

Graduate School of Public Health  
Educational Policies and Curriculum Committee  
Agenda for September 7, 2017

1:30-3:30pm  
4128 Parran Hall

A. New Business:

1. Welcome & Introduction to New Members, Patricia Documet
2. Revised Course | BCHS 2509, *Social and Behavioral Sciences and Public Health*, Martha Terry
3. New Course | HPM 2075, *Navigating the Physician-Administrator Relationship*, Wes Rohrer and William Goldfarb
4. Revised Course | HPM 2001, *Health Policy and Management in Public Health*, Jessica Burke for Everette James
5. New Course | PUBHLT XXXX, *Foundations in Public Health* (tentative course title), Jessica Burke
6. Approval of August Meeting Minutes, All

B. Closed Session:

1. Student Record Review – Summer 2017

Upcoming meetings: October 5, 1:30-3:30pm, room A521 Crabtree Hall  
*Deadline for modifications to existing courses for spring 2018*  
- MPH Core Course(s) on Agenda: PUBHLT 2016 (Capstone) as Applications [exact title pending],  
and Communications (new course) [exact title pending]  
- Other Courses: cross-listed course with Humanities presented by Cindy Bryce  
- Other Proposals: re-visit by Women's and Children's Health Certificate presented by Martha Terry

**Educational Policies and Curriculum Committee**  
**Graduate School of Public Health**  
**University of Pittsburgh**  
**(Revised: 9/22/2015)**

**REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES**

1. **General Instructions:**

- a. Faculty should submit this form and the associated syllabus following the Pitt Public Health Syllabus Guidelines and the Syllabus Checklist (on pages 4 and 5) **by e-mail** to Patricia Documet, Chair ([pdocumet@pitt.edu](mailto:pdocumet@pitt.edu)) and Robin Leaf, EPCC Staff Liaison ([ral9@pitt.edu](mailto:ral9@pitt.edu)). If you choose not to include all the information detailed on the Syllabus Guidelines in your course syllabus for distribution to students, please attach this information to the proposal.
- b. The initiating Department is asked to submit one hard copy of this completed form with the proper signatures, syllabus and other materials (if any) to Robin Leaf in Student Affairs **at least one week prior** to the EPCC meeting. If this target date is not met, the proposal will be deferred for consideration at the next meeting scheduled.
- c. You will be contacted by the EPCC Chair or the EPCC Staff Liaison to schedule a presentation and discussion of your program/course proposal with the Committee, if possible at the next scheduled EPCC meeting.

2. **Review based on the following (check all which apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> New course, not previously approved | <input checked="" type="checkbox"/> Course modification (major)    |
| <input type="checkbox"/> Course title change                 | <input type="checkbox"/> Special topics course content             |
| <input type="checkbox"/> Cross-listing only                  | <input checked="" type="checkbox"/> Pitt Public Health Core Course |
| (Specify academic unit & course number): _____               | <input type="checkbox"/> Practicum, internship, field placement    |

3. **Course designation:**

Course Number 2509 Title Social and Behavioral Health Sciences in Public Health Credits 3

4. **Cross-listing:**

If you want to cross-list this course in any other Pitt Public Health department or any other school of the University, specify which department(s) and School(s) and provide brief justification.

5. **Course Instructors:**

(Indicate type of Pitt Public Health faculty appointment,\* and percentage of total course time/effort anticipated. For any instructor who does not hold a Pitt Public Health faculty appointment, indicate her/his title and affiliation.)

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\* The principal instructor for any Pitt Public Health course must have a primary, secondary or adjunct appointment in the school.

- a. Principal instructor: Martha Terry, BCHS faculty (100%) [summer and spring terms]  
Thistle Elias, BCHS faculty (100%) [fall term]

b. Co-instructors (if any):

6. **Statement of the course for *Course Inventory*.** Include purpose of course; summary of prerequisites, if any; general course content; and method of conducting course (e.g., lecture, laboratory, field work, etc.).

The core course provides an overview of the social and behavioral sciences and their importance in the interdisciplinary field of public health. A primary emphasis is on the social-ecological model, its application to public health issues, and its use in the development of policies, strategies, interventions and programs. The course content will introduce students to several relevant social and behavioral theories as well as a range of community health assessment and planning models used by public health professionals in both domestic and international venues. Through a series of assigned readings, discussion exercises, group projects, quizzes and written assignments, students will enhance their knowledge and awareness of the role of social and behavioral sciences in public health and its relevance to their specific discipline. At the conclusion of the course students will be able to: identify the important social and behavioral determinants of health; describe the inter-relationships between the social, behavioral, bio-medical, physiological, and environmental factors related to individual and community health; identify the major health disparities related to social, behavioral and economic factors; describe the role of culture and socio-economic status in health behavior, access to services, and decision-making; and understand the importance of community partnerships and participatory approaches in the development, implementation, management and evaluation of community policies and programs.

7. **Student enrollment criteria/restrictions:**

- a. Indicate any maximum or minimum number of students and provide justification for this limitation.  
None.
- b. If admission is by permission of instructor, state criteria to be applied.  
N/A
- c. Provide a brief description of any prerequisite skills or knowledge areas that are necessary for students entering this course, including any specific course prerequisites or equivalents.  
None.

8. **Course schedule and allocation of hours:**

a. Number of course hours per session 3 Sessions per week 1 Weeks per academic term 15

b. Approximate allocation of class time (hours or %) among instructional activities:

Lectures 100% Seminars \_\_\_\_\_ Recitations \_\_\_\_\_ Field work \_\_\_\_\_ Laboratory \_\_\_\_\_

Other (specify): \_\_\_\_\_

c. Term(s) course will be offered: Fall X Spring X Summer Term X Summer Session \_\_\_\_\_

9. **Grading of student performance:**

Indicate the grading system to be used (A, B, C, etc.; H, S, U); provide statement justifying use of system other than letter grade.

Letter grade (A,B,C)

10. **On-line course delivery:**

Indicate the extent to which you will be using on-line instructional methods in teaching this course by checking all of the options below which apply:

I plan to use the course management aspects of CourseWeb/ Blackboard (or equivalent), e.g., grade book, announcements.

I plan to use the interactive features of CourseWeb/Blackboard (or equivalent), e.g., discussion board, etc.

I have designed the course for remote (off-site) learning with little/no classroom attendance required.

I do not plan to use on-line instruction methods for this course (briefly explain)

11. **Relevance of course to academic programs and curricula:**

- a. Describe how this course contributes to learning objectives specified for the curriculum of one or more Pitt Public Health degree or certificate programs. Indicate whether course is required for any specified degree or certificate.

To more fully inform research and intervention efforts, and policy making, public health professionals must look beyond biological risk factors to the complex influence of social, behavioral and environmental factors on the public's health and welfare. They must come to understand multiple social determinants of health, and the "theoretical underpinnings of the ecological model" (Institute of Medicine, "Who will keep the public healthy?" 2002). As such, in recent years there has been a growing recognition that the social and behavioral sciences play a critical role in public health practice, training and academics. Disciplines such as anthropology, psychology, sociology, and health education have emerged as contributing important theories, methods and skill sets to public health.

Students in this class will gain an understanding of the importance of using social and behavioral sciences theory and information to 1) examine public health problems; 2) develop and plan programs and policies to address public health problems; 3) implement, manage and evaluate programs and policies; 4) conduct community-based applied research; 5) communicate information to policymakers and the public; and 6) advocate for program development and policy change.

This course is a requirement for the MPH degree program at Pitt Public Health.

- b. Describe how this course addresses public health issues involving diversity (gender, race, ethnicity, culture, disability, or family status).

Diversity is integrated into each topic discussed in this course.

12. **Signature and date of principal faculty member (include department/program) making request:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

13. **Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

14. (For cross-listing only)

**Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Educational Policies and Curriculum Committee**  
**Graduate School of Public Health**  
**University of Pittsburgh**  
**(11/19/2013)**

**SYLLABUS CHECKLIST FOR NEW AND REVISED COURSES**

**Addendum to REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES FORM**

*Objective to assist faculty to ensure syllabus contains the required and necessary elements to provide students with clear expectations of the course.*

NOTE: \* indicates a required element of the syllabus. If N/A is checked or this element is not included complete the information detailed on page two for all instances.

Syllabus Area	Recommended Detail * Required	Included in Your Syllabus?					
<i>Heading</i>	Course Number*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Course Title*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Course Meeting Time/Day of Week*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Classroom Location*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>Faculty Information</i>	Office Location*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Office Hours*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Phone Number*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Email Address*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Teaching Philosophy	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Teaching Assistant Contact	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>Student Expectations in Classroom</i>	Behavior/ Ground Rules (cell phones off, laptops off, etc.)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Recording of Lectures	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<i>Course Summary</i>	Course Description*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Learning Objectives*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>Materials</i>	Required Textbooks/ Articles/Readings	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Required Software	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Required Equipment (including use of CourseWeb/Blackboard)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Recommended Material	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Availability of Software for	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>



**Graduate School of Public Health**  
Department of Behavioral and Community Health Sciences  
BCHS 2509: Social and Behavioral Sciences in Public Health  
Fall 2017, Wednesday 1 – 3:55pm, G23 Parran Hall

Instructor: Thistle Elias, DrPH, MPA  
207F Parran Hall  
[elias@pitt.edu](mailto:elias@pitt.edu)  
412.624.5531  
Office Hours: By appointment

Administrative Assistant:  
Summer Haston  
[srhaston@pitt.edu](mailto:srhaston@pitt.edu)  
412.624.3106

Teaching Assistant: Jessica Thompson  
[jrthompson@pitt.edu](mailto:jrthompson@pitt.edu)  
423.645.7530  
Office Hours: Monday 1-3 and by appt

### ***Introduction***

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This course provides an overview of the social and behavioral sciences and public health, with specific emphasis on the ecological model of community health problem analysis and development of effective interventions. The course content is organized around the competencies set out by the Association of Schools of Public Health for the social and behavioral sciences. It includes selected social and behavioral theories and models used by public health professionals to plan, implement, and evaluate program strategies and policies for the improvement of community health.

### ***Course Rationale***

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To more fully inform research and intervention efforts, and policy making, public health professionals must look beyond biological risk factors to the complex influence of social, behavioral and environmental factors on the public's health and welfare. They must come to understand multiple social determinants of health, and the "theoretical underpinnings of the ecological model" (Institute of Medicine, "Who will keep the public healthy?" 2002). As such, in recent years there has been a growing recognition that the social and behavioral sciences play a critical role in public health practice, training and academics. Disciplines such as anthropology, psychology, sociology, and health education have emerged as contributing important theories, methods and skill sets to public health.

Students in this class will gain an understanding of the importance of using social and behavioral sciences theory and information to 1) examine public health problems; 2) develop and plan programs and policies to address public health problems; 3) implement, manage and evaluate programs and policies; 4) conduct community-based applied research; 5) communicate information to policymakers and the public; and 6) advocate for program development and policy change.

### ***Course Objectives***

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By the end of this course, students will be able to:

- 1) Explain the social ecological framework and how factors at the various levels are connected to health;
- 2) Explain behavioral and psychological factors that affect a population's health;
- 3) Discuss how structural bias, social inequities and racism undermine health and create challenges to health equity at community, organizational and societal levels;
- 4) Explain social, political and economic determinants of health and their role in population health and health inequities;
- 5) Select appropriate qualitative data collection methods ;
- 6) Analyze qualitative data;
- 7) Interpret results of qualitative data analysis for public health research, policy and practice;
- 8) Assess population needs, assets and capacities that affect community health;
- 9) Apply awareness of cultural values and practices to the design and implementation of public health programs and policies;
- 10) Select methods to evaluate public health programs; and
- 11) Propose strategies to identify stakeholders and build coalitions and partnerships to impact public health outcomes.

### ***Teaching Philosophy***

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I believe that learning and teaching should be engaging and include exposure to challenging ideas. The diversity of experiences and backgrounds that we all have enriches the learning potential of every discussion. I see the class as a partnership between teacher and students in which we each bring experience and perspectives that can enrich our learning. I encourage each of you to create and sustain an environment in which all students can speak freely.

In addition, I believe that students are ultimately responsible for the depth of their own learning. Thus, actively preparing for and engaging in class discussions (including being brave enough to ask questions!) are critical to mastering the learning objectives.

While there is a formal course evaluation conducted at the end of the semester, constructive comments on the class are welcome throughout the semester.

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## Principles of Ethical Practice

GSPH affirms its commitment to the [Principles of the Ethical Practice of Public Health](#). We adhere to the highest ethical standards in the conduct of all components of our mission. We acknowledge that improving health for all requires that public health professionals secure and maintain the trust of our communities.

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## Course Policies

### Academic Integrity:

All students are expected to adhere to the school's standards of academic honesty. Any work submitted by students for evaluation must represent their own intellectual contribution and efforts. The GSPH policy on academic integrity, which is based on the University policy, is available online at <http://www.publichealth.pitt.edu/interior.php?pageID=126>. The policy includes obligations for faculty and students, procedures for adjudicating violations, and other critical information. Please take the time to read this policy

Students committing acts of academic dishonesty, including plagiarism, unauthorized collaboration on assignments, cheating on exams, misrepresentation of data, and facilitating dishonesty by others, will receive sanctions appropriate to the violation(s) committed. Sanctions include, but are not limited to, reduction of a grade for an assignment or a course, failure of a course, and dismissal from GSPH.

