CRITERIA 1: 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.

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

The Milken Institute School of Public Health (SPH) is committed to excellence in scholarship to advance the health of the populations of our local, national, and global communities. Through a transparent and collaborative process, we created our mission, vision, and values as outlined in 1.1.e, and in alignment with the University Strategic Vision: https://provost.gwu.edu/sites/provost.gwu.edu/files/downloads/Strategic%20Plan_May13.pdf.

Our Mission
Our mission is to provide the best public health educational experience incorporating our core values of scholarship and leadership, scientific rigor and policy analysis, and training to foster the next generation of thought leaders, practitioners, policy makers and scientists who will transform public health worldwide especially for underserved and poor populations.

Our Vision
As complex global health challenges continue to threaten our health and future, the Milken Institute School of Public Health will be preeminent in training tomorrow’s leaders for improving the public’s health. We aspire to become one of the top five private schools of public health in the world.

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

The Milken Institute SPH shares with the rest of the university (http://hr.gwu.edu/values) a set of core values that can be applied very specifically to the mission of our School. These are:

- **Learning**: We support opportunities for continuous development that maximize the potential of the individual and strengthen the university.
- **Communication**: We strive to share information and ideas in an open, consistent, and effective manner.
- **Community**: We strive to build a strong community in the service of our shared purpose and mission.
- **Diversity**: We embrace the unique contributions of all members of our community.
- **Excellence**: We commit ourselves to achieving the highest standards in all our endeavors.
- **Respect**: We treat others with courtesy and dignity.
- **Service**: We embrace our responsibility to exceed the expectations of others who depend on our actions.
- **Sustainability**: We value and engage in sustainable practices that enhance current and future resources for our campus, our community, and our world.
- **Teamwork**: We encourage collaboration to meet common goals and produce a sense of shared responsibility.
1.1.c. 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.

The SPH has established the following goals:

1. Raise the prominence and visibility of the Milken Institute SPH as one of the top ten schools of public health in the country;
2. Deepen the culture of excellence in education;
3. Propel the School’s interdisciplinary research portfolio to national prominence;
4. Integrate the School’s global health initiatives in alignment with GW’s institutional global impact goals;
5. Leverage health policy expertise to impact policies and improve public health;
6. Be at the forefront of GW institutional initiatives on citizenship and leadership; and
7. Increase financial strength.

1.1.d. A set of measurable objectives with quantifiable indicators related to each goal statement.

GOAL ONE: Raise the prominence and visibility of the SPH to one of the top ten schools of public health in the country.
- Objective 1: Recruit and retain a diverse and expert faculty.
- Objective 2: Recruit and enroll top-tier students.
- Objective 3: Establish and implement a robust communications plan.

GOAL TWO: Deepen the culture of excellence in education.
- Objective 1: Provide state-of-the-art facilities for teaching and learning.
- Objective 2: Expand range of applied learning opportunities to broader community.
- Objective 3: Deepen faculty development for teaching.
- Objective 4: Deploy comprehensive and inclusive systems for ongoing evaluation and feedback.

GOAL THREE: Propel the School’s interdisciplinary research portfolio to national and international prominence.
- Objective 1: Foster a culture of research excellence through capacity building, collaboration, and collegiality across departments, faculty, and staff.
- Objective 2: Provide state-of-the-art physical research facilities.
- Objective 3: Increase externally funded research conducted at the SPH.
- Objective 4: Enhance the scholarly output of SPH faculty, research staff, and students.
- Objective 5: Elevate the visibility of GW SPH research to the school, university, national, and international audiences.
- Objective 6: Cultivate doctoral and Post-doctoral research training platforms.

GOAL FOUR: Integrate the School’s global health initiatives in alignment with GW’s institutional global impact goals.
- Objective 1: Expand expertise and leadership in global health.
- Objective 2: Establish collaborative, organized centers for Global Research and Education.
• Objective 3: Develop model curricula for global health research and training.
• Objective 4: Develop a robust infrastructure for global research.

GOAL FIVE:
Leverage health policy expertise to impact policies and improve public health.
• Objective 1. Build strength in health economics and global health policy.
• Objective 2. Strengthen linkages between policy and management.
• Objective 3. Generate resources to respond to critical policy issues.
• Objective 4: Support faculty in communicating results of research to policy makers.
• Objective 5: Redesign Health Policy curriculum to be responsive to changing workforce demands.
• Objective 6: Increase funding for PhD students in Public Policy and Admin (HP track).
• Objective 7: Convene key stakeholders and decision makers around high priority issues.

