STRATEGIC DIRECTIONS 2013 – 2018

STRATEGIC PLAN DOCUMENT

Approved September 16, 2013 by Full Faculty

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I. EXECUTIVE SUMMARY

In May 2011, the UIC SPH Executive Committee charged the Strategic Directions Committee (SDC) with developing and coordinating a continuous strategic planning process that represents, to the degree possible, a collective vision of the SPH community (UIC SPH students, faculty, staff, alumni, and community and public health partners) and aligns with reaccreditation requirements established by the Council on Education for Public Health.

Feedback collected from the SPH community throughout the strategic planning process identified <u>four core strategic issues</u> that required address through the strategic plan in order to achieve the SPH vision and mission:

INTEGRATION/COLLABORATION   IDENTITY   INFRASTRUCTURE/ORGANIZATION   INCLUSION/DIVERSITY

Strategic Think Groups (STGs) were convened to develop community goals and measurable objectives consistent with the vision and mission in the strategic directions of teaching and learning, research and translation, service practice and partnerships, and organizational design. Diversity goals and objectives were developed by the UIC SPH Diversity Committee as part of the campus-wide Diversity Strategic Thinking and Planning initiative.

The charge of the Organizational Design STG was revised to identify organizational and infrastructural needs critical to the achievement of the goals and objectives of the broader strategic plan, recommend strategies as appropriate, and to help establish criteria for implementation.

The goals and objectives define a plan of action that supports the vision and mission in response to the strategic issues of identity, integration/collaboration, infrastructure/organization, and inclusion/diversity. Proposed strategies, which reflect feedback collected from the SPH community throughout the strategic planning process via surveys, the online discussion board, full faculty meetings, staff and student town hall meetings, and in the Strategic Think Group and Diversity Committee discussions, are outlined in the full strategic plan document.

The SDC presented the final strategic plan to SPH full faculty for vote on September 16, 2013. The proposed goals and objectives were approved unanimously. An Implementation Team has been assembled to propose a strategic action plan to the Executive Committee complete with task assignments, timelines, and criteria for prioritization within the context of the environmental scan, existing opportunities, current needs, available resources, baseline data requirements, constraints, and activity dependencies.

II.   BACKGROUND

In October 2010, the UIC School of Public Health Executive Committee convened an Ad Hoc Strategic Leadership Group to recommend possible start and end points for strategic planning as well as define an execution process.

Reports from this group between November 2010 and April 2011 presented issues for consideration, identified stakeholders, assessed the current environment, and proposed a process for strategic planning. Based on these reports, the Executive Committee determined that the initial steps in the process should include: 1) the development of a shared vision; 2) the formation of the Strategic Directions Committee (SDC); 3) and the establishment of a continuous, participatory planning process to be reviewed and approved by Executive Committee.

The SDC committee membership included one faculty representative nominated from each division and one student member, and was endorsed by vote of the Executive Committee in May 2011.

Strategic Directions Committee Charge

➢Identify stakeholders and participants who should be included in the strategic planning process
➢Ensure that the process aligns with reaccreditation
➢Propose a timeline for task completion
➢Manage the process and monitor progress
➢Design the process in a manner that will ensure input from all stakeholders

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The purpose of the strategic planning process is to develop goals and measurable objectives that will:

1. implement and evaluate a continuous plan of action that would set directions toward growth and excellence within the context of the current and projected climate.
2. align with the Council on Education for Public Health's requirements for reaccreditation.

The strategic planning process, or continuous planning process, was shaped by:

> *UIC SPH Vision*

"A leader among academic institutions improving public health through engaged partnerships in teaching & learning, research, service and practice"

> *UIC SPH Mission*

"The UIC School of Public Health is dedicated to excellence in protecting and improving the health and well-being of the people of the metropolitan Chicago area, the State of Illinois, and the nation, and of others throughout the world."

> *UIC SPH Values*

Ours is a community of scholars, students and staff dedicated to creating a healthy society. In achieving this goal, we are committed to:

COMMUNITY:	The basic unit of analysis for public health, enabling communities to address their own problems, sharing skills, lowering barriers to action, and acting as a catalyst for progress.
KNOWLEDGE:	The pursuit, development and dissemination of information and skills that will improve the health of the public.
PROFESSIONALISM:	The spirit of integrity and collegiality in learning, teaching, research and public service.
STEWARDSHIP:	The investment of natural, human and financial resources.
IDEALISM:	The pursuit of transcendent principles, whether secularly or spiritually motivated.
CARING:	The promotion of compassion for and action on behalf of others.
JUSTICE:	The advocacy of conditions whereby everyone is given access to the resources necessary to live a humane life and fulfill his or her full potential.
DIVERSITY:	The celebration of unique contributions to the fabric of our community.
RESPECT:	The esteem held for the members of this community and for those whom our efforts are intended to serve.
HUMILITY:	The exercise of a grounded sense of deference as we set our goals, work together to achieve them, and address the inevitable conflicts produced by those joint efforts.

III.   CONTINUOUS PLANNING PROCESS

The strategic planning process was designed to be continuous and inclusive of all stakeholders (faculty, staff, students, alumni, and external partners), and progressed under the guidance of the SPH Executive Committee.

Drafting the Vision and Mission
The strategic planning process was developed utilizing the "vision to action" strategic planning method. Dean Paul Brandt-Rauf drafted his vision and shared it with the Executive Committee for further definition. The Strategic Directions Committee extrapolated the draft vision statement from the input received.

