

**INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020**

TAB	DESCRIPTION	ACTION
1	BOARD POLICY III.E – CERTIFICATES AND DEGREES – SECOND READING	Action Item
2	BOARD POLICY III.Z. – PLANNING AND DELIVERY OF POSTSECONDARY PROGRAMS AND COURSES – SECOND READING	Action Item
3	BOISE STATE UNIVERSITY – MASTER OF PUBLIC HEALTH	Action Item
4	GRADUATE MEDICAL EDUCATION COMMITTEE (GME) ANNUAL REPORT	Information Item
5	UNIVERSITY OF UTAH ANNUAL REPORT	Information Item

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

SUBJECT

Board Policy III.E. Certificates and Degrees – Second Reading

REFERENCE

December 2013	Board approved first reading of amendments to Board Policy III.E that included updates to definitions for technical certificates and credit hour.
February 2014	Board approved the second reading of amendments to Board Policy III.E.
June 2018	Board approved the first reading of amendments to Board Policy III.E and asked staff to provide a definition of an applied baccalaureate degree, separate from the academic baccalaureate degree.
February 2019	Board approved another first reading of amendments to Board Policy III.E due to changes between readings. This included a definition of an applied baccalaureate degree and a definition of microcertifications.
April 2019	Board approved second reading of amendments to Board Policy III.E.
June 2020	Board approved the first reading of amendments to Board Policy III.E that added a definition of a specialized certificate.

APPLICABLE STATUTES, RULE OR POLICY

Idaho State Board of Education Governing Policies & Procedures, Section III.E.

BACKGROUND/DISCUSSION

Board policy III.E. provides definitions for approved certificates and degrees, including credit requirements for career technical education programs and academic programs. The proposed amendment adds a definition of a specialized certificate that would provide individuals who already hold a certificate or degree additional opportunities to further develop and/or upgrade skills in an occupation.

IMPACT

The proposed amendment will distinguish a specialized certificate from the current academic, basic, intermediate, and advanced technical certificates currently defined in Board policy III.E. The amendment will provide institutions with flexibility in developing proficiencies that move beyond basic and intermediate levels.

ATTACHMENTS

Attachment 1 – Board Policy III.E. Certificates and Degrees – Second Reading

STAFF COMMENTS AND RECOMMENDATIONS

Idaho Division of Career Technical Education and the Technical College Leadership Council identified a need to develop a specialized certificate that will recognize specific industry needs. The certificate would be awarded for completion

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

of specific, industry-validated courses that are sequenced for the purpose of developing and upgrading skills in an occupation.

The Instruction, Research and Student Affairs committee and the Council on Academic Affairs and Programs reviewed the proposed policy amendments at their May 2020 meetings, respectively. The Board conducted a first reading of the proposed policy amendment on June 10, 2020. There were no changes between the first and second reading of this policy.

Board staff recommends approval.

BOARD ACTION

I move to approve the second reading of proposed amendments to Board policy III.E. Certificates and Degrees as submitted in Attachment 1.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: E. Certificates and Degrees

[April 2019](#) [August 2020](#)

1. Definitions

Programs of instruction require specified numbers of credits earned through educational work on the part of students. Completion of the program of instruction results in the awarding of a certificate to or conferring of a degree upon the student by the faculty and the Chief Executive Officer. The following definitions have been approved by the Board:

a. CERTIFICATES:

i. Academic Certificate of Completion

A credential awarded for completion of a coherent program of study consisting of six (6) semester credits or less, representing a coherent body of knowledge that does not lead to an academic undergraduate certificate or a degree.

ii. Academic Undergraduate Certificate

A credential awarded for completion of a coherent program of study consisting of seven (7) semester credits or more, representing a coherent body of knowledge that may lead to an academic degree.

iii. Graduate Certificate

A credential awarded for completion of a coherent program of study consisting of nine (9) or more semester credits of graduate course work, representing a coherent body of knowledge that may lead to a degree or may be unique and standalone.

iv. Technical Certificate of Completion

A career technical credential awarded by the institution consisting of seven (7) semester credits or less that represents mastery of a defined set of competencies.

v. Basic Technical Certificate

A credential awarded for completion of requirements in an approved career technical program of at least eight (8) semester credit hours and represents mastery of a defined set of competencies.

vi. Intermediate Technical Certificate

A credential awarded for the completion of requirements in an approved career technical program of at least 30 semester credit hours and represents mastery of a defined set of competencies.

vii. Advanced Technical Certificate

A credential awarded for completion of requirements in an approved career

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: E. Certificates and Degrees

April 2019 August 2020

technical program of at least 52 semester credit and represents mastery of a defined set of competencies.

viii. Microcertification

A credential in a narrowly focused area within career technical program or academic program that confirms mastery through a formal assessment of a specific industry-related skillset or topic. Completion of multiple microcertification courses may lead to a certificate.

ix. Specialized Certificate

A credential awarded upon successful completion of specific courses that have been industry validated and sequenced for the purpose of developing and upgrading skills in an occupation.

- b. ASSOCIATE OF APPLIED SCIENCE DEGREE: A credential awarded for completion of requirements in an approved career technical program of at least 60 semester credits (includes a minimum of 15 general education credits) and represents mastery of a defined set of competencies. An Advanced option may be awarded for additional credits of at least 15 credit hours that are beyond the A.A.S. degree.
- c. ASSOCIATE DEGREE: A credential awarded for completion of requirements entailing the equivalent of at least 60 semester credits of academic work. An Associate Degree shall not require more than 60 semester credits unless necessary for matriculation to a specific baccalaureate program or for unique accreditation, certification, or professional licensure purposes or by exception approved by the Board.
- d. BACCALAUREATE DEGREE: A credential awarded for completion of requirements entailing the equivalent of at least 120 semester credits of academic work. A baccalaureate degree shall not require more than 120 semester credits unless needed for unique accreditation, certification, professional licensure purposes, or by exception approved by the Board.
- e. APPLIED BACCALAUREATE DEGREE: A credential awarded for completion of requirements entailing the equivalent of at least 120 semester credits of academic and career technical coursework (includes a minimum of 36 general education credits). An applied baccalaureate degree shall not require more than 120 semester credits unless needed for unique accreditation, certification, or professional licensure purposes or by exception approved by the Board.
- f. GRADUATE DEGREES: A credential awarded for completion of academic work

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: E. Certificates and Degrees

[April 2019](#) [August 2020](#)

beyond the baccalaureate degree, including any required research. Graduate degrees consist of master's degrees, specialist degrees, and doctoral degrees.

2. Academic and Career Technical Credit Hour Requirements

A credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

- a. One (1) hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
- b. At least an equivalent amount of work as required in paragraph (a) of this definition for other academic activities as established by the institution, including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

3. Requirements for Certificate or Degree

Each institution will establish the number of earned credits required for each certificate or degree. The requirements may differ from the general requirements specified in the definitions in subsection 1; however, all credit requirements must receive Board approval in accordance with the program approval policies provided in III.G. Institutional catalogs will specify the required number of earned credits for each certificate or degree.

4. Authorization Required

Programs offered at the institution, as well as the certificates and degrees to which they lead, are subject to review and approval in accordance with the program approval policies provided in III.G. A certificate or degree conferred upon the student is conferred under the authority of the Board.

5. Authorized Certificates and Degrees

A current listing of authorized certificates and degrees awarded by each institution is maintained at the institution by the Chief Executive Officer and for all institutions at the Office of the State Board of Education.

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

SUBSECTION: E. Certificates and Degrees

[April 2019](#) [August 2020](#)

6. Honorary Degrees

Each institution may award honorary degrees, not to exceed the highest level of Board-authorized degrees currently awarded by the institution, to persons in recognition of distinguished achievements at the local, state, or national level in areas such as education, public service, research, sciences, humanities, business, or other professions. The award of an honorary degree must receive the prior approval of the Chief Executive Officer upon recommendation by the faculty.

Each institution will develop its own procedures for seeking nominations for and selecting honorary degree recipients. Those procedures may include a statement of eligibility requirements for honorary degrees. However, no person who is currently employed by the institution, is a member of the Board or the Board's staff, or is an incumbent elected official is eligible for an honorary degree during the term of employment, appointment, or office.

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

SUBJECT

Board Policy III.Z, Planning and Delivery of Postsecondary Programs and Courses
– Second Reading

REFERENCE

October 20, 2016	The Board approved the first reading of the proposed amendments to Board Policy III.Z. that updates institutions' statewide program responsibilities.
December 15, 2016	The Board approved the second reading of proposed amendments to Board Policy III.Z. that updates institutions' statewide program responsibilities.
December 21, 2017	The Board approved the first reading of proposed amendments to Board Policy III.Z. that changes the planning timeframe from five years to three years.
February 15, 2018	The Board approved the second reading of proposed amendments to Board Policy III.Z.
June 21, 2018	The Board approved the first reading of proposed amendments to Board Policy III.Z. adding responsibilities for applied baccalaureate degrees to each region.
August 16, 2018	The Board approved the second reading of proposed amendments to Board Policy III.Z.
June 10, 2020	The Board approved the first reading of proposed amendments to Board Policy III.Z., changing the name of a statewide program listed for the University of Idaho.

APPLICABLE STATUTE, RULE, OR POLICY

Idaho State Board of Education Governing Policies and Procedures, Section III.Z.
Planning and Delivery of Postsecondary Programs and Courses.
Idaho State Board of Education Governing Policies and Procedures, Section III.G.
Postsecondary Program Approval and Discontinuance
Section 33-113, Idaho Code
Section 33-2107A, Idaho Code

BACKGROUND/DISCUSSION

Board Policy III.Z. outlines the processes and procedures for the planning and delivery of statewide and regional programs based on service region and statewide program responsibilities. Statewide program responsibilities are degree and program specific for the University of Idaho, Idaho State University, and Boise State University and are contained in Board Policy III.Z. for each institution. The University of Idaho submitted notification to the Board office of their intent to change the name of their existing B.S. in "Renewable Materials" program to "Forest and Sustainable Products," consistent with procedures set forth in Board Policy III.G. Postsecondary Program Approval and Discontinuance.

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

ATTACHMENTS

Attachment 1 - Planning and Delivery of Postsecondary Programs and Courses –
Second Reading

Attachment 2 - University of Idaho - Notification Letter for Name Change

STAFF COMMENTS AND RECOMMENDATIONS

To ensure alignment of statewide program responsibilities provided in Board policy III.Z., a provision was added to Board policy III.G. that requires institutions to submit in writing any changes to program names or degree titles of statewide programs listed in policy. The proposed change submitted by the University of Idaho would essentially revert the program name of “Renewable Materials” back to its original name of “Forest and Sustainable Products.” The name change will align with industry standards and will be more marketable and identifiable to prospective students.

