

**Blueprint for Academic Excellence
Arnold School of Public Health
2012-2013**

I. Executive Summary

Universities with top Schools of Public Health

Columbia University	University of California – Los Angeles
Emory University	University of Michigan
Harvard University	University of North Carolina – Chapel Hill
Johns Hopkins University	University of Pittsburgh
University of California – Berkeley	University of Washington

Universities with peer Schools of Public Health

University of Alabama-Birmingham
University of Arizona
University of Iowa
University of Minnesota
University of Texas - Houston

Among the 49 accredited schools of public health, there is reasonably strong agreement on the top ten schools of public health. Similarly there is a group of schools in the lower third that we clearly surpass by a variety of metrics. However, the middle group of which we are a part, of which five are shown above as the peer group of institutions, is much more difficult to differentiate. Among these schools, some are perceived as surpassing the Arnold School in scholarship, usually because of being part of a larger research university and/or comprehensive academic medical center, while being weaker in size and strength of academic programs, while others may be stronger in academic programs but weaker in research.

Strengths of the Arnold School of Public Health

- Talented, diverse, collaborative, interdisciplinary and widely-recognized faculty dedicated to excellence in both scholarship and academic missions
- Consistent leadership and success in competitively funded collaborations within and beyond the School: Faculty are catalysts for major and numerous research and academic interdisciplinary initiatives. National leaders in PA and health.
- Dedication to doctoral program growth (in selected disciplines) and enhancement, and nurturing growth with quality of our undergraduate programs

Accomplishments of the Arnold School in the past five years

- Successful recruitment of 36 faculty in all ranks and tracks over the past two years
- In FY 2011, the Arnold School achieved external funding totaling \$29,369,710 or about

\$450,000 per tenure-track faculty member, among the highest per capita funding in the University. In addition, faculty published 268 articles in peer-reviewed journals in CY 2011.

- Involvement in multiple successful proposals for Centers for Economic Excellence/SmartState endowed chairs program: SeniorSmart, Health Care Quality, Technologies to Enhance Healthful Lifestyles, Rehabilitation and Reconstructive Sciences, Nano-Environmental Research and Risk Assessment, Prostate Cancer Disparities Research; all are currently in search process
- Development, implementation and rapid growth of undergraduate programs in the Arnold School to 1170 students in Fall 2011, more than double the enrollment in Fall 2007
- Successful development of the Health Sciences Research Core and EnGenCore (and EnGenCore LLC)
- Active participation in the University's first successful T32 grant, *Biomedical-Behavioral Interface: Prevention and Developmental Sciences*, and leadership in submission of T32 in physical activity and health
- Continued development of collaborations with Greenville Hospital System (GHS), Health Sciences South Carolina (HSSC), and GHS/USC Institute for Advancement of Healthcare in particular.

Internal Weaknesses of the Arnold School

- Lack of sufficient facilities: We need healthy space in which to work. Classroom space is inadequate. Laboratory/office space in the Public Health Research Center (PHRC) is already fully committed without adequate space to support the faculty hiring plan and approved SmartState endowed chairs over the next four years. We are working with various offices to renovate some areas in PHRC and to upfit available space in Discovery I. While this space is much better than what we currently have for three of six departments, it will not meet growth expectations beyond 4-5 years, and cannot meet growth needs of Communication Sciences and Disorders and Exercise Science today.
- Retention of qualified faculty and staff at competitive salaries: While we finally have resources to recruit high quality junior faculty and are more competitive with salaries and start-up packages, we are exacerbating existing problems of salary compression for some very productive, dedicated and experienced faculty. In AY 2010-2011, we lost two tenured faculty members to retirements, one tenured associate professor and four tenure-track assistant professors to other positions, three research faculty members to tenured/tenure-track positions, and one clinical faculty member for family reasons. For AY 2011-2012 we have lost one clinical faculty member for family reasons, one clinical faculty member to a tenure-track position and have one announced retirement; we have successfully retained several faculty members who had other offers.
- Inadequate financial support from grants, etc. for competitive stipends, tuition waiver and adequate health insurance to recruit top doctoral students. Arnold endowment is helpful but insufficient (\$240,000/yr school-wide with 291 doctoral students).

Additional Weakness impacting the Arnold School

- Inadequate student pedestrian safety for transit to/from the PHRC and Discovery buildings. City/campus has yet to address significant traffic hazard at Assembly and College Streets intersection. Multiple pedestrian-auto collisions have been reported in past 3 years.
- Inadequate professional staff support at the institutional level for, e.g., contract and grant accounting, human resources and payroll, computer services, research computing, support for development of web presence and content, publications and presentations, and IT infrastructure development
- Lack of adequate classroom space, especially in the Innovista area of campus
- Distance (distributed) education technology, support, and instructor training is less than adequate at USC. There is a strong need for public health distance education in SC.

II. Goals

Vision for the Arnold School

We strive to be recognized nationally and internationally for our outstanding graduates and for research that impacts our understanding of and ability to improve the public's health through dissemination and outreach to and collaboration with communities, agencies and organizations.

Mission for the Arnold School

The mission of the Arnold School of Public Health is to expand, disseminate and apply the body of knowledge regarding prevention of disease, disability and environmental degradation; promotion of health and well-being in diverse populations; and provision of effective, efficient and equitable health services.

Our vision statement affirms that the School will strive to maintain a level of excellence in teaching, research and outreach that yields national and international recognition for our efforts to improve the public's health, in parallel with the Provost's vision of dedication to academic excellence and academic integrity. Our mission statement addresses the three fundamental areas of the academic triad through the action words of "expand, disseminate and apply the body of knowledge" followed by a more detailed description of the diverse components of the public's health that we are addressing. The goals that follow are intended to be comprehensive of the breadth of Arnold School activities as our School is very multi-disciplinary with major accomplishments over a broad spectrum of public health interests and needs.

Five-Year Goals

Goal 1: To provide educational programs of excellence for public health professionals and scholars to gain recognition as one of the top ten schools of public health in public institutions of higher education.

The University of South Carolina is first an institution of higher education, so instructional endeavors must be at the forefront of our activities. In response to a widely recognized shrinkage of the public health workforce (>200K workers by 2018), the Arnold School of Public Health is preparing the next generation of public health professionals and scholars through a diverse curriculum, ranging from traditional baccalaureate programs in Exercise Science and Public Health to three DrPH and seven PhD programs. We have seven distinct Master of Public Health programs, preparing public health professionals for many components of the public health workforce in addition to a variety of masters programs with a research thesis as a culminating experience and several graduate certificate programs. In fall 2010 we received \$3.5 million from HRSA to establish a "Public Health Training Center" which is focused on producing quality masters-level public health workers to reduce the national shortage. For many years the Arnold School has enjoyed a reputation for excellence in teaching, and in particular for its strong faculty-student interaction. As we continue to grow, we continually review our curriculum to keep it current with the rapidly developing science and practice of public health and responsive to the workforce and community needs. In addition, with our recent and future growth in faculty, we intend to increase enrollments in selected doctoral programs, and in several undergraduate and masters-level graduate programs. This year we are implementing two new academic programs that will cross colleges (Master of Health Information Technology with Hotel, Restaurant and Sport Management, MPH/PharmD with South Carolina College of Pharmacy) and are exploring development of interdisciplinary Ph.D. training in nanoenvironmental health risk assessment with Chemistry/Biochemistry and collaborations/cross-training between Health Services Policy and Management and the Moore School of Business.

While we are continually reviewing our curricula and student-related policies and practices for quality assurance and improvement, we recognize that much of our reputation outside the institution depends on our research scholarship and outreach. Thus we also strive to gain national recognition through the impactful roles and positions held by our faculty and alumni and by helping each other achieve goals such as publication in the top journals, receipt of large, interdisciplinary grants, and recruitment of top doctoral students who will further spread our reputation.

Goal 2: To achieve and maintain research excellence as demonstrated by the creation of knowledge of high impact and importance to public health.

We continue to strive for growth in research and scholarly activities. This goal emphasizes the centrality of research to our mission. While great progress has been made in understanding causes and treatment of diseases that create pain and suffering in our community, opportunities (and challenges) for understanding how to initiate, plan, and implement large-scale disease prevention through public health education and intervention remain strong and quite fundable. Without a dynamic research and practice program and its accompanying expansion and translation of public health knowledge, the teaching and service components of our mission would become ineffective and the development of an integrated and effective

ecological model of health would be impossible. Research focusing and investment planning were the targets of the Arnold School's ongoing research strategic planning last year. Three focus areas have been identified for targeted activity: physical activity/exercise and health, nutrition and health, and cancer/cancer prevention. In addition, a faculty-led task force has been charged to address issues of School/campus research culture, research sustainability, and emerging opportunities in public health research.

Goal 3: To utilize available knowledge to address health and environmental issues facing South Carolina, the nation and the world community.

Public health is inherently a service discipline by virtue of its mission to "fulfill society's interest in assuring conditions in which people can be healthy", so the lines are often blurred between traditional community service activities and our teaching and research missions. Because much of our research is community-based and translational, and we intentionally train our students to be effective in the community, we have built strong relationships with public/private health and environmental entities throughout the community for many specific purposes. However, all of these partnerships, whether established for our research objectives or for an agency's expressed needs, ultimately serve to address the health and environmental issues of our local, national or international communities. In addition, most of the existing public health workforce nationally has minimal formal training in public health, so our ongoing continuing education efforts do make a critical contribution to workforce development for individuals unwilling or unable to complete a public health degree program due to time, location and other resource constraints.

Goal 4: To provide the infrastructure and resources to meet the goals of education, research, and professional service.

Specific targets within this goal are the most diverse among our set of five-year goals.