The draft vision statement was shared in a survey administered to the SPH community to determine the level of agreement on whether it sufficiently captured the future direction of SPH. After a 4-week response period, 107 responses (28% faculty, 16% staff, 53% students, 13% alumni) yielded a 72% approval rating of the draft vision statement.

On March 30, 2012, the Executive Committee agreed that the strategic planning process would move forward with its current mission as drafted in the 2004-2005 strategic plan.

Developing Strategic Directions
On March 30, 2012 the Executive Committee and Strategic Directions Committee engaged a joint meeting to begin identifying strategic issues. As an exercise, each attendee was asked to complete one post-it for each challenge they believed was facing SPH. The challenges were compiled on larger poster-sized papers and categorized into common themes.

This exercise was repeated with SPH Students (town hall meetings 4/26/12 and 9/12/12), Faculty (full faculty meeting 9/19/12), Staff (town hall meeting 9/25/12), and Alumni (Alumni Board meeting 10/1/12) to help the SDC further identify the common issues facing SPH. A virtual corkboard was also established online to collect additional feedback.

The Strategic Directions Committee analyzed the SPH community feedback and ultimately categorized them under four **strategic directions**:

Drafting Goals and Measurable Objectives

The SDC recommended the creation of four Strategic Think Groups (STGs) to develop 1-2 goals for each of the strategic directions and supporting measurable objectives consistent with the vision and mission. Each STG had approximately ten members with representation from all divisions and across faculty, staff, and student groups, and included at least one SDC member to serve as a facilitator. Members of the Executive Committee were asked to serve on one of the four STGs, and to identify other faculty, staff and students who may be interested in participating in the process.

Once convened, the Service, Practice, and Partnership STG, Research STG, Teaching and Learning STG, and Organizational Design STG each met twice over the Fall 2012 semester to complete the following aims as they relate to the assigned strategic direction:

STRATEGIC THINK GROUP AIMS FOR FALL 2012

Aim 1	Identify the critical elements of the School's current internal and external environments that might contribute to and/or impede its ability to achieve the SPH vision and mission
Aim 2	Identify 3-5 essential inquiries or questions to be posed to the SPH community that will facilitate discussion on what essential elements are necessary to attain the SPH vision and mission
Aim 3	Develop 1-2 goals that will address the strategic issues in the face of our strengths (what we do well), weaknesses (what we need to improve), opportunities (existing emerging scenarios whereby SPH to grow and progress), and challenges (realities of the internal/external environments that may create barriers to growth and progress).

Based on the critical elements identified by each STG, and a review of the feedback collected from the SPH community, a set of essential inquiries was developed and distributed to stakeholders for open comment via a secured online discussion board for a period beginning November 1, 2013 and ending November 30, 2012. The essential inquiries are listed below.

ESSENTIAL INQUIRIES TO SPH STAKEHOLDERS	
Service, Practice & Partnerships 1. How do we define service and practice in a way that distinguishes us from other schools of public health? 2. How should SPH value service and practice with regard to teaching/learning and research? 3. How do we prioritize and strengthen partnerships that advance the school's vision and mission? 4. How do we create a community that encompasses and engages internal and external stakeholders in the achievement of our vision and mission?	**Research & Translation** 1. What is needed to enhance collaborations across divisions, colleges, institutions and communities to stimulate innovative research initiatives? 2. What activities are needed to attract, retain and develop faculty who do high impact research? 3. How can we improve our resources, facilities and services to successfully conduct cutting edge research? 4. How do we promote our research identity at the national and global level?
Teaching & Learning 1. How do we coordinate across various continua to promote vertical and horizontal collaboration? Examples of continua include programs, degrees, certificates, divisions, colleges, and institutions. 2. How do we define the fundamental skills, tools and knowledge necessary to fulfill our vision/mission across the educational continuum for faculty? Students? 3. How do we acquire and manage resources needed to address teaching and learning to become a premiere teaching and learning institution? 4. What distinctive characteristics can we leverage to achieve our teaching and learning mission?	**Organizational Design** 1. How should resources be managed across the school to fulfill the vision and mission? 2. Currently SPH's divisions are organized around disciplines. Are there other ways we can organize to better achieve our vision/mission? 3. What organizational design would best promote integration between and among research, teaching/learning, service and practice? 4. How do we build a meaningful work and learning environment that improves cohesiveness within the SPH community?

The feedback on the essential inquiries as well as previous comments collected from the SPH community throughout the strategic planning process were effectively summarized into **four core strategic issues** of identity, integration/collaboration, infrastructure/organization, and inclusion/diversity. These issues were identified as critical to achieving the vision and mission, and therefore required address through our strategic plan.

The Service, Practice, and Partnerships, Research, and Teaching and Learning STGs each drafted two goals relative to their assigned strategic direction that would lead to the achievement of the vision and mission within the context of the strategic issues. The SDC distributed a "Draft Goals and Recommendations" report to the Executive Committee on January 7, 2013. The goals were approved for distribution to the SPH community for comment. Comments were solicited via e-mail for response to SDC facilitators or the discussion board site for a period beginning January 9, 2013 and ending January 25, 2013.