The Instruction, Research, and Student Affairs committee and the Council on Academic Affairs and Programs reviewed the proposed policy amendments at their May 2020 meetings, respectively. The Board conducted a first reading of the proposed policy amendment on June 10, 2020. There were no changes between the first and second reading of this policy.

Board staff recommends approval.

BOARD ACTION

I move to approve the second reading of proposed amendments to Board Policy III. Z. Planning and Delivery of Postsecondary Education as submitted in Attachment 1.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

The purpose of this policy is to ensure Idaho's public postsecondary institutions meet the educational and workforce needs of the state through academic planning, alignment of programs and courses (hereinafter referred to collectively as "programs"), and collaboration and coordination. This subsection shall apply to the University of Idaho, Boise State University, Idaho State University, Lewis-Clark State College, College of Eastern Idaho, College of Southern Idaho, College of Western Idaho, and North Idaho College (hereinafter "institutions"). The State Board of Education (the Board) aims to optimize the delivery of academic programs while allowing institutions to grow and develop consistent with their vision and mission with an appropriate alignment of strengths and sharing of resources.

This policy requires the preparation and submission of academic plans to advise and inform the Board in its planning and coordination of educational programs in a manner that enhances access to quality programs, while concurrently increasing efficiency, avoiding unnecessary duplication and maximizing the cost-effective use of educational resources. As part of this process, the Board hereby identifies and reinforces the responsibilities of the institutions governed by the Board to deliver Statewide Programs. The provisions set forth herein serve as fundamental principles underlying the planning and delivery of programs pursuant to each institution's assigned Statewide and Service Region Program Responsibilities. These provisions also require collaborative and cooperative agreements, or memorandums of understanding, between and among the institutions.

This policy is applicable to campus-based face-to-face programs, including those that use technology to facilitate and/or supplement a physical classroom experience. It also applies to hybrid and blended programs where a substantial portion of the content is delivered on-line and typically has reduced seat time.

1. Definitions

- a. Designated Institution shall mean an institution whose main campus is located in a service region as identified in subsection 2.b.ii.1) and 2) below.
 - i. For purposes of this policy, with respect to academic programs, Designated Institutions and Partnering Institutions shall have Service Region Program Responsibility for those regions identified in subsection 2.b.ii.1).
 - ii. For purposes of this policy, with respect to career technical programs, Designated Institutions and Partnering Institutions shall include only the College of Southern Idaho, College of Western Idaho, North Idaho College, College of Eastern Idaho, Lewis-Clark State College, and Idaho State University and shall have Service Region Program Responsibility for those regions identified in subsection 2.b.ii.2).

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

- b. A memorandum of understanding (MOU) is an agreement between two or more institutions offering programs within the same service region that details how such programs will be delivered in a collaborative manner. An MOU is intended to provide specific, practical details that build upon what has been provided in each Institution's Plan.
- c. Partnering Institution shall mean either (i) an institution whose main campus is located outside of a Designated Institution's identified service region but which, pursuant to a Memorandum of Understanding, offers Regional Programs in the Designated Institution's primary service region, or (ii) an institution not assigned a Statewide Program Responsibility which, pursuant to a Memorandum of Understanding with the institution assigned the Statewide Program Responsibility, offers and delivers a statewide educational program.
- d. Service Region Program shall mean an educational program identified by the Board to be delivered by a Designated Institution within its respective service region that meets regional educational and workforce needs.
- e. Service Region Program Responsibility shall mean an institution's responsibility to offer and deliver a Service Region Program to meet regional educational and workforce needs in its primary service region as defined in subsection 2.b.ii.1) and 2) below. Service Region Program Responsibilities are assigned to the Designated Institution in each service region, but may be offered and delivered by Partnering Institutions in accordance with the procedures outlined in this policy.
- f. Statewide Program shall mean an educational program identified by the Board to be delivered by a particular institution which meets statewide educational and workforce needs. Lewis-Clark State College, College of Eastern Idaho, North Idaho College, College of Southern Idaho, and College of Western Idaho do not have Statewide Program Responsibilities.
- g. Statewide Program Responsibility shall mean an institution's responsibility to offer and deliver a Statewide Program in all regions of the state. Statewide Program Responsibilities are assigned to a specific institution by the Board, taking into account the degree to which such program is uniquely provided by the institution.

2. Planning and Delivery Process and Requirements

a. Planning

i. Three-Year Plan

The Board staff shall, using the Institution Plans submitted, create and maintain

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

a rolling three (3) year academic plan (Three-Year Plan) which includes all current and proposed institution programs. The Three-Year Plan shall be approved by the Board annually at its August Board meeting.

ii. Institution Plan

Each institution shall, in accordance with a template to be developed by the Board's Chief Academic Officer, create and submit to Board staff a rolling three (3) year academic plan, to be updated annually, that describes all current and proposed programs and services to be offered in alignment with each institution's Statewide and Service Region Program Responsibilities (the Institution Plan). Institution Plans shall be developed pursuant to a process of collaboration and communication with the other institutions in the state.

1) Statewide Programs

Institutions assigned a Statewide Program Responsibility shall plan for and determine the best means to deliver such program. Each institution assigned a Statewide Program Responsibility shall include in its Institution Plan all currently offered and proposed programs necessary to respond to the workforce and educational needs of the state relating to such Statewide Program Responsibilities. Each Institution Plan shall include the following information for proposed Statewide programs:

- a) A description of the Statewide Programs to be delivered throughout the state and the anticipated resources to be employed.
- b) A description of the Statewide Programs to be offered by a Designated or Partnering Institution.
- c) A summary of the Memoranda of Understanding (MOU's), if any, to be entered into with Partnering Institutions pursuant to Subsection 2.b.iii. below.

2) Service Region Programs

It is the responsibility of the Designated Institution to plan for and determine the best means to deliver Service Region Programs that respond to the educational and workforce needs of its service region. If, in the course of developing or updating its Institution Plan, the Designated Institution identifies a need for the delivery of a program within its service region, and the Designated Institution is unable to provide the program, then the Designated Institution shall coordinate with a Partnering Institution

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

~~August 2018~~ August 2020

(including institutions with Statewide Program Responsibilities if applicable) located outside of the service region to deliver the program in the service region.

The Institution Plan developed by a Designated Institution shall include the following:

- a) A description of the proposed academic programs to be delivered in the service region, or outside of the service region, by the Designated Institution and the anticipated resources to be employed.
- b) A description of proposed programs to be offered in the service region by Partnering Institutions, including any anticipated transition of programs to the Designated Institution.
- c) A description of proposed Statewide Programs to be offered in the service region by an institution with Statewide Program Responsibilities, or by the Designated Institution in coordination with the institution holding the Statewide Program Responsibility.
- d) A summary of proposed MOU's, if any, to be entered into between the Designated Institution and any Partnering Institutions in accordance with Subsection 2.b.iii. below.

3) Institution Plan Updates

Institution Plans shall be updated and submitted to Board staff annually as follows:

- a) Preliminary Institution Plans shall be developed according to a template provided by the Board's Chief Academic Officer and submitted to the Council for Academic Affairs and Programs (CAAP) for review, discussion and coordination annually in April.
- b) Following review by CAAP, Institution Plans shall be submitted to Board staff. Upon submission of the Institution Plans to Board staff, the Board's Chief Academic Officer shall review the Institution Plans for the purpose of optimizing collaboration and coordination among institutions, ensuring efficient use of resources, and avoiding unnecessary duplication of programs.
- c) In the event the Board's Chief Academic Officer recommends material changes, he/she shall work with the institutions and then submit those

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

[August 2018](#)[August 2020](#)

recommendations to CAAP for discussion prior to submission to the Board for inclusion in the Three-Year Plan.

- d) The Board's Chief Academic Officer shall then provide their recommendations to the Board for enhancements, if any, to the Institution Plans at a subsequent Board meeting. The Board shall approve the Institution Plans annually through the Three-Year Plan submitted by Board staff. Board approval of Institution Plans acts as a roadmap for institutional planning and does not constitute Board approval of a program. Institutions are still required to follow the standard program approval process as identified in Board Policy Section III.G to gain program approval.

b. Delivery of Programs

i. Statewide Program Delivery

The Board has established statewide program responsibilities for the following institutions. This statewide program list shall be updated by the Board every two years.

Boise State University must assess the need for and, when determined necessary by the assessment, ensure the statewide delivery of all educational programs in the following degree program areas:

Program Name	Degrees
Public Policy and Administration	M.S., Ph.D.
Community and Regional Planning	M.C.R.P., Ph.D.
Social Work (Region V-VI —shared with ISU)	M.S.W.
Social Work	Ph.D.

Idaho State University must assess the need for and, when determined necessary by the assessment, ensure the statewide delivery of all educational programs in the following degree program areas:

Program Name	Degrees
Audiology	Au.D., Ph.D.
Physical Therapy	D.P.T., Ph.D.
Occupational Therapy	M.O.T.
Pharmaceutical Science	M.S., Ph.D.
Pharmacy Practice	Pharm.D.
Nursing (Region III shared w/ BSU)	M.S., D.N.P.
Nursing	Ph.D.
Physician Assistant	M.P.A.S.
Speech Pathology	M.S.

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

~~August 2018~~ August 2020

Program Name	Degrees
Deaf Education	M.S.
Sign Language Interpreting	B.S.
Health Education	M.H.E.
Public Health	M.P.H.
Health Physics	B.S., M.S., Ph.D.
Dental Hygiene	B.S., M.S.
Medical Lab Science	B.S., M.S.
Clinical Psychology	Ph.D.

University of Idaho must assess the need for and, when determined necessary by the assessment, ensure the statewide delivery of all educational programs in the following degree program areas:

Program Name	Degrees
Law	J.D.
Architecture	B.S. Arch., M. Arch.
Integrated Architecture & Design	M.S.
Landscape Architecture	B.S.L.A., M.L.A.
Interior Design	B.I.D., M.S.
Animal & Veterinary Science	B.S.A.V.S.
Animal Science	M.S.
Veterinary Science	D.V.M.
Plant Science	M.S., Ph.D.
Agricultural Economics	B.S.Aq.Econ.
Applied Economics (Agricultural)	M.S.
Food Science	B.S.F.S., M.S., Ph.D.
Forestry	B.S.Forestry
Renewable Materials	B.S.Renew.Mat.
Wildlife Resources	B.S.Wildl.Res.
Fishery Resources	B.S.Fish.Res.
Natural Resource Conservation	B.S.Nat.Resc.Consv.
Rangeland Ecology & Management	B.S.Rangeland.Ecol.Mgmt.
Fire Ecology & Management	B.S.Fire.Ecol.Mgt.
Natural Resource concentrations in: <ul style="list-style-type: none"> • Forestry • Renewable Materials <u>Forest and Sustainable Products</u> • Wildlife Resources • Fishery Resources • Natural Resource Conservation • Rangeland Ecology & Management • Fire Ecology & Management 	M.S., M.N.R., Ph.D.