1. Successful completion of our administrative leadership searches is a continuing initiative, with two active department chair searches underway (Epidemiology and Biostatistics, and Communication Sciences and Disorders). We are in negotiations with two excellent candidates.
2. The Public Health Research Center houses approximately half of the Arnold School faculty, staff and graduate students. The proposed move to Discovery I will accommodate three academic departments at current faculty/staff levels, leaving most of two large departments and administrative groups elsewhere. **Discussions should begin soon** on best strategies to acquire a third comprehensive clinic/classroom/office building beside the PHRC for accommodation of these excluded units and the phenomenal growth trajectory of the Arnold School. In addition, available laboratory space is already limited for the current research agenda, so long-term planning for the acquisition of additional laboratory space is also critical.
3. We must have qualified faculty and staff to support all of these activities, and budget growth is required to retain and recruit quality individuals. The general budget relates to

what is needed to support faculty and staff to meet our mission, to teach our classes, to mentor our students, to support doctoral education, to develop and implement research strategies, and to share our knowledge with the community at large.

4. As the School has grown, we have noted a commensurate need for development and revision of documented policies and procedures to facilitate our programs' operations as efficiently as possible. This activity is progressing well, with recent major revisions of all three faculty protocols (tenure and promotion criteria, research faculty, and clinical/instructional/practice faculty), policy for the conduct of faculty searches, and other related policy and procedure documents. The Arnold SPH completed a revision of the tenure and promotion criterion in 2009 and we feel that our criteria are among the most stringent and fair in the university; our research and clinical faculty protocols have been used as examples across campus and in the SACS self-study. Still, as our faculty quality improves we must strive to continue to raise the bar in order to move into the top tier of publicly-supported national schools of public health.

2012-2013 Academic Year Goals

1. To recruit and retain quality faculty a) to meet academic mission needs and address recommendations from the school's 2010 research strategic plan, b) to complete the dean's startup commitment, c) to complete successful department chair searches in Epidemiology & Biostatistics and Communication Sciences & Disorders, and d) to fill four active SmartState endowed chair searches in the Arnold School.

Progress made to date:

- 20 faculty hires in AY 2012: 1 tenured professor, 12 tenure-track and 7 non-tenure track faculty positions (includes one reclassification and two internal candidates for new positions, so a net growth of 17):
 - Chair, Department of Health Service Policy and Management
 - Biostatistics, two associate professors
 - Epidemiology, one assistant professor (Physical Activity and Health cluster)
 - Health Services Policy and Management, health economics position
 - Health Promotion, Education and Behavior, 3 positions (2 in Physical Activity and Health cluster, one nutrition)
 - Communication Sciences and Disorders, 2 positions
 - Environmental Health Sciences, 1 position
 - Exercise Science, 2 positions (1 Physical Activity and Health cluster, 1 motor development)
 - Five clinical/instructional positions, plus one internal transfer
 - One reclassification from research associate to research assistant professor
- Completed search for new director of Prevention Research Center (after national search internal appointment of Dr. Sara Wilcox)

- Anticipated completion of department chair search in Communication Sciences & Disorders with August 2012 start date
- Anticipated completion of SmartState endowed chair search in NanoEnvironmental Risk Assessment with August 2012 start date
- Anticipated completion of search for director of physical therapy program
- Established endowed chair (or distinguished professorship) for Julius Fridriksson in Communication Sciences
- Multiple ongoing searches in AY 2012:
 - EPID/BIOS chair
 - Epidemiology methods (August 2012 hire likely)
 - Biostatistics (formal offer pending, August 2012 hire)
 - Nutrition and Health Cluster (ongoing interviews for 3-4 positions, August 2012 hires likely)
 - Director of GHS Institute for Advancement of Healthcare
 - SmartState endowed chair searches
 - Health Services Policy and Management, 3 open positions (replacement and chair start-up commitment)
 - Health Services Policy and Management, health information technology position (FRI)
 - Communication Sciences and Disorders, Neuroimaging (FRI, formal offer pending provost approval and candidate acceptance)
 - Health Promotion, Education, and Behavior, sexuality and health position (ongoing interviews)
 - Health Promotion, Education, and Behavior, social determinants of health, FRI position (ongoing effort to recruit applicants for senior position)
 - Environmental Health Sciences, microbiologist, toxicologist (ongoing interviews for two positions)

Plans for 2012-2013:

- Complete search for department chair in Epidemiology and Biostatistics
 - Three continuing SmartState searches: Technologies for Health, Cancer Disparities and Orthopedic Outcomes. All three will hopefully be filled by AY 2014.
 - Complete search for director of GHS Institute for Advancement of Healthcare
 - Complete open faculty searches (see list of ongoing searches above); continue current and open new searches as needed (e.g., new chair commitments)
 - Search for newly awarded FRI positions
2. To actively plan for provision of improved infrastructure for the school with particular focus on staff support and provision of adequate buildings and facilities for faculty, staff and students.

Progress made to date:

- As of February 28, 2012, construction documents nearly complete for renovation of 1st, 2nd and 4th floor areas of PHRC to accommodate Dean's Office functions.
- Upfit drawings and design development documents near completion for departmental layouts in Discovery One floors 4, 5, parts of 1, 2 and 3.
- Hired staff for Office of Research and Office of Student Services
- Renovated classroom space in Blatt PE center for physical therapy program
- Acquired/installed Pacific Biosciences "Single Molecule Real Time" DNA sequencer in EnGenCore university-wide facility in PHRC.
- The current space at the USC Speech and Hearing Research Center has been painted and new furniture and Sound Suites have been installed.

Plans for 2012-2013:

- Move dean's office to PHRC by December 2012
 - Move into construction phase for renovations to Discovery One
 - Complete repairs on doors to PHRC to improve performance of electronic locking system for better security and for improved handicapped access
 - Planning staff hires for program evaluation/assessment support and building/facilities management
 - Continue to develop and enhance student services to accommodate rapid student enrollment growth
 - Identify and upfit as necessary clinical space for new Literacy Center in Communication Sciences and Disorders
 - Determine most effective use for laboratory space in Discovery I purchased from Pharmacy
 - Assure that all new spaces have technology infrastructure for videoconferencing
 - Consider hiring a technical writer to facilitate preparation of manuscripts and grant applications and to provide training for doctoral students (e.g., internal writing center since graduate students are no longer serviced by the CAS Writing Center).
 - Renovate teaching laboratory space in Blatt for exercise physiology
 - Upfit third floor of PHRC for clinical research laboratory (renovations scheduled to begin this semester)
 - Add infrastructure to support student growth in Exercise Science
3. To promote curriculum development and assessment: develop appropriate responses to newly-revised CEPH accreditation requirements, implement effective processes for continuing program assessment; improve learning outcomes and linkages to curriculum as needed; address curriculum requirements associated with the Carolina Core; to enhance distributed education in the Arnold School.

Progress made to date:

- Continued enhancement of academic program assessment with support of internal evaluation/assessment staff and new personnel in Institutional Assessment and Compliance.
- Respond to revised CEPH criteria and fully implement curriculum changes necessary to be in compliance, especially for those issues related to the May 2012 interim report
- Establishment of school-wide undergraduate advisory committee to address curriculum matters for the interdisciplinary/interdepartmental public health programs, develop and recommend policies for undergraduate programs, and facilitate Carolina Core transition.
- Development of college core to be consistent with Carolina Core with associated curriculum revisions; develop/document integrative experience for undergraduate programs.
- Provide more technical assistance to departments to review and revise learning outcomes and curriculum linkages to learning outcomes.
- Implemented new PharmD/MPH dual degree program (approved December 2011)
- Final planning and implementation of new MHIT program (administered by HRSM) with appropriate course development. Beyond Health Services Policy and Management offerings, faculty in Epidemiology and Biostatistics plan to develop a course in bioinformatics.
- Sponsored test item-writing workshop led by National Board of Medical Examiners for 20 faculty and five doctoral students.
- Three faculty members in the school are participating in a provost-sponsored initiative to develop interprofessional education across the health sciences (HS). A team of HS representatives will attend the Interprofessional Education Collaborative 2012 Institute in May 2012 to explore core competencies for interprofessional collaborative practice and leave with an implementation plan for IPE at USC.
- Two faculty members in the school are participating in the development of Carolina Nexus which is a President-sponsored leadership initiative for faculty and administrators.
- Dean has committed \$100K to technology improvements for a classroom to be utilized for distributed education.
- The school has participated in provost-level discussions of what infrastructure for distributed education is available for this campus and what is needed to move us to a new level
- Comprehensive review of the MPH program in HPEB completed.
- The Master of Health Administration (MHA) program accreditation self study and CAHME site visit were completed with a determination that the program is performing at a high level of effectiveness in academic training and professional preparation of graduates for the healthcare executive workforce.
- Survey of management residency preceptors who are also frequent hirers or supervisors of newly hired USC MHA graduates showed that our MHA graduates are very well prepared for the healthcare executive job market.

- The MHA program continues to maintain 100% coverage of students in the integrated learning process, implemented as graduate assistantships of all students in healthcare organizations to enhance learning by integrating course-work with real-life work experience, most students for the entire 2-year period and all students for at least one year out of the 2-year period.
- All departments have a continual review of curriculum and linkage of program learning outcomes with course outcomes/objectives
- Communication Sciences and Disorders hired a second clinical placement specialist to assist in student practicum placements within the state and nationally.
- Exercise Science is in the planning stages for upfit of physical therapy teaching laboratory and work physiology laboratory in Blatt (completion anticipated by Fall 2012)

Plans for 2012-2013:

- Planned course development: public health informatics (EPID/BIOS), clinical epidemiology (EPID/BIOS), ethics in public health research and practice
- Revisions to distributed education courses and development of new course delivery
- Develop and implement new graduate certificate program in public health nutrition.
- Epidemiology & Biostatistics is initiating a comprehensive curriculum review, looking at program competencies and addressing any content gaps and overlaps. Particular focus is development of content in clinical epidemiology and biostatistics.
- All departments will explore ways to integrate content more effectively across courses and curricula, e.g., chronic disease prevention across a variety of topics
- All departments will consider development of course work to reflect expertise contributed by new faculty and school-identified areas of research emphasis.
- Health Services Policy and Management will continue re-development of the executive format MHA program after a hiatus of several years.
- Health Services Policy and Management will explore course and curriculum sharing with the Moore School of Business.
- Develop PUBH 701 to provide a broad introduction to the broad range of disciplines in public health.
- Install technologies and provide HR support for DE in one or two PHRC classrooms.
- Strategically plan distance education offering to deliver MPH program(s) in Greenville (e.g., Greenville Hospital System or University Center) and/or in Charleston (e.g., Low Country Graduate Center).
- The Arnold School is tentatively committed to work an external commercial partner such as Academic Partnerships to explore opportunities to enhance distributed education. Based on experience and observation, we firmly believe that a quality distributed education program must follow the same curriculum as the traditional program (e.g., MSP and MCD in Communication Sciences and Disorders) and must provide adequate opportunity for student-faculty interaction.

