 (Projected) (continued)					
Criterion 1.1d: Education Goal: Educate individuals through an academic program that prepares graduates to identify, address, and resolve public health issues and manage public health programs in different settings, especially urban environments with diverse racial, ethnic, cultural, religious, and socioeconomic groups.					
Criterion 1.1d: To continue to ensure that our student body reflects diversity.					
Outcome Measure (Criterion 1.8e)	Target	2012-2013	2013-2014	2014-2015	2015-2016
Under-represented Minorities	50%	57%	61%	62%	These data will be provided at the site visit.
Gender: F/Total	50%	70%	67%	68%	
Out-of-State Residents/Total	10%	9%	13%	12%	
Age Cohort: 20-29/Total	60%	59%	61%	64%	
Age Cohort: 30-39/Total	20%	21%	21%	19%	
Age Cohort: 40-49/Total	12%	13%	12%	12%	
Age Cohort: 50-59/Total	6%	5%	5%	5%	
Age Cohort: 60-69/Total	2%	1%	1%	1%	
Criterion 1.1d: To graduate 90% of MPH students within 6 years of matriculation by 2016.					
Outcome Measure (Criterion 2.7b)	Target	2009-2010	2010-2011 (To Date)	2011-2012 (To Date)	2012-2013 (To Date)
Percentage of MPH Students Graduating Within 6 Years of Matriculation	90%	81.0% (Cohort entering 6 years ago)	72.5% (Cohort entering 5 years ago)	76.7% (Cohort entering 4 years ago)	72.2% (Cohort entering 3 years ago)
Criterion 1.1d(2.7b): To graduate 90% of DrPH students within 8 years of matriculation by 2016.					
Outcome Measure (Criterion 2.7b)	Target	2008-2009	2009-2010	2010-2011	2011-2012 (To Date)
Percentage of DrPH Students Graduating Within 8 Years of Matriculation	90%	33.3% (Cohort entering 7 years ago)	44.4% (Cohort entering 6 years ago)	20.0% (Cohort entering 5 years ago)	0% (Cohort entering 4 years ago)
Criterion 1.1d: To ensure that all students have a 3.0 or better average at the time of graduation.					
Outcome Measure (Criterion 2.7b)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
Average GPA of MPH Graduates	3.0	3.66	3.71	3.66	These data will be provided at the site visit.
Average GPA of DrPH Graduates	3.0	Not Applicable	3.70	3.42	
To regularly evaluate and assess all graduating students through the Culminating Experience for their mastery of the subject matter referred to in this goal. (Criterion 2.5a)	Students completing the Culminating Experience are required to submit a written scientific paper and to present it orally to the faculty and others. The assembled faculty then question the student to assess their mastery of the five core subject area competencies. A qualitative evaluation tool is used by the faculty present and an overall qualitative assessment given. Details concerning the Culminating Experience and the process governing it are presented in detail in Instructions for Completing the Required Master of Public Health (MPH) Culminating Experience in the Resource File.				

Table 1.2c.1 Goal Related Outcome Measures for 2012-2013-2015-2016 (Projected) (continued)					
Criterion 1.1d: Research Goal: Advance public health knowledge through scientific investigation of health and disease, with a focus on urban and immigrant health issues.					
Criterion 1.1d: To have 60% of Full-time faculty engaged in community based public health research by 2017.					
Outcome Measure (Criterion 3.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
% of Full-time Faculty Engaged in Community Based Public Health Research	60% Annually	33%	25%	29%	30%
Criterion 1.1d: To have 55% of Full-time faculty secure extramural or other public health grant or contract funding each year by 2017.					
Outcome Measure (Criteria 3.1d and 4.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
% of Full-time Faculty Securing Extramural or Other Public Health Grant or Contract Funding	55% Annually	38%	21%	24%	26%
Criterion 1.1d: To conduct bench-to-population translational research with basic science or clinical partners by 2018.					
Outcome Measure (Criterion 3.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
Conduct Bench-To-Population Translational Research With Basic Science Or Clinical Partners	To Conduct this Type of Research by 2018	-	-	-	-
Criterion 1.1d: Research Goal: Disseminate and interpret research results to professionals, patients, individuals and their families, and the public.					
Criterion 1.1d: To have faculty publish at least 30 articles in peer-reviewed journals, books or book chapters per year on public health issues by 2016.					
Outcome Measure (Criterion 3.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
# Of Articles Published By Faculty Published In Peer-Reviewed Journals, Books Or Book Chapters On Public Health Issues	30	38	38	42	These data will be provided at the site visit.
Criterion 1.1d: To have faculty make at least 25 scientific presentations or poster presentations annually at national meetings by 2016.					
Outcome Measure (Criterion 3.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
# Of Scientific Presentations Or Poster Presentations Faculty Made At National Meetings	25	31	17	28	These data will be provided at the site visit.

Table 1.2c.1 Goal Related Outcome Measures for 2012-2013-2015-2016 (Projected) (continued)					
Criterion 1.1d: To continue holding an average of 1 continuing public health education/research seminar per month, to which professionals from throughout the Medical Center and the community are invited.					
Outcome Measure (Criterion 3.1d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
Hold Continuing Public Health Education/Research Seminar Per Month, To Which Professionals From Throughout The Medical Center And The Community Are Invited	12 Annually	6	13	8	These data will be provided at the site visit.
Criterion 1.1d: Service Goal: Advance the health of underserved communities, both locally and globally, through collaborative public health approaches to health promotion, disease prevention and intervention.					
Criterion 1.1d: To have 75% of faculty participating in external community service activities, including serving on advisory boards by 2016.					
Outcome Measure (Criterion 3.2d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
% of Full-time Faculty Participating In External Community Service Activities, including Serving on Advisory Boards	75% Annually	88%	100%	81%	These data will be provided at the site visit.
Criterion 1.1d: To continue to sponsor/co-sponsor at least, conference per year for community stakeholders on a major issue in urban or immigrant health.					
Outcome Measure (Criterion 3.2d)	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
Sponsorship/co-sponsorship of conferences for community stakeholders on a major issue in urban or immigrant health.	1 Annually	0	1	1	1

Explanation of Outcome Targets Not Met

Table 1.2c.2: Explanation of Outcome Targets Not Met		
Outcome Measure	Target	Rationale For Not Meeting Target
Percentage of MPH Students Graduating Within 6 Years of Matriculation	90%	We have achieved 81%, which is a respectable graduation rate and an increase from previous years. This is primarily been due to non-academic issues concerning enrollees who have withdrawn for a variety of personal, social and financial reasons. We addressed these non-academic causes of withdrawal with some success because our faculty and staff work hard with individual students to encourage degree completion and overcoming obstacles to completion. We set the target at 90%, which is very high, but we hope to meet it in the future.
Percentage of DrPH Students Graduating Within 8 Years of Matriculation	90%	To Date, we have not reached the eight year maximum time to graduation for the DrPH degree. In addition, the number of students in the first DrPH cohort was three (3), a very small sample. Currently we have one graduate, one withdrawn and one continuing. It is difficult to apply this target to such a small population.
% of Full-time Faculty Engaged in Community Based Public Health Research	60% Annually	The very challenging environment for obtaining extramural funding has made it very difficult for junior faculty, who comprise most of our faculty complement, to be successful in obtaining grant. This impacts on the faculty's ability to engage in community public health research.
% of Full-time Faculty Securing Extramural or Other Public Health Grant or Contract Funding	55% Annually	The very challenging environment for obtaining extramural funding has made it very difficult for junior faculty, who comprise most of our faculty complement, to be successful in obtaining grant.
Hold Continuing Public Health Education/Research Seminar Per Month, To Which Professionals From Throughout The Medical Center And The Community Are Invited	12 Annually	A change in the faculty member responsible for organizing the Continuing Public Health Research Seminars resulted in a slight decline in the number of seminars conducted in the past year. We hope to meet this target in the coming academic year.

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

The Self-Study document was developed with numerous opportunities for input by important school constituents. In April of 2014, the Dean of the SPH convened a **Steering Committee for the Self-Study Process for the Council on Education for Public Health (CEPH) Site Visit, November 16-18, 2015.**

Sub-Committees of the Steering Committee, comprised of faculty, students and staff were created to address various components of the self-study document.

These groups developed their draft materials and submitted to the Associate Dean for Administration, who coordinated their presentation to the Steering Committee. The Steering Committee reviewed the documents and made appropriate recommendations for revisions. These deliverables were discussed at regular departmental faculty meetings which usually occur monthly, the Committee of Deans and Chairs and at the Steering Committee meetings, where they were finalized. The information was then incorporated into the document by the Associate Dean for Administration and reviewed by the Dean.

Drafts versions of the entire self-study document were then distributed to the members of the Steering Committee, the Chairs, the faculty, students, alumni and the Community Advisory Group for comments. The Deans then reviewed all comments and made appropriate changes. This process was repeated several times until the preliminary document was finalized.

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

This criterion is met.

Strengths: The SUNY Downstate School of Public Health has well established policies and processes for evaluation of its performance against quantitative targets and qualitative goals. The Steering Committee convened to oversee the self-study is highly engaged in the process as are the members of the Sub-committees which were assigned sections of the CEPH criteria to use to evaluate the School's performance in these areas. The process has been extremely interactive, with evidence of compliance submitted where necessary and areas for improvement discussed thoroughly among the various constituents prior to implementation of corrections.

Weaknesses: None

Plans: Continually monitor all areas of school operations, policies, procedures and outcomes. Continue to present findings to all constituents for discussion and input prior to implementing improvements.

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.

Required Documentation. The self-study document should include the following:

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

The State University of New York (SUNY) Downstate Medical Center (DMC) is a fully accredited university within the SUNY system, and therefore is guided by the overall SUNY Policies of the Board of Trustees June 2014 (most current version) <http://www.suny.edu/media/suny/content-assets/documents/boardoftrustees/SUNY-BOT-Policies-June2014.pdf>, excerpts of which are stated below. The Downstate Medical Center is comprised of the following institutional entities (in alphabetical order):

1. College of Health Related Professions
2. College of Medicine
3. School of Graduate Studies
4. School of Nursing
5. School of Public Health
6. University Hospital of Brooklyn

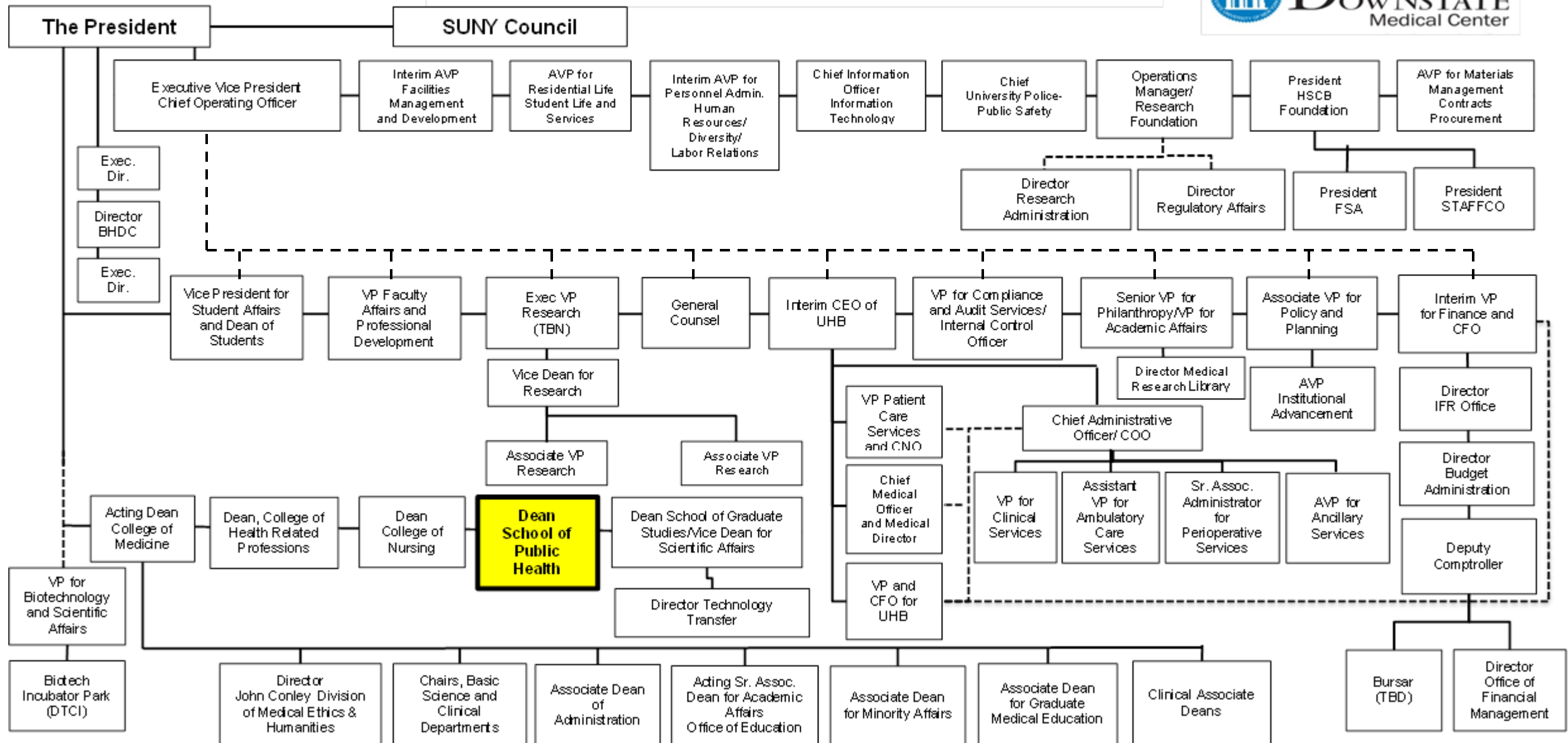
The School of Public Health, as one school within the larger SUNY Downstate Medical Center, is under the umbrella policies of the entire Medical Center, and is individually accredited by the New York State Department of Education. (Documentation of current accreditation in Resource File)

The entire Downstate Medical Center is accredited by the Middle States Commission on Higher Education and the Regents of the State of New York. In addition, the College of Medicine is accredited by the Liaison Committee on Medical Education; the College of Nursing is accredited by the National League for Nursing; the Occupational Therapy Program is accredited by the American Occupational Therapy Association; the Physical Therapy Program is accredited by the American Physical Therapy Association and the College of Health Related Professions (CHRP) is accredited by the Commission on Accreditation of Allied Health Education Programs. Under the Policies and Procedures of the State University of New York, campus presidents have full authority to create new schools and to delineate the reporting structure. In April of 2008, the then President declared a new School of Public Health within the SUNY system. The Dean of the School of Public Health reports directly to the President of SUNY Downstate [See Organizational Charts 1.3b.1 and 1.3b.2 below]. The SPH faculty have the same rights, privileges and status as other faculty in schools that comprise the SUNY Downstate Medical Center.

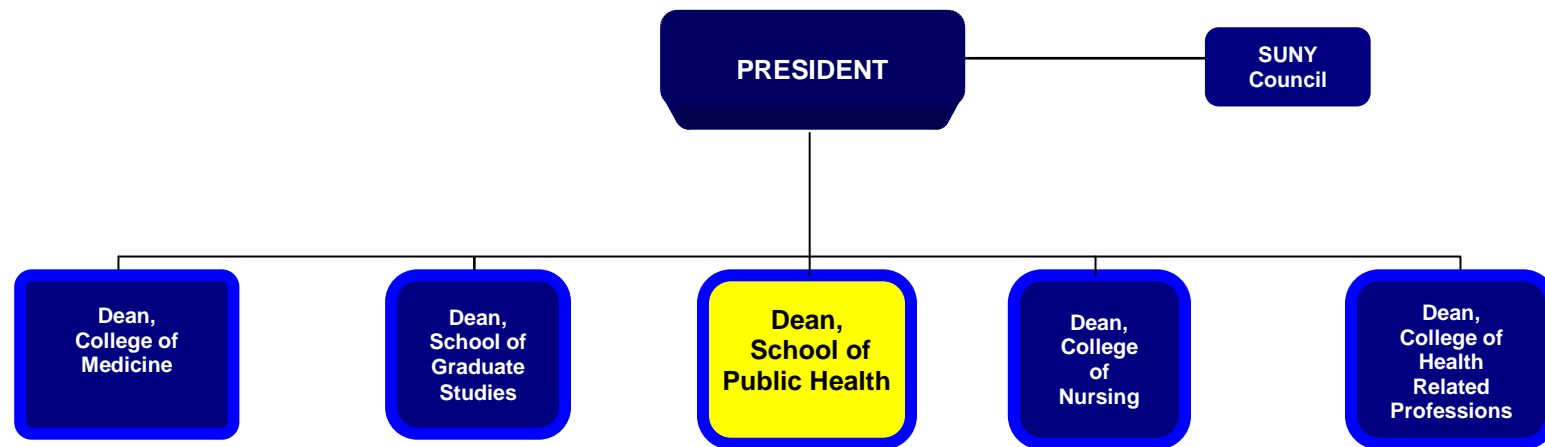
Our position within the university encourages interdisciplinary communication, cooperation and collaboration through discussion and interaction with students, faculty and staff of other colleges, schools and departments/units within Downstate. In addition, because our enrollment includes MD/MPH and various allied health students, the school fosters the development of professional public health values, concepts and ethics in newly graduated MDs. The entire Downstate community benefits, as students bring their newly developed skills and knowledge regarding public health to their learning and service experiences throughout the Medical Center.

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

Organizational Chart 1.3b.1: **SUNY Downstate Medical Center Organizational Chart**



Organizational Chart 1.3b.2: SCHOOL OF PUBLIC HEALTH REPORTING STRUCTURE



There are five distinct educational units and the University Hospital of Brooklyn within SUNY Downstate Medical Center. Each school is headed by a Dean who reports to the President of the Medical Center. The Dean has overall responsibility for the running of his/her respective school and supervision of the faculty and staff employed therein.

*1.3c. Description of the school's level of autonomy and authority regarding the following:
– budgetary authority and decisions relating to resource allocation*

Because the SPH is part of the larger SUNY system, fiscal planning is centrally managed through Downstate's Finance Office which receives an annual allocation for the entire Medical Center and is empowered, per the SUNY guidelines, to distribute the monies on the local level to each of the schools and the hospital within Downstate.

Fiscal Planning and budgeting for the School of Public Health are achieved through a budget process that includes collaborative meetings between the Dean, Vice Dean and Associate Dean for Administration, submission of the Program's budget request to the Vice President for Academic Fiscal Affairs/Interim Chief Financial Officer for the Medical Center under the auspices of the President of the Medical Center. The final budget is approved by the Vice President for Academic Fiscal Affairs. Allocations within the SPH are made by the Administration based on prioritized needs of the SPH with input from Chairs, faculty and staff.

Below is a list of all funding sources for the School of Public Health:

- NYS Allocation (provides the majority of the operating budget of the SPH)
- Extramural grant funding (directs and indirects)
- Alumni Fund of the College of Medicine funds for the Global Health in Developing Countries elective.
- Fees for special courses taught to certain types of non-matriculated students, e.g. Emergency Medicine Residents
- Private enterprise gifts, e.g. Sanofi, which support student activities and certain technological purchases, usually housed in the Health Science Center for Brooklyn (HSCB) Foundation
- Private gifts from Memorial Funds, etc. which primarily support graduation awards
- Accounts which hold small remnants of monies originally given as discretionary operational funds. These are used primarily for small petty cash needs such as postage, etc.

Indirect cost revenues generated by grants are redirected back into the Downstate Centerwide account. See *Criterion 1.5b Description of the school's governance and committee structures, roles and responsibilities relating to the following: -budget and resource allocation* (p. 69).

– lines of accountability, including access to higher-level university officials

Per the SUNY Policies of the Board of Trustees 2014 [See Resource File], the President of SUNY Downstate reports, and is accountable to, the Chancellor of SUNY and then to the Board of Trustees. The President, as the Chancellor's designee, determines a chain of command and a hierarchy of supervisors. All employees of SUNY Downstate are ultimately accountable to the President of Downstate Medical Center. The President is considered the Chief Administrative Officer of SUNY Downstate Medical Center. (State University of New York Policies of the Board of Trustees 2014, pp. 15 & 22)

There are five distinct schools and a hospital within SUNY Downstate Medical Center: the College of Medicine, the College of Health Related Professions, the School of Nursing, the School of Graduate Studies and the School of Public Health. The Dean of each school, including the Dean of the School of Public Health, is considered the Chief Administrative Officer of the School and reports to the President of Downstate. All faculty and staff of the School, their immediate supervisors notwithstanding, ultimately report to the Dean of the School and then to the President of Downstate. As long as there are no violations of SUNY or Downstate policies, the Dean of each school has

autonomy to make decisions regarding the running of the independent school. (State University of New York Policies of the Board of Trustees 2014, pp. 23-24)

Chairs of each department within a particular school, report to the Dean of the School. Within the guidelines of the respective schools, Chairs have a level of autonomy to make decisions regarding the running of their department and supervision of their faculty and staff. (State University of New York Policies of the Board of Trustees 2014, p. 24)

All faculty of the School of Public Health report to the Chair of their respective departments, and ultimately to the Dean of the School of Public Health. Within departments, staff have varying supervisors, who may be the Chair of the department, or may report to, the Chair of the department. Central Administration staff report to the Associate Dean for Administration who reports to the Dean of the School of Public Health. (State University of New York Policies of the Board of Trustees 2014, p.17)

Access to higher-level university officials is achieved first through an employee's immediate supervisor, and then through the chain of command established by the President. All employees of the School of Public Health, except the Dean and one secretary, belong to the union called United University Professionals (UUP). The Dean is considered Management Confidential and one secretary belongs to Civil Service Employees Association, due to her early hiring date. The bargaining unit for each employee negotiates with the State for benefits, salaries, and conditions of employment. The union represents employees in disputes with the President of Downstate or his designees. Grievances may be filed by the employee or the union on behalf of the employee. Procedures for filing grievances may be found in the Agreement between the State of New York and the United University Professionals July 2, 2011 – July 1, 2016, p.8-11 located in the Resource File. (See Resource File for Agreement between the State of New York and the United University Professionals July 2, 2011 – July 1, 2016)

– personnel recruitment, selection and advancement, including faculty and staff

Personnel Recruitment

Personnel recruitment at SUNY Downstate Medical Center is governed by the general SUNY regulations. The Department of Human Resources at Downstate guides all postings and hirings. The State University of New York requires that all positions be posted on the SUNY Downstate job board and website and advertised to recruit from the widest possible applicant pool for both faculty and staff. The State University of New York is an Equal Opportunity Employer/Affirmative Action (EOE/AA) employer.

Faculty and Staff Selection

As long as the School complies with the overarching regulations of SUNY and the various unions, the School of Public Health has primary responsibility for the selection of its faculty and staff. Each departmental chair is responsible for the recruitment of qualified faculty and staff for his/her department. At the direction of the Chair, and where appropriate, search committees composed of faculty and staff, and where indicated, of students, are formed to screen faculty candidates.

Applications for faculty are screened by the committee or by the Chair of the respective department to determine interview status. Following interviews and job talks for faculty, a search committee recommends their leading candidates to the Chair, who selects a candidate, begins negotiating a hiring agreement and forwards the recommendation to the Dean. The Dean then makes a recommendation to the Centerwide Vice President for Faculty Affairs and Professional Development. Hiring documents are forwarded to the Department of Human Resources where the

applicant pool is reviewed by the Office of Affirmative Action for evidence that a broad attempt was made to solicit applications from a diverse group of people. Human Resources then refers the decision to the President of the Medical Center for final approval. An offer is made to the candidate by the Department of Human Resources in compliance with SUNY and affirmative action regulations.

Salaries for faculty and staff within the State University of New York are substantially governed by union contracts, as there is a salary range set for each rank; within that range, the academic unit may set the salary based on its annual budget allocation. The United University Professions (UUP) is the union that represents the faculty of the entire university and regularly negotiates contracts that have a term of three years. These contracts cover salaries, salary increases, discretionary salary increases, and a variety of other fringe benefits. Budgetary constraints also inform salary offering decisions. (See the Agreement between the State of New York and the United University Professionals (July 2, 2011 – July 1, 2016).

Personnel Advancement

Promotion and tenure practices for faculty are governed by the policies and procedures of the Trustees of the State University of New York and the Agreement between the State of New York and United University Professionals (July 2, 2011 – July 1, 2016) and are stated in the Downstate Faculty Handbook. (See Resource File) These guidelines require systematic evaluation of faculty on an annual basis to determine eligibility for promotion. The University guidelines as they pertain to Academic Employees (faculty) are stated below. University and union guidelines which govern advancement of 'professional' employees (staff) are found in the State University of New York Policies of the Board of Trustees 2014, pp. 55-57, and the Agreement between the State of New York and the United University Professionals (July 2, 2011 – July 1, 2016) in Resource File.)

Faculty in the School of Public Health are evaluated annually by the Chair of their Departments. At the end of each academic year, two evaluation instruments are utilized to determine faculty competence and performance. These are: 1) Faculty Effort Survey (FES) and 2) Annual Faculty Evaluation & Development Report Form. (These templates and instructions for completion by faculty are included in the Resource File.) The Faculty Effort Survey details the number of hours individual faculty members have engaged in all the various activities in which they have been involved for the past academic year. This includes: teaching, research, service, committee work, student advising and faculty development. The Annual Faculty Evaluation and Development Form is a self-evaluation completed by individual faculty members regarding their professional performance and goals for the past as well as needs for the future in the areas of teaching, research, service and professional development. These are completed annually and submitted to the respective Chairs. The Chairs then meet with each faculty member individually to discuss the forms submitted. Completed forms are kept in each department as well as in the main office for review as needed. (State University of New York Policies of the Board of Trustees 2014, pp. 53-55)

Weighted criteria have been developed by the SPH Committee on Academic and Professional Qualifications (CAPQ)¹. In keeping with the general criteria used throughout the various academic units of the Downstate Medical Center. The CAPQ criteria for the SPH differ slightly from the other academic units in their weighting of teaching and service in the tenure-tracks. In addition the SPH is unique in having a tenure-track for Education and Community/Professional Services which gives more weight to teaching and service than the other tenure-tracks in the SPH and in other academic

¹ Officially a Sub-Committee of the Executive Committee of the Faculty and Professional Staff Assembly. For the remainder of this document, this Sub-Committee will be referred to as the Committee on Academic and Professional Qualifications (CAPQ).

units. Teaching and service are more equivalent to research in the weighted criteria than is the case in the College of Medicine, for example.

– academic standards and policies, including establishment and oversight of curricula

Academic standards and policies are guided by the larger policies of SUNY and Downstate Medical Center, and are stated in the SUNY Downstate Student Handbook 2014-2015 [Appendices I, II and III, pp. 138-172]. Policies that apply to SPH students are delineated below (SUNY Downstate Student Handbook 2014-2015 pp. 127-136).

DEFERRAL OF ADMISSION

Accepted applicants to the School of Public Health (SPH) who request a deferral of admission and who are granted a deferral, are deferred for only one year. Deferrals of admission will not be extended beyond the one year limit except under extraordinary circumstances.

TRANSFER CREDIT (DEGREE RESIDENCY REQUIREMENTS)

Advanced Certificate Program: Transfer Credits are not accepted.

MPH Program: A maximum number of twelve (12) credits from another CHEA regionally accredited college and/or university can be transferred into the MPH program. Transfer of credits for courses used towards the completion of a granted degree will not be considered. Courses taken at other CHEA accredited institutions must be approved by the departmental chair. **Courses used for previous degrees cannot be transferred.**

Doctoral Program: A maximum number fifteen (15) credits from another CHEA regionally accredited college and/or university can be transferred into the doctoral program. Courses used towards the completion of a granted degree will not be considered. However, some DrPH coursework may be waived if relevant doctoral level courses have been taken at another institution. **A waiver or transfer of credits for course(s) taken at another accredited institution(s) must be approved by the departmental chair.**

For transfer of credits or a waiver, the accepted student must provide: 1) a course description and 2) verification of at least a B grade (3.0 on a 4.0 system) in that particular course(s).

ACADEMIC ADVISING, SUPERVISION, AND EVALUATION OF STUDENT PROGRESS

Each student is assigned a faculty advisor upon admission to the School. Advisor assignments are based on faculty availability within the School. Faculty advisors assist students in selecting a program of study and monitoring progress toward the successful completion of the degree. Advisors are available throughout the academic year to assist students with problems or issues and for discussions regarding academic progress and career opportunities. Advisors may be changed by request to and with the approval of the departmental chair. Advisors are required to remain current with each student's academic progress. Instructors are required to inform the advisor at appropriate intervals concerning students who are having academic difficulties. The advisor will, in turn, share said status with the departmental chair. Together, the advisor, and, as needed, the departmental chair, will work with the student to find necessary assistance.

Students are encouraged to maintain regular contact with advisors. Each student has the responsibility to meet with his/her faculty advisor at least once each semester prior to registration in order to review completed course work and course requirements and assure that the course plan is appropriate. Confidential files will be maintained on each student charting the student's academic progress according to the Family Educational Rights and Privacy Act (FERPA).

For MPH students, a special emphasis is placed upon advising students engaged in the Culminating Experience. Each student and faculty advisor must review the protocol for the Culminating Experience and assure that the proper documents are completed.

For DrPH students, a special emphasis is placed upon advising students engaged in the doctoral dissertation process. Each student and his/her Dissertation Advisor (committee chair) and Committee, must work closely throughout to assure that the student and accompanying requirements and documents are completed properly. Note that the student engaged in dissertation work must register for thesis advisement each semester until the dissertation is completed and approved.

ACADEMIC COUNSELING

The Academic Counseling Offices of the respective Colleges of Medicine, Nursing, Health Professions, and the School of Public Health are available to students for academic support. They provide individualized instruction, workshops, and resource materials on time management, study organization, test-taking techniques, and stress management. Group tutorials will be available for selected courses as needed. Referrals for one-to-one tutoring are available. An educational counselor is available to meet with individual students who are experiencing academic difficulties. The SPH will provide additional resources as needed.

ACADEMIC INTEGRITY

Students are expected to maintain the highest standards of honesty in their academic pursuits. Academic dishonesty is considered a threat to the integrity and reputation of SUNY Downstate Medical Center and all the faculty and students associated with it. Since academic integrity and behavior of students suggest their future professional behavior and integrity in fulfilling their public health responsibilities, the faculty and students of SUNY Downstate Medical Center are committed to upholding and enforcing the highest standards of academic integrity. Students found guilty of any form of academic dishonesty are subject to disciplinary action. Academic dishonesty includes cheating, forgery, plagiarism, and any other infringements that may imply deviance from the highest standards of honesty in all aspects of academic endeavor.

Forms of Academic Dishonesty:

Cheating: This is defined as giving or obtaining information by improper means in meeting any academic requirements. Cheating is a serious violation that includes, but is not limited to, the following examples:

- a. The use of the same work for academic credit in more than one course without the knowledge or consent of the instructor(s).
- b. The fabrication of any information used to satisfy any academic requirement.
- c. Behavior that constitutes academic dishonesty during an examination include, but is not limited to:
 - 1) Copying the work of others.
 - 2) Deliberately exposing examination materials to review or use by other students.
 - 3) Using notebooks, textbooks, information, or materials not specifically authorized by the instructor.
 - 4) Speaking or communicating regarding the exam with other students at any time during the examination.
 - 5) Using a cell phone, beeper or other electronic device during an examination.
 - 6) Leaving the examination for any length of time during the examination, without the authorization of the instructor/proctor.
(Leaving the examination room after the exam has started will only be authorized for genuine issues or emergencies. Student may be escorted when leaving and returning to exam room.)

Forgery: This is defined as the alteration of academic forms, documents, or records or the signing of such forms or documents by someone other than the designated or authorized individual. Forgery also includes modifying an examination or assignment that has been graded and returned to the student for review.

Plagiarism: This is the representation, intentional or unintentional, of someone else's words or ideas as one's own. This includes using the work of another student, past or present, as well as the work of published authors. Since under New York State law, words in print are the property of the author or publisher, the intent to deprive that person of property is a form of larceny punishable by fine. When using another person's words in a paper, students must place them within quotation marks or clearly set them off in the text and give them appropriate attribution by footnoting or references. When students use only the ideas and change the words, they must clearly identify the source of the ideas. Plagiarism, whether intentional or unintentional, is therefore a violation of the property of the author plagiarized and of the implied assurance by the students when they hand in work that the work is their own. This includes those individuals who facilitate acts of academic dishonesty by providing papers or other information by another student as their own work. If students have any questions about what constitutes plagiarism, it is their responsibility to clarify the matter by conferring with the instructor.

The model for citations and references used in course work is the Manual of Style of the American Medical Association (AMA), Tenth Edition. You can review examples on the AMA Citation Style website (<http://www.lib.jmu.edu/citation/amaguide.pdf>).

Multiple Submissions: Submitting substantial portions of the same work for credit more than once, without the prior explicit consent of both the instructor to whom the material is being submitted and the instructor to whom it has been submitted in the past is considered a multiple submission and is considered a violation of academic rules.

Procedures for Resolving Academic Integrity Cases

Step 1. The faculty member/course director should first determine the nature of the breach/infracton of academic policy. During this process, the faculty member/course director must assemble credible and convincing evidence that a breach/infracton of academic policy has occurred and memorialize it in writing.

Step 2. The faculty member/course director should present this evidence in writing and verbally to the Chair of the Department for discussion.

Step 3. If the Chair of the Department believes the evidence to be credible and convincing, the faculty member/course director must communicate to the student in writing within 48 hours of that confirmation that a breach/infracton of academic policy has occurred and arrange to meet with the student as soon as possible.

Step 4. After discussion with the student, the faculty member/course director should determine the course of action. This can include:

- a. requiring that the student redo the assignment in the case of plagiarism
- b. giving a failing grade on the specific academic effort under consideration.
- c. giving a failing grade for the entire course

The faculty member/course director must communicate their decision to the student in writing, with a copy to the Vice Dean, within 48 hours of having discussed the matter with their Chair and having obtained concurrence that a breach/infracton did indeed occur. The faculty member/ course director must memorialize in writing all discussions pertaining to the matter and keep them in a confidential file.

Step 5. In the event that the student is given a failing grade for the course because of the infraction or a failing grade on the assignment that results in a failing grade for the course, the matter will be referred to the Committee on Student Evaluation, Promotion and Honors. The Committee will carefully examine the matter within a week of being informed of it and come to a decision which they will immediately communicate to the Vice-Dean for Academic and Student Affairs who in turn will immediately inform the student in writing.

Step 6. The student will have the right to appeal the matter to Dean of the School of Public Health within forty-eight hours of being informed of the decision of the Committee on Student Evaluation, Promotion and Honors. The Dean will appoint an Appeals Committee comprised of faculty of the School of Public Health not previously associated with the matter at hand. This Appeals Committee will be provided with all necessary information. The student will have an opportunity to address the committee and present their version of events. The Appeals Committee will come to a decision and refer it to the Dean who will make the final decision.

Turn It In Software

Turn It In is a software package that provides an “antiplagiarism/anti-cheating” service for checking documents, and a grading system for enhancing feedback to students on written assignments. Faculty members at SUNY Downstate may opt to utilize this software. Furthermore, other sources must be considered in order to determine whether a violation of academic integrity has occurred. Violations of academic integrity policies by students are subject to academic integrity procedures and sanctions, and/or disciplinary procedures and sanctions.

PROFESSIONAL CONDUCT

All students are expected to exhibit a professional demeanor and behave in an appropriate manner while in class, in Field Experiences, and when interacting with SPH faculty, staff, and other students, and as individuals and groups within the respective communities. Students are expected to show respect for faculty, staff and fellow students during class and all program related interactions.

Unprofessional/inappropriate behavior includes, but is not limited to, the following:

1. Late arrival to class.
2. Late submission of papers or dated assignments.
3. Disruptive behavior in class, which includes the following:
 - a) Reading non-course related material in class.
 - b) Using cell phones/beepers/other electronic devices during class.
 - c) Having non-course related discussions with other students during class. Please see the SUNY Downstate Medical Center Student Handbook (Appendix III) for The Rules of Student Conduct.

ABSENCES FROM EXAMS

Students are expected to appear for examinations at the appointed time, or the course instructor may award the student a grade equivalent of “F” or “zero” for the exam. Students must contact the course instructor or the SPH Program Office no later than the day of the exam to explain the reason for his/her absence from the scheduled exam. Failure to notify the course instructor in a timely fashion regarding an absence from an exam may result in an “F” or “zero” for the exam. A student may be excused by the course instructor due to illness or other emergency. Personal physician notes (**may not be from a relative**) or a note from SUNY Downstate’s Student Health Service, must be presented to the course coordinator to document excused absences for illness. (Some courses coordinators may only accept notes from the Student Health Service. Students are advised to consult the course instructor for the policy in that course.) If the student provides appropriate documentation, a make-up exam **may** be authorized by the course instructor. **The date**

and time of the make-up is at the discretion of the course instructor and/or the department chair.

AUDITING

No course auditing will be permitted. Only SPH matriculated students, or those for whom a specific educational program (for example: medical residents/fellows) has been agreed upon by the departmental chair and/or Vice Dean, will be admitted to classes.

COURSE WITHDRAWALS

A student may withdraw from a course upon his/her written request. The request requires approval by both the course director and the SPH Departmental Chair.

A “W” will be recorded on the student’s official transcript if the withdrawal is prior to the deadline (as specified on the academic calendar) to withdraw with a grade of a “W”.

A “Withdraw Pass” (WP) will be recorded, if a student withdraws at a passing grade level from a course prior to the deadline (as specified on the academic calendar) to withdraw with a “WP” or a “WF”.

A “Withdraw Fail” (WF) will be recorded, if a student withdraws at a failing grade level from a course prior to the deadline (as specified on the academic calendar) to withdraw with a “WP” or a “WF”.

A “Fail” (F) will be recorded on the student’s official transcript if a student voluntarily withdraws after the deadline (as specified on the academic calendar) to withdraw with a “WP” or a WF”.

To withdraw from a course, the student must:

1. Obtain an Add/Drop form from the SPH Office of Student Affairs,
2. Discuss the intent to withdraw with the assigned faculty advisor,
3. Obtain a withdrawal grade with the signature of the course instructor and the departmental chair, and,
4. Return one copy to the SPH Office of Student Affairs and submit the form to the Registrar’s Office.

Students must speak to the course director and advisor(s) before withdrawing from a course.

Please note that withdrawal within the first week of classes entails no penalties – no “W” on the student’s record; no withdrawal fee. Withdrawal within the second week of classes entails no “W” on the student’s record, but does incur a 30 percent of the tuition charge. Please see the academic calendar for specific dates.

COURSE/GRADE APPEAL PROCEDURES:

A student who is dissatisfied with a course grade or has been recommended for repeating a course by the SPH Committee of Student Evaluation, Promotion, and Honors (SEPH) will be granted the right to appeal the recommendation (in writing) to the Departmental Chair. The appeal process is as follows:

A student who is dissatisfied with a course grade or has been recommended for repeating a course by the SPH Committee of Student Evaluation, Promotion, and Honors (SEPH) has ten (10) business days after the official grade has been submitted to the Office of the Registrar to appeal a grade. After the ten (10) business day deadline, the grade is considered final and no changes can be made. The appeal process is as follows:

1. Within the ten (10) business day period, a student wishing to appeal a grade must first discuss the matter with the course director. If the matter is not resolved at the course director level, the student may appeal to the Departmental Chair by submitting a written appeal to the Departmental Chair, with a copy also to the Vice Dean.

2. The Departmental Chair will review the written appeal and interview the course director. The student will also be provided with an opportunity to discuss his/her grade appeal with the Departmental Chair.
3. Upon completion of the review process, the student will be notified of the final decision of the Departmental Chair within ten (10) business days of his/her grade appeal meeting with the Chair. The Chair is required to employ only his/her best effort to notify the student of his/her status. (Notification will be made to the address on file in the Office of the Registrar and a copy will be sent to the student's Downstate e-mail account.) A copy of the chair's decision letter will also be given to the Vice Dean, SPH and the SPH Assistant Dean for Enrollment & Student Affairs.

EVALUATION OF STUDENT PERFORMANCE

The faculty is charged with being objective and fair in the evaluation of student performance. Evaluation of student performance is conducted through multiple measures such as examinations (written and oral), class participation, and by observations in discussion groups.

Attendance in the SPH is a privilege and not a right. The SPH reserves the right to dismiss a student at any time for deficient academic performance or unprofessional behavior as determined by the SPH Committee on Student Evaluation, Promotion, and Honors or the disciplinary procedures of the College.

Course instructors are obligated to inform students of the course requirements and evaluation procedures at the beginning of each course. This information must be provided to students in writing. Each course instructor provides students with advice about their academic standing in the course, to detect academic difficulties prior to the final grade.

Course instructors are responsible for entering student grades on the Banner Self-Service system by the semester deadline as specified by the Office of the Registrar. Any change in a student grade must be submitted by the course instructor or SPH departmental chair in writing to the SPH Office of Student Affairs who will then submit the change of grade to the Office of the Registrar.

Student questions regarding a grade in a course must first be directed to the course instructor. If questions still remain, the student must meet with the departmental chair. The departmental chair's decision is final. If a student believes that his/her final course evaluation has been affected by discriminatory behavior as defined by law, the student is urged to meet with the Vice Dean and/or the Chief Diversity Officer, Kevin Antoine, in addition to the individuals listed above.

Institutional policy prohibits the posting of student grades by social security number or other personally identifiable mechanisms. Some instructors post final grades on the PRIME system. To ensure confidentiality, students may access their final grades electronically through My Downstate Academic Portal using their student ID numbers and passwords. At the discretion of the departmental chair, students may receive verbal notification of their grades from SPH Assistant Dean for Enrollment & Student Affairs **after** final grades are submitted to the Registrar each semester.

ACADEMIC PROBATION

A student whose cumulative GPA is below 3.0, based on a minimum of four (4) courses (12 credits), may be placed on academic probation. A student on probation may register for a maximum of six (6) credits per semester. After completing twelve (12) credits on academic probation, a cumulative GPA of 3.0 must be achieved in order to be removed from academic probation. A student who fails to achieve a cumulative GPA of 3.0 or higher at the end of taking these additional twelve (12 credits) or whose performance on a lesser number of credits makes it mathematically impossible for him/her to

achieve the required GPA of 3.0, shall be referred to the Committee on Student Evaluation, Promotion, and Honors by the departmental chair, which will recommend one of the following options:

1. that the student be dismissed because of poor academic performance;
2. that the student be allowed to continue the next semester on a modified study program and be required to successfully repeat any failed course(s);
3. that the student take a leave of absence (for not more than one year) from the School of Public Health until readmitted to either repeat the course(s) or raise his/her GPA to 3.0;

The Committee may request that members of the faculty who are involved in the case be present to answer questions. They may also request additional information. A formal vote is taken and a recommendation is submitted in writing to the Dean. After considering the recommendations of the Committee, the Dean will make a determination. The Vice Dean will notify the student in writing of the action and of his/her right to appeal.

Concurrent degree students who are placed on academic probation will have the other degree program notified of the change in status.

DEFICIENT GRADES

A "Fail" (F) grade and a "Withdraw Fail" (WF) are both considered a deficient grade and can be remediated only by repeating the entire course. However, the "F" grade and the "WF" remain on the official transcript along with the grade achieved by removing the deficiency. A student has only one opportunity to remove a deficient grade in a course. If the student fails this make-up, the student will be given a "Fail" grade.

Deficient grades in two or more courses in a semester may subject the student to dismissal. However, since each student's academic performance is reviewed on an individual basis, students are advised to meet with his/her student advisor and/or the departmental chair during the academic semester if they have questions about their particular situation.

SPH COMMITTEE ON STUDENT EVALUATION, PROMOTION, AND HONORS (SEPH)

Responsibilities

The SPH Committee on Student Evaluation, Promotion, and Honors is responsible for:

1. Evaluating the academic performance of all students
2. Recommending students for promotion
3. Evaluating students in academic difficulty
4. Consequences to be applied for infractions of academic integrity
5. Recommending plans for remediation of those students with deficiencies or those who have failed to register for the semester without an approved leave of absence
6. Recommending students for graduation (see below for graduation requirements)
7. Recommending the conferring of honors on those students whose work is outstanding
8. Recommending students for marching in the annual May Commencement ceremony

1. Voting Members: The Committee will consist of a minimum of five voting faculty members inclusive of the Chair. All new voting faculty members will be appointed by the Dean.

Eligibility requirements for faculty appointment to the Committee include:

- a. The faculty member must be a member of the voting faculty.
 - b. The faculty member may not be an officer of the administration.
2. Non-voting members:
- a. The SPH Vice Dean and the SPH Assistant Dean for Enrollment & Student Affairs.
 - b. One representative from the office of Student Affairs.

The following may attend as ex-officio members: SUNY Downstate Medical Center Dean of Student Affairs or SUNY Downstate Medical Center Associate Dean of Student Affairs.

Meetings of the SPH Committee on Student Evaluation, Promotion, and Honors are confidential and closed to all but the members of the Committee and *ex-officio* members and invited guests.

The Committee will meet a minimum of three times per year; ad hoc meetings will take place as needed. All matters discussed in the Committee are decided by vote in a meeting consisting of at least three voting members.

The Committee may make the following recommendations:

1. Graduation.
2. Graduation with Honors.
3. Promotion, unqualified.
4. Promotion with qualification:
 - a. Recommendation for probationary status (Academic Probation) because of poor academic record or unprofessional behavior.
 - b. Requirement for remedial work, such as a make-up examination or course paper, or repeat of a course/courses
5. Dismissal for academic failure or unprofessional behavior.

All recommendations of the SPH Committee on Student Evaluation, Promotion, and Honors, to repeat all or part of a course or courses, dismissal for academic failure, or unprofessional behavior shall require a majority vote. Such recommendations will be submitted to the Dean of the SPH.

Students will not be allowed more than three (3) years to complete the Advanced Certificate Curriculum, more than six (6) years to complete the MPH curriculum, or Eight (8) years to complete the DrPH curriculum, except under special circumstances as determined and approved by the Committee and recommended to the Dean. The time limits pertain only to the MPH or DrPH portion of the concurrent degree program.

The SPH Committee on Student Evaluation, Promotion, and Honors is responsible for recommending to the Dean the dismissal of a student that may occur for any of the following reasons:

1. Unprofessional behavior
2. Inadequate performance while on probation (i.e. receives a deficient grade or violates the conditions of probation).
3. Failure to make satisfactory progress towards graduation.

In the event that the Committee is considering recommending a student for dismissal, prior to the Committee making a final recommendation, the student will be notified in writing and will be given an opportunity to meet with the committee to discuss and clarify any issues regarding his or her academic performance (See Appeals Process described below). The student will have a minimum of 48 hours to prepare his/her statement. If the student opts not to appeal, the recommendation for dismissal will be forwarded to the SPH Dean. A majority vote is required for dismissal.

Appeal and Notification Procedures

Students who have been recommended for dismissal for academic failure or unprofessional behavior by the SPH Committee of Student Evaluation, Promotion, and Honors (SEPH) shall be notified by the SPH Vice Dean (or designee) and may appeal the recommendation (in writing) to the Dean.

Cases in which students are being recommended for academic probation may not be appealed.

The appeals process is as follows:

1. Written (and/or email) notification will be sent by the Vice Dean (or designee) to the student of a decision of the SEPH Committee of unsatisfactory academic progress within five (5) business days of the SEPH Committee's decision. The Vice Dean (or designee) is required to employ only his/her best effort to notify the student of his/her status. (Initial notification will be made to the student's current local address on file with the Office of the Registrar, a copy will be sent to the student's Downstate e-mail account.) Students are responsible for keeping their current mailing address and telephone number on file with the Office of the Registrar and the SPH. Students in academic difficulty are advised to contact the Vice Dean immediately following the SEPH meeting to ascertain their academic status.
2. A student wishing to appeal a dismissal determination affecting him/her, as provided above, must submit a written appeal notice to the Vice Dean no later than three (3) business days after the student has been sent notification, by mail or email, of the SEPH Committee's action or determination. The written appeal letter should outline reasons for the appeal in detail. Appeals are intended to be expedited in the shortest reasonable time in order to provide the student with the opportunity to register for the ensuing term.
3. The written appeal will be considered by an Ad Hoc Appeals Committee appointed by the Dean. The voting members of the Ad Hoc Appeals Committee may not be members of the SEPH Committee and will be selected among those faculty not directly involved with the student's case. There will be a minimum of three voting members on the Ad Hoc Appeals Committee. SUNY Downstate's Associate or Assistant Dean of Student Affairs will serve as ex-officio, non-voting members.
4. The Chair of the Ad Hoc Appeals Committee will notify the student in writing that he/she is being granted an opportunity to appear before the Ad Hoc Appeals Committee to discuss, in detail, the reasons for his/her appeal. The Chair shall provide written/email notice of such a meeting (including the date, time and place) to the student and all Ad Hoc Appeals Committee members. The student will have, a minimum of 2 (two) business days advance notice of the meeting day and time. The meeting with the Ad Hoc Committee will be scheduled within 10 (ten) business days the Committee's receipt of the student's written appeal.
5. During the meeting, the student will be given an opportunity to present his/her appeal before the Ad Hoc Appeals Committee. The student will not be allowed to record any of the proceedings. After completion of the student's presentation, members of the Ad Hoc Appeals Committee may address questions to the student. Furthermore, the Ad Hoc Appeals Committee may seek information from the program chair, faculty, student's advisor, and/or other parties involved in the case. After the student has made any concluding remarks, the student will leave the meeting so that the Committee can discuss the appeal, and make a recommendation to the Dean.
 - a. The Ad Hoc Appeals Committee may recommend that the prior action of the SEPH Committee either be upheld, modified, or reversed. A decision requires a majority vote.
 - b. The decision of the Ad Hoc Appeals Committee will be sent in writing within seven (7) business days by the Chair of the Ad Hoc Appeals Committee to the Dean, the Vice Dean, and the SPH Assistant Dean for Enrollment & Student Affairs.
 - c. The Vice Dean will notify the student, in writing, of the decision of the Ad Hoc Appeals Committee within fourteen (14) business days of his/her appeal meeting. The Vice Dean is required to employ only his/her best effort to notify the student of his/her status. (Notification

will be made to the address on file in the Office of the Registrar and a copy will be sent to the student's Downstate e-mail account.)

6. Students who have been recommended for dismissal from the School of Public Health may schedule an appeal with the Dean of the School of Public Health within ten (10) business days of the date of the letter from the Vice Dean. The Dean, after due consideration, may either endorse the recommendation of the Ad Hoc Appeals Committee or make an independent determination. In either event, the Dean's decision is final and binding.

7. The student will be notified of the final decision of the Dean. The Dean is required to employ only his/her best effort to notify the student of his/her status. (Notification will be made to the address on file in the Office of the Registrar and a copy will be sent to the student's Downstate e-mail account.)

GRADING SYSTEM

Instructors assign a letter grade reflecting the performance of each student in a course. Grade points are assigned to each letter grade based on a 4.0 system and the number of credits for each course. Cumulative grade point averages are calculated each semester:

Course Average	Letter Grade	Grade Points/Credit
96-100	A	4.00
90-95	A-	3.67
85-89	B+	3.33
80-84	B	3.00
75-79	B-	2.67
70-74	C+	2.33
60-69	C	2.00
	F	0
	I	None
	P	None Successful completion of course requirements.
	No letter grade assigned	
	W	None
	WF	0
	WP	None
	Z	None Thesis in Progress

Fail: failure to successfully complete the requirements for a major portion of the course, failure to complete successfully requirements for the entire course, or withdrawal from a required course after the deadline as indicated on the academic calendar.

Incomplete: a portion of the requirements of a course has not been attempted when the course requirements have been completed in a timely fashion (usually within two weeks), the course director reports the change of grade to the Registrar. If the course requirements have not been completed by the specified time, the "I" grade is changed to an "F". Course directors must submit any extensions to deadline dates for Incompletes, in writing, to the SPH Office of Student Affairs, who will in turn forward the request to the Office of the Registrar. The maximum length of time for satisfying course requirements is the last day of classes in the subsequent semester, unless there are special circumstances approved by the SPH Committee on Student Evaluation, Promotion, and Honors.

To be eligible for graduation, a student must remove any "Incomplete" grade. An "Incomplete" grade is not considered a deficient grade. However, for awarding graduation honors, the outstanding work must be completed before such honors will be granted.

Credit: the transcript notation when a student has advanced standing (e.g. transfer credit) for a course previously completed.

A “WF” grade is an academic deficiency and subject to review in the Student Evaluation process.

GRADUATION REQUIREMENTS

Students must meet all SPH graduation requirements:

1. Register for, and satisfactorily complete all required course work in the curriculum.
2. Register for, satisfactorily complete the Culminating Experience.
3. Satisfactory remediation of any academic deficiencies.
4. Be in good standing (i.e. not on academic or clinical or disciplinary probation at the time of graduation).
5. A grade point average of B or 3.0 on a 4.0-point system is required for successful completion of the degree requirement.
6. Have no disciplinary charges in progress or pending.
7. Satisfy all financial obligations due the SUNY Downstate Medical Center.
8. Complete a mandatory financial aid exit interview if the student has received financial aid while at the SUNY Downstate Medical Center.

Please note: Students are permitted to march in the Commencement Ceremony and have their names listed in the program only once. Any student who meets the above criteria and marches in the Commencement Ceremony and subsequently does not complete the final requirements for graduation WILL NOT be permitted to march again or have his/her name in the program the following year.

GRADUATION HONORS

To graduate with honors, a student must meet the following criteria

- a. 3.60 GPA or above
- b. Outstanding (with honors) Culminating Experience
- c. No “C” or lower grades
- d. No record of lack of professionalism or disciplinary issues while in the program

Students graduating in August or December of the previous year, or May of the current year and participating in the May Commencement Ceremony of the current academic year are eligible for the General Excellence Award for that academic year.

August and December Graduates

SPH students who complete all degree requirements in August or December of a given year may participate in the Commencement Ceremony in May of the following year.

Awards for August and December Graduates

Students who graduate in August or December of the previous year, or May of the current year, are eligible for all Graduation Awards for that academic year.

HEALTH INFORMATION PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

All students must be current in their Health Information Portability and Accountability Act (HIPAA) training every two years. Failure to do so will result in not being permitted to register or to participate in any clinical educational activities or Field Experiences or events which involve individuals in the field. For more information, contact the Office of the Registrar.

LEAVES OF ABSENCE

All leaves of absence are granted by the departmental chair or the Vice Dean. A request for a leave of absence may be approved or disapproved by the departmental chair. Permission for the leave

must be obtained in accordance with these procedures and prior approval to return must also be granted.

Requesting a Leave:

Students are granted one (1) Leave of Absence while matriculated in the School of Public Health. To request a Leave of Absence from the School of Public Health; a student must:

1. Obtain a Leave of Absence form from the SPH Office of Student Affairs.
2. Request a leave in writing as specified on the Leave of Absence form. The request must include:
 - a) the length of time desired for the leave (up to one year)
 - b) reasons for the request
 - c) a description of the activities that will make the leave meaningful and useful (outline a plan).
3. This written request must be brought/sent to the SPH Office of Student Affairs, and the student must meet with the departmental chair or the Vice Dean.
4. The student must continue in coursework (barring an emergency situation as defined by the departmental chair), until the leave of absence is approved. The departmental chair (or designee) may request that the student meets with the Vice Dean prior to granting approval for the leave.

Advanced Certificate students have a maximum of three (3) years to complete the requirements.

Master of Public Health students have a maximum of six (6) years to complete the MPH degree.

Doctor of Public Health students have a maximum of eight (8) years to complete the DrPH degree.

If the leave will extend the student's academic time past the maximum number of years allowed to complete the degree, that extension will require approval by the SPH Committee on Student Evaluation, Promotion, and Honors.

5. Clearances from the Bursar, Financial Aid and Housing, if appropriate, must be obtained. Although the departmental chair may grant a leave, the SPH Committee on Student Evaluation, Promotion, and Honors will review the student's academic status up until the time the leave was approved, and may recommend action. All grades earned by the student prior to the approval of the leave remain on the student's transcript (permanent record). Leaves of absence may be granted for the following reasons:

1. For reasons of a Special Academic Program
2. Occasionally, leaves are granted for the purpose of special study. Written requests should be made to the departmental chair with documentation.
3. For reasons of health or other personal emergency

If a health, family, social, or emotional situation necessitates time away from the program, a leave of absence may be recommended by the student's advisor or requested by the student. Depending on the nature of the student's request for leave, consultants from the Student Health Service and/or psychiatric consultants may be asked to provide information (with the student's consent) to the committee.

Leaves of absence are granted for a maximum of one year. An extension may occasionally be granted by the Dean, upon recommendation by the SPH Committee on Student Evaluation, Promotion, and Honors for unusual circumstances if the student requests an extension in writing at least two months prior to the expected reentry date.

Returning from Leave of Absence

A student may only return if the departmental chair determines that the student has met the goals and conditions for the leave. A request to reenter must be received by the departmental chair by the date specified in the letter from the SPH Committee on Student Evaluation, Promotion, and Honors. Such requests will be evaluated in terms of the student's success in resolving the problems that necessitated the leave and the student's ability to resume the responsibilities of continuing in their program. Every student returning from a leave of absence must be cleared by the Student Health Service and receive written approval to resume classes. A student granted permission to return from a leave must meet with the departmental chair and/or the student's advisor to schedule courses for the academic year.

If, at the end of the approved absence, the student has not applied for reentry or is not permitted reentry, reentry, the student is withdrawn from the college. There is no appeal from this determination.

STUDENT RECORDS

The SPH is in full compliance with the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment), which gives students access to educational records. Students may arrange to review their program records by making an appointment with the School of Public Health Assistant Dean for Enrollment & Student Affairs in the School of Public Office of Student Affairs.

EMAIL

In order to receive official information distributed by faculty and administration, students are responsible for checking their email frequently – at least once a day.

DISCIPLINARY PROCEDURES (See Appendix III)

EMERGENCIES (WEATHER AND OTHER EVENTS) (see SUNY Downstate Student Handbook 2014-2015 p. 136)

OVERSIGHT OF CURRICULA

The SPH has primary responsibility for curriculum development for all of its degree programs and the Advanced Certificate program. The Departmental Chairs accountable for the curriculum for each of the respective concentration(s) in their department. The faculty maintains oversight of the educational programs through a comprehensive process that begins with the development of courses in each academic department, consultation with the Vice Dean for Academic and Student Affairs and which then involves review and approval by the Sub-Committee on Educational Policy and the Curriculum, and finally, approval by the Dean. There is no University-wide approval required for a school or program curriculum. Therefore, the Dean of the SPH has full authority to approve the curriculum.

The faculty of each concentration, in consultation with their respective Chair, are responsible for developing coherent courses of study including: course content, sequencing of courses and practical Field Experiences. The Chairs work with their department faculty to ensure that each course syllabus contains appropriate content, competencies and learning objectives, prior to the syllabus being sent to the Sub-Committee on Educational Policy and the Curriculum for review.

The Faculty Governance Committee on Educational Policy and the Curriculum is responsible for oversight of all curricula for the MPH, DrPH and Certificate Programs. This Committee meets each semester to review syllabi for all courses taught, ensuring that the competencies and learning objectives listed are in line with the SPH Vision and Mission statements, overall Goals and

Professional Values, and the Overarching MPH and DrPH Competencies. Recently, the SPH undertook a comprehensive review of all of its core courses and concentration core courses to streamline the competencies and ensure that they are consistent with the above stated aims of the School of Public Health.