All student violations of academic integrity must be documented by the appropriate faculty member; this documentation will be kept in a confidential student file maintained by the GSPH Office of Student Affairs. If a sanction for a violation is agreed upon by the student and instructor, the record of this agreement will be expunged from the student file upon the student's graduation. If the case is referred to the GSPH Academic Integrity Hearing Board, a record will remain in the student's permanent file.

### Writing Center

Communicating clearly in written and spoken word is a critical professional skill. For those of you in need of additional practice and feedback on your writing, the University offers invaluable help through its Writing Center (412.624.6556).

**Disabilities:** If you have any disability for which you may require accommodation, you are encouraged to notify both your instructor and the Office of Disability Resources and Services, 216 William Pitt Union (412-648-7890) [Disability Resources and Services](#) no later than the second week of the term. You may be asked to

*provide documentation of your disability to determine the appropriateness of accommodations.*

### **Technology in and for class**

#### **Cell Phones:**

Please be courteous to the instructor and your fellow classmates and refrain from cell phone use during class, including texting.

#### **Laptops:**

Because this class relies heavily on class discussion and active participation, no laptops will be allowed in class.

#### **Emails:**

The subject line of the email should indicate what the email is about (e.g. 2509 Question about the Quiz). When initiating an email conversation with the instructor or TA, you should always begin with “Dear/Hello/Hi/Good Afternoon” and conclude by signing your full name. Informal language (e.g. hey can you tell me my grade, thx, btw,) is unprofessional and emails containing it may not be answered. People make judgments about you based on how you communicate and as such it is important to write emails in a professional manner. You can expect that the instructor and TA will make a good-faith effort to respond to your email within 48 hours.

#### **Recording:**

Students may audio-record class *with the permission of the instructor.*

### **Grading: Assignments to be updated**

#### **Grades will be assigned on the basis of 200 possible points:**

- participation – attendance, exercises (20 pts),
- 5 sets of comments on the reading (8 pts each = 40 pts total),
- 6 papers (10 pts each = 60 pts total)
- 2 in-class quizzes (15 pts each = 30 pts total),
- final exam (20 pts)
- team poster presentation (20pts) + peer rating (10pts) = 30 pts total).

90 – 100 A

80 – 89 B

70 – 79 C

60 – 69 D

Below 60 F

**\*Instructor reserves the right to assign + and – grades.**

**Participation** will be determined by your attendance, your contributions to class discussion and your use of office hours as needed.

**(Nearly) Weekly papers** are due by **noon** on the date indicated in the course overview matrix; late assignments will be assessed a 5% deduction for every late day. Assignments should be submitted through CourseWeb (if you have issues submitting work through this mechanism, please let Ms. Haston know).

- **Each student will choose a public health issue impacted by behavior, a culture/country and related behavior to use for assignments throughout the semester.**
  - For example, you might choose HIV/AIDS education (issue) in Ghana (country) and using condoms (behavior); or oral health (issue) in rural PA (country) and tooth-brushing (behavior); weekly assignments are to apply what is learned in the previous week's class, so for instance you will apply the social ecological framework to your issue, identify a theory to use in developing a program, identify community factors related to the issue, and so forth.
- You will be allowed **one week** to rewrite weekly assignments IF you get lower than 70%. **Rewrites should be submitted directly to Dr. Elias' email along with a copy of the original graded assignment - NOT submitted on CourseWeb.**

**Assignment Expectations:** Written assignments are limited to *the number of pages noted in the course outline (excluding references), 1.5-spaced 1-inch margins, 12 point font*; may be bulleted lists when appropriate. Please check for proper grammar, spelling, and punctuation and number agreement between nouns/verbs. All references should be cited correctly, and be consistent:

Citations for all references used should follow one of the following formats:

- 1) AJPH (references in the text are numbered, and the bibliography is listed numerically, NOT alphabetically); author(s). title. *journal or book*. year;volume#:pp.
- 2) APA – check out the rules at <http://owl.english.purdue.edu/owl/resource/560/05>

You will be assigned to a group for the **poster presentation**, which will cover a topic of the group's choosing but *not* addressed by anyone in the group in the weekly assignments. Guidelines are provided on CourseWeb. Foam boards and easels will be provided. Bring your own push pins. 10 points of the 30 points will come from peer ratings, completed by all group members and indicating the extent to which each member met her/his responsibilities and made contributions to the final product.

### **Attendance:**

Attendance in class is an absolute necessity for this course. Though power point presentations will be used, they are for talking points only. A great deal of the learning in this course will be through class discussion, which occurs spontaneously and cannot possibly be scripted. If you have to miss a class, please inform the

instructor or TA prior to the absence (if possible). You are responsible for getting notes from another student for any class you miss.

**CourseWeb:**

The course format will involve the use of CourseWeb/Blackboard and on-line sources for class assignments and enrichment materials. NO TEXT BOOK IS REQUIRED. CourseWeb/Blackboard is a web-based application. Use the web browser, Internet Explorer, to access your course information online.

- Go to the web address: <http://courseweb.pitt.edu>
- “Log in” with your user name, type your password and log in!

Week	Date	Topic/Competencies	Readings Due/ <i>Class Activities</i>	Assignment Due
1	Aug 30	<p>Introductions Framework and expectations</p> <p>What is this thing we call BCHS?</p>	Alcabes, K. (2007). What Ails Public Health? <i>Chronicle of Higher Education</i> , Nov. 9, 2007.	None
2	Sept. 6	<p>Explain social, political and economic determinants of health and how they contribute to population health and health inequities.</p> <p>Social ecological framework</p> <p>[Comp K10, ~ K12]</p>	<p>Hong, JS &amp; Garbarino, J. (2012). Risk and Protective Factors for Homophobic Bullying in Schools: An Application of the Social-Ecological Framework. <i>Educ Psychol Rev</i> 24:271-285.</p> <p>Larios et al. (2009). An Exploration of Contextual Factors that Influence HIV Risk in Female Sex Workers in Mexico: The Social Ecological Model Applied to HIV Risk Behaviors. <i>AIDS Care</i> 21(10):1335-1342.</p> <p>Sterling, SP &amp; Sadler, LS. (2008). Contraceptive Use Among Adolescent Latinas Living in the United States: The Impact of Culture and Acculturation. <i>Journal of Pediatric Health Care</i> 23(1):19-28.</p>	<b>Submit a public health <u>issue or problem behavior</u> AND a culture or population you are interested in</b>
3	Sept. 13	<p>Discuss how structural bias, social inequities and racism undermine health, challenge health equity at organizational, community and societal levels.</p> <p>[Comp 6]</p>	<p>Link, BG and Phelan, JC (2002). McKeown and the Idea That Social Conditions Are Fundamental Causes of Disease. <i>American Journal of Public Health</i> May 2002, 92 (5): 730-732.</p> <p>Woolf et al, 2007.</p> <p><i>Revisiting Social Ecological Framework</i></p> <p>In class: Remote Area Medical.</p>	<b>Social Ecological Framework (1 page)</b> Outline at least <b>three</b> specific factors on at least <b>four</b> levels of the social ecological framework relevant for your weekly topic and make sure this includes at least <b>one</b> at the policy

				level [Comp K12]
4	Sept. 20	Discuss how social, political and economic determinants of health and how they contribute to population health and health inequities  [Comp K10]	Blitstein, R. Racism's Hidden Toll. <i>Miller-McCune</i> , July-August 2009.  Braveman, P, Egerter, S & Williams, DR. (2011). The Social Determinants of Health: Coming of Age. <i>Annual Review of Public Health</i> 32:381-98.  Betancourt et al., (2003)	<b>In-class quiz on structural/systemic/community/social factors related to disease and health inequities</b>  [Comp 6]
5	Sept. 27	Explain behavioral and psychological factors that affect a population's health  [Comp K9]	Burke, JG, Mahoney, P, Gielen A, McDonnell, KA & O'Campo, P. (2009). Defining Appropriate Stages of Change for Intimate Partner Violence Survivors. <i>Violence and Victims</i> 24(1):36-51.  Glanz. K & Bishop, DB. (2010). The Role of Behavioral Science Theory in Development and Implementation of Public Health Interventions. <i>Annual Review in Public Health</i> 31:399-418.	<b>Social determinants of health (1 page)</b>  [Comp K10]
6	Oct 4	Methods 1 – Select quantitative and qualitative data methods appropriate for a given public health context  [Comp 2]		<b>Behavioral and psychological factors (1 page)</b> Identify behavioral and psychological factors related to your weekly topic  [COMP K9]  <b>Team Topics Due</b>

7	Oct. 11	<p>Methods 2 – Analyze qualitative data using appropriate strategies Interpret results of data analysis for public health research, policy and practice</p> <p>[Comp 2, 3, 4]</p>	<p>Ulin et al, 2005 pp 22-30</p> <p>Corburn, J. (2002). Combining community-based research and local knowledge to confront asthma and subsistence-fishing hazards...</p> <p>Yonas, Burke et al. (2009)</p>	
8	Oct. 18	<p>Methods 3 - Analyze qualitative data using appropriate strategies Interpret results of data analysis for public health research, policy and practice</p> <p>[Comp 3, 4]</p>	<p>Zinger, JA. (2004). Sight for Sore Eyes. <i>Natural History</i>, 113(10): 34-39.</p> <p>Burke et al., 2005</p>	
9	Oct 25	<p>Assess population needs, assets and capacities that affect community health</p> <p>[Comp 7]</p>		<p><b>Methods (2pp)</b> Outline the method or methods you would use for your project – include recruitment, sampling, data collection strategy and analysis plan. Refer to additional assignment guidelines. (1p) PLUS qualitative analysis example (1p)</p> <p>[Comp 2, 3,4]</p>
10	Nov 1	<p>Propose strategies to identify stakeholders and build coalitions and partnerships to influence</p>	<p>Lantz, PM, Viruell-Fuentes, E, Israel, BA, Softley, D &amp; Guzman, R. (2001). Can communities and academia work together on public health research?</p>	<p><b>Needs Assessment (1 page)</b></p>

		<p>public health outcomes</p> <p>Apply awareness of cultural values and practices to the design and implementation of public health policies and programs</p> <p>[Comp 8, 13]</p>	<p>Evaluation results from a community-based participatory research partnership in Detroit. <i>Journal of Urban Health</i>, 78(3): 495-507.</p> <p>Gazmararian, JA et al. (2010). Maternal Knowledge and Attitudes Toward Influenza Vaccination: A Focus Group Study in Metropolitan Atlanta. <i>Clinical Pediatrics</i> 49:1018-1025.</p> <p>Seabrook, J. Don't Shoot. <i>The New Yorker</i>. June 22, 2009, pp. 32+.</p>	[Comp 7]
<b>11</b>	<b>Nov. 8</b>	<p>Select methods to evaluate public health programs</p> <p>[Comp 11]</p>	<p>Baker, AD, Gilley, J, James, J &amp; Kimani, M. "High Five to Healthy Living": A Health Intervention Program for Youth at an Inner City Community Center. <i>J Community Health</i>, accessed on-line 12/21/11.</p> <p>Glanz, K &amp; Bishop, DB. (2010). The Role of Behavioral Science Theory in Development and Implementation of Public Health Interventions. <i>Annual Review of Public Health</i> 31:399-418.</p> <p>Richard, L, Gauvin, L &amp; Raine, K. (2011). Ecological Models Revisited: Their Uses and Evolution in Health Promotion Over Two Decades. <i>Annual Review of Public Health</i> 32:307-326.</p> <p><i>Build evaluation into plans!</i></p>	<p><b>In-class quiz on stakeholders and cultural values</b></p> <p>[Comp 8, 13]</p>
<b>12</b>	<b>Nov. 15</b>	<p>SMART objectives – use for planning and evaluation of</p>	<p>Baker AD, Gilley J, James J &amp; Kimani M. "High Five to Healthy Living": A Health Intervention Program</p>	

		process and outcomes	for Youth at an Inner City Community Center. <i>J Community Health</i> , accessed on-line 12/21/11 <i>In class exercise writing SMART objectives</i>	
<b>NO CLASS</b>	<b>Nov. 22</b>	Gratitude	<i>Have an outstanding Thanksgiving weekend!</i>	<b><i>NONE!</i></b>
<b>13</b>	<b>Nov. 29</b>	Evaluation (revisited) and Advocacy	Additional readings TBA	<b>Evaluation Plan/SMART objectives (2 pages)</b> Describe the components of your evaluation and identify at least two SMART process and two impact (outcome) objectives for each main component  [Comp 11]
<b>14</b>	<b>Dec. 6</b>	<b>In-class exam</b>	<b>Study, folks, study!</b>	<b>Final Exam</b>
<b>15</b>	<b>Dec. 13</b>	<b>Poster presentation</b>	<b>Details in CourseWeb</b>	<b>Poster, Peer Ratings</b>

**Educational Policies and Curriculum Committee**  
**Graduate School of Public Health**  
**University of Pittsburgh**  
**(Revised: 9/22/2015)**

**REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES**

1. **General Instructions:**

- a. Faculty should submit this form and the associated syllabus following the Pitt Public Health Syllabus Guidelines and the Syllabus Checklist (on pages 4 and 5) **by e-mail** to Patricia Documet, Chair (pdocumet@pitt.edu) and Robin Leaf, EPCC Staff Liaison (ral9@pitt.edu). If you choose not to include all the information detailed on the Syllabus Guidelines in your course syllabus for distribution to students, please attach this information to the proposal.
- b. The initiating Department is asked to submit one hard copy of this completed form with the proper signatures, syllabus and other materials (if any) to Robin Leaf in Student Affairs **at least one week prior** to the EPCC meeting. If this target date is not met, the proposal will be deferred for consideration at the next meeting scheduled.
- c. You will be contacted by the EPCC Chair or the EPCC Staff Liaison to schedule a presentation and discussion of your program/course proposal with the Committee, if possible at the next scheduled EPCC meeting.