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

ii. Service Region Program Delivery

The Board has established service regions for the institutions based on the six geographic areas identified in Section 33-2101, Idaho Code. A Designated Institution shall have the Service Region Program Responsibility to assess and ensure the delivery of all educational programs and services necessary to meet the educational and workforce needs within its assigned service region.

1) Academic Service Regions

Region I shall include the area within Area No.1 under Section 33-2101, Idaho Code. Lewis-Clark State College, the University of Idaho, and North Idaho College are the Designated Institutions serving undergraduate needs. The University of Idaho is the Designated Institution serving the graduate education needs. Lewis-Clark State College, and North Idaho College are the Designated Institutions serving applied baccalaureate degree needs.

Region II shall include the area within Area No.2 under Section 33-2101, Idaho Code. Lewis-Clark State College and the University of Idaho are the Designated Institutions serving undergraduate needs. The University of Idaho is the Designated Institution serving the graduate education needs.

Region III shall include the area within Area No.3 under Section 33-2101, Idaho Code. Boise State University and College of Western Idaho are the Designated Institutions serving undergraduate needs. Boise State University is the Designated Institution serving graduate education needs. Boise State University and College of Western Idaho are the Designated Institutions serving applied baccalaureate degree needs.

Region IV shall include the area within Area No.4 under Section 33-2101, Idaho Code. Idaho State University and College of Southern Idaho are the Designated Institutions serving undergraduate needs. Idaho State University is the Designated Institution serving the graduate education needs, with the exception that Boise State University will meet undergraduate and graduate business program needs. Idaho State University and College of Southern Idaho are the Designated Institutions serving applied baccalaureate degree needs.

Region V shall include the area within Area No.5 under Section 33-2101, Idaho Code. Idaho State University is the Designated Institution serving undergraduate and graduate education needs.

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

Region VI shall include the area within Area No.6 under Section 33-2101, Idaho Code. Idaho State University and College of Eastern Idaho are the Designated Institutions serving undergraduate education needs. Idaho State University is the Designated Institution serving the graduate education needs. Idaho State University and College of Eastern Idaho are the Designated Institutions serving applied baccalaureate degree needs.

2) Career Technical Service Regions

Postsecondary career technical education is delivered by six (6) institutions, each having responsibility for serving one of the six geographic areas identified in Section 33-2101.

Region I shall include the area within Area No.1 under Section 33-2101, Idaho Code. North Idaho College is the Designated Institution.

Region II shall include the area within Area No.2 under Section 33-2101, Idaho Code. Lewis-Clark State College is the Designated Institution.

Region III shall include the area within Area No.3 under Section 33-2101, Idaho Code. College of Western Idaho is the Designated Institution

Region IV shall include the area within Area No.4 under Section 33-2101, Idaho Code. College of Southern Idaho is the Designated Institution.

Region V shall include the area within Area No.5 under Section 33-2101, Idaho Code. Idaho State University is the Designated Institution.

Region VI shall include the area within Area No.6 under Section 33-2101, Idaho Code. College of Eastern Idaho is the Designated Institution.

3) Program Offerings by Partnering Institutions

If a Partnering Institution (other than an institution with Statewide Program Responsibilities) identifies a Service Region Program not identified, or anticipated to be identified, in a Designated Institution's Plan, and the Partnering Institution wishes to offer such program in the Designated Institution's service region, then the Partnering Institution may communicate with the Designated Institution for the purpose of allowing the Partnering Institution to deliver such program in the service region and to include the program in the Designated Institution's Plan. In order to include the program in the Designated Institution's Plan, the Partnering Institution must demonstrate the need within the service region for delivery of the program,

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

~~August 2018~~ August 2020

as determined by the Board (or by the Administrator of the Division of Career Technical Education in the case of career technical level programs). In order to demonstrate the need for the delivery of a program in a service region, the Partnering Institution shall complete and submit to the Chief Academic Officer of the Designated Institution, to CAAP and to Board staff, in accordance with a schedule to be developed by the Board's Chief Academic Officer, the following:

- a) A study of business and workforce trends in the service region indicating anticipated, ongoing demand for the educational program to be provided.
 - b) A survey of potential students evidencing demand by prospective students and attendance sufficient to justify the short-term and long-term costs of delivery of such program.
 - c) A complete description of the program requested to be delivered, including a plan for the delivery of the program, a timeline for delivery of the program, the anticipated costs of delivery, the resources and support required for delivery (including facilities needs and costs), and program syllabuses.
- 4) Designated Institution's First Right to Offer a Program

In the event the Partnering Institution has submitted the information set forth above to the Board's Chief Academic Officer) for inclusion in the Designated Institution's Plan, and a need is demonstrated by the Partnering Institution for such program in the service region, as determined by the Board (or by the Administrator for the Division of Career Technical Education in the case of career technical level programs), or prior to the submission of an updated Institution Plan by the Designated Institution, it is determined by the Board that an emergency need has arisen for such program in the service region the Designated Institution shall have a first right to offer such program.

The Designated Institution must within six (6) months (three (3) months in the case of associate level or career technical level programs) of receiving the request from a Partnering Institution to offer said program determine whether it will deliver such program on substantially the same terms (with respect to content and timing) described by the Partnering Institution. In the event the Designated Institution determines not to offer the program, the Partnering Institution may offer the program according to the terms stated, pursuant to an MOU to be entered into with the Designated Institution. If the Partnering Institution materially changes the terms and manner in which the

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

program is to be delivered, the Partnering Institution shall provide written notice to the Chief Academic Officer of the Designated Institution and to the Board's Chief Academic Officer of such changes and the Designated Institution shall be afforded the opportunity again to review the terms of delivery and determine within three (3) months of the date of notice whether it will deliver such program on substantially the same terms.

iii. Memoranda of Understanding

When a service region is served by more than one institution for the delivery of an academic or technical credential defined in Board Policy Section III.E., an MOU shall be developed between such institutions as provided herein and submitted to the Board's Chief Academic Officer for review and approval by the Board prior to entering into such agreements. Each MOU shall be entered into based on the following guidelines, unless otherwise approved by the Board.

If an institution with Statewide Program Responsibility has submitted the information set forth in Subsection 2.a.ii. above to a Designated Institution and Board staff in a timely manner (as determined by the Board's Chief Academic Officer) for inclusion in the Designated Institution's Plan, then the Designated Institution shall identify the program in its Institution Plan and enter into an MOU with the institution with Statewide Program Responsibility in accordance with this policy. If, prior to the submission of an updated Institution Plan by the Designated Institution, it is determined by the Board that an emergency need has arisen for such program in the service region, then upon Board approval the institution with Statewide Program Responsibility and the Designated Institution shall enter into an MOU for the delivery of such program in accordance with the provisions of this policy.

iv. Facilities

For programs offered by a Partnering Institution (whether an institution with Statewide Program Responsibilities, or otherwise) within a municipal or metropolitan area that encompasses the campus of a Designated Institution, the Partnering Institution's programs offerings shall be conducted in facilities located on the campus of the Designated Institution to the extent the Designated Institution is able to provide adequate and appropriate property or facilities (taking into account financial resources and programmatic considerations), or in facilities immediately adjacent to the campus of the Designated Institution. Renting or building additional facilities shall be allowed only upon Board approval, based on the following:

- 1) The educational and workforce needs of the local community demand a

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

~~August 2018~~August 2020

separate facility at a location other than the campus of the Designated Institution or adjacent thereto as demonstrated in a manner similar to that set forth in Subsection 2.b.ii.1) above, and

- 2) The use or development of such facilities are not inconsistent with the Designated Institution's Plan.

Facilities rented or built by a Partnering Institution (whether an institution with Statewide Program Responsibilities, or otherwise) on, or immediately adjacent to, the "main" campus of a Designated Institution may be identified (by name) as a facility of the Partnering Institution, or, if the facility is rented or built jointly by such institutions, as the joint facility of the Partnering Institution and the Designated Institution. Otherwise, facilities utilized and programs offered by one or more Partnering Institutions within a service region shall be designated as "University Place at (name of municipality)."

For programs offered by a Partnering Institution (whether an institution with Statewide Program Responsibilities, or otherwise) within a municipality or metropolitan area encompassing a campus of a Designated Institution, to the extent programmatically possible, auxiliary services (including, but not limited to, bookstore, conference and other auxiliary enterprise services) and student services (including, but not limited to, library, information technology, and other auxiliary student services) shall be provided by the Designated Institution. To the extent programmatically appropriate, registration services shall also be provided by the Designated Institution. It is the goal of the Board that a uniform system of registration ultimately be developed for all institutions governed by the Board. The Designated Institution shall offer these services to students who are enrolled in programs offered by the Partnering Institution in the same manner, or at an increased level of service, where appropriate, as such services are offered to the Designated Institution's students. An MOU between the Designated Institution and the Partnering Institution shall outline how costs for these services will be allocated.

v. Duplication of Courses

If courses necessary to complete a Statewide Program are offered by the Designated Institution, they shall be used and articulated into the Statewide Program.

vi. Program Transitions

Institutions with Statewide Program or Service Region Program Responsibilities may plan and develop the capacity to offer a program within a

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

~~August 2018~~ August 2020

service region where such program is currently being offered by another institution (the Withdrawing Institution) as follows:

- 1) The institution shall identify its intent to develop the program in the next update of its Institution Plan. The institution shall demonstrate its ability to offer the program through the requirements set forth in Subsection 2.b.ii.3) above.
- 2) Except as otherwise agreed between the institutions pursuant to an MOU, the Withdrawing Institution shall be provided a minimum three (3) year transition period to withdraw its program. If the Withdrawing Institution wishes to withdraw its program prior to the end of the three (3) year transition period, it may do so but in no event earlier than two (2) years from the date of notice (unless otherwise agreed). The Withdrawing Institution shall enter into a transition MOU with the institution that will be taking over delivery of the program that includes an admissions plan between the institutions providing for continuity in student enrollment during the transition period.

vii. Discontinuance of Programs

Unless otherwise agreed between the applicable institutions pursuant to an MOU, if, for any reason, (i) a Designated Institution offering programs in its service region that supports a Statewide Program of another institution, (ii) a Partnering Institution offering programs in the service region of a Designated Institution, or (iii) an institution holding a Statewide Program Responsibility offering Statewide Programs in the service region of a Designated Institution, wishes to discontinue offering such program(s), it shall use its best efforts to provide the institution with Statewide or Service Region Program Responsibility, as appropriate, at least one (1) year's written notice of withdrawal, and shall also submit the same written notice to the Board and to oversight and advisory councils. In such case, the institution with Statewide or Service Region Program Responsibilities shall carefully evaluate the workforce need associated with such program and determine whether it is appropriate to provide such program. In no event will the institution responsible for the delivery of a Statewide or Service Region Program be required to offer such program (except as otherwise provided herein above).