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

NA

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

NA

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

NA

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

This criterion is met.

Strengths: The SPH has well-defined academic policies which are consistent with the academic policies of the entire Medical Center. These policies are reviewed regularly for relevance and any modifications that may be needed. These policies are supported by the Office of Admissions, the Office of the Registrar, the Office of Student Affairs, standing Committees in the School of Public Health, e.g. the Committee on Student Evaluation, Promotion and Honors and Faculty Governance Committees, e.g. the Sub-Committee on Educational Policy and Curriculum. This Sub-Committee oversees the curricula of all degree programs and the Advanced Certificate program in the School of Public Health.

Weaknesses: None

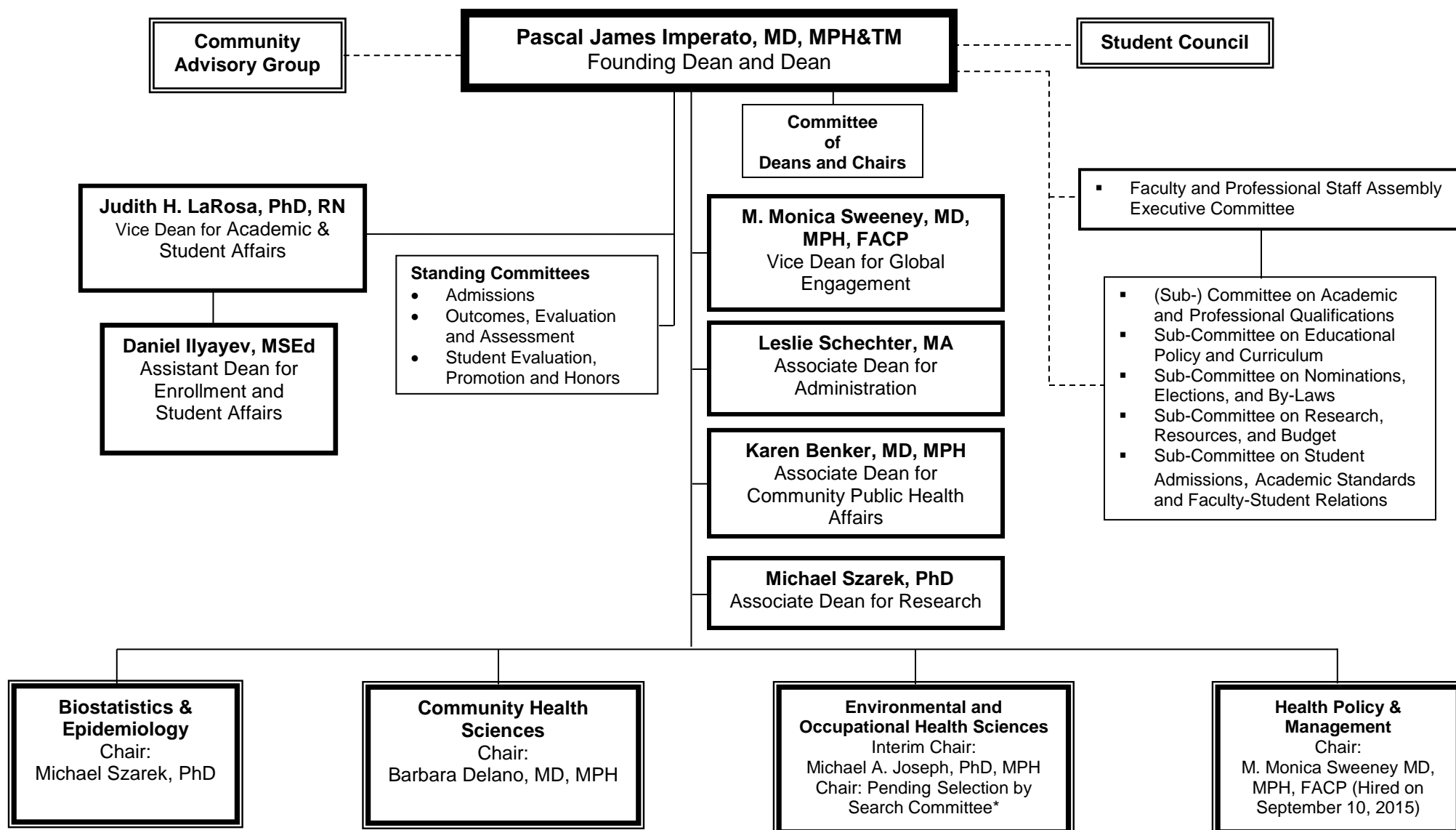
Plans: Continue to review standing policies regarding student admission, enrollment, academic evaluation, promotion and honors. Continue to review curricula to ensure the most current academic information is being transmitted to students. Revise policies, procedures and curricula as needed.

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.

Required Documentation. The self-study document should include the following:

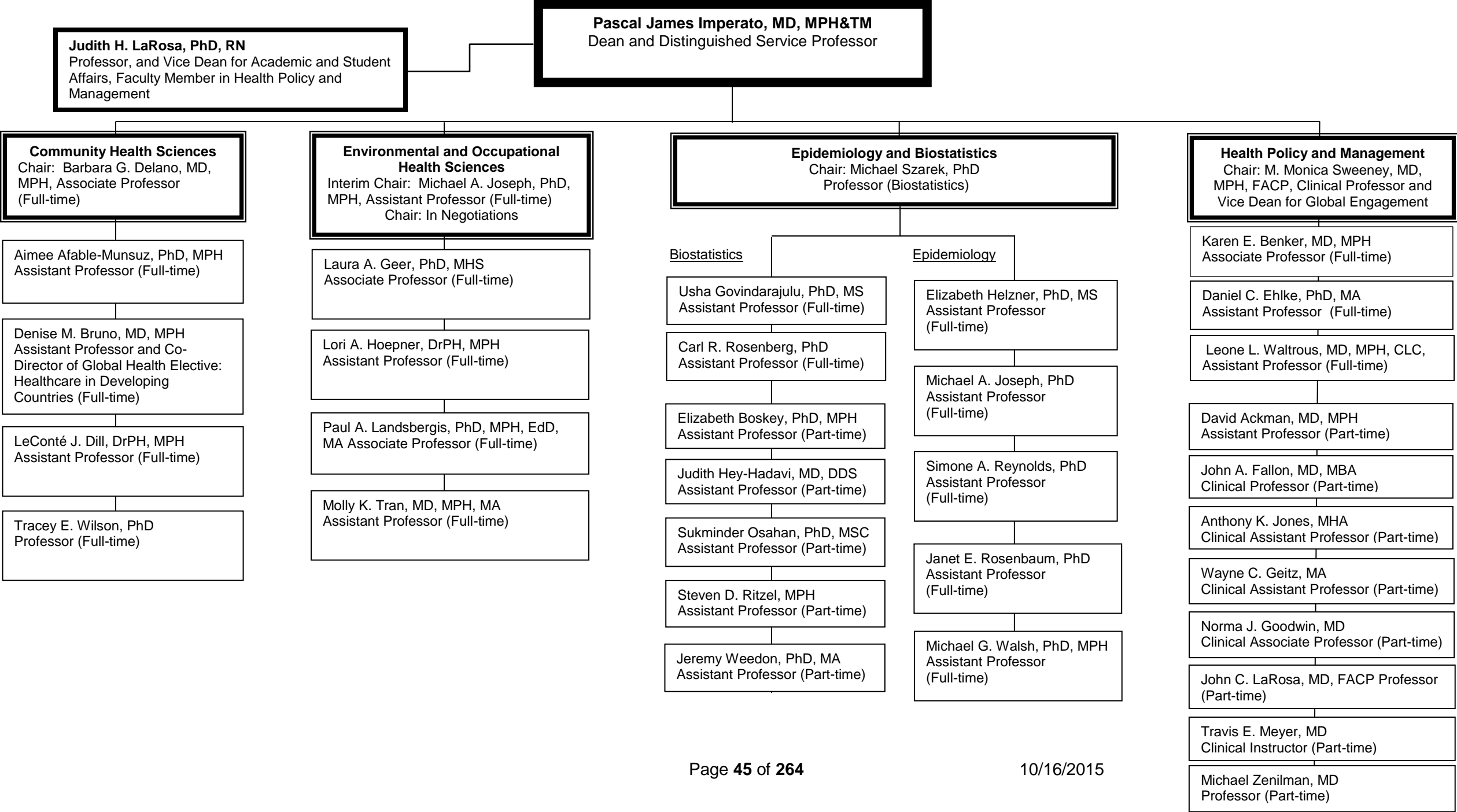
1.4a. One or more organizational charts showing the administrative organization of the school, indicating relationships among its component offices, departments, divisions or other administrative units.

Organizational Chart 1.4a.1: SENIOR MANAGEMENT OF THE SCHOOL OF PUBLIC HEALTH

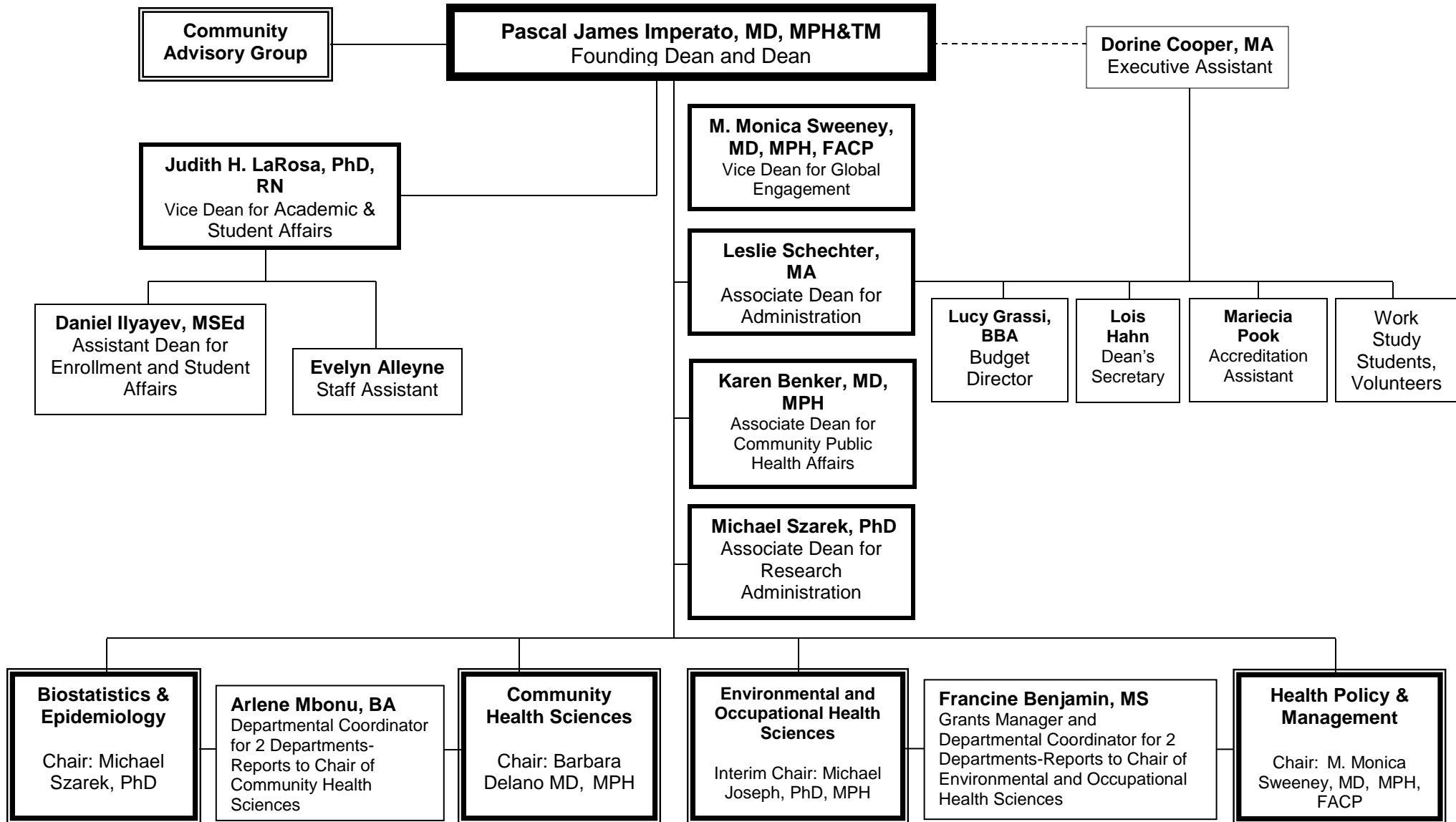


*EOHS Chair position has been posted and advertised. A number of candidates were interviewed. Negotiations are underway.

Organizational Chart 1.4a.2: FACULTY OF THE SCHOOL OF PUBLIC HEALTH BY DEPARTMENT



Organizational Chart 1.4a.3: ADMINISTRATION AND STAFF OF THE SCHOOL OF PUBLIC HEALTH



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

As the Chief Executive Officer, the Dean of the School of Public Health is responsible for leading the entire school, its faculty, and staff in the Vision, Mission and achievement of Goals set for the school, in conformance with the larger SUNY and Downstate policies and procedures. Each department is responsible for creating and maintaining the department's teaching, research and service activities, in conformance with the overall Mission, Goals and measureable objectives of the SPH. The Chair of each department leads these efforts, and is ultimately responsible to the Dean for the outcomes of these endeavors. The Chair is expected to mentor, or provide mentors for the junior faculty, guiding them in developing appropriate courses, crafting research proposals and carrying out community-based service activities. Each departmental chair is responsible to provide faculty development activities to encourage growth within their discipline.

Faculty are responsible to teach three or more courses per academic year, advise students, develop their research portfolio, moving toward regular publications and presentations, participate in University-wide committees and collaborative efforts, and be actively involved in service activities outside of SUNY Downstate.

Student Affairs staff are required to provide prospective and current students assistance in admissions processes, course enrollment and all other administrative academic functions.

Support staff are required to provide effective and efficient detail-oriented support for faculty, chairs and administration. All staff in the School Public Health are expected to participate in University-wide functions in a support capacity, e.g. commencement.

The SPH has a number of standing committees comprised of faculty and staff of the SPH, and occasionally faculty from other schools in the Medical Center. These committees meet regularly, and if necessary, on an ad hoc basis for specific topics. See Criterion 1.5a for a list of committees, their charges and members.

Faculty Governance is achieved through a number of committees and spearheaded by the SPH Executive Committee of the Faculty Governance and the Nominations, Elections, and By-Laws Sub-committee. See Criterion 1.5a for a list of Faculty Governance committees, their charges and members.

The Community Advisory Group is comprised of members of community-based organizations. The purpose of this committee is to advise the School on the needs of the community with regard to public health and workforce requirements.

In addition to SPH-specific committees, there are a number of centerwide departments which service all the major components of the Medical Center. These Centerwide departments report to the Executive Vice President and Chief Operating Officer as detailed in the Table 1.3.1b.1: SUNY Downstate Medical Center Organizational Chart (p.19). They are:

- Biomedical Communications
- Compliance and Audit Services
- Department of Admissions
- Department of Expenditure Processing
- Department of Finance
- Department of Human Resources
- Department of Purchasing and Contracts
- Department of Student Affairs
- Facilities Management and Development
- Information Technology

- Institutional Advancement and Planning
- Institutional Research
- Medical Research Library of Brooklyn
- Office of the Bursar
- Office of the Registrar
- Research Foundation (administers all extramural grant funding)
- Payroll
- Scientific Computing Center
- Student Life Services

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

Our position within the university encourages interdisciplinary communication, cooperation and collaboration through discussion and interaction with students, faculty and staff of other colleges, schools and departments/units within Downstate. Faculty involvement on Centerwide committees and the other schools' activities leads to collaborations in many areas of teaching, research and service. In addition, because our enrollment includes MD/MPH students, the school fosters the development of professional public health values, concepts and ethics. The entire Downstate community benefits, as students bring their newly developed skills and knowledge regarding public health to their learning and service experiences throughout the Medical Center.

These collaborations in turn, support the academic endeavors of the School of Public Health as there is a two-way flow of information, ideas and activities which involve members of all schools. This serves to enrich our curricula, research enterprise and service activities.

On the next page is a list of SPH faculty activities which represent interdisciplinary coordination, cooperation and collaboration that support public health learning research and service:

Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center			
Name of Faculty Member	Teaching	Research	Service
Aimee Afable, PhD, MPH (CHSC)		<ul style="list-style-type: none"> • Primary Investigator: President's Health Disparities Research Fund, SUNY Downstate Medical Center • Title: "Efficacy and Sustainability Evaluation of PATH, a Childhood Obesity Program" with Sarita Dhuper, MD, SUNY Downstate School of Medicine, Department of Pediatrics and HealthFirst • Grant Writing, Co-PI: President's Health Disparities Research Fund, SUNY Downstate Medical Center • Title: "mHealth for HIV Prevention in a Brooklyn Male Population" with Marilyn White, MD, Arthur Ashe Institute, Brooklyn Health Disparities Center (located at SUNY Downstate) 	
Karen E. Benker, MD, MPH (HPMG)	<p>College of Health Related Professions:</p> <p>Midwifery:</p> <ul style="list-style-type: none"> • 3 hours clinical training-annually <p>Occupational Therapy (OT)/Physical Therapy (PT):</p> <ul style="list-style-type: none"> • 12 hours Clinical Training-annually • OT: 2 hours lecture-annually • PT: 1 hour lecture, annually <p>College of Medicine:</p> <p>Global Health Pathway, 1st and 2nd years:</p> <ul style="list-style-type: none"> • Healthy Policy & Management-weekly on-line series • Quantitative methods-weekly on-line series <p>3rd year:</p> <ul style="list-style-type: none"> • Journal Club-weekly on-line <p>Department of Family Practice:</p> <ul style="list-style-type: none"> • Journal Club-monthly 		<ul style="list-style-type: none"> • Engagement of Residents in Ongoing Community Projects-Annually

Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center (continued)

Name of Faculty Member	Teaching	Research	Service
Denise M. Bruno, MD, MPH (CHSC)			<ul style="list-style-type: none"> College of Medicine: Course Co-Director of Global Health in Developing Countries Elective for Fourth Year Medical Students
Barbara G. Delano, MD, MPH (CHSC)	<p>Department of Medicine:</p> <ul style="list-style-type: none"> Oral Examination for 3rd Year Medical Students “Practice of Medicine” teaching rotation for residents Morning Report for Renal Fellows 	<ul style="list-style-type: none"> SONAR- Study of Diabetic Nephropathy with Atrasentan- 2014 	<p>Department of Medicine:</p> <ul style="list-style-type: none"> Direct Renal Clinic
Leconté J. Dill, DrPH, MPH (CHSC)	<ul style="list-style-type: none"> Co-facilitator of weekly Empowerment Workshops for high school girls at High School for Public Service and High School for Human Rights 	<ul style="list-style-type: none"> Consultant to Teresa Smith, MD, Clinical Assistant Professor and Assistant Residency Director, Department of Emergency Medicine, regarding research related to hospital admissions of youth entering Emergency Room with gunshot and stab wounds. Assisted in writing an IRB application to collect and analyze retrospective hospital chart data on Emergency Department admissions with gunshot and stab wounds. Co-authored Grant Proposal to conduct a year of qualitative data related to the KAVI Girls' Program with Mira Grice-Sheff, PhD, MA and Robert Gore, MD, Assistant Residency Director, Department of Emergency Medicine and Director of KAVI. Conduct participant observation during weekly Empowerment Workshops for high school girls collecting data on psycho-social needs and behavior. 	<ul style="list-style-type: none"> Participant in Kings Against Violence Initiative (KAVI), a hospital and school-based violence intervention program at Kings County and Downstate hospitals, and at high schools at the Wingate Education Complex http://kavibrooklyn.org with Robert Gore, MD, Assistant Residency Director, Department of Emergency Medicine and Director of KAVI, September 2013 – Present Mentor medical and public health students and residents at Downstate Medical Center who do research and/or service projects related to KAVI.

**Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center
(continued)**

Name of Faculty Member	Teaching	Research	Service
Daniel C. Ehlke, PhD, MA (HPMG)	<p>College of Health Related Professions:</p> <p>Midwifery Program:</p> <ul style="list-style-type: none"> • Annual Lecturer on History and Future Prospects of Health Care Reform <p>Physician's Assistant Program:</p> <ul style="list-style-type: none"> • Annual Lecturer on Health Policy 		<ul style="list-style-type: none"> • Presenter on Health Reform, Downstate Community Outreach Group
Laura A. Geer, PhD, MHS (EOHS)	<p>College of Health Related Professions:</p> <p>Physician's Assistant Program:</p> <ul style="list-style-type: none"> • Lecturer, Introduction to Environmental Health 	<ul style="list-style-type: none"> • Grant Funded Study on Fetal and Maternal Exposure to Environmental Chemicals with College of Medicine Faculty: Ovadia Abulafia, MD, Chair of the Department of Obstetrics and Gynecology, David M. Sherer, MD, Professor and Director of Department of Maternal-Fetal Medicine and Mudar Dalloul, MD, Director of Labor and Delivery. Collaborators at Arizona State University: Rolf U. Halden, PhD, Associate Professor and Director, Center for Environmental Security and Benny F. G. Pycke, PhD, Assistant Research Scientist. • Grant Funded Study on Monitoring Autism Prevalence with College of Medicine Faculty: and Joan Cracco, PhD, Ruth L. Lax, PhD, Assistant Clinical Professor of Neurology, Simone A. Reynolds, PhD, MPH, and Edward Quardros, PhD, MSc. • Grant Funded Study on Social Media with College of Medicine Faculty: Ovadia Abulafia, MD, Chair of the Department of Obstetrics and Gynecology, David M. Sherer, MD, Professor and Director of Department of Maternal-Fetal Medicine. 	<p>College of Medicine:</p> <ul style="list-style-type: none"> • Small Group Sessions with Medical Students. Topic: Preventing Diabetes Mellitus in the Global Epidemic. May 2014. • Poster Reviewer for SUNY-Downstate Annual Research Day, April 2014

**Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center
(continued)**

Name of Faculty Member	Teaching	Research	Service
Usha Govindarajulu, PhD, MS (BIOS)		<ul style="list-style-type: none"> • Co-Investigator on 2015 Grant Proposal to the American Heart Association to Establish Research at Downstate on Disparities in Cardiovascular Disease with COM Faculty: Mohamed Boutjdir, PhD, Professor, Department of Cell Biology and Associate Chief of Staff for Research and Development, Jason Lazar, MD and Marilyn Fraser-While, MD Associate Director of Research and Training, Arthur Ashe Institute for Urban Health • Grant Proposal on Health Disparities with Jason Lazar, MD COM Faculty in Cardiology • Grant Funded Study on Statistical Design and Analytical Planning with University Hospital Physician with Carl Cohen, MD, Director of Geriatric Psychiatry. • Analysis of Data Set with COM Faculty Jason Lazar, MD for Student's Field Experience 	
Elizabeth Helzner, PhD, MS (EPID)	<p>College of Health Related Professions: Physician's Assistant Program:</p> <ul style="list-style-type: none"> • Lecturer, Topics in Epidemiology <p>College of Medicine: Geriatric Psychiatry Program</p> <ul style="list-style-type: none"> • Lecturer, Topics in Epidemiology 	<ul style="list-style-type: none"> • Epidemiology of Multiple Myeloma, with Oncology Department faculty: Olcay Batuman, MD • Accuracy of Stroke Diagnosis in the field, with Emergency Medicine Department faculty: Ethan Brandler, MD. • An Arts-based Community Intervention for Parkinson's Disease, with the Occupational Therapy Department: Joyce Sabari, OTR, PhD and the Neurology Department faculty: Ivan Bodis-Wollner, MD. • The Association Between Endothelial Progenitor Cells and White Blood Cells with Coronary Artery Disease, with Oncology Department faculty: Olcay Batuman, MD; and the Cardiology Department Faculty: Erdal Cavusoglu, MD. 	

**Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center
(continued)**

Name of Faculty Member	Teaching	Research	Service
Pascal James Imperato, MD, MPH&TM (Dean)	<ul style="list-style-type: none"> • Small Group Presenter, 1st Year Medical Student Seminars 		College of Medicine: <ul style="list-style-type: none"> • Course Director, Global Health in Developing Countries for Fourth Year Medical Students • Advisor for Residency Applications, 3rd Year Medical Students 2012-2015 • Poster Reviewer for SUNY Downstate Annual Research Day 2012-2015
Michael A. Joseph, PhD, MPH (EPID)	College of Health Related Professions: Physician's Assistant Program: <ul style="list-style-type: none"> • Lecturer, Topics in Epidemiology 		<ul style="list-style-type: none"> • Poster Reviewer for SUNY Downstate Annual Research Day, April 2013
Paul A. Landsbergis, PhD, MA, EdD (EOHS)	College of Medicine: <ul style="list-style-type: none"> • Preventive Medicine Elective on "Stress and Health" Spring 2010 • Guest Lecturer for Global Health course on "Chronic Disease and Employment Conditions" Fall 2011 • Guest Lecturer for Family Practice on "Work, Hypertension, and Cardiovascular Disease" March 2011 • Guest Lecturer in Ergonomics and Work-related Musculoskeletal Disorders for Family Practice Residents March 2013 • Facilitator for Small Group Discussion on Global Health Fall 2013 	<ul style="list-style-type: none"> • Co-Investigator on 2015 Grant Proposal to the American Heart Association to Establish Research Center at Downstate on Disparities in Cardiovascular Disease with College of Medicine Faculty Marilyn Fraser-While, MD, Associate Director of Research and Training, Arthur Ashe Institute for Urban Health and Mohamed Boutjdir, PhD, Professor, Department of Cell Biology and Associate Chief of Staff for Research and Development. 	<ul style="list-style-type: none"> • Poster Reviewer for SUNY Downstate Annual Research Day, April 2013, April 2015

Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center (continued)			
Name of Faculty Member	Teaching	Research	Service
Judith H. LaRosa, PhD, RN (Vice Dean)			<ul style="list-style-type: none"> • Acts as Standardized Patient for First Year Medical Students to Learn How to Interview Patients • Poster Reviewer for SUNY Downstate Annual Research Day April 2013-2014
Simone A. Reynolds, PhD, MPH (EPID)		<ul style="list-style-type: none"> • Co-PI The Epidemiology of Orofacial Clefts in New York City (Principal Investigator: Sydney Butts, MD, Department of Otolaryngology of Chief of the Division of Facial Plastic and Reconstructive Surgery at University Hospital of Brooklyn/SUNY Downstate and Kings County Hospital Center, Co-PI: Michael Joseph, PhD, (EPID) • Co-PI: Filling the Gaps in Autism Surveillance in Ethnically-Diverse New York City, Part I (PI: Laura Geer, PhD, (EOHS), Department of Cell Biology, Co-PI: Ruth L. Lax PhD, Assistant Clinical Professor, Department of Neurology and Joan Cracco, PhD, Department of Neurology, Co-PI: Edward Quadros, PhD, Department of Cell Biology. • Co-PI: Filling the Gaps in Autism Surveillance in Ethnically-Diverse New York City Part II (PI: Edward Quadros, PhD, Department of Cell Biology, Co-PI: Laura Geer, PhD, (EOHS), Joan Cracco, PhD, Department of Neurology, and Laurie Lax PhD, Department of Neurology. 	

**Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center
(continued)**

Name of Faculty Member	Teaching	Research	Service
Janet E. Rosenbaum, PhD (EPID)	<p>College of Medicine:</p> <ul style="list-style-type: none"> • Guest Lecturer on Epidemiologic Study Design for Infectious Disease Fellows' Conference, May 14, 2013. • Guest Lecturer on Social Disparities in Health for Clinical Skills Course, November 12 & 13, 2013, April 28, 2014. 	<ul style="list-style-type: none"> • Poster Co-Author: "HEAT: HIV Prevention and Treatment Program for Youth in Brooklyn, 2011-2012," at New York City Epidemiology Forum, New York, NY, February 28, 2014 with Sarah Shao, MD, Adolescent Health Fellow, Jeffrey Birnbaum, MD, MPH, Department of Pediatrics, and Amy Suss, MD, Associate Professor, Department of Pediatrics and Director of the Adolescent Medicine Program. • Poster Co-Author: "HEAT: HIV Prevention and Treatment Program for Youth in Brooklyn, 2011-2012," at CDC National STD Prevention Conference, Atlanta, GA, June 10, 2014 with Sarah Shao, MD, Adolescent Health Fellow, Jeffrey Birnbaum, MD, MPH, Department of Pediatrics Faculty, and Amy Suss, MD, Associate Professor, Department of Pediatrics and Director of the Adolescent Medicine Program. • Poster Co-Author: "Demographic and Behavioral Risk Factors Among Youth Testing for HIV at Community Based Venues," American Public Health Association, New Orleans, LA, November 15-19, 2014 with Sarah Shao, MD, Adolescent Health Fellow, Jeffrey Birnbaum, MD, MPH, Department of Pediatrics Faculty, and Amy Suss, MD, Associate Professor, Department of Pediatrics and Director of the Adolescent Medicine Program. 	<ul style="list-style-type: none"> • Supervised three students working with College of Medicine Faculty

Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center (continued)

Name of Faculty Member	Teaching	Research	Service
Carl R. Rosenberg, PhD (BIOS)		Department of Medicine: <ul style="list-style-type: none">• Empire Clinical Research Investigator Program ECRIP Grant Proposal on Metabolic Syndrome with Department of Neurology with Paul Dreizen, MD, Professor of Medicine, College of Medicine.• Stroke Study with Steven Levine, MD Professor of Neurology and Emergency Medicine, Vice Chair of Department of Neurology	
Michael G. Walsh, PhD, MPH (EPID)		<ul style="list-style-type: none">• Grant Funded Study on Urban Toxocariasis and Arthropod-borne and Zoonotic infections in NYC and New York State with College of Medicine Faculty Haseeb Siddiqi, PhD, Associate Professor, Department of Cell Biology, Pathology and Medicine.• Grant Funded Study, part of the PathoMap Project, on Obtaining Samples in NYC to identify potential pathogens and describe the Urban Microbiome with Faculty from Weill Cornell: Christopher Mason, PhD, Assistant Professor, Department of Physiology and Biophysics	
Leone L. Waltrous, (MD, MPH, CLC HPMG)	<ul style="list-style-type: none">• Physician Grand Rounds Presentation: "Ten Steps to Successful Breastfeeding" Department of Family Practice, University Hospital of Brooklyn September, 2014.• Nursing Grand Rounds Presentation: "Importance of Vaccination for Pertussis during Pregnancy for all Nurses," University Hospital of Brooklyn, January 2015.• Lecturer, Arthur Ashe Institute for Urban Health on "Exploring Health Careers" & "Early Medical Education."		<ul style="list-style-type: none">• Member, Pertussis Workgroup, to Develop Protocols for the Administration of Pertussis Vaccinations.• Participant, Downstate Medical Society "Doctors Back to School" outings to encourage minority students to consider careers in medicine.

Table 1.4c.1: Faculty Members involved in Interdisciplinary Collaborations within the Medical Center (continued)

Name of Faculty Member	Teaching	Research	Service
Tracey E. Wilson PhD (CHSC)		<ul style="list-style-type: none">• Co-Investigator, Brooklyn Health Disparities Center with Moro Salifu, MD, MBA, MPH, FACP, Chair of the Department of Medicine, Chief of the Division of Nephrology and Director of the Kidney Transplant Program and Ruth Browne, ScD, MPH, Chief Executive Officer of the Arthur Ashe Institute for Urban Health• Co-Investigator, Women's Interagency HIV Study with Howard Minkoff, MD, Distinguished Professor of Obstetrics and Gynecology, and Deborah Gustafson, PhD, MS, Professor of Neurology• Faculty Reviewer, Program to Increase Diversity among Individuals Engaged in Cardiovascular Health-Related Research (PRIDE) program, SUNY Downstate with Mohamed Boutjdir, PhD, Professor, Department of Cell Biology and Associate Chief of Staff for Research and Development.• Co-investigator, ECRIP program (recently submitted proposal with Moro Salifu, MD, MBA, MPH, FACP, Chair of the Department of Medicine, Chief of the Division of Nephrology and Director of the Kidney Transplant Program• Co-investigator, President's Disparities program (recently submitted proposal, Moro Salifu, MD, MBA, MPH, FACP, Chair of the Department of Medicine, Chief of the Division of Nephrology and Director of the Kidney Transplant Program	<ul style="list-style-type: none">• Faculty Mentor, AIDS International Training Program with Jack DeHovitz, MD, MPH, Distinguished Service Professor and Director of the STAR Program (Special Treatment and Research Program), HIV Center for Women and Children)• Faculty Mentor, The Prevention Needs of Older Women with HIV, K01 with Tonya Taylor, PhD, MS, Assistant Professor, STAR Program, HIV Center for Women and Children

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

This criterion is met.

Strengths:

The SPH is situated in an academic medical center with a hospital on-site and numerous satellite sites. This enables our faculty to engage in ongoing collaborations with academicians and practitioners of all types. These faculty collaborations enrich the teaching, research and service endeavors of the School of Public Health and the educational experience of its students.

Weaknesses:

None

Plans:

To continue to collaborate widely with academicians and practitioners within and outside the Medical Center.

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 the conduct of school and program evaluation procedures, policy setting and decision making.

Required Documentation. The self-study should include the following:

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

Standing Committees:

- Committee on Admissions (meets each semester)
- Committee of Deans and Chairs (meets bi-weekly)
- Committee on Outcomes, Evaluation and Assessment (meets each semester)
- Committee on Student Evaluation, Promotion and Honors (meets each semester, twice in Spring semester)
- Community Advisory Group (CAG) (meets each semester)
- Steering Committee For The Self-Study Process For The Council On Education For Public Health (CEPH) Site Visit, November 16-18, 2015. (Temporary Standing Committee for the Duration of the CEPH Self-Study Process)
- Student Council (meets monthly)

Faculty and Professional Staff Assembly Elected Committees (Faculty Governance):

- Executive Committee
- Committee on Academic and Professional Qualifications
- Sub-Committee on Nominations, Elections, and By-Laws
- Sub-Committee on Research, Resources, and Budget
- Sub-Committee on Educational Policy and Curriculum
- Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations

SPH STANDING COMMITTEES

All Standing and Ad Hoc Committees in the School of Public Health are comprised of SPH faculty, SPH staff, and faculty from other schools in the Medical Center, with the exception of: 1) the SPH Community Advisory Group, which is comprised of external community members with an SPH Faculty Liaison, and, 2) the Student Council, which is comprised of students elected by the student body, with a Faculty Advisor. Members of the following SPH Standing Committees are appointed by the Dean for maximum three year terms.

COMMITTEE OF DEANS AND CHAIRS

Charge: To advise the Dean on all matters regarding the academic and administrative operations of the School of Public Health.

Membership: This Committee consists of all Chairs and Deans of the SPH.

Chair: Pascal James Imperato, MD, MPH&TM, Dean

Members:

- | | |
|--------------------------------|------------------------------------------------------------------------|
| 1. Karen E. Benker, MD, MPH | Associate Dean for Community Public Health Initiatives |
| 2. Barbara G. Delano, MD, MPH | Chair, Dept. of Community Health Sciences |
| 3. Daniel Ilyayev, MSED | Assistant Dean for Enrollment and Student Affairs |
| 4. Michael A. Joseph, PhD, MPH | Interim Chair, Dept. of Environmental and Occupational Health Sciences |
| 5. Judith H. LaRosa, PhD, RN | Vice Dean for Academic and Student Affairs |
| 6. Leslie Schechter, MA | Associate Dean for Administration |
| 7. Michael J. Szarek, PhD | Chair, Dept. of Epidemiology and Biostatistics |

COMMITTEE ON ADMISSIONS

Charge: To review complete applications for all degree programs and make recommendations to the Dean on acceptances and rejections.

Membership: Committee consists of Vice Dean for Academic and Student Affairs, Assistant Dean for Enrollment and Student Affairs, faculty members of the SPH and other schools in the Medical Center.

Chair: Judith H. LaRosa, PhD, RN Professor and Vice Dean for Academic and Student Affairs

Members:

- | | |
|------------------------------------|--------------------------------------------|
| 1. Karen Benker, MD, MPH | Associate Professor & Interim Chair (HPMG) |
| 2. Denise M. Bruno, MD, MPH | Assistant Professor (CHSC) |
| 3. Simone A. Reynolds, PhD, MPH | Assistant Professor (EPID) |
| 4. Carl Rosenberg, PhD | Clinical Assistant Professor (BIOS) |
| 5. Leone L. Waltrous, MD, MPH, CLC | Assistant Professor (HPMG) |

COMMITTEE ON OUTCOMES, EVALUATION AND ASSESSMENT

Charge: To collect, review and analyze data relevant to student outcomes in all degree programs and the Advanced Certificate program in the School of Public Health.

Membership: This Committee is chaired by the Associate Dean for Research and consists of faculty of the SPH, and one student member.

Chair: Michael J. Szarek, PhD Professor and Chair (EPID/BIOS)

Members:

- | | |
|---------------------------------|--------------------------------------------|
| 1. LeConté J. Dill, PhD, MPH | Assistant Professor (CHCS) |
| 2. Daniel C. Ehlike, PhD, MA | Assistant Professor (HPMG) |
| 3. Laura A. Geer, PhD, MHS | Assistant Professor (EOHS) |
| 4. Simone A. Reynolds, PhD, MPH | Assistant Professor (EPID) |
| 5. Carl R. Rosenberg, PhD | Clinical Assistant Professor (BIOS) |
| 6. Michael Walsh, PhD, MPH | Assistant Professor (EPID) |
| 7. Rudolph Parris, MPH | DrPH Student (EPID) deceased June 19, 2015 |

COMMITTEE ON STUDENT EVALUATION, PROMOTION AND HONORS

Charge: To review student progress and recommend to the Dean all actions with regard to probation, promotion, honors and discipline.

Membership: This Committee consists of faculty from the SPH and/or faculty of other schools within the Medical Center. The Vice Dean and Assistant Dean for Enrollment and Student Affairs of the SPH, and the Associate Dean for Student & Curricular Affairs for the entire Medical Center are non-voting members.

Chair: Michael A. Joseph, PhD, MPH

Assistant Professor (EPID)

Members:

1. Denise M. Bruno, MD, MPH

Assistant Professor (CHSC)

2. Constance Hill, MD

Associate Dean for Minority Affairs, College of Medicine

3. Elizabeth Helzner, MS, PhD

Assistant Professor (EPID)

Non-Voting Members:

4. Sophie Christoforou, MEd

Associate Dean for Student & Curricular Affairs (Centerwide)

5. Daniel Ilyayev, MEd

Assistant Dean for Enrollment and Student Affairs

6. Judith H. LaRosa, PhD, RN

Professor and Vice Dean

COMMUNITY ADVISORY GROUP (CAG)

Charge: To advise the School of Public Health on degree program development, community needs with regard to Public Health, and workforce requirements.

Membership: This group consists of members of community-based organizations and institutions with a faculty member as liaison.

Chair: Mrs. Maha Attieh

Health Program Manager
The Arab-American Family Support Center

Faculty Liaison:

Monica Sweeney, MD, MPH, FACP

Vice Dean for Global Engagement, Clinical Professor and Chair, Department of Health Policy and Management

Members:

1. Ms. Jean C. Black

Chairperson, Advisory Board Bedford- Center
Stuyvesant Family Health

2. Mrs. Gabrielle Kersaint

Executive Director Brooklyn, Queens, Long Island (BQLI) Area Health Education Center

3. Veronica Kaninska, MS, CTRS

Recreation Manager & Volunteer Coordinator
Center for Nursing & Rehabilitation

- | | |
|------------------------|----------------------------------------------------------------------------|
| 4. Mr. Harvey Lawrence | Executive Vice-President Brownsville
Multi-Service Family Health Center |
| 5. Mr. Herb Reiss | Seamen's House Prospect Park YMCA |

STEERING COMMITTEE FOR THE SELF-STUDY PROCESS FOR THE COUNCIL ON EDUCATION FOR PUBLIC HEALTH (CEPH) SITE VISIT, NOVEMBER 16-18, 2015.

Charge: To oversee the School of Public Health's Self-Study process in preparation for its November 16-18, 2015 Re-Accreditation site visit by CEPH. This is a temporary standing committee, convened in April 2014, and will be disbanded after the final accreditation decision is received from CEPH.

Membership: This Steering Committee is comprised of the members from all relevant SPH constituents. See Criterion 1.2d for a list of Sub-Committees formed from this Steering Committee.

<u>Chair:</u> Daniel C. Ehlke, PhD, MA	Assistant Professor, HPMG and Presiding Officer, SPH Faculty Governance Executive Committee
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Faculty:

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Aimee Afable, PhD, MPH • Karen Benker, MD, MPH | <ul style="list-style-type: none"> Assistant Professor, CHCS Associate Dean for Community Public Health
Affairs |
| <ul style="list-style-type: none"> • LeConté Dill, DrPH, MPH • Laura Geer, PhD, MHS • Elizabeth Helzner, MS, PhD • Michael A. Joseph, PhD, MPH • Mira G. Sheff, PhD, MS | <ul style="list-style-type: none"> Assistant Professor, CHCS Associate Professor, EOHS Assistant Professor, EPID Assistant Professor, EPID Assistant Professor, EOHS |

Staff

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Dorine Cooper, MA • Daniel Ilyayev, MSEd • Mariecia Pook • Leslie Schechter, MA | <ul style="list-style-type: none"> Executive Assistant to the Dean Assistant Dean for Enrollment and Student Affairs Accreditation Assistant (temporary) Associate Dean for Administration |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Students

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Reesa Antony • Briana Hecht • Jeremy Herring • Nahima Hoque • Kimberly Huggins | <ul style="list-style-type: none"> ACPH - Applying to MPH for Summer 2015 MD/MPH-HPMG MPH, HPMG MPH-HPMG MPH, CHCS and former Secretary of the
Student Council |
| <ul style="list-style-type: none"> • Furqan Nusair, MBBS • Frances Onagan • Rudolph Parris, MPH • Shmuel Singer | <ul style="list-style-type: none"> MPH, HPMG MPH, CHCS (graduated August 2014) DrPH, EPID (deceased June 19, 2015) MPH, HMPG (graduated August 2014) |

Alumni

- Natalie Baptiste, MPH (graduated May 2011)
- Frances Onagan, MPH (graduated August 2014)
- Shmuel Singer, MPH (graduated August 2014)

Community Member

- Mrs. Maha Attieh Health Enrollment Manager,
Arab-American Family Support Cent

This committee meets regularly.

Sub-Committees of the Steering Committee, comprised of faculty, students and staff were created to address various components of the self-study document.

Sub-Committees of the School of Public Health Steering Committee for the CEPH Re-Accreditation Self-Study Process

1. Course Documentation

- Michael Joseph, PhD, MPH Assistant Professor, EPID
Chair and Liaison to the CEPH Re-Accreditation Steering Committee
- Usha Govindarajulu, PhD, MS Assistant Professor, BIOS
- Barbara Delano, MD, MPH Professor and Chair, CHCS

2. Faculty Governance

- Karen Benker, MD, MPH Interim Chair and Assistant Professor, HPMG
Associate Dean for Community Public Health Affairs, Chair and Liaison to the CEPH
Re-Accreditation Steering Committee
- Simone Reynolds, PhD, MPH Assistant Professor, Epidemiology
- Laura Geer, PhD, MHS Associate Professor, EOHS

3. Faculty Qualifications

- Mira Grice Sheff, PhD, MS Assistant Professor, EOHS
Chair and Liaison to the CEPH Re-Accreditation Steering Committee
- Janet Rosenbaum, PhD Assistant Professor, EPID
- Carl Rosenberg, PhD Assistant Professor, BIOS
- Francine Benjamin, MS Grants Manager/Departmental Coordinator,
EOHS and HPMG

4. Marketing & Publicity

- Elizabeth Helzner, MS, PhD Assistant Professor, EPID,

Co-Chair of the SPH Marketing Committee, Chair and Liaison to the CEPH Re-Accreditation Steering Committee

- Aimee Afable, PhD, MPH Assistant Professor, CHCS,
Co-Chair of the SPH Marketing Committee
- Leone Waltrous, MD, MPH, CLC Assistant Professor, HPMG

5. Policies And Procedures

- Leslie Schechter, MA Associate Dean for Administration
Chair and Liaison to the CEPH Re-Accreditation Steering Committee
- Michael Szarek, PhD, MS Professor and Chair of EPID/BIOS
- Tracey Wilson, PhD Professor of CHCS

6. Student Practical Experience

- Dan Ehlike, PhD, MA Assistant Professor, HPMG
Chair and Liaison to the CEPH Re-Accreditation Steering Committee
- Denise Bruno, MD, MPH Assistant Professor, CHCS,
Co-Director of the Global Health Elective
- LeConté Dill, DrPH, MPH Assistant Professor, CHCS,
Coordinator for Student Global Health Practical Field Experience
- Arlene Mbonu, MA Departmental Coordinator CHCS, EPID/BIOS

7. Student Activities

- Jeremy Herring MPH, HPMG
- Kimberly Huggins MPH, CHCS and Secretary of the
Student Council
- Frances Onagan MPH, CHCS (graduated August 2014)
- Rudolph Parris DrPH, EPID (deceased June 19, 2015)
- Shmuel Singer MPH, HMPG (graduated August 2014)

8. Alumni Tracking

- Natalie Baptiste, MPH SPH Alumnus
- Dorine Cooper, MA Executive Assistant to the Dean

9. Community Relations

- Mrs. Maha Attieh Health Enrollment Manager
Arab-American Family Support Center,
Chair of the Community Advisory Group

STUDENT COUNCIL

Charge: To provide a forum for all matriculated students in the School of Public Health for the purposes of voting to elect officer discussing current issues, providing input to the SPH Administration and Faculty, and planning and carrying out Student Council sponsored activities and charitable events.

Membership: All matriculated students in the School of Public Health are automatically members of the Student Council.

Members:

President Alison Philip	ACPH Student
Vice President Leah Timbang	MPH Student (CHSC)
Secretary Simone Dasent	MPH Student (EPID)
Treasurer Bianca Rivera	MPH Student (HPMG)

SPH FACULTY AND PROFESSIONAL STAFF ASSEMBLY GOVERNANCE COMMITTEES

Faculty and Professional Staff Governance Committees and Sub-Committees are all comprised of faculty and staff of the School of Public Health, as detailed in the Constitution and By-laws of the Faculty and Professional Staff Governance Adopted 6/12, Amended 4/14 and 12/14.

(See Resource File) Members are elected by the faculty and staff. Some include student members as indicated. These committees are listed below:

- Executive Committee
- (Sub-)Committee on Academic and Professional Qualifications
- Sub-Committee on Research, Resources, and Budget
- Sub-Committee on Educational Policy and Curriculum
- Sub-Committee on Nominations, Elections, and By-Laws
- Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations

EXECUTIVE COMMITTEE

Charge: As stated in the Constitution and By-laws, this Committee is responsible for reviewing the status of faculty participation in SPH governance and functions, preparing agendas for the larger Faculty and Professional Staff Assembly meetings, discussing and deliberating on reports and resolutions submitted to the Committee for review, presenting these resolutions to the Dean of the SPH, and recommending ad hoc committees for business that does not fall within the scope of existing sub-committees.

Membership: The Committee consists of an elected representative from each department in the School and one representative from the professional staff. In addition, The Presiding Officer, Presiding Officer Elect, and the Secretary of the Faculty and Professional Staff Assembly shall be members. Deans (including Assistant, Associate and Vice-Deans) shall not be eligible to serve on the Executive Committee. (See Constitution and Bylaws of Faculty and Professional Staff Governance in Resource File)

Presiding Officer:

Paul A. Landsbergis, PhD, MPH, EdD

Associate Professor (EOHS)

Presiding Officer Elect

Aimee Afable, PhD, MPH

Assistant Professor (CHSC)

Secretary

Elizabeth Helzner, MS, PhD

Assistant Professor (EPID)

Members:

Usha Govindarajulu, PhD, MS

Assistant Professor (BIOS)

Laura A. Geer, PhD, MHS

Associate Professor (EOHS)

Arlene Mbonu, MA

Department Coordinator (CHSC and EPID/BIOS)

Leone L. Waltrous, MD, MPH, CLC

Assistant Professor (HPMG)

Tracey E. Wilson, PhD

Professor (CHSC)

(SUB-) COMMITTEE ON ACADEMIC AND PROFESSIONAL QUALIFICATIONS (CAPQ)

Charge: As stated in the Constitution and By-laws, this Committee is responsible for establishing procedures for reviewing candidates nominated for promotion and tenure, reviewing qualifications of said candidates, and forming recommendations to submit to the Dean of the SPH regarding rank and tenure status.

Membership: This Committee consists of five tenured faculty elected in the Spring semester of each year. (see Constitution and Bylaws of Faculty and Professional Staff Governance in Resource File)

Chair: Tracey E. Wilson, PhD

Professor (CHSC)

Members:

Michael Augenbraun, MD

Hospital Epidemiologist and Professor of Medicine,
College of Medicine

Karen Benker, MD, MPH

Associate Dean for Community Public Health
Affairs

Barbara G. Delano, MD, MPH

Professor and Chair (CHSC)

Paul A. Landsbergis, PhD, MPH, EdD

Associate Professor (EOHS)

SUB-COMMITTEE ON EDUCATIONAL POLICY AND CURRICULUM

Charge: As stated in the Constitution and By-laws, this Committee is responsible for review of the overall SPH curriculum and all course syllabi to ensure that stated overarching and concentration competencies are covered.

Membership: This Sub-Committee minimally consists of five (5) elected faculty members, one from each concentration in the SPH, and one non-voting student member, selected by the Student Council. (see Constitution and Bylaws of Faculty and Professional Staff Governance in Resource File)

Chair: Laura A. Geer, PhD, MHS

Associate Professor, (EOHS)

Members:

Denise M. Bruno, MD, MPH

Assistant Professor (CHSC)

Daniel C. Ehlike, PhD, MA

Assistant Professor (HPMG)

Michael J. Szarek, PhD, MS

Professor and Chair (BIOS/EPID)

Michael G. Walsh, PhD, MPH

Assistant Professor (EPID)

Erin Andrews (non-voting member)

DrPH Student (EPID)

SUB-COMMITTEE ON NOMINATIONS, ELECTIONS, AND BY LAWS

Charge: As stated in the Constitution and By-laws, this Committee is responsible for overseeing all business regarding elections in the Faculty and Professional Staff Assembly.

Membership: This Sub-Committee consists of three (3) members who are to be elected from among candidates nominated at the annual Spring meeting of the Faculty and Professional Staff Assembly. (see Constitution and By-laws of Faculty and Professional Staff Governance in Resource File)

Chair: Paul A. Landsbergis, PhD, MPH, EdD Associate Professor (EOHS)

Members:

Francine Benjamin, MS	Grants Manager
Usha Govindarajulu, PhD, MS	Assistant Professor (BIOS)

SUB-COMMITTEE ON RESEARCH, RESOURCES, AND BUDGET

Charge: As stated in the Constitution and By-laws, this Committee is responsible for overseeing research and outcomes endeavors of the SPH with regard to procedures, activities, resources and data.

Membership: This Sub-Committee consists of four (4) members, who are to be elected from among candidates nominated at the annual Spring meeting of the Faculty and Professional Staff Assembly. At least one of the members shall be a Professional Staff employee. (See Constitution and Bylaws of Faculty and Professional Staff Governance in Resource File)

Chair: Aimee Afable, PhD, MPH Assistant Professor (CHSC)

Members:

Laura A. Geer, PhD, MHS	Assistant Professor (EOHS)
Arlene Mbonu, MA	Departmental Coordinator (CHSC & EPID/BIOS)

SUB-COMMITTEE ON STUDENT ADMISSIONS, ACADEMIC STANDARDS AND FACULTY-STUDENT RELATIONS

Charge: As stated in the Constitution and By-laws, this Committee is responsible for overseeing admissions policies and procedures for candidates to the SPH, as well as reviewing and making recommendations to the Executive Committee regarding faculty-student relations in the SPH.

Membership: This Sub-Committee consists of four (4) elected faculty members, one from each Department, and one (1) non-voting student member selected by the Student Council. (See Constitution and Bylaws of Faculty and Professional Staff Governance in Resource File)

Chair: Simone A. Reynolds, PhD, MPH Assistant Professor (EPID)

Members

LeConté J. Dill, DrPH, MPH	Assistant Professor (CHSC)
Daniel C. Ehlike, PhD, MA	Assistant Professor (HPMG)
Paul A. Landsbergis, PhD, MPH, EdD	Associate Professor (EOHS)
Briana Hecht	Student Member, MD/MPH-HPMG

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

– general school policy development

General school policy development is always guided by the larger policies of SUNY and Downstate Medical Center as stated above. Formulation of policies internal to the SPH begin with issues arising from discussions, observations or suggestions from any of the SPH constituents (administration, faculty, students, community members). Policy recommendations are also made by the Faculty and Professional Staff Assembly Executive Committee, typically after input by its Sub-Committees. The Dean is apprised of the issue via the Vice Dean, one of the Associate/Assistant Deans, the Committee of Deans and Chairs, an individual faculty member or a general faculty meeting. Discussions are held among the Deans, then the issue is brought to the Committee of Deans and Chairs. There is a feedback process, whereby the Chairs discuss the issue with the faculty in their respective departments and bring the input back to the Committee of Deans and Chairs for further discussion and resolution. Final decisions on all general school policies rest with the Dean.

Policy decisions which pertain to the various standing committees are discussed and voted on within the respective committee. The committee then makes a recommendation to the Dean, who has final decision making authority.

All SPH policies undergo continual review and, if necessary, modifications after discussion with the appropriate constituent group and final approval by the Dean.

– planning and evaluation

Planning

Formal planning for fiscal and other large-scale needs is done on an annual basis in preparation for the annual budget submission process, annual applicant, acceptance and enrollment projections required by the Vice President for Academic Fiscal Affairs, and the ASPPH and CEPH annual reports. This includes planning for staffing needs, space and equipment requirements. Recommendations for planning are also made by the Faculty and Professional Staff Assembly Executive Committee, typically after input by its Sub-Committees. In addition, the Committee of Deans and Chairs regularly discusses ongoing or newly identified needs by departments or centrally. Decisions are made by the administration, as to how to best proceed with the resources available. Where appropriate, these issues are brought to the faculty of the departments by their respective Chairs, or discussed in periodic general faculty meetings. Final decisions rest with the Dean.

Evaluation

Evaluation is accomplished through ongoing examination of the school's educational, research and service activities. Data is continually collected on all aspects of the school's operation, analyzed and measured against the school's goals and objectives. Faculty are evaluated annually by their respective Chairs, and course evaluations indicate how students experience the course instructor's ability to communicate the subject matter. (see Resource File for Annual Faculty Evaluation Documents and Course Evaluations) Recommendations for evaluation are also made by the Faculty and Professional Staff Assembly Executive Committee, typically after input by its Sub-Committees. Student performance is evaluated throughout each course and aggregated data is collected and reviewed by the Committee on Outcomes, Evaluation and Assessment for use in planning. The school's educational enterprise, research program and service activities are evaluated through these regular mechanisms:

- Annual Faculty Evaluations by the respective Chairs, which include teaching, research and service activities of each faculty member
- Applicant, Acceptance and Enrollment data for each of the SPH degree programs
- Assessment of the needs of the communities served by SUNY Downstate

- Comparison of CEPH curricula criteria for coverage of required areas
- Comparison of research subject areas to current public health priorities
- Consultation with the Community Advisory Group and various community stakeholders
- Course Evaluations
- Meetings between the officers of the Student Council and the Deans
- Meetings of the Faculty and Professional Staff Assembly, its Executive Committee and its Sub-Committees (FAPSA)
- Review and recommended revision of course curricula by Course Directors and the Sub-Committee on Educational Policy and the Curriculum
- Review of current field based practical experiences by students
- Review of extramural funding levels
- Review of research subject areas to identify gaps in public health subject matter
- Student feedback forums with the Dean and Vice Dean.
- Student/faculty ratio by concentration area

The findings of ongoing evaluation are used for planning regarding revision of curriculum, extramural grant funding levels, community based service activities, policies and procedures, staffing, space allocation and equipment needs.

– budget and resource allocation

Because the SPH is part of the larger SUNY system, fiscal planning is centrally managed through Downstate's Finance Office which receives an annual allocation for the entire Medical Center and is empowered, per the SUNY guidelines, to distribute the monies on the local level to each of the schools and the hospital within Downstate.

Fiscal Planning and budgeting for the School of Public Health are achieved through a budget process that includes collaborative meetings between the Dean, Vice Dean and Associate Dean for Administration, submission of the Program's budget request to the Vice President for Academic Fiscal Affairs/Interim Chief Financial Officer for the Medical Center. The final budget is approved by the Vice President for Academic Fiscal Affairs. The SPH annual budget is determined by the Medical Center, via SUNY Central in Albany. Allocations within the SPH are made by the Administration based on prioritized needs of the SPH with input from Chairs, faculty and staff.

The annual budget and modifications of these budgets are discussed by the Deans and Chairs. The vast majority of the budget is dedicated to required personnel services which are based on CEPH faculty requirements for each concentration. The OTPS funds are, in a comparative sense, a much smaller proportion of the total budget than the personnel costs.

The SPH has an ad hoc faculty committee that evaluates the travel requests of both colleagues and students, and has established guidelines for the awarding of travel funds from the OTPS. Priority for travel funds are given to faculty and students who are presenting papers, abstracts, or posters, or chairing sections at the annual APHA meeting or other similar meetings. Selected faculty and students are also required to assist in staffing the SPH Exhibition booth. In addition, faculty who require specialized software or hardware submit requests to their respective chair who in turn recommends purchase to the administration. These requests are generally approved contingent upon adequate financial resources.

– student recruitment, admission and award of degrees

Student Recruitment

Based on the number and demographic distribution of applications submitted to the Committee on Admissions, student recruitment efforts are targeted toward different populations based on age, race, ethnicity, educational background and profession, in order to achieve the most diverse student population possible. At SUNY Downstate, this happens automatically, as our main catchment area consists of

Brooklyn and the New York metropolitan area. Typically, our applicant pool and our student body is widely diverse, consisting of many racial/ethnic backgrounds, languages, countries of origin, educational and occupational background.

Admission

Admission criteria are reviewed frequently at meetings of the Committee on Admissions specifically convened to discuss policies and procedures. Revisions are made based on achieving the most diverse and high caliber educational mix of students possible. Recommendations are also provided by the Faculty and Professional Staff Assembly Executive Committee, after input by its Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations. Applications are reviewed with a broad consideration of a variety of factors, including educational achievement, public health experience and interest, standardized examination performance and life circumstances. (see Committee on Admissions Policy and Procedures in Resource File.)

Award of Degrees

Final grades for all academic requirements are submitted to the Central Office of the Registrar by the SPH Assistant Dean for Enrollment and Student Affairs who then requests final transcripts for those students who have completed all academic requirements toward a degree. These transcripts are forwarded to the Committee on Student Evaluation, Promotion and Honors for review and approval to award degrees. The Committee then submits its recommendations to the Dean for final approval.