2. **Review based on the following (check all which apply):**

New course, not previously approved  
 Course title change

Course modification (major)  
 Special topics course content  
 Pitt Public Health Core Course  
 Practicum, internship, field placement

Cross-listing only

(Specify academic unit & course number): \_\_\_\_\_

3. **Course designation:**

Course Number HPM 2075 Title Navigating the Physician-Administrator Relationship  
Credits: 2

4. **Cross-listing:**

If you want to cross-list this course in any other Pitt Public Health department or any other school of the University, specify which department(s) and School(s) and provide brief justification.

5. **Course Instructors:**

(Indicate type of Pitt Public Health faculty appointment,\* and percentage of total course time/effort anticipated. For any instructor who does not hold a Pitt Public Health faculty appointment, indicate her/his title and affiliation.)

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\* The principal instructor for any Pitt Public Health course must have a primary, secondary or adjunct appointment in the school.

a. Principal instructor: I. William Goldfarb, M.D., FACS, FCCM {Appointment as Adjunct Assistant/Associate Professor pending}.

b. Co-instructors (if any):

6. **Statement of the course for *Course Inventory*.** Include purpose of course; summary of prerequisites, if any; general course content; and method of conducting course (e.g., lecture, laboratory, field work, etc.).

The course will emphasize the physician administrator's approach to C-Suite management and provide the student with exposure to and practical knowledge of the administrative and operational issues which commonly engage physician administrators. This course should prepare the student to function within a C-Suite environment that is led or populated by physicians in either a combined clinical and administrative or purely administrative role. Additionally, the student will gain exposure to the myriad of regulatory, quality/safety and patient centric issues for which physician administrators commonly assume overall responsibility. Commonly, while these issues are championed by the physician administrator, the day to day responsibility for the design and implementation of focused resolution strategies becomes the responsibility of the non-physician administrator. This mandates the development of the ability to prioritize, for strategic planning purposes, and to have sufficient competency with the identification and analysis of relevant metrics and the ability to utilize this type of data to formulate effective action plans.

The course will combine traditional lecture (40%) with student participation in case project preparation and presentation both written and oral (60%).

7. **Student enrollment criteria/restrictions:**

a. Indicate any maximum or minimum number of students and provide justification for this limitation.

Enrollment of 12 -18 will be optimal for encouraging active student discussion and facilitating efficient project preparation and presentation.

b. If admission is by permission of instructor, state criteria to be applied.

c. Provide a brief description of any prerequisite skills or knowledge areas that are necessary for students entering this course, including any specific course prerequisites or equivalents.

Students external to HPM should demonstrate basic familiarity with the structure of the US health care system and health policy based on appropriate career experience or prior course work. HPM 2001 or equivalent would be an appropriate prerequisite or co-requisite for these students.

8. **Course schedule and allocation of hours:**

a. Number of course hours per session 2 Sessions per week 1 Weeks per academic term 15

b. Approximate allocation of class time (hours or %) among instructional activities:

Lectures 40% Seminars \_\_\_\_\_ Recitations \_\_\_\_\_ Field work \_\_\_\_\_ Laboratory \_\_\_\_\_  
Other (specify): Student project preparation and oral presentations 60%

c. Term(s) course will be offered: Fall \_\_\_\_\_ Spring X Summer Term \_\_\_\_\_ Summer Session \_\_\_\_\_

9. **Grading of student performance:**

Indicate the grading system to be used (A, B, C, etc.; H, S, U); provide statement justifying use of system other than letter grade.

Letter grades

10. **On-line course delivery:**

Indicate the extent to which you will be using on-line instructional methods in teaching this course by checking all of the options below which apply:

X I plan to use the course management aspects of CourseWeb/ Blackboard (or equivalent), e.g., grade book, announcements.

\_\_\_\_\_ I plan to use the interactive features of CourseWeb/Blackboard (or equivalent), e.g., discussion board, etc.

\_\_\_\_\_ I have designed the course for remote (off-site) learning with little/no classroom attendance required.

\_\_\_\_\_ I do not plan to use on-line instruction methods for this course (briefly explain)

11. **Relevance of course to academic programs and curricula:**

- a. Describe how this course contributes to learning objectives specified for the curriculum of one or more Pitt Public Health degree or certificate programs. Indicate whether course is required for any specified degree or certificate.

This course is an appropriate elective, specifically for MHA students, in developing the competencies of systems thinking and leadership at the intermediate level and organizational awareness, professionalism and communication at the advanced level. It is appropriate for MMPH students who seek leadership roles in public health and for health care professionals pursuing the Graduate Certificate in Health Systems Leadership and Management.

- b. Describe how this course addresses public health issues involving diversity (gender, race, ethnicity, culture, disability, or family status).

Respect for the diversity of populations served as well as diversity within the workforce is an important component of both organizational awareness, community orientation and executive-level leadership. The effective health care executive and public health leader must serve as a role model in encouraging and rewarding appreciation for diversity, e.g., ethnic, racial, gender, sexual orientation, age and religion among all managers, providers and support staff in their relationships internal to the organization and with the broader community.

12. **Signature and date of principal faculty member (include department/program) making request:**

Name/Title: Mark M. Bohrer

Date: 8-29-2017

13. **Signature and date of endorsement of department chairperson:**

Name/Title: [Signature]

Date: 8/29/17

14. (For cross-listing only)

**Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Educational Policies and Curriculum Committee  
 Graduate School of Public Health  
 University of Pittsburgh  
 (11/19/2013)**

**SYLLABUS CHECKLIST FOR NEW AND REVISED COURSES**

**Addendum to REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES FORM**

*Objective to assist faculty to ensure syllabus contains the required and necessary elements to provide students with clear expectations of the course.*

NOTE: \* indicates a required element of the syllabus. If N/A is checked or this element is not included complete the information detailed on page two for all instances.

<b>Syllabus Area</b>	<b>Recommended Detail * Required</b>	<b>Included in Your Syllabus?</b>			
<i>Heading</i>		Yes	No	N/A	
	Course Number*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Course Title*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Course Meeting Time/Day of Week*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Classroom Location*	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	<b>TBD</b>
<i>Faculty Information</i>	Office Location*	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	
	Office Hours*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Phone Number*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Email Address*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Teaching Philosophy	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Teaching Assistant Contact	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	
<i>Student Expectations in Classroom</i>	Behavior/ Ground Rules (cell phones off, laptops off, etc.)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Recording of Lectures	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
<i>Course Summary</i>	Course Description*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Learning Objectives*	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
<i>Materials</i>	Required Textbooks/ Articles/Readings	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Required Software	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	
	Required Equipment (including use of CourseWeb/Blackboard)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Recommended Material	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
	Availability of Software for Purchase and/or Use	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>	



**Graduate School of Public Health**  
**Department of Health Policy and Management**  
**Course Syllabus and Schedule**  
**Spring Term 2018**

**Course Title: Navigating The Physician - Administrator Relationship**

**Course Number: HPM 2075**

**Credits Assigned: Two**

**Class Room: TBD**

**Dates/Times: Tuesday 1-3PM**

**Instructor: I. William Goldfarb, M.D., FACS, FCCM**

**Office:**

**Phone: 412-491-6202**

**Email: [iwgoldfarb@gmail.com](mailto:iwgoldfarb@gmail.com)**

**Office Hours: By Appointment**

**Course Description:**

This course is designed to provide the student with an introduction to the role of physician administrators in the emerging healthcare matrix based organizational model. Physicians, by virtue of their training and clinical experience, bring a background and orientation to administrative roles that differs significantly from the traditional orientation of the non-physician administrator. This often results in a clash of cultures which if not properly managed can negatively impact organizational efficiency. It is imperative that non-physician administrators develop the skill sets that will facilitate the merging of the physician's primarily clinical culture with the non-physician administrator's more traditional business and operational culture in support of an organization's overall mission. The course will emphasize the physician administrator's approach to C-Suite management and provide the student with exposure to and practical knowledge of the administrative and operational issues which commonly engage physician administrators. This course should prepare the student to function within a C-Suite environment that is led or populated by physicians in either a combined clinical and administrative or purely administrative role. Additionally, the student will gain exposure to the myriad of regulatory, quality/safety and patient centric issues for which physician administrators commonly assume overall responsibility. Commonly, while these issues are championed by the physician administrator, the day to day responsibility for the design and implementation of focused resolution strategies becomes the responsibility of the non-physician administrator. This mandates the development of the ability to

prioritize, for strategic planning purposes, and to have sufficient competency with the identification and analysis of relevant metrics and the ability to utilize this type of data to formulate effective action plans. This course focuses upon this skill set and is structured to afford the student the opportunity to develop project specific strategies based upon operational metrics for clinical initiatives that impact operational efficiency and excellence. The student will also be provided the opportunity to develop resolution strategies based upon operational metrics for clinical initiatives that impact operational efficiency and excellence.

**Rationale:**

This is a second year elective course designed for MHA and other graduate students who are interested in or committed to an administrative role at a healthcare facility providing acute care for patients with complex medical or surgical issues mandating inpatient care.

**Texts:**

**REQUIRED**

1. Lencioni, P. (2011) The Five Dysfunctions of a Team

**RECOMMENDED**

1. Finerty, S. (2012). Master The Matrix. Minneapolis: Two Harbors Press
2. Lee, F. (2004). If Disney Ran Your Hospital. Bozeman. Second River Healthcare Press
3. Studer, Q. (2010). The HCAHPS Handbook. Gulf Breeze. Fire Starter Publishing

**Instructor's Goals/Teaching Philosophy:**

The instructor has identified the following broad goals for this course, to establish:

1. An open dialogue that will facilitate an understanding of the emerging role of the physician administrator as a C-Suite member
2. A collaborative learning environment in which students will feel at ease entering into creative discussions that facilitate the formulation of practical solutions to commonly encountered healthcare facility operational issues.
3. A classroom environment that encourages an "out of the box" exchange of ideas that will provide the student with the opportunity to develop a working knowledge of the processes to be utilized to evaluate operational projects that support patient centricity, quality/safety and overall operational efficiency in support of the C-Suite physician administrator.

**Course Learning Objectives:**

Upon thoughtful participation in class lectures and discussion and completion of all course requirements, the student should be prepared to apply the following specific knowledge, skills and tools:

1. Function within a matrix organization that has active physician participation and/or day to day leadership.
2. Understand the changing healthcare environment relative to new physician reimbursement models designed to maximize quality/safety and patient centricity.
3. Formulate a strategic approach to developing action plans for C-Suite initiatives in collaboration with physician based leadership and matrix implementation and oversight.
4. Exercise the ability to define relevant metrics and the skills to oversee metric data collectio
5. Develop the analytical skills necessary to utilize relevant data as a foundation for and a component of
6. Support project design, implementation and formal presentation.
7. Apply professional project preparation and presentation skills that are commensurate with C-Suite expectations.

**Competencies and Learning Objectives:**

<b>Competencies</b>	<b>Level of Mastery</b>	<b>Teaching Methods</b>	<b>Assessment</b>	<b>Learning Objectives</b>
<i>Systems Thinking</i>	I	Lecture, Project Design	Class Participation, 3 Project Presentations, Submission of "White Paper"	1, 3, 4, 5, 6, 7
<i>Leadership</i>	I	Lecture, Class Discussion	Class Participation	1, 2
<i>Organizational Awareness</i>	A	Lecture, Class Discussion, "White Paper"	Class Participation, Submission of "White Paper"	1, 2, 3
<i>Professionalism</i>	A	Lecture, Class Discussion, Project Design	Class Participation, Project Presentation	6
<i>Communication</i>	A	Class	Class	1,2,3,4,5,6,7

		Discussions, Project Design, "White Paper"	Participation, Project Presentation, Writing Skills ("White Paper")	
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- B=Basic; I=Intermediate; A=Advanced

The Commission on Accreditation of Healthcare Management Education (CAHME) separates teaching or learning methods onto lower-level and higher-level categories or methods. As applied to this course, the lower and the higher-level methods for teaching and assessing, with appropriate allocations of course time, are as follows:

	Lower-Level	Higher- Level	Total
Teaching Methods	Lecture, Assigned Readings	Project Development/Prese ntation, "White Paper"	
Estimated % of course time relying on these teaching methods	40%	60%	100%
Methods used to assess students	Class Participation	Metric Analysis, Project Design, Presentation Skills, Writing Skills	
Estimated % of course time relying on these teaching methods	40%	60%	100%

**Grading Factors & Weights:**

<u>Component</u>	<u>Weight</u>
Project I	30%

**“OPERATING ROOM EFFICIENCY:** Efficient utilization of surgical suite resources drives financial performance. Physician and ancillary support staff operational processes frequently serve to reduce the number of procedures performed during a routine surgical shift. This project requires the student to utilize metric data to identify opportunities for improvement and to develop a workable action plan.