3. Existing Programs

Programs being offered by a Partnering Institution (whether an institution with Statewide Program Responsibilities, or otherwise) in a service region prior to July 1, 2003, may continue to be offered pursuant to an MOU between the Designated

Idaho State Board of Education

GOVERNING POLICIES AND PROCEDURES

SECTION: III. POSTSECONDARY AFFAIRS

Subsection: Z. Planning and Delivery of Postsecondary Programs and Courses

August 2018August 2020

Institution and the Partnering Institution, subject to the transition and notice periods and requirements set forth above.

4. Oversight and Advisory Councils

The Board acknowledges and supports the role of oversight and advisory councils to assist in coordinating, on an ongoing basis, the operational aspects of delivering programs among multiple institutions in a service region, including necessary resources and support and facility services, and the role of such councils in interacting and coordinating with local and regional advisory committees to address and communicate educational needs indicated by such committees. Such interactions and coordination, however, are subject to the terms of the MOU's entered into between the institutions and the policies set forth herein.

5. Resolutions

All disputes relating to items addressed in this policy shall be forwarded to the Board's Chief Academic Officer for review. The Board's Chief Academic Officer shall prescribe the method for resolution. The Board's Chief Academic Officer may forward disputes to CAAP and if necessary make recommendation regarding resolution to the Board. The Board will serve as the final arbiter of all disputes.

6. Exceptions

- a. This policy is not applicable to programs for which 90% or more of all activity is required or completed online, or dual credit courses for secondary education.
- b. This policy also does not apply to courses and programs specifically contracted to be offered to a private, corporate entity. However, in the event that an institution plans to contract with a private corporate entity (other than private entities in the business of providing educational programs and course) outside of their Service Region, the contracting institution shall notify the Designated Institutions in the Service Region and institutions with Statewide Program Responsibilities, as appropriate. If the corporate entity is located in a municipality that encompasses the campus of a Designated Institution, the Board encourages the contracting institution to include and draw upon the resources of the Designated Institution inasmuch as is possible.



**OFFICE OF THE PROVOST
AND EXECUTIVE VICE PRESIDENT**

875 Perimeter Drive MS 3152
Moscow ID 83844-3152

208-885-6448
208-885-6558 [FAX]
provost@uidaho.edu
provost.uidaho.edu

March 11, 2020

Patty Sanchez
Academic Affairs Program Manager
Idaho State Board of Education
650 West State Street, Suite #307
P.O. Box 83720
Boise, ID 83720-0037
Patty.sanchez@osbe.idaho.gov

Dear Ms. Sanchez,

The purpose of this Notification Letter is to notify you of changes, per Board Policy III.G.3.d., identified as academic program components. These changes have been fully reviewed and approved at the institutional level. Upon your response, we will notify NWCCU as appropriate. Attachments are in the same order as categorically prepared here.

Names Changes:

- Change the name of the minor in Interior Design to Interior Architecture and Design to align with the change of the major. CIP code is also changing to be the same as the major. No curriculum changes.
- Change the name of the M.A. Teaching English as a Second Language to M.A. Teaching English to Speakers of Other Languages. Program is also moving from the Department of English in the College of Letters, Arts and Social Sciences to the Department of Curriculum & Instruction in the College of Education, Health and Human Sciences. Course changes but no curriculum changes.
- Change the name of the B.S. Renewable Materials to a B.S. in Forest and Sustainable Products. No curriculum changes.

Create New Certificates:

- New Graduate Certificate in Remote Sensing of the Environment
- New Graduate Certificate in Nuclear Decommissioning and Used Fuel Management

Create New Minors:

- Create a new Minor in International Agriculture
- Create a new Minor in Geography

Add an option:

- Add an option to the Masters in Natural Resources of Restoration Ecology and Habitat Management

Discontinuations:

- Discontinue the emphasis History and Literature in the B.S. Music
- Discontinue the Minor in Parks, Protected Areas and Wilderness Conservation

Please do not hesitate to contact me for additional information. We are eager to appropriately notify NWCCU of the delivery location updates in order to make these changes effective in our 2020-21 catalog. Thank you for your assistance.

Sincerely,



Cher Hendricks

Vice Provost for Academic Initiatives

When will assessment activities occur and at what frequency?

MODIFICATIONS/NAME CHANGES/CIP CODE CHANGES – FILL OUT THIS SECTION IF YOU SELECTED #3 OR #6 ABOVE


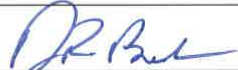
Current name of component or degree:	Degree: Renewable Materials (B.S. Renew. Mat.)		
New name of component or degree:	Degree: B.S. in Forest and Sustainable Products		
Number of credits:	120 to graduate		
Describe the modification are you making:	Not applicable		
Name of major or degree that the component is attached to:	Not applicable		
Describe rationale for the modification:	<p>Background: Effective catalog year 2012 program was renamed <i>Renewable Materials</i> from <i>Forest Products</i> under the rationale that “renaming ... will appeal to broader audience and create new recruitment opportunities” (UCC-12-034). While Renewable Materials embraces the broad scope of raw material resources studied under the degree program, it has been found to be ambiguous/nonspecific and extremely difficult to communicate to prospective students (i.e., high school juniors and seniors) and their parents; a very common response to the name of Renewable Materials is “what is that?” Furthermore, the degree name Renewable Materials created a significant divergence from the primary industry served by the program – forest products – and conflicts with how the industry is identified by other state entities (e.g., Idaho Forest Products Commission, Idaho Department of Commerce, Idaho Department of Labor). Another rational given for the name change to Renewable Materials was that it would increase enrollment by attracting students not otherwise attracted to a program named Forest Products. Enrollment growth did not result from the name change; in fact, it declined.</p> <p>Name Change: The proposed change to <i>Forest and Sustainable Products</i> returns the degree name back to its roots and makes it consistent with the primary industry it serves. The inclusion of sustainable products captures elements of the program that investigate the use and commercialization of other streams of raw materials (e.g., bamboo, hemp, recycled wood and paper). The name is much more identifiable to prospective students and their parents.</p>		
Indicate whether program, curriculum, course and admission requirements remain the same.	Yes – if you select yes to this question, please attach all curriculum and course documents related to this.	<input checked="" type="checkbox"/>	No
Are any of the learning outcomes changing:	Yes – if yes fill out question below	<input checked="" type="checkbox"/>	No
List the new learning outcomes:	1. 2. 3. 4. 5.		

DISCONTINUATION – FILL OUT THIS SECTION IF YOU SELECTED #4 OR #5 ABOVE

What are you requesting to discontinue:	
-----------------------------------------	--

What is the student impact if any?			
Are there curriculum changes needed and/or do new courses need to be created:	<input type="checkbox"/>	Yes – if you select yes to this question, please attach all curriculum and course documents related to this.	<input type="checkbox"/> No

SIGNATURES – REQUIRED FOR ALL SELECTIONS:

Dept/Unit Curriculum Committee Approval Date:	September 9, 2019	Vote Record:	12/0 (quorum)
Dept Chair Signature of Approval	 9/10/2019		
College Curriculum Committee Approval Date:	September 9, 2019	Vote Record:	5/0
Dean Signature of Approval			



FOREST, RANGELAND
AND FIRE SCIENCES
College of Natural Resources
875 Perimeter Drive MS 1133
Moscow ID 83844-1133

MEMORANDUM

TO: University Curriculum Committee

FROM: Charles Goebel, Department Head **PCG**

DATE: September 10, 2019

RE: Change of prefix associated with Renewable Materials courses

The College of Natural Resources (CNR) has approved a proposed name change for the Renewable Materials (B.S. Renew. Mat.) degree to Forest and Sustainable Products (B.S. For. Sus. Prod.).

Assuming the proposed name change is approved, CNR is requesting that the prefix associated with all Renewable Materials courses be changed from RMat to FSP.

MOSCOW

BOISE

COEUR D'ALENE

IDAHO FALLS

STATEWIDE RESEARCH AND EXTENSION

To enrich education through diversity, the University of Idaho is an equal opportunity/affirmative action employer.

**INSTRUCTION, RESEARCH AND STUDENT AFFAIRS
AUGUST 26, 2020**

BOISE STATE UNIVERSITY

SUBJECT

Master of Public Health – New Academic Program

APPLICABLE STATUTE, RULE, OR POLICY

Idaho State Board of Education Governing Policies & Procedures, Section III.G.

BACKGROUND/DISCUSSION

Boise State University proposes to create a new Master's of Public Health (MPH) degree program. The proposed MPH will have three emphases: Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership. If approved, this program will replace Boise State University's existing Master of Health Science (MHS) degree program. The approval of this proposal will allow a shift of the existing resources currently dedicated to the three existing MHS emphases (Health Policy, Health Promotion, and Health Services Leadership) to the new MPH emphases. Although the existing MHS program has historically provided students with excellent academic preparation, it has done so using a unique degree designation that is less recognizable and less desired by hiring agents in health-related settings.

While Idaho State University currently offers a Master of Public Health (MPH), their program is different from what Boise State University proposes. Idaho State University offers a generalist MPH degree option with more traditional curriculum. Boise State University will not offer a generalist MPH option, but will offer specialized emphases (Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership).

The transition of the Master of Health Science (MHS) to the Master of Public Health (MPH) is the continuation of the College of Health Science's continual focus and investment in programs and departments with a strong track record of high-quality programming, training, and experiences for students. During the last round of program prioritization, the Master of Health Science program was put into the second quintile, denoting a robust and high-quality program.

The proposed Master of Public Health program will continue to seek affordable course materials for students in an effort to increase affordability.

IMPACT

The proposed program is designed to admit 22 students in an annual cohort with matriculation beginning each fall. Boise State University does not anticipate that additional resources will be needed to implement the program. Space/equipment and personnel resources will transfer from MHS to MPH. For this program, there are no special fees.

INSTRUCTION, RESEARCH AND STUDENT AFFAIRS
AUGUST 26, 2020

According to the Bureau of Labor Statistics, the health care and social assistance sector will become the largest major sector by 2026, increasing from 12.2% in 2016 to 13.8% in 2026, adding nearly 4 million jobs nationally. Regardless of their career paths, MPH graduates benefit society through their specialized understanding of the complex nature of public and population-level health problems and the ways to address them.