– *faculty recruitment, retention, promotion and tenure*

Faculty Recruitment

Faculty recruitment at SUNY Downstate Medical Center is governed by the general SUNY regulations. The Department of Human Resources guides all postings and hirings. The State University of New York requires that all positions be posted on the SUNY Downstate job board and website and advertised to recruit from the widest possible applicant pool for both faculty and staff. The State University of New York is an Equal Opportunity Employer/Affirmative Action (EOE/AA) employer.

Faculty positions in all concentrations are posted as follows:

- SUNY Downstate Job Board and Website
- Rollins School of Public Health (Emory University) Website
- Print listings at SUNY Downstate Graduate Program in Public Health booth at APHA Annual Exposition
- *American Journal of Public Health*
- APHA Website
- APHA Official Newspaper *The Nation's Health*

In addition, positions for distinct departments/concentrations are advertised in journals and on websites including, but not limited to the following:

Biostatistics

American Statistical Association (Amstat) Jobweb Website
New York Times Classified Website

Environmental and Occupational Health Sciences

Environmental Health Perspectives
New York Times Classified Website

Epidemiology

Epidemiologic Job Board
Epidemiology Monitor Print and Website

Health Policy and Management

American College of Healthcare Executives
American Political Science Association Organized Section on Health Politics and Policy
Association of University Programs in Health Administration (AUPHA)
Robert Wood Johnson Foundation Scholars in Health Policy Program (Mailing List)

Faculty and Staff Selection and Retention

The School of Public Health has primary responsibility for the selection and retention of its faculty and staff. Each Departmental Chair is responsible for the recruitment of qualified faculty and staff for his/her department. At the direction of the Chair, and where appropriate, search committees composed of faculty and staff, and where indicated, of students, are formed.

A search committee reviews advertising copy and its placement in selected publications and websites. Advertisements are reviewed for final approval by the Chair and then by the Department of Human Resources which also assesses compliance with affirmative action requirements. Applications are screened by the committee (if one was formed) or by the Chair of the respective department to determine interview status. The applicant pool is reviewed by the Office of Affirmative Action for evidence that a broad attempt was made to solicit applications from a diverse group of people.

Following interviews, a search committee recommends their leading candidates to the Chair, who selects a candidate, begins negotiating a hiring agreement and forwards the recommendation to the Dean. The Dean then makes a recommendation to the President of the Medical Center who, after approval, forwards the hiring documents to the Department of Human Resources. A final offer is made to the candidate by the Department of Human Resources in compliance with SUNY and affirmative action regulations.

Salaries for faculty within the State University of New York are significantly governed by the UUP contract, as there is a range set for each rank, but the academic unit may set the salary based on our annual budget allocation. The United University Professions (UUP) is the union that represents the faculty of the entire university and regularly negotiates contracts that have a term of three years. These contracts cover salaries, salary increases, discretionary salary increases, and a variety of other fringe benefits. Budgetary constraints also inform salary offering decisions.

Personnel Advancement: Promotion and Tenure

Promotion and tenure practices are governed by the policies and procedures of the Trustees of the State University of New York and the Agreement between the State of New York and United University Professionals July 2, 2011 – July 1, 2016 and are stated in the Faculty Handbook. (See Resource File) These guidelines require systematic evaluation of faculty on an annual basis to determine eligibility for promotion. (See Resource File for Annual Faculty Evaluation Documents) The University guidelines as they pertain to Academic Employees (faculty) are stated in *Criterion 1.3c – personnel recruitment, selection and advancement, including faculty and staff* above.

Faculty have 7 (seven) years in a Tenure Track position, prior to being nominated for promotion. A dossier consisting of the faculty member's accomplishments and reference letters is forwarded to the Faculty Governance Committee on Academic and Professional Qualifications (CAPQ). The Committee reviews the dossier according to weighted criteria and a point system set out in their policies, and in keeping with the general criteria used throughout the Downstate Medical Center. (See CAPQ Policies and Procedures in Resource File). The SPH CAPQ Committee weighted criteria puts more emphasis on teaching and service. The SPH CAPQ has a tenure-track for Education and Community/Professional Service which provides for more equally weighted criteria on teaching, and service. The decision made by the CAPQ Committee is then forwarded to the Dean and the President for final approvals. Tenure is only granted by SUNY Central, located in Albany.

– academic standards and policies, including curriculum development

Academic standards in the SPH are developed through an ongoing process of discussion with faculty, administration, staff. Major stakeholders including the Community Advisory Group and the Faculty and Professional Staff Assembly Executive Committee provide input on academic standards and policies, including curriculum development. The SPH has the following standing committees which provide guidance to the Dean regarding standards and policies which reside under their purview:

- The Committee on Admissions is responsible for reviewing all prospective student applications and recommending admission and matriculation status to the Dean who has the final right of approval.
- The Committee on Student Evaluation, Promotion and Honors (SEPH) is responsible for reviewing all current student transcripts to monitor student progress. The Committee identifies any students in academic difficulty and students who have are eligible for graduation. The Chair of this Committee recommends students for graduation and students who qualify to be put on or taken off academic probation to the Dean who has the final right of approval.

In addition to these standing committees, two of the Sub-Committees of the Faculty and Professional Staff Assembly are involved in setting and monitoring academic standards and policies. These are:

- The Sub-Committee on Student Admissions, Academic Standards and Faculty-Student Relations advises the Chairs and the Deans on admissions policy, academic standards and issues regarding faculty-student relations.
- The Sub-Committee on the Educational Policy and Curriculum is actively involved in reviewing syllabi and course offering forms to ensure that all degree and concentration competencies are being met, and that the overall curriculum for each degree is current in the public health field.

– research and service expectations and policies

The SPH requires all faculty to engage in research and service activities. All SPH faculty are expected to apply for extramural funding and engage in research and service activities, particularly community-based research and service, as stated on page 17 of the Policies of the SUNY Board of Trustees-June 2014.

The SPH complies with the all policies set forth by the Federal and State governments, the State University of New York Central Headquarters, SUNY Downstate Medical Center and the School of Public Health. These policies and regulations encompass ethical guidelines for research and service activities, as detailed in the HSCB Corporate Compliance Program.

Compliance with campus, State and Federal policies and regulations in the conduct of research is a major responsibility of all investigators and their staff as well as the institution itself. This involves a knowledge and understanding of these policies and regulations, through on-going investigator education programs, sufficient to ensure performance, in accordance with the highest ethical standards, of their responsibilities and activities.

Policies and procedures listed in *Criterion 3.1a. Description of the school's research activities, including policies, procedures and practices that support research and scholarly activities* below apply to all research and service activities conducted at SUNY Downstate and undertaken by faculty and students of the SUNY Downstate School of Public Health. These include Federal, State, SUNY-wide, Downstate Medical Center and SPH policies as stated in Criterion 3.1a. Recommendations for the School's research policies are also provided by the Sub-Committee on Research, Resources and Budget of the Faculty and Professional Staff Assembly.

In addition to the above stated, the SPH has a Contract Manager to assist faculty members in submitting grant proposals and an Associate Dean for Research Administration to mentor junior faculty regarding research activities. There is also an Associate Dean for Community Public Health Initiatives to work with faculty and students on linkages with community members or organizations to conduct service and research activities. In addition to teaching, research and service activities are considered mandatory by the CAPQ for faculty promotion and tenure decisions.

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

Copies of the following documents are located in the Resource File:

- Agreement between the State of New York and the United University Professionals (July 2, 2011 – July 1, 2016)
- NYS Public Officers Law Booklet
- State University of New York Downstate Medical Center, School Of Public Health, Faculty and Professional Staff Constitution and By-Laws
- State University of New York Policies of the Board of Trustees 2014

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

Table 1.5d.1: Faculty Holding Membership on University Committees/Contributing to University Activities		
Faculty Member Name	Role	University Committee
Denise M. Bruno, MD, MPH (CHSC)	Interviewer	College of Medicine Student Admissions
	Member	Scholarly Oversight Committee (SOC), Pediatric Emergency Medicine Fellowship Program at Kings County Hospital (our closest affiliate hospital, located directly across the street)
Barbara G. Delano, MD, MPH (CHSC)	Interviewer	College of Medicine Student Admissions
	Interviewer	Department of Medicine Committee to Recruit Potential House Staff
	Interviewer	Department of Medicine Committee to Recruit Potential Renal Fellows
Daniel C. Ehlke, PhD, MA (HPMG)	Member	Centerwide Faculty Committee, comprised of each of the Schools' presiding officers and SUNY faculty senators
	Member	Centerwide Library Periodical Committee
	Member	Centerwide Middle States Re-Accreditation: Faculty Sub-Committee
	Interviewer	College of Medicine Student Admissions
	Member	Health Disparity Research Grant Application Review Committee
Elizabeth Helzner, PhD, MS (EPID)	Member	Institutional Review Board, SUNY DMC

Table 1.5d.1: Faculty Holding Membership on University Committees/Contribute to University Activities (continued)		
Faculty Member Name	Role	University Committee
Pascal James Imperato, MD, MPH&TM (Dean)	Chair	Awards Committee, College of Medicine Alumni Association 2012-2015
	Member	Campus Selection Committee for the Chancellor's Awards for Excellence, 2012-2015
	Member	Search Committee for the Dean of the College of Medicine
	Member	Steering Committee for the Middle States Re-Accreditation of the Downstate Medical Center
	Member	President's Advisory Committee of Deans and Chairs
Paul A. Landsbergis, PhD, MA, EdD (EOHS)	Member	Downstate Safe Patient Handling Committee
	Member	Downstate Centerwide Committee
Judith H. LaRosa, PhD, RN (Vice Dean)	Member	Alumni Summer Research Fellowship Program Review Committee
	Interviewer	College of Medicine Student Admissions
	Member	Health Disparities Grant Review Committee
	Member	Nursing Grand Rounds Committee
Mira G. Sheff, PhD, MS (EOHS)	Interviewer	College of Medicine Student Admissions
	Member	Domestic Violence Awareness Committee, SUNY DMC
	Member Alternate	Employee Assistance Program Committee, SUNY DMC
Michael J. Szarek, PhD, MS	Member	Institutional Review Board, SUNY DMC
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Interviewer	College of Medicine Student Admissions
	Member	Committee on Admissions, College of Medicine
	Member	Committee on Breastfeeding, Department of Obstetrics, University Hospital of Brooklyn and member of Latch-on New York, participating in webinars and face-to-face meetings with the New York City Department of Health and Mental Hygiene to prepare University Hospital of Brooklyn to become "Baby-Friendly."
	Member	Committee to Eliminate Healthcare Disparities for the Medical Society for the State of New York.
	Member	Committee on Patient Safety, University Hospital of Brooklyn.
	Member	Pertussis Workgroup, to develop protocols for the administration of Pertussis vaccinations.
	Member	Root Cause Analysis Committee, University Hospital of Brooklyn.
Tracey E. Wilson PhD (CHSC)	Member	Advisory Council on Research, SUNY Downstate, Medical Center
	Member	Executive Committee, Health Disparities Center, SUNY Downstate Medical Center.
	Member	Steering Committee, Health NOW Network of Excellence, State University of New York, Chancellor's Initiative SUNY-wide
	Member	HIV Center Board of Directors, HIV Center for Women and Children, SUNY Downstate, College of Medicine
	Member	Mentoring Program, SUNY Downstate Medical Center

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

All matriculated students in the School of Public Health are automatically members of the SPH Student Council and entitled to vote in all Student Council elections. The Student Council meets monthly to discuss current trends in public health, the SPH Degree Programs and activities, and to plan student events and charity drives. The SPH Council Officers and members regularly provide input to the SPH administration and faculty on the educational, research and service endeavors of the School through membership on standing committees, the Steering Committee For The Self-Study Process For The Council On Education For Public Health (CEPH) Site Visit, November 16-18, 2015 and ad hoc meetings with SPH faculty and administration.

Students are members of the following standing committees:

1. Faculty Governance Sub-Committee on Educational Policy and Curriculum
2. Faculty Governance Committee On Student Admissions, Academic Standards And Faculty-Student Relations
3. Steering Committee for the Self-Study Process for the Council On Education For Public Health (CEPH) Site Visit, November 16-18, 2015.
4. Committee On Outcomes, Evaluation And Assessment

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

This criterion is met.

Strengths:

Governance of the School of Public Health is achieved through the actions of a wide base of constituents. There are numerous standing committees, faculty governance committees, a Community Advisory Group and Student Council. The Administration of the SPH provides numerous opportunities for input from all constituents.

Weaknesses:

None

Plans:

To continue to elicit feedback and input from the various stakeholders involved in the School of Public Health.

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.

Required Documentation. The self-study document should include the following:

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

Because the SPH is part of the larger SUNY system, fiscal planning is centrally managed through Downstate's Finance Office which receives an annual allocation for the entire Medical Center and is empowered, per the SUNY guidelines, to distribute the monies on the local level to each of the schools and the hospital within Downstate. SPH tuition revenues go to SUNY Central and are redistributed to individual campuses according to a formula which results in the annual allocation. The SPH annual budget is determined by the Medical Center, via the SUNY Central guidelines.

Fiscal Planning and budgeting for the School of Public Health are achieved through a process that includes collaborative meetings between the Dean, Vice Dean and Associate Dean for Administration, submission of the Program's budget request to the Vice President for Academic Fiscal Affairs/Interim Chief Financial Officer for the Medical Center. The final budget is approved by the Vice President for Academic Fiscal Affairs. Student technology and activity fees are collected by the Medical Center for inclusion in Medical Center-wide student technology and activity expenses. The SPH receives a portion of these fees for use during the academic year. Indirect cost revenues generated by grants are redirected back into the Downstate Centerwide account.

New York State is in a constrained fiscal environment, and Downstate and the SPH receive minimal funding. The first priority is always obtaining enough funds and lines to hire the requisite number of faculty required by CEPH accreditation criteria. A highly competitive state salary is offered to faculty in order to secure high-quality individuals. The second priority is obtaining computer, furniture and other physical needs for incoming faculty. If funding permits, staff lines may be recruited for, and funds for computers, furniture, etc. are allocated for incoming support staff. The balance is divided by stated needs for office supplies, travel, advertising and departmental requests, including student support. We anticipate that in the future, each department will be allocated a small amount for their own Other Than Personal Service (OTPS) needs, which include department specific supplies.

The total State funded allocation for the SPH for the 2014-2015 fiscal year is \$4,144,193. Funds for the SPH come from SUNY Downstate Centerwide Funds directly under the control of the President of the Medical Center. Within the SPH, allocations are made by the Administration based on prioritized needs of the SPH with input from Chairs, faculty and staff. Fees for special courses are deposited into a separate state account for use as small, one-time only expenses, usually related to student activities.

Fundraising is centrally handled through the office of the Institutional Advancement and Philanthropy. Below is a list of all funding sources for the School of Public Health:

- NYS Allocation (provides the majority of the operating budget of the SPH)
- Extramural grant funding (directs and indirects)
- Alumni Fund of the College of Medicine funds for the Global Health in Developing Countries elective.
- Fees for special courses taught to certain types of non-matriculated students, e.g. Emergency Medicine Residents
- Private enterprise gifts, e.g. Sanofi, which support student activities and certain technological purchases, usually housed in the Health Science Center for Brooklyn (HSCB) Foundation
- Private gifts from Memorial Funds, etc. which primarily support graduation awards
- Accounts which hold small remnants of monies originally given as discretionary operational funds.

These are used primarily for small petty cash needs such as postage, etc.

The Total Budget for the SPH for the 2014-2015 academic year, including all funding sources, is \$4,609,668.

Indirect cost revenues generated by grants are redirected back into the Downstate Centerwide account.

Tuition revenues go directly into the account holding the Centerwide funds, which are distributed to a number of initiatives throughout the Medical Center, including the School of Public Health through the annual budget allocation. Fees for special courses are diverted into a small state account for use as small, one-time only expenses, usually related to student activities. Student technology and activity fees are collected by the Medical Center for inclusion in Medical Center-wide student technology and activity expenses. The SPH receives a portion of these fees for use during the academic year.

Fundraising is centrally handled through the office of the Institutional Advancement and Philanthropy. The School of Public Health has no involvement in the fundraising activities of the Medical Center.

In addition to the above, in 2008, the New York State legislature approved a line item in the State budget for \$100 million to fund a new School of Public Health Building. The building is currently being built. Occupancy is expected in late 2016. [See SUNY Capital Appropriations 2008-2009 and Memorandum from Dr. John C. LaRosa, President of Downstate Medical Center in Resource File]

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

Leftover funds on unfilled personnel lines are carried forward into the subsequent fiscal year for hiring purposes. In those instances, every effort is made to hire people on unfilled lines in the subsequent fiscal year. Funds representing unspent OTPS allocations are not carried over into the subsequent fiscal year. Concerning the latter, the SPH makes every effort to utilize all OTPS funds in a given budgetary year.

Table 1.6b.1: Sources of Funds and Expenditures in Dollars by Major Category, Academic Year 2010-2011 to 2015-2016

Source of Funds						
Academic Year	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
Fees Only ²	19,657	9,688	31,441	27,873	26,234	55,578
State Appropriation	3,995,972	3,850,807	3,850,807	3,850,807	4,144,193	4,156,457
Grants/Contracts (Direct Costs)	890,547	329,788	360,134	177,495	319,333	369,976
Indirect Cost Recovery	746,028	323,309	167,634	51,175	78,511	87,903
Gifts ³	6,250	8,237	11,100	23,000	3,000	26,200
Other ⁴ (Empire Innovation Award Funding)	356,395	350,831	207,233	0	0	0
Other ⁵ (Global Health Elective Sponsored Funding)	37,000	45,000	35,000	44,250	37,500	52,000
Other ⁶ Small Operating Accounts	3,657	2,589	1,823	998	897	0
Total	6,055,506	4,920,249	4,665,172	4,175,598	4,609,668	4,748,114
Total Grants & Indirects	1,636,575	653,097	527,768	228,670	397,844	457,879
Total Minus Grants & Indirects⁷	4,418,931	4,267,152	4,137,404	3,946,928	4,211,824	4,290,235
Expenditures						
Academic Year	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
Faculty Salaries & Benefits	2,739,664	2,770,273	2,648,895	2,435,584	2,525,665	3,068,137
Staff Salaries & Benefits	1,138,921	937,307	968,740	954,211	977,228	1,017,228
Operations	95,143	89,449	86,371	107,683	113,558	114,370
Travel (Faculty)	7,809	9,105	7,816	5,979	15,373	15,000
Student Support (Including Travel)	1,500	6,600	8,723	13,753	21,922	20,000
Other (Global Health Elective ⁵)	32,200	47,500	45,000	38,500	37,500	52,000
Other ⁸ (Graduation Awards)	600	1,100	1,700	3,500	2,500	3,500
Total⁹	4,015,837	3,861,334	3,767,245	3,559,210	3,693,746	4,290,235
Variance	403,094	405,818	370,159	387,718	518,078	0

² **This money represents Fees Only.** SPH tuition revenues go to SUNY Central and are redistributed to individual campuses according to a formula. Fees from students for technology expenses, etc., are collected at the campus level and allocated to each School for student support purposes.

³ **Gifts:** This money represents funds donated to the SPH by private individuals or companies for various purposes, including graduation awards and support for students.

⁴ **Empire Innovation Award:** This money represents the Empire Innovation Award, which was a New York State Initiative consisting of annual salary funding for the creation of an Environmental Institute that would address economic concerns in Brooklyn. This funding was steadily decreased from \$422,700 originally, to zero. This funding is now supposed to be subject to a bidding process, however the Request for Proposals has not been sent out by New York State to date. Salaries covered by this funding were transferred to the main State allocation in Academic Year 2014-2015, which accounts for the increase from 2013-2014.

⁵ **Global Health Elective:** This money represents funds from the College of Medicine Alumni Fund and one private sponsor designated specifically for providing stipends for the Global Health Elective students who go overseas for 6-8 weeks per year.

⁶ **Small Operating Accounts:** This money represents minor allocations from Downstate Centerwide Funds which were placed in accounts in the Research Foundation and utilized for petty cash expenditures. These allocations have been discontinued.

⁷ **Grants and Indirects** are not included in our operating costs and have been removed from the Total Source of Funds. Grants and Indirects are not given to the SPH for use in salary or operating expenditures.

⁸ **Graduation Awards:** This money represents monetary awards given to graduates when they are awarded their degrees. Money for these awards is placed in an Income Fund Reimbursable (IFR) accounts. These IFR accounts levy "administrative processing" fees which can be as high as 54% of the amount. There is an ad hoc selection committee convened for the purpose of choosing awardees. Monetary amounts vary by award and year. (See Awards Day Ceremony Program in Resource File)

⁹ **Total Expenditures** for each academic year are approximately \$400,000 less than Total Source Funds Minus Grants and Indirects. This is accounted for by a small turnover in faculty positions each year; the salaries for the vacant positions that were in recruitment during the respective academic year were not expended. Two Chair positions and two junior faculty position were under recruitment in the 2014-2015 academic year. Therefore, the total salaries for these four faculty positions account for the discrepancy in the Total Source Funds and Total Expenditures for the 2014-2015 Academic Year. This discrepancy was resolved in the 2015-2016 Academic Year due to the hiring of new faculty members, including the Chair of Health Policy and Management.

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

NA

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

Measureable objectives used to assess the adequacy of the School's fiscal resources include the following:

- To increase the School of Public Health State Budget
- To increase Expenditures Per Full-time Equivalent (FTE) Student
- To increase Total Extramural Funding Per Academic Year
- To increase Research Dollars Per Full-time Equivalent (FTE) Faculty
- To increase Extramural Funding and Indirects as a Percentage of the Total Budget

As shown in the Table 1.6.b: Sources of Funds and Expenditures by Major Category, the SPH State-allocated budget has fluctuated marginally as follows from the 2012-2013 academic year to the present.

Table 1.6d.1: Total School of Public Health State Allocation 2012-2013 to the Present				
Academic Year	2012-2013	2013-2014	2014-2015	2015-2016
Variance From Previous Year	\$0	\$0	\$293,386	\$12,264
Total State Allocation	\$3,850,807	\$3,850,807	\$4,144,193	\$4,156,457

Due to fiscal restraints in recent years, the SPH has been unable to obtain incremental increases over its base budget allocation. However, the School retains the necessary resource base for a CEPH accredited School of Public Health, most of which has been channeled into faculty salaries to achieve the requisite complement required by CEPH accreditation criteria.

Table 1.6d.2: Expenditures Per Full-time Equivalent (FTE) Student (MPH and DrPH) Expenditures Determined by Total Budget/FTE Students Total Budget = State Allocated University Funds including Grants and Indirects as Listed in Table 1.6b.1							
		2012-2013		2013-2014		2014-2015	
Total Budget		\$4,665,172		\$4,175,598		\$4,609,668	
Outcome Measure	Target	# of FTE Students	Expenditure Per Student	# of FTE Students	Expenditure Per Student	# of FTE Students	Expenditure Per Student
Expenditures Per (FTE) Student	\$30,000	96.6	\$48,294	135.4	\$30,839	120.8	\$38,160

Table 1.6d.3: Total Extramural/Other Research Funding Per Academic Year (Total Extramural/Other Funding = Research Dollars + Indirect Dollars)					
Outcome Measure	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date-Summer only)
Total Extramural Funding	\$500,000	\$527,768	\$228,670	\$397,844	\$457,879

Table 1.6d.4: Research Dollars Per Full-time Equivalent (FTE) Faculty [Extramural/Other Funding = Research Dollars + Indirect Dollars]									
Outcome Measure	Target	2012-2013		2013-2014		2014-2015		2015-2016 (To Date-Summer only)	
		# of FTE Faculty	Extramural Dollars Per FTE Faculty	# of FTE Faculty	Extramural Dollars Per FTE Faculty	# of FTE Faculty	Extramural Dollars Per FTE Faculty	# of FTE Faculty	Extramural Dollars Per FTE Faculty
Extramural Dollars Per (FTE) Faculty	\$20,000	24.0	\$21,990	24.0	\$9,528	21.0	\$18,945	23.0	\$19,908

Table 1.6d.5: Extramural/Research Funding and Indirects as a Percentage of the Total Budget Total Budget = Total Sources of Funds for Academic Year detailed in Table 1.6.1 (Tuition and Fees, University Funds, Grants/Contracts, Indirect Cost Recovery and Gifts)							
Outcome Measure	Target	2012-2013			2013-2014		
Extramural Funding as a Percentage of the Total Budget		Extramural Funding	Total Budget	% of Total Budget	Extramural Funding	Total Budget	% of Total Budget
	20%	\$527,768	\$4,665,172	11%	\$228,670	\$4,175,598	6%

Table 1.6d.5: Extramural Funding and Indirects as a Percentage of the Total Budget Total Budget = Total Sources of Funds for Academic Year detailed in Table 1.6.1 (Tuition and Fees, University Funds, Grants/Contracts, Indirect Cost Recovery and Gifts) (continued)							
Outcome Measure	Target	2014-2015			2015-2016 (Projected)		
Extramural Funding as a Percentage of the Total Budget		Extramural Funding	Total Budget	% of Total Budget	Extramural Funding	Total Budget	% of Total Budget
	20%	\$397,844	\$4,609,668	12%	\$457,879	\$4,748,114	10%

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

This criterion is met.

Strengths:

The SPH remains strong due to its requisite numbers of faculty and staff required to meet CEPH standards. The administration, faculty and staff continue to be firmly dedicated to the continued success of the School of Public Health.

Weaknesses:

Fiscal constraints in the overall economy, and the New York State economy have prevented the State from expanding annual budget allocations to the School. In addition, decreased availability of extramural funding has impacted the School's ability to obtain research grants. This decreased availability is affecting a large number of other Schools of Public Health as well as other schools of higher education.

Plans:

SUNY Downstate will continue to build on its strengths in the teaching, research and service enterprises, despite fiscal constraints.

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.

Required Documentation. The self-study document should include the following:

1.7a. A concise statement or chart defining the number (headcount) of primary faculty in each of the five core public health knowledge areas employed by the school for each of the last three years. If the school is a collaborative one, sponsored by two or more institutions, the statement or chart must include the number of faculty from each of the participating institutions.

Table 1.7a.1 Headcount of Primary/Full-time Faculty by Concentration for the Last Three Years 2012-2013 to 2014-2015

Data in this table do not include the Dean because he does not regularly teach courses.

Table 1.7a.1 Headcount of Primary/Full-time Faculty by Concentration for the Last Three Academic Years 2012-2013 to 2014-2015			
	2012-2013	2013-2014	2014-2015
Concentration #1 Biostatistics	3	3	3
Concentration #2 Community Health Sciences (Social and Behavioral Health Sciences)	5	5	5
Concentration #3 Environmental and Occupational Health Sciences	5	5	5 (Including 1 in negotiations)
Concentration #4 Epidemiology	5	5	5
Concentration #5 Health Policy and Management	5	5	5
Total Full-time Faculty	23	23	23

EOHS Chair position has been posted and advertised. A number of candidates have been interviewed. Negotiations have begun.

1.7b. A table delineating the number of faculty, students and SFRs, organized by department or specialty area, or other organizational unit as appropriate to the school, for each of the last three years (calendar years or academic years) prior to the site visit. Data must be presented in a table format (see CEPH Data Table 1.7.2) and include at least the following information: a) headcount of primary faculty (primary faculty are those with primary appointment in the school of public health), b) FTE conversion of faculty based on % time appointment to the school, c) headcount of other faculty (adjunct, Part-time, secondary appointments, etc.), d) FTE conversion of other faculty based on estimate of % time commitment, e) total headcount of primary faculty plus other (non-primary) faculty, f) total FTE of primary and other (non-primary) faculty, g) headcount of students by department or program area, h) FTE conversion of students, based on definition of Full-time as nine or more credits per semester, i) student FTE divided by primary faculty FTE and j) student FTE divided by total faculty FTE, including other faculty. All schools must provide data for a), b) and i) and may provide data for c), d) and j) depending on whether the school intends to include the contributions of other faculty in its FTE calculations.

Data in the tables for this criterion do not include the Dean because he does not regularly teach courses.

Table 1.7b.1 Faculty, Students and Student/Faculty Ratios by Concentration Area 2012-2013

Table 1.7b.1 Faculty, Students and Student/Faculty Ratios by Concentration Academic Year 2012-2013										
	HC Primary Faculty	FTE Primary Faculty ¹⁰	HC Other Faculty	FTE Other Faculty ¹¹	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students ¹²	SFR by Primary Faculty FTE (SFR Rounded to the Nearest Tenth)	SFR by Total Faculty FTE (SFR Rounded to the Nearest Tenth)
Concentration #1 Biostatistics	3	3.0	4	2.0	7	5.0	6	3.4	1.1	0.7
Concentration #2 Community Health Sciences	5	5.0	12	0.6	17	5.6	56	36.5	7.3	6.5
Concentration #3 Environmental and Occupational Health Sciences	5	5.0	1	0.3	6	5.3	10	4.0	0.8	0.8
Concentration #4 Epidemiology	5	5.0	1	0.1	6	5.1	40	29.7	6.0	6.0
Concentration #5 Health Policy and Management	5	5.0	5	2.0	9	7.0	33	23.0	4.6	3.3
Total	23	23.0	23	5.0	45	28.0	145	96.6	4.2	3.5

Key:

HC = Head Count

Primary = Full-time faculty who support the teaching programs

FTE = Full-time-equivalent

Other = Adjunct, Part-time and secondary faculty

Total = Primary + Other

SFR = Student/Faculty Ratio

¹⁰ Full-time Faculty FTEs always equal 1.

¹¹ Adjunct/Part-time Faculty FTEs are calculated by number of courses taught and time spent on other responsibilities, e.g. student advising, committee participation, etc. Each course taught in one academic year equals .25 FTE and significant advising and committee participation equals .25. 4 courses per year = 1 FTE Faculty=100%.

¹² 1 Student FTE = 9 credits in each of the fall and spring semesters, and 6 credits in the Summer semester for a total of 24 credits per academic year.

Table 1.7b.2 Faculty, Students and Student/Faculty Ratios by Concentration Area Academic Year 2013-2014

Table 1.7b.2 Faculty, Students and Student/Faculty Ratios by Concentration Academic Year 2013-2014										
	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE (SFR Rounded to the Nearest Tenth)	SFR by Total Faculty FTE (SFR Rounded to the Nearest Tenth)
Concentration #1 Biostatistics	3	3.0	4	2.0	7	5.0	7	5.5	1.8	1.1
Concentration #2 Community Health Sciences	5	5.0	13	0.8	18	5.8	74	49.8	10.0	8.6
Concentration #3 Environmental and Occupational Health Sciences	5	5.0	1	0.3	6	5.3	8	7.1	1.4	1.3
Concentration #4 Epidemiology	5	5.0	2	0.2	7	5.2	55	34.8	7.0	7.0
Concentration #5 Health Policy and Management	5	5.0	6	2.0	10	7.0	53	38.3	7.7	5.5
Total	23	23.0	26	5.3	48	28.3	197	135.4	6.2	5.0

Key:

HC = Head Count

Primary = Full-time faculty who support the teaching programs

FTE = Full-time-equivalent

Other = Adjunct, Part-time and secondary faculty

Total = Primary + Other

SFR = Student/Faculty Ratio

Table 1.7b.3 Faculty, Students and Student/Faculty Ratios by Concentration Area Academic Year 2014-2015

Table 1.7b.3 Faculty, Students and Student/Faculty Ratios by Concentration Academic Year 2014-2015										
	HC Primary Faculty	FTE Primary Faculty	HC Other Faculty	FTE Other Faculty	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students	SFR by Primary Faculty FTE (SFR Rounded to the Nearest Tenth)	SFR by Total Faculty FTE (SFR Rounded to the Nearest Tenth)
Concentration #1 Biostatistics	3	3.0	5	2.0	9	5.0	7	4.5	1.5	0.9
Concentration #2 Community Health Sciences	5	5.0	12	0.8	17	5.8	65	33.6	6.7	5.8
Concentration #3 Environmental and Occupational Health Sciences	5 (Including 1 in negotiations)	5.0	0	0.0	5	5.0	14	4.5	0.9	0.9
Concentration #4 Epidemiology	5	5.0	3	0.2	8	5.2	53	28.6	5.7	5.5
Concentration #5 Health Policy and Management	5	5.0	8	2.3 (rounded up from 2.25)	13	7.3 (rounded up from 7.25)	66	49.6	9.9	6.8
Total	23	23.0	28	5.3	52	28.3	205	120.8	5.3	4.3

Key:

HC = Head Count

Primary = Full-time faculty who support the teaching programs

FTE = Full-time-equivalent

Other = Adjunct, Part-time and secondary faculty

Total = Primary + Other

SFR = Student/Faculty Ratio

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

Table 1.7c.1: FTE of Non-Faculty Administration and Staff		
Title	Department(s)	FTE
Accreditation Assistant (temporary)	Office of the Dean	1.0
Assistant Dean for Enrollment and Student Affairs	Office of the Dean	1.0
Associate Dean for Administration	Office of the Dean	1.0
Budget Director	Office of the Dean	1.0
Departmental Coordinator	Community Health Sciences/Epidemiology and Biostatistics	1.0
Departmental Coordinator/Grants Manager	Environmental and Occupational Health Sciences/Health Policy and Management	1.0
Executive Assistant	Office of the Dean	1.0
Secretary II	Office of the Dean	1.0
Staff Assistant	Office of the Dean	1.0
Total		9.0

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

In 2008, the NY State Legislature and the then New York State Governor Elliot Spitzer allocated \$100 million to house the upcoming School of Public Health. [See SUNY Capital Appropriations 2008-2009 and Memorandum from Dr. John C. LaRosa, President of Downstate Medical Center in Resource File] The President convened a Steering Committee that met biweekly for two years to prepare and guide the design and construction of the building. Construction of the building began in 2012. The building is expected to contain 75,000 to 100,000 square feet, a significant proportion of which will be occupied by the School of Public Health.

Currently, the total space currently utilized by the School of Public Health is 13,188.58 square feet. This space is divided into two main corridors on the fourth floor of the Clinical Science Wing and the Basic Science Building in the main Downstate complex, a large space renovated for our use on the fifth floor of the Basic Science Building in the main complex, and a separate building across the street from the main campus utilized to supplement office space until the new SPH Academic Building is ready for occupancy.

The total space utilized by the School of Public Health is comprised of:

- 5,101.26 square feet of office space
- 7,480.40 square feet of classroom space
- 562.17 square feet SPH student recreational space
- 44.75 square feet dedicated storage space.

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

There is no laboratory space currently dedicated to the School of Public Health. However, we have access to 620.21 square feet of laboratory space that is occupied by the College of Medicine faculty. When we occupy the new building, the SPH will have dedicated laboratory space.

Lab equipment currently accessible for use:

- 1 Chemical fume hood
- 1 Flammable cabinet
- 2 freezers
- 1 Refrigerator
- 2 Centrifuges
- 2 PCR (Polymerase Chain Reaction) Machines
- 1 ELISA (Enzyme Linked Immunosorbent Serologic Assay)
- 2 Water Baths
- Chemicals
- Glassware
- Plasticware, including pipettes
- Emergency wash station

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

In each of the SPH conference rooms, there is one state-of-the-art computer and printer which are available to students during all working hours (9:00 am to 8:00 pm). In addition, the Medical Research Library of Brooklyn (MRLB) provides the following computer facilities, which includes **71 individual computer workstations for students**: {SPH students, faculty, administration and staff have the same rights of access to these facilities as all other SUNY Downstate Medical Center members.} See below *Criterion 1.7g* for details regarding Library Computing Services available to students.)

Each faculty, administration and staff member has a state-of-the-art personal computer on his or her desk and either his or her own state-of-the-art printer, or access to a state-of-the-art black and white, and a state-of-the-art color printer close by the desk.

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

THE MEDICAL RESEARCH LIBRARY OF BROOKLYN:

The Library provides a wealth of information resources. Please refer to the Library Information Resources under the Medical Research Library of Brooklyn. <http://library.downstate.edu> for a comprehensive listing of hardcopy and electronic information resources.
(See SUNY Downstate Student Handbook 2014-2015, p. 32, in Resource File)

Below is a detailed listing of library services provided by the Medical Research Library of Brooklyn.

LIBRARY SERVICES

Access Services/Inter-Library Loan

Staff will register patrons for borrowing privileges and manage the Reserve Room. The Reserve Room handles the General Reserve collection (core textbooks) and Special Reserve (course specific and instructor selected materials) in hard copy. The Inter-Library Loan service uses the ILLiad system that allows users to create personal accounts and monitor their requests for

material not owned by the library. Delivery is usually in electronic format. This service is available to anyone with a SUNY Downstate ID card.

Reference staff provides help on demand and are available on call from Monday - Friday and via web request: <http://library.downstate.edu/directory/reform.htm>. One on one and group consultations are also available upon request. Online tutorials for using the resources are available via the library's web page.

Technical Services staff is responsible for acquiring, licensing, and paying for the information resources of the library. They ensure the currency and accuracy of resources held within the collection, including the catalog. They are also responsible for preserving the collection.

The Advanced Learning Resource Services includes The Advanced Learning Resource Center, Classroom Services, AV Delivery/Support and Center for Healthcare Simulation. The Learning Resource Center is designed to meet small group and independent learning needs. There are over 50 computer carrels, and the PC training room.

Classroom Services and AV Delivery is a one-stop service that facilitates the booking of rooms and technical support for AV equipment. Service request forms may be submitted via fax or online <http://classrooms.downstate.edu>). Fees may apply to events that are not curriculum related. Please allow at least two business days' notice for all events and equipment needs. Technical support, except for projectionists, is provided.

Educational Services provides curriculum-related and clinical support classes. Courses in evidence-based health care are provided. Expert searching is available for researchers who need in-depth search and analysis in their subject areas. This service is also available for the assistance in grant applications, by request.

Student Technology Help Desk The library maintains a student technology help desk. The current hours are 12 noon to 1:00 pm and 4:00-5:00 pm. Plans are in the making to extend these hours, especially during times of high need e.g. orientation. This service is located at the main desk and staff will provide help to incoming students in setting up their laptops, and other devices to comply with campus requirements. Staff at the same desk will answer or refer questions about the information resources and other library services.

Library Systems is responsible for the hardware and software made available within the library. They also maintain the wireless connectivity to the Internet. librarysystems@downstate.edu

Photocopying/Printing

Photocopying and printing cost 15 cents per page. Color printing is available for 75 cents per page. One card for printing and photocopying is available for \$1. Value may be added to the cards at dispensers located on the main and lower levels of the library. Users may also scan to email or USB drives at no cost.

(See SUNY Downstate Student Handbook 2014-2015, p. 28 in Resource File)

COMPUTING RESOURCES AVAILABLE TO STUDENTS:

Student Username and Password

Students are issued a username and password pair that works with several key systems. Students use their nine-digit Downstate student ID number (SID) as their username for logging on to campus email, Prime and to Banner Self-Service.

Prime

Prime is the Learning Management System (LMS) used at SUNY Downstate Medical Center to put educational materials and activities online. Most courses use Prime to make documents available for download, to host Discussion Forums, to upload student submissions into DropBoxes and to host computerized exams. Look at the myDownstate page for key information such as browser compatibility.

Banner Self-Service

The Banner student information system allows students to register online for upcoming courses, view final course grades, and update their personal information inside Banner. To log into Banner Self-Service, open a web browser and navigate to the Office of the Registrar home page at <http://sls.downstate.edu/registrar>. Click on the link titled "Student Registration". Review crucial information on the next page before you click through to the myDownstate page to log into Banner. Your username is your Downstate student ID number; your password is the same as the one you use for your Downstate email account.

Computer Labs

Computer labs are located on the 6th, 7th and 8th floors of HSEB, in the 3rd floor of the Basic Sciences Building, and in the Residence Hall. Each lab is dedicated to use by the students of different Colleges, except for the computer lab in the Residence Hall. Additional computers are located in Medicine - HSEB E612a (*and the*) Residence Hall – Building 816 Study Room, first floor. Hours of Availability: 24 hours per day, 7 days per week... Access to the labs is via a door with a combination lock code, which is changed yearly. The computer labs are equipped with computers running Windows and in some cases Apple computers are also available. Printing is available in all labs (except the Medical Informatics lab), using PHAROS, the SUNY Downstate fee-based printing service. Students must purchase a PHAROS printing debit card from vending machines in the Medical Library or in the computer labs. Most labs are equipped with a document scanner. Additional computers are located in various student classrooms, carrels and public areas throughout the 5th, 6th, 7th and 8th floors of HSEB and in the Medical Library.

Educational Software

Some Web-based software is available from all public locations via either Prime or the ECT website (<http://ect.downstate.edu/courseware>). Other computer-based software such as SPSS is available on certain labeled computers in the computer labs or in the Learning Resource Center (LRC) in the Medical Library.

Network Access Via Wireless (WiFi) Networks

Computers and other mobile devices can access the SUNY Downstate's wireless network on the 5th, 6th, 7th or 8th floors of HSEB, in the Medical Library, in the Residence Halls and in the cafeteria. In order to protect the campus network, SUNY Downstate requires that Windows users in these locations install and run Clean Access software. Apple laptops and mobile devices such as iPads and smartphones will need to submit a registration form before they can gain access. Further information can be viewed at: <http://ect.downstate.edu/cleanaccess/index.html>

Troubleshooting assistance can be provided by the Answer Desk in the Medical Library Commons area, Monday to Friday, noon-1 pm and 4-5 pm.

Classroom Audiovisual Resources

In many cases classrooms are equipped with mobile or ceiling-mounted LCD projectors, which can be accessed by computer or by VCR/DVD players mounted in the room.

Training

Small group or individual assistance on any computer-related topic is available by appointment.

Work Study Employment

Students eligible for work study who enjoy working with computers are encouraged to inquire about work availability at the ALC or CATS office in Library B020A.

(See SUNY Downstate Student Handbook 2014-2015, p. 32 in Resource File)

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

There are numerous other resources and services available for students. They include, but are not limited to: student associations, societies and clubs, health services, psychological counseling, student activities, computer user groups, Downstate bookstore, etc. These are listed, along with their respective policies in the SUNY Downstate Student Handbook 2014-2015, pp. 20-43, located in the Resource File.

In addition, the School has informal, but dynamic functional relationships with a variety of community resources available for instruction, research and service. Our students conduct their practical experience(s) at many community sites. These Field Experiences include research and service, and may involve faculty members who are active in service and/or research in the community. For instruction, we have linkages with the Arthur Ashe Institute for Urban Health, the New York City Department of Health and Mental Hygiene and the Brooklyn Borough President's Office. For research, we have linkages with the Disparities Center, Unions, Tuesday's Child (a non-profit organization for autistic children) and the Arthur Ashe Institute for Urban Health. We currently have formal Memoranda of Understanding with a number of sites and continue to formalize linkage agreements with others.

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

The measureable objectives by which the school assesses the adequacy of its resources are:

- To maintain or increase the requisite Number of Faculty By Concentration required by CEPH
- To maintain or increase the Number of Support Staff Supported by State Funds
- To maintain or increase currently utilizable Space
- To greatly increase utilizable space when taking occupancy of the new SPH Academic Building
- To obtain dedicated laboratory space in the new SPH Academic Building
- To maintain the abundant information resources available in the Medical Research Library of Brooklyn

Data in the tables for this criterion do not include the Dean because he does not regularly teach courses.

Table 1.7i.1: Number of Full-Time Faculty Per Academic Year By Concentration					
Number of Full-Time Faculty Per Academic Year By Concentration	Target	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
Biostatistics (BIOS)	3	3	3	3	3
Community Health Sciences (CHSC)	5	5	5	5	5
Environmental and Occupational Health Sciences (EOHS)	5	5	5	5 (Including 1 in negotiations)	5 (Including 1 in negotiations)
Epidemiology (EPID)	5	5	5	5	5
Health Policy and Management (HPMG)	3	5	5	5	5
Total	21	23	23	23	23

Table 1.7i.2: Number of Support Staff Supported by State Funds from 2012-2013 to 2015-2016 by Academic Year				
Academic Year	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
# of Support Staff	8	8	9	9

Table 1.7i.3: SPH Space Allocation from 2012-2013 to 2015-2016 by Academic Year				
Academic Year	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
SPH Space Increase from Previous Year	0	0	0	0
Current SPH Space in Square Footage	13,188.58	13,188.58	13,188.58	13,188.58
Expected Utilizable Space for SPH in New Building in Square Footage	-	-	-	25,000
Increase in Dedicated Space	-	-	-	11,811.42
Current SPH Usable Laboratory Space in Square Footage	620.21	620.21	620.21	620.21
Expected Dedicated Laboratory Space in New Building	-	-	-	1,500
Increase in Laboratory Space	-	-	-	879.79

Table 1.7i.4: Medical Research Library of Brooklyn Resources as of August 2015			
Goal:	Resource Type	Total Resources	Public Health Specific Resources
To Maintain the Abundant Information Resources Available in the Medical Resource Library	Electronic Books	1,491	505
	Electronic Journals	6,453	210
	Print Books	55,174	427
	Print Journals	10,873	213
	Databases	257	20 (these include access to public health information and data)

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

This criterion is met.

Strengths:

The SPH has abundant resources to draw on which enrich the teaching, research and service enterprises of faculty and students. The SPH is comprised of the requisite numbers of faculty and staff required to meet the CEPH guidelines for concentrations which offer an MPH degree only and those concentrations which offer both an MPH and DrPH degree. The Administration, faculty and staff continue to be firmly dedicated to the continued success of the School of Public Health.

Weaknesses:

Fiscal constraints in the overall economy, and the New York State economy have prevented the School from expanding its faculty base at this time. Space constraints continue to provide challenges.

Plans:

The School has the capacity to expand its faculty base, and plans have been formulated to do so as soon as financial resources become available to enable further faculty growth. Office space in the new SPH Academic Building can accommodate 50 Full-time faculty. We anticipate reaching that goal over the next 10 years.

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.

Required Documentation. The self-study document should include the following:

1.8a. A written plan and/or policies demonstrating systematic incorporation of diversity within the school. Required elements include the following:

The School of Public Health has a comprehensive plan to systematically incorporate diversity into all aspects of recruitment, including faculty, staff and students.

1.8ai. Description of the school's under-represented populations, including a rationale for the designation.

The SPH has a great variety of under-represented populations due to its geographic location and the underlying mission and goals of the Downstate Medical Center as a whole. We are located in Brooklyn, New York, which is a gateway city for immigrants from all countries in the world. Approximately 63% of the population of Brooklyn is comprised of under-represented racial/ethnic minorities. The catchment area for the SPH is primarily Caribbean-American, but includes many other racial and ethnic groups. The under-represented populations we serve include:

- African-Americans
- Africans
- Asians
- Caribbean-Americans
- Hispanics/Latinos
- Women

Approximately 60% of our student body is comprised of under-represented minority populations.

A number of methods are employed to specifically recruit diverse students. These events are overseen by the Assistant Dean for Enrollment and Student Affairs. They include:

- Open House Events;
- sending faculty and staff to local college graduate fairs;
- hiring a Recruiter with the express purpose of reaching out to diverse students;
- developing and distributing hardcopy literature which reflects the diversity of our student population
- maintaining a website which reflects our diversity and sends a message that we welcome diverse students.

1.8aii. A list of goals for achieving diversity and cultural competence within the school, and a description of how diversity-related goals are consistent with the university's mission, strategic plan and other initiatives on diversity, as applicable.

The SPH plans to continue to recruit widely to maintain the excellence we have achieved in recruiting a diverse student body. Diversity and cross-cultural education is a primary focus of the Downstate Medical Center and the School of Public Health specifically. As can be seen in our Vision and Mission Statements, as well as our Professional Values, the SPH is dedicated to diversity and public health education in Urban and Immigrant Health. (See Vision, Mission, Goals and Professional Values in Criterion 1.1 a-e above.)

Cultural competence is emphasized in all core and concentration core classes, as evidenced by the competencies listed in Criterion 2.6 a-c. Our focus in our MPH and DrPH degree programs is on Urban and Immigrant Health, as it relates to the five core subject areas: Biostatistics, Community

Health Sciences, Environmental and Occupational Health Sciences, Epidemiology and Health Policy and Management.

1.8aiii. Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the school should also document its commitment to maintaining/using these policies.

The State University of New York, Downstate Medical Center and the SPH are dedicated to adhering to all Federal and State laws and regulations regarding affirmative action, diversity, prevention of bias-related crimes, etc. Downstate has an Office of Diversity and Inclusion which oversees all hiring practices, and investigates any allegations of discrimination. As stated in the Downstate Student Handbook 2014-2015, p. 44-45:

OFFICE OF DIVERSITY AND INCLUSION

- Compliance with the equal opportunity laws and regulations listed below is within the scope of responsibilities of this office.
- Title VI of the Civil Rights Act of 1964 as amended-prohibits discrimination on the basis of race, color or national origin in admissions, access to courses or programs, and student policies;
- Title IX of the Educational Amendments of 1972-prohibits exclusion from participation in, or denial of benefits, or subjection to discrimination on the basis of sex in any education program or activity receiving federal financial assistance. Mr. Kevin Antoine, Chief Diversity Officer, is SUNY Downstate's Title IX coordinator.
- Section 504 of the Rehabilitation Act of 1973-prohibits discrimination on the basis of physical or mental handicap in any federally assisted program or activity;
- Age Discrimination Act of 1972- prohibits discrimination on the basis of age in programs or activities receiving federal financial assistance;
- Under State Education Law S224-a, no person shall be expelled from or be refused admission as a student to an institution of higher education for the reason that (s) he is unable, because of his/her religious beliefs, to attend classes or to participate in any examination, study or work requirements on a particular day or days. Moreover, the Religious Freedom Restoration Act of 1993- requires federal, state and local governments to demonstrate a compelling interest before burdening an individual's exercise of religion.
- State of New York Executive Order 28 establishes that no State agency or department shall discriminate on the basis of sexual orientation against any individual in the provision of any services or benefits by such State agency or department.
- Americans with Disabilities Act of 1990 (Titles II-V) and Americans with Disabilities Amendment Act of 2008-prohibits discrimination on the basis of disability in public service and public transportation, public accommodations, telecommunications and miscellaneous provisions.

Students are invited and encouraged to consult with the Office of Diversity informally when situations or problems relating to perceived discriminatory treatment or behavior occur.

In addition, the SUNY Grievance Procedure for Review of Allegations of Discrimination may be used by any Downstate Medical Center employee, student, or third parties participating in a University sponsored or affiliated activity, when the respondent is a Downstate employee or student for the identification of allegations of unlawful discrimination on the basis of race, sex, color,

religion, age, national origin, disability, marital status, status as a disabled veteran or a veteran of the Vietnam era, sexual orientation, or retaliation. This process is not intended to replace, duplicate, or supplant any other grievance procedure, nor does it deprive a complainant of the right to file with an outside enforcement agency. This procedure, regarded as an additional mechanism for the investigation and resolution of allegations of unlawful discrimination on the basis of race, sex, color, religion, age, national origin, disability, marital status, status as a disabled veteran or veteran of the Vietnam era, sexual orientation, or retaliation, will benefit staff, faculty, students, and administration.

The Grievance procedure in its entirety may be found in the Appendix. In keeping with efforts to establish an environment in which the dignity and worth of all members of the campus community are respected, sexual harassment of Downstate Medical Center students and employees is unacceptable conduct and will not be tolerated.

Sexual harassment is: any unwanted verbal or physical sexual advance, sexually explicit derogatory statements, or sexually discriminatory remarks which are offensive or objectionable to the recipient or which causes the recipient discomfort or humiliation, or which interfere with the recipient's education, or which creates an intimidating, hostile, or offensive educational environment.

Sexual harassment is a form of sex discrimination and is a violation of Title IX of the Educational Amendments of 1972. Under the law, there are two forms of sexual harassment: quid pro quo conduct occurs when specific academic benefits are withheld or penalties are imposed as a means of coercing sexual favors; hostile environment sexual harassment occurs when a person in authority either creates or condones an academic environment in which sexual harassment is present. A sexual harassment complaint may be filed not only by an individual directly victimized by sexual harassment, but also by any other individual who objects to the behavior, and/or fears that such behavior may adversely affect their educational status or prospects. Ms. Shaundelle Moore Goldsmith, EEO and Title IX Advisor, is SUNY Downstate's Title IX coordinator. (Additional information in the Appendix.)

Downstate Medical Center is committed to the prompt and equitable resolution of allegations of discrimination on the basis of sexual harassment. Students may consult and/or file a complaint with the Office of Diversity and Inclusion utilizing the Grievance Procedure mentioned above and described in the Appendix.

1.8aiv. Policies that support a climate for working and learning in a diverse setting.

The SUNY Downstate School of Public Health is committed to policies that support a harmonious climate for working and learning in a diverse setting. See above response in Criterion 1.8iii for detailed information and policies.

1.8av. Policies and plans to develop, review and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.

Diversity and cultural competency are infused in the operations and curricula of the School of Public Health. The Sub-Committee on Educational Policy and the Curriculum regularly reviews all syllabi and course offering forms to make certain that they are in accordance with our Vision, Mission, Goals and Professional Values which promote diversity and inclusion. This Committee also ensures that each syllabus incorporates the cross-cultural competencies outlined in Criterion 2.6 a-c. In addition, our practical Field Experience (FE) enables our students to work in a variety of multi-cultural environments, including a number of overseas sites.

1.8avi. Policies and plans to recruit, develop, promote and retain a diverse faculty.

There is a strong commitment to maintaining a diverse faculty by the SPH and SUNY Downstate Medical Center generally. As stated above in Criterion 1.8iii, numerous policies are in place to ensure we recruit, develop, promote and retain a diverse faculty. SUNY Downstate is a designated Equal Opportunity/Affirmative Action Employer. When faculty vacancies occur, we cast as wide a net as possible to attract qualified candidates of all races, genders, ages and educational/experiential backgrounds. In addition to posting on the Downstate Webpage and JobBoard, we advertise vacancies on the Rollins School of Public Health and APHA websites, place ads in appropriate public health journals and/or newspapers, and distribute vacancy flyers at the APHA Annual Meeting and Exposition to ensure the position is widely promoted.

In addition, the Committee on Academic and Professional Qualifications Policies and Procedures ensures that promotion and tenure considerations are fair and equitable. (See CAPQ Policies and Procedures in Resource File.)

Plans to further diversify the faculty include the recruitment of Hispanic/Latino faculty, which has proved challenging in the past.

1.8avii. Policies and plans to recruit, develop, promote and retain a diverse staff.

The same policies referenced above in Criterion 1.8iii are in place to ensure we recruit, develop, promote and retain a diverse staff. SUNY Downstate is a designated Equal Opportunity/Affirmative Action Employer. When staff vacancies occur, we cast as wide a net as possible to attract qualified candidates of all races, genders, ages and educational/experiential backgrounds. Our most recent staff hire is a Hispanic female who serves as a Staff Assistant who works with the Associate Dean for Administration preparing the Accreditation documents and site visit logistics.

1.8aviii. Policies and plans to recruit, admit, retain and graduate a diverse student body.

The Committee on Admissions is dedicated to ensuring a diverse enrollment. Currently, our enrollment is comprised of approximately 60% under-represented minority populations. In addition, our student body is approximately 70% female.

Though the population of Brooklyn is approximately 30% Hispanic/Latino, it has been difficult to recruit Hispanic students to the SPH. Our catchment area is typically African-American and Caribbean-American, and this is reflected in our student body. It has been difficult to recruit Hispanic/Latino students throughout the Downstate Medical Center, not just the School of Public Health. A large proportion of the Hispanic/Latino population in Brooklyn are recent immigrants, whose children are now primarily enrolled in primary and secondary education. As a result, there are not large numbers of these young people who are finishing college and planning to move on to graduate education. In addition, the Hispanic/Latino population is largely transitory, moving back and forth to their country of origin. Despite this, we have made specific efforts to attract Hispanic/Latino students through our outreach efforts. We have increased the percentage of Hispanic/Latino students over recent years, but we continue to strive for higher percentages.

1.8aix. Regular evaluation of the effectiveness of the above-listed measures.

The SPH is involved in an ongoing evaluation process which assesses the effectiveness of the above-listed measures. The overall composition of the school: faculty, students and staff are taken into consideration for all planning processes, including strategic planning, recruiting for vacant positions, advertising for student recruitment and curriculum revision for cultural competence and relevancy.

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

All policies, procedures and SPH documentation support diversity and cultural competence in admissions, curricula, course competencies and other relevant aspects of the SPH operations. This is evidenced by the following:

School of Public Health Vision Statement:

Grow the SUNY Downstate School of Public Health into a nationally recognized School of Public Health that is known for:

- **advancing Global Health**
- **creating innovative models to empower communities to address health disparities**
- fostering the development of new knowledge and public health practices
- **leadership in Urban and Immigrant Health**
- **promoting health equity**
- **training diverse public health professionals**

School of Public Health Mission Statement:

The mission of the SUNY Downstate School of Public Health is to advance public health knowledge, promote health and well-being, and prevent disease and disability within communities, **particularly in urban and immigrant ones**. Such actions are accomplished through excellence in the education of public health professionals, scientific investigation of public health issues, and service to communities through collaborative partnerships.

Goals:

Instruction:

- **To provide an academic environment for public health education, research, and practice in an urban setting with an emphasis on urban and immigrant health.**
- **To educate individuals through an academic program that prepares graduates to identify, address, and resolve public health issues and manage public health programs in different settings, especially urban environments with diverse racial, ethnic, cultural, religious, and socioeconomic groups.**

Research:

- **To advance public health knowledge through scientific investigation of health and disease, with a focus on urban and immigrant health issues.**
- To disseminate and interpret research results to professionals, patients, individuals and their families, and the public.

Service:

- **To advance the health of underserved communities, both locally and globally**, through collaborative public health approaches to health promotion and disease prevention and intervention.

SPH Professional Public Health Values

The SPH is committed to the following professional public health values:

1. Advancement of public health knowledge
2. Promotion of health and well-being
3. Prevention of disease and disability
4. Reduction of premature mortality
5. **Health Equity**
6. Academic excellence in the education of public health professionals
7. Academic integrity
8. Grounded scientific research in public health problems
9. Partnerships with local and regional community organizations to effect health promotion and disease prevention
10. Provision of service to local and regional populations and communities to improve health and prevent disease and disability.
11. Protection of, and respect for participants involved in public health research, for example: conducting research with 'informed consent' per National Institutes of Health (NIH) guidelines
12. Compliance with Health Insurance Portability and Accountability Act (HIPAA) guidelines
13. Medical and Public Health Ethics
14. **Diversity of the Student Body**
15. **Diversity of the Faculty and Staff**
16. Community Service
17. Faculty Participation in School Governance
18. Student Participation in School Governance

Cultural competence and the emphasis on urban and immigrant health are reflected in these competencies selected from the list of competencies students are expected to master. See Criterion 2.6 for a thorough statement of all the competencies.