Each STG met twice over the Spring 2013 semester to complete the following aims as they relate to the assigned strategic direction:

STRATEGIC THINK GROUP AIMS FOR SPRING 2013

Aim 1	Draft measurable objectives that will indicate progress toward the attainment of the strategic goal

Aim 2	Validate the objectives against S.M.A.R.T. criteria (Specific, Measurable, Achievable, Relevant, Time-phased)
Aim 3	Review and revise goals and objectives to ensure they address the strategic issues of: Identity, Integration/Collaboration, Infrastructure/Organization, and Inclusion/Diversity.

The draft goals and objectives were distributed via e-mail to the SPH community for comment for a period beginning February 18, 2013 and ending March 8, 2013. A collective meeting of all STG members was held to provide an opportunity for the STGs to engage in a cross-cutting dialogue, identify gaps, and provide feedback to the SDC to inform its task of revising and incorporating the draft goals and objectives into a cohesive and integrated strategic plan.

The Strategic Directions Committee revised submitted the revised goals and objectives to the SPH full faculty on April 15, 2013.   The document was moved forward by a vote of confidence as a draft with directive to the SDC to further address the issues of global health, diversity, and infrastructure, and to develop a framework for doing so in the final strategic plan. The final document was approved by full faculty on September 19, 2013.

IV.   STRATEGY

The School of Public Health's (SPH) vision to become *"a leader among academic institutions improving public health through engaged partnerships in teaching and learning, research, service and practice"* serves as the driving force behind its strategic planning process. Our goals and objectives will be evaluated on whether they address one or more of the following strategic issues:

INTEGRATION/COLLABORATION

Collaboration refers to the establishment of relationships between stakeholders internal and external to SPH in addressing public health challenges through research, teaching, service and practice. It is achieved organically and is responsive to institutional barriers, incentives, and emerging opportunities.

Integration refers to the incorporation of teaching, research, service and practice across disciplines to represent a holistic approach to public health. It is achieved through deliberate and proactive measures, and indicated by the emergence of a distinct product.

Our goals and objectives must promote programmatic efforts whereby SPH encourages, invests in, and develops holistic, synergistic approaches to improving public health, and institutes integrated methodologies for addressing complex public health problems.

IDENTITY

The UIC SPH identity refers to how we think about ourselves internally and how that image is projected, perceived, and recognized by external partners, students, and other stakeholders. It is reflective and responsive to our vision and mission, shared and embraced throughout the organization, and distinguishes us from other academic institutions and within the public health practice community.

Our goals and objectives must establish a shared identity for UIC SPH that reflects leadership in public health practice engagement, interdisciplinary collaboration, and the development of integrated, unified approaches to research, teaching, practice, and service

INFRASTRUCTURE/ORGANIZATION:

The infrastructure/organization aim of UIC SPH refers to how its resources are planned and invested to improve probabilities of success in achieving the vision and mission. Our infrastructure is defined by the fundamental elements needed to support our activities, which include facilities, technology and operational systems. Our organization, although related, goes deeper to include unit and reporting structure, division of responsibility, staffing and development, decision-making processes and support, policies and procedures, governance, and culture.

Our goals and objectives must improve physical, technological, and organizational frameworks to support excellence in teaching and learning, research, practice and service while maintaining the ability to respond to emerging needs.

INCLUSION/DIVERSITY:

"Diversity refers to the meaningful inclusion and integration of groups and individuals (for example, cultures, race, ethnicity, gender, sexual orientation, age, geographic location, income levels and abilities) as part of an active process to enhance the work and educational environment of the School of Public Health and as a step towards equity and social justice."
~Definition under consideration by the Diversity Committee

Our goals and objectives must result in a systematic and focused approach to promoting, achieving, and sustaining diversity among SPH faculty, staff, and students.

Eight goals were developed out of the strategic planning process to address the strategic issues, specifically in the strategic directions of service, practice, and partnerships, research and translation, teaching and learning, and diversity. The diversity goals were developed through the UIC Diversity Strategic Thinking and Planning process, which is described further in this document.

TEACHING AND LEARNING	
1	**Provide a continuum of knowledge and skills fostering leadership, innovation, and vision in local to global public health practice.** **Objective 1.1:** By 2016, refine the necessary skills for our graduates, and assess the extent to which they are able to compete successfully and progress professionally, revising programs and curricula accordingly. **Objective 1.2:** by 2015, establish a continuing quality management system to evaluate, support, and incentivize excellence in teaching **Objective 1.3 :** By 2015 develop three sustainable, coordinated approaches that integrate research, service, and practice in teaching
2	**Adapt and contribute to a changing environment through critical evaluation and a systematic approach to scholarship and professional skill development.** **Objective 2.1:** By 2018, develop and maintain an array of educational programs that are financially and programmatically sustainable within the school-wide structure.

	Objective 2.2: By 2016, develop academic programs that are customizable, flexible, and responsive to the diverse needs of learners. **Objective 2.3:** Improve infrastructure to support teaching excellence based on needs assessment to be completed by 2016.

RESEARCH AND TRANSLATION

3	**Refine, promote, and strengthen research in areas of excellence, new public health challenges, and translational science.** **Objective 3.1:** By 2014, implement a process for identifying emerging public health challenges **Objective 3.2:** By 2015, identify areas of research excellence **Objective 3.3:** By 2015, establish a strategic hiring process for increasing the number of FTE that support research, along with teaching, service and practice agendas with specific consideration toward improving faculty diversity. **Objective 3.**4: Improve infrastructure to support research excellence based on needs assessment to be completed by 2016.
4	**Initiate and enhance interdisciplinary and collaborative research that leads to sustained impact.** **Objective 4.1 :** By 2015, establish a policy to enhance translation of UIC SPH research and improve dissemination of knowledge between UIC SPH and its partners internal and external to the University, including other colleges, health agencies, international and community-based organizations, and policy makers through the coordination of SPH research and practice units. **Objective 4.2:** Increase investment and opportunities to support and expand community engaged research based on a needs assessment to be completed by 2016.