4. To promote and enhance doctoral education in the Arnold School.

Progress made to date:

- Revision of DrPH programs in response to accreditation criteria and work force demands
- Use of more than half of Arnold Endowment revenue to support doctoral students
- School-wide focus on providing adequate support for doctoral students through competitive stipends and tuition abatement
- Implementation of revised doctoral curriculum and process for the first-year qualifying examination in HPEB
- Dean' office commits at least \$10,000 per year to support student travel for presentations at professional meetings; these travel grants require departmental matches.
- Leverages provost's doctoral incentive funds for student travel, publication, and other student needs.
- A second NIH T-32 to support pre- and postdoctoral students in physical activity and health is submitted and under review (R. Pate, PI).
- Continuing review of doctoral objectives and performance on qualifying exam and other metrics to determine where there are gaps in instruction

Plans for 2012-2013:

- Continue financial support of most qualified doctoral students
- Encourage professional development activities for doctoral students, including professional ethics, training as future faculty, research mentorship
- Implementation of research seminar and development of other strategies in HPEB to emphasize uniform standards of excellence in doctoral research
- Continue to encourage doctoral students to attend national/international meetings to network and to present research findings
- Increase the proportion of doctoral incentive funds allocated to travel support for doctoral students to present at meetings, to cover publications costs for journal articles coming out of student research, and to offer fellowships to new applicants for the coming year.

5. To promote quality and impactful research by developing strategies to mentor junior and under-performing faculty; increase extramural funding; increase publications, especially in top-tier journals; and solicit large, interdisciplinary grants.

Plans for 2012-2013

- Encourage participation in interdisciplinary research groups (RCCF, Interdisciplinary Conference on Pregnancy and Health of Women and Children)
- Provide active support and staffing for HSRC
- Lead and support HSSC research projects
- Lead and support IAHC (GHS & USC)

- Actively involve department chairs and senior faculty/mentors in facilitating contacts for faculty across departments and schools
- Promote publication in top-tier journals through mentorship, pre-review, and provision of technical writing support
- Encourage more faculty members to prepare publishable manuscripts
- Encourage faculty to pursue external funding from diverse sources, especially those with full IDC rates
- Increase research expenditures
- Develop strategies for mentoring of junior faculty and underproductive faculty. EXSC has developed one letter of understanding with a senior faculty member in the Arnold School of Public Health to mentor a junior EXSC faculty member that may serve as a model for a formal mentoring relationship.
- Develop course and/or resources about ethics in public health research and practice
- Explore feasibility of offering summer course in scientific/technical writing for students (e.g., “dissertation boot camp”)
- As part of a strategic planning process with the HPEB faculty, develop a peer-reviewed manuscript to re-conceptualize the field of health promotion that aims to have global and national influence on the roles and priorities regarding how the social and behavioral sciences contributes to research and actions to improve public health

Unit Statistical Profile

Student Enrollment and Credit Hours

1. Number of entering freshmen for classes Fall 2008, Fall 2009, and Fall 2010 and their average SAT and ACT scores

	Fall 2008	Fall 2009	Fall 2010	Fall 2011
<u>Test Scores (avg)</u>				
# New Fresh / ACT	115/26	134/25	174/26	243/26
# New Fresh / SAT	115/1173	134/1158	174/1145	243/1161

2. Freshmen retention rate for classes entering Fall 2008, Fall 2009, and Fall 2010

		2008 Cohort Returned '09	2009 Cohort Returned '10	2010 Cohort Returned '11
<u>Retention Rates</u>				
Public Health	Same school	73.0%	71.0%	71.8%
	Other school	10.4%	19.1%	18.2%
	Total	83.5%	90.1%	90.0%
USC Overall	Same school	72.7%	71.2%	71.9%
	Other school	14.1%	14.7%	14.9%
	Total	86.8%	85.9%	86.8%

3. Sophomore retention rates for classes entering Fall 2007, Fall 2008 and Fall 2009

		2007 Cohort Returned '09	2008 Cohort Returned '10	2009 Cohort Returned '11
<u>Retention Rates</u>				
Public Health	Same school	88.1%	87.9%	83.9%
	Other school	3.7%	6.7%	9.7%
	Total	91.8%	94.6%	93.6%
USC Overall	Same school	77.6%	78.1%	78.2%
	Other school	11.9%	13.1%	12.9%
	Total	89.5%	91.2%	91.1%

4. Number of majors enrolled in Fall 2008, Fall 2009, Fall 2010 and Fall 2011 by level (headcount and FTE; undergraduate, certificate, first professional, masters, doctoral)

	Fall 2008	Fall 2009	Fall 2010	Fall 2011
<u>Student Headcount</u>				
Undergraduate	632	766	943	1,170
Masters	353	387	396	401
Certificate	10	4	5	6
First Professional	0	0	0	0
Doctoral	231	262	277	291
Total	1,226	1,419	1,621	1,868

5. Number of entering first professional and graduate students Fall 2008, Fall 2009, Fall 2010 and Fall 2011 and their average GRE, MCAT, LSAT scores, etc.
From IAC Strategic Planning Statistics: Graduate test scores were excluded due to high percentage of missing test scores on USC database
The Fall 2008, Fall 2009, and Fall 2010 data were provided earlier by IAC; number reflects number of students with standardized test, not number entering a graduate program. The Fall 2011 data are from the IAC Data Warehouse; the sample size is total number of new graduate students in Fall 2011, not the number of test scores.

	Fall 2008 (N=103)	Fall 2009 (N=130)	Fall 2010 (N=134)	Fall 2011 (N=128)
<u>Average Standardized Test Scores</u>				
GRE Quantitative	575	581	616	601
GRE Verbal	480	471	478	477

GMAT and MCAT are accepting as alternative tests for certain programs, but the numbers of applicants reporting these scores are too small for aggregate reporting.

6. Number of graduates in Fall 2010, Spring 2011 and Summer 2011 by level (undergraduate, certificate, first professional, masters, doctoral)

	Fall 2010	Spring 2011	Summer 2011	Total
<u>Degrees Awarded</u>				
Undergraduate	46	135	29	210
Masters	24	53	86	163
Certificate	1	0	0	1
First Professional	0	0	0	0
Doctoral	24	12	11	47
Total	95	200	126	421

7. Four-, five- and six-year graduation rates for the three most recent applicable classes (undergraduate only).

Graduation Rates		2003 Cohort			2004 Cohort			2005 Cohort		
		4-Year Grad	5-Year Grad	6-Year Grad	4-Year Grad	5-Year Grad	6-Year Grad	4-Year Grad	5-Year Grad	6-Year Grad
<i>Started</i>	<i>Ended</i>									
Public Health	Same School	42.4%	47.0%	47.0%	33.7%	37.2%	38.4%	48.8%	57.0%	58.1%
	Other School	15.2%	19.7%	22.7%	18.6%	31.4%	33.7%	12.8%	18.6%	20.9%
	Total	57.6%	66.7%	69.7%	52.3%	68.6%	72.1%	61.6%	75.6%	79.0%
USC Overall	Same School	32.1%	43.0%	44.2%	34.3%	44.3%	45.8%	38.0%	47.0%	48.5%
	Other School	13.7%	23.0%	24.9%	11.4%	20.0%	21.6%	13.2%	20.2%	21.8%
	Total	45.8%	66.0%	69.0%	45.7%	64.3%	67.4%	51.2%	67.2%	70.3%

8. Total credit hours and grade distribution generated by your unit regardless of major for Fall 2010, Spring 2011 and Summer 2011

	Fall 2010	Spring 2011	Summer 2011	Total AY 2010-2011
Student Credit Hours*				
Undergraduate	6,032	6,563	893	13,488
Masters	4,290	4,027	2,951	11,268
Doctoral	1,933	1,862	744	4,539
Total	12,255	12,452	4,588	29,295

Grade Distribution (undergraduates only)

Fall 2010										
Count	A	B+	B	C+	C	D+	D	F	W	WF
1799	58.2%	9.3%	16.5%	3.3%	5.9%	0.2%	2.2%	1.8%	2.6%	0.1%
Spring 2011										
1658	57.3%	10.9%	17.0%	3.7%	5.9%	0.2%	1.8%	1.3%	1.8%	0.2%
Summer 2011										
296	47.6%	11.5%	21.0%	4.7%	10.5%	0.0%	1.7%	1.0%	1.7%	0.3%

9. Percent of undergraduate major taught by faculty with a highest terminal degree
[These are the numbers reported by IAC other than showing simple totals for each table, but we have no idea how they are constructed. The fall 2010 credit hours are remotely reasonable (an average of 16.9 credit hours per student) but for both spring 2011 and fall 2011, the average credit hours per student is well over 20. It is also unclear what this metric represents for the school since a large proportion of the credits hours for any public health student is completed outside the Arnold School.]