Selected Overarching MPH Competencies

- **Describe how the allocation of social and community factors impacts the understanding of public health problems in urban and immigrant populations and guides community engaged research and practice.**
- **Integrate and synthesize theory, evidence and local knowledge to inform the conceptualization, design and evaluation of health promotion programs in urban and immigrant settings.**

Selected Overarching DrPH Competencies

- **Synthesize and critically appraise published, public health research literature, specifically in urban and immigrant health.**
- **Demonstrate cultural sensitivity in conducting ethical data collection and analysis.**

In addition to the Overarching degree competencies, cultural competence are reflected in each concentration's competencies as evidenced below:

Selected MPH Concentration Competencies

Biostatistics

- **Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.**

Community Health Sciences

- **Recognize the importance of one's own standpoint and positions while working collaboratively with diverse communities and constituencies (e.g., organizations, agencies, practitioners, policymakers, and researchers).**
- **Describe the roles of history, power, privileged, and structural inequality in driving health inequities in urban communities.**
- **Critically apply traditional and contemporary methods and frameworks to evaluate the process, efficacy and sustainability of health promotion programs designed for urban and immigrant populations.**
- **Effectively communicate (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.**
- **Differentiate between linguistic competence, cultural competence, and health literacy and explain how increased education and awareness of each of these factors can influence the health of a population.**
- **Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention for a specific community or population.**
- **Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions in urban and immigrant populations.**
- **Demonstrate an understanding of the interaction of race/ethnicity/gender, and health and disease.**
- **Delineate how an individual/community can affect the development of health policy at a local, state, and federal level particularly in regards to gender, race, and sexual orientation.**

Environmental and Occupational Health Sciences

- Describe federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.
- Describe various risk management, policy and legal approaches in relation to issues of environmental justice and equity.
- Describe occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.
- Describe the effectiveness of occupational health programs, policies, organizations, and legal systems to reduce injuries, illnesses and health disparities.
- Describe the impact of environmental and occupational hazards on vulnerable populations.

Epidemiology

- Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
- Describe trends and patterns of incidence and prevalence for major diseases and factors affecting health status of immigrant and urban populations, and indicate major etiologic and prognostic factors.
- Effectively communicate epidemiologic research findings orally and in writing, to lay and professional audiences.
- Comprehend and apply basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.

Health Policy and Management

- Advocate effectively for the needs of urban, immigrant, and other vulnerable populations in health policy and health services.
- In collaboration with priority populations, identify, analyze, and respond to factors impacting the health of diverse communities.

Selected DrPH Concentration Competencies

Community Health Sciences

- **Assess cultural, environmental, and social justice influences on the health of communities.**
- **Demonstrate cultural sensitivity in ethical discourse and analysis.**
- **Conduct community-engaged participatory intervention and research projects.**
- **Effectively collaborate with communities, policy makers, and other relevant groups to design applied public health intervention and research projects.**
- **Utilize planning models to apply theory and evidence to the planning of community-engaged public health intervention and research projects.**
- **Using contemporary evaluation frameworks, articulate the strengths and limitations of experimental designs used to evaluate health promotion programs designed for urban and immigrant populations.**
- **Identify diverse stakeholders (from private and public sectors) critical to the sustainability and institutionalization of health promotion programs in urban and immigrant settings.**
- **Develop measurable evaluation goals and timelines required for the successful evaluation of health promotion programs in urban and immigrant settings.**
- **Demonstrate leadership when communicating (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.**
- **Using major concepts, methods and theories in the social and behavioral sciences, develop an in-depth understanding of a key public health issue within a community and design a program or intervention that will ameliorate this public health problem.**
- **Effectively communicate efforts to design, implement, and manage an intervention aimed at an identified public health issue to diverse audiences.**

Environmental and Occupational Health Sciences

- **Assess various risk management, policy and legal approaches in relation to issues of environmental justice and equity.**
- **Evaluate the performance and impact of federal and state regulatory agencies and programs, legal systems, health surveillance systems and organizations designed to prevent and control occupational hazards and reduce injuries, illnesses and health disparities.**
- **Delineate and investigate various risk management and risk communication approaches in relation to issues of environmental justice and equity.**

- **Evaluate the performance and impact of federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.**
- **Assess and prioritize occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.**

Epidemiology

- **Prepare written and oral reports on public health research and communicate results to diverse public health constituencies.**
- **Demonstrate mastery of the administrative, legal, ethical, and quality assurance dimensions of research and practice.**

Below is a selected listing of practical Field Experience sites that demonstrate that students undergo a cross-cultural experience.

- AIDS Service Center
- Arthur Ashe Institute for Urban Health
- Barbershop Talk with Brothers Program
- Brooklyn District Public Health Office
- Brooklyn Health Disparities Center
- Choice Trust South Africa
- Diabetic Clinic (Mediciti/Osmanla Hospital) INDIA
- Interfaith Medical Center
- Kings Against Violence Initiative
- Hofstra-North Shore School of Medicine/Psychiatry
- New York University Center of the Study of Asian American Health/CHRNA
- Planned Parenthood Federation of America
- Tropical Medicine Research Institute, University of the West Indies (UWI) Jamaica
- United Nations Women
- Women's Interagency HIV Study

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

Diversity policies are an integral part of SUNY Downstate and the SPH. The ongoing plan and policies, including the Vision, Mission, Goals and Professional Values were developed with input from faculty, students, community members including the Community Advisory Group, and alumni, and are in accordance with the overall policies of the SUNY Board of Trustees and SUNY Downstate as stated on the SUNY Downstate website:

SUNY Downstate Medical Center - Brooklyn's Academic Medical Center

Mission:

To provide outstanding education of physicians, scientists, nurses and other healthcare professionals.

To advance knowledge through cutting edge research and translate it into practice.

To care for and improve the lives of our globally diverse communities.

To foster an environment that embraces cultural diversity.

Values:

PRIDE - To take satisfaction in the work we do every day, and to value our collective contributions to the Downstate community.

Professionalism - **We commit to the highest standards of ethical behavior and exemplary performance in education, research, and patient care**

Respect - We value the contributions, ideas and opinions of our students, coworkers, colleagues, patients and partnering organizations

Innovation - We research and develop new and creative approaches and services for the anticipated changes in healthcare

Diversity - **We embrace our rich diversity and commit to an inclusive and nurturing environment**

Excellence - We commit to providing the highest quality of education and service to our students, patients and community by holding ourselves, our coworkers and our leaders to high standards of performance

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

Plans and policies regarding diversity of faculty, staff, students and academic enterprises are monitored and reviewed on an ongoing basis. All planning, recruiting, hiring and purchasing discussions take these factors into account. As a unit of DMC, we are required to include Minority and Women (owned) Business Enterprises (MWBE) vendors in all purchasing decisions. In addition, the Sub-Committee on Educational Policy and the Curriculum regularly reviews course syllabi for their attention to cultural competence in addition to the other competencies detailed in Criterion 2.6 below.

1.8e. Identification of measurable objectives by which the school may evaluate its success in achieving a diverse complement of faculty, staff and students, along with data regarding the performance of the program against those measures for each of the last three years. At a minimum, the school must include four objectives, at least two of which relate to race/ethnicity.

Measurable objectives used to evaluate its success in achieving a diverse complement of faculty, staff and students include:

Students

- To maintain or increase the percentage of under-represented minorities present in the student body
- To maintain or increase the number of women present in the student body.
- To increase the number of out-of-state students enrolled in the SPH degree programs.
- To continue to have a wide range of age groups represented in the student body.

Full-time Faculty

- To maintain or increase the percentage of under-represented minorities present in the faculty
- To maintain or increase the number of women present in the faculty.

Part-time Faculty

- To maintain or increase the percentage of under-represented minorities present in the Part-time faculty.
- To maintain or increase the number of women present in the Part-time faculty.

Administrative Staff

- To maintain or increase the percentage of under-represented minorities present in the staff.
- To maintain or increase the number of women present in the staff.

For the purposes of clarity, the diversity data is presented in separate tables for students, faculty and staff.

Table 1.8e.1: All MPH and DrPH Students, Diversity Outcomes

Table 1.8e.1: Diversity Outcomes Data for All Degree Students							
Category/Definition		Method of Collection	Data Source	Target	2012-2013	2013-2014	2014-2015
Under-represented Minorities/ Total		Self-Identification	Banner System, Student Applications	50%	57%	61%	62%
Gender F/Total		Self-Identification	Banner System, Student Applications	50%	F=101/145 70%	F=132/197 67%	F=140/205 68%
Out-of-State Residence/Total		Self-Identification	Banner System, Student Applications	10%	13/145= 9%	25/197= 13%	25/205= 12%
Age Cohorts*	20-29	Self-Identification	Banner System, Student Applications	60%	86/145= 59%	120/197= 61%	131/205= 64%
	30-39			20%	31/145= 21%	42/197= 21%	38/205= 19%
	40-49			12%	19/145= 13%	23/197= 12%	24/205= 12%
	50-59			6%	7/145= 5%*	10/197= 5%	10/205= 5%*
	60-69			2%	2/145= 1%	2/197= 1%	2/205= 1%

*Rounding percentages for Age Cohorts resulted in 99% total for 2012-2013, and 101% total for 2014-2015.

Table 1.8e.2 Full-time Faculty, Diversity Outcomes**

Table 1.8e.2: Diversity Outcomes Data for Full-time Faculty							
Category/Definition	Method of Collection	Data Source	Target	2012-2013	2013-2014	2014-2015	2015-2016
Under-Represented Minorities/Total	Self-Identification	Human Resources Documentation	40%	21%	21%	33%	26%
Gender F/Total	Self-Identification	Human Resources Documentation	50%	58%	58%	67%	70%

**The denominator for this measure is 24, 24, 21 and 23 for the respective academic years. The denominator of 21 is due to the faculty positions vacant during that academic year. The denominator also includes the Dean.

Table 1.8e.3 Part-time Faculty, Diversity Outcomes

Table 1.8e.3: Diversity Outcomes Data for Part-time Faculty							
Category/Definition	Method of Collection	Data Source	Target	2012-2013	2013-2014	2014-2015	2015-2016
Under-Represented Minorities Total	Self-Identification	Human Resources Documentation	25%	22%	26%	21%	25%
Gender F/Total	Self-Identification	Human Resources Documentation	50%	42%	46%	46%	46%

Table 1.8e.4 All Administration and Staff (Non-Faculty Only*), Diversity Outcomes**

Table 1.8e.4: Diversity Outcomes Data for Staff							
Category/Definition	Method of Collection	Data Source	Target	2012-2013	2013-2014	2014-2015	2015-2016
Under-Represented Minorities/Total	Self-Identification	Human Resources Documentation	30%	38%	38%	44%	44%
Gender F/Total	Self-Identification	Human Resources Documentation	50%	88%	88%	88%	88%

***This includes: 6 clerical staff, the Assistant Dean for Enrollment and Student Affairs, the Associate Dean for Administration and the temporary (2015 only) position of Accreditation Assistant.

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

This criterion is met.

Strengths:

The SPH at SUNY Downstate surpasses all expectations for a vibrant diverse institution. The SPH has a remarkable record for recruiting and maintaining a widely diverse student body, faculty and staff. Students at the Downstate SPH have numerous opportunities for cross-cultural experiences in the educational enterprise as well as in research and service.

Weaknesses:

None.

Plans:

To continue to support diversity in all its forms via policies, procedures and practices.

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.

Required Documentation. The self-study document should include the following:

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

Table 2.1a.1 Instructional Matrix

Table 2.1a.1: Instructional Matrix – Degrees & Specializations/Concentrations		
	Academic	Professional
Masters Degrees		
Concentration	Not Applicable	Degree
#1 Biostatistics		MPH
#2 Community Health Sciences (Social and Behavioral Health Sciences)		MPH
#3 Environmental and Occupational Health Sciences		MPH
#4 Epidemiology		MPH
#5 Health Policy and Management (Health Services Administration)		MPH
Doctoral Degrees		
Concentration	Not Applicable	
#1 Community Health Sciences (Social and Behavioral Health Sciences)		DrPH
#2 Environmental and Occupational Health Sciences		DrPH
#3 Epidemiology		DrPH
Joint Degrees (Concurrent Degree)		
MD/MPH	Not Applicable	MPH

MD/MPH Students

The MD/MPH Program **does not** differ from the standard MPH degree program in any of its academic requirements. There is no credit sharing or substitution permitted between the MD and the MPH degree programs. Students must apply to, and enroll in both the College of Medicine and the School of Public Health. Tuition must be paid for each degree independently. The only difference between an MD/MPH student and a “standard” MPH student is that the MD/MPH students entering in a particular academic year become a cohort, taking their MPH courses together in the same order, so as to complete the MPH degree coursework in their first two years of Medical School. “Standard” MPH students may choose the order in which they take their core courses and concentration core courses. The overwhelming majority of MD/MPH students graduate from the MPH program in two years.

Peace Corps Master's International (PCMI) MPH students

The SPH is partnered with the Peace Corps to offer the Peace Corps Master's International (PCMI) Program. **This is the standard MPH degree with all the same academic requirements for PCMI students.** The only difference is the process by which PCMI students obtain their MPH requirements. PCMI students complete all or the majority of their coursework here at SUNY Downstate. Their Field Experience may be part of their Peace Corps "in country" experience, which consists of 27 months of training and service. After their "in country" service, students return to SUNY Downstate SPH to complete any remaining coursework and their Culminating Experience. PCMI students have the same six (6) years to complete the MPH as any standard MPH student.

New York City Department of Health and Mental Hygiene (NYCDOHMH) Residents Enrolled in the MPH Degree Program

After submitting a response to a Request for Proposals (RFP), the SPH was selected by the New York City Department of Health and Human Resources to be a venue for their medicine residents to undertake the Master of Public Health degree. These students have all the same academic requirements as a "standard" MPH student. They are required to complete the same number of credits to earn the MPH degree. These students also have the same six (6) years to complete the MPH as any standard MPH student.

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

www.downstate.edu/publichealth/programs.html

2.1c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The SUNY School of Public Health was built to comply with CEPH accreditation criteria with MPH degrees in all five core areas and DrPH degrees in three of the five core areas: Community Health Sciences (Social and Behavioral Health Sciences), Environmental and Occupational Health Sciences, and Epidemiology. Each MPH and DrPH graduate is well grounded in all of the five core areas with a strong emphasis on their concentration choice. In addition, our focus on Urban and Immigrant Health is integrated into each degree curriculum and this focus is emphasized in each student's educational experience.

Weaknesses:

None

Plans:

To continually monitor content of courses to ensure all core areas are covered sufficiently and the focus on urban and immigrant health is clearly delineated in all degree core courses and concentration core courses.

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.

Required Documentation. The self-study document should include the following:

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

For all academic courses, one credit is defined as fifteen hours of class or on-line contact with professors. With regard to the practical Field Experience (FE) and the Culminating Experience (CE), a student takes one credit per semester without regard to the actual number of hours spent on the project. The Field Experience consists of 200 hours of practical work in the field.

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

The minimum degree requirements for the MPH degrees are 42 credits, including the Field Experience and the Culminating Experience. The minimum degree requirement for the DrPH degree is 45 credits, including the Field Experience, the Qualifying Examination and the Dissertation.

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

None.

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

This criterion is met.

Strengths: All our MPH degree candidates complete a minimum of 42 credits to graduate, as per CEPH guidelines.

Weaknesses: None

Plans: Continue to ensure close monitoring of student progress and evaluate their credit accrual through their academic advisors and the Committee on Student Evaluation, Promotion and Honors.

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.

Required Documentation. The self-study document should include the following:

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

Each MPH and DrPH student is required to take courses which cover the public health core knowledge areas. These courses, listed by degree, are outlined in the two tables below which encompass both professional degrees offered by the SPH.

In addition, each course offered, as well as the Field Experiences in both degree programs, integrate mastery of public health competencies into their coursework. These competencies are clearly outlined in Criterion 2.6 of this document. Competencies are provided for all degree students as well as the students in each of the concentrations. In the MPH Culminating Experience, each student is evaluated for their mastery of the Overarching MPH competencies and the student's respective concentration competencies. In the DrPH, the dissertation serves as the end product which is evaluated to determine the student's mastery of the more advanced overarching competencies of the DrPH degree and the student's respective DrPH concentration.

Table 2.3a.1: MPH Core Public Health Knowledge

Table 2.3a.1: Required Courses Addressing Public Health Core Knowledge Areas for MPH Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	BIOS 5200: Principles of Biostatistics	3
Community Health Sciences	CHSC 5200: Health Behavior and Risk Reduction	3
Environmental Health Sciences	EOHS 5200: Issues in Environmental Health	3
Epidemiology	EPID 5200: Principles of Epidemiology	3
Health Policy and Management	HPMG 5206: Introduction to Health Policy and Management	3

Table 2.3a.2: DrPH Core Public Health Knowledge

Table 2.3a.2: Required Courses Addressing Public Health Core Knowledge Areas for DrPH Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	BIOS 7200: Quantitative Research Methods for Public Health Practice	3
	PUBH 7201: Study Design in Public Health	
Community Health Sciences	PUBH 7201: Study Design in Public Health	3
Environmental Health Sciences	PUBH 7201: Study Design in Public Health	3
Epidemiology	BIOS 7200: Quantitative Research Methods for Public Health Practice	3
	PUBH 7201: Study Design in Public Health	
Health Policy and Management	HPMG 7200: Public Health Management and Ethics	3
	PUBH 7200: Public Health Policy and Politics Seminar	

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

This criterion is met.

Strengths:

The SPH provides courses in each degree which cover public health core knowledge areas. The core courses in each degree program comprise the Overarching Competencies for the MPH and DrPH degrees respectively. Each of the five concentrations in the MPH program and the three concentrations in the DrPH program have their own competencies. These competencies are clearly outlined, disseminated to the students and integrated into the curriculum. Upon completion of the degree, each student is evaluated for his/her mastery of the stated core and concentration competencies for that degree.

Weaknesses:

None.

Plans:

To continue to assess the core knowledge taught in the required courses for each degree. Continue to update competencies based on current trends in the field of public health as well as input from key constituents. Continue to evaluate students on their mastery of the competencies and core public health knowledge, and revise teaching and evaluation methods as needed.

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.

Required Documentation. The self-study document should include the following:

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

BACKGROUND/RATIONALE

The purpose of the Field Experience (FE) in the MPH and DrPH degree program provides practical training to supplement classroom study in the development of public health professionals. The Field Experience is a valuable and essential component of training for students with little or no previous work in a public health field. Students with documented actual practice experience, typically mid-career professionals in a field of public health, may be eligible for a waiver of the Field Experience requirement.

The Field Experience is a planned and supervised practice experience which incorporates the following features:

- It is coordinated and developed by the student, the Site Preceptor and the Faculty Advisor
- Has been **pre-approved** by the Faculty Advisor
- Applies measurable learning objectives to real-world public health practices and includes a minimum of 200 contact hours for students
- Includes an initial student plan and placement agreement that must be completed by the student and signed by the Site Preceptor and the Faculty Advisor (see pp. 15-19).
- Incorporates student activities that are coordinated and evaluated in writing by the student's Site Preceptor and Faculty Advisor
- Includes a midway progress report signed by the Site Preceptor and the Faculty Advisor (see p. 20)
- Includes a final student evaluation by the Site Preceptor and Faculty Advisor (see pp. 21-24).
- Includes a student self-assessment of the accomplishment of the competencies and learning objectives of the Field Experience (see p. 11)
- Includes a final written report and a 500-word (or less) abstract prepared by the student assessing the activities and the attainment of the learning objectives (see p. 10)
- Includes any additional departmental requirements, such as a poster, presentation, or seminar

Field Experience Competencies

Additionally, the FE for both the MPH and the DrPH are learning experiences that vary in the coverage and emphasis of the competencies due to the interests of the respective student. The student chooses the competencies on which to focus from the list of Overarching Competencies for the degree and/or the Concentration Competencies for his/her respective concentration. The competencies covered are stated on the forms completed prior to the FE and mastery of stated competencies is measured by completion of the evaluation forms by the advisor and preceptor comments after the FE is completed.

The Handbooks for the Field Experience (both MPH and DrPH) which include templates for the FEs are located in the Resource File. The following responses are taken directly from the Handbook for

the MPH FE. **The DrPH FE concentrates more on leadership skills in the Field Experience, but site selection and other aspects of the process are the same.**

– selection of sites

The SPH students participate in a number of on campus and off campus Field Experience activities with well qualified preceptors. Below is a listing of on and off campus sites and their Site Preceptors the school has collaborated with for students' Field Experiences.

Students work with their Academic Advisor to determine a site in accordance with their public health interests and their availability. (see pp. 17-18 of the Handbook for the MPH FE)

The following list of potential sites is detailed in the Handbook for the Field Experience:

LOCAL GOVERNMENTAL AGENCIES

The New York City Department of Health and Mental Hygiene offers highly structured Field Experiences on a Part-time basis during the fall and spring semesters and on a Full- or Part-time basis during the Summer through the Health Research Training Program. This program is highly competitive, but welcomes applications from our students. Please consult with Dr. Karen Benker for tips on submitting a winning application.

For more information, visit the website: <http://www.nyc.gov/html/doh/html/hrtp/hrtp.shtml>. Note that the deadlines for application are several months before each semester begins.

The New York City Department for the Aging has many innovative projects that welcome volunteers and interns.

The NYC Mayor's Office of Adult Education offers a competitive unpaid Summer Health Literacy Fellowship for medical students. Read more about the program at its website: <http://www.nyc.gov/html/adulted/html/health/fellowship.shtml>.

The New York State Department of Health Task Force on Life and the Law develops policy on emerging issues such as the withholding and withdrawal of life-sustaining treatment, assisted suicide and euthanasia, assisted reproductive technologies, and organ and tissue transplantation. The program actively encourages inquiries about internships. Read more about their work at <http://www.health.state.ny.us/nysdoh/taskfce/>.

The U.S. Centers for Medicare and Medicaid, Region II, in New York City welcomes inquiries about student placements. Speak to Dr. Benker to learn more.

LOCAL SITES CONCERNED WITH GLOBAL HEALTH

The United Nations Headquarters in Manhattan welcomes student interns. Current opportunities are available at this website: <http://www.un.org/Depts/OHRM/sds/internsh/htm/internship.htm>. The UN also offers placements in other countries, including Thailand, the Republic of Korea, and Indonesia. Check the available listings on-line: http://www.unescap.org/jobs/internships/intern_divisions.asp.

Doctors Without Borders offers paid office internships at their NYC site. For more information, consult the website: <http://doctorswithoutborders.org/work/office/internships.cfm>.

The Bellevue/NYU Program for Survivors of Torture offers training opportunities for selected health professionals and volunteer opportunities for English teachers and client chaperones.
<http://www.survivorsoftorture.org/who-we-are>.

OTHER RESOURCES

The SPH has strong contacts with local community-based organizations dealing with immigrant health, maternal and child health, domestic violence, seniors, HIV/AIDS, substance abuse, and other important issues. The program also has ongoing collaborations with the Arthur Ashe Institute for Urban Health <http://www.arthurasheinstitute.org/> for service and research projects.

A list of possible sites for students interested in occupational health and safety is available from Dr. Paul Landsbergis.

Other sites suggested by students may be approved based on a mutual understanding between the SPH and the site.

– methods for approving preceptors

Preceptors sign-off on a mutual agreement between the student and the student's advisor. Additionally, attached is a Memorandum of Understanding (MOU) in which Field Experience sites complete in order to recruit or enroll MPH/DrPH students. (see pp. 15-19 of the Handbook for the MPH FE)

The Handbooks for the Field Experience (both MPH and DrPH) which include templates for the FEs are located in the Resource File. The following responses are taken directly from the Handbook for the MPH FE. **The DrPH FE concentrates more on leadership skills in the Field Experience, but site selection, methods of approving preceptors and other aspects of the process are the same.**

The Site Preceptor and the agency agree to:

- A. Aid the student in outlining the Field Experience objectives before beginning.
(The statement of competencies and learning objectives is attached to this form.)
- B. Explain the structure and function of the agency.
- C. Help the student plan a specific program
- D. Invite the student to agency, interagency, and community meetings as appropriate.
- E. Supervise the student.
- F. Provide a model of professional work habits and attitudes.
- G. Evaluate student performance on forms provided.

The student agrees to:

- A. Acquire as much information about the agency as possible before beginning the placement.
- B. Determine, with the agreement of the Site Preceptor and SPH Faculty Advisor, the competencies and learning objectives of the Field Experience.
- C. Be responsible for knowing all provisions of the Field Experience expectations and agreements.
- D. Provide the agency with a personal resume.
- E. Consider him- or herself an integral part of the mentoring agency and to follow the rules and regulations of the agency.
- F. Maintain complete client confidentiality.
- G. Prepare thoroughly for each task related to the placement.

- H. Exhibit professionalism in all aspects of the Field Experience, including attendance, appointments, meetings, and discussions with supervisors and others.
- I. Consult with the Site Preceptor when unsure of appropriate measures needed.
- J. Complete about 200 hours of contact time in the agency and keep a log of activities. In some cases, the minimum 200-hour contact time may be completed in more than one agency if the Faculty Advisor approves an integrated Field Experience plan.
- K. Complete and forward to the Faculty Advisor all documentation by deadlines.

The SPH Faculty Advisor agrees to:

- A. Assist the student in arranging the Field Experience.
- B. Prepare the student for the Field Experience.
- C. Provide advice and guidance to the student through visits, telephone contact, or email, and in response to reports, as appropriate.
- D. Call the student in for a conference whenever a potential problem appears to have arisen.
- E. Provide academic resources as needed.
- F. Remove the student if the SPH Faculty Advisor deems that either the student or the setting is inappropriate.
- G. Provide orientation and guidance to the Site Preceptor. Maintain communication with the Site Preceptor for guidance purposes, as appropriate (see p. 18 of the Handbook for the MPH FE)

– opportunities for orientation and support for preceptors

The Faculty Advisor and the Site Preceptor (or a designee) are expected to keep in regular contact via telephone or e-mail to monitor the progress of the student and to make any changes to the proposed arrangement that may become necessary as the FE proceeds. In extreme circumstances (an unsafe work environment), the Faculty Advisor has the right and the obligation to remove a student from a site. (see pp. 17-18 of the Handbook for the MPH FE)

The Handbooks for the Field Experience (both MPH and DrPH) which include templates for the FEs are located in the Resource File. The following responses are taken directly from the Handbook for the MPH FE. **The DrPH FE concentrates more on leadership skills in the Field Experience, but site selection and other aspects of the process are the same.**

– approaches for faculty supervision of students

Students are expected to work with their Faculty Advisor in each phase of the Field Experience.

THE FACULTY ADVISOR

The Faculty Advisor has the last word on your Field Experience so establish communication early on. The Faculty Advisor is usually the person most familiar with your particular academic program, individual learning needs, and future career opportunities. Therefore the Faculty Advisor's involvement starts at the beginning of the student's search and throughout the process.

THE FIELD EXPERIENCE COORDINATOR

Dr. Karen Benker (Room 4-322) maintains an active network of community groups and agencies that have worked successfully with our students or have expressed interest in hosting students. She is available to work with you as you explore possible sites, develop your learning plan, and to prepare the necessary paperwork for written approvals. (see p. 6 of the Handbook for the MPH FE).

Ms. Arlene Mbonu is the Field Experience Administrator and helps guide students through the process of completing the Field Experience itself. (see p. 6 of the Handbook for the MPH FE)

Additionally, all students registered for the Field Experience are also enrolled in a PRIME Course site online called PUBH6500 Field Experience, where FE documentation is uploaded for tracking purposes. Through these online course interface, students submit weekly activity logs, midway reports, final reports, diversity essays, etc. and Faculty Advisors are able to track students' progress and review student submittals via various drop-boxes online.

– means of evaluating student performance

Students' performance in the Field Experience is evaluated based on the following:

- 1) Weekly Activity Logs
- 2) Professional Module and Quiz
- 3) Progress Reports
- 4) Evaluation from the Preceptor
- 5) Final Field Experience Report with Abstract
(see pp. 1 & 10 of the Handbook for the MPH FE)

The Handbooks for the Field Experience (both MPH and DrPH) which include templates for the FEs are located in the Resource File. The following responses are taken directly from the Handbook for the MPH FE. **The DrPH FE concentrates more on leadership skills in the Field Experience, but site selection, methods of evaluating student performance and other aspects of the process are the same.**

– means of evaluating practice placement sites and preceptor qualifications

Placement sites and Site Preceptors' Qualifications are evaluated based on their self-reported agreement and commitment listed below to:

- Designate a supervisor with training or experience in a field related to public health
- Provide an experience related to the area(s) checked:
 - ☐ Community health sciences
 - ☐ Health policy and management
 - ☐ Epidemiology
 - ☐ Environmental/occupational health
 - ☐ Biostatistics
- To report promptly any problems with student performance or with the placement agreement
- To complete an end-of-placement evaluation form
(see pp. 15-19 of the Handbook for the MPH FE)

The Handbooks for the Field Experience (both MPH and DrPH) which include templates for the FEs are located in the Resource File. The following responses are taken directly from the Handbook for the MPH FE. **The DrPH FE concentrates more on leadership skills in the Field Experience, but site selection and other aspects of the process are the same.**

– criteria for waiving, altering or reducing the experience, if applicable

The Field Experience requirement may be waived for students who meet **all four of the criteria** below:

1. At least 3 years of documented prior work experience in a field that is closely related to the academic objectives of the student's degree program
2. Employment that results in possessing the set of skills commensurate with those intended to be achieved through the Field Experience

3. Documentation that the student possesses those skills
4. Approval of the waiver request by the Faculty Advisor and Department Chair
(see pp. 11-12 of the Handbook for the MPH FE)

The Faculty Advisor and the Departmental Chair are responsible for approving waivers of the Practical Field Experience. A student seeking a waiver must submit extensive documentation of their previous public health employment/experience history. Then the Faculty Advisor and the Departmental Chair carefully examine the student's employment history and job descriptions which provide information about the public health content which matches competencies associated with the Practical Field Experience.

For those entering students with in-depth public health experience of at least 2 years (for example, returning Peace Corps volunteers), the required number of hours in the Field Experience will be considered on a case-by-case basis.

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

Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences For The Past Three Academic Years		
Academic Year 2012-2013		
TITLE	SITE/PARTNER	PRECEPTOR
Analysis of Emergency Medical Service Dispatchers and Providers in Emergency Room	Kings County Hospital, Department of Emergency Medicine	Ethan Brandler, MD Clinical Assistant Professor of Emergency Medicine and Internal Medicine Director of Performance Improvement
Diabetes Prevention Programs Among Latino Immigrants	Downstate Medical Center School of Public Health	Aimee Afable, PhD, MPH Assistant Professor, Department of Community Health Sciences, School of Public Health
Diet and Exercise Interventions for Overweight and Obese Veterans	Brooklyn Veteran's Administration Medical Center	Morana Poljak-Varenika, MD Internist
Education on Water Supply, Wastewater Treatment, and Green Infrastructure in New York City	New York City Department of Environmental Protection	Kim Estes-Fradis Deputy Director of Education and Outreach
Evaluation of Educational Resources Aimed to Combat Pre-Diabetes in Teens in East Harlem	Mount Sinai Medical Center, Department of Health Evidence and Policy	Euny Lee, MS Associate Director of Research and Evaluation
Evaluation of Interventions to Improve Blood Pressure Control of Veterans	Veterans Affairs, New York Harbor Healthcare System (VA NYHHS)	Colleen Gillespie, PhD, DPhil. Assistant Professor, Director of Evaluation Division of Education Quality and Analytics
Evaluation of the Beginning Signs of Cognitive Impairment in the Elderly	Brooklyn College, City University of New York (CUNY)	Laura Rabin, PhD Associate Professor of Psychology
Implement a Diabetes and Self-Management Program	Woodhull Medical and Mental Health Center	Ronny Cohen, MD Cardiologist and Internist
Mentoring High School Students for the Kings Against Violence Initiative (KAVI)	Kings Against Violence Initiative (KAVI)	Robert Gore, MD Executive Director, Kings Against Violence Initiative

**Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences
For The Past Three Academic Years**

Academic Year 2012-2013		
TITLE	SITE/PARTNER	PRECEPTOR
Mentoring High School Students in Health Sciences	Arthur Ashe Institute for Urban Health The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program	Kristine Paulsson Coordinator of The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program
Organize and Support Community Health Fairs in Brooklyn	Downstate Medical Center Center for Community Health Promotion and Wellness	Betty Jung, BSN Director of the Center for Community Health Promotion and Wellness
Palliative Care Needs Assessment in East and Central Harlem	Brookdale Hospital Center for Healthy Aging	Laura Rabin, PhD Associate Professor of Psychology
Programmatic Support for Work on Transportation to School Project to Inform Policy	New York City Department of Health and Mental Hygiene (NYC DOHMH)	Jennifer Pierre, DrPH, MPH New York City Research Scientist
Programmatic Support of Home-based Healthcare Services in Tzaneen, South Africa	ChoiCeTrust South Africa	Nikki Stuart-Thompson, MS Resource Development Manager
Quality Assessment of Health Information Technology	Amkai Solutions (Medical/Surgical Information Company)	Matt Lipton, MA Director of Implementation Services
Quality Assessment on Transgendered Women of Color	Health Education Alternatives for Teens (HEAT) Program	Jeffrey Birnbaum, MD, MPH Associate Professor, Department of Pediatrics Associate Professor, School of Public Health
Strengthening Collaboration Among Community Organizations in Harlem	William J. Clinton Foundation	Natrina Roper, MA Intern Program Manager The Clinton Foundation
Surveillance of Anaphylaxis Among School Going Children	New York City Department of Health and Mental Hygiene (NYC DOHMH), Queens, New York	Caroline Volel, MD, MPH, Assistant Professor of Population and Family Health, Assistant Clinical Professor of Pediatrics at the Columbia University Medical Center, College of Physicians and Surgeons
Academic Year 2013-2014		
TITLE	SITE/PARTNER	PRECEPTOR
A Meta-Analysis on Randomized Control Trials (RCTS) for Use in Ketamine in Depression for Supporting Research Study	Hofstra-North Shore Hospital, School of Medicine/ Psychiatry	Christoph Correll, MD Professor of Psychiatry and Molecular Medicine
A Study on Hepatitis C in Intravenous Drug Users	Washington Heights Corner Project	Juan David Gastolomendo, LMSW, MPH Program Director
Analysis of Planned Parenthood Advocacy Data	Planned Parenthood Federation of America	Claire Tebbets, MPH Senior Program Learning Officer, Planned Parenthood Federation of America

**Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences
For The Past Three Academic Years (continued)**

Academic Year 2013-2014		
TITLE	SITE/PARTNER	PRECEPTOR
Develop Registries of Patients with Uncontrolled Hypertension	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Evaluation of Behavioral Factors that Hinder Cancer Screening Compliance	Clinical Directors Network	Andrea Cassells, MPH Director of Clinical Affairs and Carrie Goodman, MPH Project/Recruitment Coordinator
Evaluation of Program Participation on Reducing Obesity and Metabolic Syndrome	Downstate Medical Center Live Light, Live Right (LLLR) Program	Aimee Afable, PhD, MPH Assistant Professor, Department of Community Health Sciences
Evaluation of Syringe Exchange Programs in New York Center	Boom! (Beyond Our Original Message) Health/Harm Reduction Center	Maria Caban, PhD Director, Program Evaluation & Research
Female Empowerment and Violence Prevention Interventions	Kings Against Violence Initiative Program (KAVI)	Robert Gore, MD Executive Director Kings Against Violence Initiative
Mentoring High School Students in Health Sciences	The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program	Kristine Paulsson Coordinator of The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program
Needs Assessment on Health Care Infrastructure in the North East Region of Haiti	EMEDEx International (Emergency Health Care Solutions Company)	Christina Bloem, MD Fellowship Director, International Emergency Medicine
Observational Study on Pneumonia Patients Admitted to Interfaith Medical Center	Interfaith Medical Center, Department of Pulmonary Medicine	Joseph Quist, MBBS, MD Internist Interfaith Medical Center Intensive Care Unit
Organizing Sex-Trafficking Conference for Downstate Medical Center School of Public Health Students	Downstate Medical Center School of Public Health	Karen Benker, MD, MPH Associate Professor and Interim Chair Department of Health Policy and Management Associate Dean for Community Public Health Affairs
Organizing Wellness Events on HIV/AIDS Prevention	Arthur Ashe Institute for Urban Health	Shonnette Campbell Community Empowerment/Research Assistant
Predictors of Adverse Pregnancy Outcomes in Inactive Lupus Patients	Hospital for Special Surgery, Rheumatology Department	Jill Buyon, MD Professor and Associate Director, Division of Rheumatology, Department of Medicine (Rheumatology), Hospital for Joint Diseases

Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences For The Past Three Academic Years (continued)

Academic Year 2013-2014

TITLE	SITE/PARTNER	PRECEPTOR
Programmatic Support for Home-based Healthcare Services in Abhekwana Village, South Africa	ChoiCeTrust, South Africa	Nikki Stuart-Thompson, MS Resource Development Manager
Programmatic Support of Home-based Healthcare Services in Tzaneen, South Africa	ChoiCeTrust South Africa	Nikki Stuart-Thompson, MS Resource Development Manager
Qualitative Study on Diabetic Patients in Hyderabad, India	Diabetic Clinic (Mediciti/Osmanla Hospital) India	Rakesh Sahay, MD Consultant Endocrinologist Mediciti Hospital Hyderabad Area, India
Quality Assessment of Confidentiality Protocols for Handling The New York City Health and Nutrition Examination Survey (NYC HANES) Participant Data	New York City Department of Health and Mental Hygiene (NYC DOHMH)	Elisabeth Snell, MPH Program Manager, New York City Department of Health and Mental Hygiene
Quality Assessment of Documents Surrounding the Decision to Close Long Island College Hospital (LICH)	Downstate Medical Center, Regional Office	Kevin Omara, JD, RN Senior Managing Counsel
Quality Assessment of Food Pantry Established to Address Food Insecurity Concerns	Stony Brook University	Casey McGloin, MPH Project Staff Assistant
Quality Assessment of Pap Testing Referral and Completion Rates	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Quality Assessment of Patient Re-Admission into University Hospital of Brooklyn	Downstate Medical Center, Department of Risk Management	Rachel Goldberg, JD Director of Risk Management
Quality Assessment on Barriers to Women's Effective Contraceptive Use	New York City Department of Health and Mental Hygiene (NYC DOHMH)	Amita Toprani, MD, MPH Medical Director Bureau of Environmental Disease & Injury Prevention
Quality Assessment on Patient Use of Mobile Devices	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Quality Improvement in Promoting Cervical Cancer Screening	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Quality Improvement Programs with Silvercrest Program Staff	The Silvercrest Center for Nursing and Rehabilitation	Natasha Elie-Louissaint, MA Vice President and Associate Administrator
Research Effectiveness of Ketamine with Morphine for Pain Management	Maimonides Medical Center, Department of Emergency Medicine	Antonios Likourezos, MA, MPH Research Associate, Division of Research
Research Support of Maternal Exposures to Endocrine Disrupting Compounds	Downstate Medical Center School of Public Health	Laura Geer, PhD, MHS Associate Professor Department of Environmental and Occupational Health Sciences, School of Public Health

Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences For The Past Three Academic Years (continued)		
Academic Year 2013-2014		
TITLE	SITE/PARTNER	PRECEPTOR
Risk Assessment of Legionellosis in Building Water System Engineering and Infection Control Practices at Downstate Medical Center	Downstate Medical Center Infection Control	George Allen, PhD, RN Director of Infection Control
Study of Periodontal Disease and Risk of Gastric and Duodenal Ulcer In Male Health Professionals	Downstate Medical Center, Department of Orthopedic Surgery	Qais Nazriri, MD Orthopedic Surgery Resident
Study on Pesticide Contaminants in Well Water	Stamford, Connecticut Health Department	Anne Fountain, MPH Director of Health and Social Services at City of Stamford, Connecticut
Transnational Study of Migration and Diabetes Risk in Filipino Immigrants	Downstate Medical Center School of Public Health	Aimee Afable, PhD, MPH Assistant Professor, Department of Community Health Sciences
Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Interpreter Services within the Emergency Department of New York Hospital Medical Center of Queens	New York Hospital Medical Center of Queens	Nidhi Garg, MD Emergency Medicine New York Hospital Medical Center of Queens
Mentoring High School Students in Health Sciences	New York Academy of Sciences/STEM Mentoring	Kristine Paulsson Coordinator of The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program
Addressing Health Disparities through Community-Based Participatory Research: Developing Research Protocols with the Brooklyn Health Disparities Center	Brooklyn Health Disparities Center	Nicole Primus-Henry, MPA, CAPM Community Outreach Program Manager
Analysis of Bacteria Samples and the Potential Threat to Human Life in New City	Weill Cornell Medical College	Ebrahim Afshinnekoo Project Leader of Pathomap Weill Cornell Medical College
Analytic Epidemiologic Approach to Studies in the Field of Orthopaedic Surgery	Downstate Medical Center Department of Orthopaedic Surgery	Bhaveen Kapadia, MD Downstate Medical Center Department of Orthopaedic Surgery
Analyzing Procedural Learning Curves	Downstate Medical Center, School Of Public Health	Usha Govindarajulu, PhD, MS, Assistant Professor Department of Epidemiology and Biostatistics, School Of Public Health
Assessing the Role of Device Usage in the Decline of Carbapenem-resistant Klebsiella Pneumonia in Two New York City Hospitals	Downstate Medical Center, Division of Infectious Disease	John Quale, MD Professor of Medicine Infectious Disease Specialist
Barbershop Talk with Brothers and Ready to Respond: HIV Prevention Initiatives in Brooklyn, NY	Arthur Ashe Institute for Urban Health, Barbershop Talk with Brothers Project	Yolene Gousse, DrPH, MPH Director of Community Based Research Special Treatment and Research (STAR) Program DMC

Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences For The Past Three Academic Years (continued)		
Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Biosurveillance of New York City Subway System	Downstate Medical Center School of Public Health Department of Epidemiology and Biostatistics	Michael Walsh, PhD, MPH Assistant Professor Department of Epidemiology and Biostatistics
Community Health Resources and Needs Assessment of Asian Americans in New York Metropolitan Areas	New York University Center of the Study of Asian American Health	Charity Hung Project Coordinator for Community Health Resources and Needs Assessment
Community-based and Hospital-wide Stroke Education Outreach Program	Downstate Medical Center School of Public Health Department of Epidemiology and Biostatistics	Michael A. Joseph, PhD, MPH Interim Chair, Department of Environmental and Occupational Health Sciences Assistant Professor, Department of Epidemiology and Biostatistics
Distributed and Explained Informed Consent Documents to Parents of Pediatric Patients	Downstate Medical Center, Otolaryngology Department	Nira Goldstein, MD Professor of Otolaryngology Downstate Medical Center, Otolaryngology Department
Evaluating the Classification of Congenital Syphilis	New York City Department Of Health And Mental Hygiene Bureau of Sexual Transmitted Disease Control, Surveillance Unit	Robin Hennessy, MPH Surveillance Coordinator
Evaluation of Program Participation on Reducing Obesity and Metabolic Syndrome	Downstate Medical Center, Live Light, Live Right (LLLR) Program	Sarita Dhuper, MD Attending Pediatric Cardiology and Acting Chief of Pediatric Cardiology, DMC
Exploring Factors that Influence Infant Feeding Among Central Brooklyn Mothers	Brooklyn District Public Health Office, New York City Department of Health and Mental Hygiene (NYC DOHMH)	Jennifer Pierre, DrPH, MPH New York City Research Scientist
Family Planning Capacity Building Program Implementation and Evaluation at Bedford Stuyvesant Family Health Center	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Geriatric Mental Health Care for the Most Vulnerable of Those Impacted by Hurricane Sandy	Sandy Mobilization, Assessment, Referral and Treatment-Mental Health (SMART-MH)	Jacqueline Berman, PhD Director of Research, New York City Department for the Aging
Increasing Patient Engagement of the Electronic Health Records in a Primary Care Setting	Bedford-Stuyvesant Family Health Center	Pascale Kersaint, MD Chief Medical Officer of the Bedford-Stuyvesant Family Health Center
Mentoring High School Students in Health Sciences	The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program	Kristine Paulsson Coordinator of The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program

Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences For The Past Three Academic Years (continued)		
Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Mentoring High School Students in Health Sciences	The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program	Kristine Paulsson Coordinator of The New York Academy of Sciences/STEM (Science, Technology, Engineering, Mathematics) Mentoring Program
Organize and Support Community Health Fairs in Brooklyn	Downstate Medical Center, Center for Community Health Promotion and Wellness	Betty Jung, BSN Director of the Center for Community Health Promotion and Wellness
Patient Recruitment of Non-Invasive Prenatal Genetic Screening	Montefiore Medical Center Department of Obstetrics Gynecology and Women's Health	Melissa Hudson Clinical Research Coordinator
Patient Scheduling: Fixing the Problem of Patient Wait Times	Hispanic-Serving Health Professions Summer Fellowship	Odalys Michelle Crespo, MA Program Manager
Population Health Management	Callen-Lorde Community Health Center	Anthony P. Vavasis, MD, AAHIVS Director of Medicine Callen-Lorde Community Health Center
Positive Affect Influencing Adherence of HIV Positive Individuals	Downstate Medical Center, Women's Interagency HIV Study (WIHS)	Tracey E. Wilson, PhD Professor, Department of Community Health Sciences, SCHOOL OF PUBLIC HEALTH
Program Evaluation of Early Support for Lifelong Success and Buddy Program Projects	The Family Center	Casey Castro, MPH Research Coordinator
Program Evaluation of Participants' Health Benefits Post Cook Shop Attendance	Sirovich Senior Center	Nina Padmore, MPH, MS, RN Community Health Nurse
Program Planning and Evaluation of School	Sisulu-Walker Charter School of Harlem	Shamik L. Mitchell, JD Director of Operations Sisulu-Walker Charter School of Harlem
Programmatic Support of Clinical Trial on Drug Effects on Glucose Levels	Downstate Medical Center, Department of Endocrinology Diabetes Center	Necole Brown Recruitment Coordinator
Programmatic Support of Grant Proposals for Kenya on Quality Improvements of Maternity Waiting Rooms	Health Right International	Sara Hodgdon Program Director at Health Right International
Programmatic Support of Home-based Healthcare Services in Tzaneen, South Africa	ChoiCeTrust South Africa	Nikki Stuart-Thompson, MS Resource Development Manager
Programmatic Support of Strategy Team of the Primary Care Information Project	Downstate Medical Center, Special Treatment and Research (STAR) Health Center	Jameela, Yusuff, MD, MPH, FACP Special Treatment and Research (STAR) Health Center Medical Director

**Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences
For The Past Three Academic Years (continued)**

Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Programmatic Support on Reducing Obesity and Metabolic Syndrome	Downstate Medical Center Live Light, Live Right (LLLR) Program	Sarita Dhuper, MD Attending Pediatric Cardiology Acting Chief of Pediatric Cardiology at Downstate Medical Center
Quality Assessment and Improvement of Patients Obtaining and Renewing Affinity's Health Insurance Coverage	Affinity Health Plan	Brigid Buchheit Carney Vice President Affinity Health Plan
Quality Improvement In Public Screening For Mammograms, Pap Smears, Colonoscopy, and Smoking Cessation	Downstate Medical Center Special Treatment and Research (STAR) Health Center	Jameela, Yusuff, MD, MPH, FACP Special Treatment and Research (STAR) Health Center Medical Director
Quality Improvement of Patient Care in Health Settings	Bedford-Stuyvesant Family Health Center	Nigel Fernandez Data Analyst Bedford Stuyvesant Family Health Center
Quality Improvement of Patient Care and Patient Hospital Experience	New York Community Hospital	Una Morrissey, RN Senior Vice President of Operations and Chief Operating Officer
Quality Improvement of Patient Nutritional Services	Downstate Medical Center, Quality Management Performance Improvement Department	Rachel Goldberg, JD Director of Risk Management
Recruit and Assist in Retention Activities of Barbershop Talk with Brothers Project	Arthur Ashe Institute for Urban Health, Barbershop Talk with Brothers Project	Yolene Gousse, DrPH, MPH Director of Community Based Research Special Treatment and Research (STAR) Program Downstate Medical Center
Recruitment of Patients for Glycemia Reduction Approaches in Diabetes (GRADE) Study	Downstate Medical Center, Endocrinology Department, Diabetes Center	Necole Brown Recruitment Coordinator
Recruitment of Patients for Obstructive Sleep Apnea Study	Arthur Ashe Institute for Urban Health	Nicole Primus-Henry, MPA, CAPM Community Outreach Program Manager
Reducing Preventable Re-Admissions	Downstate Medical Center, Quality Management Department	Rachel Goldberg, JD Director of Risk Management
Reducing Rates of <i>Clostridium Difficile</i> in the Neurosurgery Intensive Care Unit at Mount Sinai Hospital	Mount Sinai Hospital Neurocritical Care Unit (ICU)	Errol Gordon, MD Assistant Professor Mount Sinai Hospital Neurology Department
Research on the Commercial Sexual Exploitation of Children	Girls Educational and Mentoring Services (GEMS)	Deanna Green Training Director Girls Educational and Mentoring Services (GEMS)

**Table 2.4b.1: Listing of Projects, Agencies and Preceptors For MPH Field Experiences
For The Past Three Academic Years (continued)**

Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Retrospective Chart Review of Clinical Factors, Disease Outcomes and Hematologic Toxicities among Anal Cancer Patients Treated with Chemotherapy and Radiation	Memorial Sloan Kettering Cancer Center	Karyn Goodman, MD Memorial Sloan Kettering Cancer Center
Systolic Blood Pressure Intervention Trial	Downstate Medical Center Department of Endocrinology	MaryAnn Banerji, MD, FACP Department of Endocrinology Program Chief
The Association of Asthma and Depression in United States	Downstate Medical Center, School of Public Health	Michael Szarek, PhD, MS Interim Associate Dean for Research Administration Chair and Professor Department of Epidemiology and Biostatistics
The Characterization of HIV Stigma and Discrimination and its Impact on Health	San Fernando General Hospital, Trinidad & Tobago	Jeffrey Edwards, MD San Fernando General Hospital, Trinidad & Tobago
The Relationship Between HIV Status in Women and Risk Factors for Coronary Artery Disease	Downstate Medical Center, School of Public Health	Usha Govindarajulu, PhD, MS Assistant Professor Department of Epidemiology and Biostatistics
Violence Prevention and Intervention Among Urban Youth	Kings Against Violence Initiative (KAVI) Program, Women's Division	Sharena Soutar-Frith, MPH Kings Against Violence Initiative (KAVI) Program, Women's Division
Violence Prevention and Intervention Among Urban Youth	Kings Against Violence Initiative (KAVI) Program, Women's Division	Elizabeth Ige Program Director Kings Against Violence Initiative (KAVI)
Woman Empowerment and Humanitarian Interventions for Peace and Security	UN Women (United Nations Entity for Gender Equality and the Empowerment of Women)	Mame Selbee Diouf External Relations Specialist UNIFEM, United Nations Development Fund for Women (WARO), University of Kansas

**Table 2.4b.2: Listing of Projects, Agencies and Preceptors For DrPH Field Experiences
For The Past Three Academic Years**

Academic Year 2012-2013		
TITLE	SITE/PARTNER	PRECEPTOR
Creation of a Dashboard Profile of Current AIDS Client Needs	AIDS Service Center New York City	Cori Madrid, PhD Associate Director, Planning & Evaluation at AIDS Service Center NYC
Education on Safe Patient Handling	1199SEIU United Healthcare Workers East	Steven Shrag Occupational Health & Safety Program Coordinator, 1199SEIU United Healthcare Workers East Health and Safety Program
Academic Year 2013-2014		
TITLE	SITE/PARTNER	PRECEPTOR
Communication and the Beginning of the Dentistry United to Extinguish Tobacco Project	New York University School of Medicine, Population Health Department	Donna Shelley, MD, MPH Clinical Associate Professor Department of Population Health New York University School of Medicine
Identified Factors Affecting Bicycling Safety Within Community District 14	Community Board 14 Brooklyn, New York	Alvin Berk, PhD Chair, Brooklyn Community Board District 14
Academic Year 2014-2015		
TITLE	SITE/PARTNER	PRECEPTOR
Creating a Center for Excellence Around Hepatitis C Care and Treatment	Harlem United Community Health Center	Lois Bookhardt-Murray, MD, AAHIVS, Chief Medical Officer Harlem United
Creating Financial and Business Plans for Health Programs and Services	The Human Impacts Institute	Tara DePorte, MA Founder and Executive Director of The Human Impacts Institute
Engaging Key Officials within the United States Environmental Protection Agency to Promote Environmental Health Policy, Advocacy, and Administrative Change	University of California San Francisco Program on Reproductive	Marj Plumb, DrPH, MNA Instructor University of California San Francisco
Evaluating the Classification of Congenital Syphilis	New York City Department Of Health And Mental Hygiene Bureau of Sexual Transmitted Disease Control, Surveillance Unit	Robin Hennessy, MPH Surveillance Coordinator
Evidence-Based Practices in Pediatric Care Settings	New York University School of Medicine	Keng-Yen Huang, PhD, MPH, CPH is an Associate Professor of Population Health and Child and Adolescent Psychiatry
Hepatitis C Virus Testing Program	Downstate Medical Center Infectious Disease Division	Michael Augenbraun, MD, FACP Chief, Division of Infectious Diseases and Professor Department of Medicine
Link Between Domestic Violence and Chronic Health	Violence Intervention Program (VIP)	Lillian Robles, MS Director of Development
Program Evaluation of Asthma Screening	Downstate Medical Center Center for Community Health Promotion and Wellness	Betty Jung, BSN Director of the Center for Community Health Promotion and Wellness

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

For each of the last three (3) years, there was no student (0) who received a waiver of the practice experience

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

N/A.

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

This criterion is met.

Strengths:

The SPH offers a wide variety of cross-cultural practical Field Experience sites for students to complete their FE. The SPH linkages in the community are extensive throughout Brooklyn, the New York Metropolitan Area and abroad. These linkages provide students with many options for a rich and rewarding Field Experience. Students embarking on the FE are expected to master public health competencies during their experiences. This mastery is evaluated through an essay and abstract prepared by the student, a midway progress report signed by the Preceptor and the Faculty Advisor, a final student evaluation by the Site Preceptor and the Faculty Advisor, and a student self-assessment of the accomplishments achieved during the FE.

Weaknesses:

None

Plans:

To continue to increase the number of sites for students to choose from so that they have an even more varied choice of places to experience their practical Field Experience.

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.

Required Documentation. The self-study document should include the following:

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

MPH Degree Culminating Experience

All MPH degree candidates must complete a two (2) credit Culminating Experience. All MPH students must complete a Culminating Experience within their chosen concentration. Prerequisites for the Culminating Experience include all core and concentration core courses.

The Culminating Experience for the MPH Degree is as follows:

The Culminating Experience allows the student to demonstrate the ability to integrate knowledge and skills in a Final Project similar to some aspect of practice as a public health professional. The faculty uses the Culminating Experience to judge whether the student demonstrates proficiency in the competencies required for public health practice on a master's level. For the Culminating Experience, the degree candidate must write a paper and give an oral presentation demonstrating mastery of core and (his/her) concentration competencies. Both the paper and the oral presentation are evaluated by faculty to ensure mastery of all the core competencies and all the student's respective concentration competencies. Evaluation forms for both the paper and the oral presentation are located in the Culminating Experience Guidelines in the Resource File.

The following information regarding the CE is detailed in the Culminating Experience Guidelines Adopted by Faculty: June 2009, Revised: May 2014, Revised: May 2015 located in the Resource File.

Every student must complete a satisfactory Culminating Experience to earn the MPH degree. The Culminating Experience builds upon the practical Field Experience and requires a student to integrate knowledge acquired in the classroom and in the field.

The student must write an analytic paper on a public health topic or a topic related to the student's Field Experience, and deliver an oral presentation for faculty and other attendees.

The student must apply skills from across the curriculum and demonstrate integration of knowledge in the five core areas of public health (Biostatistics, Community Health Sciences, Environmental Health Sciences, Epidemiology, and, Health Policy and Management). After acceptance of the final paper by the departmental faculty, the student makes an oral presentation on his or her work during which Faculty question him or her to assess mastery of core MPH competencies.

Culminating Experience and Dissertation

The Culminating Experience provides students with the opportunity to demonstrate their ability to integrate and apply information from each of the five core public health disciplines and the Overarching Competencies assigned to the student's degree. For the MPH Degree, the student is required to write a paper or conduct a project, and prepare and deliver an oral presentation which demonstrates integration of the MPH Overarching Competencies. For the DrPH Degree, the student is required to prepare a proposal and a dissertation with Oral Defenses of both which demonstrate the student's mastery of, and integration of the DrPH core competencies.

DrPH Degree Dissertation

All DrPH degree candidates must complete a twelve (12) credit dissertation within their chosen concentration as their culminating experience. Prerequisites for the Dissertation include all core and concentration core courses, the Field Experience and a passing grade on the Qualifying Examination.

The following information is detailed in the SUNY Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Revised: February 26, 2014, Revised April 14, 2015 (Resource File)

A. Overview

The Dissertation represents the culmination of the doctoral student's progress through the Doctor of Public Health (DrPH) program. The purpose of the DrPH Dissertation is to demonstrate that the student:

- has a mastery of a broad range of public health competencies
- understands the diverse aspects of the field of study and his or her particular area of focus (within that field);
- is able to appropriately frame his or her study question(s) and specify appropriate tasks to answer the question(s);
- can carry out the tasks necessary to complete the study;
- produces a final paper or papers worthy of publication.

The dissertation must represent the original thinking and analysis of the student. It does not necessarily require the collection of new data; but it must demonstrate that the doctoral candidate is capable of independent scientific analysis at an advanced professional level. SUNY Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Revised: February 26, 2014, Revised April 14, 2015, p. 3. (Resource File)

C. General Content

The Dissertation must take one of two forms: 1) A single, summative document that has publishable potential, 2) Two (2) scientific articles prepared for peer-reviewed journal publication, as part of a larger document. It is highly recommended that the student submit these articles to scholarly journals for publication, but successful completion of the Dissertation will not be contingent upon the acceptance decisions of the journal(s) in question. Each of the two papers should stand on their own merit, and, in addition, the papers together should embody a recognizable unifying theme. An integrating document (separate from the two individual papers) should be prepared to present and critically review the unifying theme.

Most DrPH Dissertations will include, but will not necessarily be limited to, the following general content:

- A statement of the public health project to be addressed
- A critical exhaustive review of the scientific literature relevant to that project
- An analysis of the social, economic, political, and/or cultural context for the project
- A description of the analytic methods and data sources used in making recommendations for the solution of the problem the project addresses
- The analytic results and their implications for the problem under study

- A strategy for implementing and evaluating the recommendations
- SUNY-Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Updated: February 26, 2014, Revised April 14, 2015 (P. 2)

D. Length

The page length of the Dissertation will vary based on whether the student elects to write two publishable scientific articles as part of a larger document, or a single Dissertation document (the traditional option), and may also vary based on subject matter. Although no required page length is specified, it is understood that, taken together, the two publishable papers should contain as much substantive information as is usually expected in the methods and results sections of a traditional Dissertation.

E. Process

The DrPH Dissertation (PUBH 8001) is a twelve (12) credit experience extending, on average, over a three-year period, and must be (1) based on an original public health project, (2) deemed to have publishable potential, and (3) acceptable to the sponsoring Department and to a committee of Dissertation readers. SUNY Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Revised: February 26, 2014, Revised April 14, 2015, p. 3. (Resource File)

The Dissertation process consists of two (2) major stages:

- The Dissertation Proposal and Oral Defense of Dissertation Proposal, and
- The Dissertation and Oral Dissertation Defense.