**Project II**

**30%**

**“PATIENT SATISFACTION”:** Hospital reimbursement is now driven by patient satisfaction scores and outcome measurements. A hospital confronted by low scores is challenged to develop strategies that serve to demonstrate to patients and families an institutional commitment to patient satisfaction and outcomes as a means of elevating scores and by extension reimbursement. This project requires the student to develop a strategy that will have the greatest impact over the shortest period of time.

**Project III**

**30%**

**“REDUCING HOSPITAL ACQUIRED INFECTION RATES”:** Regulatory agencies now financially penalize hospitals based upon infection rates. Hospital acquired infections are also associated with increased patient morbidity and mortality in addition to increasing length of stay. This project requires the student to analyze relevant metrics, identify cross-departmental stakeholders, and design an approach that will result in a reduction in the infection rates.

\*Students will be encouraged to work in teams on each of the assigned projects. A student may, however, elect to work independently and thus assume sole responsibility for the development of the project plan and classroom presentation. Grading will be based upon the ability to analyze and comprehend the project variables and components; the ability to develop an organized and effective plan and the ability to articulate the resolution strategy in a formal presentation format.

**“White- Paper”**

**10%**

Students will have the opportunity to select from two topics with the intent to prepare a formal document that could be submitted to hospital/board leadership as a foundation for an institutional decision on a proposed course of action. Papers will be required to adhere to a business mat to include an “Executive Summary and references. Students will individually prepare the “white- paper” assignment and will be graded on their ability to formulate and articulate a persuasive argument for or against the question under study as well as their ability to effectively communicate their thoughts in a written format that is at a level of sophistication that is compatible with C-Suite expectations.

**Grading Scale:**

98-100 A+

90-98 A

78-89 B  
69-77 C  
<69 F

**CourseWeb/Blackboard:**

This course will be supported by the utilities available through the University's CourseWeb/BlackBoard system. Students may gain access to this on-line classroom support by accessing [www.pitt.edu/-provost/ai1.html](http://www.pitt.edu/-provost/ai1.html) and following the path to this check for course announcements, additional references and posting of grades.

**Academic Integrity:**

The Provost Office maintains a website that provides details on the Code for Academic Integrity; please see <http://www.pitt.edu/-provost/ai1.html>. This code includes obligations for faculty and students; procedures for violations and other critical information. You are encouraged to review this policy carefully as it will apply to all of your course work in the GSPH. Violations of academic integrity are taken very seriously and may lead to sanctions including a failing grade on an exam, of the course and/or other appropriate disciplinary action.

**Students with Special Needs:**

If you have a disability for which you are or may be requesting an accommodation, please contact your instructor at your earliest opportunity. In addition, you should contact the Office of Disability Resources and Services, 216 Pitt Union, (412) 648-7890 or (412) 383-7355 (TTY) to access the services provided by their staff. DRS will verify your disability and assist with determining reasonable accommodation for this course.

**Professional Conduct:**

Students are expected to maintain professional demeanor and conduct during the in-class sessions. At the minimum this entails attentiveness, readiness to participate, and minimal side-bar conversation. Texting or tweeting during the class session which is discourteous and in the extreme, can be disruptive, is discouraged. A student who must accept or place a cell phone call or respond to a pager should leave the classroom or wait for the next break.

**Recording (audio and video):**

Students may not record a lecture (audio or video) or other in class presentations without prior approval of the instructor.

**Hospital Management - Navigating the Physician Administrator Relationship**  
**Fall Term 2017**  
**Schedule of Classes**  
**Version: February 2017**

Session	Topic Activity
#1 January 4, 2018	Dynamics of physician leader and C-Suite administrators interaction
#2 January 11, 2018	Role of the C-suite Physician (as CMO, CEO) <b>“White Paper Assignment: Discuss Topics for Student Selection</b>
#3 January 16, 2018	Metrics as a foundation for project planning and presentations <b>ASSIGN PROJECT I: Operating Room Efficiency</b>
#4 January 25, 2018	The regulatory and rating gauntlet
#5 February 1, 2018	Project I Presentations
#6 February 8, 2018	Organizational culture and models
#7 February 15, 2018	Quality/Safety and patient satisfaction <b>ASSIGN PROJECT II: Issues of Patient Satisfaction</b>
#8 February 22, 2018	Physician based HR issues
#9 March 1, 2018	Project II Presentations
#10 March 8, 2018	No Class : Spring Break
#11 March 15, 2018	<b>ASSIGN PROJECT III: Reducing Hospital Acquired Infection Rates</b> Managing the Medical Executive Committee and staff committee structures
#12 March 22, 2018	“White- Paper” skill development
#13 March 29, 2018	Project III Presentations

#14 April 5, 2018	"White Paper" topic discussions/selection
#15 April 12, 2018	"White-Paper" submission

**Educational Policies and Curriculum Committee**  
**Graduate School of Public Health**  
**University of Pittsburgh**  
**(Revised: 9/22/2015)**

**REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES**

1. **General Instructions:**

- a. Faculty should submit this form and the associated syllabus following the Pitt Public Health Syllabus Guidelines and the Syllabus Checklist (on pages 4 and 5) **by e-mail** to Patricia Documet, Chair ([pdocumet@pitt.edu](mailto:pdocumet@pitt.edu)) and Robin Leaf, EPCC Staff Liaison ([ral9@pitt.edu](mailto:ral9@pitt.edu)). If you choose not to include all the information detailed on the Syllabus Guidelines in your course syllabus for distribution to students, please attach this information to the proposal.
- b. The initiating Department is asked to submit one hard copy of this completed form with the proper signatures, syllabus and other materials (if any) to Robin Leaf in Student Affairs **at least one week prior** to the EPCC meeting. If this target date is not met, the proposal will be deferred for consideration at the next meeting scheduled.
- c. You will be contacted by the EPCC Chair or the EPCC Staff Liaison to schedule a presentation and discussion of your program/course proposal with the Committee, if possible at the next scheduled EPCC meeting.

2. **Review based on the following (check all which apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> New course, not previously approved | <input checked="" type="checkbox"/> Course modification (major)    |
| <input type="checkbox"/> Course title change                 | <input type="checkbox"/> Special topics course content             |
| <input type="checkbox"/> Cross-listing only                  | <input checked="" type="checkbox"/> Pitt Public Health Core Course |
| (Specify academic unit & course number): _____               | <input type="checkbox"/> Practicum, internship, field placement    |

3. **Course designation:**

Course Number 2001 Title Health Policy & Management in Public Health Credits 3

4. **Cross-listing:**

If you want to cross-list this course in any other Pitt Public Health department or any other school of the University, specify which department(s) and School(s) and provide brief justification.

Existing cross-listings:

HRS 2001  
NUR 2202

5. **Course Instructors:**

(Indicate type of Pitt Public Health faculty appointment,\* and percentage of total course time/effort anticipated. For any instructor who does not hold a Pitt Public Health faculty appointment, indicate her/his title and affiliation.)

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\* The principal instructor for any Pitt Public Health course must have a primary, secondary or adjunct appointment in the school.

a. Principal instructor: Everett James, HPM Faculty (100%)

b. Co-instructors (if any):

6. **Statement of the course for *Course Inventory*.** Include purpose of course; summary of prerequisites, if any; general course content; and method of conducting course (e.g., lecture, laboratory, field work, etc.).

The core course is designed to give students an overview of the disciplines and competencies associated with the field of health policy and health care management. Understanding the role of leadership in a public health environment is a unifying theme in this course.

7. **Student enrollment criteria/restrictions:**

a. Indicate any maximum or minimum number of students and provide justification for this limitation.  
None.

b. If admission is by permission of instructor, state criteria to be applied.  
N/A

c. Provide a brief description of any prerequisite skills or knowledge areas that are necessary for students entering this course, including any specific course prerequisites or equivalents.  
None.

8. **Course schedule and allocation of hours:**

a. Number of course hours per session 3 Sessions per week 1 Weeks per academic term 15

b. Approximate allocation of class time (hours or %) among instructional activities:

Lectures 100% Seminars \_\_\_\_\_ Recitations \_\_\_\_\_ Field work \_\_\_\_\_ Laboratory \_\_\_\_\_

Other (specify): \_\_\_\_\_

c. Term(s) course will be offered: Fall X Spring X Summer Term \_\_\_\_\_ Summer Session \_\_\_\_\_

9. **Grading of student performance:**

Indicate the grading system to be used (A, B, C, etc.; H, S, U); provide statement justifying use of system other than letter grade.

Letter grade (A,B,C)

10. **On-line course delivery:**

Indicate the extent to which you will be using on-line instructional methods in teaching this course by checking all of the options below which apply:

X I plan to use the course management aspects of CourseWeb/ Blackboard (or equivalent), e.g., grade book, announcements.

\_\_\_ I plan to use the interactive features of CourseWeb/Blackboard (or equivalent), e.g., discussion board, etc.

\_\_\_ I have designed the course for remote (off-site) learning with little/no classroom attendance required.

\_\_\_ I do not plan to use on-line instruction methods for this course (briefly explain)

11. **Relevance of course to academic programs and curricula:**

- a. Describe how this course contributes to learning objectives specified for the curriculum of one or more Pitt Public Health degree or certificate programs. Indicate whether course is required for any specified degree or certificate.

Overall, the instructor's central purpose for this course is to provide information and insight that can enhance students' abilities to better analyze and exert influence in helping shape health policy as well as more effectively manage in their domains of responsibility. The course is based on a teaching philosophy that emphasizes students' responsibilities to avail themselves of the organized readings, lectures, and guests arranged by the instructor as learning opportunities in the course.

This course is a requirement for the MPH degree program at Pitt Public Health.

- b. Describe how this course addresses public health issues involving diversity (gender, race, ethnicity, culture, disability, or family status).

12. **Signature and date of principal faculty member (include department/program) making request:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

13. **Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

14. (For cross-listing only)

**Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Educational Policies and Curriculum Committee  
Graduate School of Public Health  
University of Pittsburgh  
(11/19/2013)**

**SYLLABUS CHECKLIST FOR NEW AND REVISED COURSES**

**Addendum to REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES FORM**

*Objective to assist faculty to ensure syllabus contains the required and necessary elements  
to provide students with clear expectations of the course.*

NOTE: \* indicates a required element of the syllabus. If N/A is checked or this element is not included  
complete the information detailed on page two for all instances.

<b>Syllabus Area</b>	<b>Recommended Detail * Required</b>	<b>Included in Your Syllabus?</b>					
<b><i>Heading</i></b>	Course Number*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Course Title*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Course Meeting Time/Day of Week*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Classroom Location*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<b><i>Faculty Information</i></b>	Office Location*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Office Hours*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Phone Number*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Email Address*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Teaching Philosophy	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Teaching Assistant Contact	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<b><i>Student Expectations in Classroom</i></b>	Behavior/ Ground Rules (cell phones off, laptops off, etc.)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Recording of Lectures	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<b><i>Course Summary</i></b>	Course Description*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Learning Objectives*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<b><i>Materials</i></b>	Required Textbooks/ Articles/Readings	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Required Software	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Required Equipment (including use of CourseWeb/Blackboard)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Recommended Material	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Availability of Software for Purchase and/or Use	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>



# HPM 2001

## Fall Term 2017

### Health Policy & Management in Public Health

August 29 to December 12, 2017  
(Tuesdays)  
1:00 - 3:55 PM  
G23 Auditorium - Parran Hall

**Everette James, JD, MBA**  
Professor of Health Policy and Management  
[aejames@pitt.edu](mailto:aejames@pitt.edu)

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**Teaching Assistant:**  
Cassie Leighton  
HPM Doctoral Student  
[cal159@pitt.edu](mailto:cal159@pitt.edu)  
Office: TBD  
Office Hours: By appointment

**COURSE SCHEDULE**  
**HPM 2001, Health Policy & Management in Public Health**  
**Fall Term 2017**

Week 1 8/29/2017	Course Overview and Introduction to Course Methods and Resources	James
Week 2 9/5/2017	Determinates of the Organization, Financing and Delivery of Health Care	Roberts
Week 3 9/12/2017	Policy Formulation: Agenda Setting and Development of Legislation	James
Week 4 9/19/2017	Policy Implementation: Rulemaking and Operation	James
Week 5 9/26/2017	Policy Modification: Medicare and Medicaid	Donohue
Week 6 10/3/2017	Management of Public Health Programs and Projects	Barron
Week 7 10/10/2017	<b>*NO CLASS – Fall break*</b>	
Week 8 10/17/2017	Local Health Policy Development: Allegheny County Health Department	Hacker/Wilson
Week 9 10/24/2017	<b>Mid-Term Exam</b>	
Week 10 10/31/2017	Leadership and Best Practice	Rohrer
Week 11 11/7/2017	Regulation of the Health Care Market (Leadership Assignment Due)	McGough
Week 12 11/14/2017	History of Health Reform in the U.S.	James
Week 13 11/21/2017	The Affordable Care Act and Public Health: Implementation of the ACA	James
Week 14 11/28/2017	The American Health Care Act and Future Prospects for Reform	James
Week 15 12/5/2017	<b>*NO CLASS*</b> (Policy Briefs due)	
Week 16 12/12/2017	<b>Final Exam</b>	

## COURSE RATIONALE

This course, HPM 2001, Health Policy & Management in Public Health, is the Department of Health Policy & Management's (HPM) contribution to GSPH's Core Curriculum. It is required for all MPH students as well as DrPH students subject to fulfilling the school's core requirements.