SERVICE, PRACTICE, AND PARTNERSHIPS

5	**Grow the UIC SPH service, practice and partnership efforts to contribute to academic and practice excellence and community engagement.** **Objective 5.1:** By 2016, increase the aggregate mean proportion of effort that SPH faculty devote to teaching, scholarly practice, service, and research in diverse local and global communities and organizational settings. **Objective 5.2:** By 2016, increase the mean number of hours that SPH students devote to learning, service, and research in local and global communities and organizational settings. **Objective 5.3:** By 2016, increase the number of faculty promotions that include scholarly public health practice as a major focus. **Objective 5.4:** By 2015, increase school-wide investment in faculty development and internal/external awareness regarding service, practice and partnerships.
6	**Become an integral, seamless partner recognized within the public health practice system and community.** **Objective 6.1:** By 2015, establish a school-wide unit to coordinate service, practice, and partnership activities with responsibilities to include: 1. identifying opportunities to integrate service and practice into teaching and research activities through engaged partnerships 2. assessing the needs of external stakeholders to enhance opportunities for partnership 3. unifying and coordinating all non-credit continuing education activities 4. defining coordinated methods for identifying and formalizing partnerships 5. serving as a conduit for public health translation 6. developing and managing a mechanism for SPH faculty and staff to provide technical assistance and consulting services to external entities on a fee for service basis.

DIVERSITY	
7	**Create accountability within school-wide leadership (defined as leaders at all levels) to assure a common vision of diversity as a fundamental institutional value that is supported and encouraged.** **Objective 7.1:** By 2014, a representative committee will be established to develop and monitor progress in achieving diversity plan objectives and implementation strategies. **Objective 7.2:** By 2015, the diversity committee will assure that appropriate SPH committees develop and maintain a database on issues relevant to recruitment and retention of faculty, staff, and students. **Objective 7.3:** By 2015, the diversity committee will assure that contact information and relevant resources on recruitment and retention of faculty, staff, and students are developed and maintained in a database. **Objective 7.4:** By 2016, the SPH will identify a baseline and expand its strategic reach across diverse Chicago communities, Illinois communities, and other communities in teaching, research, practice, and service by engaging additional partners and increasing the range of engagements with existing partners.

8	**Have an intentional and transparent climate of diversity and equity, stating in clear terms its diversity and equity priorities.**
	
	Objective 8.1: By 2014, a climate survey on diversity and equity will be developed to assess and evaluate for improvements. The survey will be deployed on a periodic basis (to be determined) and the committee will recommend actions to improve the SPH climate based upon survey findings..
	Objective 8.2: By 2015, baseline data will be collected for these diversity priorities:
	    1. Faculty diversity (by definitional category, division, program, and faculty rank)
	    2. Staff diversity (by definitional category, division, program, and rank)
	    3. Student diversity ((by definitional category, division, and degree program)
	
	Objective 8.3: By 2016, the SPH curriculum and other learning avenues will be explored to identify opportunities to expand the knowledge, skills and sensitivity of the SPH community to include diversity and cultural competence.
	Objective 8.4: By 2017, the SPH will demonstrate diversity at all levels of leadership within the faculty and staff. Assessment of this objective will be incorporated into the accountability responsibilities of the Diversity Committee.

The following objectives and proposed implementation strategies define a plan of action that supports the strategic goals in response to the strategic issues of identity, integration/collaboration, infrastructure/organization, and inclusion/diversity. The proposed strategies reflect feedback collected from the SPH community throughout the strategic planning process via surveys, the online discussion board, full faculty meetings, staff and student town hall meetings, and in the Strategic Think Group and Diversity Committee discussions. They have been endorsed by the Strategic Directions Committee as potential means of accomplishing the goals and related objectives.

Teaching and Learning

Objective 1.1: By 2016, refine the necessary skills for our graduates, and assess the extent to which they are able to compete successfully and progress professionally, revising programs and curricula accordingly.

Proposed Implementation Strategies:
  a. Establish an advisory board of employers who would provide insight into the public health workforce needs and necessary skill sets.
  b. Conduct an annual survey of employers and graduates to assess desired and required skill sets
  c. Review the job postings for local, regional, national, and international public health agencies to examine trends in workforce needs.
  d. Include an assessment of skills graduates wish to have on exit surveys.
  e. Examine the findings that emerged through the Academic Strategic Thinking and Planning Committee's development of the integrated core.

Objective 1.2: By 2015, establish a continuing quality management system to evaluate, support, and incentivize excellence in teaching.

Proposed Implementation Strategies:
  a. By 2014 to conduct an audit of the existing system of support for teaching and learning that might include:
       1. A survey of students to assess student learning needs and learning environment familiarity
       2. An assessment of teaching/lab facilities and classroom technology to identify opportunities for modification
       3. Classroom observations
       4. Teaching skills assessments
       5. A review of best practices for teaching to inform classroom design
       6. A review how classroom instruction is informed by research, service and practice.
  b. By 2015, establish an incentive system for faculty who have high quality teaching
  c. By 2016, provide a systematic program for training 80% of faculty in new ways of delivering course content and developing teaching pedagogy.