	Terminal Degree - UG				<i>Total Inst #</i>	<i>Total Cred Hrs</i>	<i>% Yes Section</i>	<i>% Yes Cred Hrs</i>
	NO		YES					
	<i>Inst #</i>	<i>Cred Hrs</i>	<i>Inst #</i>	<i>Cred Hrs</i>				
Fall 2010								
Exercise Science/ Health Fitness/ B.S.	1	66	8	210	9	276	88.89%	76.09%
Exercise Science/ Motor Development/ B.S.	2	183	6	780	8	963	75.00%	81.00%
Exercise Science/ Public Health/ B.S.	3	198	6	407	9	605	66.67%	67.27%
Exercise Science/ Scientific Foundations/ B.S.	150	9154	52	2379	202	11533	25.74%	20.63%
Public Health/ B.A.	5	315	5	138	10	453	50.00%	30.46%
Public Health/ B.S.	15	1224	10	918	25	2142	40.00%	42.86%
TOTAL	176	11140	87	4832	263	15972	33.08%	30.25%

Spring 2011								
Exercise Science, Health Fitness, B.S.	14	1488	52	2337	66	3825	78.79%	61.10%
Exercise Science, Motor Development, B.S.	11	1224	53	2250	64	3474	82.81%	64.77%
Exercise Science, Public Health, B.S.	10	999	39	1521	49	2520	79.59%	60.36%
Exercise Science, Scientific Foundations, B.S.	25	1526	219	8480	244	10006	89.75%	84.75%
Public Health, B.A.	19	1539	9	873	28	2412	32.14%	36.19%
Public Health, B.S.	21	1653	9	873	30	2526	30.00%	34.56%
TOTAL	100	8429	381	16334	481	24763	79.21%	65.96%

10. Percent of credit hours by undergraduate major taught by full-time faculty
[See note above about interpretation of data.]

	Ugrad		Ugrad		FT %	
	<i>FT Inst #</i>	<i>Cred Hrs</i>	<i>PT Inst #</i>	<i>Cred Hrs</i>	<i>Ugrad Inst #</i>	<i>FT % Ugrad Cred Hrs</i>
Fall 2010						
Exercise Science/ Health Fitness/ B.S.	9	276	0	0	100.00%	100.00%
Exercise Science/ Motor Development/ B.S.	8	963	0	0	100.00%	100.00%
Exercise Science/ Public Health/ B.S.	8	596	1	9	88.89%	98.51%
Exercise Science/ Scientific Foundations/ B.S.	185	10504	17	1029	91.58%	91.08%
Public Health/ B.A.	6	186	4	267	60.00%	41.06%
Public Health/ B.S.	13	1314	12	828	52.00%	61.34%
TOTAL	229	13839	34	2133	87.07%	86.65%

Spring 2011

Exercise Science, Health Fitness, B.S.	54	3243	2	129	96.43%	96.17%
Exercise Science, Motor Development, B.S.	53	2796	1	225	98.15%	92.55%
Exercise Science, Public Health, B.S.	39	2067	0	0	100.00%	100.00%
Exercise Science, Scientific Foundations, B.S.	190	7712	44	1841	81.20%	80.73%
Public Health, B.A.	13	1626	15	786	46.43%	67.41%
Public Health, B.S.	13	1626	17	900	43.33%	64.37%
TOTAL	362	19070	79	3881	82.09%	83.09%

11. Number of faculty by title for Fall 2009, Fall 2010, and Fall 2011

	<u>Fall 2009</u>	<u>Fall 2010</u>	<u>Fall 2011</u>
<u>Tenure Track Faculty</u>			
Professor	14/15*	17/19*	21/22*
Associate Professor	15	14/15	11/14
Assistant Professor	25/27	27/30	30
<u>Research Faculty</u>			
Professor	2	2	1/2
Associate Professor	2	2	0
Assistant Professor	9/11	8/9	9/10
<u>Instructors</u>			
	5	6/4	6
<u>Visiting Faculty</u>			
Professor	0	0	0
Associate Professor	0	1	0
Assistant Professor	0	0	0
<u>Clinical Faculty</u>			
Professor	0/1**	0/1**	0/1**
Associate Professor	5	7	6
Assistant Professor	11/15	10/14	12/16
Instructor	5	6	7
<u>Adjunct Faculty</u>			
	199	102	143

*Includes Jay Moskowitz (HSSC)

**Post-TERI hire of professor emeritus

First faculty count in each cell is as reported by Institutional Assessment and Compliance, second number is based on internal records. Some discrepancies are due to temporary grant appointments; several may reflect fall hires or promotions. Adjunct faculty count is based on internal records and includes USC faculty in units other than Public Health.

Faculty by department, Fall 2011 (internal records, includes research grant employees with faculty title)

	COMD	ENHS	EPID/BIOS	EXSC	HPEB	HSPM	Total
<u>Tenure Track Faculty</u>							
Professor	1	3	4	7	3	4	22
Associate Professor	2	1	8	1	1	1	14
Assistant Professor	4	3	5	5	11	2	30
<u>Research Faculty</u>							
Professor	1			1			2
Associate Professor							0
Assistant Professor	1	2	1	1		5	10
<u>Clinical Faculty</u>							
Professor				1*			1
Associate Professor			1	3	2	0	6
Assistant Professor	6	1	3	3	2	1	16
Instructor	7			2	3	1	13
<u>Total</u>	22	10	22	24	22	14	114

*Includes post-TERI hires of professor emeritus

12. Current number and change in the number of tenure-track and tenured faculty from underrepresented minority groups from FY 2010.
 Fall 2010: 3 African-American, 1 2 or more races, 1 Asian
 Fall 2011: 3 African-American, 1 2 or more races, 4 Asian (plus one African-American hired January 2012)

Scholarship, Research, and Creative Accomplishments

[The data provided by the University Office of Research included all extramural funding rather than restricting to research funding as described in the guidance. In addition, some funding was not included because of administrative changes, cross-appointments etc. The reports below are therefore based on internal calculations from SAM and USCeRA data, which we have compared carefully to those provided by the university office. Several of our faculty members have joint appointments or formal collaborations with units outside the Arnold School. Grant submissions, awards and expenditure through these other units may not be reflected in the numbers below.]

1. The total number and amount of external sponsored research proposal submissions by agency for FY2011

Total research proposal \$ - 1st yr request			36,653,018
Total # research proposals			172
By Agency:			
AHRQ	3	176,385	Federal
CDC	6	1,830,966	Federal
DOD	2	359,224	Federal
DOE	3	566,178	Federal
EPA	2	529,895	Federal
HHS-Other	6	1,708,741	Federal
NASA	2	9,962	Federal
NIH	100	26,587,393	Federal
NOAA	3	559,791	Federal
NSF	5	912,363	Federal
USDA	7	842,557	Federal
USDJ	1	165,735	Federal
Total	140	34,249,190	Federal
Battelle Memorial Inst	1	36,911	Corporate
British Petroleum	1	421,627	Corporate
Clinaero, Inc.	1	154,100	Corporate
Coca-Cola Co.	3	505,628	Corporate
TechnoGym	1	14,610	Corporate
Total	7	1,132,876	Corporate
ACSM	6	34,800	Non-Profit
AHA	1	41,000	Non-Profit
ADA	3	399,227	Non-Profit
American Dietetic Assoc	1	35,000	Non-Profit

American Physiological Soc	1	30,000	Non-Profit
ASTHO	1	8,000	Non-Profit
Eat Smart Move More	1	22,592	Non-Profit
Mary Black Fnd	1	14,785	Non-Profit
Mex Nat Inst of PH	1	59,683	Non-Profit
New Morning Fnd	1	178,338	Non-Profit
PhRMA	1	55,000	Non-Profit
RWJF	3	299,140	Non-Profit
SECOORA	1	10,128	Non-Profit
World Bank	1	55,760	Non-Profit
Total	23	1,243,453	Non-Profit
SC DHEC	1	13,176	State
SCDE	1	14,323	State
Total	2	27,499	State

Note: Sponsor shown is the origin of the funds. Flow-through funds are attributed to the sponsor of origin

Data Source: USCeRA

2. Summary of external sponsored research awards by agency for FY 2011

Total research award \$	25,671,306
Total # research awards	150

By Agency:			
CDC	18	2,730,808	Federal
DOD	8	2,291,297	Federal
DOE	1	257,833	Federal
EPA	2	123,922	Federal
HHS	12	2,275,035	Federal
HRSA	4	704,800	Federal
NASA	1	5,000	Federal
NIH	70	10,152,079	Federal
NSF	5	291,501	Federal
USDA	1	25,000	Federal
Total	122	18,857,275	Federal
Coca-Cola Co	4	2,615,771	Corporate
Pfizer	1	129,999	Corporate
TechnoGym	1	17,532	Corporate
Total	6	2,763,302	Corporate
ACSM	2	9,557	Non-Profit
ADA	2	141,019	Non-Profit

AEDARTS	1	99,905	Non-Profit
AHA	1	77,000	Non-Profit
AICR	1	26,183	Non-Profit
ASTHO	1	8,000	Non-Profit
Duke End	5	536,857	Non-Profit
ESMM	1	22,593	Non-Profit
INSP	1	52,083	Non-Profit
MBF	1	14,785	Non-Profit
NERRA	1	4,454	Non-Profit
NNPHI	1	10,000	Non-Profit
RWJF	1	24,989	Non-Profit
SECOORA	1	10,128	Non-Profit
Total	20	1,037,553	Non-Profit
Gen Assembly	1	3,000,000	State
SCDHEC	1	13,176	State
Total	2	3,013,176	State

Data Source: USCeRA

3. Total extramural funding processed through SAM in FY2011 and Federal extramural funding processed through SAM in FY2011

Total awards	29,369,769
Total federal awards	20,242,422
Total federal research Awards	18,857,275

Data Source: USCeRA

4. Amount of sponsored *research* funding *per faculty member* in FY2011 by *rank*, *type of funding*, and by *department*

Faculty PI	Rank	Dept	Type	Total Res \$
Aelion, Marjorie	Prof	ENHS	Fed	67,113
Baynes, John	Prof	EXSC	Fed	368,962
Blair, Steven	Prof	EXSC-EPID/BIOS	Fed, Corp, State	5,363,648
Blake, Christine	Asst Prof	HPEB	Non-Prof	3,567
Brandt, Heather	Asst Prof	HPEB	Fed, Non-Prof	298,878
Cai, Bo	Asst Prof	EPID/BIOS	Fed	145,032
Carson, James	Prof	EXSC	Fed	262,264
Chandler, Thomas	Prof	ENHS	Fed	123,922
Colabianchi, Natalie	Asst Prof	EPID/BIOS	Fed	349,701