Students may wish to do their Field Experience in the same topic area in which they will conduct their Dissertation research. The Field Experience can, in part, provide an opportunity for networking and for developing greater knowledge of a particular field that will be studied in greater depth during the Dissertation research process.

SUNY Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Revised: February 26, 2014, Revised April 14, 2015, p.3. (Resource File)

Evaluation of the Dissertation

Evaluation of the Dissertation involves a number of steps during the process of preparing the dissertation. They include the following:

- Student Submission of a Dissertation Proposal
- Formation of a Dissertation Proposal Committee
- Oral Defense of the Dissertation Proposal by the Student
- Acceptance of the Dissertation Proposal by the Dissertation Proposal Committee
- Dissertation Proposal Committee conversion to the Dissertation Committee
- Student Submission of a Draft of the Dissertation
- Oral Defense of the Dissertation Draft by the Student
- Student's Incorporation of Comments by Dissertation Committee Members (if applicable)
- Acceptance or Rejection of Dissertation by Dissertation Committee

SUNY Downstate School of Public Health, Handbook for the DrPH Dissertation, PUBH 8001, Revised: February 26, 2014, Revised April 14, 2015

The Handbook and all forms required for the Dissertation Proposal and Dissertation process are located in the Resource File.

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

This criterion is met.

Strengths:

Performance in Coursework for both the MPH and the DrPH and performance on the Culminating Experience for the MPH degree and the Dissertation for the DrPH degree demonstrate mastery in the appropriate competencies and public health practice.

Weaknesses:

None

Plans:

To continue to monitor the CE and Dissertation evaluation processes to ensure that degree candidates are thoroughly prepared for public health practice.

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).

Required Documentation. The self-study document should include the following:

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

Overarching MPH Degree Competencies

1. Describe basic concepts of probability, random variation and commonly used statistical probability distributions.
2. Apply common statistical methods for inference.
3. Describe how the allocation of social and community factors impacts the understanding of public health problems in urban and immigrant populations and guides community engaged research and practice.
4. Identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice at multiple levels.
5. Integrate and synthesize theory, evidence and local knowledge to inform the conceptualization, design and evaluation of health promotion programs in urban and immigrant settings.
6. Describe the direct and indirect human, ecological and safety effects of major environmental and occupational agents.
7. Specify approaches for assessing, preventing and controlling environmental hazards that pose risks to human health and safety.
8. Describe a public health problem in terms of magnitude, person, time, and place, contextualized in urban and immigrant landscapes.
9. Evaluate the strengths and limitations of epidemiologic studies and reports, and draw appropriate inferences from epidemiologic data.
10. Identify the main components and issues of the organization, financing, policy formation, and delivery of healthcare and public health services in the US.
11. Describe the legal and ethical bases for public health and health services for improving the health of populations.

Overarching DrPH Degree Competencies

1. Apply the theories and principles of biostatistics and epidemiology to the identification, classification and analysis of a public health issue.
2. Describe key characteristics of observational and experimental studies regarding subject selection, data collection, and analysis.
3. Synthesize and critically appraise published, public health research literature, specifically in urban and immigrant health.
4. Develop goals, timelines, funding alternatives, and other strategies for influencing policy initiatives.
5. Assess the impact of policy, including legislation, judicial opinions, and regulations, on population health.
6. Apply theoretical and evidence-based perspectives from multiple disciplines in the design and implementation of programs, policies, and systems.
7. Manage potential conflicts of interest encountered by practitioners, researchers, and organizations.
8. Demonstrate cultural sensitivity in conducting ethical data collection and analysis.
9. Analyze research design using qualitative data for program planning.

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

MPH Biostatistics Concentration Competencies

1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.
2. Apply appropriate statistical methods for inference based on stated research hypotheses.
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.
4. Demonstrate proficiency in constructing and managing databases from epidemiological studies using statistical software.
5. Apply knowledge of study design and statistical methods to critically appraise research literature.
6. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.

MPH Community Health Sciences Concentration Competencies

1. Recognize the importance of one's own standpoint and positions while working collaboratively with diverse communities and constituencies (e.g., organizations, agencies, practitioners, policymakers, and researchers).
2. Describe the roles of history, power, privileged, and structural inequality in driving health inequities in urban communities.
3. Critically apply traditional and contemporary methods and frameworks to evaluate the process, efficacy and sustainability of health promotion programs designed for urban and immigrant populations.
4. Effectively communicate (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.
5. Differentiate between linguistic competence, cultural competence, and health literacy and explain how increased education and awareness of each of these factors can influence the health of a population.
6. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention for a specific community or population.
7. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions in urban and immigrant populations.
8. Demonstrate an understanding of the interaction of race/ethnicity/gender, and health and disease.
9. Delineate how an individual/community can affect the development of health policy at a local, state, and federal level particularly in regards to gender, race, and sexual orientation.

MPH Environmental and Occupational Health Sciences Concentration Competencies

1. Describe federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.
2. Describe various risk management, policy and legal approaches in relation to issues of environmental justice and equity.
3. Describe occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.
4. Describe the effectiveness of occupational health programs, policies, organizations, and legal systems to reduce injuries, illnesses and health disparities.
5. Describe the impact of environmental and occupational hazards on vulnerable populations.
6. Prevent and control environmental and occupational health hazards.
7. Identify strategies for assessment, prevention and control of injuries.
8. Synthesize relevant information in order to assess and manage environmental and occupational risks.

MPH Epidemiology Concentration Competencies

1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
2. Develop a scientific hypothesis and design an appropriate epidemiologic study to assess the research question.
3. Calculate epidemiologic measures of occurrence and association.
4. Describe trends and patterns of incidence and prevalence for major diseases and factors affecting health status of immigrant and urban populations, and indicate major etiologic and prognostic factors.
5. Evaluate the strengths and weaknesses of major descriptive and analytic design strategies used in epidemiologic research.
6. Explain the policy implications of epidemiologic research findings.
7. Use statistical software packages for data processing, management, and descriptive and inferential analyses.
8. Effectively communicate epidemiologic research findings orally and in writing, to lay and professional audiences.
9. Comprehend and apply basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.

MPH Health Policy and Management Concentration Competencies

1. Effectively manage health programs and projects.
2. Apply principles and methods of health policy development and analysis to the examination of key public health issues.
3. Advocate effectively for the needs of urban, immigrant, and other vulnerable populations in health policy and health services.
4. Communicate orally and in writing health policy and management issues using appropriate channels and technologies.
5. In collaboration with priority populations, identify, analyze, and respond to factors impacting the health of diverse communities.
6. Analyze the political context and the stakeholders that collectively serve to influence, shape, and implement policies.

DrPH Community Health Sciences Competencies

1. Assess cultural, environmental, and social justice influences on the health of communities.
2. Demonstrate cultural sensitivity in ethical discourse and analysis.
3. Conduct community-engaged participatory intervention and research projects.
4. Effectively collaborate with communities, policy makers, and other relevant groups to design applied public health intervention and research projects.
5. Utilize planning models to apply theory and evidence to the planning of community-engaged public health intervention and research projects.
6. Using contemporary evaluation frameworks, articulate the strengths and limitations of experimental designs used to evaluate health promotion programs designed for urban and immigrant populations.
7. Identify diverse stakeholders (from private and public sectors) critical to the sustainability and institutionalization of health promotion programs in urban and immigrant settings.
8. Develop measurable evaluation goals and timelines required for the successful evaluation of health promotion programs in urban and immigrant settings.
9. Demonstrate leadership when communicating (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.
10. Using major concepts, methods and theories in the social and behavioral sciences, develop an in-depth understanding of a key public health issue within a community and design a program or intervention that will ameliorate this public health problem.
11. Effectively communicate efforts to design, implement, and manage an intervention aimed at an identified public health issue to diverse audiences.

DrPH Environmental and Occupational Health Sciences

1. Consider and evaluate current environmental health risk assessment methods.
2. Investigate the general mechanisms of toxicity in eliciting a toxic response to various environmental exposures.
3. Assess various risk management, policy and legal approaches in relation to issues of environmental justice and equity.
4. Evaluate the performance and impact of federal and state regulatory agencies and programs, legal systems, health surveillance systems and organizations designed to prevent and control occupational hazards and reduce injuries, illnesses and health disparities.
5. Assess the effectiveness of federal and state regulatory programs, guidelines and authorities that control environmental health issues.
6. Delineate and investigate various risk management and risk communication approaches in relation to issues of environmental justice and equity.
7. Evaluate the performance and impact of federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.
8. Assess and prioritize occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.

DrPH Epidemiology Competencies

1. Describe advanced topics in probability theory, random variation, and commonly used statistical probability distributions, with an emphasis in public health applications.
2. Demonstrate ability to apply probability theory within analytical methods that are commonly used in applied public health research.
3. Describe the public health applications of statistical inference.
4. Apply statistical inference theory within analytical methods that are commonly used in applied public health research.
5. Obtain key sources of public health data for advanced epidemiologic analyses.
6. Demonstrate expertise in epidemiologic study design and evaluation.
7. Prepare written and oral reports on public health research and communicate results to diverse public health constituencies.
8. Demonstrate mastery of the administrative, legal, ethical, and quality assurance dimensions of research and practice.
9. Apply appropriate methods and correctly interpret complex and multifaceted data analysis in determining risk factors that discriminate between health and disease.

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

Course Competencies

Each course listed reflects a total or partial “Primary” **(P)** treatment of the competency to which it applies. All courses listed for that competency introduce both primary **(P)** information and reinforce **(R)** competency related information and skills presented in the other course(s) listed. Therefore, no course is listed as solely “Reinforcing.” Mastery of the competencies for each course is measured by the learning objectives stated in each course syllabi; evaluation occurs through grades on papers, exams, group projects and participation in class.

Field Experience Competencies

Additionally, the FE for both the MPH and the DrPH are learning experiences that vary in the coverage and emphasis of the competencies due to the interests of the respective student. The student chooses the competencies on which to focus from the list of Overarching Competencies for the degree and/or the Concentration Competencies for his/her respective concentration. The competencies covered are stated on the forms completed prior to the FE and mastery of stated competencies is measured by completion of the evaluation forms by the advisor and preceptor comments after the FE is completed.

Culminating Experience and Dissertation

The Culminating Experience provides students with the opportunity to demonstrate their ability to integrate and apply information from each of the five core public health disciplines and the Overarching Competencies assigned to the student’s degree. For the MPH Degree, the student is required to write a paper or conduct a project, and prepare and deliver an oral presentation which demonstrates integration of the MPH Overarching Competencies. For the DrPH Degree, the student is required to prepare a proposal and a dissertation with Oral Defenses of both which demonstrate the student’s mastery of, and integration of the DrPH core competencies.

Table 2.6c.1: Courses and Activities through which MPH Core Competencies are Met

Table 2.6c.1: Courses and Activities through which MPH Core Competencies are Met		
Core Competencies	Course Number and Name	Other Learning Experience
1. Describe basic concepts of probability, random variation and commonly used statistical probability distributions.	BIOS 5200: Principles of Biostatistics (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
2. Apply common statistical methods for inference.	BIOS 5200: Principles of Biostatistics (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
3. Describe how the allocation of social and community factors impacts the understanding of public health problems in urban and immigrant populations and guides community engaged research and practice.	CHSC 5200: Health Behavior and Risk Reduction (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
4. Identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice at multiple levels.	CHSC 5200: Health Behavior and Risk Reduction (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
5. Integrate and synthesize theory, evidence and local knowledge to inform the conceptualization, design and evaluation of health promotion programs in urban and immigrant settings.	CHSC 5200: Health Behavior and Risk Reduction (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
6. Describe the direct and indirect human, ecological and safety effects of major environmental and occupational agents.	EOHS 5200: Issues in Environmental Health (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
7. Specify approaches for assessing, preventing and controlling environmental hazards that pose risks to human health and safety.	EOHS 5200: Issues in Environmental Health (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
8. Describe a public health problem in terms of magnitude, person, time, and place, contextualized in urban and immigrant landscapes.	EPID 5200: Principles of Epidemiology (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
9. Evaluate the strengths and limitations of epidemiologic studies and reports, and draw appropriate inferences from epidemiologic data.	EPID: 5200: Principles of Epidemiology (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
10. Identify the main components and issues of the organization, financing, policy formation, and delivery of healthcare and public health services in the US.	HPMG 5206: Introduction to Health Policy and Management (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)
11. Describe the legal and ethical bases for public health and health services for improving the health of populations.	HPMG 5206: Introduction to Health Policy and Management (P)	BIOS/CHSC/EOHS/EPID/HPMG 6001: Culminating Experience (R)

P=Primary, R=Reinforcing

Table 2.6c.2: Courses and Activities through which DrPH Core Competencies are Met

Table 2.6c.2: Courses and Activities through which DrPH Core Competencies are Met			
Core Competencies	Course Number and Name	Course Number and Name	Other Learning Experience
a. Apply the theories and principles of biostatistics and epidemiology to the identification, classification and analysis of a public health issue.	BIOS 7200: Quantitative Research Methods for Public Health Practice (P) (R)	PUBH 7201: Study Design in Public Health (P) (R)	PUBH 8001: Doctor of Public Health Dissertation (R)
b. Describe key characteristics of observational and experimental studies regarding subject selection, data collection, and analysis.	BIOS 7200: Quantitative Research Methods for Public Health Practice (P) (R)	PUBH 7201: Study Design in Public Health (P) (R)	PUBH 8001: Doctor of Public Health Dissertation (R)
c. Synthesize and critically appraise published, public health research literature, specifically in urban and immigrant health.	BIOS 7200: Quantitative Research Methods for Public Health Practice (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
d. Develop goals, timelines, funding alternatives, and other strategies for influencing policy initiatives.	PUBH 7200: Public Health Policy and Politics Seminar (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
e. Assess the impact of policy, including legislation, judicial opinions, and regulations, on population health.	PUBH 7200: Public Health Policy and Politics Seminar (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
f. Apply theoretical and evidence-based perspectives from multiple disciplines in the design and implementation of programs, policies, and systems.	HPMG 7200: Public Health Management and Ethics (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
g. Manage potential conflicts of interest encountered by practitioners, researchers, and organizations.	HPMG 7200: Public Health Management and Ethics (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
h. Demonstrate cultural sensitivity in conducting ethical data collection and analysis.	PUBH 7201: Study Design in Public Health (P)		PUBH 8001: Doctor of Public Health Dissertation (R)
i. Analyze research design using qualitative data for program planning.	PUBH 7201: Study Design in Public Health (P)		PUBH 8001: Doctor of Public Health Dissertation (R)

Table 2.6c.3: Courses and Activities through which MPH Biostatistics Concentration Competencies are Met				
Concentration Core Competencies	Course Number and Name	Course Number and Name	Course Number and Name	Course Number and Name
1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.	BIOS 5201: Categorical Data Analysis (P) (R)	BIOS 5202: Applied Regression Analysis (P) (R)	BIOS 5203: Survival Analysis (P) (R)	BIOS 5204: Statistical Computing (P) (R)
2. Apply appropriate statistical methods for inference based on stated research hypotheses.	BIOS 5201: Categorical Data Analysis (P) (R)	BIOS 5202: Applied Regression Analysis (P) (R)	BIOS 5203: Survival Analysis (P) (R)	BIOS 5204: Statistical Computing (P) (R)
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.	BIOS 5201: Categorical Data Analysis (P) (R)	BIOS 5202: Applied Regression Analysis (P) (R)	BIOS 5203: Survival Analysis (P) (R)	BIOS 5204: Statistical Computing (P) (R)
4. Demonstrate proficiency in constructing and managing databases from epidemiological studies using statistical software.	BIOS 5204: Statistical Computing (P)			
5. Apply knowledge of study design and statistical methods to critically appraise research literature.	BIOS 5201: Categorical Data Analysis (P) (R)	BIOS 5203: Survival Analysis (P) (R)	BIOS 5204: Statistical Computing (P) (R)	
6. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.	BIOS 5201: Categorical Data Analysis (P) (R)	BIOS 5202: Applied Regression Analysis (P) (R)	BIOS 5203: Survival Analysis (P) (R)	BIOS 5204: Statistical Computing (P) (R)

**Table 2.6c.4: Courses and Activities through which
MPH Community Health Sciences Concentration Competencies are Met**

Concentration Core Competencies	Course Number and Name
1. Recognize the importance of one's own standpoint and positions while working collaboratively with diverse communities and constituencies (e.g., organizations, agencies, practitioners, policymakers, and researchers).	CHCS 5205: Urban Health Issues (P)
2. Describe the roles of history, power, privileged, and structural inequality in driving health inequities in urban communities.	CHCS 5205: Urban Health Issues (P)
3. Critically apply traditional and contemporary methods and frameworks to evaluate the process, efficacy and sustainability of health promotion programs designed for urban and immigrant populations.	CHSC 5206: Program, Planning, and Evaluation (P)
4. Effectively communicate (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.	CHSC 5206: Program, Planning, and Evaluation (P)
5. Differentiate between linguistic competence, cultural competence, and health literacy and explain how increased education and awareness of each of these factors can influence the health of a population.	CHSC 5202: Issues in the Health of Immigrant Populations (P)
6. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention for a specific community or population.	CHSC 5202: Issues in the Health of Immigrant Populations (P)
7. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions in urban and immigrant populations.	CHSC 5203: Sex, Gender, Race and Ethnicity in Health (P)
8. Demonstrate an understanding of the interaction of race/ethnicity/gender, and health and disease.	CHSC 5203: Sex, Gender, Race and Ethnicity in Health (P)
9. Delineate how an individual/community can affect the development of health policy at a local, state, and federal level particularly in regards to gender, race, and sexual orientation.	CHSC 5203: Sex, Gender, Race and Ethnicity in Health (P)

**Table 2.6c.5: Courses and Activities through which
MPH Environmental and Occupational Health Sciences Concentration Competencies are Met**

Concentration Core Competencies	Course Number and Name
1. Describe federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.	EOHS 5201: Introduction to Management, Policy and Law (P)
2. Describe various risk management, policy and legal approaches in relation to issues of environmental justice and equity.	EOHS 5201: Introduction to Management, Policy and Law (P)
3. Describe occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.	EOHS 5202: Occupational Health (P)
4. Describe the effectiveness of occupational health programs, policies, organizations, and legal systems to reduce injuries, illnesses and health disparities.	EOHS 5202: Occupational Health (P)
5. Describe the impact of environmental and occupational hazards on vulnerable populations.	EOHS 5203: Built Environment and Public Health (P)
6. Prevent and control environmental and occupational health hazards.	EOHS 5203: Built Environment and Public Health (P)
7. Identify strategies for assessment, prevention and control of injuries.	EOHS 5205: Public Health Aspects of Physical Trauma (P)
8. Synthesize relevant information in order to assess and manage environmental and occupational risks.	EOHS 5205: Public Health Aspects of Physical Trauma (P)

**Table 2.6c.6: Courses and Activities through which
MPH Epidemiology Concentration Competencies are Met**

Concentration Core Competencies	Course Number and Name	Course Number and Name	Course Number and Name	Course Number and Name
1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5202: Infectious Disease Epidemiology (P) (R)	EPID 5203: Chronic Disease Epidemiology (P) (R)	EPID 5205: Epidemiologic Research Methods II (P) (R)
2. Develop a scientific hypothesis and design an appropriate epidemiologic study to assess the research question.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5205: Epidemiologic Research Methods II (P) (R)		
3. Calculate epidemiologic measures of occurrence and association.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5202: Infectious Disease Epidemiology (P) (R)	EPID 5203: Chronic Disease Epidemiology (P) (R)	EPID 5205: Epidemiologic Research Methods II (P) (R)
4. Describe trends and patterns of incidence and prevalence for major diseases and factors affecting health status of immigrant and urban populations, and indicate major etiologic and prognostic factors.	EPID 5202: Infectious Disease Epidemiology (P) (R)	EPID 5203: Chronic Disease Epidemiology (P) (R)		
5. Evaluate the strengths and weaknesses of major descriptive and analytic design strategies used in epidemiologic research.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5202: Infectious Disease Epidemiology (P) (R)	EPID 5203: Chronic Disease Epidemiology (P) (R)	
6. Explain the policy implications of epidemiologic research findings.	EPID 5202: Infectious Disease Epidemiology (P) (R)	EPID 5203: Chronic Disease Epidemiology (P) (R)		
7. Use statistical software packages for data processing, management, and descriptive and inferential analyses.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5205: Epidemiologic Research Methods II (P) (R)		
8. Effectively communicate epidemiologic research findings orally and in writing, to lay and professional audiences.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5205: Epidemiologic Research Methods II (P) (R)		
9. Comprehend and apply basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.	EPID 5201: Epidemiologic Research Methods (P) (R)	EPID 5202: Infectious Disease Epidemiology (P) (R)		

Table 2.6c.7: Courses and Activities through which MPH Health Policy and Management Concentration Competencies are Met				
Concentration Core Competencies	Course Number and Name	Course Number and Name	Course Number and Name	Course Number and Name
1. Effectively manage health programs and projects.	HPMG 5203: Health Management Concepts (P) (R)	HPMG 5207: Principles in Hospital Management (P) (R)		
2. Apply principles and methods of health policy development and analysis to the examination of key public health issues.	HPMG 5202: Health Care Advocacy and Politics (P) (R)	HPMG 5204: Access, Cost and Quality of Care (P) (R)		
3. Advocate effectively for the needs of urban, immigrant, and other vulnerable populations in health policy and health services.	HPMG 5202: Health Care Advocacy and Politics (P) (R)	HPMG 5203: Health Management Concepts (P) (R)	HPMG 5204: Access, Cost and Quality of Care (P) (R)	HPMG 5207: Principles in Hospital Management (P) (R)
4. Communicate orally and in writing, health policy and management issues using appropriate channels and technologies.	HPMG 5202: Health Care Advocacy and Politics (P) (R)	HPMG 5203: Health Management Concepts (P) (R)	HPMG 5204: Access, Cost and Quality of Care (P) (R)	HPMG 5207: Principles in Hospital Management (P) (R)
5. In collaboration with priority populations, identify, analyze, and respond to factors impacting the health of diverse communities.	HPMG 5203: Health Management Concepts (P) (R)			
6. Analyze the political context and the stakeholders that collectively serve to influence, shape, and implement policies.	HPMG 5202: Health Care Advocacy and Politics (P) (R)	HPMG 5204: Access, Cost and Quality of Care (P) (R)		

**Table 2.6c.8: Courses and Activities Through which
DrPH Community Health Sciences Concentration Competencies are Met**

Concentration Core Competencies	Course Number and Name
1. Assess cultural, environmental, and social justice influences on the health of communities.	CHSC 7201: Qualitative Research Methods for Public Health Practices (P)
2. Demonstrate cultural sensitivity in ethical discourse and analysis.	CHSC 7201: Qualitative Research Methods for Public Health Practices (P)
3. Conduct community-engaged participatory intervention and research projects.	CHSC 7201: Qualitative Research Methods for Public Health Practices (P)
4. Effectively collaborate with communities, policy makers, and other relevant groups to design applied public health intervention and research projects.	CHSC 7202: Methods of Community Intervention and Research (P)
5. Utilize planning models to apply theory and evidence to the planning of community-engaged public health intervention and research projects.	CHSC 7202: Methods of Community Intervention and Research (P)
6. Using contemporary evaluation frameworks, articulate the strengths and limitations of experimental designs used to evaluate health promotion programs designed for urban and immigrant populations.	CHSC 7203: Program Evaluation; Theory, Practice and Research (P)
7. Identify diverse stakeholders (from private and public sectors) critical to the sustainability and institutionalization of health promotion programs in urban and immigrant settings.	CHSC 7203: Program Evaluation; Theory, Practice and Research (P)
8. Develop measurable evaluation goals and timelines required for the successful evaluation of health promotion programs in urban and immigrant settings.	CHSC 7203: Program Evaluation; Theory, Practice and Research (P)
9. Demonstrate leadership when communicating (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.	CHSC 7203: Program Evaluation; Theory, Practice and Research (P)
10. Using major concepts, methods and theories in the social and behavioral sciences, develop an in-depth understanding of a key public health issue within a community and design a program or intervention that will ameliorate this public health problem.	CHSC 7204: Health Promotion Seminar (P)
11. Effectively communicate efforts to design, implement, and manage an intervention aimed at an identified public health issue to diverse audiences.	CHSC 7204: Health Promotion Seminar (P)

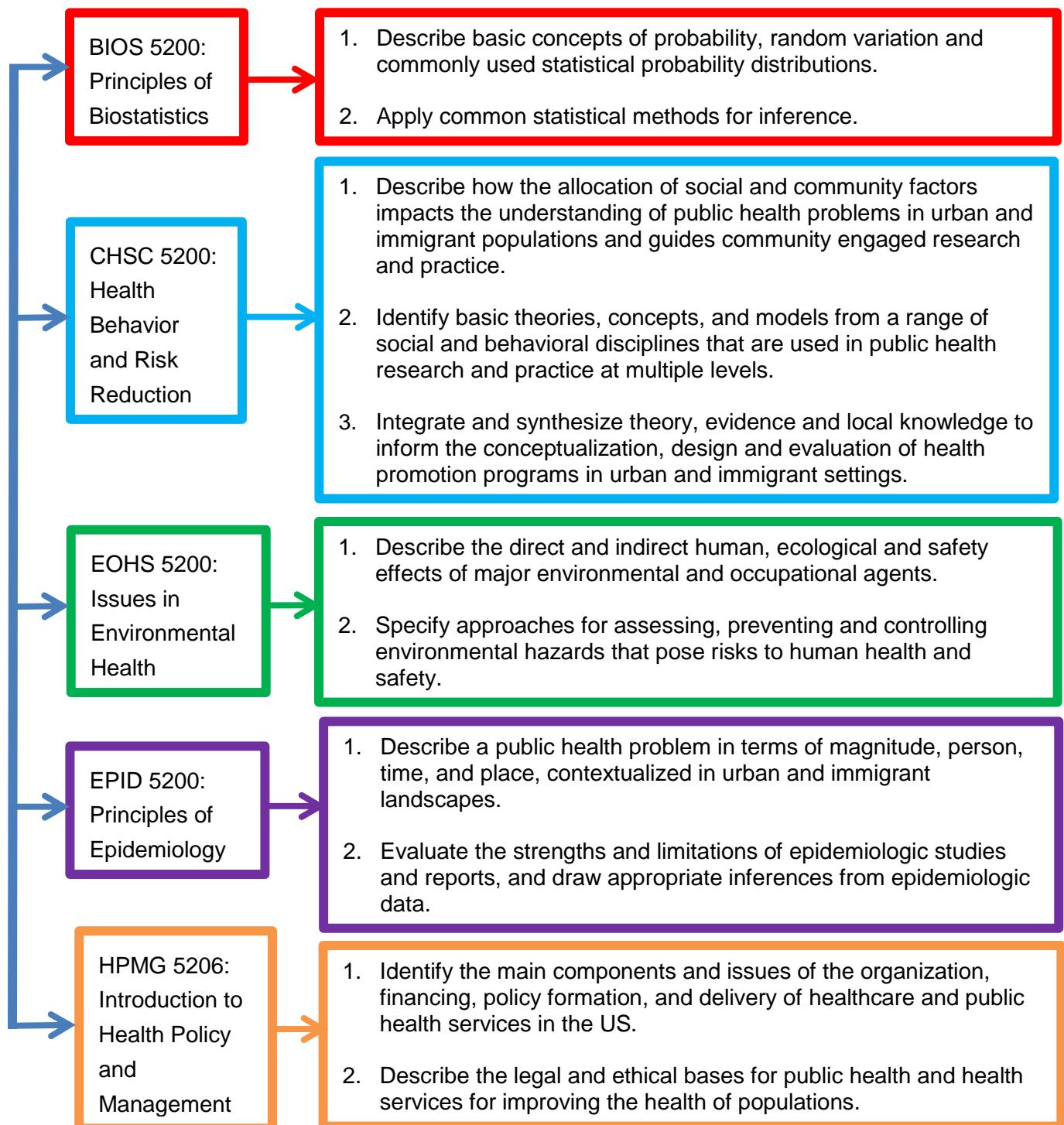
**Table 2.6c.9: Courses and Activities Through which
DrPH Environmental and Occupational Health Sciences Concentration Competencies are Met**

Concentration Core Competencies	Course Number and Name
1. Consider and evaluate current environmental health risk assessment methods.	EOHS 7202: Advanced Topics in Risk Assessment and Management (P)
2. Investigate the general mechanisms of toxicity in eliciting a toxic response to various environmental exposures.	EOHS 7202: Advanced Topics in Risk Assessment and Management (P)
3. Assess various risk management, policy and legal approaches in relation to issues of environmental justice and equity.	EOHS 7203: Environmental Health Policy and Management Systems (P)
4. Evaluate the performance and impact of federal and state regulatory agencies and programs, legal systems, health surveillance systems and organizations designed to prevent and control occupational hazards and reduce injuries, illnesses and health disparities.	EOHS 7203: Environmental Health Policy and Management Systems (P)
5. Assess the effectiveness of federal and state regulatory programs, guidelines and authorities that control environmental health issues.	EOHS 7205: Safety of the Food Supply (P)
6. Delineate and investigate various risk management and risk communication approaches in relation to issues of environmental justice and equity.	EOHS 7205: Safety of the Food Supply (P)
7. Evaluate the performance and impact of federal and state regulatory agencies, programs, policies, and guidelines designed to prevent and control environmental and occupational health hazards and to achieve environmental justice.	EOHS 7300: Advanced Topics in Occupational Health (P)
8. Assess and prioritize occupational hazards and social contextual factors, including socioeconomic status, immigration status, labor relations and government regulations that influence working conditions and contribute to injury, illness and health disparities.	EOHS 7300: Advanced Topics in Occupational Health (P)

Table 2.6c.10: Courses and Activities through which DrPH Epidemiology Concentration Competencies are Met		
Concentration Core Competencies	Course Number and Name	Course Number and Name
1. Describe advanced topics in probability theory, random variation, and commonly used statistical probability distributions, with an emphasis in public health applications.	BIOS 7201: Probability Theory (P)	
2. Demonstrate ability to apply probability theory within analytical methods that are commonly used in applied public health research.	BIOS 7201: Probability Theory (P)	
3. Describe the public health applications of statistical inference.	BIOS 7202: Statistical Inference (P)	
4. Apply statistical inference theory within analytical methods that are commonly used in applied public health research.	BIOS 7202: Statistical Inference (P)	
5. Obtain key sources of public health data for advanced epidemiologic analyses.	EPID 7201: Advanced Epidemiologic Research Methods I (P) (R)	EPID 7202: Advanced Epidemiologic Research Methods II (P) (R)
6. Demonstrate expertise in epidemiologic study design and evaluation.	EPID 7201: Advanced Epidemiologic Research Methods I (P) (R)	EPID 7202: Advanced Epidemiologic Research Methods II (P) (R)
7. Prepare written and oral reports on public health research and communicate results to diverse public health constituencies.	EPID 7201: Advanced Epidemiologic Research Methods I (P) (R)	EPID 7202: Advanced Epidemiologic Research Methods II (P) (R)
8. Demonstrate mastery of the administrative, legal, ethical, and quality assurance dimensions of research and practice.	EPID 7201: Advanced Epidemiologic Research Methods I (P) (R)	EPID 7202: Advanced Epidemiologic Research Methods II (P) (R)
9. Apply appropriate methods and correctly interpret complex and multifaceted data analysis in determining risk factors that discriminate between health and disease.	EPID 7201: Advanced Epidemiologic Research Methods I (P) (R)	EPID 7202: Advanced Epidemiologic Research Methods II (P) (R)

Overarching MPH Competencies by Core Course

Divided Among 5 Core MPH Courses



MPH Biostatistics Concentration Competencies

BIOS 5201: Categorical Data Analysis

1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.
2. Apply appropriate statistical methods for inference based on stated research hypotheses.
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.
4. Apply knowledge of study design and statistical methods to critically appraise research literature.
5. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.

BIOS 5202: Applied Regression Analysis

1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.
2. Apply appropriate statistical methods for inference based on stated research hypotheses.
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.
4. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.

MPH Biostatistics Concentration Competencies (continued)

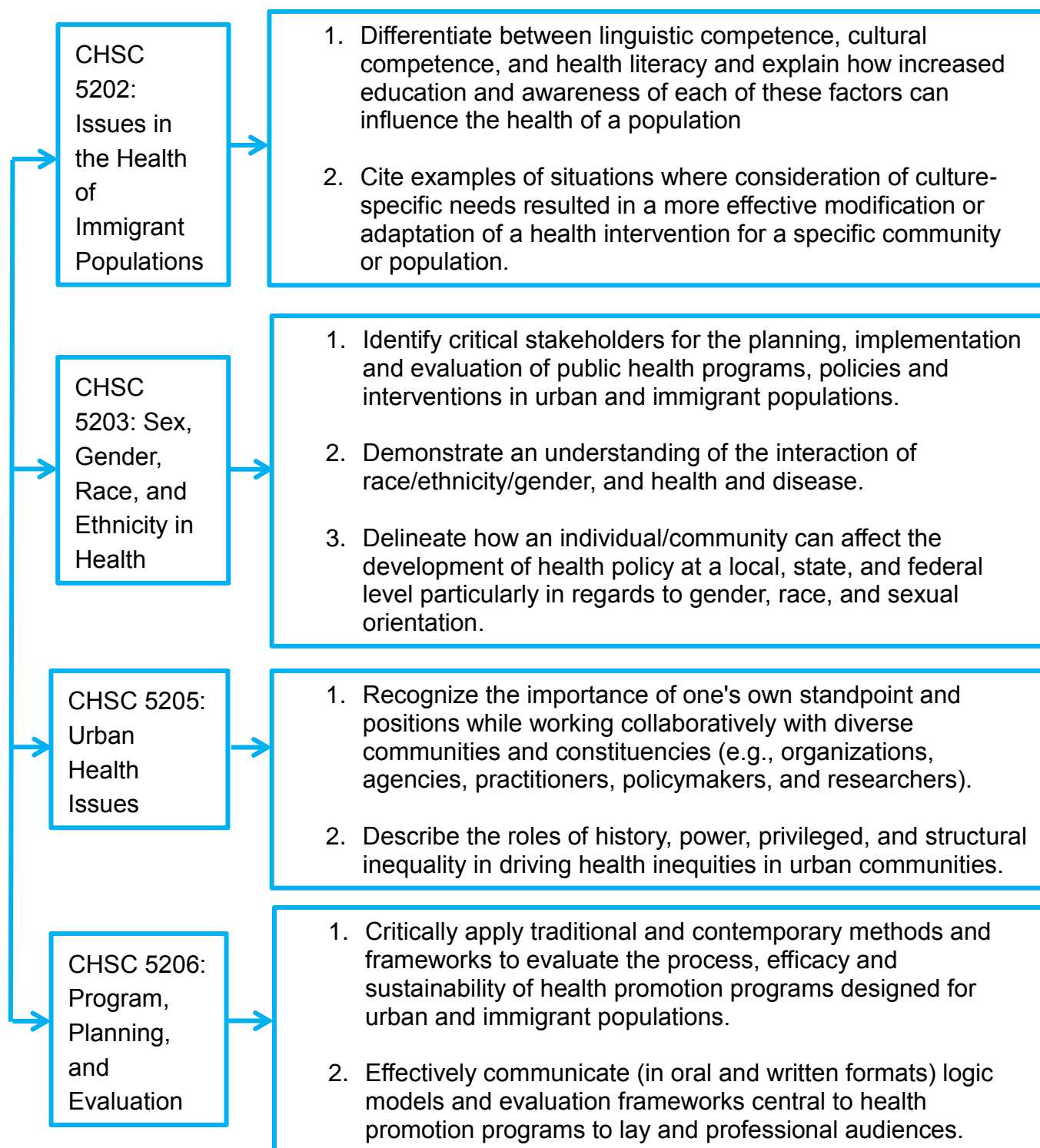
BIOS 5203: Survival Analysis

1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.
2. Apply appropriate statistical methods for inference based on stated research hypotheses.
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.
4. Apply knowledge of study design and statistical methods to critically appraise research literature.
5. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.

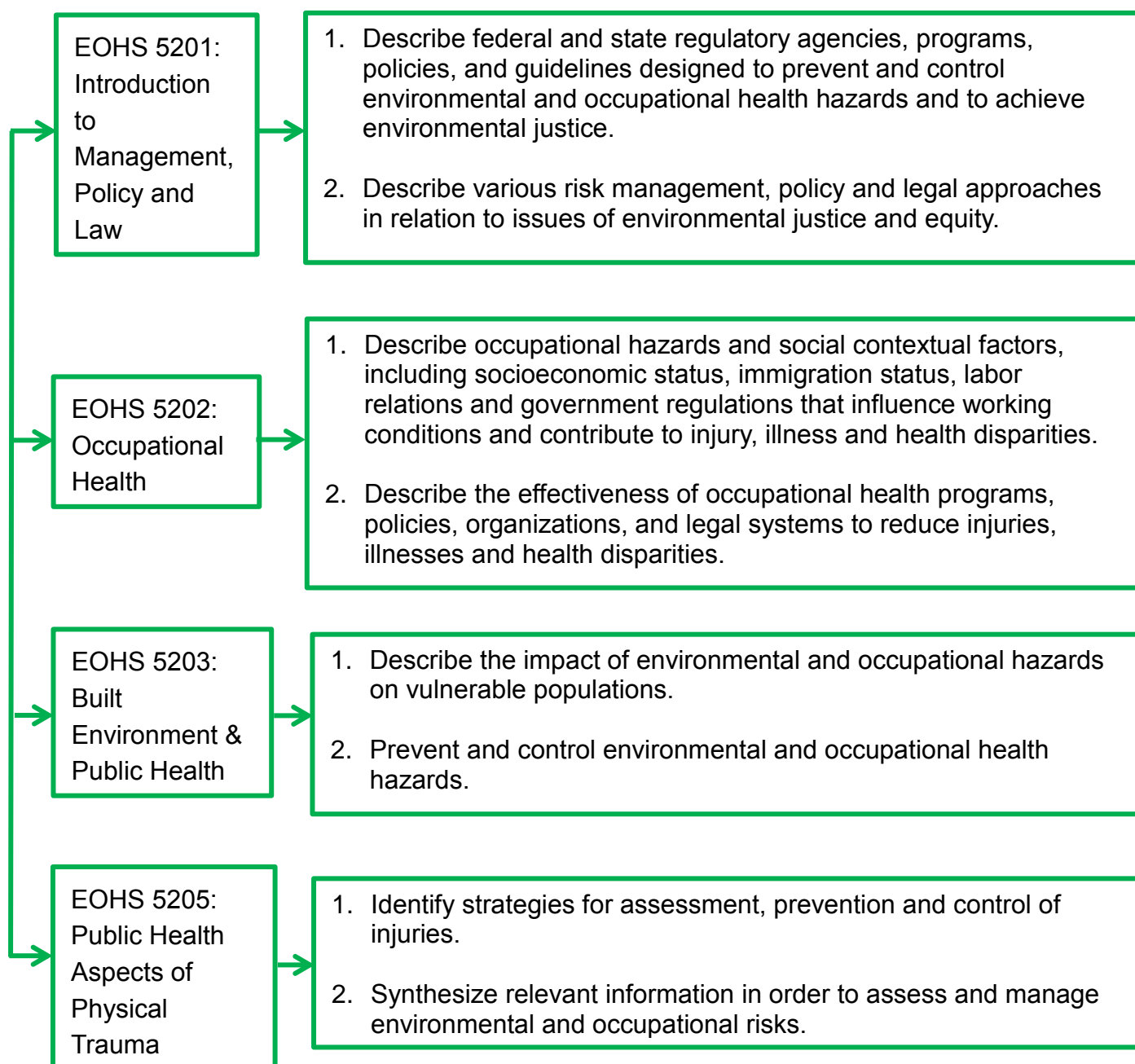
BIOS 5204: Statistical Computing

1. Demonstrate an understanding of the theoretical basis of statistical methods for inference.
2. Apply appropriate statistical methods for inference based on stated research hypotheses.
3. Demonstrate proficiency in using standard statistical software packages to perform data analyses.
4. Demonstrate proficiency in constructing and managing databases from epidemiological studies using statistical software.
5. Apply knowledge of study design and statistical methods to critically appraise research literature.
6. Demonstrate effective written and oral communication skills when describing biostatistical methods, results, and interpretation to different audiences of public health professionals.

MPH Community Health Sciences Concentration Competencies



MPH Environmental and Occupational Health Sciences Concentration Competencies



MPH Epidemiology Concentration Competencies

EPID 5201: Epidemiologic Research Methods

1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
2. Develop a scientific hypothesis and design an appropriate epidemiologic study to assess the research question.
3. Calculate epidemiologic measures of occurrence and association.
4. Evaluate the strengths and weaknesses of major descriptive and analytic design strategies used in epidemiologic research.
5. Use statistical software packages for data processing, management, and descriptive and inferential analyses.
6. Effectively communicate epidemiologic research findings orally and in writing, to lay and professional audiences.
7. Comprehend and apply basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.

EPID 5202: Infectious Disease Epidemiology

1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
2. Calculate epidemiologic measures of occurrence and association.
3. Describe trends and patterns of incidence and prevalence for major diseases and factors affecting health status of immigrant and urban populations, and indicate major etiologic and prognostic factors.
4. Evaluate the strengths and weaknesses of major descriptive and analytic design strategies used in epidemiologic research.
5. Explain the policy implications of epidemiologic research findings.
6. Comprehend and apply basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data.

MPH Epidemiology Concentration Competencies (continued)

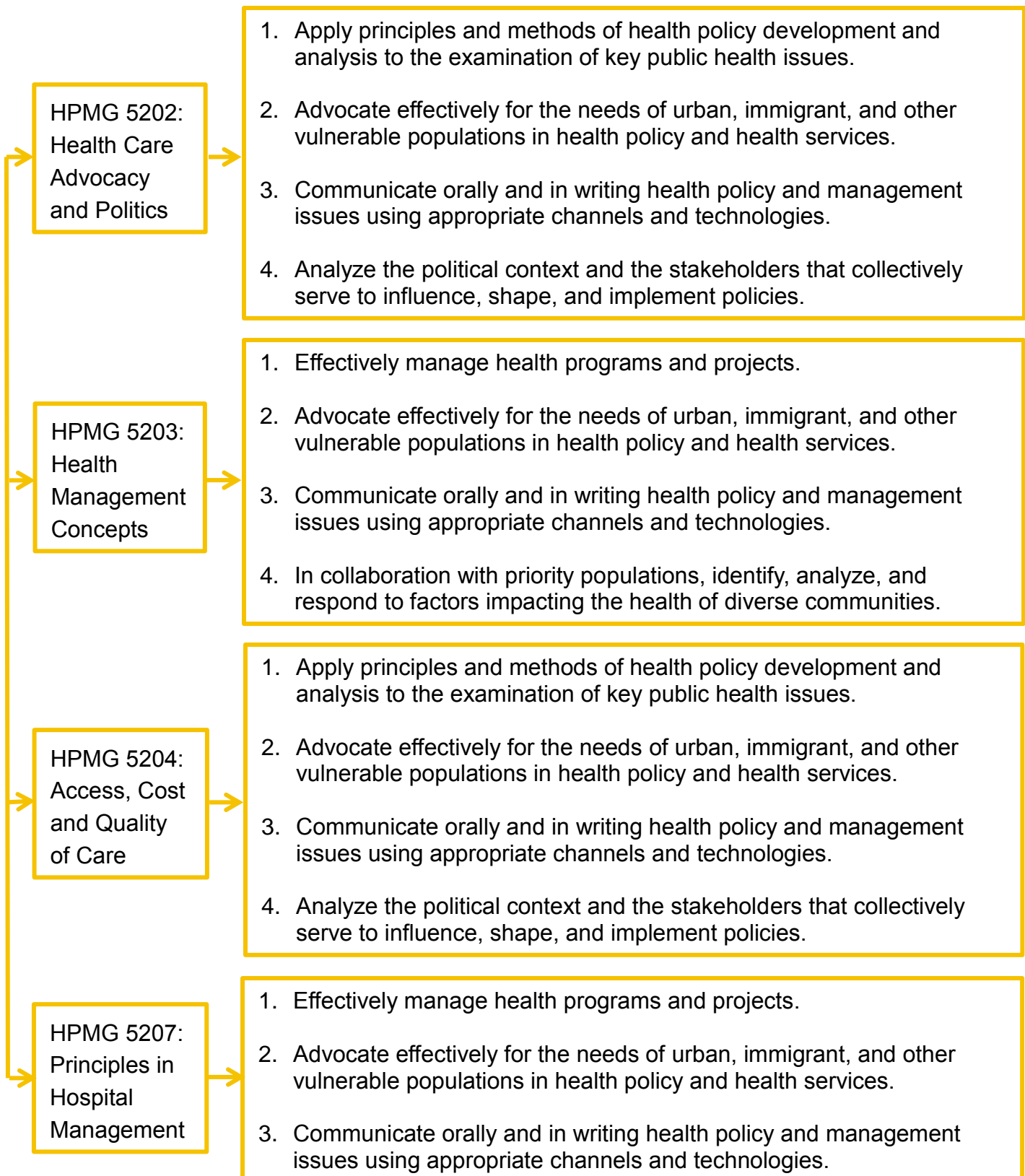
EPID 5203: Chronic Disease Epidemiology

1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
2. Calculate epidemiologic measures of occurrence and association.
3. Describe trends and patterns of incidence and prevalence for major diseases and factors affecting health status of immigrant and urban populations, and indicate major etiologic and prognostic factors.
4. Evaluate the strengths and weaknesses of major descriptive and analytic design strategies used in epidemiologic research.
5. Explain the policy implications of epidemiologic research findings.

EPID 5205: Epidemiologic Research Methods II

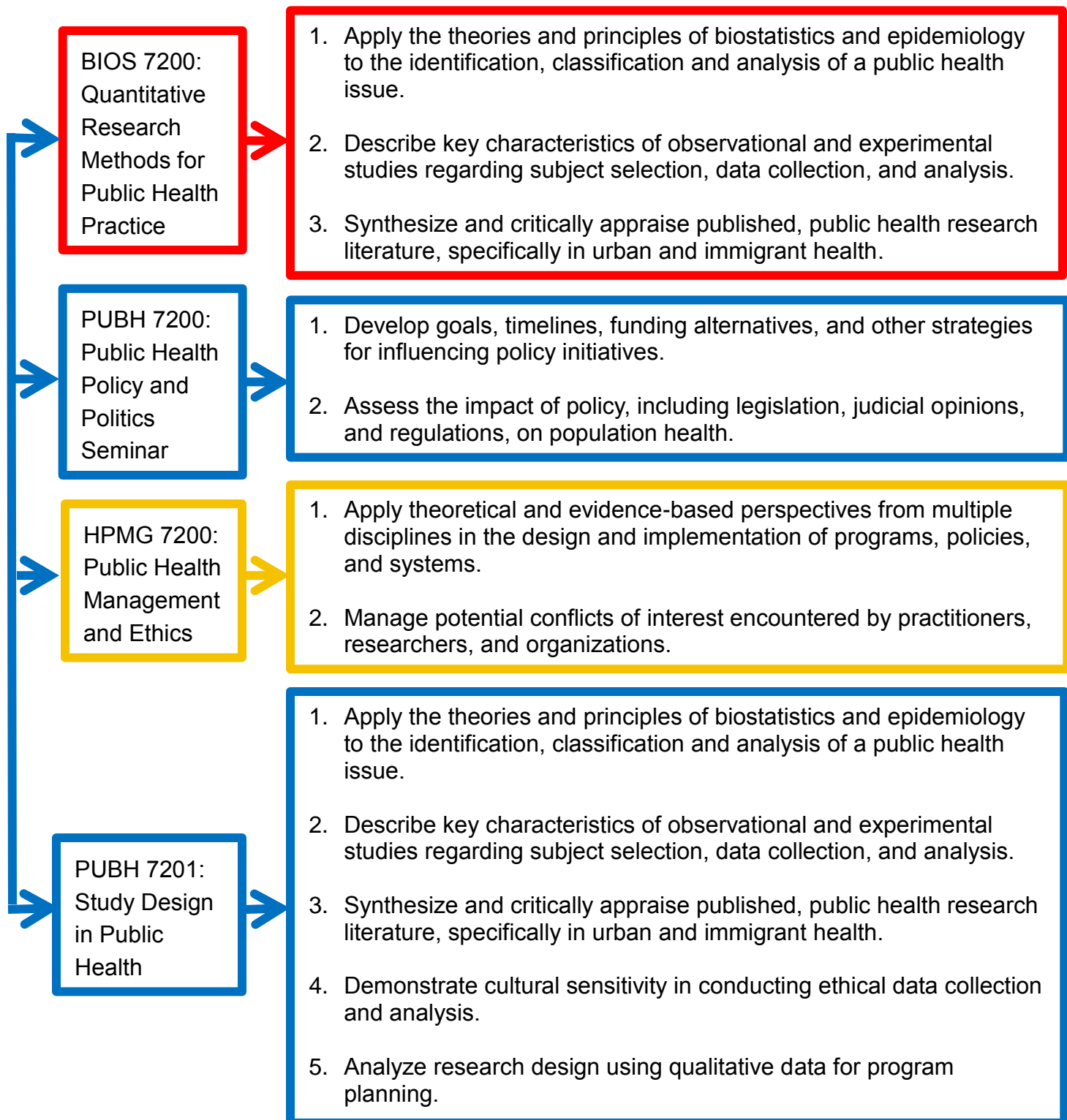
1. Identify types and sources of data used in epidemiologic research, emphasizing urban and immigrant health.
2. Develop a scientific hypothesis and design an appropriate epidemiologic study to assess the research question.
3. Calculate epidemiologic measures of occurrence and association.
4. Use statistical software packages for data processing, management, and descriptive and inferential analyses.
5. Effectively communicate epidemiologic research findings orally and in writing, to lay and professional audiences.

MPH Health Policy and Management Concentration Competencies



Overarching DrPH Degree Competencies

Divided Among 4 Core DrPH Courses



DrPH Community Health Sciences Competencies

CHSC 7201: Qualitative Research Methods for Public Health Practice

1. Assess cultural, environmental, and social justice influences on the health of communities.
2. Demonstrate cultural sensitivity in ethical discourse and analysis.
3. Conduct community-engaged participatory intervention and research projects.

CHSC 7202: Methods of Community Intervention and Research

1. Effectively collaborate with communities, policy makers, and other relevant groups to design applied public health intervention and research projects.
2. Utilize planning models to apply theory and evidence to the planning of community-engaged public health intervention and research projects.

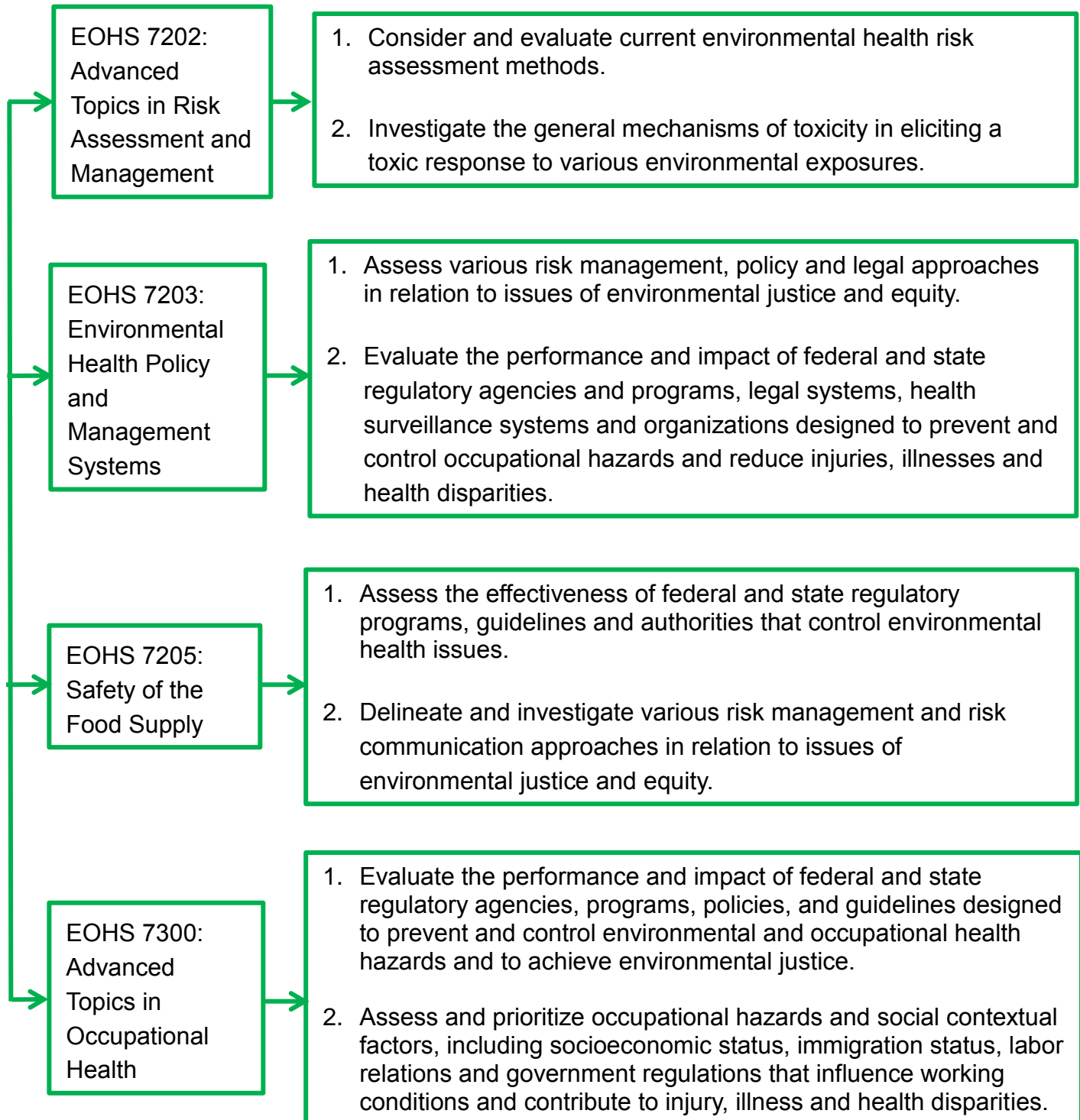
CHSC 7203: Program Evaluation: Theory, Practice, and Research

1. Using contemporary evaluation frameworks, articulate the strengths and limitations of experimental designs used to evaluate health promotion programs designed for urban and immigrant populations.
2. Identify diverse stakeholders (from private and public sectors) critical to the sustainability and institutionalization of health promotion programs in urban and immigrant settings.
3. Develop measurable evaluation goals and timelines required for the successful evaluation of health promotion programs in urban and immigrant settings.
4. Demonstrate leadership when communicating (in oral and written formats) logic models and evaluation frameworks central to health promotion programs to lay and professional audiences.

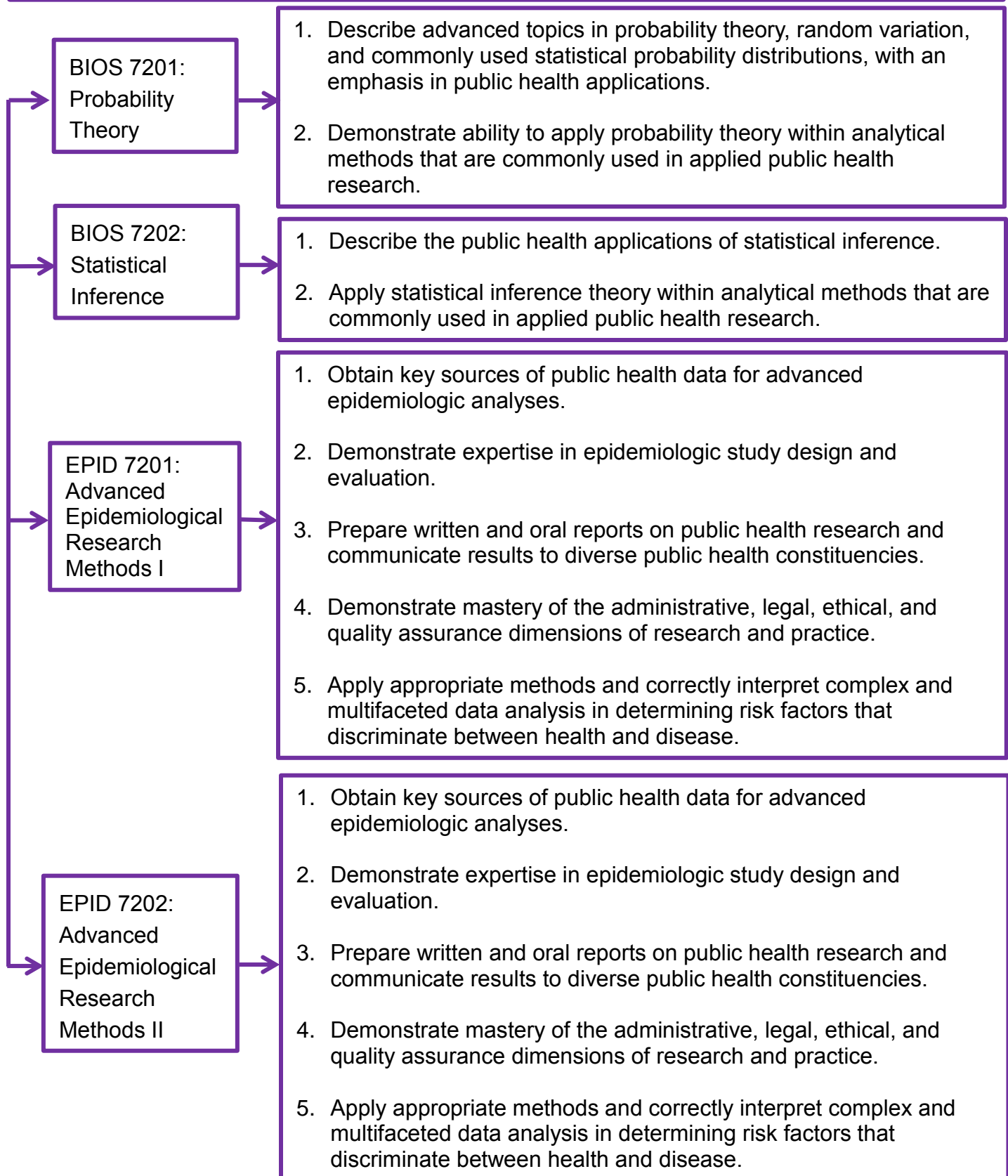
CHSC 7204: Health Promotion Seminar

1. Using major concepts, methods and theories in the social and behavioral sciences, develop an in-depth understanding of a key public health issue within a community and design a program or intervention that will ameliorate this public health problem.
2. Effectively communicate efforts to design, implement, and manage an intervention aimed at an identified public health issue to diverse audiences.

DrPH Environmental and Occupational Health Sciences Competencies



DrPH Epidemiology Competencies



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

During our last CEPH Accreditation Site Visit in 2010, site visitors commented on the large number of competencies the SPH listed. These competencies were drawn from the (then) Association for Schools of Public Health (ASPH) list of competencies. Through numerous meetings and discussions with faculty, administration, community members and students, these competencies were paired down to the current listing of competencies in order to be more achievable for students.