Objective 1.3: By 2015 develop three sustainable, coordinated approaches that integrate research, service, and practice in teaching.

Proposed Implementation Strategies:

     a.   By 2015, ensure that the curriculum review and approval process audits for the incorporation of evidence based content in the core curriculum.
     b.   By 2014, provide training opportunities for faculty to learn best practices for incorporating research, service, and practice into teaching.
     c.   Explore existing models for exposing students to current research, service, and practice and implement best practices. Examples include the MCH program, COIP, the ERC, division-specific seminars, the Epi-Bio journal club, and a model employed by the College of Nursing's GEP program in which there is a minimum requirement for "leadership hours" gained by participating in learning opportunities outside of the classroom.
     d.   By 2014, create a culture of intellectual sharing by institutionalizing student-faculty discussions on current research endeavors.
     e.   Use the new integrated core curriculum as a channel for implementing approaches.

Objective 2.1: By 2018, develop and maintain an array of educational programs that are financially and programmatically sustainable within the school-wide structure.

     Proposed Implementation Strategy:
     By 2014 establish an ongoing program viability assessment including:
     1.   Cost benefit analysis
     2.   Number of graduates
     3.   Years to completion
     4.   Post-grad placement
     5.   Program effectiveness
     6.   Relevance of content to public health mission
     7.   Integration of current research, service, and practice into teaching
     8.   Response to trends in higher education

Objective 2.2: By 2016, develop academic programs that are customizable, flexible, and responsive to the diverse needs of learners.

     Proposed Implementation Strategies:
     a.   Define, document, and share coordinated processes for addressing gaps identified through program evaluation
     b.   Identify emerging trends and best practices across health sciences for teaching and adapt for public health.
     c.   Conduct an analysis of all services within SPH and across campus to identify gaps in academic support.
     d.   By 2015, identify and develop resources to create and sustain academic support
     e.   By 2016, expand the curriculum review and approval process (a charge of the Committee on Education Programs) to audit for writing and critical thinking skills reinforcement, and integration of service, practice and research with the didactic.
     f.   Include guidance for teaching excellence in faculty mentoring programs

Objective 2.3: Improve infrastructure to support teaching excellence based on needs assessment to be completed by 2016.

Research and Translation

Objective 3.1: By 2014, implement a process for identifying emerging public health challenges.

> ### *Proposed Implementation Strategies:*
> a. Establish a practice advisory board of leaders from state, local, and internationally-focused health departments, city and county health departments, public health associations and community organizations to help identify public health challenges, discuss public health agendas, and develop opportunities for faculty/student collaboration, practice, funding and partnerships.
> b. Perform a comprehensive review of city, county, state, regional, national and global public health agency agendas and data to aid in determining areas where UIC SPH can be most responsive.
> c. Attend national and international meetings and conferences that discuss current and emerging public health challenges.
> d. Examine trends in funding.
> e. Conduct the assessment biennially, preferably to coincide with common grant deadlines.

Objective 3.2: By 2015, identify areas of research excellence

> ### *Proposed Implementation Strategy:*
> Charge the Research Advisory Board) with:
> a. defining the SPH research agenda
> b. instituting a participatory process across research, teaching , service and practice enterprises for identifying areas of research excellence. Consideration to be given to areas of excellence that utilize integrated methodologies.
> c. communicating research infrastructure needs to the Dean, and supporting the Dean in communicating those needs to the campus level/Provost as needed.

Objective 3.3: By 2015, establish a strategic hiring process for increasing the number of FTE that support research, along with teaching, service and practice agendas with specific consideration toward improving faculty diversity.

> ### *Proposed Implementation Strategies:*
> a. Hire jointly across divisions and across colleges
> b. Institute a cluster hire process
> c. Define criteria to guide faculty searches in selecting a hire that will best benefit the UIC SPH enterprise, and implement a policy for strategic use of funds to hire faculty that meet that criteria.
> d. Develop an institutional process for faculty candidate interviews that will ensure interaction with key groups/individuals, best market UIC SPH, encourage participation from *all* students and faculty, and provide candidates with formal and informal opportunities to identify potential collaborators within and outside of SPH.

Objective 3.4: Improve infrastructure to support research excellence based on needs assessment to be completed by 2016.

Objective 4.1: By 2015, establish a policy to enhance translation of UIC SPH research and improve dissemination of knowledge between UIC SPH and its partners internal and external to the University,

including other colleges, health agencies, international and community-based organizations, and policy makers through the coordination of SPH research and practice units.

>   *Proposed Implementation Strategies:*
>   a. Expand communication capacities in media relations, and explore the feasibility of hiring someone who specializes in public health in the media.
>   b. Strengthen the relationship between the Office of Advancement and the Offices of Community and Public Health Practice and Research Services to improve communication of knowledge to SPH partners and stakeholders.
>   c. Identify ways that faculty and staff can be more proactive in facilitating robust external communications of achievements and research findings.
>   d. Hold conferences/lectures for the general public to increase awareness of SPH research findings.
>   e. Explore the feasibility of a school-wide unit to serve as a conduit for public health translation (see Objective 6.1)

Objective 4.2: Increase investment and opportunities to support and expand community engaged research based on a needs assessment to be completed by 2016.