The Idaho Department of Labor projects the Health Care and Social Assistance industry “to grow at 22%, the third fastest among all industries, but will add the most total jobs.” This demand is expected, given the needs associated with an aging population and changes in health promotion and delivery. While many professions meet these needs, including clinical and nonclinical professionals, the overall growth of the health sector will require leaders and personnel with knowledge and skills to solve complex problems and reach value-based outcomes. The health sector is evolving and Boise State’s programs need to adjust to prepare its graduates for the future. The proposed MPH program will accomplish this with unique concentrations that are designed to prepare students to meet the contemporary demands of the public health profession. As the COVID-19 emergency continues to unfold, it is now clearer than ever that skilled, adaptable public health professionals are needed to serve in a variety of roles locally, regionally, and nationally.

Additionally, approval of the MPH program at Boise State University will increase and/or create new collaborations with Idaho State University. By working together, Idaho State University and Boise State University will provide more options to students from each institution and increase essential public health capacity for Idaho communities through reciprocal partnerships built on institutional strengths.

ATTACHMENTS

Attachment 1 - Master of Public Health proposal

Attachment 2 - Memorandum of Understanding between Boise State University and Idaho State University

STAFF COMMENTS AND RECOMMENDATIONS

The proposed MPH program is designed as a part-time, cohort-based program delivered primarily in-person/face-to-face in the evenings to address the needs of working adults. Because the program will consist of courses already offered, Boise State University does not provide a minimum enrollment for program sustainability. However, if enrollments are low for multiple consecutive years, the university will reevaluate whether program is needed.

Boise State University’s request to offer a Master of Public Health is consistent with their Service Region Program Responsibilities and their current institution plan for Delivery of Academic Programs in Region III. As provided in Board Policy III.Z, Idaho State University has statewide program responsibility for the Master of Public Health and currently offers the Master of Public Health in Pocatello and

INSTRUCTION, RESEARCH AND STUDENT AFFAIRS
AUGUST 26, 2020

Meridian. Based on information provided, Idaho State University's MPH program consists of "courses with community health emphasis and include an acquisition of requisite public health knowledge and skills in the areas of epidemiology, biostatistics, public health ethics, health organization and policy, health program planning and evaluation, community health promotion, research methodology and environmental health." Boise State's proposed MPH program will have three emphases—Health Policy, Health Promotion, and Health Services Leadership—two of which are unique in the region.

As required in Board Policy III.Z, Boise State University entered into a Memorandum of Understanding with Idaho State University. The agreement a) articulates support for their respective programs to avoid duplication of emphasis areas should Idaho State University develop other emphasis areas in the future, b) establishes a commitment to working cooperatively to offer courses, and c) identifies potential collaborations such as a joint School of Public Health and doctoral level degrees—specifically, a Ph.D. and a Doctor of Public Health.

The proposal completed the program review process and was presented to the Council on Academic Affairs and Programs on June 25, 2020, and to the Committee on Instruction, Research, and Student Affairs on August 13, 2020.

Board staff recommends approval.

BOARD ACTION

I move to approve the request by Boise State University to offer a Master of Public Health as presented in Attachment 1.

Moved by _____ Seconded by _____ Carried Yes _____ No _____

Institutional Tracking No. _____

Idaho State Board of Education

Proposal for Undergraduate/Graduate Degree Program

Date of Proposal Submission:	<i>May 4, 2020</i>
Institution Submitting Proposal:	Boise State University
Name of College, School, or Division:	College of Health Sciences
Name of Department(s) or Area(s):	Department of Community and Environmental Health

Program Identification for Proposed New or Modified Program:

Program Title:	Master's of Public Health			
Degree:		Degree Designation		Undergraduate <input checked="" type="checkbox"/> Graduate
Indicate if Online Program:		Yes	<input checked="" type="checkbox"/> No	
CIP code (consult IR /Registrar):	51.2201, PUBLIC HEALTH GENERAL			
Proposed Starting Date:	Fall 2019			
Geographical Delivery:	Location(s)	Boise, Idaho	Region(s)	Boise, Idaho
Indicate (X) if the program is/has:		Self-Support (Online Program Fee)		Professional Fee
Indicate (X) if the program is:	<input checked="" type="checkbox"/>	Regional Responsibility		Statewide Responsibility

Indicate whether this request is either of the following:

- | | |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> New Degree Program | <input type="checkbox"/> Consolidation of Existing Program |
| <input type="checkbox"/> Undergraduate/Graduate Certificates (30 credits or more) | <input type="checkbox"/> New Off-Campus Instructional Program |
| <input type="checkbox"/> Expansion of Existing Program | <input type="checkbox"/> Other (i.e., Contract Program/Collaborative Expand existing program to wholly online) |

[Signature] 2/5/20
College Dean (Institution) Date

[Signature] 2/5/20
Graduate Dean or other official (Institution; as applicable) Date

[Signature] 2/13/2020
FVP/Chief Fiscal Officer (Institution) Date

[Signature] 2/10/20
Provost/VP for Instruction (Institution) Date

[Signature]
President Date

Vice President for Research (Institution; as applicable) *[Signature]* 5/19/20 Date

Academic Affairs Program Manager, OSBE *[Signature]* Date

[Signature] 6/2/2020
Chief Academic Officer, OSBE Date

[Signature] 5/2/20
Chief Financial Officer, OSBE Date

SBOE/Executive Director Approval Date

Rationale for Creation or Modification of the Program

- 1. Describe the request and give an overview of the changes that will result. Will this program be related or tied to other programs on campus? Identify any existing program that this program will replace.***

Boise State University proposes creating a new Master's of Public Health (MPH) degree program. The proposed MPH degree program will have three emphases: Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership. If approved, this program will replace Boise State University's existing Master of Health Science (MHS) degree program. The approval of this proposal will allow a shift of the existing resources currently dedicated to the three existing MHS emphases (Health Policy, Health Promotion, and Health Services Leadership) to the new MPH emphases.

Although the existing MHS program has historically provided students with excellent academic preparation, it has done so using a unique degree designation that is less recognizable and less desired by hiring agents in health-related settings. Transitioning to the MPH degree designation will benefit students by providing them with the opportunity to earn a highly-respected, widely-recognized professional degree actively sought after by hiring agents in public health agencies (including both community and environmental health divisions), a range of health promoting non-profit organizations, and healthcare settings of all kinds. An MPH degree (as opposed to an MHS) aligns with what is recognized in the profession as the appropriate degree in the field, and much better reflects the quality and value of the education at BSU.

Transitioning to the proposed MPH program represents a logical step in the growth of Boise State's existing MHS programs. Similar to the MHS, the new MPH degree is intended to address the needs of working adults. The program has been designed as a part-time, cohort-based program delivered primarily in live classroom settings in the evenings.

Two of three emphasis areas in the proposed MPH program are unique, non-generalist options designed to better prepare students to meet the contemporary demands of the public health profession. These two proposed emphases (Prevention and Intervention Programming and Systems Analysis and Innovation) are cutting edge and future-facing areas of study that are not offered anywhere in the Pacific Northwest region. The addition of these unique options promises to position the state of Idaho and Boise State University as leaders in graduate level public health curriculum design.

Both the delivery method and the proposed unique emphases are fundamentally different than and complement the existing MPH program offered by Idaho State University (ISU). The ISU MPH is a generalist degree program that started as an online degree and has evolved to offer in-class options to students at either the Pocatello or Meridian campus. According to where a student is located determines the degree of on-campus interaction. The ISU MPH model and its generalist curriculum *combined with* the proposed Boise State MPH curriculum would accommodate multiple learning styles and interests, while meeting the growing industry and community public health needs.

Additionally, ISU and BSU are working together to increase essential public health capacity for Idaho communities through reciprocal partnerships built on institutional strengths, and both

institutions agree that there are advantages of each other having unique and accredited degrees: students from each institution can have more options for specializations, certifications and electives.

2. Need for the Program. *Describe the student, regional, and statewide needs that will be addressed by this proposal and address the ways in which the proposed program will meet those needs.*

- a. Workforce need:** *Provide verification of state workforce needs that will be met by this program. Include State and National Department of Labor research on employment potential. Using the chart below, indicate the total projected annual job openings (including growth and replacement demands in your regional area, the state, and nation. Job openings should represent positions which require graduation from a program such as the one proposed. Data should be derived from a source that can be validated and must be no more than two years old.*

The Idaho Department of Labor projects the Health Care and Social Assistance industry “to grow at 22%, the third fastest among all industries, but will add the most total jobs.”¹ This demand is expected, given the needs associated with an aging population and changes in health promotion and delivery. While many professions meet these needs, including clinical and non-clinical professionals, the overall growth of the health sector will require leaders and personnel with knowledge and skills to solve complex problems and reach value-based outcomes. The health sector is evolving and our programs need to adjust to prepare our graduates for the future. The proposed MPH program will intend to accomplish this with its unique concentrations that are designed to prepare our students to meet the contemporary demands of the public health profession.

The following quote from <http://www.careersinpublichealth.net/careers/> gives a nice overview of the careers that can be pursued with a Master’s in Public Health:

"Graduates of public health can find careers suited to a wide variety of interests and skills, in both traditional public health and service-focused organizations as well as new practice settings and non-profit organizations. Public health graduates can look forward to a wealth of opportunities in each state and city around the country and even the world. Common areas of employment include federal, state and local health agencies (e.g. Centers for Disease Control and Prevention, EPA), consulting firms, consumer advocacy organizations, hospitals and integrated health care systems, and private business and industry."

Further indication of the breadth of careers available to a Public Health graduate are indicated by a study by Economic Modeling Specialists International (EMSI) of job postings between February 2016 and February 2017 in ID, WA, and OR from employers looking for candidates with Public Health skills. The job titles in those listings included the following:

- Public Health Analysts
- Health Educators
- Health Services Directors
- Behavioral Health Care Managers

¹ Idaho Department of Labor. Labor Market Projections for Idaho Industries and Occupations: 2014 – 2024. <https://lmi.idaho.gov/Portals/0/Pubs/2024-Idaho-Projections.pdf?ver=2016-10-03-145907-130>

- Practice Managers
- Policy Analysts
- Community Health Workers

Because of the broad range of career paths available to a Public Health graduate, federal and state Department of Labor data is of limited value. The most relevant job titles are:

- Medical and health services managers, SOC 11-9111
- Health educators, SOC 21-1091
- Community health workers, SOC 21-1094

The category “Medical and health services managers” is, unfortunately, very broad. It includes 23 different job titles, five of which are applicable to a BA in Public Health graduate and others that require additional training. Because there is no information available on the numbers of jobs represented under each job title, we will arbitrarily use 20% of the job openings associated with “Medical and health services managers” in the tables below.