Graduate schools of public health typically provide curriculum content in several disciplines and fields, including HPM, as follows:



Source: Association of Schools of Public Health, *Master's Degree in Public Health Core Competency Development Project*, Version 2.3, August 11, 2006, p. 9. (Accessed 10/13/11.)  
[http://www.sph.unc.edu/images/stories/faculty\\_staff/acad\\_affairs/documents/asph\\_competencies.pdf](http://www.sph.unc.edu/images/stories/faculty_staff/acad_affairs/documents/asph_competencies.pdf).

In addition to the general framework above, the Association also recommends a number of specific competencies (*unique sets of "applied knowledge, skills, and other attributes (KSOs) grounded in theory and evidence, for the broad practice of public*

health") needed in effective public health practice, including some in HPM:

### Policy-Relevant Competencies

1. Apply the core functions of assessment, policy development, and assurance in the analysis of public health problems and their solutions.
2. Understand and explain the critical importance of evidence in advancing public health knowledge
3. Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.
4. Communicate health policy and management issues using appropriate channels and technologies.
5. Differentiate among availability, acceptability, and accessibility of health care across diverse populations.
6. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.
7. Evaluate policies for their impact on public health and health equity.

### Management-Relevant Competencies

1. Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the US.
2. Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives.
3. Apply principles of strategic planning and marketing to public health.
4. Apply quality and performance improvement concepts to address organizational performance issues.
5. Apply "systems thinking" for resolving organizational problems.
6. Understand and demonstrate leadership skills for building partnerships, team building and conflict management skills.

## **COURSE OBJECTIVES**

Within the framework of developing and enhancing competencies, the objectives of this course are the following:

1. To assist students in acquiring knowledge and experience in applying the knowledge about the context and process of health policymaking at the federal and state levels of government in the United States. A conceptual model of policy formulation, implementation and modification activities is used to structure the content about the policymaking process. In addition, the course covers selected federal and state health policies and policy issues, including the Affordable Care Act, in their historical context, as well as their contemporary and developmental status.
2. To assist students in acquiring knowledge and experience in applying the knowledge about effectively managing health programs and projects. A conceptual model of core (strategizing, designing, and leading) and facilitative (communicating, managing quality, marketing, and decision making) management activities is used to structure the management content of the course.

Overall, the instructor's central purpose for this course is to provide information and insight that can enhance students' abilities to better analyze and exert influence in helping shape health policy as well as more effectively manage in their domains of responsibility. The course is based on a teaching philosophy that emphasizes students' responsibilities to avail themselves of the organized readings, lectures, and guests arranged by the instructor as learning opportunities in the course. Standard professional behavior is expected at all times in the course. Lectures may be recorded.

## **COURSE METHODS**

The course utilizes CourseWeb. Your active participation in the course is required in the form of written exams, assignments, and attendance.

## **GRADING POLICY**

Course grades are determined as follows, based on a maximum possible 100 points:

1. Two exams – each worth a maximum of 30 points (60 points possible). Exams will consist of multiple-choice, true/false, or short answer questions drawn from course readings and lectures.

2. Policy Brief (20 points possible) – The policy brief will consist of 2-3 pages of writing, not including references and a required cover page. Policy Briefs will be due on **December 5, 2017**.
3. Leadership Assignment – Leadership skills self-assessments and brief self-reflection written response (10 points possible). Leadership Assignment is due **November 14, 2017**.
4. Attendance and participation – Lack of attendance and participation may result in up to 10 points being deducted from your final grade (10 points possible).

Final course grades will be letter grade based on total accumulated points as follows:

97 >	=	A+
93 – 96	=	A
90 – 92	=	A-
87 – 89	=	B+
83 – 86	=	B
80 – 82	=	B-
77 – 79	=	C+
73 – 76	=	C
70 – 72	=	C-
<70	=	F

## **COURSE READING MATERIAL**

The required textbook is available for purchase (sharing copies is strongly recommended) at the Health Book Center, and several copies are on reserve at Falk Library.

1. Beaufort Longest. *Health Policymaking in the United States*, 5E. Chicago: Health Administration Press, 2010.
2. *Kaiser Daily Health Policy Report*. (Accessed 10/19/11.) <http://www.kaiserhealthnews.org/Email-Subscriptions.aspx>. Sign up for free email delivery and read this report each business day during the course.
3. Carter McNamara. *Free Management Library(SM)*. This is a comprehensive web-based management library. (Accessed 10/19/11.) [www.managementhelp.org](http://www.managementhelp.org).
4. Assigned material available in PDF format or on the Internet.

## **ACCOMMODATION FOR STUDENTS WITH DISABILITIES**

If you have any disability for which you are or may be requiring accommodation, you are encouraged to notify both your instructor and the Office of Disability Resources and Services, 216 William Pitt Union at (412) 648-7890 or TTY (412) 383-7355 as early as possible in the academic term. This office will verify your disability and help you to arrange for reasonable accommodations for your full participation in this course.

## ACADEMIC INTEGRITY

You are expected to adhere to the school's standards of academic honesty. Any work submitted in this course for evaluation must represent your own intellectual contribution and efforts. The GSPH policy on academic integrity and professionalism, which is based on the University policy, is available online at <http://www.publichealth.pitt.edu/interior.php?pageID=126>. The policy includes obligations for faculty and students, procedures for adjudicating violations, and other critical information. Please take the time to read this policy.

The essence of the GSPH policy on academic integrity is that if you commit an act of academic dishonesty, including plagiarism, unauthorized collaboration on an assignment, cheating on an exam, misrepresentation of data, and facilitating dishonesty by others, you will receive a sanction appropriate to the violation committed. Sanctions include, but are not limited to, reduction of a grade for an assignment or a course, failure of a course, and dismissal from GSPH.

The policy also requires that a violation of academic integrity will be documented and kept in a confidential student file maintained by the GSPH Office of Student Affairs. If a sanction for a violation is agreed upon by you and me the record of this agreement will be expunged from your file upon your graduation. If the case is referred to the GSPH Academic Integrity Hearing Board, a record will remain in your permanent file. Repeat violations automatically will be referred to the Hearing Board.

## Week 1 – August 29, 2017

### Course Overview and Introduction to Course Methods and Resources

Everette James

#### Learning Guidance:

1. Familiarize yourself with the overall purposes for the course, as well as the format and methods used to conduct the course.
2. Define health and health policy and understand the forms policies take, and recognize the connection between health policy and health in human populations.
3. Reproduce a schematic model (see page 54 of text) of the overall health policymaking process.
4. Explain the critical importance of evidence in advancing public health knowledge
5. Familiarize yourself with the role of interest groups in the political marketplace.
6. Familiarize yourself with some of the key health policy websites that will be used in the course.

#### Required Reading:

1. *Health Policymaking in the United States*, 5E. Chapter 1, *Health and Health Policy*. (PDF on Courseweb)
2. *Health Policymaking in the United States*, 5E. Chapter 2, *The Context and Process of Health Policymaking*. (PDF on Courseweb)
3. How Our Laws Are Made:  
<https://www.congress.gov/resources/display/content/How+Our+Laws+Are+Made+-+Learn+About+the+Legislative+Process>

#### Browse:

1. Kaiser Family Foundation Online, [www.kff.org](http://www.kff.org) and <http://kff.org/archived-kaiseredu-org-tutorials/>
2. Library of Congress, <http://thomas.loc.gov/home/thomas.php>
3. Commonwealth of Pennsylvania, <http://www.pa.gov/Pages/default.aspx>  
Click on the section labeled Government; scroll down and find Health and Human Services tab (under "Commonwealth Websites"). Then explore the health-related links listed there, especially for Aging, HealthChoices, and the Department of Health.
4. Obama, B. H. (2017). Repealing the ACA without a Replacement—The Risks to American Health Care. *New England Journal of Medicine*:  
<http://www.nejm.org/doi/pdf/10.1056/NEJMp1616577>

#### Optional Reading:

1. Kersh, Rogan. "Lobbyists: Ten Myths about Power and Influence." Pages 271-290 in James A. Morone, Theodor J. Litman, and Leonard S. Robins. Health Politics and Policy, 4E. Clifton Park, NY: Delmar Cengage Learning, 2008.
2. Health Policymaking in the United States, 5E. Appendix 15, Types of Groups Involved in Financing Political Campaigns

## **Week 2 – September 5, 2017**

### **Determinates of the Organization, Financing and Delivery of Health Care**

Mark Roberts

Learning Guidance:

1. Familiarize yourself with the organization of health services and their financing in the U.S.
2. Understand the major causes and trends of morbidity and mortality in the US or other community relevant to the school or program
3. Understand the social, political and economic determinants of health and how they contribute to population health and health inequities
4. Review the pattern of health expenditures and projections

Required Reading:

1. Leiyu Shi, Douglas A. Singh, and Jenna Tsai. "The Changing U.S. Health System." Chapter 21 in James A. Johnson and Carleen H. Stoskopf, editors, Comparative Health Systems: Global Perspectives. Sudbury, MA: Jones and Bartlett Publishers, 2010.
2. Kaiser Family Foundation. Healthcare Spending in the United States and Selected OECD Countries. April 2011.  
<http://www.kff.org/insurance/snapshot/OECD042111.cfm>
3. U.S. Census Bureau. The 2011 Statistical Abstract. Health Expenditures, Tables 134-136 only.  
[http://www.census.gov/compendia/statab/cats/health\\_nutrition/health\\_expenditures.html](http://www.census.gov/compendia/statab/cats/health_nutrition/health_expenditures.html)
4. Kaiser Family Foundation. Health Care Costs: A Primer. (Skim only)  
<http://kaiserfamilyfoundation.files.wordpress.com/2013/01/7670-03.pdf>

## **Week 3 – September 12, 2017**

### **Policy Formulation: Agenda Setting and Development of Legislation**

#### **Exemplar: Pennsylvania's Health Care-Associated Infections Act 52**

Everette James

Learning Guidance:

1. Understand agenda setting as a consequence of the various pairs of problems and their possible solutions, along with the political circumstances surrounding the pairs.
2. Understand the role of interest groups in the political circumstances aspect of agenda setting.

3. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence
4. Familiarize yourself with the development of Pennsylvania's Health Care-Associated Infections legislation (Act 52).

Required Reading:

1. Health Policymaking in the United States, 5E, Chapter 2, *The Context and Process of Health Policymaking*. (PDF on Courseweb)
  - o Review from W1
2. *Health Policymaking in the United States*, 5E, Chapter 3, *Policy Formulation: Agenda Setting*. (PDF on Courseweb)
3. *Health Policymaking in the United State*, 5E, Chapter 4, *Policy Formulation: Development of Legislation*. (PDF on Courseweb)
4. Pennsylvania Department of Health, Health Care Associated Infection Prevention, Appendix 3 – Act 52 of 2007  
[http://www.portal.state.pa.us/portal/server.pt/community/healthcare\\_associated\\_infections/14234](http://www.portal.state.pa.us/portal/server.pt/community/healthcare_associated_infections/14234) (PDF of law available on CourseWeb)

Optional Reading:

1. John W. Kingdon, "How Does an Idea's Time Come?" Chapter 1 in *Agendas, Alternatives, and Public Policies*, 2<sup>nd</sup> edition. New York: HarperCollins College Publishers, 1995. (PDF available on CourseWeb.)
2. Familiarize yourself with the websites of the Congressional committees with health policy jurisdiction. The committees and their website addresses can be found on pages 214-215 of *Health Policymaking in the United States*. You can also readily access these sites from <http://thomas.loc.gov> by clicking on "House of Representatives" and "Senate."
3. *Health Policymaking in the United States*, 5E, Appendix 18, "Congressional Conference Committees."

**Week 4 – September 19, 2017**

**Policy Implementation: Rulemaking & Operation**

**Exemplar: Pennsylvania's Clean Indoor Air Act**

Everette James

Learning Guidance:

1. Familiarize yourself with the implementation phase of the public policymaking process.
2. Understand the rulemaking component of implementation.
3. Appreciate the extent of regulatory impact of public policy on health care organizations and health plans.
4. Understand and familiarize yourself with the policy implementation of Pennsylvania's Clean Indoor Air Act of 2008.

Required Reading:

1. *Health Policymaking in the United States*, 5E, Chapter 5, *Policy Implementation: Rulemaking*. (PDF on Courseweb)
2. *Health Policymaking in the United States*, 5E, Chapter 6, *Policy Implementation: Operation*. (PDF on Courseweb)
3. Pennsylvania Department of Health, Clean Indoor Air Act, read Act 27 of 2008 Clean Indoor Air Act Information - [http://www.portal.state.pa.us/portal/server.pt/community/clean\\_indoor\\_air/14187/clean\\_indoor\\_air\\_-\\_menu/557664](http://www.portal.state.pa.us/portal/server.pt/community/clean_indoor_air/14187/clean_indoor_air_-_menu/557664) - (PDF available on CourseWeb)

Optional Reading:

1. *Health Policymaking in the United States*, 5E, Appendix 10, "Laws Implemented by EPA."
2. "Implementing the ACA: Onward Through the Thorns". *Health Affairs*, 32, no.9 (2013):1518 (PDF available on Courseweb)

**Week 5 – September 26, 2017**

**Policy Modification**

**Exemplar: Medicare Part D**

Julie Donohue

Learning Guidance:

1. Understand how modification can occur at each step in the policymaking process.
2. Understand the role of Medicare in financing health services in the United States.
3. Familiarize yourself with the important historical aspects of the development of Medicare and the Medicare policy modification process.