GOAL SIX:
Be at the forefront of GW institutional initiatives on citizenship and leadership.
• Objective 1: Recognize and reward university, community and professional service.
• Objective 2: Foster a mindset of interdisciplinary and inter-professional service leadership among faculty, staff and students.
• Objective 3: Expand the School’s faculty and staff-led practice-based partnerships, and the options available for the required student practicum experience.
• Objective 4: Engage with local institutions to develop and implement policies and programs to improve health locally.

GOAL SEVEN:
Increase financial strength.
• Objective 1: Establish a forward looking budget process that engages all SPH leadership.
• Objective 2: Raise $25M for construction of new buildings.
• Objective 3: Meet GW Campaign goals.
• Objective 4: Create more opportunities for revenue growth.

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

Until 2010-2011 the School was housed within an administrative unit of the University known as the Medical Center, and the Dean reported to the Vice Provost/Vice President for Health Affairs (VPHA). The Medical Center was comprised of the School of Medicine and Health Sciences (SMHS), the School of Public Health and Health Services (SPHSH) and the School of Nursing (SON). All research funding in the Medical Center was directed through a separate research entity that was headed by the Medical Center’s Assistant Vice President for Research, who also reported to the VPHA. Likewise, there were AVPs for Development and Alumni Relations, Communications, and Finance. In May 2010 the GW Board of Trustees directed the University administration to begin a review of the organizational structure of
the GW Medical Center and define a long-term strategy for the three schools. Several factors had driven this request:

- Rapid change and growth within the health care industry and the demands placed on higher education to support these transformations.
- Prior transitions in which the GW Hospital and the GW Medical Faculty were spun off from the university.
- Questions about whether the shared resource model within the Medical Center was adequately supporting the growing needs of each of the three independent schools.

An external health services consulting firm, BDC Advisors, LLC, assisted in the review and made recommendations on alternative structures that would support a sustainable model for the future. After “Phase I” of the process (Organizational Assessment), BDC made a number of recommendations. Relevant to the SPH, they recommended that GW change the reporting relationship of the deans (including public health) to the Provost, thus eliminating the Vice Provost/VP Health Affairs as a separate position. They felt that this new arrangement would eliminate unnecessary complexity and expense, strengthen the role of the three deans, and promote the development of both the SPH and SON as vital independent professional educational programs. The resulting re-organization was intended to further the university’s goal to create a vision and a model that would allow GW’s health care initiatives to grow and bring parity between its structure and those of peer institutions.

GW accepted this recommendation; between November 2010-May 2011 we carried out “Phase II” (Structure, Vision and Strategy). Across all three schools, faculty were frequently engaged by Deans and by President Knapp to obtain input in restructuring, as well as building a vision and strategy. Functions were reviewed across the organization. A very intensive joint planning process began in June 2011 that resulted in a blueprint for implementation of the reorganization.

At that point, a separate budget was created for the SPH that included its research as well as academic revenues. As of July 1, 2011 the SPH was a separate entity from the Medical Center, with the Dean reporting to the Provost. As of that point, the SPH had full citizenship in terms of representation in university-wide governance process. However, a three-year “shared services” agreement was created such that the SMHS continued to provide services to the SPH until the SPH was able to transition to its own independent staffing for Information Technology, Development and Alumni Relations, Communications, and Classroom Support. With the exception of classroom support, these transitions occurred between 2011 and 2012, at which point these service agreements were terminated. The SPH obtained its own classrooms in Fall 2014 after moving into the new SPH building. Additional agreements continue to cover the SPH utilization of space in the SMHS for laboratories in Ross Hall, as well as the services of the SMHS Himmelfarb Medical Library.

Upon the separation of the Medical Center in 2011, SPH began to establish the foundation for developing a vision for the school that focused on:

- Building on our excellence in teaching and public health practice;
- Growing new efforts in interdisciplinary research and development;
- Updating, and expanding, academic program offerings; and
• Aggressive recruitment efforts to attract interdisciplinary and renowned faculty.

In order to support these efforts, the SPH also began to develop an administration that would support the academic, research, and operational needs of the school as well as its efforts to raise the visibility and the prominence of the School over the next 10 years.

As a result of the dissolution of the Medical Center, the School dedicated much of the initial stages for establishing its new mission, values, goals, and objectives by seeking internal and external stakeholder engagement.

**Internal Engagement: GW Administration**

Internally, we worked closely with the Office of the Provost, the GW Budget Office the Office for the Vice President for Research (OVPR), and the Business Management and Analysis Group. The Deans of the three schools established regular standing meetings to discuss industry and organizational challenges as well as shared interests such as the Himmelfarb Library and the development of laboratory infrastructure. A number of other Schools at GW also played an important role in this transition, most notably, the School of Law, the Columbian College of Arts and Sciences and the School of Engineering and Applied Sciences.