Davis, Mark	Prof	EXSC	Fed, Non-Prof	606,067
Decho, Alan	Prof	ENHS	Fed	146,818
Deliyski, Dimitar	Assoc Prof	COMD	Fed	14,097
Do, Phoenix	Asst Prof	HSPM	Fed	186,755
Fayad, Raja	Asst Prof	EXSC	Fed	248,667
Feigley, Charles	Prof	ENHS	Fed	100,000
Forthofer, Melinda	Assoc Prof	EPID/BIOS	Fed	334,325
Fridriksson, Julius	Assoc Prof	COMD	Fed	600,669
Fritz, Stacy	Asst Prof	EXSC	Non-Prof	77,000
Frizzell, Norma	Res Asst Prof	EXSC	Non-Prof	131,019
Frongillo, Edward	Prof	HPEB	Non-Prof	99,905
Glover, Sandra	Prof	HSPM	Fed	1,866,170
Hand, Gregory	Prof	EXSC	Fed	227,583
Hebert, James	Prof	EPID/BIOS	Fed	1,597,348
Hooker, Steven	Res Assoc Prof	EXSC	Non-Prof	14,785
Jones, Sonya	Asst Prof	HPEB	Fed	9,721
Karmaus, Wilfried	Prof	EPID/BIOS	Fed	707,922
Liese, Angela	Prof	EPID/BIOS	Fed	46,739
Liu, Jihong	Assoc Prof	EPID/BIOS	Fed	181,250
Martin, Amy	Res Asst Prof	HSPM	Fed	44,800
McKeown, Robert	Prof	EPID/BIOS	Fed	737,111
Merchant, Anwar	Assoc Prof	EPID/BIOS	Fed	244,108
Moran, Robert	Clin Asst Prof	EPID/BIOS	Fed	47,267
Newman, Lee	Asst Prof	ENHS	Fed	74,879
Norman, Sean	Asst Prof	ENHS	Fed	257,833
Pate, Russ	Prof	EXSC	Fed	2,239,128
Porter, Dwayne	Prof	ENHS	Non-Prof	14,582
Probst, Janice	Prof	HSPM	Fed	660,000
Puett, Robin	Res Asst Prof	EPID/BIOS	Fed	46,783
Richter, Donna	Prof	HPEB	Fed, Non-Prof	469,939
Sabo-Attwood, Tara	Asst Prof	ENHS	Fed	69,804
Sharpe, Patricia	Res Prof	EXSC	Fed	655,470
Steck, Susan	Res Asst Prof	EPID/BIOS	Fed	185,500
Sui, Xuemei	Res Asst Prof	EXSC	Fed	179,438
Svendsen, Erik	Res Asst Prof	EPID/BIOS	Fed	672,110
Thrasher, James	Asst Prof	HPEB	Fed, Non-Prof	161,887
Torres, Myriam	Clin Asst Prof	EPID/BIOS	Fed, Non-Prof	192,989
Wilcox, Sara	Prof	EXSC	Fed	875,256
Williams, Edith	Res Asst Prof	EPID/BIOS	Corp	129,999
Xirasagar, Sudha	Assoc Prof	HSPM	Fed, State	332,226
Youngstedt, Shawn	Assoc Prof	EXSC	Fed	337,177
Zhang, Jiajia	Asst Prof	EPID/BIOS	Fed	219,891

Data Source: USCeRA

5. Total sponsored research expenditures per tenured/tenure-track faculty for FY 2011 by rank and by department

TT Faculty Member	Rank	Dept	Res Exp
Aelion, Marjorie	Prof	ENHS	61,258
Baynes, John	Prof	EXSC	242,808
Blair, Steven	Prof	EXSC	599,606
Blake, Christine	Asst Prof	HPEB	24,820
Cai, Bo	Asst Prof	EPID/BIOS	97,975
Carson, James	Prof	EXSC	274,447
Chandler, Thomas	Prof	ENHS	122,160
Colabianchi, Natalie	Asst Prof	EPID/BIOS	375,645
Davis, Mark	Prof	EXSC	684,384
Decho, Alan	Prof	ENHS	3,029
Deliyski, Dimitar	Assoc Prof	COMD	200,590
Do, Phoenix	Asst Prof	HSPM	214,315
Fayad, Raja	Asst Prof	EXSC	7,170
Feigley, Charles	Prof	ENHS	105,272
Forthofer, Melinda	Assoc Prof	EPID/BIOS	376,192
Fridriksson, Julius	Assoc Prof	COMD	716,399
Friedman, Daniela	Asst Prof	HPEB	1,313
Fritz, Stacy	Asst Prof	EXSC	119,090
Frongillo, Edward	Prof	HPEB	82,822
Glover, Sandra	Prof	HSPM	1,540,511
Hand, Gregory	Prof	EXSC	100,403
Hebert, James	Prof	EPID/BIOS	1,412,056
Jones, Sonya	Asst Prof	HPEB	67,593
Karmaus, Wilfried	Prof	EPID/BIOS	360,951
Liese, Angela	Prof	EPID/BIOS	336,202
Liu, Jihong	Assoc Prof	EPID/BIOS	151,480
McClenaghan, Bruce	Prof	EXSC	60,256
McKeown, Robert	Prof	EPID/BIOS	514,806
Merchant, Anwar	Assoc Prof	EPID/BIOS	304,320
Newman, Lee	Asst Prof	ENHS	12,522
Norman, Sean	Asst Prof	ENHS	316,618
Pate, Russ	Prof	EXSC	1,960,332
Porter, Dwayne	Assoc Prof	ENHS	18,584
Probst, Janice	Prof	HSPM	838,426
Richter, Donna	Prof	HPEB	900,329
Sabo-Attwood, Tara	Asst Prof	ENHS	175,688
Spencer, Mindi	Asst Prof	HPEB	2,070
Thrasher, James	Asst Prof	HPEB	125,269
Valois, Robert	Prof	HPEB	69,834

Wilcox, Sara	Prof	EXSC	1,416,231
Xirasagar, Sudha	Assoc Prof	HSPM	61,952
Youngstedt, Shawn	Assoc Prof	EXSC	456,949
Zhang, Hongmei	Asst Prof	EPID/BIOS	7,731
Zhang, Jiajia	Asst Prof	EPID/BIOS	186,299
Total TT Fac Res Expenditures			15,706,707

Data Source: SAM

Rank	Expenditures
TT Fac Res Exp	15,706,707
Non-TT Fac Res Exp	2,709,001
TT Fac Non-Res Exp	1,504,427
Non-TT Fac Non-Res Exp	1,355,195
Non-Fac Res Exp	1,668,737
Non-Fac Non-Res Exp	592,481

6. Number of patents, disclosures and licensing agreements in fiscal years 2009, 2010, and 2011 (provided by SAM)

	Invention Disclosures	Provisional patent applications	Non-Provisional patent applications	Issued patents
FY2011	2	2	0	0
FY2010	2	1	1	0
FY2009	5	1	2	0

Source: Office of Technology Commercialization

Please verify the information provided by the Office of Continuing Education

184.5 CEUs offered or a total of 5761.5 participant CEUs earned for calendar year 2011 (report submitted to Continuing Education and Conferences in November 2011). Several departments and centers report continuing education activities for which no form CEUs are granted. Information from Office of Continuing Education not found through IAC link.

Faculty Hiring/Retention and PhD Program

1. Number of faculty hired and lost for AY 2008, AY 2009, AY 2010, AY 2011 and AY 2012

Faculty Hires		2007- 2008	2008- 2009	2009- 2010	2010- 2011*	2011- 2012**
Professor	HSPM	1				1
Associate Professor	EPID/BIOS	1			2	2
Assistant Professor	COMD		2		1	2
	ENHS	1		1	1	1
	EPID/BIOS	2		1	1	1
	EXSC	1	2	1		2
	HPEB	5	2	1		3
	HSPM		1			1
Instructor	COMD		1			1
	EXSC		1	2		
	HPEB				2	1
	HSPM					1
Research Assistant Professor	COMD				1	
	ENHS					1
	EPID/BIOS	2				
	EXSC		1		1	
	HSPM				4	
Clinical Assistant Professor	COMD	1		1	1	1
	ENHS			1		
	EPID/BIOS	2			1	1
	EXSC	1				1
	HSPM				1	
TOTAL		17	10	8	16	20

*Includes updates for personnel actions received after submission of 2011 Blueprint
 **AY 2011-2012 hires include two internal hires from external searches (Hardin into tenure-track from research track; Barth as instructor from one department to another), one reclassification from research associate to research assistant professor (Joe Jones), and four assistant professors and one clinical assistant professors with January 1, 2012 start dates (not included in earlier total counts of faculty).