Required Reading:

1. *Health Policymaking in the United States*, 5E, Chapter 7, *Policy Modification*. (PDF on Courseweb)
2. Kaiser Family Foundation. *Medicare: A Primer*. 2010. [www.kff.org/medicare/upload/7615-03.pdf](http://www.kff.org/medicare/upload/7615-03.pdf).

Optional Reading:

1. 2014 CMS IPPS Policy Modifications, <http://www.gpo.gov/fdsys/pkg/FR-2013-08-19/pdf/2013-18956.pdf>
2. Kaiser Family Foundation. *Medicare: A Timeline of Key Developments* <http://www.kff.org/medicare/medicaretimeline.cfm>.

3. Prospective Payment Systems - General Information  
<http://cms.hhs.gov/Medicare/Medicare-Fee-for-Service-Payment/ProspMedicareFeeSvcPmtGen/index.html>
4. Centers for Medicare & Medicaid Services (CMS) final rule [CMS-1599-F] updating fiscal year (FY) 2014 Medicare payment policies and rates under the Inpatient Prospective Payment System (IPPS)  
<http://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-Sheets/2013-Fact-Sheets-Items/2013-08-02-2.html>
5. Michael E. Gluck and Richard Sorian, *Administrative Challenges in Managing the Medicare Program*, The AARP Policy Institute, #2004-15, December 2004, pages 1-94.

### **Week 6 – October 3, 2017**

#### **Management of Public Health Programs and Projects**

Gerald Barron

Learning Guidance:

1. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings
2. Understand issues and challenges faced by managers of public health programs and projects
3. Understand management roles of a county health department
4. Learn about transformational change of public health programs and projects
5. Understand how responsibility is shared between health entities at the local, state, and national level

Required Reading:

1. DeSlavo, Karen B., et al. "Public Health 3.0: Time for an Upgrade." *AJPH Perspectives*. 2016, 106(4). (PDF on Courseweb)

### **Week 7 – October 10, 2017**

No Class – Fall Break

### **Week 8 – October 17, 2017**

#### **Policy Development in the Allegheny County Health Dept.**

Karen Hacker and Abby Wilson

Learning Guidance:

1. Understand the type of policy work a county health department oversees, and the different avenues available for creating public health policies
2. Understand the role of the Allegheny County Health Department as a supporter, and promoter, of local public health policy
3. Understand the role of the Allegheny County Board of Health as a regulatory body
4. Familiarize yourself with case studies exemplifying recently implemented health policies at the local level

Required Readings:

1. Naloxone Standing Order FAQ  
[http://www.achd.net/overdoseprevention/Naloxone\\_FAQ\\_Pharmacist.pdf](http://www.achd.net/overdoseprevention/Naloxone_FAQ_Pharmacist.pdf)
2. Theodore L. Wagener, Ellen Meier, Alayna P. Tackett, James D. Matheny, and Terry F. Pechacek, "A Proposed Collaboration Against Big Tobacco: Common Ground Between the Vaping and Public Health Community in the United States". *Nicotine & Tobacco Research* (2016): p730-736. (PDF available on CourseWeb)
3. Public Feedback on HPV Vaccine Mandate  
[http://www.achd.net/infectd/pubs/pdf/061216-072216\\_Public\\_Feedback\\_on\\_HP.pdf](http://www.achd.net/infectd/pubs/pdf/061216-072216_Public_Feedback_on_HP.pdf)
4. "Controversial restaurant health-grading plan rejected", Pittsburgh Post-Gazette Article.  
<http://www.post-gazette.com/local/2015/05/05/Allegheny-County-Council-rejects-restaurant-grading-plan/stories/201505050195>
5. Allegheny Health Department Smoking Prevention and Control: E-Cigarette & Vaping Products  
<http://www.achd.net/chron/d/smoking/ecig.html>

**Week 9 – October 24, 2017**

Mid-Term Exam

**Week 10 –October 31, 2017**

**Leadership and Best Practice**

Wes Rohrer

Learning Guidance:

1. Understand the history of Leadership Theories in the United States
2. Familiarize yourself with the frameworks for leadership improvement
3. Understand how healthcare reform in the United State is changing leadership
4. Understand the difference between leadership and management
5. Identify your own strengths and weaknesses as a leader, and describe a plan to improve upon your weaknesses

Required Reading:

1. Natemeyer, W. and Hersey, P. (2011). "Chapter 8: Situational Leadership." Classics of Organizational Behavior. Long Grove, IL: Waveland Press, 378-383. (PDF available on Courseweb)
2. Rubino, L., Esparza, S., and Chassiakos, Y. (2014). "Chapter 1: A Call for New Leadership in Health Care." *New Leadership for Today's Health Care Professionals*. Burlington, MA: Jones & Bartlett Learning, LLC, 1-19. (PDF available on Courseweb)
3. Case Study 28, "Struggle for Power at Midwest Hospital System." (PDF available on Courseweb)

Optional Reading:

1. Northouse, P. (2013). "Chapter 3: Skills Approach." *Leadership: Theory & Practice*. Los Angeles: SAGE, 43-62.
2. Natemeyer, W. and Hersey, P. (2011). "Chapter 7: Emotional Intelligence." *Classics of Organizational Behavior*. Long Grove, IL: Waveland Press, 378-383.

**Week 11 – November 7, 2017**

**Regulation of the Health Care Market**

Tom McGough

Learning Guidance:

1. Understand the structure and function of the U.S. healthcare regulatory system
2. Understand the US healthcare participants and the key features of governmental and commercial markets
3. Be able to distinguish between federal, state and local regulatory purview and understand the roles that regulators play in the market for health services
4. Familiarize yourself with the federal, state and local laws and regulations that govern the activities and taxation of healthcare non-profits
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings

Required Reading: ALL AVAILABLE AS PDFS ON COURSEWEB

1. Whitman, Elizabeth. "Cherry-picking patients? May Clinic aims to 'prioritize' privately insured." *Modern Healthcare*. March 15, 2017.
2. DeBonis, Eilperin, Weigel. "GOP health-care plan: Passage in doubt after hard-liners rebuff White House offer." *The Washington Post*. March 23, 2017.
3. Gordon, John S. "The Evolution of Cost-Plus Health Care." *Barron's*. September 14, 2013.
4. Herman, B. "Why Vermont pulled the plug on single-payer healthcare." *Modern Healthcare*. December 23, 2014.
5. Sanger-Katz, M. "Obamacare Appears to Be Making People Healthier." *The New York Times*. August 9, 2016.
6. Ollove, M. "Are States Obligated to Provide Expensive Hepatitis C Drugs?" *The Pew Charitable Trusts*. February 9, 2016.
7. Demko, P. "Obamacare's sinking safety net." *Politico*. July 13, 2016.
8. Ferris, S. "Drive to focus Medicare dollars on quality-based care nears goal." *The Hill*. February 2, 2016.
9. Venteicher, W. "Highmark pulls out of ACA marketplace in 27 Pennsylvania counties for 2017." *Trib Live*. November 4, 2016.
10. Whoriskey, P. & Keating, D. "How a secretive panel uses data that distort doctors' pay." *The Washington Post*. July 20, 2016.
11. Maremont, M. "Mylan's EpiPen Pretax Profits 60% Higher Than Number Told to Congress." *The Wall Street Journal*. September 26, 2016.

12. Beck, M. "How Telemedicine is Transforming Health Care." *The Wall Street Journal*. June 26, 2016.
13. CMS. (2016). "Hospital Value-Based Purchasing."
14. The Interstate Medical Licensure Compact. (September 2016). Expanding Access, Protecting Patients: The Interstate Medical Licensure Compact.
15. Meyer, H. "For-profit hospitals blaze separate paths to efficiency, quality." *Modern Healthcare*. May 28, 2016.
16. "American employers are rethinking their role in workers' health care." *The Economist*. August 23, 2014.
17. UPMC Fast Facts: Charity Care (Skim only)

## **Week 12 – November 14, 2017**

### **History of Health Reform in the US**

#### **Exemplar: 2010 Affordable Care Act**

Everette James

#### Learning Guidance:

1. Familiarize yourself with the history of significant health policies and programs in the United States (Hill Burton, Medicare, Medicaid, HMO Act, Clinton Health Security Act, Medicare part D)
2. Understand the common elements and themes of U.S. health policy since 1900
3. Familiarize yourself with the business, legal, political and public health aspects of U.S. health policy leading up to the Affordable Care Act

#### Required Reading:

1. NY Times website – "A History of Overhauling Health Care" – [http://www.nytimes.com/interactive/2009/07/19/us/politics/20090717\\_HEALTH\\_TIMELINE.html](http://www.nytimes.com/interactive/2009/07/19/us/politics/20090717_HEALTH_TIMELINE.html)
2. Paul Starr, *Remedy and Reaction*, Ch. 1, "Evolution Through Defeat", pp. 27-50 (PDF available on Coursweb)
3. Paul Starr, *Remedy and Reaction*, Ch. 2, "Stumbling Toward Comprehensive Reform", pp. 51-76 (PDF available on Coursweb)
4. Paul Starr, *Remedy and Reaction*, Ch. 3, "Shaping of Clinton Health Plan", pp. 79-102 (PDF available on Coursweb)
5. Kaiser Family Foundation, "National Health Insurance – A Brief History of Reform Efforts in the U.S." (PDF available on Coursweb)

#### Optional Reading:

1. Colin Gordon, 2003, *Dead on Arrival, The Politics of Health Care in Twentieth-Century America*, Princeton University Press, Chapter One, The Political Economy of American Healthcare, pp.12-21
2. Blendon, Robert J. and John M. Benson. 2001. "Americans' Views on Health Policy: A Fifty-Year Historical Perspective." *Health Affairs*, 20(2), March/April: 33-46.

3. Hacker, J. *The Divided Welfare State: The Battle over Public and Private Social Benefits in the United States*, Cambridge University Press, 2002, pp. 221-243

### **Week 13 – November 21, 2017**

#### **The Affordable Care Act and Public Health: Implementation of the ACA**

Everette James

#### Learning Guidance:

1. Understand the structure and policy objectives of the Affordable Care Act.
2. Analyze the public health impacts of the 2010 Affordable Care Act.
3. Identify health reform implementation issues that will affect the health status of the U.S. population.
4. Apply principles of marketing and communication through appropriate channels and technologies to the Affordable Care Act.
5. Critically compare emerging health reform to previous and current reform efforts and laws

#### Required Reading:

1. Jost, T. S. (2017). Navigating A Post-AHCA Landscape. *Health Affairs*, 36(5), 789-790.
2. Wilensky, Gail R. "The Future of the ACA and Health Care Policy in the United States." *JAMA*. 2016.
3. James AE, Levine AS, *The Inevitability of Health Reform*. Duquesne Law Review. 2012; 50 Duq. L. Rev. 235
4. Starr, P. *Remedy and Reaction: The Peculiar American Struggle Over Health Care Reform*. Chapter 8 (PDF available on Courseweb)
5. Fox DM and Markel D. "Is History Relevant in Implementing Health Reform?", *JAMA* 2010, 303(17), 1749-50
6. Frontline Video: "Obama's Deal"  
<http://www.pbs.org/wgbh/pages/frontline/obamasdeal/>

#### Optional Reading:

1. Oberlander J. "Long Time Coming: Why Health Reform Finally Passed," *Health Affairs* 2010, 29(6), 1112-6
2. Cutler, David M. "From the Affordable Care Act to Affordable Care." *JAMA*. 2015, 314(4).
3. Bachrach, D., Ario, J., and Davis, H. "Innovation Waivers: An Opportunity for States to Pursue Their Own Brand of Health Reform." *Realizing Health Reform's Potential. The Commonwealth Fund*. April 2015.
4. Buchmueller, T., Carey, C., and Levy, H. "Will Employers Drop Health Insurance Coverage Because of the Affordable Care Act?" *Health Affairs*. 2013. 32(9) 1522-

**Week 14 – November 28, 2017**

**The American Health Care Act and Future Prospects for Reform**

Everette James

Learning Guidance:

1. Understand the structure and policy objectives of the American Health Care Act.
2. Identify the impacts of the American Health Care Act on access, health outcomes, and cost of care for the U.S. population.
3. Critically compare emerging health reform proposals to the American Health Care Act.