Relative to faculty and staff, we worked closely with the Division of Human Resources to build the new structure of the School. This included using market survey data to analyze and identify the structure needed to support the growth of the school. Between 2011-2014 the following administrative and academic offices were developed that did not previously exist at the School:

- Office of Communications and External Relations
- Office of Development and Alumni Relations
- Office of Human Resources
- Office of Faculty Affairs
- Office of Information Technology
- Office of Finance and Administration
- Office of Research Excellence
- Office of Practice

In most cases, these functions were completely new to the SPH and we needed to recruit a completely new cadre of leaders. In 2011 we recruited a new, experienced Associate Dean for Academic Affairs; and in 2012 we recruited Associate Deans for Research and for Public Health Practice, doubling faculty effort dedicated to decanal activities.

**Internal Engagement: GW SPH Faculty, Staff and Students**

Upon arrival at GW in August 2010, the Dean established a schedule of regular meetings with the SPH Department Chairs. The purpose of these meetings was to develop a joint governance model based on developing the strength within departmental operations and departmental committees, as well as a
schedule for regular faculty meetings to open up channels of communications across departments. In 2009 the SPH had been found to be out of compliance with certain provisions of the University Faculty Code, necessitating a number of changes in process as well as the recruitment of additional tenure track faculty members.

In November 2010 the Dean informed the SPH Faculty of impending transitions that had been approved by the Board of Trustees. Targeted areas for review and assessment by the faculty included:

- opportunities to pilot a school-based research infrastructure for pre- and post-award management;
- defining the roles and responsibilities of Development, Alumni Relations and Communications functions;
- space management;
- designing a permanent academic home for the School; and
- structuring governance issues.

The Trustees charged the School with developing new governance processes in harmony with the University Faculty Code, to be completed by the end of December 2010, and to be reported to the Trustees no later than the end of January 2011. Final governance procedures, created with input from the School's community – department chairs, faculty, students, and staff – were voted on by the faculty and approved by Provost Lerman.

These steps were accomplished primarily via appointment of faculty-driven committees representing all of our departments, (e.g., an ad hoc bylaws committee to address both the reorganization and the requirements of the faculty code, as well as a committee that completed the overhaul of our APT criteria.) The new bylaws established the School Executive Committee, procedures for establishment of search committees, and a schedule for the SPH Faculty Assembly meetings. In 2011 new bylaws and new APT criteria were adopted by the SPH Faculty Assembly. An important feature of these new bylaws was to establish broad representation in the SPH governance processes, with engagement not only of regular faculty but also research faculty, at every possible turn and within the limits imposed by the University Faculty Code.

We also took steps to support our Public Health Student Association (PHSA) and to find ways for them to participate in the governance of the school. Nearly every committee now has student representation, whether in voting or nonvoting capacities. The PHSA has steadily grown in strength and autonomy, and has become much more engaged in our ongoing efforts to build the vision and mission of the SPH.

**External Engagement: Key stakeholders**

In 2010 the SPH had an active Health Services Management and Leadership (HSML) Alumni Association, but an existing Dean’s Council that had not met for two years and a defunct SPH Alumni Association. Within the Medical Center, only 0.5 FTE supported all SPH fundraising and alumni relations. We had much room to improve.
The Dean’s Council was reactivated and reinvigorated (see below) and networking became a priority. Via the HSML Alumni Association and ongoing alumni events that were hosted by the Medical Center, the SPH was able to reconnect with many alumni. Additionally, because of its location, the SPH has strong connections with numerous alumni, and others, who work in the many federal, state, local, global NGO, community and other health and healthcare entities in the DC area. Many of these individuals are actively engaged in the school as instructors, mentors, practicum supervisors, and employers of our graduates. We began holding events and extending invitations to school functions for these constituents. Our faculty are actively engaged with Academy Health, the APHA, the National Academy of Medicine and other organizations, through which we are able to reconnect with many alumni, who helped provide insights into the developments in public health and healthcare, relevant to our educational programs.

To formally solicit external stakeholder engagement, the SPH Dean’s Council had its inaugural meeting February 2011. Council members included prominent alumni, GW supporters and supporters from the broader Washington DC community. Members of the council were expected to contribute to the growth and development of the School and provide valuable guidance and input to the SPH regarding strategic programs, initiatives and philanthropy. They worked to strengthen the School’s reputation and relationships not only with alumni, but with individuals who are influential in government and business and organizations in the local, national, and international communities. Members of the Council were committed to help increase the visibility of the SPH; provide assistance in outreach and public relations efforts; engage and assist in ongoing philanthropic endeavors; and serve in an advisory capacity on a number of the SPH initiatives, including finalizing plans for our new building. The Dean’s Council met two-three times per year between 2011-2015 and has provided valuable input on the SPH vision, mission and values as well as a broad array of other objectives.