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

Competencies are developed through a feedback process between the faculty, the Departmental Chairs, the SPH Administration, and community leaders. The CEPH Accreditation Criteria guide the initial and ongoing discussions of the competencies. All faculty are familiar with the Accreditation requirements and goals. For MPH and DrPH Overarching Degree Competencies, the Chairs and the Administration propose a group of competencies. These are presented to the entire faculty during a general faculty meeting. Feedback is received and changes are made accordingly. For the Concentration Competencies, each Departmental Chair meets with their respective faculty members to develop their concentration competencies. As the competencies take shape, they are presented to the Community Advisory Group and subsequently to the Steering Committee for the Re-Accreditation of the School of Public Health to elicit feedback, particularly on workplace needs of the community.

Course Directors then make changes to their syllabi as the competencies are finalized. All syllabi and course offering forms have been reviewed by the Sub-Committee on Educational Policy and the Curriculum to ensure the syllabi list the agreed upon relevant competencies and link them to learning objectives.

These competencies are used to guide all SPH educational, research and service activities, including workplace training.

Competencies are made available to the students in the following ways:

- Reviewed at Orientation
- Listed in Student Orientation Materials
- Listed in the Student Handbook
- Listed on SPH Website
- Discussed by Course Instructors
- Listed on Syllabi
- Posted in the SPH Student Lounge and SPH Offices

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

Changing practice or research needs are determined by faculty in the field or community member/student feedback. These changes are discussed in Departmental Meetings and meetings of the Committee of Deans and Chairs. Required curricular changes are brought to the attention of course instructors, who revise their syllabi and course content accordingly.

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

This criterion is met.

Strengths:

The SPH has revised its degree and concentration competencies to be more achievable for students. These competencies are in line with the SPH Vision, Mission and Goals, and are mapped to the appropriate core and concentration core courses. The Sub-Committee on Educational Policy and the Curriculum regularly reviews the syllabi to ensure they reflect current public health practice and the stated competencies.

Weaknesses:

None.

Plans:

To continue to evaluate current public health field practice and research, and continue to review our stated competencies to ensure they are in accordance with current public health practice.

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.

Required Documentation. The self-study document should include the following:

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

MPH

Student progress in mastering the MPH competencies is monitored and evaluated using the following methods:

- Course Performance
 - Grades on Papers
 - Grades on Examinations
 - Grades on Oral Presentations
- Performance on the Field Experience (based on written evaluations from Preceptor and Academic Advisor)
- Culminating Experience Paper (See CE Paper Evaluation Form in Resource File)
- Culminating Experience Oral Presentation
- Faculty Oral Evaluation of student's mastery of the Competencies following the Oral Presentation of their Culminating Experience Paper (See CE Oral Presentation Evaluation Form in Resource File)

DrPH

Student progress in mastering the DrPH competencies is monitored and evaluated using the following methods:

- Course Performance
 - Grades on Papers
 - Grades on Examinations
 - Grades on Oral Presentations
- Performance on the Field Experience (based on written evaluations from Preceptor and Academic Advisor)
- Performance on the Dissertation Oral Defense during which a student's mastery of the DrPH competencies is assessed.
- Performance on the Dissertation (see Dissertation Evaluation Tools in Resource File)

2.7b. Identification of outcomes that serve as measures by which the school will evaluate student achievement in each program, and presentation of data assessing the school's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees (including bachelor's, master's and doctoral degrees) for each of the last three years.

Outcomes measures by which the SPH evaluates student achievement in each program includes:

- Degree Completion Rate
- Grade Point Averages of Students at Graduation
- Job Placement Rates

Table 2.7b.1: MPH Degree Completion Cohorts Highlighted in Green

Please note: Maximum allowed time to completion for the MPH Degree is six (6) years from date of matriculation.

Table 2.7b.1: Students in MPH Degree (includes MD/MPH Students), By Cohorts Entering Between 2009-2010 and 2014-2015								
	Cohort of Students	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
2009-2010	# Students entered	37						
	# Students withdrew, dropped, etc.	4						
	# Students graduated	0						
	Cumulative graduation rate	0.0%						
2010-2011	# Students continuing at beginning of this school year	33	40					
	# Students withdrew, dropped, etc.	1	2					
	# Students graduated	6	0					
	Cumulative graduation rate	16.0%	0.0%					
2011-2012	# Students continuing at beginning of this school year	26	38	30				
	# Students withdrew, dropped, etc.	1	6	1				
	# Students graduated	6	4	0				
	Cumulative graduation rate	32.0%	10.0%	0.0%				
2012-2013	# Students continuing at beginning of this school year	19	28	29	54			
	# Students withdrew, dropped, etc.	0	0	0	0			
	# Students graduated	6	10	5	0			
	Cumulative graduation rate	48.6%	35.0%	16.7%	0.0%			
2013-2014	# Students continuing at beginning of this school year	13	18	24	54	67		
	# Students withdrew, dropped, etc.	1	1	0	2	1		
	# Students graduated	8	5	6	11	0		
	Cumulative graduation rate	70.3%	47.5%	36.7%	20.3%	0.0%		
2014-2015	# Students continuing at beginning of this school year	4	12	18	41	66	53	
	# Students withdrew, dropped, etc.	0	0	0	1	4	0	
	# Students graduated	4	5	5	19	16	1	
	Cumulative graduation rate	81.0%	60.0%	53.3%	55.5%	23.8%	1.8%	
2015-2016	# Students continuing at beginning of this school year	0	7	13	21	46	52	51
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	0
	# Students graduated	0	5	7	9	21	11	0
	Cumulative graduation rate	81.0%	72.5%	76.7%	72.2%	55.2%	22.6%	0.0%

Table 2.7b.2 DrPH Degree Completion Cohorts Highlighted in Blue

Please note: Time to completion for the DrPH degree is 8 years from the semester of entry. However, the DrPH degree was offered in the School of Public Health for the first time in the Summer semester of 2008. Therefore, only seven years of data are available for these cohorts.

Table 2.7b.2. Students in DrPH Degree, By Cohorts Entering Between 2008-2009 and 2014-2015									
	Cohort of Students	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
2008-2009	# Students entered	3							
	# Students withdrew, dropped, etc.	0							
	# Students graduated	0							
	Cumulative graduation rate	0.0%							
2009-2010	# Students continuing at beginning of this school year	3	9						
	# Students withdrew, dropped, etc.	0	0						
	# Students graduated	1	0						
	Cumulative graduation rate	33.3%	0.0%						
2010-2011	# Students continuing at beginning of this school year	2	9	5					
	# Students withdrew, dropped, etc.	1	0	0					
	# Students graduated	0	0	0					
	Cumulative graduation rate	33.3%	0.0%	0.0%					
2011-2012	# Students continuing at beginning of this school year	1	9	5	6				
	# Students withdrew, dropped, etc.	0	2	0	0				
	# Students graduated	0	0	0	0				
	Cumulative graduation rate	33.3%	0.0%	0.0%	0.0%				
2012-2013	# Students continuing at beginning of this school year	1	7	5	6	9			
	# Students withdrew, dropped, etc.	0	0	0	0	0			
	# Students graduated	0	0	0	0	0			
	Cumulative graduation rate	33.3%	0.0%	0.0%	0.0%	0.0%			
2013-2014	# Students continuing at beginning of this school year	1	7	5	6	9	13		
	# Students withdrew, dropped, etc.	0	0	0	0	1	0		
	# Students graduated	0	1	0	0	0	0		
	Cumulative graduation rate	33.3%	11.1%	0.0%	0.0%	0.0%	0.0%		
2014-2015	# Students continuing at beginning of this school year	1	6	5	6	8	13	5	
	# Students withdrew, dropped, etc.	0	1	0	0	0	0	0	
	# Students graduated	0	2	1	0	0	0	0	
	Cumulative graduation rate	33.3%	33.3%	20.0%	0.0%	0.0%	0.0%	0.0%	
2015-2016 (To Date)	# Students continuing at beginning of this school year	1	3	4	6	8	13	5	12
	# Students withdrew, dropped, etc.	0	0	0	0	0	0	0	0
	# Students graduated	0	0	0	0	0	0	0	0
	Cumulative graduation rate	33.3%	44.4%	20.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Definitions:

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

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

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

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

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

Table 2.7b.3: Average GPA for All Graduating MPH Students						
Outcome Measure	Target	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Average MPH Student GPA at Graduation	3.5	3.26	3.70	3.66	3.71	3.65

Figure 2.7b.1: MPH Degrees Awarded and Average GPAs for the Past Five Academic Years

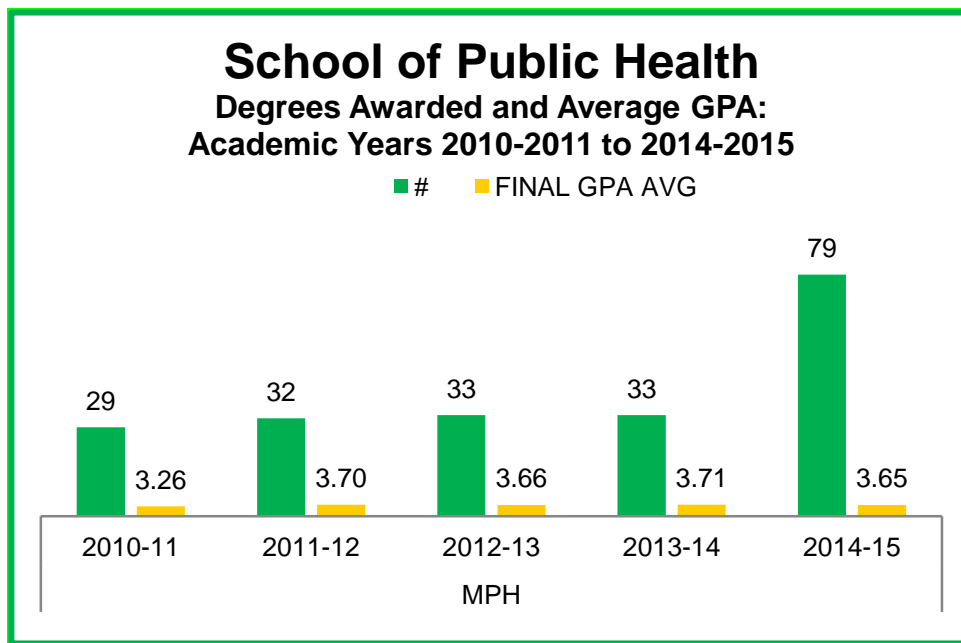


Table 2.7b.4: Average GPA for Graduates of Each Professional Academic Offering			
Professional Academic Offering	Academic Year	#	Final GPA AVG
Master of Public Health (MPH)	2010-2011	29	3.26
	2011-2012	32	3.70
	2012-2013	33	3.66
	2013-2014	33	3.71
	2014-2015	79	3.65
Doctor of Public Health (DrPH)	2013-2014	1	3.70
	2014-2015	3	3.51

Table 2.7b.5: MPH (including MD/MPH) Graduates' Employment

Table 2.7b.5: Destination of MPH Graduates by Employment Type in 2010-2011 to 2014-2015	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (To Date-Summer only 2015)
Employed	21	25	21	19	36	0
Continuing education/training (not employed)	4	5	7	7	7	0
Actively seeking employment	0	0	1	2	0	0
Not seeking employment (not employed and not continuing education/training, by choice)	1	1	0	0	0	0
Unknown	2	1	4	5	36	11
Total	27	32	33	33	79	11
Percentage Employed or Pursuing Education/Total	93%	94%	85%	79%	54%	-

Table 2.7b.6 Destination of DrPH Graduates by Employment Type in 2011-2012 to 2014-2015	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (To Date-Summer only 2015)
Employed	0	0	1	1	1
Continuing education/training (not employed)	0	0	0	0	0
Actively seeking employment	0	0	0	0	0
Not seeking employment (not employed and not continuing education/training, by choice)	0	0	0	2	0
Unknown	0	0	0	0	0
Total	0	0	1	3	1
Percentage Employed or Pursuing Education/Total	-	-	100%	33%¹³	100%

¹³ The 33% representing DrPH graduates who are employed or pursuing further education is based on a denominator of 3, which is extremely small for significant percentages. One out of two graduates retired after receiving his DrPH and one is deceased.

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

The SPH has a comprehensive database to track its alumni. The database includes the graduates' demographic information, degree, concentration and graduation data, as well as current employment information. The Executive Assistant to the Dean is responsible for collecting and organizing this information. She uploads the data on recent graduates and periodically contacts all alumni via e-mail or phone to request updated contact and employment information.

Table 2.7c.1: MPH (including MD/MPH) Degree Graduates By Concentration				
Degree Concentration	2012-2013	2013-2014	2014-2015	2015-2016 (To Date- Summer only 2015)
Biostatistics	1	1	5	0
Community Health Sciences	15	13	16	6
Environmental and Occupational Health Sciences	2	0	4	0
Epidemiology	10	12	19	1
Health Policy and Management	5	7	35	4
TOTAL	33	33	79	11

Table 2.7c.2: DrPH Degree Graduates By Concentration				
Degree Concentration	2012-2013	2013-2014	2014-2015	2015-2016 (To Date- Summer only 2015)
Community Health Sciences	0	1	0	1
Environmental and Occupational Health Sciences	0	0	1	0
Epidemiology	0	0	2	0
TOTAL	0	1	3	1

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

The only national examination for public health graduates is given by the National Board of Public Health Examiners (NBPHE). Data is not available because most of our students do not take this examination.

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

The SPH administration and faculty have periodic discussions with community members, alumni and students regarding the expectations employers of public health graduates have regarding their skills

and abilities. The Community Advisory Group (CAG), which meets once or twice a year, includes members of Community-Based Organizations who are also employers. The CAG meetings include regular discussions of employer expectations and desires for the competency of public health graduates. The members have been extremely helpful in shaping the SPH expectations for graduates and the development of the current competencies. The CAG members often express a desire for employees to be able to make written reports and oral presentations, and to express public health issues coherently.

Minutes for the CAG meetings for the past three years are in the Resource File. These include meetings in which the community members provided information concerning employer expectations of students' mastery of the MPH and DrPH competencies.

Our alumni function in a variety of diverse work environments. Some, on completion of their public health degree remain in a current work environment, but are transferred or promoted within it due the acquisition of their degree. MD/MPH graduates regularly inform us that their mastery of the MPH competencies have greatly assisted them in the performance of their functions as house officers. Many are especially grateful for their mastery of the competencies associated with epidemiology, biostatistics and health policy and management, as these prominently figure in their work environments as residents. Similarly, graduates working for government agencies, community-based organizations or in private industry also report that their competency-based education in public health has greatly assisted them in the performance of their responsibilities. They also report that their education has enabled them to both obtain positions and to receive promotions within the organizations for which they work. The above topic was extensively discussed by alumni and student members of the Steering Committee for the Re-Accreditation of the School of Public Health.

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

This criterion is met.

Strengths:

The SPH has an 81% graduation rate for MPH students completing the degree within the maximum allowable time to graduation. It is rare that students require more time to complete the degree. The SPH continues to increase its DrPH graduates and tracks both MPH and DrPH alumni closely after graduation.

Weaknesses:

None.

Plans:

To maintain or increase graduation rates for MPH and DrPH students.

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.

NA

2.9 Bachelor's Degrees in Public Health.

NA

The SUNY Downstate School of Public Health does not offer Bachelor's Degrees in Public Health

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.

NA

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.

NA

The School of Public Health does not offer Academic Degrees.

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.

Required Documentation. The self-study document should include the following:

2.12a. Identification of all doctoral programs offered by the school, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose. If the school is a new applicant and has graduates from only one doctoral program, a description of plans and a timetable for graduating students from the other two doctoral programs must be presented, with university documentation supporting the school's projections.

As stated in the instructional matrix in Criterion 2.1a, the SPH offers a DrPH in the following three concentrations:

1. Community Health Sciences
2. Environmental and Occupational Health Sciences
3. Epidemiology

2.12b. Description of specific support and resources available to doctoral students including traineeships, mentorship opportunities, etc.

The SPH invests a great deal of effort to support its doctoral students. Each student has an academic advisor as well as having access to the Chair of the department which houses their concentration. Students involved in specific research projects will be mentored by faculty who possess the relevant expertise.

Financial resources available to doctoral students include the following:

- Salary support for doctoral students to act as Student Assistants (SAs). A Student Assistant typically works with a Course Director to prepare materials for the course or mark papers/examinations associated with the course.
- Support to defray expenses to attend the APHA Annual Meeting and Exposition if they are presenting a poster or abstract
- Support to defray expenses to attend the CUGH Annual Meeting if they are presenting a poster or abstract
- Support to participate in their Field Experience in South Africa or other overseas site.
- Support for certain software packages needed for the completion of doctoral level coursework
- Support for the printing of five copies of the doctoral student's dissertation. One copy is given to the student

2.12c. Data on student progression through each of the school's doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program.

Table 2.12c.1 Doctoral Student Data

Table 2.12c.1: Doctoral Student Data for Academic Year 2014-2015			
	DrPH 1 Community Health Sciences	DrPH 2 Environmental and Occupational Health Sciences	DrPH 3 Epidemiology
# newly admitted in 2014-2015	2	3	0
# currently enrolled (total) in 2014-2015	18	10	12
# completed coursework during 2013-2014	4	1	3
# advanced to candidacy (cumulative) during 2013-2014	4	0	3
# graduated in 2013-2014	1	0	0

2.12d. Identification of specific coursework, for each degree, that is aimed at doctoral-level education.

Doctor of Public Health Core Courses:

Four (4) courses at three (3) credits each for a total of twelve (12) credits

1. BIOS 7200: Quantitative Research Methods for Public Health Practice
2. PUBH 7201: Study Design in Public Health Practice
3. HPMG 7200: Public Health Management and Ethics
4. PUBH 7200: Public Health Policy and Politics Seminar

Concentration Core Courses:

Four (4) courses at three (3) credits each in one (1) of the following three (3) disciplines for a total of twelve (12) credits:

Community Health Sciences
Environmental & Occupational Health Sciences
Epidemiology

Doctor of Public Health Elective Courses, by Concentration:

Two (2) elective courses, at three (3) credits each, for a total of six (6) credits

While electives are usually taken within the selected discipline, the student may, with faculty approval, take at least one elective outside of his/her discipline. Students will also have the option of developing individualized courses of independent study to enhance competencies for their intended career.

Field Experience in One of the Concentration Core

Three (3) credits of Field Experience.

Qualifying Examination (QE)

When DrPH students complete all their core coursework, they are required to take a Qualifying Examination which consists of two (2) full days of six (6) hours each with a lunch break. The first day focuses on the core courses which all DrPH students are required to take. The second day focuses on the student's concentration core courses. The QE is the test that determines if the student is prepared to transition to candidacy and to begin the dissertation.

Dissertation

Twelve (12) credits of dissertation.

Dissertation Credits: A student cannot enroll for dissertation credits until the student has passed his/her Qualifying Examination. Twelve (12) credits are required to complete the dissertation.

Total Credits = 45

2.12e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The DrPH Degree program at the SPH has grown and strengthened considerably since its inception in 2008. Faculty work closely with DrPH candidates to ensure a thorough public health grounding in the core subject areas and their respective concentrations.

Weaknesses:

None.

Plans:

To continue to recruit more DrPH students, particularly in the Environmental and Occupational Sciences concentration.

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.

Required Documentation. The self-study document should include the following:

2.13a. Identification of joint degree programs offered by the school. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

MD/MPH

The only “joint” degree offered in the SPH is the MD/MPH, as identified in the instructional matrix in Criterion 2.1.a. This is, in fact, a MPH degree program that runs **concurrently** with the MD degree program, and not a joint degree program.

2.13b. A list and description of how each joint degree program differs from the standard degree program. The school must explain the rationale for any credit sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.

“Standard” MPH students, MD/MPH students, Peace Corps Master’s International (PCMI) MPH students, and New York City Department of Health and Mental Hygiene Residents enrolled in the MPH degree program. All MPH degree students have the same academic requirements and take the same number of credits to earn the MPH degree. See below for details:

MD/MPH Students

The MD/MPH Program **does not** differ from the standard MPH degree program in any of its academic requirements. There is no credit sharing or substitution permitted between the MD and the MPH degree programs. Students must apply to, and enroll in both the College of Medicine and the School of Public Health. Tuition must be paid for each degree independently. The only difference between an MD/MPH student and a “standard” MPH student is that the MD/MPH students entering in a particular academic year become a cohort, taking their MPH courses together in the same order, so as to complete the MPH degree coursework in their first two years of Medical School. “Standard” MPH students may choose the order in which they take their core courses and concentration core courses. The overwhelming majority of MD/MPH students graduate from the MPH program in two (2) to four (4) years.

Peace Corps Master’s International (PCMI) MPH students

The SPH is partnered with the Peace Corps to offer the Peace Corps Master’s International (PCMI) Program. **This is the standard MPH degree with all the same academic requirements for PCMI students.** The only difference is the process by which PCMI students obtain their MPH requirements. PCMI students complete all or the majority of their coursework here at SUNY Downstate. Their Field Experience may be part of their Peace Corps “in country” experience, which consists of 27 months of training and service. After their “in country” service, students return to SUNY Downstate SPH to complete any remaining coursework and their Culminating Experience. PCMI students have the same six (6) years to complete the MPH as any standard MPH student.

New York City Department of Health and Mental Hygiene (NYCDOHMH) Residents Enrolled in the MPH Degree Program

After submitting a response to a Request for Proposals (RFP), the SPH was selected by the New York City Department of Health and Human Resources to be a venue for their medicine residents to undertake the Master of Public Health degree. These students have all the same academic requirements as a “standard” MPH student. They are required to complete the same number of

credits to earn the MPH degree. These students also have the same six (6) years to complete the MPH as any standard MPH student.

2.13c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The MD/MPH Program in the SPH has worked closely with the College of Medicine to provide support to ensure success of the joint/concurrent degree students. MD/MPH students and Peace Corps Master's International (PCMI) MPH students and Residents from the NYCDOHMH have all the same academic requirements and number of credits as "standard" MPH students.

Weaknesses:

None.

Plans:

To continue to increase the number of enrolled and graduated MD/MPH, PCMI and NYCDOHMH students.

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 course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

NA

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.

Required Documentation. The self-study document should include the following:

3.1a. Description of the school's research activities, including policies, procedures and practices that support research and scholarly activities.

The SPH continues to build a robust research enterprise that is consistent with its Vision, Mission and Goals, despite funding cuts and challenges in the arena of sponsoring agencies, such as the NIH. All SPH faculty are expected to apply for extramural or other funding and engage in research activities, particularly community-based research, as stated on page 17 of the Policies of the SUNY Board of Trustees-June 2014.

The SPH complies with the research policies set forth by the Federal and State governments, the State University of New York Central Headquarters, SUNY Downstate Medical Center and the School of Public Health. These policies and regulations encompass research and ethical guidelines.[HSCB Corporate Compliance Program]

Compliance with campus, State and Federal policies and regulations in the conduct of research is a major responsibility of all investigators and their staff as well as the institution itself. This involves a knowledge and understanding of these policies and regulations, through on-going investigator education programs, sufficient to ensure performance, in accordance with the highest ethical standards, of their responsibilities and activities.

Policies adhered to by researchers at SUNY Downstate include: (All Documents referenced in this section can be found in the Resource File.)

Federal and State Government Regulations

- Affirmative Action and Equal Employment Opportunity
- Belmont Report (Treatment of Human Subjects)
- DHHS Public Health Service Policies on Research Misconduct
- Export Control Laws and Regulations
- Federalwide Assurance (FWA) For The Protection Of Human Subjects
- Freedom of Publication
- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- Nuremberg Code (Treatment of Human Subjects)
- NYS Public Officers Law (Section 73, 73-a, and 74)
- PHS Policy on Humane Care and Use of Laboratory Animals
- U.S. SELECT Agent Laws and Regulations (Transport of Arms, etc. into U.S.)

SUNY Central overarching policies governing research for all campuses are described in the State University of New York Policies of the Board of Trustees 2014 (Pp. 14, 17, 45-50, 54-55, 69, 76, 78 and 81). This document includes specific sections on:

- Academic Freedom
- Patents, Inventions and Copyright Policy

Record Retention & Disposition Policies may be found on the SUNY Website:

http://www.suny.edu/sunypp/documents.cfm?doc_id=650

In addition to the above policies, all academic employees at the State University of New York are governed by regulations detailed in the current agreement between the academic employees' labor union and the State of New York: Agreement between the State of New York and the United University Professionals (July 2, 2011 – July 1, 2016).

All DMC faculty employees undergo orientation and compliance training in the following areas:

- Complying with the Deficit Reduction Act of 2005: Detection & Prevention of Fraud, Waste & Abuse
- Conflict of Interest
- Confidentiality
- Corporate Compliance
- Deficit Reduction Act (DRA) False Claims and Whistleblower Protections
- DMC Conflict of Interest Policy and Procedure (8/12)
- DMC Federal Wide Assurance of Compliance with DHHS Regulations for the Protection of Human Research Subjects
- Documentation Integrity Program
- Freedom of Publication
- Health Science Center of Brooklyn (HSCB) Reaffirmation of Affirmative Action and Equal Employment Opportunities Policies
- HIPAA Compliance
(All HIPAA Policies may be found on the Downstate HIPAA Webpage:
<http://www.downstate.edu/hipaa/>)
- HSCB/RF Affirmative Action Plan
- Identity Theft Risk Areas
- Misconduct or Fraud in Academic Research
- Notification of Protected Health Information (PHI) Breaches
- Patent & Copyright
- Professional Compliance
- Recombinant DNA/Biohazardous Materials
- RF Board of Directors Resolution 95-5
- Use of Human Subjects
- Use of Laboratory Animals

THE RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK

The Research Foundation of State University of New York is a private, nonprofit educational corporation chartered in 1951 by the New York State Board of Regents. Its purpose is to assist the State University of New York and its faculty in sponsored research, training and public service activities. Its mission is to serve the State University of New York and the people of New York State by providing leadership and the highest quality support for broad-based research, education and public service programs, and, as SUNY's partner, to assure fiduciary responsibility to sponsors, principal investigators and SUNY campuses in an environment in which each individual investigator and employee is treated with dignity, respect and fairness.

The Research Foundation's activities are governed by:

- The Research Foundation's Charter which limits its activities to those that enhance the State University of New York and those that further the University's research and educational objectives
- The Bylaws of The Research Foundation for The State University of New York which defines the relationship between the Research Foundation and the University. [See Resource File].

Services the Research Foundation provides to SUNY under the Agreement include:

- submission of sponsored program applications for funds on behalf of the University
- conduct of sponsored activities in University facilities
- management of sponsored funds.

A Board of Directors governs the Research Foundation. Under the Research Foundation's charter, the chancellor of the University serves ex-officio as chair of the Board. The Board of Directors appoints the president, executive vice president, and secretary-treasurer as the corporate officers responsible for the general supervision and control of the affairs of the corporation, and to see to it that all policies, resolutions, and other directives of the Board are carried out.

The state-operated campuses of the University and all other locations where the Research Foundation administers sponsored programs are referred to as "operating locations." Each Research Foundation operating location establishes its own general procedures and organization (consistent with State University and Research Foundation policies and procedures) for the administration of sponsored funds. Operating locations handle the day-to-day operations involved in sponsored program administration and are responsible for ensuring that all actions comply with Research Foundation and sponsor policies and procedures. Persons responsible for carrying out Research Foundation business at operating locations have direct contact with project directors and provide services such as reviewing and processing applications, purchases, payments, property control, and personnel transactions. All research grants obtained by DMC faculty are administered through the Research Foundation.

In addition, The Downstate Medical Center has an Office for Research Administration which has recently undergone a reorganization. The following is the function of the Office of Research Administration as stated on the Downstate website:

Office of Research Administration

The Office of Research Administration (ORA) provides oversight and support for all elements of Downstate's research infrastructure including the Pre- and Post-Award Divisions, the Institutional Review Board (IRB), the Institutional Animal Care and Use Committee (IACUC), the Institutional Biosafety Committee (IBC), Clinical Trials, and the Division of Comparative Medicine. We provide all research-related academic and administrative support functions for the SUNY Downstate community through the SUNY Research Foundation. We work closely with sponsors and we assist the faculty in the preparation, submission and administration of their sponsored research, training and public service program applications and awards. The following information may be found on the Downstate website: http://research.downstate.edu/procedures/policy_b.htm#C1

DMC COMMITTEES RELATING TO RESEARCH

The following is a list of current committees that related or support research at Downstate Medical Center. A brief description of the committee is included.

Institutional Review Board (IRB)

There is an active Institutional Review Board at SUNY Downstate, the purpose of which is to evaluate research activities at Downstate involving human subjects. This committee ensures that all Federal, and State Downstate Medical Center policies and procedures regarding the use of human subjects are followed. The committee examines research proposals with regard to issues such as the definition of human subjects, ethical principles for conducting human subjects research, informed consent, confidentiality and privacy of data and patient records, risks and benefits, preparation of a research protocol, adherence to study protocol, proper conduct of the study, and special protections for targeted populations, e.g., children.

Animal Care and Use Committee

To review and approve (or require modification to or disapprove) all research and training activities involving the use of animals and to insure, based on semiannual reviews, that the Health Science Center's animal care program and facilities meets all Federal, State and Downstate Medical Center standards.

Non-Human Use Radioisotope Committee

To review and approve (or require modification to or disapprove) all research activities involving the non-human use of radioactive material and other ionizing radiation and to insure that all such activities are carried out in a manner that meets all Federal, State and Downstate Medical Center standards.

Human Use Radioisotope Committee

To review and approve (or require modification to or disapprove) all activities involving the human use of radioactive materials and to insure that all uses of radio-nuclide and radio-pharmaceutical materials for diagnostic and research purposes meet all Federal, State and Downstate Medical Center standards.

Institutional Biosafety Committee

To review and approve (or require modification to or disapprove) all research activities involving the use of recombinant DNA molecules and organisms and viruses containing recombinant DNA molecules and to insure that all practices for the constructing and handling of recombinant DNA meets current Federal and Downstate Medical Center standards.

Research, training and public service programs at Downstate Medical Center, funded by non-SUNY sponsors, are administered by the Research Foundation of State University of New York.

SPH Research

The School of Public Health conducts an active research/service program, which complies with all the rules and regulations governing the larger medical center. To facilitate and operationalize the policies and procedures listed below, the SPH created the position of Grants Manager. This position is responsible for providing information on all policies and procedures to faculty investigators. The Grants Manager assists in the completion of all grants related submissions to funding agencies, including budget formation and spreadsheet creation, and the monitoring of ongoing grants and grant expenditures. In addition, this position is responsible for the verification process including interfacing with SUNY Downstate Office of Scientific Affairs, the Office of Research Administration, and the coordination and tracking of submissions to the IRB.

The position of Associate Dean for Research Administration was also created in the SPH to oversee this entire process and provide senior-level approval for research project proposals. The Associate Dean for Research Administration is also responsible for mentoring junior faculty researchers.

The faculty hold a bi-weekly research seminar/journal club to stay current on research issues. At these sessions, they discuss issues such as:

- data acquisition
- data management
- data sharing and ownership
- methods of data storage
- data legalities such as intellectual property, privacy and copyright laws
- data selection, retention
- data analysis with various software packages
- role and responsibilities of a mentor
- research collaboration
- sharing of materials and information with internal and external collaborating investigators
- avoiding authorship disputes

3.1b. Description of current research undertaken in collaboration with local, state, national or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.

The research enterprise at the SPH is community-centered. Many of our faculty are involved in community-based research activities and are collaborating with health agencies and community-based organizations. Our catchment area consists of primarily Caribbean and African-American residents. There are numerous community-based projects going on that continually link the School of Public Health with the residents of the community and the organizations that cater to this population. These projects include smoking cessation programs, diabetes awareness, prenatal care provision and cancer screenings. In addition, many of our faculty and students are involved in projects in other areas of Brooklyn and beyond the borders of the borough.

SUNY Downstate sponsors a research initiative called Downstate's **Health Disparities Research Funding Initiatives**. A major objective of this initiative is to provide seed support for health disparities research to stimulate discovery momentum that will help faculty secure extramural or other support for continued research. Three of our Full-time faculty members were selected for this research funding in March of 2015. They are listed below with their research project titles:

Aimee Afable, PhD, MPH, Assistant Professor
Department of Community Health Sciences
Project Title: Efficacy and Sustainability Evaluation of PATH, a Childhood Obesity Program

LeConté J. Dill, DrPH, MPH, Assistant Professor
Department of Community Health Sciences
School of Public Health
Project Title: Alternate Routes: Examining Risk and Resilience among Black Girls in Brooklyn

Laura A. Geer, PhD, MHS, Assistant Professor
School of Public Health
Project Title: Evaluating the Effectiveness of the Text4Baby program in Flatbush Brooklyn

Please see Table 3.1c.1 for a listing of formal research agreements with agencies, many of which are community-based.

Below are selected descriptions of faculty members' community-based research projects.

Primary Investigator: Karen E. Benker, MD, MPH

Project: Minority Based Community Clinical Oncology Program

With funding from the National Cancer Institute, Dr. Benker worked with the Central Brooklyn Economic Development Corporation, a community-based organization, to develop lay health educators. These health educators were drawn from a pool of students in a GED (General Educational Development) Diploma program, through the auspices of the New York State Education Department (NYSED) **GED** Testing Office. The group organized outreach and education events to promote screening for colo-rectal cancer in the African-American community.

Primary Investigator: Tracey E. Wilson, PhD

Project: Barbershop Talk: HIV Prevention for African-American Heterosexual Men

This project seeks to test an Intervention designed to reduce HIV risk among African-American heterosexual men In Brooklyn, NY. These men represent a high priority population, given the racial/ethnic health disparities in HIV/AIDS among U.S. men, the disproportionate burden of HIV in the geographic areas served by the project, and the relative lack of prevention approaches with demonstrated efficacy in this population.

The burden of HIV infection among men and women who identify as Black or African American in the U.S. is enormous, given that over half of all new HIV diagnoses occur in this group. Heterosexual contact accounts for much of this transmission, yet a large gap exists between the HIV prevention needs of adult heterosexual African American men and programs that have been demonstrated to meet these needs. Investigators at SUNY Downstate Medical Center and the Arthur Ashe Institute for Urban Health, Inc. in Brooklyn NY have over ten years experience working together on local community based health education initiatives, behavioral interventions, and action oriented projects. More recently, the investigative team involved in this partnership has utilized CBPR methods to develop an intervention that seeks to reduce sexual risk behavior among Black (including African, African American, and African Caribbean) heterosexual adult men who do not inject drugs. Our aims are to assess the impact of this linguistically and culturally tailored HIV prevention program on the sexual risk of heterosexual, African American men aged 21 and older, to assess the intervention's impact on the more proximal social and psychological variables that the program is designed to change, and to identify key contextual level factors that may Impact the intervention's impact across segments of this priority population. This intervention is consistent with the 2011 Trans-NIH Plan for HIV Related Research, which has as a priority the reduction of HIV-related disparities in racial and ethnic populations, addresses the needs of a population who bear a disproportionate burden of HIV/AIDS and for whom there are few effective approaches available, and will contribute to the evidence-based surrounding the efficacy of sustainable, acceptable approaches to risk reduction among African American men. Further information about this project may be found on the NIH Project Reporter website:

http://projectreporter.nih.gov/project_info_description.cfm?aid=8608947&icde=23333523&ddparam=&ddvalue=&ddsub=&cr=3&csb=default&cs=ASC

3.1c. A list of current research activity of all primary faculty identified in Criterion 4.1a. including amount and source of funds, for each of the last three years. These data must be presented in table format and include at least the following information organized by department, specialty area or other organizational unit as appropriate to the school: a) principal investigator, b) project name, c) period of funding, d) source of funding, e) amount of total award, f) amount of current year's award, g) whether research is community based and h) whether research provides for student involvement.

Measures in this section include the Dean of the SPH. He is actively involved in publishing and presenting research papers, books, book chapters, etc. Research activity for the following table and all research measures includes extramural, intramural and other funded and in-kind research conducted by faculty members.

Table 3.1c.1 Research Activity of Full-time Faculty for Each of the Last 3 Academic Years (2012-2013 to 2015-2016)
(Faculty includes all Full-time faculty employed during the Respective Academic Year.)

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community-Based Y/N	Student Participation Y/N
HPV Vaccine Practices Among Physicians Serving High-Risk, Minority Populations	Abraham Aragones, MD, MSCI (Former CHSC Faculty Member) Denise Bruno, MD, MPH CHSC, Co-I	National Institutes of Health	9/29/2009-8/31/2012	\$158,625	\$0 No cost extension				Y	N
Efficacy and Sustainability Evaluation of PATH a Childhood Obesity Program	Aimee Afable, PHD, MPH (CHSC)	Downstate Medical Center's Health Disparities Pilot Funding Initiative	7/1/15-6/30/16	\$49,883				\$45,726	Y	Y
Brownsville Action Community for Health Equality	Karen E. Benker, MD, MPH (HPMG) Subcontract to Brooklyn Perinatal Network	Centers for Disease Control	9/1/2007-8/31/2012	\$100,000	\$5,000				Y	N

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016 (continued)										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community-Based Y/N	Student Participation Y/N
Minority Based Community Clinical Oncology Program	Karen E. Benker, MD, MPH (HPMG) Associate/Site PI, Co-I Dr. Benker provided in-kind effort to this project. William Solomon, MD, Downstate Medical Center, College of Medicine, Department of Medicine, PI	National Cancer Institute	7/1/2010-6/30/2015	\$0	\$0	\$0	\$0		Y	Y
Open Doors Program: Development of New Advanced Certificates in Public Health	Karen E. Benker, MD, MPH (HPMG)	State University of New York High Needs Program	10/1/2014-9/30/2015	\$74,000			\$49,333	\$24,667	Y	N
Evaluation of Health and Safety capacity Building Program	Dee Burton, PhD (Former CHSC Chair)	American Federation of Teachers	3/1/2012-12/31/2012	\$6,000	\$4,200				Y	N
Burch Minority Leadership Development Program	LeConté J. Dill, DrPH, MPH (CHSC)	Kaiser Permanente and Institute for Alternative Futures	1/6/2014-1/5/2016	\$10,000		\$2,500	\$5,000	\$2,500	Y	N

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016 (continued)										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community-Based Y/N	Student Participation Y/N
Alternate Routes: Examining Risk and Resilience among Black Girls in Brooklyn	LeConté J. Dill, DrPH, MPH (CHSC)	Downstate Medical Center's Health Disparities Pilot Funding Initiative	7/1/15-6/30/16	\$29,711				\$27,235	Y	Y
Evaluating the Effectiveness of the Text4Baby Program in Flatbush Brooklyn	Laura A. Geer, PHD, MHS (EOHS) Consultant: Leone Waltrous, MD, MPH, CLC (HPMG)	Downstate Medical Center's Health Disparities Pilot Funding Initiative	7/1/15-6/30/16	\$50,000				\$45,833	Y	Y
Association of Work Stress and Obesity: Analysis of NIOSH Quality of Work Life Surveys	Paul A. Landsbergis, PhD, MPH, EdD (EOHS) Co-I: Usha Govindarajulu, PhD, MS Co-I: Stephanie Myers, MPH, (DrPH Candidate in Environmental and Occupational Health)	Universities Occupational Health and Safety Education Research Center, NIOSH and CDC	4/1/2015-3/31/2016	\$9,973			\$1,663	\$8,310	Y	Y

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016 (continued)										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community -Based Y/N	Student Participation Y/N
Ergonomics, Vibration, Musculoskeletal Disorders and Cardiovascular Disease in Railroad Maintenance of Way Workers	Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	The Brotherhood of Maintenance of Way Employees Division of the International Brotherhood of Teamsters	9/1/2015-12/31/2016	\$111,519				\$62,729	Y	Y
Improving Transit Bus Operator Health, Wellness and Retention	Paul A. Landsbergis, PhD, MPH, EdD (EOHS) Subcontract to Transportation Learning Center, Robin Gillespie, PI	Transportation Review Board	10/24/2011-4/13/2013	\$20,000	\$12,276				Y	N
Work Characteristics, Alcohol Use Disorders, and Occupational Injury.	John Meyer, MD, MPH (EOHS)	NIOSH	11/1/2011-8/31/2013	\$153,000	\$30,293	\$0 No cost extension			Y	N
Preventing HIV Transmission By Recently-Infected Drug Users	Janet E. Rosenbaum, PhD (EPID) PI Subcontract to S. Friedman, National Development and Research Institutes, Inc. (NRDI), PI	National Institute on Drug Abuse	10/1/2012-8/31/2013	\$20,000	\$16,000	\$4,000			Y	N

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016 (continued)										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community-Based Y/N	Student Participation Y/N
Suspending Society's Obligations: Adolescent School Outcomes And Risk Behaviors Under Differing School Discipline Policies	Janet E. Rosenbaum, PhD (EPID)	Spencer Foundation	8/1/2010-7/31/2016	\$10,300	\$642	\$3,746	\$3,225		Y	N
Impact of Psychosocial Variables, Adherence and Ethnicity on Outcomes after Cardiac Surgery in an Inner-City Predominantly Black Population	Rebecca Schwartz, PhD (Former CHSC Faculty Member), Co-Investigator P. Supino, University Hospital, SUNY Downstate Medical Center, PI	Dean's Research Pilot Grant, SUNY Downstate Medical Center	9/1/2011-8/31/2012	\$14,723	\$3,681				Y	N
Prevalence of DSM-IV Disorders in a Multi-Center HIV+ Women's Cohort	Rebecca Schwartz, PhD (Former CHSC Faculty Member) Subcontract from University of Illinois at Chicago (UIC), J. Cook, PI	National Institute of Mental Health and National Institute on Drug Abuse	1/1/2010-12/31/2012	\$135,619	39,556				Y	N

Table 3.1c.1 Research Activity For Full-time Faculty Academic Years 2012-2013 to 2015-2016 (continued)										
Project Name	Principal Investigator & Concentration	Funding Source	Funding Period Start/End	Amount Total Award	Amount 6/1/2012-5/31/2013	Amount 6/1/2013-5/31/2014	Amount 6/1/2014-5/31/2015	Amount 6/1/2015-5/31/2016 (To Date)	Community -Based Y/N	Student Participation Y/N
Work-Family Conflict and Workplace Support: Knowledge of and Barriers to Services	Mira G. Sheff, PhD, MS (EOHS)	Center for Promotion of Health in the New England Workplace	2/1/2012-1/31/2013	\$18,250	\$12,167				N	N
Study The Microbiome and Metagenome of the Built Environment of NYC	Michael G. Walsh, PhD, MPH, Co-PI Christopher E. Mason, PhD, Weill Cornell Medical Center, PI	None	Summer 2013- Ongoing Collaboration						Y	Y
Advancing HIV Prevention Initiative	Tracey E. Wilson, PhD (CHSC).	Centers for Disease Control and Prevention	9/28/2007-9/27/2012	\$1,443,339	\$40,595				N	N
Barbershop Talk: HIV Prevention for African-American Men	Tracey E. Wilson, PhD (CHSC) Michael A. Joseph, PhD, MPH (EPID) Co-Investigator	National Institute on Minority Health and Health Disparities	6/14/2012-1/31/2017	\$1,041,687 (To Date) Awarded Annually	\$244,121	\$218,424	\$338,623	\$240,879 +Pending Annual award	Y	N
Brooklyn Health Disparities Center	Tracey E. Wilson, PhD (CHSC), Co-PI	National Center on Minority Health and Health Disparities	9/20/2009-7/31/2012	\$1,299,657	\$119,237				N	N
Totals for Academic Years 2012-2013 to 2014-2015				\$4,644,767	\$527,768	\$228,670	\$397,844	\$457,879		

3.1d. Identification of measures by which the school may evaluate the success of its research activities, along with data regarding the school's performance against those measures for each of the last three years. For example, schools may track dollar amounts of research funding, significance of findings (e.g., citation references), extent of research translation (e.g., adoption by policy or statute), dissemination (e.g., publications in peer-reviewed publications, presentations at professional meetings) and other indicators.

- Total Extramural/Other Research Funding Per Academic Year
- Research Dollars Per Full-time Equivalent (FTE) Faculty
- Extramural/Other Research Funding and Indirects as a Percentage of the Total Budget
- % of Full-time faculty engaged in community based public health research
- % of Full-time faculty secure extramural public health grant or contract funding.
- Conduct of bench-to-population translational research with basic science or clinical partners by 2018
- # of articles published by faculty published in peer-reviewed journals, books or book chapters on public health issues
- % of Full-time Faculty Publishing Articles in Peer-Reviewed Journals, Books or Book Chapters Per Year on Public Health Issues
- # of scientific presentations or poster presentations made by faculty at national meetings
- % of Full-time Faculty Scientific Presentations or Poster Presentations Annually at National Meetings
- Hold continuing public health research/education seminars each month, to which professionals from throughout the Medical Center and the community are invited.

Table 3.1d.1: Total Extramural/Other Research Funding Per Academic Year (Total Research Funding = Research Dollars + Indirect Dollars)					
Outcome Measure	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
Total Research	\$500,000	\$527,768	\$228,670	\$397,844	\$457,879

Table 3.1d.2: Research Dollars Per Full-time Equivalent (FTE) Faculty [Research Funding = Direct Grant Dollars + Indirect Dollars]									
Outcome Measure	Target	2012-2013		2013-2014		2014-2015¹⁴		2015-2016 (Projected/To Date)	
		# of FTE Faculty	Research Dollars Per FTE Faculty	# of FTE Faculty	Research Dollars Per FTE Faculty	# of FTE Faculty	Research Dollars Per FTE Faculty	# of FTE Faculty	Research Dollars Per FTE Faculty
Research Dollars Per (FTE) Faculty	\$20,000	24.0	\$23,989	24.0	\$10,394	21.0	\$18,945	23.0	\$19,908

The very challenging environment for obtaining extramural funding has made it very difficult for junior faculty, who comprise most of our faculty complement, to be successful in obtaining grants.

¹⁴ Number of FTE Faculty in 2014-2015 is 21 due to the vacant positions in recruitment.

Table 3.1d.3: Research Direct Funding and Indirects as a Percentage of the Total Budget Total Budget = Total Sources of Funds for Academic Year detailed in Table 1.6.b (Tuition and Fees, University Funds, Grants/Contracts, Indirect Cost Recovery and Gifts)							
Outcome Measure	Target	2012-2013			2013-2014		
Research Funding as a Percentage of the Total Budget		Research Funding	Total Budget	% of Total Budget	Research Funding	Total Budget	% of Total Budget
	20%	\$527,768	\$4,665,172	11%	\$228,670	\$4,175,598	6%
Table 3.1d.3: Research Direct Funding and Indirects as a Percentage of the Total Budget Total Budget = Total Sources of Funds for Academic Year detailed in Table 1.6.b (Tuition and Fees, University Funds, Grants/Contracts, Indirect Cost Recovery and Gifts) (continued)							
Outcome Measure	Target	2014-2015			2015-2016 (To Date)		
Research Funding as a Percentage of the Total Budget		Research Funding	Total Budget	% of Total Budget	Research Funding	Total Budget	% of Total Budget
	20%	\$397,844	\$4,609,668	12%	\$457,879	\$4,685,385	10%

Research Outcome Measures Table

Table 3.1d.4: Research Outcome Measures for 2012-2013 to 2015-2016 (Projected)					
Outcome Measure	Target	2012-2013	2013-2014	2014-2015	2015-2016 (To Date)
% Of Full-time Faculty Engaged In Community Based Public Health Research	60% Annually	33%	25%	29%	30%
% Of Full-time Faculty Securing Public Health Research Funding	55% Annually	38%	21%	24%	26%
Conduct Bench-To-Population Translational Research With Basic Science Or Clinical Partners	Initiate this type of research in 2018	---	---	---	---
# Of Articles Published By Faculty Published In Peer-Reviewed Journals, Books Or Book Chapters On Public Health Issues	30 Annually	38	38	42	These data will be provided at the site visit.
% of Full-time Faculty Publishing Articles in Peer-Reviewed Journals, Books or Book Chapters Per Year on Public Health Issues	40%	58%	46%	67%	
# Of Scientific Presentations Or Poster Presentations Faculty Made At National Meetings	25 Annually	31	17	28	
% of Full-time Faculty Scientific Presentations or Poster Presentations Annually at National Meetings	30%	46%	42%	43%	
Hold Continuing Public Health Education/Research Seminar Per Month, To Which Professionals From Throughout The Medical Center And The Community Are Invited	12 Annually	6	13	8	

Table 1.2c.2: Explanation of Outcome Targets Not Met (Partial Table-Complete Table on p. 21)		
Outcome Measure	Target	Rationale For Not Meeting Target
% of Full-time Faculty Engaged in Community Based Public Health Research	60% Annually	The very challenging environment for obtaining extramural funding has made it very difficult for junior faculty, who comprise most of our faculty complement, to be successful in obtaining grant. This impacts on the faculty's ability to engage in community public health research.
% of Full-time Faculty Securing Extramural or Other Public Health Grant or Contract Funding	55% Annually	The very challenging environment for obtaining extramural funding has made it very difficult for junior faculty, who comprise most of our faculty complement, to be successful in obtaining grants.
Hold Continuing Public Health Education/Research Seminar Per Month, To Which Professionals From Throughout The Medical Center And The Community Are Invited	12 Annually	A change in the faculty member responsible for organizing the Continuing Public Health Research Seminars resulted in a slight decline in the number of seminars conducted in the past year. We hope to meet this target in the coming academic year.

3.1e. Description of student involvement in research.

Students are encouraged to participate in research projects on all levels. The Field Experience and the Culminating Experience are often research projects. In addition, students frequently present abstracts or posters at conferences, such as the APHA Annual Meeting and Exposition. Opportunities for presentations at conferences are posted on the SPH Bulletin Board and e-mailed to the student body. Faculty may assist students with professional presentations.

Student accomplishments are acknowledged in school-wide e-mails and listed in the Downstate Medical Center's Student Affairs Newsletter. A number of examples of student research accomplishments are presented below:

Selected Grants Received:

- Stephanie Myers, MPH, (DrPH Candidate in Environmental and Occupational Health) Awarded a **\$10,000** Pilot Project Grant for the year 2015 from the Universities Occupational Safety and Health Education and Research Center, funded by the National Institute for Occupational Safety and Health (NIOSH), CDC. Miss Myers wrote the proposal for this grant in cooperation with Paul A. Landsbergis, PhD, MPH, EdD, PI and Usha Govindarajulu, PhD, MS, Co- PI. The grant is designed to help her conduct her dissertation research titled "**Association of Work Stress and Obesity: Analysis of NIOSH Quality of Work Life Survey**"
- Nathan Boucher, PA-C, MS, MPA, CPHQ (DrPH Candidate in Community Health Sciences) Awarded a two year post-doctoral fellowship in aging and health services research at the Durham, N.C. VA Medical Center/Duke University.

Selected Article Citations:

- Wyatt B, Mingo CA, Waterman MB, White P, Cleveland RJ, Callahan LF. Impact of the Arthritis Foundation's Walk With Ease Program on Arthritis Symptoms in African Americans. *Prev Chronic Dis* 2014;11:140147. DOI:<http://dx.doi.org/10.5888/pcd11.140147>.
- Boucher NA, Guadalupe E, Lara L, Alejandro M. Health Care and End-of-Life Decisions: Community Engagement with Adults in East Harlem. *Journal of Community Health* 2014;39(6):1032-1039.doi:10.1007/s10900-014-9929-4.
- Boucher NA, McMillen MA, Gould JS. Agents for change: non-physician medical providers and health care quality. *Perm J* 2015 Winter; 19(1):90-93. <http://dx.doi.org/10.7812/TPP/14-095>

Student Presentations at National Conferences:

2012 APHA Annual Meeting and Exposition (San Francisco):

- Robin Brehm (MD/MPH student) and Rebecca Cohen (MD/MPH student):
Sex in Medicine Week: Addressing Shortcomings In Sexual Health Education (Poster)
- Waqas Shaikh (MD/MPH student):
Missing Data On Melanoma Tumor Thickness In The United States And Its Consequences (Poster)

2013 APHA Annual Meeting and Exposition (Boston):

- Robin Brehm (MD/MPH student):
Pharmacy Deserts? Using Geographic Information Systems (GIS) To Map Potential Disparities In U.S. Pharmacy Access (Poster)
- Yousra Yusuf (MPH student):
Gender Differences In Self-Efficacy And Behavior Outcomes Among Diabetic Bangladeshis In New York City (Poster)

2014 APHA Annual Meeting and Exposition (New Orleans):

- Nathan Boucher (DrPH student):
Beyond The Bedside: Promoting The Palliative Paradigm In The Community (Oral Presentation)
- JoAnn DiLernia (DrPH student):
Effect Of Domestic Violence On Contraceptive Use Among Adolescents In Nicaragua (Oral Presentation)

2014 Consortium of Universities for Global Health (CUGH)

- Erin Andrews (DrPH student):
Acculturation and Obesity in Caribbean Immigrants (Poster)
- Nidhi Shree Karingula (MPH student):
1) Cultural And Behavioral Attitudes Of Hyderabad's On Diabetes (Poster)
2) Evidence Based Review of Diabetes Prevention and Management In The Developing World (Poster)
- Imraan Khan (MPH student):

Effectiveness of Mobile Technology Health Behavior and Chronic Disease Management Interventions: A Meta-Analysis (Poster)

- Shuntelle Stephen (MPH student):
Acting Locally To Address Global Sex Trafficking (Poster)
- Anila Thomas (MPH student):
Acting Locally To Address Global Sex Trafficking (Poster)
- Jinu Thomas (MPH student):
Maternal Exposure to EDCs from Consumer Products: Comparison of Levels in a Caribbean Immigrant Population in the U.S. to National and Global Levels (Poster)
- Erika Usui (MD/MPH student):
Acting Locally To Address Global Sex Trafficking (Poster)

2014 National Association for Healthcare Quality 39th Annual Conference, Nashville, TN.

- Nathan Boucher (DrPH student)
"You gotta be heard": Patient Voices from Spanish Harlem Guiding End-of-Life Care Quality (Paper Presentation)

2015 8th International Conference on Ethics in Biology, Engineering and Medicine, Brooklyn, NY

- Nathan Boucher (DrPH student)
Made-to-measure palliative care: an ethical imperative for growing cultural plurality in the United States. (Paper Presentation)

3.1f. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

SPH faculty and students are encouraged to engage in public health research, particularly research that is community-based. The SPH provides support for faculty and students who travel to conferences to present posters or papers to defray the cost of their travel. The SPH employs an Associate Dean for Research Administration to oversee the research in SPH and to mentor junior faculty. The SPH also employs a Contract Manager who assists faculty in preparing and submitting grant proposals. In addition, she tracks all grant proposals submitted and grants received, providing a bi-annual report on research activities to the Deans and Chairs.

Weaknesses:

The SPH has many junior level faculty. Though they are being mentored, a number of them, due to current national circumstances, face challenges in obtaining extramural funding.

Plans:

Continue to work with junior faculty to explore more opportunities for extramural funding.

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.

Required Documentation. The self-study document should include the following:

3.2a. Description of the school's service activities, including policies, procedures and practices that support service. If the school has formal contracts or agreements with external agencies, these should be noted.

The School of Public Health is dedicated to serving the communities in its catchment area and beyond, in the tradition of the larger Downstate Medical Center. Toward that end, numerous service activities are undertaken annually in pursuit of that goal. The Vision and Mission Statements of the School reflect this commitment to service. The commitment to service is reinforced by the school's core values and particularly those which emphasize excellence in teaching, scholarly endeavors and community and professional service. The School's commitment to service is deeply integrated into all of its educational and research activities.

The School is involved in a number of community partnerships which are reflective of its commitment to community based learning and collaboration. Dr. Karen Benker, Associate Dean for Community Public Health Affairs provides a very strong linkage between the School, its faculty, and students with community-based groups. She also facilitates opportunities for students to engage in community based service activities among underserved populations in Brooklyn. Dr. Benker oversees student involvement in community based learning within the context of the practical Field Experience. Dr. Benker, as well as Dr. Mira Grice, Assistant Professor in the Department of Environmental and Occupational Health Sciences work closely with the School's Community Advisory Group which regularly meets to discuss community public health concerns and broad issues related to the School's educational, research and service activities.

Many SPH faculty are actively involved in service activities within the community. In addition, Downstate administrative staff work with the faculty of the SPH to facilitate community service activities. Below are some selected examples:

Dr. Michael A. Joseph, Assistant Professor of Epidemiology is heavily involved with a variety of community projects. For example, Dr. Joseph volunteers a significant amount of time at the Magner Career Center at Brooklyn College. The Magner Center provides students with a vast array of services and programs to assist them in attaining their career goals. For the past three years, in his role as Mentor and Speaker to students affiliated with the Center, Dr. Joseph has shared his educational experiences in public health and offered career advice through inspiring talks such as: "Finding Your First Job In The Health Sciences," "Internships In The Sciences And Research," and "What Can You Do With A Major In Epidemiology?" He facilitated a panel called "Secrets of the Highly Successful Latino/Black Male," to focus on the particular challenges facing Latino and African-American males who strive to become professionals in their respective fields. Dr. Joseph consistently receives high praise in student evaluation of his talks, and he takes great personal interest in inspiring students to excel both academically and personally. More information about Dr. Joseph's mentoring can be seen at the Magner Career Center website: <http://www.brooklyn.cuny.edu/web/academics/centers/magner/alumni/faq.php>.

Dr. Gerald Deas, Research Assistant Professor of Community Health Sciences (CHSC), has established an extensive network of community organizations with which he regularly interacts in the interests of promoting disease prevention and wellness. His activities include regular cable television and radio broadcasts on public health and wellness topics directed to broad audiences in New York City, and especially in Brooklyn. Dr. Deas also writes a regular column for a number of local newspapers and for the Amsterdam News, whose readership is primarily African-American.

He brings to the Dean public health concerns of various community groups and thus acts as a catalyst for curriculum content modification.

Michael Harrell, MPA, Assistant Vice President for Community and Government Relations for the Medical Center, brings community public health concerns to the attention of the administration and faculty of the School, and facilitates collaborative public health oriented health promotion and disease prevention activities.

Maria Yomtov, RN, MSN, CDE, the Director of the Center for Community Health Promotion and Wellness at Downstate, works very closely with the SPH faculty and students on a range of community outreach public health initiatives, including health fairs, special programs focused on issues as diverse as childhood immunizations and the prevention and treatment of prostate cancer.

All the policies and procedures which apply to research activities conducted at SUNY Downstate and listed in Criterion 3.1a above (pp. 182-186) apply to all service activities undertaken by faculty and students of the SUNY Downstate School of Public Health. All the policies and procedures which apply to research activities conducted at SUNY Downstate and listed in Criterion 3.1a apply to all service activities undertaken by faculty and students of the SUNY Downstate School of Public Health.

3.2b. Description of the emphasis given to community and professional service activities in the promotion and tenure process.