Required Reading:

1. Jost, T.S. (2017). ACA Replacement Bill from Cassidy and Colleagues Offers State Options, Roth HSAs. *Health Affairs Blog*.
2. Jost, T.S. (2017). Examining the House Republican ACA Repeal and Replace Legislation. *Health Affairs Blog*.
3. Jost, T. S. (2017). Navigating A Post-AHCA Landscape. *Health Affairs*, 36(5), 789-790.
4. Jost, T.S. (2017). House GOP Moves to Add 'Invisible Risk Sharing Program' to AHCA; Other ACA Developments. *Health Affairs Blog*.
5. Proposed Legislation:
  - a. American Health Care Act of 2017. HR 1628. 115<sup>th</sup> Cong. (2017).
  - b. Patient Freedom Act of 2017. S.191, 115<sup>th</sup> Cong. (2017).
  - c. Health Coverage State Flexibility Act of 2017. HR 710. 115<sup>th</sup> Cong. (2017).
  - d. Plan Verification and Fairness Act of 2017. HR 706. 115<sup>th</sup> Cong. (2017).
  - e. State Age Rating Flexibility Act of 2017. HR 708. 115<sup>th</sup> Cong. (2017).
  - f. Budget Reconciliation Legislative Recommendations Relating to Repeal and Replace of the Patient Protection and Affordable Care Act. HR 115-52. 115<sup>th</sup> Cong. (2017).
6. DeBonis, M. & Snell, K. (2017). House GOP discusses Obamacare replacement ideas—but doesn't call them a plan. *Washington Post*. Retrieved from: [https://www.washingtonpost.com/powerpost/house-gop-discusses-obamacare-replacement-ideas--but-doesnt-call-them-a-plan/2017/02/16/340aa49e-f442-11e6-b9c9-e83fce42fb61\\_story.html?utm\\_term=.78cf757c72b1](https://www.washingtonpost.com/powerpost/house-gop-discusses-obamacare-replacement-ideas--but-doesnt-call-them-a-plan/2017/02/16/340aa49e-f442-11e6-b9c9-e83fce42fb61_story.html?utm_term=.78cf757c72b1)
7. Ryan, P. (2017). Obamacare Repeal and Replace: Policy Brief and Resources. Retrieved from: <https://www.documentcloud.org/documents/3462817-House-GOP-Health-Care-Policy-Memo.html>
8. Meyer, H. (2017). House Republicans offer bill to stabilize the individual insurance market. *Modern Healthcare*. Retrieved from:

<http://www.modernhealthcare.com/article/20170130/NEWS/170139989/house-republicans-offer-bills-to-stabilize-the-individual-insurance>

9. Committee on Energy & Commerce & Committee on Ways and Means. (2017). *Manager's Amendment: Section-by-Section Summary*.
10. Kaiser Family Foundation. (2017). Compare Proposals to Replace the Affordable Care Act. *Health Reform*. Retrieved from: <http://www.kff.org/interactive/proposals-to-replace-the-affordable-care-act/>
11. Bagley, N. & Sachs, R. (2017). Uncertainty (Still) has Consequences—and Trump Knows It. *Take Care*. Retrieved from: <https://takecareblog.com/blog/uncertainty-still-has-consequences-and-trump-knows-it>

### **Week 15 – December 5, 2017**

No Class – Policy Briefs due

Learning Guidance:

1. Gain experience with and competency in policy analysis by creating a concise summary of an important health policy issue, analyzing potential policy options, and offering a recommendation on the best policy to address the issue.
2. Advocate for political, social or economic policies and programs that will improve health in diverse populations.
3. Evaluate policies for their impact on public health and health equity

### **Week 16 – December 12, 2017**

Final Exam

**Educational Policies and Curriculum Committee**  
**Graduate School of Public Health**  
**University of Pittsburgh**  
**(Revised: 9/22/2015)**

**REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES**

1. **General Instructions:**

- a. Faculty should submit this form and the associated syllabus following the Pitt Public Health Syllabus Guidelines and the Syllabus Checklist (on pages 4 and 5) **by e-mail** to Patricia Documet, Chair ([pdocumet@pitt.edu](mailto:pdocumet@pitt.edu)) and Robin Leaf, EPCC Staff Liaison ([ral9@pitt.edu](mailto:ral9@pitt.edu)). If you choose not to include all the information detailed on the Syllabus Guidelines in your course syllabus for distribution to students, please attach this information to the proposal.
- b. The initiating Department is asked to submit one hard copy of this completed form with the proper signatures, syllabus and other materials (if any) to Robin Leaf in Student Affairs **at least one week prior** to the EPCC meeting. If this target date is not met, the proposal will be deferred for consideration at the next meeting scheduled.
- c. You will be contacted by the EPCC Chair or the EPCC Staff Liaison to schedule a presentation and discussion of your program/course proposal with the Committee, if possible at the next scheduled EPCC meeting.

2. **Review based on the following (check all which apply):**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> New course, not previously approved | <input type="checkbox"/> Course modification (major)               |
| <input type="checkbox"/> Course title change                            | <input type="checkbox"/> Special topics course content             |
| <input type="checkbox"/> Cross-listing only                             | <input checked="" type="checkbox"/> Pitt Public Health Core Course |
| (Specify academic unit & course number): _____                          | <input type="checkbox"/> Practicum, internship, field placement    |

3. **Course designation:**

Course Number XXXX Title Foundations of Public Health (working title) Credits 1

4. **Cross-listing:**

If you want to cross-list this course in any other Pitt Public Health department or any other school of the University, specify which department(s) and School(s) and provide brief justification.

5. **Course Instructors:**

(Indicate type of Pitt Public Health faculty appointment,\* and percentage of total course time/effort anticipated. For any instructor who does not hold a Pitt Public Health faculty appointment, indicate her/his title and affiliation.)

- a. Principal instructor: Jessica G. Burke, PhD, MHS, Associate Professor (BCHS) (100%)

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\* The principal instructor for any Pitt Public Health course must have a primary, secondary or adjunct appointment in the school.

b. Co-instructors (if any):

6. **Statement of the course for *Course Inventory*.** Include purpose of course; summary of prerequisites, if any; general course content; and method of conducting course (e.g., lecture, laboratory, field work, etc.).

This one-credit course is required for during the first term for incoming MPH students and is aimed at introducing students to core foundational concepts of public health and providing them with an overview of notable PITT Public Health and Pittsburgh based successes. The course was designed so that students can learn on their own and at their own pace. Course content is divided into seven on-line modules containing brief video lecture and case example segments and organized in a recommended (though not required) sequencing. Students will be allowed seven weeks to progress through the content and assessments. The course will conclude with a mandatory meeting at the middle of the term (approximately week 8). A resource list of relevant PITT Public Health courses will be included in each module in order to encourage additional exploration of the topics.

7. **Student enrollment criteria/restrictions:**

- a. Indicate any maximum or minimum number of students and provide justification for this limitation.

There is no maximum or minimum number of students planned for this course.

- b. If admission is by permission of instructor, state criteria to be applied.

N/A

- c. Provide a brief description of any prerequisite skills or knowledge areas that are necessary for students entering this course, including any specific course prerequisites or equivalents.

None.

8. **Course schedule and allocation of hours:**

- a. Number of course hours per session est. 1 Sessions per week \_\_\_\_\_ Weeks per academic term 8

- b. Approximate allocation of class time (hours or %) among instructional activities:

Lectures 95% Seminars \_\_\_\_\_ Recitations 5% Field work \_\_\_\_\_ Laboratory \_\_\_\_\_

Other (specify): Online modules will be self-paced. Students will have the choice to complete one module a week or to complete in a more compressed time frame. There will also be at minimum one in-person session that all students must attend.

- c. Term(s) course will be offered: Fall X Spring X Summer Term \_\_\_\_\_ Summer Session \_\_\_\_\_

9. **Grading of student performance:**

Indicate the grading system to be used (A, B, C, etc.; H, S, U); provide statement justifying use of system other than letter grade.

S/U grade

10. **On-line course delivery:**

Indicate the extent to which you will be using on-line instructional methods in teaching this course by checking all of the options below which apply:

I plan to use the course management aspects of CourseWeb/ Blackboard (or equivalent), e.g., grade book, announcements.

I plan to use the interactive features of CourseWeb/Blackboard (or equivalent), e.g., discussion board, etc.

I have designed the course for remote (off-site) learning with little/no classroom attendance required.

I do not plan to use on-line instruction methods for this course (briefly explain)

11. **Relevance of course to academic programs and curricula:**

- a. Describe how this course contributes to learning objectives specified for the curriculum of one or more Pitt Public Health degree or certificate programs. Indicate whether course is required for any specified degree or certificate.

This course will be the foundation to the MPH core curriculum. It will be a required course to be completed during a student's first semester.

Our program is accredited by the Council on Education in Public Health (CEPH) as a school authorized to offer the Master of Public Health (MPH) degree. Part of that accreditation requires us to provide instruction in Public Health competencies (notated using italic in the following learning objectives). Upon completion of this course, students will be able to:

- Explain public health history, philosophy and values;
- Identify the core functions of public health and the 10 Essential Services;
- Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health);
- Explain how globalization affects global burdens of disease;
- Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc. and
- Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.

This will be a required course for the MPH degree from Pitt Public Health.

- b. Describe how this course addresses public health issues involving diversity (gender, race, ethnicity, culture, disability, or family status).

The course will cover various introductory topics of public health including diversity as part of module segments on public health philosophy and values, interprofessional practice, globalization and global burdens of disease. Also, specific studies or milestones that came out of Pitt Public Health will be incorporated. A few examples include: Pitt Men's Study, CHIP, and the opioid epidemic.

12. **Signature and date of principal faculty member (include department/program) making request:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

13. **Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

14. (For cross-listing only)

**Signature and date of endorsement of department chairperson:**

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Educational Policies and Curriculum Committee  
Graduate School of Public Health  
University of Pittsburgh  
(11/19/2013)**

**SYLLABUS CHECKLIST FOR NEW AND REVISED COURSES**

**Addendum to REQUEST FOR APPROVAL OF NEW COURSES AND COURSE CHANGES FORM**

*Objective to assist faculty to ensure syllabus contains the required and necessary elements  
to provide students with clear expectations of the course.*

NOTE: \* indicates a required element of the syllabus. If N/A is checked or this element is not included  
complete the information detailed on page two for all instances.

<b>Syllabus Area</b>	<b>Recommended Detail * Required</b>	<b>Included in Your Syllabus?</b>					
<b><i>Heading</i></b>	Course Number*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Course Title*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Course Meeting Time/Day of Week*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Classroom Location*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<b><i>Faculty Information</i></b>	Office Location*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Office Hours*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Phone Number*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Email Address*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Teaching Philosophy	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Teaching Assistant Contact	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<b><i>Student Expectations in Classroom</i></b>	Behavior/ Ground Rules (cell phones off, laptops off, etc.)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Recording of Lectures	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<b><i>Course Summary</i></b>	Course Description*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Learning Objectives*	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<b><i>Materials</i></b>	Required Textbooks/ Articles/Readings	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Required Software	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Required Equipment (including use of CourseWeb/Blackboard)	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
	Recommended Material	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Availability of Software for Purchase and/or Use	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>



## UPDATED 9.1.17

Graduate School of Public Health

PUBHLT xxxx –**Foundations of Public Health**

Course Meeting Day(s) and Time(s): Self-paced training through Weeks 1 – 8 and follow-up meeting scheduled for xx/xx/xx

Class Location: TBD

Credit Hours: 1

Term/Academic Year

### **Primary Faculty:**

INSERT INFORMATION INCLUDING NAME, OFFICE LOCATION, EMAIL ADDRESS, PHONE NUMBER AND OFFICE HOURS

### **Teaching Assistant:**

INSERT INFORMATION INCLUDING NAME, OFFICE LOCATION, EMAIL ADDRESS, PHONE NUMBER AND OFFICE HOURS

### **Course Description:**

This one-credit course is required for during the first term for incoming MPH students and is aimed at introducing students to core foundational concepts of public health and providing them with an overview of notable PITT Public Health and Pittsburgh based successes. The course was designed so that students can learn on their own and at their own pace. Course content is divided into seven on-line modules containing brief video lecture and case example segments and organized in a recommended (though not required) sequencing. Students will be allowed seven weeks to progress through the content and assessments. The course will conclude with a mandatory meeting at the middle of the term (approximately week 8). A resource list of relevant PITT Public Health courses will be included in each module in order to encourage additional exploration of the topics.

### **Learning Objectives**

Our program is accredited by the Council on Education in Public Health (CEPH) as a school authorized to offer the Master of Public Health (MPH) degree. Part of that accreditation requires us to provide instruction in Public Health competencies (notated using italic in the following learning objectives). Upon completion of this course, students will be able to:

1. *Explain public health history, philosophy and values;*
2. *Identify the core functions of public health and the 10 Essential Services;*
3. Identify the structure, roles, and functional public health components of the Department of Health and Human Services and related domestic and global health programs;
4. Discuss the importance of inter-professional practice in domestic and international workforce development;
5. *Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health);*
6. *Explain how globalization affects global burdens of disease;*
7. *Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.;*
8. *Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health;*
9. Recognize the benefits and challenges associated the multi-disciplinary collaboration;

10. Explain the critical importance of evidence in advancing public health knowledge;
11. Discuss ethical issues relevant to public health research and practice;
12. Discuss with the interface between public health science and policy, and the role of public health science in protecting and advocating for the health of the public.

### **Required Course Content**

Students will have to complete seven (7) online modules and the accompanying assessments with 80% accuracy. Each assessment can be attempted two (2) times. Another course component is attendance and participation at a mandatory follow-up meeting, either physically or virtually, upon completion of the modules.

### **CourseWeb/BlackBoard Instruction**

This course will use the University's BlackBoard site (also known as CourseWeb). It is the student's responsibility to check for, and read, this material in a timely manner. The instructor will use the CourseWeb site and Pitt email as the primary means of communicating with the students, who are expected to check these on a regular basis throughout the semester.