Total projected annual job openings			
	State DOL data	Federal DOL data	Other data source:
Local (Service Area)	101.5 (1/2 of state)	61.6 (.25% of national)	
State	203	123.2 (.50 % of national)	
Nation	N/A	24,640	

- b. Student need.** *What is the most likely source of students who will be expected to enroll (full-time, part-time, outreach, etc.). Document student demand by providing information you have about student interest in the proposed program from inside and outside the institution. If a survey of was used, please attach a copy of the survey instrument with a summary of results as **Appendix B**.*

The proposed program is designed to admit 22 students in an annual cohort with matriculation beginning each fall. These projections are based on the historic annual enrollments in the existing Masters of Health Science program that the new MPH program will replace. Given a 10% rate of attrition over the two-year program, projected enrollment for second year is estimated at approximately 20 students.

In recent meetings with our currently enrolled students, 100% of these students indicated that they would have preferred to receive a more recognizable MPH degree and that they believe this degree designation would make them more competitive in their profession. As a result, this change will not adversely impact historic enrollment and is likely to result in more demand for the proposed program.

- c. Economic Need:** *Describe how the proposed program will act to stimulate the state economy by advancing the field, providing research results, etc.*

According to the Bureau of Labor Statistics, the health care and social assistance sector will become the largest major sector by 2026, increasing from 12.2% in 2016 to 13.8% in 2026, adding nearly 4.0 million jobs nationally.

“Healthcare support occupations (23.6 percent) and healthcare practitioners and technical occupations (15.3 percent) are projected to be among the fastest growing occupational groups during the 2016–26 projections decade. These two occupational groups—which account for 13 of the 30 fastest growing occupations from 2016 to 2026—are projected to contribute about one-fifth of all new jobs by 2026. Factors such as the aging baby-boom population, longer life expectancies, and growing rates of chronic conditions will drive continued demand for healthcare services.”

<https://www.bls.gov/news.release/pdf/ecopro.pdf>

d. Societal Need: Describe additional societal benefits and cultural benefits of the program.

Regardless of their career paths, graduates with public health training benefit society in many ways. Students gain understanding of the complex nature of public and population-level health problems and ways to address them. Two issues that illustrate the diversity of challenges that must be addressed are obesity and issues related to aging populations.

- As Idaho communities struggle to deal with the obesity epidemic, public health graduates understand that a “one size fits all” approach will not address obesity across the state. Public health graduates will be prepared to see communities as systems and that addressing these issues requires cross-sector collaboration.
- As Idahoans retire and want to live healthy, functional lives in their homes, graduates trained in public health can contribute to assessing the resources and assets of the area to identify gaps in services and help navigate the intricacies of healthcare. Community health workers, health educators, and others providing community level assistance will be instrumental to cost-effective solutions to keep our seniors in their communities and homes as long as possible.

e. If Associate’s degree, transferability.

N/A

3. **Similar Programs.** Identify similar programs offered within Idaho and in the region by other in-state or bordering state colleges/universities.

Response:

Similar Programs offered <u>by Idaho public institutions</u> (list the proposed program as well)		
Institution Name	Degree name and Level	Program Name and brief description if warranted
Boise State University	Master of Health Science	The existing Master of Health Science degree programs will be transitioned to the more professionally current and relevant Master of Public Health Degree.
Idaho State University	Master of Public Health	In-Person/Online options: Offers generalist curriculum and traditional which includes courses of study in epidemiology, biostatistics, social and behavioral sciences, and health administration and policy; Does not include any of the concentration options proposed for Boise State's MPH degree (Prevention and Intervention Programming, Systems Analysis and Innovation, Health Management and Leadership).

Similar Programs offered <u>by other Idaho institutions and by institutions in nearby states</u>		
Institution Name	Degree name and Level	Program Name and brief description if warranted
Brigham Young University	Master in Public Health	BYU's program offers students core requirements in areas of knowledge basic to public health, with an emphasis in health promotion that is designed to promote health and prevent disease by developing population-based health promotion strategies.
Utah State University	Master in Public Health	In-Person options: Offers majors in health education and promotion, veterinary public health, and public health nutrition.
University of Nevada-Reno	Master in Public Health	In-Person/Online options: Offers traditional majors in epidemiology, biostatistics, social and behavioral sciences, and health administration and policy.
Oregon State University	Master in Public Health	In-Person/Online options: Offers traditional majors in epidemiology, biostatistics, social and behavioral sciences, and health administration and policy; also includes a major in global health.
Oregon Health and Science University (OHSU) and Portland State University (PSU)	Master in Public Health	The OHSU-PSU School of Public Health offers seven Master of Public Health Programs with concentrations in various areas of expertise: Biostatistics, Environmental Systems and Human Health, Epidemiology, Health Management and Policy, Health Promotion, and Public Health Practice.

4. **Justification for Duplication with another institution listed above.** (if applicable). If the

proposed program is similar to another program offered by an Idaho public institution, provide a rationale as to why any resulting duplication is a net benefit to the state and its citizens. Describe why it is not feasible for existing programs at other institutions to fulfill the need for the proposed program.

Boise State's proposed MPH degree does not duplicate any program offered at another Idaho public institution. Although Idaho State University offers an MPH program, their program is very different from what is being proposed at Boise State University. For example, ISU offers one generalist Masters in Public Health degree option with a more traditional curriculum. Boise State will not be offering a generalist MPH option. ISU does not offer any non-generalist, specialized majors, while Boise State will only offer non-generalist emphases.

ISU is delivering a traditional MPH program organized around the five core disciplines of public health. However, Boise State's proposed MPH program will use an approach to professional preparation in public health that emphasizes a problem-first/solution-focused approach to addressing public health problems.

Further, any Idaho student who wants to complete a purely on-campus MPH program is not served through the Idaho State model. While ISU offers classroom options with courses, the faculty may not be in the classroom, but rather teaching from a distance. Students within the existing MHS program, prefer the in-person, evening option and would rather earn an MPH rather than an MHS.

Boise state does not believe the proposed MPH program will provide any duplication beyond what already exists when considering the current MHS program. Although named differently, both programs share a public health focused curriculum, draw from students with similar academic interests, and who already compete for jobs in the same field. Approval of this proposal will not change these dynamics. The only real change is that acceptance of this proposal will allow students currently being served in Boise State's MHS program to receive a degree with the MPH designation. A designation that provides greater name-recognition and is more actively sought after by hiring professionals in our field, and therefore, creates more value to students.

Additionally, ISU and BSU are working together to increase essential public health capacity for Idaho communities through reciprocal partnerships built on institutional strengths. Both institutions agree that there are advantages of each having unique and accredited degrees. Students from each institution will have more options for certifications and electives. The opportunities listed below are actively being pursued with the potential of future partnerships, such as doctoral degrees and a collaborative School of Public Health.

- Undergraduate to MPH Opportunity: ISU and BSU are working on drafting an articulation agreement for a 3 + 2 Master of Public Health (MPH) degree option. This agreement would allow BSU Community and Environmental Health undergraduate students to take 18 master level credits that would serve as part of the requirements for their BSU undergraduate degree and as part of the requirements for their MPH at ISU. The two departments are outlining curricular, financial aid, registration, and application details and anticipate an aggressive launch date of Fall 2020.
- Graduate to Graduate Public Health Opportunity: BSU MPH degree intends to include graduate certificate and elective course options as part of the degree, and under a

Memorandum of Agreement, Boise State's MPH will add an opportunity to take 12-13 hours of ISU MPH and health related coursework. This would allow BSU's graduate students to have more flexibility with online courses and access to additional certificates from ISU, including Medical Anthropology, Rural Health, GIS, and Quality Improvement. Additionally, ISU MPH students would be able to take the graduate certificates we plan to develop. This collaboration could begin as early as in Fall 2020.

5. Describe how this request supports the institution's vision and/or strategic plan.

Goals of Institution Strategic Plan	Proposed Program Plans to Achieve the Goal
Goal 1: Create a signature, high-quality educational experience for all students	The proposed MPH program provides Boise State University with the opportunity to be a leader in public health professional preparation. This unique set of program options represent cutting-edge, future-facing curriculum options that will benefit its students and build the institution's reputation as a curriculum leader.
Goal 2: Facilitate the timely attainment of educational goals of our diverse student population	The proposed MPH program has been designed to enable students with work, life, or other responsibilities to complete their degree requirements with minimal interruption of life situation and obtain a marketable health-related degree.
Goal 3: Gain distinction as a doctoral research university	In the field of public health, the pipeline toward highly recognized doctoral programs begins with excellence in graduate education at the MPH level. Very few students pursuing a doctorate in public health do so without first earning an MPH. Externally, recruiting excellent PhD students often begins with other institutions recognizing that our MPH students are exceptionally well-prepared for doctoral study and trusting us to continue that good work with their MPH graduates pursuing doctoral studies. Internally, MPH programs may provide a pipeline to our own doctoral programs.
Goal 4: Align university program and activities with community needs	The proposed program is designed to meet the needs of both of potential graduate students who want to advance their careers and local employers who want a more professionally qualified employment base. Additionally, MPH graduates are uniquely prepared to tackle issues that affect wellness in their communities.

Assurance of Quality. Describe how the institution will ensure the quality of the program. Describe the institutional process of program review. Where appropriate, describe applicable specialized accreditation and explain why you do or do not plan to seek accreditation.

The following measures will ensure the high quality of the new program:

Regional Institutional Accreditation: Boise State University is regionally accredited by the Northwest Commission on Colleges and Universities (NWCCU). Regional accreditation of the university has been continuous since initial accreditation was conferred in 1941. Boise State University is currently accredited at all degree levels (A, B, M, D).

Program Review: At the inception of new programs, the programs will submit to the Office of the Provost a three-year assessment plan to be scheduled into the Periodic Review/Assessment Reporting Cycle. The plan includes program learning outcomes; and an implementation plan with a timeline identifying when and what will be assessed, how the programs will gather assessment data, and how the program will use that information to make improvements. Then, every three

years, the programs will provide Program Assessment Reports (PAR), which will be reviewed by a small team of faculty and staff using a PAR Rubric, which includes feedback, next steps, and a follow-up report with a summary of actions.

Specialized Accreditation: The program will seek accreditation by the Council on Education for Public Health (CEPH). CEPH has standards for accreditation of MPH programs. The proposed program is being designed to follow these standards and BSU will begin the accreditation process in Fall 2020.

6. ***In accordance with Board Policy III.G., an external peer review is required for any new doctoral program.***

N/A

7. ***Teacher Education/Certification Programs*** All Educator Preparation programs that lead to certification require review and recommendation from the Professional Standards Commission (PSC) and approval from the Board.

Will this program lead to certification?

Yes _____ No X _____

If yes, on what date was the Program Approval for Certification Request submitted to the Professional Standards Commission?

N/A

8. ***Five-Year Plan: Is the proposed program on your institution's approved 5-year plan? Indicate below.***

Yes X No _____

Curriculum, Intended Learning Outcomes, and Assessment Plan

10. ***Curriculum for the proposed program and its delivery.***

- a. ***Summary of requirements.*** Provide a summary of program requirements using the following table.