The School of Public Health puts great emphasis on community and professional service. The promotion and tenure process is governed by the overall regulations of the SUNY Board of Trustees and the Union of University Professionals as stated above in *Criterion 1.3.c – personnel recruitment, selection and advancement, including faculty and staff* (p.27-29). In addition, the SPH has a Faculty Governance (Sub-) Committee on Academic and Professional Qualifications (CAPQ) of the Executive Committee of the Faculty and Professional Staff Assembly. The policies and procedures for this Committee are detailed in the School Of Public Health, Faculty and Professional Staff Constitution and By-Laws (Resource File). The SPH CAPQ Committee differs slightly from that of the College of Medicine and the School of Graduate Studies at Downstate in that the emphases on teaching and service are greater than in the other institutions. The SPH has a tenure track specifically dedicated to teaching and service. This track is called the Education and Community/Professional Service track. The weighting of requisite teaching and service activities is equivalent to the requisite weight of research activities. As stated in the SPH CAPQ guidelines:

(b) Education and Community/Professional Service Track

The Education and Community/Professional Service Track is a Full-time tenure eligible track in the SPH for faculty whose central contribution to the university involves major teaching responsibilities and major involvement in professional and community service. This track is appropriate for faculty whose principal efforts are largely devoted to teaching and professional and community service, but who are also productive in the areas of scholarship/research, but to a lesser degree than those faculty in the Academic Track. Promotions in this track are based on clear and reasonable expectations. The campus titles (and official SUNY titles) for this track are Assistant Professor or Clinical Assistant Professor, Associate Professor, and Professor.

3.2c. A list of the school's current service activities, including identification of the community, organization, agency or body for which the service was provided and the nature of the activity, over the last three years.

**Table 3.2c.1: Service Activity of Full-time Faculty for the Last 3 Academic Years
2012-2013 to 2014-2015**

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Aimee Afable, PhD, MPH (CHSC)	Program Chair Elect/Program Chair	American Public Health Association	Asian, Pacific Islanders Caucus	2012-2013, 2013-2014, 2014-2015
Aimee Afable, PhD, MPH (CHSC)	Peer Reviewer	Ammons Scientific	Scientific Journal	2014-2015
Aimee Afable, PhD, MPH (CHSC)	Peer Reviewer	Journal of Immigrant and Minority Health	Scientific Journal	2014-2015
Aimee Afable, PhD, MPH (CHSC)	Peer Reviewer	Maternal and Child Health Journal	Scientific Journal	2014-2015
Philippe Amstislavski, PhD, MArch, MEM (Former EOHS Faculty Member)	Abstract Reviewer	American Public Health Association	Indigenous Peoples Caucus	2012-2013, 2013-2014
Philippe Amstislavski, PhD, MArch, MEM (Former EOHS Faculty Member)	Board Member	American Association of Geographers	Polar Geography Specialty Group	2012-2013, 2013-2014
Karen E. Benker, MD, MPH (HPMG)	Chair	Brownsville Multi-Service Family Health Center	Research Committee	2012-2013, 2013-2014, 2014-2015
Karen E. Benker, MD, MPH (HPMG)	Chair	Brownsville Multi-Service Family Health Center	Total Quality Management Committee	2012-2013, 2013-2014, 2014-2015
Karen E. Benker, MD, MPH (HPMG)	Member, Board of Directors	Brownsville Multi-Service Family Health Center	Responsible for Operations of Non-Profit Organization	2012-2013, 2013-2014, 2014-2015
Karen E. Benker, MD, MPH (HPMG)	Member, Board of Directors	Bridging Access to Care	Responsible for Operations of Non-Profit Organization	2012-2013, 2013-2014, 2014-2015
Karen E. Benker, MD, MPH (HPMG)	Member, Executive Committee	Brownsville Multi-Service Family Health Center	Sub-Committee of the Board of Directors	2012-2013, 2013-2014, 2014-2015
Karen E. Benker, MD, MPH (HPMG)	Member	Bridging Access to Care	Incident Review Committee	2014-2015
Karen E. Benker, MD, MPH (HPMG)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Grant Reviewer	Health Resources and Services Administration		2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Member	Kings County Hospital	Scholarly Oversight Committee-Pediatric Emergency Medicine Fellows	2012-2013, 2013-2014, 2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Member, Working Group	American Schools of Public Health	Global Health Core Competencies Development Project, Core Workgroup Domain Three	2012-2013

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Denise M. Bruno, MD, MPH (CHSC)	Peer Reviewer	American Journal of Public Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Peer Reviewer	Journal of Healthcare for the Poor and Underserved	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Denise M. Bruno, MD, MPH (CHSC)	Peer Reviewer	Vaccine	Scientific Journal	2013-2014, 2014-2015
Dee Burton, PhD (Former CHSC Chair)	Member, Committee on HIV/AIDS	United Nations	Non-Governmental Organization	2012-2013, 2013-2014
Dee Burton, PhD (Former CHSC Chair)	Peer Reviewer	American Journal of Public Health	Scientific Journal	2012-2013, 2013-2014
Dee Burton, PhD (Former CHSC Chair)	Peer Reviewer	Health Education and Behavior	Scientific Journal	2012-2013, 2013-2014
Dee Burton, (PhD) (Former CHSC Chair)	Peer Reviewer	Nicotine and Tobacco Research	Scientific Journal	2012-2013, 2013-2014
Barbara Delano, MD, MPH (CHSC)	Peer Reviewer	American Journal of Kidney Disease	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Barbara Delano, MD, MPH (CHSC)	Peer Reviewer	Dialysis & Transplantation	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Barbara Delano, MD, MPH (CHSC)	Peer Reviewer	Journal of Community Health	Scientific Journal	2014-2015,
Barbara Delano, MD, MPH (CHSC)	Peer Reviewer	Nephrology News and Issues	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
LeConté J. Dill, DrPH, MPH (CHSC)	Contributor	Right to the City Alliance	Rise of the Renter Nation: Solutions to the Housing Affordability Crisis. A Report by the Homes For All Campaign	2013-2014, 2014-2015,
LeConté J. Dill, DrPH, MPH (CHSC)	Facilitator	Kings Against Violence Initiative, We Are All Brooklyn	Facilitating Weekly Youth Empowerment Sessions at Wingate High School, Brooklyn, New York	2013-2014, 2014-2015, 2015-2016
LeConté J. Dill, DrPH, MPH (CHSC)	Fellow	We Are All Brooklyn	A Leadership Development Program for Community-Based, Public Sector, and Academic Professionals in Brooklyn	2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
LeConté J. Dill, DrPH, MPH (CHSC)	Member, Board of Directors	California Black Women's Health Project	State-Wide Non-Profit Organization Responsible for Health Education, Policy and Advocacy Work.	2013-2014, 2014-2015
LeConté J. Dill, DrPH, MPH (CHSC)	Member, Board of Directors	The Laundromat Project	A Community-Based Organization With Initiatives in Bedford-Stuyvesant, Harlem, and Hunts Point, that Brings Socially-Relevant and Socially-Engaged Arts Programming to Laundromats and Other Everyday Community Spaces.	2014-2015, 2015-2016
LeConté J. Dill, DrPH, MPH (CHSC)	Moderator	CUNY School of Public Health at Hunter College	Gun Violence as a Public Health Issue	2013-2014
LeConté J. Dill, DrPH, MPH (CHSC)	Scholar	Maryland Center for Health Equity, University of Maryland, College Park	Public Health Critical Race Praxis Institute	2013-2014
LeConté J. Dill, DrPH, MPH (CHSC)	Workshop Participant	Cave Canem	An organization aimed at nurturing African-American poets, through providing writing retreats, workshops, readings, panels, book prizes, and publishing opportunities.	2013-2014, 2014-2015
Daniel C. Ehlike, PhD, MA (HPMG)	Advisor	Brooklyn Free Clinic	Health Policy and Reform in Light of the Affordable Care Act	2012-2013, 2013-2014
Daniel C. Ehlike, PhD, MA (HPMG)	Co-Host	Brooklyn Free Clinic	Technology, Entertainment and Design Global Conferences on Health and Medicine TEDMed Event at	2012-2013
Daniel C. Ehlike, PhD, MA (HPMG)	Keynote Speaker	Brooklyn Free Clinic	Regional Conference of Free Clinics (Bronx)	2013-2014

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Laura A. Geer, PhD, MHS (EOHS)	Chair	National Center for Environmental Health	Center for Environmental Health under Centers for Disease Control and Prevention (CDC) Special Emphasis Panel, ZEH1 FXR 02 R Review Committee	2012-2013
Laura A. Geer, PhD, MHS (EOHS)	Peer Reviewer	Environmental Health	Scientific Journal	2012-2013, 2013-2014
Laura A. Geer, PhD, MHS (EOHS)	Peer Reviewer	Environmental Research	Scientific Journal	2012-2013, 2013-2014
Laura A. Geer, PhD, MHS (EOHS)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014
Laura A. Geer, PhD, MHS (EOHS)	Peer Reviewer	Journal of Exposure Science and Environmental Epidemiology	Scientific Journal	2012-2013, 2013-2014
Laura A. Geer, PhD, MHS (EOHS)	Peer Reviewer	Environmental Science and Technology	Scientific Journal	2014-2015
Laura A. Geer, PhD, MHS (EOHS)	Presenter	Brooklyn Queens Long Island Area Health Education Center	Academy for Health Careers High School	2012-2013, 2013-2014
Laura A. Geer, PhD, MHS (EOHS)	Volunteer	Brooklyn Free Clinic	Technology, Entertainment and Design Global Conferences on Health and Medicine (TEDMed) event	2012-2013
Usha Govindarajulu, PhD, MS (BIOS)	Associate Editor	Computational Statistics	Scientific Journal	2013-2014, 2014-2015
Usha Govindarajulu, PhD, MS (BIOS)	Peer Reviewer	Journal of Allergy and Clinical Immunology	Scientific Journal	2013-2014, 2014-2015
Usha Govindarajulu, PhD, MS (BIOS)	Peer Reviewer	Statistics in Medicine	Scientific Journal	2013-2014
Usha Govindarajulu, PhD, MS (BIOS)	Publications Officer	American Statistical Association	Section on Statistical Computing	2013-2014, 2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Grant Writer/ Advisor	Brooklyn Parkinson's Group (BPG)	Leading the Downstate contingent in obtaining grant funding to establish a Flatbush branch of BPG.	2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Elizabeth Helzner, MS, PhD (EPID)	Member	American Public Health Association	Aging and Public Health Section	2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	American Journal of Audiology	Scientific Journal	2012-2013
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Archives of Neurology	Scientific Journal	2012-2013
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Canadian Medical Association Journal	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Ear and Hearing	Scientific Journal	2013-2014, 2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Journal of the American Geriatrics Society	Scientific Journal	2013-2014, 2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Elizabeth Helzner, MS, PhD (EPID)	Peer Reviewer	Journal of Industrial Medicine	Scientific Journal	2012-2013
Pascal J. Imperato, MD, MPH&TM (Dean)	Chair	New York State Optometric Evaluation Review Committee	Approving Expanded Scope of Practice for Optometrists	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Director	Center for Global Health, School of Public Health	Oversight of all Global Health Activities, locally and abroad, in the SPH	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Editor	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Editorial Board Member	American Journal of Chinese Medicine	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Editorial Board Member	Journal of Public Health Practice and Management	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Editorial Board Member	The PHAROS	Scientific Journal	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Member	Advisory Council to the New York City Department of Health and Mental Hygiene	Advising the Commissioner of the Department on Public Health Policies and Programs	2012-2013, 2013-2014, 2014-2015, 2015-2016

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Pascal J. Imperato, MD, MPH&TM (Dean)	Member	Global Health Committee, ASPPH	Formulating Policies on Global Health for ASPPH	2012-2013, 2013-2014, 2014-2015, 2015-2016
Pascal J. Imperato, MD, MPH&TM (Dean)	Member	Nicholas A. Rango HIV Scholars Program Advisory Group, New York State Department of Health	Advising on Awards in the Area of HIV/AIDS	2012-2013, 2013-2014, 2014-2015, 2015-2016
Michael A. Joseph, PhD, MPH (EPID)	Co-Chair/Member	Bedford Central Presbyterian Church, Brooklyn, NY	Healing Touch HIV/AIDS Ministry	2012-2013, 2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Co-Director	Brooklyn Health Disparities Center	Community Engagement Core	2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Director	Brooklyn Health Disparities Center	Training/Education Core	2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Instructor	Bedford Central Presbyterian Church, Brooklyn, NY	Free SAT Preparatory Workshop Series	2012-2013
Michael A. Joseph, PhD, MPH (EPID)	Member	Bedford Central Presbyterian Church, Brooklyn, NY	Health Ministry	2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Member, Board of Directors	Institute for Community Living, New York, NY	Oversight of operations for non-profit organization providing case management for people with intellectual and developmental disabilities.	2012-2013, 2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Member, Editorial Board	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Mentor	PRISM for Youth Program, Medgar Evers College Preparatory School, Brooklyn, NY	Program which encourages under-represented minority high school students to pursue health professions.	2012-2013
Michael A. Joseph, PhD, MPH (EPID)	Mentor and Speaker	Magner Center for Career Development and Internships, Brooklyn College	Organization that assists students with internship and career opportunities.	2013-2014, 2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Michael A. Joseph, PhD, MPH (EPID)	Mentor and Speaker	Manhattan-Staten Island Area Health Education Center	Non-profit organization that exposes students from diverse backgrounds to health professions.	2013-2014, 2014-2015
Michael A. Joseph, PhD, MPH (EPID)	Peer Reviewer, Ad-hoc	American Journal of Public Health	Scientific Journal	2013-2014, 2014-2015
Florence Kavalier, MD, MPH (Former HPMG Chair)	Member	New York State Board for Medicine	Physician Licensure Review	2012-2013, 2013-2014
Florence Kavalier, MD, MPH (Former HPMG Chair)	Member	New York State Board for Professional Medical Conduct	Physician Professional Review	2012-2013, 2013-2014
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Abstract Reviewer	American Public Health Association	Occupational Health and Safety Section	2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Advisor	American Federation of Teachers	National Quality of Work Life in Education survey	2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Deputy Editor	American Journal of Industrial Medicine	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Fellow	US Academy on Workplace Bullying, Mobbing and Abuse	Workplace Security and Safety	2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	American Public Health Association	Scientific Awards Review Committee, Occupational Health and Safety Section	2012-2013, 2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	Center for the Promotion of Health in the New England Workplace (CPH-NEW)	Advisory Committee	2012-2013, 2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	Harvard School of Public Health (HSPH) Center for Work, Health, and Well-being	Advisory Committee	2012-2013, 2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	In the Public Interest	Scholars Network	2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	International Congress on Occupational Health, South Adelaide, Australia	Scientific Committee, Work Organization and Psychosocial Factors	2013-2014, 2014-2015
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member	Scholars Network	In the Public Interest	2013-2014
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Member, Editorial Board	New Solutions	Scientific Journal	2012-2013, 2013-2014, 2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Organizer	Labor Research and Action Network	Annual Conference, Workshop on Occupational Health and Public Health	2012-2013
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Presentation Reviewer	NIOSH/American Psychological Association Work, Stress and Health Conference, Los Angeles, 2013	Best Intervention Competition	2012-2013
Paul A. Landsbergis, PhD, MPH, EdD (EOHS)	Witness Providing Testimony	New York City Council Finance Committee	Occupational Stress and Health of Call Center Workers	2012-2013
Judith H. LaRosa, PhD, RN (Vice-Dean)	Board Member/Advisory Board Member	Bedford Stuyvesant Family Health Center		2012-2013, 2013-2014
Judith H. LaRosa, PhD, RN (Vice Dean)	Member	Brooklyn American Heart Association		2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Member	Long Island University	Aha! Inner Leader Conference, Planning Committee	2012-2013
Judith H. LaRosa, PhD, RN (Vice Dean)	Member, Advisory Board	Journal of Community Health	Scientific Journal	2013-2014
Judith H. LaRosa, PhD, RN (Vice Dean)	Member, Editorial Board	Journal of Community Health	Scientific Journal	2013-2014
Judith H. LaRosa, PhD, RN (Vice Dean)	Proposal Reviewer	American Nursing Association Nursing Congress		2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Proposal Reviewer	American Public Health Association		2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Proposal Reviewer	The Association of Schools and Programs of Public Health		2013-2014, 2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Proposal Reviewer	Sigma Theta Tau Honorary Nursing Society		2013-2014, 2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Secretary	Kings Against Violence Initiative (KAVI)		2013-2014, 2014-2015
Judith H. LaRosa, PhD, RN (Vice Dean)	Vice Chair/Member, Advisory Board	Bedford Stuyvesant Family Health Center	Medical Clinic	2013-2014, 2014-2015
John Meyer, MD, MPH (Former EOHS Chair)	Chair	West Virginia University Occupational Medicine Program	Residency Advisory Committee	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Course Director	American College of Occupational and Environmental Medicine	Occupational Medicine Board Review Course	2012-2013, 2013-2014

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
John Meyer, MD, MPH (Former EOHS Chair)	Faculty	American College of Preventive Medicine	Preventive Medicine Board Review Course	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Impartial Medical Specialist	New York State Workers' Compensation Board		2012-2013, 2013-2014
John Meyer, MD, MPH (Former EOHS Chair)	Member	American College of Occupational and Environmental Medicine	Maintenance of Certification Committee	2012-2013, 2013-2014
John Meyer, MD, MPH (Former EOHS Chair)	Member	CDC/NIOSH	Special Emphasis Panel: Training Program Grants (TPG) Review Panel, Nov. 2012	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Member	CDC/NIOSH	SOH (Safety and Occupational Health)	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Member	CDC- NIOSH/National Occupational Research Agenda (NORA)	FY14 Intramural Research: Advancing Program Priorities Grant Review Panel	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Member	Human Resources and Services Administration (HRSA)	Review Panel 12-180. Integrative Medicine Program in Preventive Medicine Residency Training, August 2012	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Member	National Institute of Child Health and Human Development (NICHD)/National Institutes of Health (NIH)	Population Science Study Section	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Member, Editorial Board	Occupational Medicine	Scientific Journal	2012-2013, 2013-2014
John Meyer, MD, MPH (Former EOHS Chair)	Peer Reviewer	American Journal of Industrial Medicine	Scientific Journal	2012-2013, 2013-2014
John Meyer, MD, MPH (Former EOHS Chair)	Peer Reviewer	Journal of Occupational and Environmental Medicine	Scientific Journal	2012-2013, 2013-2014

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
John Meyer, MD, MPH (Former EOHS Chair)	Peer Reviewer	National Institute of Occupational Safety Health (NIOSH) Division of Surveillance, Hazard Evaluations and Field Studies	Government Journal	2012-2013
John Meyer, MD, MPH (Former EOHS Chair)	Peer Reviewer	Occupational Medicine	Scientific Journal	2012-2013, 2013-2014
Simone A. Reynolds, PhD, MPH (EPID)	Executive Board Member	Brooklyn Queens Long Island Area Health Education Center (BQLI-AHEC)	Responsible for Operations of Non-Profit Organization	2013-2014, 2014-2015
Simone A. Reynolds, PhD, MPH (EPID)	Member	National Children's Study	Writing team, Vanguard Phase, Alternative Recruitment Strategy- Provider Based Recruitment (PBR)	2012-2013, 2013-2014, 2014-2015
Simone A. Reynolds, PhD, MPH (EPID)	Organizer/Host	Brooklyn Queens Long Island Area Health Education Center (BQLI-AHEC)	Introduction to Public Health session for The Academy for Health Careers High School	2013-2014
Simone A. Reynolds, PhD, MPH (EPID)	Peer Reviewer	Maternal and Child Health Journal	Scientific Journal	2013-2014
Janet E. Rosenbaum, PhD (EPID)	Abstract Reviewer	American Public Health Association	Applied Public Health Statistics Program	2014-2015
Janet E. Rosenbaum, PhD (EPID)	Member	California Healthy Kids and After School Resource Center	Research Review Board	2012-2013, 2013-2014
Janet E. Rosenbaum, PhD (EPID)	Member	HRSA	Review Panel, R40 Maternal and Child Health Policy Analysis Grant Program	2013-2014, 2014-2015
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Health and Quality of Life Outcomes	Scientific Journal	2014-2015
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Journal of Adolescent Health	Scientific Journal	2012-2013
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Journal of Public Health Policy	Scientific Journal	2014-2015
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Journal of Survey Statistics and Methodology	Scientific Journal	2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Public Library of Science (PLOS) One	On-line Scientific Journal	2012-2013, 2014-2015
Janet E. Rosenbaum, PhD (EPID)	Peer Reviewer	Society for Research on Adolescence	Scientific Journal	2012-2013
Janet E. Rosenbaum, PhD (EPID)	Presentation Reviewer	American Public Health Association	Epidemiology Section	2012-2013
Mira G. Sheff, PhD, MS (EOHS)	Board Member	Brooklyn Queens Long Island Health Education Center	Community-based Organization	2012-2013, 2013-2014
Mira G. Sheff, PhD, MS (EOHS)	Member	Brooklyn Health Report	Advisory Committee	2012-2013
Mira G. Sheff, PhD, MS (EOHS)	Peer Reviewer	Journal of Women's Health	Scientific Journal	2013-2014
Mira G. Sheff, PhD, MS (EOHS)	Peer Reviewer	Women's Health Issues	Scientific Journal	2013-2014
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Member	Regeneron/Sanofi Pharmaceutical Companies	Odyssey Outcomes Clinical Trial Executive Steering Committee	2012-2013, 2013-2014, 2014-2015
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Peer Reviewer	BioMedical Central (BMC) Research Methodology	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Peer Reviewer	Circulation: Cardiovascular Quality and Outcomes	Scientific Journal	2013-2014, 2014-2015
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Peer Reviewer	Journal of the American College of Cardiology	Scientific Journal	2014-2015
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael J. Szarek, PhD, MS (Chair of EPID/BIOS)	Statistical Reviewer	Stroke	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	American Journal of Epidemiology	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	American Journal of Tropical Medicine and Hygiene	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	EcoHealth	Scientific Journal	2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Emerging Themes in Epidemiology	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Journal of Epidemiology and Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Journal of Orthopedic Trauma	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Infection Ecology and Epidemiology	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	International Journal of Parasitology	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Peer J	Scientific Journal	2013-2014, 2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	Medicine	Scientific Journal	2014-2015
Michael G. Walsh, PhD, MPH (EPID)	Peer Reviewer	PLOS Neglected Tropical Diseases	On-Line Scientific Journal	2013-2014, 2014-2015
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Member	Medical Society of the State of New York	Committee to Eliminate Health Care Disparities	2014-2015
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Member	NYC Department of Health	Rooming-in Script Subgroup Committee	2013-2014
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Speaker	Montgomery Owners' Corporation Co-op	Health Education Lecture on "The Importance of Being Immunized"	2014-2015
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Speaker	St. Gabriel's Church	Health Education Lecture on "The Importance of Being Immunized in the Senior Citizen Population"	2014-2015
Leone L. Waltrous, MD, MPH, CLC (HPMG)	Speaker	WATCH High School	Career Day Lecture on "A Day in the Life of an Obstetrician/ Gynecologist"	2014-2015
Tracey E. Wilson, PhD (CHSC)	Abstract Reviewer	American Academy of Health Behavior	Annual Meeting	2013-2014
Tracey E. Wilson, PhD (CHSC)	Associate Editor/Peer Reviewer	Health Behavior and Policy Review	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Tracey E. Wilson, PhD (CHSC)	Member	United States Centers for Disease Control	Special Emphasis Review Panel	2014-2015
Tracey E. Wilson, PhD (CHSC)	Member, Editorial Board/Peer Reviewer	Journal of Community Health	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Tracey E. Wilson, PhD (CHSC)	Member, Executive Committee	Brooklyn Health Disparities Center	Oversee Administration of Organization	2013-2014

Table 3.2c.1: Faculty Service for Academic Years 2012-2013 to 2014-2015 (continued)				
Faculty Member	Role	Organization	Activity or Project	Year(s)
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	AIDS and Behavior	Scientific Journal	2013-2014, 2014-2015
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	AIDS Patient Care and STDs	Scientific Journal	2012-2013
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	American Journal of Health Behavior	Scientific Journal	2012-2013, 2013-2014, 2014-2015
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	Journal of Health Care for the Poor and Underserved	Scientific Journal	2012-2013
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	Journal of Health Education	Scientific Journal	2013-2014
Tracey E. Wilson, PhD (CHSC)	Peer Reviewer	Health Education and Behavior	Scientific Journal	2014-2015

3.2d. Identification of the measures by which the school may evaluate the success of its service efforts, along with data regarding the school's performance against those measures for each of the last three years. See CEPH Outcome Measures Table.

Outcome measures used to evaluate the success of the SPH service activities include:

- Sponsorship/co-sponsorship at least one conference per year for community stakeholders on a major issue in urban or immigrant health.
- % of Full-time Faculty Serving as Peer Reviewers
- Hold continuing public health research/education seminars each month, to which professionals from throughout the Medical Center and the community are invited
- % of faculty participating in external community service activities, including serving on advisory boards

Service Outcome Measures

Table 3.2d.1 Service Outcome Measures for 2012-2013 to 2015-2016 (Projected)					
Outcome Measure	Target	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
% of Full-time Faculty Participating in External Community Service Activities, including Serving on Advisory Boards	75% Annually	88%	100%¹⁵	81%	These data will be provided at the site visit.
% of Full-time Faculty Serving as Peer Reviewers	50% Annually	63%	75%	71%	
Hold Continuing Public Health Education/Research Seminar Per Month, To Which Professionals From Throughout The Medical Center And The Community Are Invited	12 Annually	6	13	8	
Sponsorship/co-sponsorship of Conferences for Community Stakeholders on a Major Issue in Urban or Immigrant Health.	1 Annually	0	1	1	1

¹⁵ 100% reflects a denominator of 24 because one faculty member resigned at the end of December 2013 and another started early in 2014, making the denominator consistent.

3.2e. Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.

Students serve on various SPH Committees as well as in the Student Council and other groups throughout the Medical Center. (See Criterion 1.5a for SPH committees on which students serve.) In addition, some students get involved with Community-based Organizations for which they volunteer during their time at the School of Public Health.

3.2f. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The SPH is dedicated to community service and service to under-served populations. Faculty are required to participate in service activities and level of service is mandatory for promotion and tenure.

Weaknesses:

None.

Plans:

Continue to emphasize community-based service in all SPH documents, initiatives and current activities.

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.

Required Documentation. The self-study document should include the following:

3.3a. Description of the ways in which the school periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.

Dr. Karen Benker, the SPH Associate Dean for Community Public Health Affairs, is heavily involved in working in the communities we serve. She regularly consults with community leaders and is on the Board of Directors of some Community-Based Organizations. Through these activities, she is able to assess the public health and health needs of the various communities in Brooklyn. Through the Deans and Chairs meetings, Dr. Benker transmits this information to the committee, which in turn informs the larger faculty of the needs of the various communities. Faculty then use this information to plan. This information guides the development of Field Experiences for students allowing them to enter into collaborations through which they can help meet community needs. In addition, knowledge of the public health and health needs of the communities informs continuing education seminars for lay and professional audiences at Downstate and in the community.

Faculty and students of the SPH are continuously involved in community projects and activities. There is ample opportunity for interaction with community members and discussion of community needs. These conversations occur in formal and informal settings on an ongoing basis. The more formal needs assessments occur in the meetings of the Community Advisory Group in which community members provide input into SPH curricular offerings, as well as feedback on current educational and other programs in the community. Members of the CAG regularly provide the SPH with information on the continuing education and workplace needs of the various communities we serve throughout Brooklyn.

In addition, the Student Council provides feedback on student activities in the community, and the current public health and continuing education needs of the students and the communities in which they are involved.

3.3b. A list of the continuing education programs, other than certificate programs, offered by the school, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified. Funded training/continuing education activities may be reported in a separate table.

Below is a listing of continuing education offerings by the SPH for the past three years. None of the seminars listed below are offered in a distance-learning format.

Table 3.3b.1: Continuing Education Offerings by the SPH for the Past Three Academic Years			
Academic Year 2012-2013			
Date	Presenter(s)	Topic	Faculty/Students =Number of Participants Served
June 14, 2012	M. Vasudeva Kamath, MD	Hearing Loss Among High-Risk Newborns	5/0=5
October 24, 2012	Robert J. Karp, MD, Professor of Pediatrics and Director of the Social Pediatrics Initiative at Downstate	Food Insecurity and Food Selection	9/0=9
October 25, 2012	Paul Landsbergis, PhD, MPH, EdD, Associate Professor of Environmental and Occupational Health Sciences	<u>Journal Club</u> Job Strain as A Risk Factor For Coronary Heart Disease: A Collaborative Meta-Analysis of Individual Participant Data	9/3=12
December 19, 2012	Philippe Amstislavski, PhD, Assistant Professor of Environmental and Occupational Health Sciences	<u>Research Works In Progress</u> Dr. Philippe Amstislavski, Global Warming and Healthcare Access in the Arctic	10/0=10
December 19, 2012	Aimee Afable, PhD, MPH, Assistant Professor of Community Health Sciences	<u>Research Works In Progress</u> Dr. Aimee Afable, Binational Study of Diabetes in Filipino Immigrants	10/0=10
February 27, 2013	Erin Andrews, MPH and Penelope Georgakopoulos, MPH and Robbye Kinkade, MPH, CHES (DrPH students)	<u>Journal Club</u> <u>Article Discussion:</u> Comparative Effectiveness of a Faith-Based HIV Intervention for African American Women: Importance of Enhancing Religious Social Capital"- Wingood, et al (2013).	10/1=11
February 27, 2013	Aimee Afable, PhD, MPH, Assistant Professor of Community Health Sciences	<u>Journal Club</u> NYC Filipino Immigrant Health Project	10/1=11
Academic Year 2013-2014			
Date	Presenter(s)	Topic	Faculty/Students =Number of Participants Served
September 18, 2013	Nathan Boucher PA-C, MS, MPA, CPHQ (DrPH student)	Delivering Appropriate End-of-Life & Palliative Care: A Greater Challenge for NYC	5/6=11
October 10, 2013	Mira Grice Sheff, PhD, MS, Assistant Professor Department of Environmental and Occupational Health Sciences	<u>Research Works in Progress</u> Work-Family Conflict and Workplace Support in Hospital Nurses: A Pilot Study of Barriers to Service Access	7/2=9
October 10, 2013	Nathan Boucher PA-C, MS, MPA, CPHQ (DrPH student)	Palliative Care: What Are Barriers and Differences Among Cultural Groups?	7/2=9

Table 3.3b.1: Continuing Education Offerings by the SPH for the Past Three Academic Years (continued)			
Academic Year 2013-2014			
Date	Presenter(s)	Topic	Faculty/Students =Number of Participants Served
October 24, 2013	Tsering Choden, MPH (DrPH student)	<u>Journal Club</u> <u>Article Discussion</u> : Investigation of the Disparity Between New York City and National Prevalence of Nonspecific Psychological Distress Among Hispanics. <i>Albrecht SS, et.al. Prev Chronic Dis 2012;9:110104.</i>	5/4=9
November 19, 2013	Abigail Mullen, MSW, Social Worker NYU Initiative for Women with Disabilities (http://iwd.med.nyu.edu/)	Disability and Health	5/1=6
December 10, 2013	P.L. Diamond, JD, MA (Veterans Program Specialist) - Kingsborough Community College	Returning Veterans and Health	5/0=5
January 30, 2014	Usama Wissa, MD (DrPH Student)	<u>Journal Club</u> After stem cell transplant and Leukemia chemotherapy treatment, does exercise during/after hospitalization have better outcomes than the usual care suggested by treating physician?	7/2=9
February 27, 2014	Erin Andrews, MPH and Penelope Georgakopoulos, MPH and Robbye Kinkade, MPH, CHES (DrPH students)	<u>Journal Club</u> <u>Article Discussion</u> : Comparative Effectiveness of a Faith-Based HIV Intervention for African American Women: Importance of Enhancing Religious Social Capital"- Wingood, et al (2013).	6/6=12
March 13, 2014	Paul Landsbergis, PhD, MPH, EdD, Associate Professor of Environmental and Occupational Health Sciences	Privatization of Public Services and Health	4/3=7
March 27, 2014	Donnell Harvin, MPA, MPH (DrPH student) Radiation Emergency Response Technician at NYC Department of Health and Mental Hygiene	Public Health Emergency Response	7/2=9
April 10, 2014	Sherry Baron, PhD (Previously of NIOSH) currently Assistant Professor of Urban Studies, City University of New York (CUNY) Queens College	Work as a Social Determinant of Health Issues and Intervention Approaches	11/13=24

Table 3.3b.1: Continuing Education Offerings by the SPH for the Past Three Academic Years (continued)			
Academic Year 2014-2015			
Date	Presenter(s)	Topic	Faculty/Students =Number of Participants Served
April 24, 2014	Nidhi Shree Karingula (MPH Student)	Presenting on Her Research in India on the Cultural Attitudes and Beliefs Surrounding Diabetes in Hyderabad, India. Behavioral Attitudes Surrounding Diabetes in the "Capital City of Diabetes" in India	5/3=8
May 8, 2014	Bobbie Watts, MS, MPH, Executive Director, NYC Care for the Homeless	Homelessness and Health	3/2=5
October 2, 2014	Charlotte Wahlin, PhD, Ergonomist/RPT	Rehabilitation Process and Work-Related Interventions in a Swedish Context	5/6=11
October 9, 2014	Erin Andrews, MPH and Penelope Georgakopoulos, MPH (DrPH students)	High Risk of Obesity and Weight Gain for HIV-Infected Uninsured Minorities	1/5=6
October 10, 2014	Nathan Boucher, PA-C, MS, MPA, CPHQ, (DrPH Student)	Palliative Care: What Are Barriers and Differences Among Cultural Group	5/3=8
October 23, 2014	Desrene James (MPH Student)	Community-based Interventions: Mogoboya Village, South Africa	2/5=7
November 6, 2014	Bianca Hill (MPH Student)	Trichomoniasis, HIV, & Women Incarcerated in the NYC Correctional System	4/2=6
November 20, 2014	Donell Harvin, MPA, MPH	Response to Public Health Emergencies	3/2=5
December 1, 2014	Laura Geer, PhD, MHS Assistant Professor of Environmental and Occupational Health Sciences (Now Associate Professor)	Human Fetal Exposure to Environmental Phenols from Consumer Products in an Urban Immigrant Population from Brooklyn, New York	12/2=14
December 11, 2014	Phyllis Supino, EdD Professor of Medicine and Public Health, Director of Clinical Epidemiology and Clinical Research	Epidemiology of Valvular Heart Disease: The Last 30 Years	4/5=9
March 26, 2015	Shuntelle Stephens, (MPH Student)	HIV/AIDS in Trinidad, A Field Experience at San Fernando Hospital	6/4=10
April 23, 2015	Gabriel Kersaint, Executive Director Brooklyn-Queens-Long Island Area Health Education Center	The Affordable Care Act	6/2=9

c. Description of certificate programs or other non-degree offerings of the school, including enrollment data for each of the last three years.

The SPH offers an Advanced Certificate in Public Health (ACPH). The first students were enrolled in the ACPH in the 2013-2014 academic year. The ACPH is comprised of the five (5) core courses offered in the MPH Program for all MPH students irrespective of concentration. They are:

Table 3.3c.1: Required Courses Addressing Public Health Core Knowledge Areas for Advanced Certificate in Public Health (ACPH)		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	BIOS 5200: Principles of Biostatistics	3
Community Health Sciences	CHSC 5200: Health Behavior and Risk Reduction	3
Environmental Health Sciences	EOHS 5200: Issues in Environmental Health	3
Epidemiology	EPID 5200: Principles of Epidemiology	3
Health Policy and Management	HPMG 5206: Introduction to Health Policy and Management	3

Table 3.3c.2: Total Enrollment Data: Advanced Certificate of Public Health (ACPH) Students Enrolled for Each of the Past 3 Years 2012-2013 to 2014-2015								
	2012-2013		2013-2014		2014-2015		2015-2016 (To Date)	
	HC	FTE ¹⁶	HC	FTE	HC	FTE	HC	FTE
Advanced Certificate of Public Health	The ACPH was initiated in the 2013-2014 Academic Year.		25	9.1	42	12.4	55	These data will be provided at the site visit.

¹⁶ One (1) FTE is calculated by taking the number of credits taken for the academic year and dividing by twenty-four (24). 24 represents nine (9) credits for each of the Fall and Spring semesters, plus six (6) credits for the Summer semester.

d. Description of the school's practices, policies, procedures and evaluation that support continuing education and workforce development strategies.

The SPH offers a Bi-weekly Research Seminar/Journal Club Series in which faculty, students and community members are invited to hear speakers on a wide variety of research topics and participate in the Journal Club which involves discussion and writing on current research topics in public health. Flyers and e-mails advertising these events may be found in the Resource File.

Community education and workforce development are in line with the SPH Vision, Mission, Goals and Professional Values which reflect the SPH dedication to working with and empowering urban and immigrant populations to overcome health disparities. Evaluation of the needs of the community and the public health workforce are garnered at Community Advisory Group meetings, Student Council meetings and interactions with SPH Administration as well as faculty involvement with community groups.

e. A list of other educational institutions or public health practice organizations, if any, with which the school collaborates to offer continuing education.

- Arthur Ashe Institute for Urban Health
- Bedford-Stuyvesant Community Health Center
- Brownsville Action Community for Health Equality
- City University of New York
- Kings Against Violence Initiative (KAVI)
- Kingsborough Community College, Brooklyn, NY
- Nursing Grand Rounds Monthly
- NYC Care for the Homeless
- NYC Department of Health and Mental Hygiene
- NYU Initiative for Women with Disabilities
- SUNY Downstate College of Health Related Professions
- SUNY Downstate College of Medicine
- SUNY Downstate School of Graduate Studies
- SUNY Downstate School of Nursing
- University Hospital of Brooklyn

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

This criterion is met.

Strengths:

The faculty and administration of the SPH are continually involved with community members assessing community public health needs and public health workforce needs on an ongoing basis. Faculty provide community education opportunities as often as possible, usually on a bi-weekly basis.

Weaknesses:

None.

Plans:

Continue to dedicate our resources to improving the health of the communities we serve through continuing education offerings.

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.

Required Documentation. The self-study document should include the following:

a. A table showing primary faculty who support the degree programs offered by the school. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) FTE or % time, d) tenure status or classification, g) graduate degrees earned, h) discipline in which degrees were earned, i) institutions from which degrees were earned, j) current instructional areas and k) current research interests.*

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Dean's Office	Pascal J. Imperato (Not counted in table above because his primary responsibilities as Dean are administrative)	Dean and Distinguished Service Professor	Tenured	1.0	M	White, Non-Hispanic	MD MPH&TM	Internal Medicine and Preventive Medicine Public Health and Tropical Medicine	SUNY Downstate Tulane University School of Public Health and Tropical Medicine	Global Health, Infectious Disease Epidemiology, Health Policy and Management	Infectious Disease Epidemiology, Clinical Outcomes, Healthcare Quality Improvement in Management of Prostate Cancer, Breast Cancer and Coronary Heart Disease
Dean's Office	Judith. H. LaRosa	Professor and Vice Dean (Full-time)	Tenured	1.0	F	White, Non-Hispanic	PhD MNEd, BSN	Health Education Nursing Education	University of Maryland University of Pittsburgh	Cultural Competence, Sex, Gender, Race and Ethnicity, Social Marketing Writing Research Proposals	Women's Health, Cardiovascular Disease, General Public Health Issues
D/S #1: Biostatistics MPH Only Offered	Michael J. Szarek	Professor and Chair (Full-time)	Tenured	1.0	M	White, Non-Hispanic	PhD MS MS	Biostatistics Biostatistics Mathematics	New York University Harvard University School of Public Health University of Vermont	Biostatistics, Epidemiology	Clinical Trials, pharmaceutical regulation, biostatistical analysis of pharmaceutical product usage outcomes.

¹⁷ Full-time Faculty FTEs always equal 1.

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Biostatistics MPH Only Offered	Usha Govindarajulu	Assistant Professor (Full-time)	Tenure Track	1.0	F	Asian	PhD MS	Biostatistics Biostatistics	Boston University George Washington University	Biostatistics	Survival analysis, categorical data analysis, statistical computing
Biostatistics MPH Only Offered	Carl R. Rosenberg	Assistant Professor (Full-time)	Tenure Track	1.0	M	White, Non- Hispanic	PhD MS	Biomedical Sciences/ Epidemiology Ecology	CUNY/Mt. Sinai School of Medicine Pennsylvania State University	Intro Biostatistics, Nonparametric biostatistics, Clinical Trial Design and Analysis	Biostatistics, relationship between ferritin levels and incidence of cardiovascular/ cerebrovascular disease, clinical trials, bioequivalence trials, HealthCare Data Analysis
D/S #2: Community Health Sciences (Urban and Immigrant Health) MPH and DrPH Offered	Barbara G. Delano	Professor and Chair (Full-time)	Tenured	1.0	F	White, Non- Hispanic	MD MPH	Medicine Epidemiology	SUNY Downstate Medical Center University of Medicine and Dentistry New Jersey-Rutgers	Community Health	Disparities in care particularly in renal disease and dialysis. Factors in progression of renal disease.
Community Health Sciences (Urban and Immigrant Health) MPH and DrPH Offered	Aimee Afable	Assistant Professor (Full-time)	Tenure Track	1.0	F	Asian	PhD MPH	Public Health International Health	Tulane School of Public Health & Tropical Medicine	Immigrant Health Program Planning and Evaluation Quasi- Experimental Design	Understanding and documenting how migration and chronic exposure to US environment influences the development of obesity and diabetes in US immigrants Building an evidence base that can inform the translation of obesity and diabetes

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
											prevention programs, previously demonstrated to be efficacious in controlled intervention trials, to high-risk, under-served and/or working class populations. Integrating the use of mobile technology (mHealth) into health promotion strategies.
Community Health Sciences (Urban and Immigrant Health) MPH and DrPH Offered	Denise M. Bruno	Assistant Professor (Full-time)	Tenure Track	1.0	F	White, Non-Hispanic	MD	Pediatrics	University of Medicine and Dentistry of New Jersey	Introduction to Public Health Theory and Practice, Planning Pediatric Interventions	General Public Health, Global Health, Pediatric Public Health
							MPH	International Health	Harvard University School of Public Health		
Community Health Sciences (Urban and Immigrant Health) MPH and DrPH Offered	LeConté J. Dill	Assistant Professor (Full-time)	Tenure Track	1.0	F	Black, Non-Hispanic	MPH DrPH	Community Health Sciences Public Health	University of California, Los Angeles University of California Berkeley	Urban Health Qualitative Research Methods Health Behavior Theory Program Planning and Evaluation Intro to Public Health	Urban Health, Built Environment, Health Disparities, Violence Prevention, Adolescent Health, Youth Development, Community Engagement, Urban Planning

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Community Health Sciences (Urban and Immigrant Health) MPH and DrPH Offered	Tracey E. Wilson	Associate Professor (Full-time)	Tenured	1.0	F	White, Non-Hispanic	PhD	Cognitive Psychology	SUNY Albany	Health Behavior and Risk Reduction	HIV/AIDS Risk Reduction, Breast Cancer Control, Women's Health, Hepatitis C/HIV Infections in Women, Welfare Reform and the Perinatal Health of Immigrants
D/S #3 Environmental and Occupational Health Sciences MPH and DrPH Offered	TBD Position in Negotiations	Professor and Chair	Tenured	1.0							
Environmental and Occupational Health Sciences MPH and DrPH Offered	Laura A. Geer	Associate Professor (Full-time)	Tenured	1.0	F	White, Non-Hispanic	PhD MHS	Environmental Health Engineering Environmental Health Sciences	Johns Hopkins Bloomberg School of Public Health	Issues in Environmental and Occupational Health Sciences, Advanced Environmental Health	Prenatal Exposure to Environmental Contaminants, Air Pollution, Infant Health Outcomes
Environmental and Occupational Health Sciences MPH and DrPH Offered	Lori A. Hoepner	Assistant Professor (Full-time)	Tenure Track	1.0	F	White, Non-Hispanic	DrPH MPH	Environmental Health Sciences Public Health	Columbia University, Mailman School of Public Health Tulane University, School of Public Health and Tropical Medicine	Environmental Health Sciences, Toxicology	Environmental Health, Toxicology, Environmental Effects on Infants and Children

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Environmental and Occupational Health Sciences MPH and DrPH Offered	Paul A. Landsbergis	Associate Professor (Full-time)	Tenured	1.0	M	White, Non- Hispanic	PhD	Epidemiology	Columbia University	Occupational Health, Occupational Epidemiology, Social Determinants of Health, Work Organization and Health	Work Organization and Health, Socioeconomic Disparities in Health, Occupational Cardiovascular Risk Factors, Occupational Health Intervention and Evaluation, Role of Labor Unions in Public Health
							MPH	Epidemiology	Rutgers University		
							EdD	Labor Studies			
							MA	Psychology	New York University		
Environmental and Occupational Health Sciences MPH and DrPH Offered	Molly K. Tran	Assistant Professor (Full-time)	Tenure Track	1.0	F	White, Non- Hispanic	MD	Internal Medicine	Washington University School of Medicine	Environmental Health Sciences, Occupational Health	Workforce Health and Safety, Emergency Medicine
							MPH	Occupational and Environmental Health	University of Illinois-Chicago		
							MA	Biology and Biomedical Sciences	Washington University School of Medicine		
D/S #4 Epidemiology MPH and DrPH Offered	Elizabeth Helzner	Assistant Professor (Full-time)	Tenure Track	1.0	F	White, Non- Hispanic	PhD	Epidemiology	University of Pittsburgh, Graduate School of Public Health	Epidemiology	Aging Epidemiology, Neuroepidemiology, aging, Alzheimer's Disease, Osteoporosis.
							MS	Speech- Language Pathology	Boston University		

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Epidemiology MPH and DrPH Offered	Michael A. Joseph	Assistant Professor (Full-time)	Tenure Track	1.0	M	Black, Non- Hispanic	PhD MPH	Epidemiologic Science Chronic Disease Epidemiology	University of Michigan School of Public Health Yale University	Mastering Math, Principles of Epidemiology, Statistical Computing Applications in Epidemiology	HIV/AIDS in the Black, Non-Hispanic community, Cancer and Social Epidemiology, and International Public Health Capacity Development.
Epidemiology MPH and DrPH Offered	Simone A. Reynolds	Assistant Professor (Full-time)	Tenure Track	1.0	F	Black, Non- Hispanic	PhD MPH	Epidemiology Epidemiology	University of Pittsburgh New York Medical College	Principles of Epidemiology, Reproductive & Perinatal Epidemiology, Epidemiology Research Methods I	Reproductive and perinatal epidemiology, reproductive exposures, women's health, fetal growth, preterm birth and birth outcomes. Environmental factors related to maternal health, adverse pregnancy outcomes, infant health and the subsequent life course.
Epidemiology MPH and DrPH Offered	Janet E. Rosenbaum	Assistant Professor (Full-time)	Tenure Track	1.0	F	White, Non- Hispanic	PhD MA	Health Policy and Statistics Statistics	Harvard University	Epidemiology	Causal inference. Adolescent risk behavior. Prevention of HIV and unplanned pregnancy. Self- report accuracy.
Epidemiology MPH and DrPH Offered	Michael G. Walsh	Assistant Professor (Full-time)	Tenure Track	1.0	M	White, Non- Hispanic	PhD MPH	Epidemiology Epidemiology and Biostatistics	University of Pittsburgh University of Illinois	Epidemiology, Biostatistics	Epidemiology and Outcomes in Healthcare, Biostatistics

Table 4.1a.1: Primary Faculty who Support Degree Offerings of the School or Program

Table 4.1a.1: Current Primary/Full-time Faculty Supporting Degree Offerings of School or Program by Department/Concentration Area											
Department/ Concentration Area	Name	Title/ Academic Rank	Tenure Status or Classification	FTE ¹⁷ or % Time	Gender	Race or Ethnicity	Graduate Degrees Earned	Discipline	Institution	Current Instructional Teaching Area(s)	Current Research Interest(s)
Health Policy & Management (Health Services Administration) MPH Only Offered	M. Monica Sweeney	Clinical Professor and Chair (Full-time)	Non-Tenure Track	1.0	F	Black, Non-Hispanic	MD	Internal Medicine	SUNY Downstate College of Medicine	Health Policy and Management	HIV/AIDS, Health Policy, Health of Underserved Populations
							MPH	Health Service Management	Columbia University School of Public Health		
Health Policy & Management (Health Services Administration) MPH Only Offered	Karen E. Benker	Associate Professor (Full-time)	Tenured	1.0	F	White, Non-Hispanic	MD	Medicine	University of Southern California at Los Angeles	Immigrant Health, Public Health Theory and Practice, Culminating Experience	Smoking Prevention, Healthcare Disparities, Infant Mortality
							MPH	Public Health	Columbia University		
Health Policy & Management (Health Services Administration) MPH Only Offered	Daniel C. Ehlke	Assistant Professor (Full-time)	Tenure Track	1.0	M	White, Non-Hispanic	PhD	Political Science	Brown University	Health Policy and Management	Comparative health systems, health disparities.
							MA		Brown University		
Health Policy & Management (Health Services Administration) MPH Only Offered	Leone L. Waltrous	Assistant Professor (Full-time)	Tenure Track	1.0	F	Black, Non-Hispanic	BA	Government and History	College of William and Mary	Health Policy and Management	Breast-feeding, Immunization, Diversity in Medicine.
							MD	Obstetrics/Gynecology	Howard University		
Health Policy & Management (Health Services Administration) MPH Only Offered							MPH	Community Health Sciences	SUNY Downstate		
							Certified Lactation Consultant and Train-the-Trainer				

b. If the school uses other faculty (adjunct, Part-time, secondary appointments, etc.), summary data on their qualifications should be provided in table format, organized by department, specialty area or other organizational unit as appropriate to the school and must include at least the following: a) name, b) title/academic rank, c) title and current employment, d) FTE or % time allocated to the school, e) highest degree earned (optional: schools may also list all graduate degrees earned to more accurately reflect faculty expertise), f) disciplines in which listed degrees were earned and g) contributions to the school.

**Table 4.1b.1: Other Faculty Used to Support Teaching Programs
(adjunct, Part-time, secondary appointments, etc.)**

Table 4.1b.1: Current Other Faculty Used to Support Teaching Program (Adjunct, Part-time, Secondary, etc.)¹⁸									
Concentration	Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Highest Degree Earned	Discipline for earned Graduate Degrees	Teaching Areas
Concentration #1 Biostatistics MPH Only Offered	Elizabeth Boskey	Assistant Professor (Part-time)	Scientific Writer	.25	F	White, Non- Hispanic	PhD MPH	Biophysics Public Health	Biostatistics, Epidemiology
Biostatistics	Judith Hey- Hadavi	Assistant Professor (Part-time)	Medical Director of Medical Regulatory Affairs for the Metabolic and Cardiovascular Group, Pfizer Inc.	.50	F	White, Non- Hispanic	MD DDS	Medicine Dentistry	Research Methods
Biostatistics	Sukhminder Osahan	Assistant Professor (Part-time)	Research Scientist (Biostatistician)	.50	M	Asian	PhD MSc	Statistics Statistics	Biostatistics
Biostatistics	Steven D. Ritzel	Clinical Assistant Professor (Part-time)	Associate Director, Network Strategic Planning, New York City Health & Hospital Corporation-Kings County Hospital Center	.25	M	White, Non- Hispanic	MPH	International Public Health/ Epidemiology	Biostatistics, Epidemiology

¹⁸ Adjunct/Part-time Faculty FTEs are calculated by number of courses taught and time spent on other responsibilities, e.g. student advising, committee participation. Each course taught in one academic year equals .25 and significant advising and committee participation equals .25. 4 courses per year = 1 FTE Faculty=100%.

Table 4.1b.1: Current Other Faculty Used to Support Teaching Program (Adjunct, Part-time, Secondary, etc.)¹⁸

Concentration	Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Highest Degree Earned	Discipline for earned Graduate Degrees	Teaching Areas
Biostatistics	Jeremy Weedon	Clinical Assistant Professor (Part-time)	Associate Director, Scientific/Academic Computing Center, SUNY Downstate Medical Center	.50	M	White, Non-Hispanic	PhD MA	Psychology, specializing in Statistics Psychology, specializing in Methodology	Biostatistics
Concentration #2 Community Health Sciences MPH and DrPH Offered	Jeffrey Birnbaum	Assistant Professor (Part-time)	Principle Investigator and Program Director of HEAT (Health Education Alternatives for Teens)	.05	M	White, Non-Hispanic	MD MPH	Medicine Community Health	Health Promotion, HIV-related issues
Community Health Sciences	Ruth C. Browne	Assistant Professor (Part-time)	Executive Director of the Arthur Ashe Institute for Urban Health	.10	F	Black, Non-Hispanic	ScD MPH	Public Health Education Public Health	Urban Health Issues, Health Disparities
Community Health Sciences	Gerald W. Deas	Clinical Assistant Professor (Part-time)	Director of Health Education Communication	.10	M	Black, Non-Hispanic	MD MPH	Medicine Public Health	Health Education, Health Promotion, Hosts Cablevision Show on Current Health Issues in the Community
Community Health Sciences	Francesca Gany	Assistant Professor (Part-time)	Executive Director, New York Task Force on Immigrant Health	.05	F	White, Non-Hispanic	MD MS	Medicine Health Policy And Management	Immigrant Health, Health Disparities

Table 4.1b.1: Current Other Faculty Used to Support Teaching Program (Adjunct, Part-time, Secondary, etc.)¹⁸

Concentration	Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Highest Degree Earned	Discipline for earned Graduate Degrees	Teaching Areas
Community Health Sciences	Robert Karp	Professor (Part-time)	Director, Social Pediatrics Initiatives	.05	M	White, Non-Hispanic	MD	Medicine	Community Health
Community Health Sciences	Patricia Kizilay	Assistant Professor (Part-time)	Family Nurse Practitioner and Mental Health Clinical Specialist, SUNY Downstate Medical Center	.05	F	White, Non-Hispanic	EdD MS	Curriculum and Instruction in Higher Education Psychiatric and Mental Health Nursing	Healthcare Across the Lifespan
Community Health Sciences	Joseph Lovett	Lecturer (Part-time)	News Broadcast Consultant	.05	M	White, Non-Hispanic	MA	Fine Arts	Social Marketing
Community Health Sciences	Helen E. Murphy	Assistant Professor (Part-time)	Director of Clinical Services at Thursday's Child (Center for Research and Treatment of Autism in Brooklyn.	.05	F	White, Non-Hispanic	PhD MSW	Clinical Child Psychology Psychology	Childhood Developmental Disabilities
Community Health Sciences	Karen A. N. Myrie	Assistant Professor (Part-time)	Attending Pediatrician at Lutheran Medical Center in Brooklyn	.05	F	Black, Non-Hispanic	MD MPH	Medicine Public Health	Adolescent Health
Community Health Sciences	Pamela Sass	Associate Professor (Part-time)	Associate Professor and Chair of Department of Family Medicine and Vice Dean for Academic Affairs, College of Medicine, SUNY Downstate Medical Center	.10	F	White, Non-Hispanic	MD	Medicine	General Public Health
Community Health Sciences	Rebecca Schwartz	Assistant Professor (Part-time)	Associate Professor, North Shore, Long Island Jewish (LIJ) Healthcare, Department of Population Health and Hofstra University North Shore LIJ School of Medicine	.05	F	White, Non-Hispanic	PhD	Clinical Psychology	Program Planning and Evaluation

Table 4.1b.1: Current Other Faculty Used to Support Teaching Program (Adjunct, Part-time, Secondary, etc.)¹⁸

Concentration	Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Highest Degree Earned	Discipline for earned Graduate Degrees	Teaching Areas
Community Health Sciences	Phyllis G. Supino	Professor (Part-time)	Department of Medicine, SUNY Downstate Medical Center	.10	F	White, Non- Hispanic	EdD	Science Education, Research Methodology and Program Evaluation	Grant Writing
Concentration #4 Epidemiology MPH and DrPH Offered	Michael Augenbraun	Associate Professor (Part-time)	Chief, Division of Infectious Disease, Hospital Epidemiologist and Professor of Medicine, SUNY Downstate Medical Center	.10	M	White, Non- Hispanic	MD	Medicine	Epidemiology
Epidemiology	Mary Huynh	Assistant Professor (Part-time)	Assistant Professor, City University of New York (CUNY) Graduate Center, School of Public Health	.05	F	Asian	PhD	Epidemiology	Epidemiology, Women's Health
Epidemiology	Bonnie Kerker	Assistant Professor (Part-time)	Research Scientist, Nathan Kline Institute for Psychiatric Research, Associate Professor, New York University Department of Child and Adolescent Psychiatry.	.05	F	White, Non- Hispanic	PhD MPH	Health Policy Epidemiology	Epidemiology
Concentration #5 Health Policy & Management MPH and DrPH Offered	David Ackman	Assistant Professor (Part-time)	National Medicare Medical Director, Amerigroup	.25	M	White, Non- Hispanic	MD MPH	Medicine Health Policy Administration	National Healthcare Policy and Third-Party Payors
Health Policy & Management	John A. Fallon	Clinical Professor (Part-time)	Chief Physician Executive, Blue Cross, Blue Shield of Massachusetts	.25	M	White, Non- Hispanic	MD MBA	Medicine Healthcare Administration	Health Systems Management

Table 4.1b.1: Current Other Faculty Used to Support Teaching Program (Adjunct, Part-time, Secondary, etc.)¹⁸

Concentration	Name	Title/ Academic Rank	Title & Current Employer	FTE or % Time	Gender	Race or Ethnicity	Highest Degree Earned	Discipline for earned Graduate Degrees	Teaching Areas
Health Policy & Management	Wayne C. Geitz	Clinical Assistant Professor (Part-time)	Vice President, Outpatient Services, Brookdale University Medical Center	.25	M	White, Non-Hispanic	MA BS	Organizational Leadership Healthcare Administration	Healthcare Administration
Health Policy & Management	Norma J. Goodwin	Clinical Assistant Professor (Part-time)	President of HealthWatch (Private Company for Health Promotion)	.25	F	Black, Non-Hispanic	MD	Medicine	Healthcare Administration
Health Policy & Management	Anthony K. Jones	Clinical Assistant Professor (Part-time)	Interim Chief Executive Officer, University Hospital at Downstate	.25	M	Black Non-Hispanic	MHA BS	Healthcare Administration Healthcare Administration	Healthcare Administration
Health Policy & Management	John C. LaRosa	Professor (Part-time)	Professor, College of Medicine, SUNY Downstate Medical Center	.50	M	White, Non-Hispanic	MD	Medicine	Health Care Policy, Hospital Management
Health Policy & Management	Travis E. Meyer	Clinical Assistant Instructor (Part-time)	Radiologist, SUNY Downstate Medical Center University Hospital	.25	M	White, Non-Hispanic	MD	Medicine	Health Policy, Hospital Management
Health Policy & Management	Michael Zenilman	Professor (Part-time)	Vice-Chair, Professor, Department of Surgery, Regional Director, National Capital Region, Johns Hopkins Health System	.25	M	White, Non-Hispanic	MD	Medicine	Hospital Management

SPH faculty who possess significant public health practice experience outside of that which is typically associated with an academic career are identified below: **Table 4.1c.1: Full-time Faculty with Significant Public Health Practice Experience**

Name	Title	Public Health Practice Experience
Pascal James Imperato, MD, MPH&TM	Dean and Distinguished Service Professor	<ul style="list-style-type: none"> • Global Health: Extensive public health practice experience abroad • Serves on ASPPH Global Health Committee • Extensive High Level Health and Public Health Administrative Experience, including serving as the Commissioner of Health of New York City • Holds the rank of Captain, US Public Health Service Commissioned Corps Reserve • Extensive experience with infectious diseases, including Ebola • Extensive, ongoing media appearances (television, radio, press, magazines) for commentary on current health issues and crises • Published 7 books (medical and public health only), 11 book chapters, and 287 articles
Karen E. Benker, MD, MPH	Associate Professor and Interim Chair of Health Policy and Management	<ul style="list-style-type: none"> • Extensive experience with Community Outreach and Community Public Health Interventions
Barbara G. Delano, MD, MPH	Professor and Chair of Community Health Sciences	<ul style="list-style-type: none"> • Extensive experience preventing, diagnosing and treating renal disease • Extensive experience with Community Public Health Education
Judith H. LaRosa, PhD, RN	Vice Dean and Distinguished Service Professor	<ul style="list-style-type: none"> • Extensive experience with Women's Health, including serving as Deputy Director of the Office of Research on Women's Health at the National Institutes of Health • Served on the Department of Defense Epidemiology Committee • Extensive experience with Community Public Health Education, including at Tulane University School of Public Health and Tropical Medicine: <ul style="list-style-type: none"> ➤ Professor, Chair of Community Health Sciences ➤ Coordinator, Medicine/Public Health Initiative ➤ Chair, Tulane Cancer Center Breast Health Clinic Task Force ➤ Co-chair, Planning Group, Newcomb Institute for the Family ➤ Chair, SPH&TM Strategic Planning, Subcommittee on Practice and Service ➤ Director, Tulane Xavier National Center of Excellence in Women's Health, a USDHHS federally-funded women's center.