Faculty Losses		2007- 2008	2008- 2009	2009- 2010	2010- 2011*	2011- 2012**
Professor	ENHS		1			
	EPID/BIOS	3				1
	EXSC				1	
Associate professor	COMD	1	1	1		
	EPID/BIOS				1	
	HPEB	1				
	HSPM	1			1	
Assistant professor	COMD			1	1	
	ENHS		1		2	
	EPID/BIOS	1			1	
	HPEB	1				
Research Professor	EXSC				1	
Research Associate Professor	EPID/BIOS	1				1
	EXSC				1	
Research Assistant Professor	COMD		1			
	ENHS		1			
	EPID/BIOS	2			2	
	EXSC				2	
	HPEB	1				
Clinical Associate Professor	HSPM				1	
Clinical Assistant Professor	COMD			1		1
	ENHS					1
	HPEB			1		
Instructor	EPID/BIOS			1		
	EXSC					1
Total		12	5	6	14	5

*Includes updates for personnel actions received after submission of 2011 Blueprint

**Two "losses" are transfers related to internal hires for external searches; includes announced retirement prior to August 16, 2012 (McKeown)

2. Number of post-doctoral scholars

FY 2008	Total five across school
FY 2009	Total 13 across school: COMD – 3; ENHS – 2; EXSC – 5; HSPM - 4
FY 2010	Total 13 across school: COMD – 3; ENHS – 2; EXSC – 5; HSPM – 3; Office of Public Health Practice – 1
FY 2011	Total 10 across school: COMD – 2; ENHS – 1; EPID/BIOS – 1; EXSC – 5; HPEB – 1
FY 2012	Total 17 across school: COMD – 2; ENHS – 1; EPID/BIOS -1; EXSC – 9 (post-docs and research associates with doctoral degrees); HPEB – 1; HSPM – 1; Latino Consortium – 1; IPEHD – 1

3. Anticipated losses of faculty for the next five years.

COMD: two tenured associate professors (one conventional retirement, one TERI period end), one senior instructor (TERI period end), one research professor (conventional retirement)

ENHS: one professor (end TERI period)

EXSC: two tenured professors (one conventional retirement, one TERI period end)

HPEB: none anticipated

HSPM: none anticipated

Funding Sources

1. All funds budgeted: E funds only (detailed account listing provided separately)

YEAR	Balance June 30
FY 2008	\$ 1,310,581
FY 2009	\$ 916,484
FY 2010	\$ 2,096,958
FY 2011	\$3,184,952

2. Gifts and pledges received in FY 2011

\$5,048,724.56

Note that a substantial proportion of this total reflects foundation/NGO funds that are processed as sponsored awards.

Appendix 1: Detailed analysis of job placement and instructional profiles

1. Placement of graduate students, terminal masters, and doctoral students, for the three most recent applicable classes.

Destination	2009 Graduates		2010 Graduates		2011 Graduates	
	Masters (N=120)	Doctoral (N=32)	Masters (N=143)	Doctoral (N=44)	Masters (N=163)	Doctoral (N=57)
Actively Seeking Employment	1.7%	0.0%	0.7%	0.0%	6.7%	5.3%
Continuing Education (not employed)	9.2%	3.1%	13.3%	2.3%	12.3%	5.3%
Employed	78.3%	93.8%	72.7%	93.2%	66.9%	89.5%
Not seeking employment by choice	0.0%	0.0%	0.0%	0.0%	1.2%	0.0%
Unknown	10.8%	3.1%	13.3%	4.5%	12.9%	0.0%

Of the five doctoral students reporting continuing their education, two are physical therapy students who entered the PhD program in Exercise Science after completing the Doctor of Physical Therapy program; one is a physician who is now a preventive medicine resident.

2. Number of undergraduate and graduate credit hours in Fall 2010, Spring 2011, and Summer 2011, stated separately, taught by tenured and tenure-track faculty, by instructors, by non tenure-track faculty (research and clinical), by temporary faculty (adjuncts), by full-time faculty, and faculty with terminal degrees.

	Undergraduate			Graduate		
	Fall 2010	Spring 2011	Summer 2011	Fall 2010	Spring 2011	Summer 2011
Total	6032	6563	893	6223	5889	3695
Faculty type						
Tenured/tenure-track faculty	1867	2411	298	2872	2425	810
Instructors	816	953	81	386	463	1232
Research and clinical faculty	2133	1854	499	1649	1746	960
Adjunct faculty	190	3	9	959	449	92
Graduate assistants	756	969	0	6	3	0
Data not provided	270	373	6	351	803	601
Faculty status						
Full-time	4816	5218	878	4907	4634	3002
Part-time	946	972	9	965	452	92
Unknown	270	373	6	351	803	601

	Undergraduate			Graduate		
	Fall 2010	Spring 2011	Summer 2011	Fall 2010	Spring 2011	Summer 2011
Faculty education level						
Terminal degree	4000	4265	797	4521	4171	1770
Less than terminal degree	1572	1922	81	392	466	1232
Unknown	460	376	15	1310	1252	693
Course acronym						
BIOS	0	0	0	864	451	108
COMD	351	423	18	1785	1853	2087
ENHS	144	117	9	254	211	169
EPID	169	0	0	504	612	153
EXSC	3589	3798	752	614	588	184
HPEB	1533	1679	114	760	788	113
HSPM	99	219	0	832	787	446
PHYT	0	0	0	568	570	426
PUBH	147	327	0	42	29	0

Note: The number of graduate credit hours taught by instructors and clinical faculty reflects disproportionate influence of the professional COMD masters programs which require strong clinical focus. In Communication Sciences and Disorders, the clinical masters degree such as Master of Speech Pathology is considered a terminal practice degree in the discipline. This department therefore has seven masters-trained instructors who have a significant share of the classroom instruction and clinical supervision of masters students. In addition, six clinical assistant professors teach solely in this program. All are approved as term graduate faculty for teaching responsibilities. Students in the MCD and MSP program therefore account for the vast majority of credit hours taught by instructors or clinical and research faculty.

Appendix 2: Questions Related to Dashboard Metrics

Student Retention

1. Have you assessed your retention methods and activities to determine their effectiveness in retaining freshmen and sophomores?
 - a. Which retention methods are effective and why do you believe they work?
 - b. What retention methods have you tried that are not effective?

The faculty and staff working with public health undergraduate students currently focus on providing the best advisement experience possible, including appropriate referrals to University services when appropriate. Currently, we do not have any activities that were developed as methods to improve or evaluate retention directly. However the fact that our retention rates are typically higher than the campus averages suggests that we are effective in our approach, which includes requiring almost all students to take UNIV 101, preferably in a section comprised primarily of public health/exercise science students. For first-year retention, the proportion of students staying at USC but transferring to a different college is surprisingly high, but for second-year retention, the vast majority of students stay in the Arnold School, resulting in the highest same-college second-year retention on campus.

This year we have implemented a school-wide undergraduate advisory committee. While the initial efforts have focused on the Carolina Core transition, in the long term, we hope this committee will facilitate greater departmental involvement in undergraduate advisement, and provide recommendations for policies and practices for undergraduate academic matters and student services, including activities to promote retention.

2. Describe the advising in your college. How do you determine the effectiveness of your college's advising? Are there any additional advising activities needed to provide students the assistance they need to navigate through the Carolina Core and major to graduate on time?

As our undergraduate programs grow, we strive to build a more effective and efficient undergraduate student services infrastructure to assure that 1) students understand the expectations and requirements of the program; 2) students know whom to contact for information, and we have systems in place for a timely and accurate response; 3) advisors are often reminded that students are our customer base and must be (are) treated with care and respect.

The Arnold School utilizes instructors (who currently are all masters graduates of our programs) and clinical Ph.D. faculty as advisors rather than professional staff advisors. Part of the Dean's start-up resources were used to hire staff for this purpose. For advisement during freshman orientation, the advisors work as a team, rotating across the different days. Our advisors teach school-specific sections of UNIV 101, so the first spring advisement

often occurs in that class. For subsequent advisement, available advisement times are abundant and posted; use electronic calendars have been very well-received. Each student meets individually with an advisor. Separate meetings for potential transfer students are scheduled outside of the weeks most heavily utilized for advisement; dates of these meetings are posted in multiple locations. These transfer students are often frustrated if they are unable to meet with a public health advisor during the regular advisement period, but we have built a strong relationship with Cross-Campus Advisement and have found the office very helpful for these transfer students.

Interacting with students in multiple settings including the classroom allows advisors more opportunities to get to know students individually so the students are comfortable sharing personal problems and challenges. This allows advisors to more effectively refer students to campus academic support services, medical and counseling services and other campus services as needed.

As faculty members, public health advisors have participated in several of the Carolina Core forums and are leading the curriculum revision process for the school, working with the undergraduate advisory committee for broader departmental input. Because of this effort, they are very familiar with the curriculum and are in an excellent position to advise students through the CC transition and new CC curriculum.

3. What types of student support do you find to be most beneficial to your students in terms of retention and successful progress toward their degrees?

Consistent advisement is critical to assure appropriate progression through course sequencing. Because of the rapid growth of our programs and campus-wide undergraduate growth, finding appropriate classes with seats available is a recurring challenge. Within the Arnold School, we are trying to project enrollments for required courses more effectively so classes and class-room space are available when students need them.

Student Graduation and Placement

1. Have you assessed your degree programs to determine if program requirements are reasonable in terms of time toward graduation?
 - a. What changes have you made?
 - b. What further changes are needed?

Several years ago, the exercise science curriculum was restructured to reduce minimum credit hours to 120. Concurrent with the Carolina Core transition and identification of a college core, we are preparing a series of revisions for the public health programs that, while not a reduction from the current 120 hours requirement, will provide a more cohesive program of study and eliminate a few courses that have been especially problematic in terms of scheduling and/or satisfactory completion.

2. Outline what measures you have put in place to assist students with intern placement and job placement.

The current programs do not have internship requirements. The exercise science program has either a practicum requirement or a research experience, depending on the concentration. Current advisors and other faculty assist with identification of the practicum sites, including establishment of MOUs as required by the field agency. We are adding a new capstone experience for the public health programs that will require at least 50 hours practice in a field agency. We will utilize our extensive network of MPH practicum sites and preceptors, many of whom who have already expressed their interest and support for this initiative.

3. Outline the measures that you use to track graduates with baccalaureate, masters, and doctoral degrees.

For our graduate programs, we have utilized a school-level exit questionnaire for years. However, the response rates have been abysmally low in most programs except for those with a program-level professional accreditation. The challenge has also been that we are asking the students to respond about job placement around the time of graduation, not 3-6 or even 12 months later, although the longer window is typical for job placement success. We are exploring how to get more complete responses with an electronic modality. In the context of data requests for both this document and our school accreditation annual report, departments were (are) able to identify the destination of the vast majority of graduates, but this is happening more informally and less systematically than preferred.