Credit hours in required courses offered by the department(s) offering the program.	27-30
Credit hours in required courses offered by other departments:	0-3
Credit hours in institutional general education curriculum	n/a
Credit hours in free electives	11-12
Total credit hours required for degree program:	42

b. Additional requirements. *Describe additional requirements such as comprehensive examination, senior thesis or other capstone experience, practicum, or internship, some of which may carry credit hours included in the list above.*

1. Complete an approved program of study. All programs of study include an internship and capstone experience.
2. Earn a final graduate GPA of 3.0 or higher.
3. Earn a minimum letter grade of "B" in all coursework. Students who receive less than a "B" in any course will be required to retake that course or an approved equivalent.
4. Develop a portfolio that demonstrates student ability to meet the competencies assigned to the MPH foundational courses and to their MPH emphasis area. Student portfolios should also include professional-level work products developed during their internship and capstone courses that demonstrate their ability to apply MPH competencies in practice-based settings. This portfolio must be submitted for review at the end of each academic year, as well as reviewed and approved prior to the successful completion of the program.

Note: The portfolio, practice-based experience, and capstone project are required for accreditation by the Council on Education for Public Health (CEPH).

11. Program Intended Learning Outcomes and Connection to Curriculum.

a. Intended Learning Outcomes. *List the Intended Learning Outcomes for the proposed program, using learner-centered statements that indicate what will students know, be able to do, and value or appreciate as a result of completing the program.*

Foundational Competencies/Intended Learning Outcomes: CEPH accreditation provides a list of required knowledge and skill-based competencies/intended learning outcomes for the foundational/core courses in all MPH programs. Per their requirements, the CEPH competencies will be used for this program and include:

Foundational Knowledge: Student Learning Outcomes (CEPH, 2016)

Profession & Science of Public Health

1. Explain public health history, philosophy and values.
2. Identify the core functions of public health and the 10 Essential Services.
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program.
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.
6. Explain the critical importance of evidence in advancing public health knowledge.

Factors Related to Human Health

7. Explain effects of environmental factors on a population's health.
8. Explain biological and genetic factors that affect a population's health.
9. Explain behavioral and psychological factors that affect a population's health.
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities.
11. Explain how globalization affects global burdens of disease.

12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g., One Health).

Foundational Competencies: Student Learning Outcomes (CEPH, 2016)

Evidence-based Approaches to Public Health

1. Apply epidemiological methods to the breadth of settings and situations in public health practice.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context.
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
4. Interpret results of data analysis for public health research, policy or practice.

Public Health & Health Care Systems

5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.

Planning & Management to Promote Health

7. Assess population needs, assets and capacities that affect communities' health.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.
9. Design a population-based policy, program, project or intervention.
10. Explain basic principles and tools of budget and resource management.

Policy in Public Health

11. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.
12. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
13. Advocate for political, social or economic policies and programs that will improve health in diverse populations.
14. Evaluate policies for their impact on public health and health equity.

Leadership

15. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making.
16. Apply negotiation and mediation skills to address organizational or community challenges.

Communication

17. Select communication strategies for different audiences and sectors.
18. Communicate audience-appropriate public health content, both in writing and through oral presentation.
19. Describe the importance of cultural competence in communicating public health content.

Interprofessional Practice

20. Perform effectively on interprofessional teams.

Systems Thinking

21. Apply systems thinking tools to a public health issue.

Emphasis Competencies/Intended Learning Outcomes: Additionally, CEPH accreditation standards require each program to develop a list of 5 competencies/intended learning outcomes for each emphasis area. These include:

Prevention and Intervention Programming Emphasis: Student Learning Outcomes

1. Practice principles of community engagement and inclusivity when addressing public health problems.
2. Use quantitative and qualitative data to guide the development and evaluation of public health prevention and intervention programs.
3. Create holistic, multidisciplinary, multi-strategy, multi-level prevention and intervention plans for addressing public health problems.
4. Develop theoretically sound, research-based prevention and intervention programs likely to improve public health.
5. Organize the effective management of core prevention and intervention activities, including assessment, planning, implementation, and evaluation activities.

Systems Analysis and Innovation Emphasis: Student Learning Outcomes

1. Practice principles of community engagement and inclusivity when addressing public health problems.
2. Assess the role of multiple systems and institutions in contemporary public health problems using advanced systems analysis tools.
3. Develop innovative systems and institutional solutions to existing public health problems.
4. Create a plan for enlisting partners, coordinating activities, evaluating outcomes, and achieving systems change.
5. Evaluate systems change efforts and effectively communicate evaluation findings to diverse stakeholders.

Health Management and Leadership Emphasis: Student Learning Outcomes

1. Develop cooperative strategic plans designed to address public health problems using quantitative and qualitative data.
2. Apply the processes and applications of influence, collaboration, and communication by which individuals empower others to work together to achieve public health goals.
3. Develop budgets, resource development plans, and means of tracking unit/organizational financial health using established fiscal practices and tools.
4. Develop human resource plans and programs designed to maximize the professional impact of individual team members and teams.
5. Evaluate intra- and interorganizational effectiveness in achieving public health goals and successfully communicate evaluation findings to diverse stakeholders.

12. Assessment plans

- a. Assessment Process.** *Describe the assessment process that will be used to evaluate how well students are achieving the intended learning outcomes of the program.*

The Department of Community and Environmental Health will review both qualitative evaluation-based information and quantitative academic-based data provided by students who are actively enrolled in the program and those who have graduated. This process will include an annual review of student portfolios by graduate faculty and an advisory panel of local practitioners, in which both

groups determine whether or not students are successfully meeting program competencies/intended learning outcomes. The department faculty will use information from all of these sources to adjust program objectives, requirements, and instructional methods.

b. Closing the loop. *How will you ensure that the assessment findings will be used to improve the program?*

Information gleaned from both qualitative and quantitative assessments, as well as portfolio reviews, will be presented to department faculty during planned meetings as needed during the semester as well as immediately following each semester. Changes will be made to course and program curriculum as warranted.

c. Measures used. *What direct and indirect measures will be used to assess student learning?*

Listed below are some general examples of assessment measures anticipated throughout the program:

- Course specific assessment measures will be used to assess the course-specific objectives. Assessment measures will include course-specific projects and exams.
- Student evaluations of their learning in each course.
- Graduate exit survey to be conducted at the end of students' final semester.
- Stakeholder and graduate/alumni survey to be conducted annually in accordance with CEPH accreditation standards.
- Student portfolio reviews.
- Students will be prepared and encouraged to sit for the exam to become a Certified Public Health (CPH) and/or a Certified Health Education Specialist (CHES). The department will track the number of graduates who successfully pass these exams.

d. Timing and frequency. *When will assessment activities occur and at what frequency?*

- Course specific assessments will occur throughout each course, as well as at the end of each course, when offered.
- The department will informally review course related data every semester and formally review data annually.
- The department will conduct exit surveys for every graduate.
- The department will perform the Program Assessment Review (PAR) every three years as required by Boise State University.

Enrollments and Graduates

- 13. Existing similar programs at Idaho Public Institutions.** *Using the chart below, provide enrollments and numbers of graduates for similar existing programs at your institution and other Idaho public institutions.*

Existing Similar Programs: Historical enrollments and graduate numbers		
Institution and Program Name	Fall Headcount Enrollment in Program	Number of Graduates From Program (Summer, Fall, Spring)

	FY16	FY17	FY18	FY19 (most recent)	FY16	FY17	FY18	FY19 (most recent)
BSU Master in Health Science	45	47	46	39	9	17	17	13
ISU Master in Public Health – Online and Live combined	32	31	22	21	8	2	8	7

14. **Projections for proposed program:** Using the chart below, provide projected enrollments and number of graduates for the proposed program:

Proposed Program: Projected Enrollments and Graduates First Five Years											
Program Name: Master of Public Health											
Projected Fall Term Headcount Enrollment in Program						Projected Annual Number of Graduates From Program					
FY21 (first year)	FY22	FY23	FY24	FY25	FY26	FY21 (first year)	FY22	FY23	FY24	FY25	FY26
30	42	52	58	58	58	0	10	18	20	20	20

This program is designed to admit 22 students in an annual cohort with matriculation beginning each fall. Given a 10% rate of attrition over the two-year program, projected enrollment for second year courses is estimated at approximately 20 students. Part-time students will take 2.5 to 3 years to complete the program. Full-time students can finish in 2 years.

At least two-thirds of the Fall 2019 cohort and the Fall 2020 cohort of MHS are expected to transition into the MPH program upon approval of the program. Students will no longer be accepted to the MHS program starting in 2021.

15. **Describe the methodology for determining enrollment and graduation projections.** Refer to information provided in Question #2 "Need" above. What is the capacity for the program? Describe your recruitment efforts? How did you determine the projected numbers above?

These numbers reflect the historic enrollment of the current MHS program. No impacts are anticipated beyond providing students with a more recognizable and competitive degree designation.

Current marketing and recruitment efforts include a web landing page, request for information form, and a full program website with details including program and concentration descriptions, curriculum plan, and costs. Strategic, personalized communications engage and support students

throughout the recruitment lifecycle.

- 16. Minimum Enrollments and Graduates.** *Have you determined minimums that the program will need to meet in order to be continued? What are those minimums, what is the logical basis for those minimums, what is the time frame, and what is the action that would result?*

Program minimums have been established based on historical data associated with the existing MHS program. Both the existing MHS students and students interested in enrolling in the future have universally indicated that the MPH degree represents a more attractive degree option and that its availability would only enhance the likelihood of their enrollment in Boise State's MPH program.

Resources Required for Implementation – fiscal impact and budget

17. Physical Resources.

- a. Existing resources.** *Describe equipment, space, laboratory instruments, computer(s), or other physical equipment presently available to support the successful implementation of the program.*

The space and equipment currently available to the existing MHS program will be reallocated to this degree option and is acceptable to operate a successful program.

- b. Impact of new program.** *What will be the impact on existing programs of increased use of physical resources by the proposed program? How will the increased use be accommodated?*

There will be no additional impact as we will be transitioning from an MHS degree with three emphases to an MPH degree with three emphases.

- c. Needed resources.** *List equipment, space, laboratory instruments, etc., that must be obtained to support the proposed program. Enter the costs of those physical resources into the budget sheet.*

No new resources need to be obtained beyond reallocating the existing MHS program resources to the proposed MPH degree.

18. Library resources

- a. Existing resources and impact of new program.** *Evaluate library resources, including personnel and space. Are they adequate for the operation of the present program? Will there be an impact on existing programs of increased library usage caused by the proposed program? For off-campus programs, clearly indicate how the library resources are to be provided.*

Current library resources are sufficient.

- b. Needed resources.** *What new library resources will be required to ensure successful implementation of the program? Enter the costs of those library resources into the budget sheet.*

None.