Strategic Planning

The development of the mission and values were further refined within the School’s strategic planning processes. Below is a brief overview of the evolution of the strategic planning process since AY 2011 when the School became independent from the Medical Center. The plan has guided our processes for developing new governance structures and for occupying the new building, as well as to envision the ways and areas in which the School would grow.

FIRST STRATEGIC PLANNING PHASE (2011- 2014)

Prior to the Medical Center reorganization, the SPH had been operating using a Strategic Plan developed in May 2008. Our new status within the University, along with changes in our external environment, required renewed strategic planning. A Strategic Planning process has continuously engaged our (growing) faculty even as the SPH was undergoing major developmental transitions.

May 31, 2011: Strategic Planning Retreat, leadership retreat that included all SPH professors and leaders of academic programs. This one-day meeting was held offsite and had the following objectives:
• Serve as the starting point for a strategic planning process;
• Create a common understanding of current obstacles and future opportunities to shape our planning in the months ahead; and
• Provide a forum for collaboration, creativity, and strategic idea generation.

The retreat identified a number of important themes that were carried through in subsequent planning processes. First, while there was strong support for the vision and mission that had been articulated in 2008, there was concern about the capacity of the school to address that mission. Three sets of breakout groups were formed that addressed: (1) Identification of obstacles; (2) improving educational programs; and (3) building research. Subsequent feedback from these groups assured that many perspectives were heard across the faculty. The most important overarching themes were the need to: increase communications and transparency; improve our research infrastructure; address faculty development and mentoring; increase collaboration; improve systems; and better leverage our location as a differentiator.

**November 29-30, 2011: Strategic Planning Retreat, Taking Responsibility to Imagine Our Future, inclusive of all SPH faculty.** This two-day event continued the work of the May retreat, and utilized an Open Meeting format, supporting the development of shared ideas in a dynamic format. All faculty, including adjunct faculty, were invited. The outcome of this retreat was the prioritization of nine themes that were each developed further by working groups. The working groups, established in December 2011, were each chaired by one of the SPH department chairs or vice chairs; each included representation from every department, and was also inclusive of student and staff representation. They consisted of: distance education (R. Burke); executive education (D. Verme); doctoral education (L. DiPietro); research (A. Greenberg); laboratory science (M. Perry); global health (J. Sherry); school of public health community-building (J. Cawley); and community health (P. Lantz). Final working group reports were completed and distributed in April 2012 to all faculty post-retreat. An ad hoc Strategic Planning Steering Committee, that included broad representation from across the SPH, was appointed and met as described below. See **ERF 1.1.e.: Strategic Planning Steering Committee.**

**April 11, 2012: Strategic Planning Committee Retreat.** Each strategic planning working group presented a report to the Steering Committee, followed by a discussion about recommended action steps. Working group reports contained the following information: opportunity/problem statement; strengths and weaknesses; stakeholders; objectives; and recommendations. After reviewing these reports, the steering committee developed recommendations for updating the school’s vision, mission, and values statements to reflect the input from multiple sources, both internally and externally. These were subsequently reviewed at a meeting of the School Faculty Assembly. The full agenda for this meeting and the working group reports can be found in **ERF 1.1.e.: Strategic Planning Meeting April 2012.** The final draft Strategic Plan that emerged from this process was completed by August 2012 and the Steering Committee was sunsetted.
**August 2012:** The University Provost issued a strategic plan that defined overall objectives for GW and established several cross cutting themes. The SPH Executive Committee added the university-wide objectives and themes and somewhat reorganized the SPH Strategic Plan to more clearly align it with the new GW plan.

**December 4, 2012:** With the hire of a new Associate Dean for Research, as well as several new research-oriented faculty, we held a second strategic planning retreat focused on the development of strategies to organize and build research in the SPH. Conclusions and recommendations from this effort were folded into the SPH strategic plan under the leadership of the Associate Dean for Research and reviewed along with the rest of the plan as described below.

**March 19, 2013:** Over the next several months, initial drafts went through multiple succeeding drafts as they were reviewed and revised by faculty, chairs, administrators, and staff leadership. Strategic Plan Draft 8 was approved by the SPH Faculty Assembly (**ERF 1.1.e.: Strategic Plan Draft**).

**May 2014:** At the semi-annual SPH Faculty Assembly, the Dean presented a State of the School report that reviewed progress toward achievement of the SPH Strategic Plan. At that time, it was clear that many of the objectives established in November 2011 were well underway to completion.