### **Required or Recommended Equipment**

Students are required to have access to a computer with Flash capabilities to view the videos embedded within the course.

### **Grading Scale**

This course will be graded on a pass/fail basis (S/U).

### **Student Performance Evaluation (Assessments and Weights)**

To earn a pass mark (S), students must complete all of the course modules and score 80% or above on all of the assessments as well as attend the mandatory follow-up meeting.

### **Accommodation for Students with Disabilities**

If you have any disability for which you may require accommodation, you are encouraged to notify both your instructor and the Office of Disability Resources and Services, 140 William Pitt Union (Voice or TTD 412-648-7890) as early as possible in the term.

### **Academic Integrity Statement**

All students are expected to adhere to the school's standards of academic honesty. Any work submitted by a student for evaluation must represent his/her own intellectual contribution and efforts. The Graduate School of Public Health's policy on academic integrity, approved by EPCC on 10/14/08, which is based on the University policy, is available online in the Pitt Public Health Academic Handbook ([www.publichealth.pitt.edu/home/academics/academic-requirements](http://www.publichealth.pitt.edu/home/academics/academic-requirements)). The policy includes obligations for faculty and students, procedures for adjudicating violations, and other critical information. Please take the time to read this policy.

Students committing acts of academic dishonesty, including plagiarism, unauthorized collaboration on assignments, cheating on exams, misrepresentation of data, and facilitating dishonesty by others, will receive sanctions appropriate to the violation(s) committed. Sanctions include, but are not limited to, reduction of a grade for an assignment or a course, failure of a course, and dismissal from the school.

All student violations of academic integrity must be documented by the appropriate faculty member; this documentation will be kept in a confidential student file maintained by the Office of Student Affairs. If a sanction for a violation is agreed upon by the student and instructor, the record of this agreement will be expunged from the student file upon the student's graduation. If the case is referred to the Pitt Public Health Academic Integrity Hearing Board, a record will remain in the student's permanent file.

### **Diversity Statement**

*In this course, students, faculty and guests represent a diversity of individual perspectives, backgrounds, and experiences, which enriches our classes. We urge all to be respectful of others. While intellectual disagreement may be constructive, no harsh statements, or demeaning or discriminatory behavior will be permitted. If you feel uncomfortable, please feel free to approach me to discuss the situation.*

### **Copyright Notice**

*Course material may be protected by copyright. United States copyright law, 14 USC section 101, et sec., in addition to University policy and procedures, prohibit unauthorized duplication or retransmission of course materials. See [Library of Congress Copyright Office](#) and the [University Copyright Policy](#).*

## **COURSE SCHEDULE (Note: presenters need to be confirmed)**

### **MODULE 1 – PUBLIC HEALTH HISTORY**

Learning Objectives:

1. Introduction to course content and structure.
2. Define health and public health.
3. Provide an overview of the history of public health and key events.
4. Introduce public health philosophy and values.
5. Describe the connection between PITT Public Health and the World Health Organization definition of Health

Content:

Online pre-recorded presentations by Dr. Donald Burke, Dean, PITT Public Health & Jamie Sokol, Allegheny County Health Department

Short film segment about the history of the WHO organization definition of health

### **MODULE 2 – CORE FUNCTIONS OF PUBLIC HEALTH**

Learning Objectives:

1. Define the scope of public health.
2. Identify the core functions of public health.
3. Describe the 20 essential services of public health.

Content:

Online pre-recorded presentation by Dr. Wendy Braund, Professor, Department of Health Policy and Management, Director of the Center for Public Health Practice and associate dean for public health practice.

History of the founding of PITT Public Health ([www.publichealth.pitt.edu/home/about/history-mission-vision](http://www.publichealth.pitt.edu/home/about/history-mission-vision))

### **MODULE 3 – PUBLIC HEALTH STRUCTURE & IPE**

Learning Objectives:

1. Describe the structure, roles, and functional components of DHHS
2. Illustrate the intersection of DHHS with domestic and global public health programs and initiatives
3. Explain interprofessional practice and its 4 domains
4. Discuss the importance of interprofessional practice in domestic and international workforce development.
5. Describe examples of range of grants, contracts and cooperative agreements held by PITT Public Health faculty.

Content:

Online pre-recorded presentation by Dr. Linda Frank, Professor, Department of Infectious Disease and Microbiology

Short film segment highlighting ACHD

### **MODULE 4 – THE ECOLOGICAL PERSPECTIVE, PREVENTION AND HEALTH PROMOTION**

Learning Objectives:

1. Describe the major determinants of health and well-being.
2. Introduce an ecological approach to public health and explain how the model can be used to identify prevention and health promotion opportunities.
3. Describe how globalization affects global burdens of disease
4. Define primary, secondary and tertiary prevention in population health.
5. Describe Pitt Public Health National Cancer Institute-funded epidemiological studies of steelworkers in the 1950s and their increased risk factor for lung cancer.
6. ZIKA?

Content:

Online pre-recorded presentation by Dr. Thistle Elias, Assistant Professor, Department of Behavioral and Community Health Sciences

Short film(s) about cancer and zika

### **MODULE 5– THE ROLE OF QUANTITATIVE AND QUALITATIVE METHODS IN ASSESSING A POPULATION’S HEALTH**

Learning Objectives:

1. Define quantitative, qualitative and mixed methods.
2. Discuss strengths and weaknesses of quantitative and qualitative methods in describing and assessing a population’s health.
3. Describe current efforts of PITT Public Health faculty to address the complex public health issues of opioid use.

Content:

Online pre-recorded presentation by Dr. Jessica Burke, Associate Professor, Department of Behavioral and Community Health Sciences

Short film(s) – mixed methods study of Monessen

## **MODULE 6 – EVIDENCE IN ADVANCING PH KNOWLEDGE**

Learning Objectives:

1. Describe the benefits and challenges associated the multi-disciplinary collaboration.
2. Define evidence-based practice.
3. Describe how evidence can be used to advance public health research and practice.
4. Address ethical issues relevant to public health research and practice.
5. Examine the impact of one of the longest-running studies in Pitt history, the Pitt Men’s Study of HIV/AIDS.
6. Understand how the PITT Public Health study that evaluated the health care provided to uninsured low-income children in southwestern Pennsylvania contributed to the expansion of the Children’s Health Insurance Program (CHIP).

Content:

Online pre-recorded presentation by [To be determined]

## **MODULE 7 – ADVOCACY FOR PH, TRANSLATION IN PH**

Learning Objectives:

1. Discuss the interface between public health science and policy.
2. Explain the role of public health science in protecting and advocating for the health of the public
3. Introduce public health professional organizations including APHA

Content:

Online pre-recorded presentation by Elizabeth VanNostrand, Director, JD/MPH Program, Health Policy and Management and Assistant Professor, Health Policy and Management

APHA position papers

**DISCUSSION SESSION – wrap up**

**Graduate School of Public Health  
Educational Policies and Curriculum Committee  
Meeting Minutes | August 3, 2017**

Present: Andriy Bandos, Jessie Burke, Mary Derkach, Patricia Documet, Eleanor Feingold, Nancy Glynn, Nicole Grant, Robin Leaf, Jeremy Martinson, Patricia Opresko, Kimmy Rehak, and John Shaffer.

The meeting was called to order at 1:30 pm by Dr. Patricia Documet, Chair.

**Revised Course | EOH 2013, *Environmental Health and Disease***

Dr. Aaron Barchowsky presented an application for a revised core course that accounts for a reduction from 3 to 2 credit hours. This reduction was made to keep the total credit number for the MPH core curriculum from increasing too much. He explained that his course would keep the weekly hour and a half long lecture but would reduce the amount of time students spent doing work online outside of the classroom in order to justify the loss of credit hour. Once the new curriculum is introduced, only a half of an hour of outside work will be required. Students will no longer have to build wikis and instead of participating in an online discussion board weekly, they will have to do so on a biweekly basis.

**ACTION:** The committee approved the course with no changes.

**Update on Overall MPH Core Curriculum, Jessie Burke**

Dr. Jessie Burke, Associate Dean for Education, reported that the total credit number for the MPH core curriculum would be 21 credits, as the Foundations course (a reintroduced Overview course) has evolved to a 1 credit course and the Capstone course will stay at 2 credits. The work load for each course could not justify either class being fewer credits. The name of the Capstone course will potentially be changed to Applications. Jessie also mentioned that the syllabi for new or overhauled MPH core classes might be generic when they first are presented at EPCC as the courses are still being developed and changes need to be implemented in fall 2018.

**ACTION:** No action needed.

**Brief Update on DrPH Curriculum Revisions, Jessie Burke**

Dr. Jessie Burke, reported that the DrPH committee has been meeting to figure out how to address the new CEPH competencies, especially as many of these competencies are not being addressed in the current DrPH curricula. She has met with Mark Rogers in HPM to discuss HPM's adding a DrPH program as a few of the department's classes already cover a number of the new competencies. The committee has started to map out a plan for course sequencing and intend to develop a case-based year-long course for each new cohort of DrPH students to address the competencies that are not addressed in other required courses. She also mentioned that the committee has contacted alumni in the area and a few have expressed interest in helping to teach this new course.

**ACTION:** No action needed.

**Revised Course | PUBHLT 2015, *Public Health Biology*, Jeremy Martinson**

Dr. Jeremy Martinson presented an application for a revised core course, indicating a statement in the beginning of the syllabus that was revised to explain how the class was addressing the new CEPH

competencies. He mentioned that he is rolling out these changes in fall 2017 and spring 2018 and may change the assessment descriptions so that they also include information about which competencies are being assessed. This comment prompted a short discussion about whether there was a need to standardize the presentation of competencies and learning outcomes across the MPH core classes.

**ACTION:** The committee approved the course with no changes; no decision was made regarding the standardization of competency presentation.

### **Revised Courses | BIOST 2011, *Principles of Statistical Reasoning* and BIOST 2041, *Introduction to Statistical Methods I*, Rob Krafty**

Dr. Rob Krafty presented applications for two revised core courses which he explained had previously been revamped within the last two years to distinguish them from one another. BIOST 2011 is a terminal course in which students are exposed to statistical literature and perform calculations using statistical programs. He also distinguished that while BIOST 2041 can be a stand-alone course, it also serves as preparation for BIOST 2042 and requires students to perform mathematical equations in addition to calculations through statistical programs. This prompted a brief discussion on whether the statistical programs being used for these courses should be changed. The committee decided that if students have to learn different statistical software programs throughout the course of their MPH program, it would be beneficial. The MPH competencies that are addressed in both courses were explicitly stated within the syllabi. It was also mentioned that the students in BIOST 2041 might need more interpretation experience in order to satisfy CEPH competency 4.

**ACTION:** The committee approved the courses with no changes.

### **New Certificate Program | BCHS, *Certificate in Women's and Children's Health*, Martha Terry**

Dr. Martha Terry presented an application for a new certificate program which would interest students in Pitt Public Health as well as students studying Social Work and Anthropology. This is a 15-credit program, which includes an Intro to Women's and Children's Health class, two electives, a methods course, a Capstone-like course, and a 200 hour on-site practicum. Committee members questioned the overlap between the certificate and certain degree programs, and Dr. Terry confirmed that a relevant practicum could suffice for both a student's program and certificate. The committee questioned what should happen in the case where the requirements for the certificate also happened to satisfy a student's degree program and recommended something similar to what is done to the Health Equity certificate program be adopted. For instance, 3 extra credits could be taken or an additional experience (e.g., presenting at a journal club) would have to be done in such cases. It was unclear from the application who could enroll in the course, and Dr. Terry explained that non-degree students were also allowed to enroll in the certificate. It was mentioned that Learning Assessment Outcomes for the Provost office would need to be added. Dr. Nancy Glynn mentioned that a number of the Epidemiology courses listed in the proposal are not offered every year, and suggested that that be explicitly stated in the description. There was then a discussion on the scope of the certificate and what was the best name for the certificate, since most of the courses listed focused on women's health issues. Additionally, there was a brief discussion on which other courses available within Pitt Public Health could be added to the program application (e.g., HUGEN courses).

**ACTION:** The committee voted to conditionally approve the certificate program, contingent upon making a number of changes and additions and presenting them again at a future EPCC meeting. The committee recommended that the scope of the course be more clearly defined: if the focus is on both women's and children's health issues, more classes on the latter need to be added to the curriculum. However, if the focus is primarily on women's health issues, the name of the certificate program should be changed.

Learning assessment objectives should be written and included in the proposal. Administrative criteria, especially regarding permitted credit overlap and who can enroll in the certificate program, needs to be more clearly defined. Additional courses offered in Pitt Public Health, including Public Health Genetics, should be considered and added to the certificate program. Additionally, elective courses not offered yearly should be clearly marked in the syllabus to help with schedule planning.

**Revised Course | EPIDEM 2110, *Principles of Epidemiology*, Tom Songer**

Dr. Tom Songer presented an application for a revised core course which is responsive for one of the new competency, which is included in the syllabus under Course Objectives. He explained how not much has changed in terms of content in the syllabus and that the homework and some parts of the assessments will secondary competencies but that is not indicated in the syllabus.

**ACTION:** The committee approved the course with no changes.

**Approval of July Meeting Minutes, All**

The July meeting minutes were approved.

The meeting was adjourned at 3:38 pm.