Table 4.1c.1 Full-time Faculty with Significant Public Health Practice Experience (continued)		
Name	Title	Public Health Practice Experience
		<ul style="list-style-type: none"> • Boston University School of Nursing: Instructor in Psychiatric Nursing • Chair, Louisiana's National Science Foundation's Experimental Program to Stimulate Competitive Research (EPSCoR) annual state conference • Associate Project Director, National Science Foundation Louisiana Experimental Program to Stimulate Competitive Research • Consultant, Louisiana Department of Health and Hospitals, Office of Public Health (OPH) • Deputy Director, Office of Research on Women's Health (ORWH), Office of the Director, National Institutes of Health, Bethesda, Maryland • Public Health Advisor: The National Heart, Lung, and Blood Institute, NIH • Clinical Specialist and Research Assistant, The George Washington University School of Medicine, Substance Abuse Project, Center for Family Research • Group Therapist: Methadone Maintenance Program, The George Washington University School of Medicine
M. Monica Sweeney, MD, MPH, FACP	Clinical Professor and Chair of Health Policy and Management	<ul style="list-style-type: none"> • Assistant Commissioner, Bureau of HIV/AIDS Prevention and Control, New York City Department of Health and Mental Hygiene • Vice President for Medical Affairs/Medical Director, Bedford Stuyvesant Family Health Center, Inc., Brooklyn, New York
Michael J. Szarek, PhD, MS	Professor and Chair of Epidemiology and Biostatistics	<ul style="list-style-type: none"> • Extensive experience in the private sector pharmaceutical industry • Extensive experience with large-scale statistical databases and analysis

c. Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the school. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

Perspectives for the field of public health practice are integrated in the curriculum by faculty engaging in research and service in the field and faculty who collaborate with external medical and public health practitioners who enrich the educational, research and service activities of the SPH. In addition to these practitioners, there are a number of persons, both public health professionals and others who contribute to the activities of the School by providing guest lectures within specific courses, who participate in course seminars and deliver continuing public health education presentations.

Voluntary appointment tracks are employed for those members of the community who regularly provide guest lectures and other services to the School of Public Health. (See Part-time Faculty Table 4.1b.1 above.)

d. Identification of measurable objectives by which the school assesses the qualifications of its faculty complement, along with data regarding the performance of the school against those measures for each of the last three years. See CEPH Outcome Measures Table.

Outcomes measures by which the SPH assesses the qualifications of its faculty complement include the following:

- Percentage of Full-time Faculty with Terminal Doctoral Degrees
- Percentage of Full-time Faculty Who are Tenured
- Percentage of Full-time Faculty with Public Health Practice Experience
- Percentage of Full-time Faculty who Participate in Professional Development
- Percentage of Faculty Who are Grant or Journal Peer Reviewers
- Percentage of Part-time Faculty with Terminal Doctoral Degrees
- Percentage of Full-time Faculty with Extramural/Other Research Funding
- Percentage of Full-time Faculty Publishing Articles in Peer-Reviewed Journals, Books or Book Chapters Per Year on Public Health Issues
- Percentage of Full-time Faculty Scientific Presentations or Poster Presentations Annually at National Meetings

Table 4.1d.1: Outcomes Measures for Faculty Qualifications

Table 4.1d.1: Outcome Measures for Faculty Qualifications for 2012-2013-2014-2015				
Outcome Measure	Target	2012-2013	2013-2014	2014-2015
% of Full-time Faculty with Terminal Doctoral Degrees	100%	100%	100%	100%
% of Full-time Faculty Who are Tenured	30%	23%	41%	38%
% of Full-time Faculty with Public Health Practice Experience	100%	100%	100%	100%
% of Full-time Faculty who Participate in Professional Development	65%	77%	64%	76%
% of Faculty Who are Journal Peer Reviewers	50%	63%	75%	71%
% of Part-time Faculty with Terminal Doctoral Degrees	85%	83%	85%	86%
% of Full-time Faculty with Extramural or Other Research Funding	55%	42%	17%	29%
% of Full-time Faculty Publishing Articles in Peer-Reviewed Journals, Books or Book Chapters Per Year on Public Health Issues	40%	58%	46%	67%
% of Full-time Faculty Scientific Presentations or Poster Presentations Annually at National Meetings	30%	46%	42%	43%

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

This criterion is met.

Strengths:

The Administration of the SPH is highly experienced in public health practice, having held high-level positions and accomplished significant public health achievements during their careers. The Full-time faculty all hold terminal doctoral degrees and have public health practice experience. The faculty overall are well qualified to teach and run the School of Public Health. More than half of the faculty are involved in peer-reviewing articles for scientific journals. Approximately half of the faculty are involved in publishing in peer-reviewed scientific journals. Many of our Part-time faculty are experts in their respective fields.

Weaknesses:

Because the SPH has many junior faculty who are inexperienced in obtaining extramural funding, the percentage of faculty obtaining grants is below 50%.

Plans:

Continue to recruit qualified faculty with public health practice experience and terminal doctoral degrees. Continue to mentor junior faculty and encourage them to submit grant proposals for extramural funding, publish more peer-reviewed articles and present more scientific presentations.

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.

Required Documentation. The self-study document should include the following:

a. A faculty handbook or other written document that outlines faculty rules and regulations.

Faculty rules and regulations may be found in the following documents:

- NYS Public Officers Law Booklet
 - State University of New York Downstate Medical Center, School Of Public Health, Faculty And Professional Staff Constitution And By-Laws (including the CAPQ Committee policies and procedures)
 - SUNY Downstate Faculty Handbook
 - State University of New York Policies of the Board of Trustees 2014 Agreement between the State of New York
 - United University Professionals (July 2 , 2011 – July 1 , 2016)
- These documents and/or links to these documents are located in the Resource File.

The policies and procedures for the Committee on Academic and Professional Qualifications details the expectations for faculty promotion on a number of possible tenure-tracks. These vary slightly from the other academic units in the Medical Center, as the emphasis on teaching and service is more pronounced than in other DMC schools. Teaching and service are more equally weighted with research, which differs from the CAPQ of the College of Medicine, for example. The SPH is unique in having a tenure-track for Education and Community/Professional Service which emphasizes teaching and service more than research. These expectations are stated in the hiring letters of faculty.

b. Description of provisions for faculty development, including identification of support for faculty categories other than regular Full-time appointments.

SUNY Downstate has numerous opportunities for faculty development throughout the Medical Center. SUNY Downstate has always had professional development offerings. To further this cause, a new Office of Faculty Affairs and Professional Development has recently been created for all the academic units in the Medical Center. This Office is headed by Joseph P. Merlino, MD, MPA, FACPsych, Vice President for Faculty Affairs and Professional Development. Dr. Merlino has convened an Advisory Committee which includes faculty from throughout the Medical Center. Both Full-time and Part-time faculty are able to participate in all faculty development activities. These activities are advertised through Center-wide e-mails and flyers posted throughout the Medical Center.

Table 4.2b.1: Professional Faculty Development			
Spring Semester 2015			
Date	Event	Topic	Presenter
January 5, 2015	Global Health Week	Screening for Movie “Do No Harm”	N/A
January 6, 2015	Global Health Week	“Mothers and Children: A Global Perspective”	Natasha Anushri Anandaraja, MPH, MBBS Pediatric Resident Mt. Sinai Medical Center
		“Hepatitis B and C: The Global Epidemic and Improving Access to Care”	Ayse Aytaman, MD VA Medical Center Internal Medicine
January 7, 2015	Global Health Week	“Peace Corps’ Stomp Out Malaria Initiative”	Matthew McLaughlin, BA Program Director, Peace Corps Malaria Initiative for Africa
		“Intro to Global Mental Health”	Diana Samuel, MD Mt. Sinai Medical Center Department of Psychiatry and New Presbyterian Hospital Department of Psychiatry
January 8, 2015	Global Health Week	“Global Smile Foundation”	Serena Kassam, DMD, DDS Clinical Assistant Professor NYU Pediatric Dentistry
		“Ebola, Pandemic Preparedness, and Emerging Infectious Diseases	Jacob Schafer MSc, BS International Medical Corps
February 11, 2015	Faculty Affairs & Professional Development (CME Approved)	“The Millennial Learner”	T.J. Jirasevijinda, MD Associate Professor of Pediatrics Director, Pediatric Undergraduate Medical Education Weill Cornell Medical College
		“The Millennial Learner”	T.J. Jirasevijinda, MD Associate Professor of Pediatrics Director, Pediatric Undergraduate Medical Education Weill Cornell Medical College

Table 4.2b.1: Professional Faculty Development			
Spring Semester 2015			
March 11, 2015	Faculty Affairs & Professional Development (CME Approved)	"Simulation Show-Case & Presentation"	<p>Stephen Rinnert, MD Vice Chairman for education and faculty development of the Department of Emergency Medicine at SUNY Downstate / Kings County Hospital</p> <p>Jane Kim, MD Department of Emergency Medicine SUNY Downstate</p> <p>Aleida Llanes-Oberstein, CNM, LM, MS, FACNM, CHSE Clinical Associate Professor, International Project Director, Website Coordinator, and Continuing Education Coordinator C-Director, Center for Healthcare Simulation (CHS), SUNY Downstate Medical Center</p>
April 8, 2015	Faculty Affairs & Professional Development (CME Approved)	"Blended Learning"	<p>Laura G. Hillstock, PhD, MA Blackboard, Institute for Engaged Leadership in Online Learning, The Online Learning Consortium (formerly SLOAN-C)</p>
May 13, 2015	Faculty Affairs & Professional Development (CME Approved)	<p>"Tenure and Promotions"</p> <p>Faculty Awards Presentation and Reception (Honoree: Laura Geer, PhD, MHS, Associate Professor SPH)</p>	<p>Clinton Brown, MD Associate Professor of Medicine Director, Parkside Ambulatory Dialysis Center, SUNY Downstate Medical Center</p>
June 10, 2015	Faculty Affairs & Professional Development (CME Approved)	"Balancing the Glass Balls: Achieving Work Life Integration"	<p>Stephanie Call, MD, MSPH Director, Internal Medicine Training Program Associate Chair for Education Virginia Commonwealth University</p> <p>Diana McNeill, MD Department of Endocrinology Duke University Medical Center</p>

Table 4.2b.1: Professional Faculty Development			
Fall Semester 2015			
September 17, 2015	Faculty Affairs & Professional Development (CME Approved)	"All School Faculty Re-Orientation & Faculty Reception"	Joseph Merlino, MD, MPA, FACPpsych Vice President for Faculty Affairs and Professional Development, Professor of Clinical Psychiatry, SUNY Downstate Medical Center
October 14, 2015	Faculty Affairs & Professional Development (CME Approved)	"Lesson Learned"	Pamela Sass, MD Associate Professor and Chair of Department of Family Medicine and Vice Dean for Academic Affairs, College of Medicine, Dually Appointed as Associate Professor in the School of Public Health
		"Lesson Learned"	Pamela Sass, MD Associate Professor and Chair of Department of Family Medicine and Vice Dean for Academic Affairs, College of Medicine, Dually Appointed as Associate Professor in the School of Public Health
November 11, 2015	Faculty Affairs & Professional Development (CME Approved)	"Funding Initiatives-Light at the End of the Tunnel?"	Outside Speaker
		"Funding Initiatives-Light at the End of the Tunnel?"	Outside Speaker
December 9, 2015	Faculty Affairs & Professional Development (CME Approved)	"Interdisciplinary Collaboration"	Deans Colleges/Schools of SUNY Downstate Daisy Cruz-Richman, PhD, RN Dean-College of Nursing Pascal James Imperato, MD, MPH &TM, MACP , Dean-School of Public Health Allen N. Lewis, PhD Dean-College of Health Related Professions Carlos Pato, MD Dean-College of Medicine Mark Stewart, MD, PhD Dean- The School of Graduate Studies

c. Description of formal procedures for evaluating faculty competence and performance.

At the end of each academic year, two evaluation instruments are utilized to determine faculty competence and performance. These are: 1) Faculty Effort Survey and 2) Annual Faculty Evaluation & Development Report Form. These templates and instructions for completion by faculty are located in the Resource File. The Faculty Effort Survey details the number of hours individual faculty members have engaged in all the various activities in which they have been involved for the past academic year. This includes: teaching, research, service, committee work, student advising and faculty development. The Annual Faculty Evaluation and Development Form is a self-evaluation completed by individual faculty members regarding their professional performance and goals for the past as well as needs for the future in the areas of teaching, research, service and professional development. These are completed annually and submitted to the respective Chairs. The Chairs then meet with each faculty member individually to discuss the forms submitted. Completed forms are kept in each department as well as in the main office for review as needed.

d. Description of the processes used for student course evaluation and evaluation of instructional effectiveness.

Each course taught in the SPH is evaluated by students at the end of the semester. Course Evaluations (Template in Resource File) include questions about the content of the course and the skill level of the instructor(s) at imparting relevant information and skills to students. Ratings and comments on instructional effectiveness are aggregated and discussed with the instructor(s) by the Chair of the relevant department. The results of course evaluations are taken into account during a faculty member's annual evaluation by the Chair of the department. These would be taken into consideration at the time that a Chair deliberates whether or not a faculty member should be put up for promotion and/or tenure. Any egregious issues regarding teaching effectiveness are brought to the attention of the Dean and Vice Dean and handled on a case-by-case basis.

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

This criterion is met.

Strengths:

Faculty policies, procedures and expectations for employment are well documented and formalized. As part of the overall SUNY system, faculty rights and obligations are the same throughout the State University. The School of Public Health has its own policies and procedures which differ slightly from some of the other academic units in the Medical Center due to the nature of public health as a professional/practice degree as opposed to straight research or clinical practice.

Faculty evaluation is conducted on an on-going basis and formalized after each course taught and annually.

Faculty Development is vibrant at SUNY Downstate and in the School of Public Health. There are ample opportunities for both Full-time and Part-time faculty to participate in professional development activities.

Weaknesses:

None.

Plans:

To continue to enrich our faculty through supportive policies and procedures, and to continue to provide all faculty with many choices for professional development activities.

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.

Required Documentation. The self-study document should include the following:

a. Description of the school's recruitment policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.

The SPH recruits students from all walks of life. Recruitment efforts are made as wide as possible to result in an extremely diverse student body. All individuals who possess a Baccalaureate Degree are eligible to apply for the MPH degree, and all Masters Degree holders are eligible to apply for the DrPH degree. As long as the candidate meets the academic and other application requirements, he or she will be admitted to the School. Recruitment policies do not differ according to graduate degree as stated on our website and in all the SUNY and Downstate recruitment materials:

Admission to SUNY Downstate Medical Center is based on the qualifications of the applicant. SUNY Downstate Medical Center does not discriminate on the basis of race, sex, color, creed, age, national origin, disability, sexual orientation, religion, marital status or status as a disabled veteran in the Vietnam era. Responses on this application to questions of race, sex, and date of birth are voluntary and are used for statistical purposes only.

See Table 4.3c.1 Methods of Promotion for Student Recruitment Purposes, for details about recruitment processes.

b. Statement of admissions policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.

The Committee on Admissions is responsible for reviewing all applications and determining eligibility for admission to a degree program. The following is stated in the Policies and Procedures of the Committee on Admissions:

To fulfill the mission of the School of Public Health, the Admissions Committee seeks applicants with the following qualities:

1. Demonstrated academic ability to complete MPH or DrPH program
2. Commitment to public health
3. Potential for making a contribution to public health.

POLICIES AND PROCEDURES

I. DEFINITION

The SUNY Downstate School of Public Health Admissions Committee is a standing committee concerned with graduate program admissions policies and procedures and the consideration of applicants for admission. The Committee considers the qualifications of each individual without regard to sex, race, color, creed, national origin, religion, age, sexual orientation, marital status, or disability. (See Resource File for Full Policies and Procedures of the Committee on Admissions)

Below are the admissions policies as stated on the SPH website. Applicants may apply on-line through "ApplyYourself."

Master of Public Health – Admissions Requirements

Application Deadlines:

Summer Semester - February 15th

Fall Semester - April 15th

Admission Policy

The time allotted for completion of the MPH degree, regardless of concurrent degree involvement is six (6) years unless there are compelling extenuating circumstances.

Admission Requirements

- Baccalaureate degree from a Council for Higher Education (CHEA) regionally accredited college or university.
- Official transcripts from all previous postsecondary CHEA regionally accredited colleges or universities. If the student is applying for concurrent degrees in the College of Medicine, College of Nursing, or College of Health Related Professions, then transcripts need only be sent to those primary programs.
- An undergraduate record with a cumulative grade point average of 3.0 or better (on a 4.0 scale) is preferred. Applicants who have completed all or part of their education abroad, are required to have a course-by-course educational credential evaluation completed by an approved agency accredited by the **National Association Of Credential Evaluation Services** (<http://www.naces.org>).
- For those interested in pursuing a concentration in Biostatistics, Epidemiology, or Environmental and Occupational Health Sciences, a Bachelor of Science degree is preferred with at least one (1) undergraduate math and one (1) undergraduate biology course. For applicants to Environmental and Occupational Health Sciences, an undergraduate chemistry course is preferred.
- Appropriate completion of the MPH Program application, including the personal statement and essay on a selected public health topic. Please see information below in regard to the personal statement and essay (Written Essays Guidelines).
- Letters of recommendation
 - **For students pursuing only the MPH degree: Two (2)** letters of recommendation must be submitted addressing the applicant's academic ability and professional experience or interest as it applies to public health issues.
- A graduate entrance examination is required**. The graduate entrance examination must have been taken within five (5) years of the application submission date. Graduate entrance examinations that will be accepted include the following:
 - Graduate Record Examinations (GRE).
 - Medical College Admissions test (MCAT).
 - Dental Admission Test (DAT).
 - Graduate Management Admission Test (GMAT).
 - Law School Admission Test (LSAT).
 - Optometry Admission Test (OAT).
 - United States Medical Licensure Exam (USMLE) Step 1 or 2.
 - National Board of Veterinary Medical Exam (NBVME).

**The graduate entrance examination may be waived for those who have completed the Advanced Certificate in Public Health Program at SUNY Downstate with a GPA of 3.0 or above.

- **If an applicant has earned a doctoral degree from CHEA regionally accredited college or university, the graduate entrance examination may be waived at the discretion of the departmental chair after review of official transcripts from said school.
- Proof of current licensure must be submitted for all licensed health professionals
- **Test of English as a Foreign Language.** The (TOEFL) is required for ALL applicants for whom English is a Second Language and who have not completed at least one year of Full-time study in a regionally accredited college or university in the United States (at least 24 semester credits, including two courses in English composition). A minimum score for the paper exam of 536 (undergraduate programs) and 564 (graduate programs); a minimum score for the computer exam of 208 (undergraduate programs) and 223 (graduate programs); and a minimum score for the Internet-based exam of 65-78 (undergraduate programs) and 79-95 (graduate programs) is required on the TOEFL.
- TOEFL Box 6151,
Princeton, New Jersey 08541
phone: (609) 771-7100
web: www.toefl.org
» Use the SUNY Downstate Institutional Code of 2534
» Please note: Your application is not considered complete without the required standardized test score(s).
- A \$75 non-refundable application fee made payable to SUNY Downstate Medical Center

At the time of application, unofficial documents maybe submitted via the ApplyYourself application system. Upon acceptance, however, all students will be required to submit all final and official documents before matriculating.

Written Essay Guidelines

The application must include two written essays prepared by the applicant without outside assistance. These statements help the Admissions Committee evaluate the applicant's motivation for entering the program as well as skills in problem-solving, writing, and following guidelines. Each should be thoughtful, clear, concise, and well-organized. Any application that includes plagiarized material will be automatically rejected.

- **Personal Statement.** The first essay is a personal statement in which the applicant explains his or her reasons for pursuing the degree in a particular area of interest and hopes for what he or she will achieve with that degree. The essay should be on separate, numbered sheets of paper for and include the applicant's name at the top of each sheet. **The essay should be no more than 300 words.**
- **Public Health Essay.** Choose and describe a public health issue/problem in which you have an interest and present at least one possible approach to addressing that issue/problem. **The essay should be no more than 1,000 words.**

In your essay please carefully describe the issue or situation, using and citing current references, to substantiate your arguments. Then present your thoughts on how you might go about addressing some aspect of it. Please note that you can present a solution wherein you might work as an individual, or with other people or organizations. The essay should be clearly written and carefully checked for grammar and spelling. **Please use separate sheets of paper for your essay, number the pages, and make certain that you include your name on each sheet.**

Admission to the Concurrent Degree Program

Applicants for concurrent degrees with other programs in the medical center must apply to and be accepted by each program. Students applying for concurrent degrees should apply to both programs as early as possible so that they can obtain their admission status for each program in a timely fashion. The admission

requirements for each degree apply. Students applying for concurrent degrees should indicate their intent on the application.

Admission to the Master of Public Health Program after successful completion of the SUNY Downstate Advanced Certificate Program

Students who have successfully completed the Advanced Certificate Program with a grade point average of 3.0 or greater are eligible for acceptance into the Master of Public Health Program.

The following delineates the information that is required

Appropriate completion of the online MPH Program application.

Students who wish to major in biostatistics or epidemiology, must have earned an "A-" or above in BIOS 5200: Principles of Biostatistics and EPID 5200: Principles of Epidemiology while enrolled in the Advanced Certificate Program.

Advanced Certificate students who submit an application into the MPH program while enrolled in their final semester and meet the requirements listed above, will be accepted on the condition that their final cumulative grade point average is 3.0 or greater.

No other supporting documents are required.

Application Deadlines

MPH applicants can apply for either Summer or fall semester except for MD/MPH applicants (see below). Applicants intending to enter in the **Summer semester** must have their applications completed and submitted by **February 15th**. Applicants intending to enter in the **Fall semester** must have their applications completed and submitted by **April 15th** of the academic year beginning in September. Note that applicants may be admitted after these dates, but only on space-available basis.

For MD/MPH Applicants: Matriculated MD/MPH applicants can enter only during the Summer semester. The deadline for declaring an interest in the MD/MPH program is May 1st to the SUNY Downstate Office of Admissions.

Transfer Credits

A maximum of twelve (12) credits from another CHEA regionally accredited college and/or university can be transferred into the MPH program. Transfer of credits for courses used towards the completion of a granted degree will not be considered. Students must seek approval for the departmental chair of their concentration, prior to registering for courses at other CHEA accredited institutions.

For transfer of credits, the accepted student must provide: 1) a detailed course syllabus and 2) an official transcript verifying at least a B grade (3.0 on a 4.0 system) in that particular course(s).

If the student fails to provide appropriate proof of course content equivalency and an official transcript in a timely fashion, the option for credit transfer may be denied.

Notification of Status

Notification of action on the application is mailed after the complete admission materials are received. A student accepted for admission into one of the graduate programs is required to secure his or her place in the class by submitting a deposit that will be applied to the first semester's tuition.

Deferrals

If accepted, individuals may request a deferral for up to one year for personal or professional reasons. Requests must be made in writing and submitted to the Office of Admissions and to the Chair of the specific department. No extensions beyond the one-year are permitted.

Matriculation Policy

Accepted students are required to submit all required documents, including final transcripts for all college and universities attended, to the Office of Admissions prior to the start of classes. Note that required health documents must be submitted directly to the Student Health Office.

Mandatory Criminal Background Check

Please note that all students who attend SUNY Downstate Medical Center will be required to complete a background check prior to enrollment, at your expense. Background Checks will be conducted post-admission and are not used by the Admissions Committee to determine admissibility. Once you are accepted, you should complete the criminal background check by following the instructions [here](#). Applicants are directed to the Department of Admissions Webpage on Criminal Background Checks as follows:
CRIMINAL BACKGROUND CHECKS

Criminal Background Checks (CBC) are becoming a standard requirement for employment in health care today. SUNY Downstate Medical Center works with many health care facilities in Brooklyn, New York City, and beyond to provide you with these clinical experiences, as part of your education. Many of these facilities also require that students that are sent to their facilities have completed a recent Background Check to ensure the safety and well-being of their patients.

As was indicated to you in previous communications to you, all students admitted to a program at SUNY Downstate are required to have a Criminal History Background Check prior to enrollment.

All students selected for admission, are admitted conditionally until Background check CBC results are obtained and reviewed. Students are responsible for completing the Background Check prior to your enrollment, but after you are conditionally admitted to your program.

Results of the Background check will be made available to the student and to SUNY Downstate Medical Center. All Background Checks will be treated as confidential. Information from the CBC, not previously revealed in your application, will be reviewed and may result in the withdrawal of your acceptance.

Background checks performed for employment, previously, cannot be used to fulfill the CBC admissions requirement to the programs at SUNY Downstate without prior permission. See the instructions on the website regarding how to submit a prior report that was completed within one year of the date of entry to your program at SUNY Downstate.

How do I obtain my Background Check?

SUNY Downstate Medical Center is working with CertifiedBackground.com to complete the background check process for all admitted students in the College of Health Related Professions, College of Nursing, and School of Public Health (except MD/MPH applicants). *Accepted Applicants in the College of Medicine or the MD/MPH or MD/PhD programs should see a special set of instructions below. Accepted Applicants in the School of Graduate Studies (except MD/PhD applicants) should see a special set of instructions below.* The cost of the background check is \$55, which is payable by the student to the company directly.

What type of information is searched by CertifiedBackground.com?

Our CertifiedBackground.com package includes the following:

- County Criminal Records
- Nationwide Sexual Offender Index
- Social Security Alert
- Residency History

What is CertifiedBackground.com?

CertifiedBackground.com is a service that allows students to order their own Background Check online. Information collected through CertifiedBackground.com is secure, tamper-proof, and kept confidential. The results are posted on the CertifiedBackground.com website where the student (you), as well as the school, can view them.

I have a prior offense. Will that impact my ability to enroll at SUNY Downstate Medical Center?

Applicants who have prior offenses were required to disclose these offenses as part of the application process to SUNY Downstate Medical Center. Applicants with prior offenses are reviewed by a Campus Review Committee, as is required under State University of New York policy. Offenses which were disclosed on your current application which also come up during the Background Check will not impact your ability to enroll at SUNY Downstate Medical Center.

If an offense is revealed during the Criminal Background Check process which was not previously revealed by the applicant on their application, the offense will be reviewed by the Campus Review Committee and the Admissions Committee. The offer of admission to SUNY Downstate can be rescinded. If you have any questions, please contact the Office of Admission by e-mail at [admissions@downstate.edu].

Re-applicants

Some "re-applicants" are admitted each year with improved credentials. Re-applicants should contact the Program Office to schedule a pre-application advisement appointment to discuss how to improve their credentials in a reapplication. Re-applicants must submit a new application form, application fee, transcripts, and at least one new letter of recommendation.

International Student Applications and Foreign Medical Graduates

Applicants who have completed all or part of their education abroad, are required to have a course-by-course educational credential evaluation completed by an approved agency accredited by **The National Association Of Credential Evaluation Services** (<http://www.naces.org>). This evaluation must include a breakdown of each course by name, US equivalent semester hours, and the corresponding letter grade. These requests should be done and completed well in advance of the semester deadlines.

Our entering classes are small and admission preference is given to New York State residents and to individuals who have completed their prerequisite courses in the United States.

International students should not consider assistance from the college in their financial planning. On-campus employment is not recommended because of the demanding nature of the academic program. Many international students have visa restrictions on working. All international applicants must document their ability to finance their education as part of the admissions process.

International Medical Graduates who wish to be considered health care professionals are required to either have a valid and current state license in the United States or have passed Steps I and II of the United States Medical Licensing Examination (USMLE) before they can be considered for entry into the program.

Application Processing

All applicants are instructed to submit the application for admission and all official supporting credentials via the ApplyYourself application system. When an application is complete that application is forwarded to the School of Public Health for review by the Committee on Admissions.

Important Information

Admission to SUNY Downstate Medical Center is based on the qualifications of the applicant. SUNY Downstate Medical Center does not discriminate on the basis of race, sex, color, creed, age, national origin, disability, sexual orientation, religion, marital status or status as a disabled veteran in the Vietnam era. Responses on this application to questions of race, sex, and date of birth are voluntary and are used for statistical purposes only.

Doctor of Public Health – Admissions Requirements

Application Deadlines:

Fall Semester - April 15th

The time allotted for completion of the Doctor of Public Health degree, regardless of concurrent degree involvement is eight (8) years unless there are compelling extenuating circumstances.

Admission Requirements

- **Graduate Degree.** Prior Master's degree from a CHEA regionally accredited college and/or university.
 - Such Master's degrees may include MPH, MSW, MBA, MHS, or another relevant Master's degree.
 - The applicant may also be required to take additional coursework to meet the requirements of the core MPH curriculum in the chosen area of study. Please note that coursework completed to meet this requirement may not be used to satisfy doctoral coursework requirements unless such courses are at the doctoral level. Such decisions are made on an individual basis by each department.
 - If additional course work is required, then the applicant may be given a conditional acceptance to the doctoral program until the conditional requirements are satisfied.
- **Transcripts.** Official transcripts from all previous postsecondary CHEA regionally accredited colleges or universities.
- **Grade Point Average (GPA).** A graduate (e.g. MPH, MS, MA, etc...) academic record with a cumulative grade point average of 3.5 or better (on a 4.0 scale) in the major course of study is preferred.
- Appropriate completion of the doctoral application.
- **Personal Statement.** An essay of 300 words or less denoting the applicant's interest in pursuing a doctoral degree in a specific area. The applicant should examine the research and practice interests of the doctoral faculty in his/her respective areas of interest to ensure that an appropriate faculty collaboration is possible. Please see the [Downstate Website](#) to learn more about the respective faculty.
- **Letters of Recommendation.** Three (3) letters of recommendation preferably from either faculty in the primary field of study and/or from a recent employer
- **Entrance Examinations.** A graduate entrance examination is required. Graduate entrance examinations that will be accepted include the following :
 - Graduate Record Examinations (GRE).
 - Medical College Admissions test (MCAT).
 - Dental Admission Test (DAT).
 - Graduate Management Admission Test (GMAT).

- Law School Admission Test (LSAT).
 - Optometry Admission Test (OAT).
 - United States Medical Licensure Exam (USMLE) Step 1 or 2.
 - National Board of Veterinary Medical Exam (NBVME).
- **On-site Interview.** Each doctoral applicant must have an on-site interview with a designated faculty member in the department to which the applicant is applying. The interview will be arranged by the specific department when the applicant's application is complete. The detailed written report and recommendation of the interviewer will be submitted with the application for consideration by the Admissions Committee,
 - **Licensure.** Proof of current licensure must be submitted for all licensed health professionals
 - **Test of English as a Foreign Language.** The (TOEFL) is required for ALL applicants for whom English is a Second Language and who have not completed at least one year of Full-time study in a regionally accredited college or university in the United States (at least 24 semester credits, including two courses in English composition). A minimum score for the paper exam of 536 (undergraduate programs) and 564 (graduate programs); a minimum score for the computer exam of 208 (undergraduate programs) and 223 (graduate programs); and a minimum score for the Internet-based exam of 65-78 (undergraduate programs) and 79-95 (graduate programs) is required on the TOEFL.
 - TOEFL Box 6151,
Princeton, New Jersey 08541
phone: (609) 771-7100
web: www.toefl.org
» Use the SUNY Downstate Institutional Code of 2534
» Please note: Your application is not considered complete without the required standardized test score(s).
 - **Application Fee.** A \$75 non-refundable application fee made payable to SUNY Downstate Medical Center.
 - For those applying to Biostatistics, Epidemiology, or Environmental and Occupational Health Sciences, a Bachelor of Science degree is preferred with at least one (1) undergraduate math and one (1) undergraduate biology course. For applicants to Environmental and Occupational Health Sciences, an undergraduate chemistry course is also preferred.

At the time of application, unofficial documents maybe submitted via the ApplyYourself application system. Upon acceptance, however, all students will be required to submit all final and official documents before matriculating.

Application Deadlines

Applicants intending to enter in the Fall semester must have their application completed and submitted by April 15th. Note that applicants may be admitted after this date, but only on space-available basis.

Transfer Credits

A maximum number fifteen (15) credits from another CHEA regionally accredited college and/or university can be transferred into the doctoral program. Courses used towards the completion of a granted degree will not be considered. However, some DrPH coursework may be waived if relevant doctoral level courses have been taken at another institution. Students must seek approval for the departmental chair of their concentration, prior to registering for courses at other CHEA accredited institutions.

For transfer of credits or a waiver, the accepted student must provide: 1) a detailed course syllabus and 2) an official transcript verifying at least a B grade (3.0 on a 4.0 system) in that particular course(s).

If the student fails to provide appropriate proof of course content equivalency and an official transcript in a timely fashion, the option for credit transfer may be denied.

Notification of Status

Notification of action on the application is mailed after the complete admission materials are received. A student accepted for admission into one of the graduate programs is required to secure his or her place in the class by submitting a deposit that will be applied to the first semester's tuition.

Matriculation Policy

Accepted students are required to submit all required documents, including final transcripts for all college and universities attended, to the Office of Admissions prior to the start of classes. Note that required health documents must be submitted directly to the Student Health Office.

Mandatory Criminal Background Check

Please note that all students who attend SUNY Downstate Medical Center will be required to complete a background check prior to enrollment, at your expense. Background Checks will be conducted post-admission and are not used by the Admissions Committee to determine admissibility. Once you are accepted, you should complete the criminal background check by following the instructions [here](#).

See above for Criminal Background Check policy and procedures.

International Student Applications and Foreign Medical Graduates

Applicants who have completed all or part of their education abroad, are required to have a course-by-course educational credential evaluation completed by an approved agency accredited by The National Association Of Credential Evaluation Services (<http://www.naces.org>). This evaluation must include a breakdown of each course by name, US equivalent semester hours, and the corresponding letter grade. These requests should be done and completed well in advance of the semester deadlines.

Our entering classes are small and admission preference is given to New York State residents and to individuals who have completed their prerequisite courses in the United States.

International students should not consider assistance from the college in their financial planning. On-campus employment is not recommended because of the demanding nature of the academic program. Many international students have visa restrictions on working. All international applicants must document their ability to finance their education as part of the admissions process.

International Medical Graduates who wish to be considered health care professionals are required to either have a valid and current state license in the United States or have passed Steps I and II of the United States Medical Licensing Examination (USMLE) before they can be considered for entry into the program.

Deferrals

If accepted, individuals may request a deferral for up to one year for personal or professional reasons. Requests must be made in writing and submitted to the Office of Admissions and to the Chair of the specific department. No extensions beyond the one-year are permitted.

Re-applicants

Some "re-applicants" are admitted each year with improved credentials. Re-applicants should contact the Program Office to schedule a pre-application advisement appointment to discuss how to improve their credentials in a reapplication. Re-applicants must submit a new application form, application fee, transcripts, and at least one new letter of recommendation.

Application Processing

All applicants are instructed to submit the application for admission and all official supporting credentials via the ApplyYourself application system. When an application is complete, that application is forwarded to the School of Public Health for review by the Committee on Admissions.

Important Information

Admission to SUNY Downstate Medical Center is based on the qualifications of the applicant. SUNY Downstate Medical Center does not discriminate on the basis of race, sex, color, creed, age, national origin, disability, sexual orientation, religion, marital status or status as a disabled veteran in the Vietnam era. Responses on this application to questions of race, sex, and date of birth are voluntary and are used for statistical purposes only.

c. Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading and the academic offerings of the school. If a school does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the school. In addition, references to website addresses may be included.

Recruitment materials for the SPH include:

- SPH Website: www.downstate.edu/publichealth
- Facebook Page: https://www.facebook.com/pages/SUNY-Downstate-Medical-Center-School-of-Public-Health/183542105016274?ref=br_tf
- SUNY Downstate Student Handbook 2014-2015 (see Resource File)
- SPH Supplemental Student Handbook 2014-2015 (see Resource File)
- SPH Viewbook (see Resource File)
- SPH MD/MPH Pamphlets (see Resource File)
- SPH Retractable Display Banners [used for Recruitment Fairs and Expositions] (see Resource File)

Table 4.3c.1: Methods of Promotion for Student Recruitment Purposes			
Academic Year	2012-2013	2013-2014	2014-2015
Give-Aways			
Departmental and General SPH Fliers	✓	✓	✓
Trifolds (General and MD/MPH Specific)	✓	✓	✓
Informational Viewbook	✓	✓	✓
Informational Viewbook redesign			✓
Public Health in Action Newsletter	✓	✓	✓
Design of new SPH Logo		✓	
Pens with SPH Logo	✓	✓	✓
Incentives			
Rao Scholarship	✓	✓	✓
Biostatistics Scholarship		✓	
Information Sessions and Meetings			
MPH for both DMC Employees and the Community	✓	✓	✓
Talks to medical students about MD/MPH degree	✓	✓	✓
DrPH for both DMC Employees and the Community	✓	✓	✓
Meeting with DMC Hospital Leaders to Present Opportunities for Obtaining the MPH and DrPH in the SPH	✓	✓	✓
Meeting with Nursing Department Leaders at Downstate to Discuss Ways to Better Recruit RNs into the SPH	✓	✓	✓
Design and production of new conference booth (pull-up banners and table throw)		✓	✓
Internet			
Facebook Page for SPH	✓	✓	✓
Google Adwords with Ranking Optimization	✓	✓	✓
Twitter Account for SPH	✓	✓	✓
Website	✓	✓	✓
Internet advertising: Banner ad on ASPH/ASPPH website	✓	✓	✓
YouTube channel for SPH	✓	✓	✓
Mailings			
Public Health in Action Newsletter (Mailed to all schools of public health in the nation)	✓	✓	✓
Public Fairs			
Health Fairs	✓	✓	
Public Health Conferences		✓	
Graduate School Fairs		✓	✓
Undergraduate School Fairs		✓	
TV/Video			
Video Footage on Website	✓	✓	✓
SPH Video Footage and Photos Being Edited and Updated for Marketing	✓	✓	✓
New general promotional video produced: School Mission and Living and Working in Brooklyn			
SPH promotional videos active on YouTube channel	✓	✓	✓
CBS news segment			✓
Staffing			
Hiring of two work-study marketing assistants		✓	✓

Over the past three years, the school has met its matriculation goals, as detailed in Table 4.3f.1 below. The School's marketing committee has launched a number of initiatives, whose goal is to enable the School to meet its matriculation targets.

d. Quantitative information on the number of applicants, acceptances and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format.

Table 4.3d.1: Admissions Process Data: Information on MPH Applicants, Acceptances, and New Enrollments, by Concentration Area for the last 3 years

Table 4.3d.1 Quantitative Information on MPH Applicants, Acceptances, and Enrollments, 2012-2013 to 2015-2016					
		2012-2013	2013-2014	2014-2015	2015-2016
Concentration Area #1 Biostatistics	Applied	5	4	5	5
	Accepted	2	3	2	4
	Enrolled	2	2	2	2
Concentration Area #2 Community Health Sciences	Applied	41	66	47	79
	Accepted	17	28	17	73
	Enrolled	17	26	17	17
Concentration Area #3 Environmental and Occupational Health Sciences	Applied	7	7	5	5
	Accepted	2	1	2	5
	Enrolled	2	1	2	2
Concentration Area #4 Epidemiology	Applied	28	38	25	20
	Accepted	9	10	25	18
	Enrolled	9	10	11	9
Concentration Area #5 Health Policy and Management	Applied	40	44	40	27
	Accepted	17	31	22	26
	Enrolled	17	23	21	18
TOTALS	Applied	121	159	122	137
	Accepted	47	73	68	127
	Enrolled	47	62	53	48

Table 4.3d.2 Admissions Process Data: Information on MD/MPH Applicants, Acceptances, and New Enrollments, by Concentration Area for the last 3 years

Table 4.3d.2 Quantitative Information on MD/MPH Applicants, Acceptances, and Enrollments, 2012-2013 to 2015-2016					
		2012-2013	2013-2014	2014-2015	2015-2016
Concentration Area #1 Biostatistics	Applied	2	0	2	1
	Accepted	2	0	0	1
	Enrolled	1	0	0	0
Concentration Area #2 Community Health Sciences	Applied	6	10	59	10
	Accepted	4	3	4	10
	Enrolled	2	3	2	0
Concentration Area #3 Environmental and Occupational Health Sciences	Applied	1	0	3	2
	Accepted	0	0	1	2
	Enrolled	0	0	0	0
Concentration Area #4 Epidemiology	Applied	7	3	17	3
	Accepted	3	1	3	3
	Enrolled	2	1	2	1
Concentration Area #5 Health Policy and Management	Applied	13	5	30	31
	Accepted	3	1	5	31
	Enrolled	2	1	3	2
Totals	Applied	36	18	111	47
	Accepted	12	5	13	47
	Enrolled	7	5	7	3

Table 4.3d.3 Admissions Process Data: Information on DrPH Applicants, Acceptances, and New Enrollments, by Concentration Area for the last 3 years

Table 4.3d.3 Quantitative Information on DrPH Applicants, Acceptances, and Enrollments, 2012-2013 to 2015-2016					
		2012-2013	2013-2014	2014-2015	2015-2016
Concentration Area #1 Community Health Sciences	Applied	10	19	24	10
	Accepted	6	8	2	5
	Enrolled	5	8	2	5
Concentration Area #2 Environmental and Occupational Health Sciences	Applied	4	3	7	2
	Accepted	2	0	3	1
	Enrolled	2	0	3	1
Concentration Area #3 Epidemiology	Applied	9	10	4	8
	Accepted	3	5	0	6
	Enrolled	2	5	0	6
Totals	Applied	23	32	35	20
	Accepted	11	13	5	12
	Enrolled	9	13	5	12

e. Quantitative information on the number of students enrolled in each specialty area identified in the instructional matrix, including headcounts of Full- and Part-time students and a Full-time-equivalent conversion, by concentration, for each degree, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format.

Table 4.3e.1: Total Enrollment Data: MPH Students Enrolled in each Area of Concentration Identified in Instructional Matrix for each of the last 3 years

Table 4.3e1: MPH Student Enrollment Data from 2012-2013 to 2014-2015								
	2012-2013		2013-2014		2014-2015		2015-2016	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Concentration Area								
Concentration Area #1 Biostatistics	6	3.4	7	5.5	7	4.5	4	These data will be provided at the site visit.
Concentration Area #2 Community Health Sciences	37	23.9	46	33.8	39	19.8	35	
Concentration Area #3 Environmental and Occupational Health Sciences	3	1.4	2	1.1	4	2.2	4	
Concentration Area #4 Epidemiology	24	18.1	33	21.2	33	18.7	23	
Concentration Area #5 Health Policy and Management	29	19.0	49	34.3	59	42.6	43	
TOTAL	99	65.8	137	95.8	142	87.8	109	

Table 4.3e.2: Total Enrollment Data: MD/MPH Students Enrolled in each Area of Concentration/Specialization Identified in Instructional Matrix for each of the last 3 years

Table 4.3e.2: MD/MPH Student Enrollment Data from 2012-2013 to 2015-2015								
	2012-2013		2013-2014		2014-2015		2015-2016	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Concentration								
Concentration Area #1 Biostatistics	0	0	0	0	0	0	0	0
Concentration Area #2 Community Health Sciences	8	8.0	9	9.0	8	9.0	6	0
Concentration Area #3 Environmental and Occupational Health Sciences	0	0	0	0	0	0	0	0
Concentration Area #4 Epidemiology	8	8.0	9	9.0	8	7.8	9	2.6
Concentration Area #5 Health Policy and Management	4	4.0	4	4.0	7	7.0	9	3.5
TOTAL	20	20.0	22	22.0	23	23.8	24	6.1

Table 4.3e.3: Total Enrollment Data: DrPH Students Enrolled in each Area of Concentration/Specialization Identified in Instructional Matrix for each of the last 3 years

Table 4.3e.3: DrPH Student Enrollment Data from 2012-2013 to 2014-2015								
	2012-2013		2013-2014		2014-2015		2015-2016	
	HC	FTE	HC	FTE	HC	FTE	HC	FTE
Concentration								
Concentration Area #1 Community Health Sciences	11	4.6	19	7.0	18	4.8	23	These data will be provided at the site visit.
Concentration Area #2 Environmental and Occupational Health Sciences	7	2.6	6	6.0	10	2.3	9	
Concentration Area #3 Epidemiology	8	3.6	13	4.6	12	2.1	19	
Discontinued Concentration Area Health Policy and Management	The DrPH Degree in Health Policy and Management was discontinued in 2010-2011 per a substantive change submitted to CEPH.							
TOTAL	26	10.8	38	17.6	40	9.1	51	

f. Identification of measurable objectives by which the school may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the school against those measures for each of the last three years. See CEPH Outcome Measures Table.

- Number of Master of Public Health (MPH) students matriculated each academic year.
- Number of concurrent MD/MPH students matriculated each academic year.
- Number of Doctor of Public Health (DrPH) students matriculated each academic year.

Table 4.3f.1: Qualified Student Body Outcome Measures

Table 4.3f.1: Qualified Student Body Outcome Measures for 2012-2013 to 2015-2016 (Projected)					
Outcome Measure	Target	2012-2013	2013-2014	2014-2015	2015-2016 (Projected)
# of MPH students Matriculated per Academic Year	45	47	62	46	50
# of MD/MPH students matriculated per academic year	6	7	5	7	3
# of DrPH students matriculated per academic year	3	9	13	5	10

Over the past three years, the school has met its matriculation goals, as detailed in the above table. The School's marketing committee has launched a number of initiatives, whose goal is to enable the School to meet its matriculation targets.

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

This criterion is met.

Strengths:

The School of Public Health continues to attract, accept and enroll a qualified student body based on the eligibility criteria utilized by the Committee on Admissions. The SPH has maintained or increased its applicant pool, acceptances and enrollees over the past few years. We continue to have a robust student body in the MPH degree program and continue to increase applicant pool for a more robust student body in the DrPH degree program.

Weaknesses:

None.

Plans:

Continue to explore student recruitment opportunities for the MPH and DrPH degree programs. Continue to enroll a robust student body. Continue to increase enrollment in both degree programs.

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.

Required Documentation. The self-study document should include the following:

a. Description of the school's advising services for students in all degree programs, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.

All incoming students receive an orientation from the School's faculty and administrators prior to beginning classes. At this orientation, students receive a copy of the SUNY DMC Student Handbook and the SPH Supplemental Student Handbook which outline all their rights and responsibilities. The Overarching Competencies for each degree, as well as the Concentration Competencies are listed in the orientation materials and discussed at this orientation. [See Resource File for the SUNY Downstate Medical Center Student Handbook 2014-2015 and the SPH Supplemental Student Handbook 2014-2015] Each student in the SPH is assigned a Faculty Advisor by the Vice Dean for Academic and Student Affairs in consultation with the relevant departmental chair. Assignments are made by attempting to match the expressed interests of students with the expertise of given faculty.

The Faculty Advisor meets with the student regularly to review their academic record and discuss course selection. This Faculty Advisor is responsible for tracking each student's progress toward the degree. In addition, the Assistant Dean for Enrollment and Student Affairs meets with each student prior to their registration each semester to ensure that all academic requirements are being met and required courses are being taken in a timely fashion.

At the beginning of their course of study, students register for courses which are subject to the approval of their Faculty Advisor and the Assistant Dean for Enrollment and Student Affairs. They also submit a list of selected courses for subsequent semesters, which are subject to approval by the faculty advisor and the Assistant Dean for Enrollment and Student Affairs.

b. Description of the school's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to specific needs in the school's student population.

The majority of our students are already employed, many of them in the field of public health. Our formal career counseling is accomplished through a number of different methods: Faculty Advisors discuss career options with students during regular advisements sessions. Dr. Karen Benker, the Associate Dean for Community Public Health Affairs regularly informs students via e-mail, on an almost weekly basis, of employment opportunities in diverse areas of interest. She also provides information on internship opportunities. Both job openings and internship opportunities are posted in hard copy on the SPH bulletin board. The Student Council sponsors informational events about careers in public health, to which outside speakers are invited to share their expertise in public health practice. (See Career Day Fliers in Resource File)

c. Information about student satisfaction with advising and career counseling services.

The open environment at the SPH encourages students to voice their opinions regarding the operations of the SPH, including advising and career counseling services to faculty, staff, administrators, etc. No formal grievances have ever been filed. Per our evaluation methods listed above, we have regular course evaluations, Faculty Advisor meetings with students, a suggestion box and open forums for students to discuss any issues they may have with the Administration. The Student Council is also instrumental in bringing any issues to the attention of the Administration.

Regarding career counseling: most of our students are Part-time because they work Full-time or are MD/MPH students. Occasionally, a student will take a year off to do the MPH degree. The

overwhelming majority of our graduates are employed or involved in further educational programs, as shown in Tables 2.7b.5 and 2.7b.6 in Criterion 2.7b above (p. 172). SPH Faculty Advisors are available to meet with them regarding career advancement and choices.

In the 2014-2015 academic year, a formal system of surveying graduates of the MPH and DrPH programs was initiated as part of a Centerwide effort at surveying all graduates. This survey includes a number of questions concerning student satisfaction and career counseling. A copy of the results of this most recent survey is included in the Resource File. The recently initiated survey assesses student satisfaction by degree program. The results are as follows:

Among recent MPH graduates over the past few years, employment rates have ranged from 69% to 94%. See Table 2.7b.5 above. At the time of this writing, the SPH has graduated five (5) DrPH students. Of these five, one has retired since he was a student, one is deceased, and the remaining three (3) are employed Full-time.

d. Description of the procedures by which students may communicate their concerns to school officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.

Within the larger Medical Center, there is a formal process for grievances which involve issues of sexual harassment or violence. As stated on page 154 of the SUNY DMC Student Handbook:

COMPLAINT PROCEDURE PROCESS

Overview

The State University of New York Downstate Medical Center (“SUNY Downstate” or “The University”), in its continuing effort to seek equity in education and employment and consistent with Federal and State anti-discrimination legislation, has adopted a complaint procedure for the prompt and equitable investigation and resolution of allegations of unlawful discrimination on the basis of race, color, national origin, religion, creed, age, gender, sexual orientation, disability, gender identity, familial status, pregnancy, predisposing genetic characteristics, military status, domestic violence victim status, or criminal conviction. Harassment on the basis of the above categories is one form of unlawful discrimination.

Complaints of discrimination should be made to the Assistant Vice President (AVP) of the Office of Diversity and Inclusion or designee. Complaints of sex discrimination and sexual violence should be made to the Title IX Coordinator. Complaints or concerns that are reported to a University administrator, manager, or supervisor concerning an act of discrimination or harassment or acts of discrimination or harassment that administrators, managers, or supervisors observe or become aware of shall be immediately referred to the Office of Diversity and Inclusion. Employees who observe or become aware of sex discrimination, including sexual harassment and sexual violence, should report this information to the campus Title IX Coordinator. Employees with Title IX compliance responsibilities and/or employees who have the authority to take action to redress the harassment must report any complaints to the Title IX Coordinator. Complaints may also be made directly to the Assistant Vice President and/or Title IX Coordinator by anyone who experiences, observes, or becomes aware of discrimination or harassment. ODI will also receive initial inquiries, reports, and requests for consultation. ODI will respond as appropriate in a timely manner.

However, grievances regarding disputed grades or unfair treatment rest within each academic unit in the Medical Center.

Academic grievances in the School of Public Health are formally addressed as described below. This process is stated in the Policies and Procedures of the Committee on Student Evaluation, Promotion and Honors, and publicized in the SPH Supplemental Student Handbook and the SUNY Downstate Student Handbook, which are accessible to students on the Downstate website.

Appeal and Notification Procedures

Students who have been recommended for dismissal for academic failure or unprofessional behavior by the SPH Committee of Student Evaluation, Promotion, and Honors (SEPH) shall be notified by the SPH Vice Dean (or designee) and may appeal the recommendation (in writing) to the Dean. Cases in which students are being recommended for academic probation may not be appealed.

The appeals process is as follows:

1. Written (and/or email) notification will be sent by the Vice Dean (or designee) to the student of a decision of the SEPH Committee of unsatisfactory academic progress within five (5) business days of the SEPH Committee's decision. The Vice Dean (or designee) is required to employ only his/her best effort to notify the student of his/her status. (Initial notification will be made to the student's current local address on file with the Office of the Registrar, a copy will be sent to the student's Downstate e-mail account.) Students are responsible for keeping their current mailing address and telephone number on file with the Office of the Registrar and the SPH. Students in academic difficulty are advised to contact the Vice Dean immediately following the SEPH meeting to ascertain their academic status.
2. A student wishing to appeal a dismissal determination affecting him/her, as provided above, must submit a written appeal notice to the Vice Dean no later than three (3) business days after the student has been sent notification, by mail or email, of the SEPH Committee's action or determination. The written appeal letter should outline reasons for the appeal in detail. Appeals are intended to be expedited in the shortest reasonable time in order to provide the student with the opportunity to register for the ensuing term.
3. The written appeal will be considered by an Ad Hoc Appeals Committee appointed by the Dean. The voting members of the Ad Hoc Appeals Committee may not be members of the SEPH Committee and will be selected among those faculty not directly involved with the student's case. There will be a minimum of three voting members on the Ad Hoc Appeals Committee. SUNY Downstate's Associate or Assistant Dean of Student Affairs will serve as ex-officio, non-voting members.
4. The Chair of the Ad Hoc Appeals Committee will notify the student in writing that he/she is being granted an opportunity to appear before the Ad Hoc Appeals Committee to discuss, in detail, the reasons for his/her appeal. The Chair shall provide written/email notice of such a meeting (including the date, time and place) to the student and all Ad Hoc Appeals Committee members. The student will have, a minimum of 2 (two) business days advance notice of the meeting day and time. The meeting with the Ad Hoc Committee will be scheduled within 10 (ten) business days the Committee's receipt of the student's written appeal.
5. During the meeting, the student will be given an opportunity to present his/her appeal before the Ad Hoc Appeals Committee. The student will not be allowed to record any of the proceedings. After completion of the student's presentation, members of the Ad Hoc Appeals Committee may address questions to the student. Furthermore, the Ad Hoc Appeals Committee may seek information from the program chair, faculty, student's advisor, and/or other parties involved in the case. After the student has made any concluding remarks, the student will leave the meeting so that the Committee can discuss the appeal, and make a recommendation to the Dean.

- a. The Ad Hoc Appeals Committee may recommend that the prior action of the SEPH Committee either be upheld, modified, or reversed. A decision requires a majority vote.
- b. The decision of the Ad Hoc Appeals Committee will be sent in writing within seven (7) business days by the Chair of the Ad Hoc Appeals Committee to the Dean, the Vice Dean, and the SPH Assistant Dean for Enrollment & Student Affairs.
- c. The Vice Dean will notify the student, in writing, of the decision of the Ad Hoc Appeals Committee within fourteen (14) business days of his/her appeal meeting. The Vice Dean is required to employ only his/her best effort to notify the student of his/her status. (Notification will be made to the address on file in the Office of the Registrar and a copy will be sent to the student's Downstate e-mail account.)
6. Students who have been recommended for dismissal from the School of Public Health may schedule an appeal with the Dean of the School of Public Health within ten (10) business days of the date of the letter from the Vice Dean. The Dean, after due consideration, may either endorse the recommendation of the Ad Hoc Appeals Committee or make an independent determination. In either event, the Dean's decision is final and binding.
7. The student will be notified of the final decision of the Dean. The Dean is required to employ only his/her best effort to notify the student of his/her status. (Notification will be made to the address on file in the Office of the Registrar and a copy will be sent to the student's Downstate e-mail account.)

Other types of student grievances in the School of Public Health are brought to the attention of the Vice Dean in one of the following ways:

- direct communication from student to Vice Dean or Dean
- direct communication from student to the Assistant Dean for Enrollment and Student Affairs
- stated on the course evaluation form
- anonymously submitted in the SPH Suggestion Box located in the SPH Student Lounge

Then the Vice Dean will meet with the student individually to obtain all information about the complaint. The appropriate member of the faculty or staff will be notified and a meeting will be held with the faculty/staff member and the Vice Dean. Resolution is normally accomplished through this method. Any escalation of the situation would be brought to the Dean for an ultimate ruling.

All Informal Complaints listed in the table below refer to minor issues brought to a faculty or staff member's attention and resolved without the intervention of the Dean or the SEPH Committee. Course Issues refer to comments or complaints listed on Course Evaluation Forms and addressed by the Chair with the respective Course Instructor.

Table 4.4d.1: Informal Complaints from Students of All Degree Programs Brought to the Attention of the Vice Dean or Dean			
Complaint/Suggestion	2012-2013	2013-2014	2014-2015
Advising	6	8	4
Appeal of Accusation of Plagiarism	0	0	0
Course Issues including Level of Difficulty and Instructor Style	12	9	8
Grade Appeals	0	0	2
Instructor Not Granting an "Excused" Absence	0	0	0
Suggestion Box Entries	0	1	0

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

This criterion is met.

Strengths:

The majority of our graduates are employed when they enter the MPH and DrPH degree programs. Informational offerings about job and internship opportunities, faculty advisement to students about careers and career opportunities are made available to the students on a regular basis. Faculty members with extensive experience in various specialty fields of public health provide students with career advisement and guidance. In addition, the SPH Student Council holds an annual "Career Day" with the assistance of faculty and external employers. As a member of the overall SUNY system, and with national and state oversight, the SUNY Downstate SPH has strong internal and external controls to ensure the clear articulation of student rights, responsibilities and ethical practices toward students. These policies include the formal filing of student academic complaints and grievances and more informal processes for other types of non-academic student grievances.

Weaknesses:

Career counseling is largely handled in an informal manner at the present time. The reason for this, is that, as reported above, the vast majority of our students are employed and from 79% to 94% of MPH graduates are employed following graduation. Nonetheless, as stated below, plans are underway to create a placement function for the small percentage of students seeking employment following graduation.

Plans:

The SPH is working toward the creation of a formal career advisement and job placement office, and is hopeful that such an office will be created when the budgetary situation within SUNY improves.