Service, Practice, and Partnerships

Objective 5.1: By 2016, increase the aggregate mean proportion of effort that SPH faculty devote to teaching, scholarly practice, service, and research in diverse local and global communities and organizational settings.

>   *Proposed Implementation Strategy:*
>   Determine the feasibility of expanding the Annual Productivity Review to capture hours faculty devote through courses and curricula and technical assistance/consulting.

Objective 5.2: By 2016, increase the mean number of hours that SPH students devote to learning, service, and research in local and global communities and organizational settings.

>   *Proposed Implementation Strategy:*
>   Develop a process for capturing the hours students devote through courses and curricula and field experiences (practica).

Objective 5.3: By 2016, increase the number of faculty promotions that include scholarly public health practice as a major focus.

>   *Proposed Implementation Strategies:*
>   a. Charge the Office of the Dean with identifying opportunities for improving comprehension and application of the SPH Guidelines for Promotion and Tenure among leadership and faculty.
>   b. Offer faculty development and mentoring workshops in scholarly public health practice at school-wide and division levels.
>   c. Revise the SPH bylaws to increase representation from faculty with focus in scholarly public health practice on the Appointment Promotion and Tenure Committee.

Objective 5.4: By 2015, increase school-wide investment in faculty development and internal/external awareness regarding service, practice and partnerships.

> *Proposed Implementation Strategies:*
> a. Execute communications of service and practice activities and opportunities for engagement to internal and external stakeholders.
> b. Offer workshops for achieving excellence in service or practice or achieving and sustaining partnerships
> c. Implement a data collection system for regular reporting of service, practice and partnership activities

Objective 6.1: By 2015, establish a school-wide unit that will coordinate service, practice, and partnership activities with responsibilities to include:

> 1. identifying opportunities to integrate service and practice into teaching and research activities through engaged partnerships
> 2. assessing the needs of external stakeholders to enhance opportunities for partnership
> 3. unifying and coordinating all non-credit continuing education activities
> 4. defining coordinated methods for identifying and formalizing partnerships
> 5. serving as a conduit for public health translation
> 6. developing and managing a mechanism for SPH faculty and staff to provide technical assistance and consulting services to external entities on a fee for service basis.

> *Proposed Implementation Strategy:*
> Explore existing models within the School to assess feasibility for elevation to the college level, or develop a new unit solely devoted to this purpose.

Diversity

SPH MISSION FOR DIVERSITY
At the SPH, diversity is the inclusive, welcoming, stimulating climate shared by all members of this community. Students, faculty, staff, and community partners convene from different geographic locations, religious backgrounds, political viewpoints, and social/cultural perspectives. The SPH celebrates these differences as a source of provocative, robust, and respectful discourse and debate and as a pathway to equity.

SPH VISION FOR DIVERSITY
At the UIC School of Public Health, we strive to build an inclusive community that promotes equity and justice.

~Under consideration by the UIC SPH Diversity Committee

UIC is engaged in Diversity Strategic Thinking and Planning (DSTP) at both the campus level and within colleges and administrative units in order to develop a framework for understanding the benefits of diversity, establishing strategies to achieve these benefits, and implementing approaches for evaluation.

The SPH Diversity Committee is charged with coordinating at the college level, the activities of the University-wide DSTP initiative. Specifically, it has been collectively evaluating SPH activities and achievements, considering opportunities and priorities, and establishing goals toward fully realizing the

benefits of diversity to UIC School of Public Health. A summary of SPH Diversity Committee activities completed to date has been outlined below.

Diversity Committee Timeline and Activities

Events and Activities	Dates
Diversity town hall	February 11, 2009
Initial report completed	April 17, 2009
Focus groups with faculty, staff, and students	March 2010-April 2010
Diversity survey development	December 2009-April 2012
Diversity survey administered to students	May 2013-August 2013
Diversity plan (based on focus group data) submitted for inclusion in the SPH strategic plan.	September 2013
Diversity survey administered to other stakeholders (faculty, staff, alumni, community partners)	September 2013 – December 2013
Diversity plan revised based on survey data	January 2014 – March 2014

The UIC SPH diversity goals and objectives are as follows:

Objective 7.1: By 2014, a representative committee will be established to develop and monitor progress in achieving diversity plan objectives and implementation strategies.

> ***Proposed Implementation Strategies:***
> a. The diversity committee will prepare and disseminate a written annual report with recommended actions for the achievement of diversity plan objectives and implementation strategies.
> b. The diversity committee will gather data to further refine the goals and objectives and monitor progress.
> c. The diversity committee will assure that trends in student recruitment, attrition, retention, matriculation, and graduation are periodically assessed for their impact on diversity goals and objectives.
> d. The diversity committee will assure that trends in recruitment, attrition, retention and promotion of faculty and staff are periodically assessed for their impact.
> e. A tagline (such as "We All Own Diversity") will be used on SPH recruitment and marketing materials.

Objective 7.2: By 2015, the diversity committee will assure that appropriate SPH committees develop and maintain a database on issues relevant to recruitment and retention of faculty, staff, and students.

Objective 7.3: By 2015, the diversity committee will assure that contact information and relevant resources on recruitment and retention of faculty, staff, and students are developed and maintained in a database.

Objective 7.4: By 2016, the SPH will identify a baseline and expand its strategic reach across diverse Chicago communities, Illinois communities, and other communities in teaching, research, practice, and service by engaging additional partners and increasing the range of engagements with existing partners.