In the last two years we have made a more intentional effort to have baccalaureate graduates complete a similar instrument. Response rates have been encouraging, but the impact of completing the survey just before graduation rather than a few months after is significantly **less** information available to us.

Distributed Learning

1. Outline your college's involvement with distributed learning.

The Department of Communication Sciences and Disorders offers the Master of Communication Disorders (MCD) as a distance program. The curriculum is identical to the campus Master of Speech Pathology (MSP); the programs show a program accreditation and have the same requirements for supervised clinical experiences throughout the program. Because many of the students in the MCD program live in rural areas with limited access to high-speed internet, the courses are delivered via recorded lectures on DVDs. However, ample opportunity for student-faculty interaction including occasional campus meetings is available.

In the last two years we have made a more intentional effort to have baccalaureate graduates complete a similar instrument. Response rates have been encouraging, but the impact of completing the survey just before graduation rather than a few months after is significantly **less** information available to us.

Because of the HSPM activity with distributed learning, all the school's public health core courses are offered via some distributed education modality at least once per year. Because of different levels of faculty investment, the quantity and modality of these courses vary widely, as does comparative quality. In addition to HSPM and the COMD program, two other departments offer some courses as web-based courses beyond the public health core.

2. What measures have you taken to expand the availability of distributed learning courses in your college?

Because of the availability of the complete public health core and select advanced courses in four of the five public health disciplines, the interdisciplinary MPH in general public health can theoretically be completed as a distance program. However, it is not marketed as such and the current course availability does not afford the student the flexibility normally available in the non-distance program. We are exploring the potential audience for this program in the Greenville (GHS) and Charleston (MUSC and Lowcountry Graduate Center) markets but presently do not have HR and technological support for quality delivery.

If more training and technical support (equipment, software and personnel for technical assistance) for distributed education were available, faculty members in the Arnold School might be more willing to invest in developing distributed learning courses.

3. What measures have you taken to insure the quality of distributed learning courses?

Students in distributed learning courses have the same opportunity for course evaluation as students in traditional courses. We review these, but the low response rates make interpretation a challenge. Many of the courses are based on lectures recorded for a live class, with opportunities for faculty-student interaction. However, some of the courses are more traditionally web-based, e.g., posted slide presentations, narrative material and other resources, and the comparable quality are questionable. Currently departments are expected to monitor delivery modality and quality assurance within each unit, and report/correct problems as they arise.

4. If applicable, describe the challenges your college has faced in taking distributed learning courses to scale? Have you participated in offering virtual laboratories? What measures do you use to ascertain their success?

The primary challenge is a recurring and persistent one – the university has never provided adequate technological resources (HR and IT) to deliver quality and quantity at high scale. All of our distributed offerings have been lower scale and determined by internal available resources and faculty skills. Dean Chandler has been consistently disappointed and frustrated with service quality and quantity from UTS/DEIS. We have never participated in virtual laboratory development or offerings even though we are interested in exploring this modality.

USC Connect and Community Engagement

1. Outline the measures your college will take to encourage use of USC Connect.
2. Describe the college's plans to support faculty use of reflection in the classroom and develop expertise in integrated learning.
3. How many of your classes involve service learning? Undergraduate research? And international experiences?
 - a. Has the number increased with time?
 - b. Is the number appropriate for your discipline?
4. What additional opportunities does your college plan to provide for engaging students beyond the classroom?

Learning beyond the classroom and community engagement are inherent to the disciplines of public health and are required to varying degrees in all our programs, undergraduate and graduate. Several classes, especially in the Department of Health Promotion, Education, and Behavior, have required service learning opportunities. Many students in Exercise Science (those in the Scientific Foundations concentration in particular) complete an undergraduate research experience. In addition, faculty members across the school have mentored individual undergraduate research experiences for students from across campus. While Arnold School faculty members have not led or actively participated in study abroad opportunities, many of our students do participate in the various programs. In addition, we are seeing a growing number of students interested in international service projects such as the Community Water Solutions in Ghana (four students participated in the recent three-week water education and leadership training experience).

PhD Programs

Data for first three questions are reported in the Statistical Profile, as they have been for past years.

4. Outline your college's actions to improve graduate education, to improve its NRC and other rankings.

Most of our departments have recently completed reviews of our doctoral programs. The most substantive of the resulting changes was the complete restructuring of the Doctor of Public Health programs to include an advanced practicum experience and a DrPH core addressing cross-cutting competencies of leadership, management, evaluation, policy and research methods. These students must complete a dissertation of the same rigor as the corresponding PhD programs, but it is expected to be in a more applied context.

5. Describe your methods for placing your PhD and other terminal degree students in tenure-track positions at high-ranking institutions.

While our doctoral programs include training and opportunity for teaching opportunities, we recognize that there are many opportunities for our graduates to have a major impact within and beyond academia. We are pleased to see graduates successfully compete for tenure-track and other faculty positions at quality research institutions, but we are equally pleased to see graduates placed at the National Institutes of Health, Centers for Disease Control and Prevention and other federal agencies, for example. There is a federally-recognized critical need to replenish and grow the public health workforce at all levels. With new schools of public health being accredited every year and longstanding schools seeking replacement and new faculty, there is ample opportunity for our graduates to achieve a tenure-track position in an academic institution, but our graduates can also have a tremendous impact on creation, dissemination and application of public knowledge in a variety of other settings.

Interdisciplinary Research

Describe the interdisciplinary research that is ongoing in your college.

- a. What measures are being taken to increase interdisciplinary research?
- b. What measures should be taken to promote interdisciplinary research?

The Arnold School has a long history of interdisciplinary research within and beyond the school. As one simplistic metric, for CY 2011, we have 268 unique peer-review publications representing 419 faculty authors; combined these statistics reflect strong collaboration within the school. Many of our research projects involve faculty from several departments across the school. For example, several of the physical activity projects involve faculty from Exercise Science, Health Promotion, Education & Behavior, and Epidemiology & Biostatistics. Our

growing expertise in neuroimaging involves collaboration between Communication Sciences & Disorders and Exercise Science.

Many of our collaborations involve other units at USC, in particular the other health sciences schools and colleges and the Department of Psychology. We have faculty members with joint appointments with Anthropology, African-American Studies, and Women and Gender Studies. Several faculty members are active participants in the Research Consortium on Children and Families. The Health Sciences Research Core, with Epidemiology and Biostatistics, is intended to be a resource for research across all the health science disciplines. We are active participants in the University's first T32 program, the Behavioral-Biomedical Interface Program for doctoral students in Epidemiology, Exercise Science and Psychology.

Our faculty members are active research collaborators with Health Sciences South Carolina, established with one of the first COEE/SmartState endowed chairs, Dr. Jay Moskowitz, whose academic appointment is in the Arnold School. We have been actively involved with the USC SOM-Greenville curriculum development and the GHS Institute for Advancement of Healthcare. Faculty members in Environmental Health Sciences have longstanding relationships and funding with the NOAA National Center for Coastal Ocean Science.

The culture of academic public health is one of collaboration and interdisciplinary work. Most of our academic programs require coursework across at least two or three departments. Few significant grants involve only a single department. Several of our faculty members could have appointment in two or even three different departments based on training and experience. Many of our recent and ongoing faculty searches are for interdisciplinary cluster hires. Hires with the physical activity and health cluster are now in three departments; candidates interviewing for the nutrition and health cluster could be appointed in up to four different departments. Department chairs encourage faculty members to network outside the home department. The Arnold School Office of Research often identifies collaborative opportunities and will facilitate planning and organization meetings if requested.

Our tenure and promotion criteria require leadership and excellence in research scholarship, but we are careful not to equate leadership strictly with a principal investigator role or first author. In many large grants, e.g., community-based intervention studies or program project grants, several faculty members have significant leadership roles in different components of the larger grant. Recognition of the broader leadership roles rewards and therefore promotes these collaborative activities.

DEPT	FUND	Account Name	Balance	Department Total
Dean's Office				1,113,666.93
11500	E150	RESEARCH INCENTIVE	938,197.73	
11500	E152	RESEARCH INCENTIVE/OFFICE OF RESEARC	3,171.81	
11500	E154	RESEARCH INCENTIVE - HEBERT	0.00	
11500	E155	PUBLIC HEALTH PRACTICE	-20,894.15	
11500	E156	IHPL IDC ACCOUNT	1,066.87	
11500	E157	ARNOLD SPH SPECIAL PROJECTS	7,256.53	
11500	E158	RESEARCH INCENTIVE - CPCP	31,676.11	
11500	E159	IPEHD IDC ACCOUNT	3,476.17	
11500	E207	LILLIAN SMITH/RESEARCH INCENTIVE	36.26	
11500	E208	MYRIAM TORRES/RESEARCH INCENTIVE	329.72	
11500	E209	JAMES HERBERT/RESEARCH INCENTIVE	339.38	
11500	E210	RESEARCH INCENTIVE- TOM HURLEY	-28.64	
11500	E211	PUBLIC HEALTH SOUTH CAROLINA INCENTIV	108,567.17	
11500	E212	PASOS IDC ACCOUNT	-248.00	
11500	E700	PUBLIC HEALTH STUDENT COMPUTER FEE	25,168.27	
11500	E745	TECHNOLOGY FEE - HARDWARE UPGRADES	6,337.33	
11500	E900	SCHOOL OF PUBLIC HLTH-SPEC CONFEREN	0.00	
11500	E907	IHPL SERVICE ACCOUNT	-585.08	
11500	E908	ASPH/CONSORTIUM FOR LATINO IMMI STUD	3,889.94	
11500	E909	ASPH/SC PUBLIC HEALTH CONSORTIUM	-0.20	
11500	E910	PASOS REVENUE ACCOUNT	5,909.71	
Environmental Health Sciences				58,313.20
11510	E150	ENV HEALTH SCIENCE-RESEARCH INCENTIV	123,237.62	
11510	E151	START-UP FUNDS DR SABO-ATTWOOD	-28.23	
11510	E152	ENHS/ENVIRO GENOMICS LAB	3,528.29	
11510	E153	ENVIROMENTAL HEALTH SCIENCES	-2,591.64	
11510	E157	START UP FUNDS/NORMAN	-60,793.70	
11510	E159	START-UP FUNDS - DAVID C VOLZ	-68,662.78	
11510	E201	ENHS/RESEARCH INCENTIVE	-0.01	
11510	E203	ENHS/RESEARCH INCENTIVE	39,478.77	
11510	E205	ENHS/RESEARCH INCENTIVE	578.74	
11510	E208	ENHS/RESEARCH INCENTIVE	-510.19	
11510	E210	SABO-ATTWOOD/RESEARCH ACCOUNT	1,106.34	
11510	E211	RESEARCH INCENTIVE- NORMAN	2,303.91	
11510	E212	ROBIN PUETT/RESEARCH INCENTVIE	74.32	
11510	E214	DAVID VOLZ / PIRA	15,031.13	
11510	E907	ENVIRONMENTAL GENOMICS CORE LABOR/	2,688.51	
11510	E908	PUBLIC HEALTH PREPAREDNESS CTR PROJ	2,872.12	
Epidemiology and Biostatistics				412,953.76
11520	E124	EPIDEMIOLOGY AND BIOSTATISTICS	83.10	
11520	E125	EPIDEMIOLOGY AND BIOSTATISTICS	588.56	
11520	E150	RESEARCH INCENTIVE-EPIDEM & BIOSTATIC	224,684.44	
11520	E152	EPID/DEPARTMENT CHAIR COMMITMENT	16,624.59	
11520	E156	EPID/BIOS SEED GRANT ACCOUNT #2	1,308.04	
11520	E157	EPID/BIOSZHANG/START-UP FUNDS	32,381.13	
11520	E158	EPID/BOS J ZHANG/START-UP FUNDS	33,364.45	
11520	E159	EPID/BIOS MERCHANT/START-UP FUNDS	27,389.44	
11520	E160	ROP - HONGMEI ZHANG	0.00	
11520	E161	RESEARCH INCENTIVE - FORTHOFFER	13,986.17	
11520	E162	EPID/BIOS - KELLEE WHITE STARTUP	871.03	