**SECOND STRATEGIC PLANNING PHASE (2014-2015)**

**July 15-16, 2014, Strategic Planning Retreat:** The purpose of this retreat was to review outcomes of the first strategic planning process and refine the goals leading toward the advancement of opportunities for collaboration and development, and to advance the mission of the SPH. All faculty were invited, as well as key staff and student leadership.

This retreat began with an open-ended survey of all faculty; to identify key themes and issues, as well as interest among the participants in leading discussions of those issues. A second online survey invited the faculty to prioritize the ideas that had been suggested. All at the retreat were assigned to four groups covering the 19 high-priority themes that had emerged from the surveys. At the close of the meeting, each group leader presented a report, including conclusions and recommendations.

This strategic planning process identified a number of conclusions and recommendations that were incorporated into the SPH Strategic Plan, including:

- **Aging:** Support the existing Center for Healthy Aging in its efforts to establish grant support.
- **Antibiotics:** Establish a Center to study science and policy aspects of antibiotic resistant bacteria in the context of industrial agriculture usage of antibiotics.
- **Big Data:** Emphasize these skills in recruitment of new faculty.
- **Chronic Disease:** Recruit a chronic disease epidemiologist.
- **Climate and Health:** Establish a school-wide climate and health working group.
- **DC Health:** Identify a faculty leader who can pursue funding and create partnerships.
• Health and healthcare disparities: Consider the establishment of a university-wide working group.
• Global chronic disease: Support the reorganization of the GW Center for Global Health.
• Healthcare system reform: Consider merging the departments of Health Policy and Health Services Management and Leadership. Establish a seminar focused on innovations. Identify potential targeted hires and corporate partners to build capacity.
• Healthcare workforce: Support and strengthen the existing healthcare workforce policy center.
• mHealth: Support and strengthen the existing mHealth collaborative and seek new corporate partnerships.
• Mental health: Support establishment of a mental health and wellness working group.
• Obesity: Work plan to be developed by the new Redstone Center. Recruit a faculty member for the new Sanofi professorship.
• Prevention policy: seek funding for a new prevention policy center.
• Reproductive health: Expand the work of the existing Jacobs Institute for Women’s Health to encompass women’s health globally.
• Translational research: Consider establishing a PhD in this area. Make this area a target for new faculty recruitments.

The SPH Executive Committee incorporated a number of these recommendations into continued SPH strategic planning. For example, three school-wide Education Task Forces were created:

• Undergraduate Education
• Methods Sequencing (Quantitative and Qualitative)
• Expedited MPH degree options

These Task Forces met throughout the remainder of 2014-15 and provided recommendations to the Executive Advisory Committee.

Strategic Planning Reports were provided and discussed at the following meetings:

• Chairs’ Meeting, 7/17/14
• Executive Advisory Committee, 9/24/14
• Executive Advisory Committee, 10/23/14
• Executive Advisory Committee, 12/15/14
• Executive Advisory Committee, 1/9/15

The final stage in completion of this process will be to present a revised strategic plan, reflecting objectives that have been completed or are underway as well as new objectives emerging from the AY2014 retreat. In Spring 2016 we anticipate launching a new round of strategic planning.
1.1.f. Description of how the mission, values, goals and objectives are made available to the school's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.

As articulated above, the new mission, vision, values and goals of the SPH were developed and elaborated by a comprehensive process and were approved by the Faculty Assembly in March 2013. They remain our guiding principles in development of departmental and curricular initiatives.

We present ourselves to the public through the School webpage: http://publichealth.gwu.edu/about. An Annual Report is also published by the Communications Department for distribution to key stakeholders such as donors in the Honor Roll of Donors, leaders of other schools of public health and university leadership. **ERF 1.1.f.: Annual Reports**

The Provost receives an annual state of the school document describing academic, research and fiscal accomplishments, highlighting important challenges, successes and progress experienced, and the achievement of goals.

Each department must complete a comprehensive academic program review every five to seven years. As part of this activity, mission, vision, values and goals are re-evaluated.

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

This criterion is met.

**Strengths:**

- Clearly stated mission, vision, values and goals, in alignment with the University’s strategic vision.
- Ongoing and inclusive strategic planning since gaining independence from the Medical Center.
- Periodic review of progress towards goals.

**Challenges:**

- None identified.

**Future plans:**

- Implementation of strategic planning outcomes, including, most recently, three Education Task Force recommendations.
- Embark on the next phase of strategic planning in Spring 2016.*

*By then SPH should have the report from the CEPH Committee. Any recommendations in it will be a component of the next planning cycle.