Proposed Implementation Strategies:
a. The SPH will examine the strategic reach and community engagements to examine the data and contacts for potential gaps where our diversity could be improved.
b. The SPH will develop a research and practice agenda that is responsive to gaps in health status and the performance of health systems at the community level. The research and practice agenda will be designed to attract community partners interested in working on these identified gaps.

Objective 8.1: By 2014, a climate survey on diversity and equity will be developed to assess and evaluate for improvements. The survey will be deployed on a periodic basis (to be determined) and the committee will recommend actions to improve the SPH climate based upon survey findings.

Proposed Implementation Strategy:
Based on analysis of the climate survey data and inconsideration of the recommendations emerging from the analysis, SPH will develop appropriate strategies to improve the diversity and equity climate within the School.

Objective 8.2: By 2015, baseline data will be collected for these diversity priorities:
1. Faculty diversity (by definitional category, division, program, and faculty rank)
2. Staff diversity (by definitional category, division, program, and rank)
3. Student diversity ((by definitional category, division, and degree program)

Proposed Implementation Strategy:
Increased financial support for the recruitment of diverse students, faculty, and staff will be sought.

Objective 8.3: By 2016, the SPH curriculum and other learning avenues will be explored to identify opportunities to expand the knowledge, skills and sensitivity of the SPH community to include diversity and cultural competence.

Objective 8.4: By 2017, the SPH will demonstrate diversity at all levels of leadership within the faculty and staff. Assessment of this objective will be incorporated into the accountability responsibilities of the Diversity Committee.

V.   NEXT STEPS AND IMPLEMENTATION PROCESS

Organizational Design Strategic Think Group
The draft goals and objectives as presented address either strategic or operational issues facing the UIC SPH. The SDC recommended that goals and objectives addressing organizational and infrastructural needs be referred to the Organizational Design STG to develop strategies and establish criteria for implementation.

The Organizational Design STG met throughout the strategic planning process to develop goals and objectives that address infrastructural/organizational issues. It was agreed by the Organizational Design STG, Executive Committee, and the Strategic Directions Committee that the research and translation, teaching and learning, service, practice and partnership, and diversity priorities must be determined

before an optimal design can be proposed. The charge of the committee has since been revised to identify organizational and infrastructural needs critical to the achievement of the goals and objectives of the broader strategic plan, recommend strategies as appropriate, and to help establish criteria for implementation. The following needs were identified and will be addressed by the Organizational Design STG over the 2013-2014 academic year:

Needs Identified for Address by the Organizational Design STG
1. A shared understanding of the global problems/structural inadequacies
2. Answers to the question(s) - What do we want to: achieve? preserve? avoid? eliminate?
3. Definitions of terms such as: "healthy structure", "impact", "partners", "research", "service", "practice", "teaching", "learning", "excellence" as they relate to the SPH
4. Identification and examination of ideal structure models from analogous institutions
5. An inventory of research, teaching, service, practice, and partnership activities
6. Identification of barriers to community engagement and communication, and an examination of approaches to address those barriers.
7. An examination of and response to the infrastructural/organizational implications of the goals and objectives in service, practice, and partnerships, research, and teaching and learning.

Environmental Scan
An ongoing task of the SDC was to complete an environmental scan of SPH.   Once finalized, the environmental scan report will be presented to the SPH Executive Committee for review and discussion. The report will include:

1. an asset map of existing strengths and capacities
2. an analysis of Strengths, Weaknesses, Opportunities, and Challenges (SWOC)
3. an analysis of focus group interviews conducted with internal and external stakeholders to assess:
   - The forces impacting public health today
   - The perceived role of academic public health centers, like UIC SPH
   - What UIC SPH does well, and how it might better support its partners' missions.
4. an analysis of external forces ("less likely to influence")
   - UIC and the University of Illinois System
   - The Public Health Practice Community including CDC/NIH, Institute of Medicine, health departments, state agencies, and organizations such as NACCHO, the World Health Organization
   - Federal, state, and private funding sources including tuition and endowments
   - "Transactional" partners
   - Changes in national health care policy
   - Changes in higher education (literature review)
   - Competition
   - "Benchmark" schools of public health and public health programs
5. an analysis of internal forces ("more likely to influence")
   - Faculty
   - Staff
   - Students
   - Alumni
   - Internal partners (IHRP, Midwest Training, etc.)
   - Employers/Future Employers

- Community partners
- Standing Committees

Implementation Process

An Implementation Team was formed and will be responsible for proposing a strategic action plan to the SPH Executive Committee, crafting strategies for meeting objectives, developing outcome metrics for each objective, directing the implementation of new initiatives, and evaluating progress toward meeting the goals. The SPH Executive Committee has responsibility for assessing the extent to which goals and objectives are met. Activities and recommendations of the Implementation Team will be forwarded to faculty committees as appropriate. The standing sub-committees will be responsible for evaluating and making recommendations to the Executive Committee regarding goals and objectives related to their charge (e.g., changes to the curriculum developed through the implementation process will be reviewed by the Committee on Education Programs and that committee will make a recommendation to the Executive Committee). Team membership is provided below.