DEPT	FUND	Account Name	Balance	Department Total
11520	E203	EPID/RESEARCH INCENTIVE	816.00	
11520	E204	EPID/RESEARCH INCENTIVE	4,153.43	
11520	E209	EPID/RESEARCH INCENTIVE	140.54	
11520	E211	EPID/BIOS/RESEARCH INCENTIVE	2,787.64	
11520	E212	EPID/BIOS/RESEARCH INCENTIVE	1,077.73	
11520	E213	EPID/BIOS/RESEARCH INCENTIVE	22,102.81	
11520	E214	EPID/BIOS/RESEARCH INCENTIVE	500.00	
11520	E215	EPID/BIOS/RESEARCH INCENTIVE	1,772.37	
11520	E216	EPID BIOS RESEARCH INCENTIVE	2,420.00	
11520	E217	EPID/BIOS INCENTIVE ACCOUNT	175.27	
11520	E218	EPID/BIOS/RESEARCH INCENTIVE	4,298.39	
11520	E220	EPID/BIOS.RESEARH INCENTIVE	1,712.08	
11520	E221	EPID/BIOS/RESEARCH INCENTIVE	10,121.79	
11520	E222	RESEARCH INCENTIVE- STENDSEN	2,744.57	
11520	E226	JIAJIA ZHANG/RESEARCH INCENTIVE	1,322.72	
11520	E227	ANWAR MERCHANT/RESEARCH INCENTIVE	1,353.23	
11520	E403	CHSPR/PLACEMAT STRENGTH TRAINING PR	4,174.24	
Exercise Science				336,788.74
11530	E107	GOODBODIES PROGRAM	2,950.18	
11530	E109	EXERCISE BIOCHEMISTRY LABORATORY	3,113.62	
11530	E150	EXERCISE SCIENCE-RESEARCH INCENTIVE	264,716.40	
11530	E151	EXSC/STARTUP FUNDS BLAIR	9,563.63	
11530	E152	RESEARCH INCENTIVE - MURPHY	0.01	
11530	E153	RESEARCH INCENTIVE- KOSTEK	500.00	
11530	E156	EXSC SEED GRANT ACCOUNT#2	4,974.02	
11530	E158	MICHAEL BEETS ROP ACCOUNT	0.00	
11530	E159	START-UP ACCOUNT - NEWMAN-NORLUND	2,720.00	
11530	E161	SEED GRANT - FAYAD	0.00	
11530	E162	SEED GRANT - KOSTEK	0.00	
11530	E163	RESEARCH INCENTIVE - STARTUP	0.00	
11530	E164	PIRA - EXERCISE SCIENCE	0.00	
11530	E201	EXSC/RESEARCH INCENTIVE	15,903.76	
11530	E202	EXSC/RESEARCH INCENTIVE	10,315.15	
11530	E203	EXSC/RESEARCH INCENTIVE	1,799.12	
11530	E204	EXSC/RESEARCH INCENTIVE	2,090.59	
11530	E207	EXERCISE SCIENCE/RESEARCH INCENTIVE	2,469.21	
11530	E208	EXERCISE SCIENCE/RESEARCH INCENTIVE	5,071.32	
11530	E209	EXCS RESEARCH INCENTIVE	334.02	
11530	E210	BEATTIE/RESEARCH ACCOUNT	250.00	
11530	E211	EXERCISE SCIENCE - RESEARCH INCENTIVE	250.00	
11530	E212	EXERCISE SCIENCE - RESEARCH INCENTIVE	2,895.70	
11530	E213	EXERCISE SCIENCE/RESEARCH INCENTIVE	534.22	
11530	E214	RAJA FAYAD/RESEARCH INCENTIVE	8.85	
11530	E400	WORKSHOPS AND CONTINUING EDUCATION	-69.26	
11530	E402	FUNCTIONAL ABILITIES COUNSEL & TESTIN	-2,193.54	
11530	E403	NEUROBIOLOGY AND BEHAVIOR RESEARCH	1,343.40	
11530	E404	INTEGRATIVE MUSCLE BIOLOGY LABORATO	2,178.28	
11530	E406	EXSC/GIRLS ON THE RUN	1,070.06	
11530	E900	CPARG	4,000.00	
Health Promotion, Education, and Behavior				375,402.20
11540	E150	RESEARCH INCENTIVE	298,250.15	
11540	E152	STARTUP FUNDS DEPT CHAIR	-2,153.39	

DEPT	FUND	Account Name	Balance	Department Total
11540	E156	HPEB SEED GRANT ACCOUNT #2	0.18	
11540	E157	HPEB/RESEARCH OPPORTUNITY PROGRAM	0.01	
11540	E201	HPEB/RESEARCH INCENTIVE	6,208.74	
11540	E206	HPEB/ RESEARCH INCENTIVE	6,294.86	
11540	E208	HPEB/RESEARCH INCENTIVE	34.10	
11540	E210	HPEB/RESEARCH INCENTIVE	0.00	
11540	E212	HPEB/FRIEDMAN RESEARCH INCENTVIE ACI	1,062.10	
11540	E213	RESEARCH - IMPLICIATIONS FOR FDA DEV	33,980.02	
11540	E214	RESEARCH - CERVICAL CANCER SCREENINI	31,696.76	
11540	E215	EDWARD FRONGILLO/RESEACH INCENTIVE	28.67	
Health Services Policy and Management				138,235.10
11550	E150	HSPM RESEARCH INCENTIVE	77,360.45	
11550	E201	PHUONG DO RESEARCH INCENTIVE	852.78	
11550	E202	HADM/RESEARCH INCENTIVE	67.61	
11550	E203	HSPM/RESEARCH INCENTIVE	10,855.80	
11550	E204	AMY MARTIN/RESEARCH INCENTIVE	461.20	
11550	E205	SUDHA XIRASAGAR/RESEARCH INCENTIVE	608.50	
11550	E904	MHA WEEKEND PROGRAM - FALL SEMESTEI	-36.00	
11550	E905	KOREAN PROGRAM	48,064.76	
Communication Sciences and Disorders				513,267.38
11560	E100	COMM SCI AND DISORDERS SPECIAL	350,044.04	
11560	E102	EXTERNALLY FUNDED STIPENDS	1,415.52	
11560	E104	DEPARTMENTAL CONFERENCE EXPENSES	13,121.92	
11560	E124	COMD RESEARCH OPPORTUNITY AWARD	0.00	
11560	E150	RESEARCH INCENTIVE	142,372.73	
11560	E202	COMD/RESEARCH INCENTIVE	5,995.84	
11560	E203	COMMUNICATION SCIENCE & DISORDERS	250.00	
11560	E208	HIRAM MCDADE/RESEARCH INCENTIVE	67.33	
Prevention Research Center				77,858.98
11570	E150	PREVENTION CENTER RESEARCH INCENTIV	65,015.98	
11570	E201	PRC/RESEARCH INCENTIVE	8,369.00	
11570	E203	PREVENTION RES. CTR/RESEARCH INCENTI	4,474.00	
Center for Health Services and Policy Research				104,781.65
11580	E150	RESEARCH INCENTIVE - CHSPR	104,258.69	
11580	E206	M ELIZABETH FORE/RESEACH INCENTIVE	522.96	
Nutrition Center				53,684.28
11590	E150	CTR FOR RESIN NUTRI/HLTH DISPAR	50,966.81	
11590	E151	RESEARCH PROJECT INITIAVE ACCOUNT	0.38	
11590	E155	NUTRITION SEED GRANT ACCOUNT #1	298.55	
11590	E203	NUTRITION RESEARCH INCENTIVE	0.00	
11590	E204	NUTRITION RESEARCH INCENTIVE	1,083.61	
11590	E900	NUTRITION CENTER QUESTIONNAIRE ANAL`	1,334.93	
TOTAL ALL "E" JUNE 30 2011			3,184,952.22	3,184,952.22