Implementation Team Membership	
• Lorraine Conroy, Senior Associate Dean	• Executive Committee Representative
• Babette Neuberger, Associate Dean, Academic Affairs	• Public Health Student Association (PHSA) Student Representative
• Geri Donenberg, Associate Dean, Research	• Division Director Representative
• Richard Sewell, Associate Dean, Community and Public Health Practice	• Division Business Manager Representative
• Jaclyn Finch, Associate Dean, Finance and Resource Planning	• Division Academic Coordinator Representative
• Director, Information Technology (TBN)	• Members of Strategic Directions Committee(2)
• Ebbin Dotson, Assistant Dean, Urban Health and Diversity Programs	• Members of Organizational Design Sub-committee (4)
• Antoniah Lewis-Reese, Executive Assistant to the Dean	• Committee on Education Programs (CEP) Chair
• Sylvia Furner, CEPH Accreditation Advisor	• Committee on Academic Progress (CAP) Chair
• Other Dean's Office staff as needed	• Committee on Admissions and Recruitment Policy (CARP) Chair

A key element of the implementation process will be coordinating the strategic action plan with other efforts currently underway including:

1. The integrated MPH core curriculum (Academic Strategic Planning Committee)
2. Revised guidelines for promotion and tenure (Appointment, Promotion and Tenure Committee)
3. The course and program quality review (Committee on Educational Programs)
4. Other work of SPH standing and ad hoc committees (e.g. Diversity Committee, Global Health Committee)
5. CEPH reaccreditation process

Criteria for prioritizing objectives and strategies will be proposed within the context of the environmental scan, existing opportunities, current needs, available resources, baseline data

requirements, constraints, and activity dependencies. A proposed timeline based on objective targets is provided below.

DRAFT OBJECTIVE TIMELINE

Objective	2013	2014	2015	2016	2017	2018
1.1				✓		
1.2			✓			
1.3			✓			
2.1						✓
2.2				✓		
2.3				✓		
3.1		✓				
3.2			✓			
3.3			✓			
3.4				✓		
4.1			✓			
4.2				✓		
5.1				✓		
5.2				✓		
5.3				✓		
5.4			✓			
6.1			✓			
7.1		✓				
7.2			✓			
7.3			✓			
7.4				✓		
8.1		✓				
8.2			✓			
8.3				✓		
8.4					✓	

VI.   ACKNOWLEDGEMENTS

Service Practice & Partnerships

Dr. Shaffdeen Amuwo, Executive Director, Urban Health & Diversity Programs, SPH Administration

Ms. Annette Clemens, Field Practicum Coordinator, SPH Administration

Dr. Michael Fagen, Clinical Assistant Professor, Community Health Sciences

Dr. Linda Forst, Professor & Division Director, Environmental & Occupational Health Sciences

Dr. Jennifer Hebert-Bierne, Clinical Assistant Professor, Community Health Sciences

Ms. Sophie Naji, Project Coordinator, Mid-America Public Health Training Center, Community Health Sciences

Mr. Richard Sewell (SDC Facilitator), Clinical Assistant Professor & Associate Dean for Community & Public Health Practice, Health Policy & Administration / SPH Administration

Ms. Kathleen Spiess, Assistant Dean for Advancement, SPH Administration

Dr. Bernard Turnock, Clinical Professor, Community Health Sciences

Ms. Anna Wojcik, Student Representative, MPH Program

Teaching & Learning

Dr. Robert Anderson, Associate Professor, Epidemiology & Biostatistics

Dr. Susan Altfeld, Clinical Assistant Professor, Community Health Sciences

Dr. Michael Cailas, Associate Professor, Environmental & Occupational Health Sciences

Dr. Vincent Freeman, Associate Professor, Epidemiology & Biostatistics

Dr. William Kling (SDC Facilitator), Clinical Assistant Professor, Health Policy & Administration

Dr. Karin Opacich, Clinical Assistant Professor & Director, Undergraduate Program SPH Administration

Dr. Jesus Ramirez-Valles, Professor & Division Director, Community Health Sciences

Ms. Karin Riggs, Distance Learning Specialist, SPH Administration

Mr. John Slavick, Assistant Dean, Office of Student Affairs SPH Administration

Ms. Aimee Weibel, Academic Coordinator, Health Policy & Administration

Dr. Jack Zwanziger, Professor & Division Director, Health Policy & Administration

Focus Group Moderators

Dr. Jennifer Hebert-Bierne, Assistant Professor, Community Health Sciences

Dr. Christina Welter, Clinical Assistant Professor, Community Health Sciences

Dr. Joseph Zanoni, Research Assistant Professor Environmental and Occupational Health Sciences

Focus Group Participating Organizations

Active Transportation Alliance
Age Options
American Heart Association of Metropolitan Chicago
Chicago Community Trust
Chicago Department of Public Health
Chicago Metropolitan Agency for Planning
Cook County Department of Public Health
DuPage County Health Department
Environmental Protection Agency, Region V
Health and Medicine Policy Research Group
Heartland Health Centers
Illinois Department of Public Health

Illinois Public Health Association
Illinois Public Health Institute
John H. Stroger Hospital of Cook County
Joint Commission: Accreditation, Health Care, Certification
Metropolitan Chicago Healthcare Council
Respiratory Health Association
UIC Cancer Center
UIC Great Cities Institute
UIC Institute for Policy and Civic Engagement
UIC Institute for Research on Race and Public Policy
UIC Urban Health Program
US Department of Health and Human Services, Region V

The SDC would also like to extend special thanks to SPH Administration, faculty, staff, students, alumni, and partners for their support and feedback throughout the strategic planning process.