19. Personnel resources

- a. Needed resources.** *Give an overview of the personnel resources that will be needed to implement the program. How many additional sections of existing courses will be needed? Referring to the list of new courses to be created, what instructional capacity will be needed to offer the necessary number of sections?*

None.

- b. Existing resources.** *Describe the existing instructional, support, and administrative resources that can be brought to bear to support the successful implementation of the program.*

Currently, the existing MHS program is slated to receive the following resources.

- 0.5 FTE Program Director.
- 2.5-3.0 FTE Graduate Faculty.
- 0.3 FTE Administrative staff. The workload for this position is an estimate and will be revisited at the end of the first program year to assess the need for an increase in FTE.

These resources will allow the department to deliver courses as described in the recommended plans of study provided in Appendix C of this proposal.

- c. Impact on existing programs.** *What will be the impact on existing programs of increased use of existing personnel resources by the proposed program? How will quality and productivity of existing programs be maintained?*

As has been described above, this proposal comprises a transition from an existing degree program with a less competitive and recognized degree designation (MHS), to a widely recognized degree designation actively sought out by hiring agents. The MHS degree options will be phased out as current students complete the program. A discontinuation proposal will be put forward to formally end the MHS program upon approval of the MPH program.

This transition should not be seen as losing the MHS, but instead as the MHS evolving into the more competitive MPH degree. Therefore, the impact on our existing MHS program will be neutral. Please see Appendix D for a description of how the MHS program will be phased out.

- d. Needed resources.** *List the new personnel that must be hired to support the proposed program. Enter the costs of those personnel resources into the budget sheet.*

None.

20. Revenue Sources

- a. **Reallocation of funds:** *If funding is to come from the reallocation of existing state appropriated funds, please indicate the sources of the reallocation. What impact will the reallocation of funds in support of the program have on other programs?*

Resources currently used to support the MHS program will be reallocated to support the proposed MPH.

- b. **New appropriation.** *If an above Maintenance of Current Operations (MCO) appropriation is required to fund the program, indicate when the institution plans to include the program in the legislative budget request.*

No new appropriation will be required.

- c. **Non-ongoing sources:**

- i. *If the funding is to come from one-time sources such as a donation, indicate the sources of other funding. What are the institution's plans for sustaining the program when that funding ends?*

N/A

- ii. *If the Describe the federal grant, other grant(s), special fee arrangements, or contract(s) that will be valid to fund the program. What does the institution propose to do with the program upon termination of those funds?*

N/A

- d. **Student Fees:**

- i. *If the proposed program is intended to levy any institutional local fees, explain how doing so meets the requirements of Board Policy V.R., 3.b.*

N/A

- ii. *Provide estimated cost to students and total revenue for self-support programs and for professional fees and other fees anticipated to be requested under Board Policy V.R., if applicable.*

Students who are Idaho residents attending graduate school part-time or full-time can anticipate paying between \$18,876.00-19,176.00 for 42 hours of graduate credit. Non-resident students attending part-time can anticipate paying approximately \$33,056.00 in tuition and fees, while non-resident students attending full-time can anticipate paying up to \$50,552.00.

A review of the institutions listed in section 3 above shows out-of-state student tuition ranges for similar programs range from \$43,460.00 to \$54,510.00.

The proposed program is not a self-support program.

21. Using the budget template provided by the Office of the State Board of Education, provide the following information:

- *Indicate all resources needed including the planned FTE enrollment, projected revenues, and estimated expenditures for the first **four** fiscal years of the program.*
- *Include reallocation of existing personnel and resources and anticipated or requested new resources.*
- *Second and third year estimates should be in constant dollars.*
- *Amounts should reconcile subsequent pages where budget explanations are provided.*
- *If the program is contract related, explain the fiscal sources and the year-to-year commitment from the contracting agency(ies) or party(ies).*
- *Provide an explanation of the fiscal impact of any proposed discontinuance to include impacts to faculty (i.e., salary savings, re-assignments).*

No additional resources are anticipated to transition from the MHS to the MPH over the next four years.

Appendix A: MPH Program and Emphasis Descriptions

The mission of the Master of Public Health (MPH) program is to prepare recent undergraduate students and established professionals for practice-based leadership positions in public health, other public and private health promoting agencies, and health care institutions. The MPH degree provides the foundational knowledge and practical skills necessary for students to be effective strategists, advocates, and administrators in a variety of public health and other health related settings. The degrees are comprised of the following three components for a total of 42 credit hours:

1. Common Core Curriculum (15 credit hours)
2. One of three Emphasis Areas (15-16 credit hours)
3. Electives (12-13 credit hours)

1. Common Core Curriculum (15 credit hours)

All students take the common core courses before taking courses from the emphases or electives.

2. One of three Emphases (15-16 credit hours)

Students in the MPH program can study in one of three emphasis areas:

- 1. Prevention and Intervention Programming:** Students will learn to use a problem-based, multidisciplinary, ecological approach to designing comprehensive prevention and intervention programs that address pressing public health problems. Prepares students to design and coordinate integrated interventions with health education and promotion, policy, regulatory, and built environment components focused on multiple levels of influence. Emphasizes working with local communities to design and deliver services to individuals, families, and groups and to enhance overall community capacity to address local challenges to health and wellbeing.
- 2. Systems Analysis and Innovation:** Students will learn to use systems analysis tools to understand and enhance the social and cultural conditions, the institutional and organizational capacity, and the policy and regulatory frameworks necessary to promote community and population health. Prepares students to ensure the efficiency and effectiveness of all systems necessary to create pathways to health that begin where people live, work, and play. Emphasizes addressing the broader contextual, structural, and environmental conditions that influence and affect health.
- 3. Health Management and Leadership:** Students will learn the practical management and leadership skills necessary to effectively lead public health and other health promoting organizations. Includes strategic planning, human resource management, budgeting and resource development, coalition building, and public-private partnerships. Recognizes that accomplishing public health goals requires both successful internal organizational management and effective external partnering. Prepares students to lead government, nonprofit, and private health promoting organizations.

3. Electives (12-13 credit hours):

Students will complete 12-13 elective hours selected in consultation with their program advisor. These electives will be selected based on each students' professional goals. Elective hours can be used to pursue a group of courses or a graduate certificate (in development) either at Boise State University or through Idaho State University's online public health programs.

Appendix B: Curriculum

Master of Public Health	
Course Number and Title	Credits
Foundational Courses	
MPH 500 Contemporary Foundations of Public Health	2
MPH 501 Framing Public Health Problems	2
MPH 502 Prevention and Intervention in Public Health	3
MPH 503 Public Health Management	2
MPH 504 Applied Epidemiology	2
MPH 505 Applied Public Health Research and Evaluation	2
MPH 506 Applied Statistics in Public Health	2
MPH 590 Internship	1
Area of Emphasis Select one from the following three emphases: Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership. Each area of emphasis has specific requirements listed below.	
Prevention and Intervention Programming Emphasis	
MPH 510 Advanced Overview of Prevention and Intervention Programming	2
MPH 511 Enhancing Community Engagement and Advocacy	2
MPH 512 Community and Population Assessment	2
MPH 513 Advanced Prevention and Intervention Design	2
MPH 514 Implementing and Managing Public Health Programs	2

MPH 515 Evaluating Prevention and Intervention Programs	2
Elective Courses	7-12
Culminating Activity Capstone Option MPH 692 Capstone Course (2 cr) Thesis Option MPH 593 Thesis (4-6 cr) MPH 688 Thesis Proposal (1 cr)	2-7
Total	42
Systems Analysis and Innovation Emphasis	
MPH 520 Advanced Systems Analysis and Problem-Solving	2
MPH 521 Building and Sustaining Systems Capacity	2
MPH 522 Organization, Communications and Advocacy in Systems Change	2
MPH 523 Evaluating Systems Change	2
MPH 524 Contemporary Issues in Health Systems and Policy	2
PUBADM 501 Public Policy Process	3
Elective Courses	6-11
Culminating Activity Capstone Option MPH 692 Capstone Course (2 cr) Thesis Option MPH 593 Thesis (4-6 cr) MPH 688 Thesis Proposal (1 cr)	2-7
Total	42
Health Management and Leadership Emphasis	

MPH 530 Data-Informed Decision-Making	2
MPH 531 Leadership and Strategic Planning in Health Promoting Organizations	2
MPH 532 Managing Human Resources in Health Promoting Organizations	2
MPH 533 Managing Financial Resources in Health Promoting Organizations	2
MPH 534 Managing Partnerships to Achieve Public Health Goals	2
MPH 535 Evaluating Organizational Effectiveness	2
Elective Courses	7-12
Culminating Activity Capstone Option MPH 692 Capstone Course (2 cr) Thesis Option MPH 593 Thesis (4-6 cr) MPH 688 Thesis Proposal (1 cr)	2-7
Total	42

Appendix C: Cohort-Based Recommended Plans of Study for Each MPH Emphasis Area

For Part-Time Students:

Prevention and Intervention Programming		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 510 (2)	MPH 511 (2)	MPH 512 (2)	MPH 513 (2)	
	Elective (2)	Elective (2)	Elective (2)	Elective (2)	
Year 3	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 514 (2)	MPH 515 (2)	MPH 590 (1)		
	Elective (2)	Elective (2)	MPH 692 (2)		

Systems Analysis and Innovation		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 520 (2)	MPH 521 (2)	MPH 522 (2)	MPH 523 (2)	
	Elective (2)	Elective (2)	Elective (2)	Elective (2)	
Year 3	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
		MPH 524 (2)	MPH 590 (1)		
		PUBADM 501 (3)	MPH 692 (2)		
		Elective (3)			

Health Management and Leadership		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 530 (2)	MPH 531 (2)	MPH 532 (2)	MPH 533 (2)	
Year 3	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 534 (2)	MPH 535 (2)	MPH 590 (1)		
	Elective (2)	Elective (2)	MPH 692 (2)		

For Full-Time Students:

Prevention and Intervention Programming		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
	MPH 510 (2)	MPH 511 (2)	MPH 512 (2)	MPH 513 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 514 (2)	MPH 515 (2)	Elective (2)	MPH 590 (1)	
	Elective (2)	Elective (2)	Elective (2)	MPH 692 (2)	
	Elective (2)	Elective (2)			

Systems Analysis and Innovation		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
	MPH 520 (2)	MPH 521 (2)	MPH 522 (2)	MPH 523 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
		MPH 524 (2)	Elective (2)	MPH 590 (1)	
		PUBADM 501 (3)	Elective (2)	MPH 692 (2)	
	Elective (2)	Elective (2)		Elective (3)	

Health Management and Leadership		Fall		Spring	
Year 1	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 500 (2)	MPH 501 (2)		MPH 502 (3)	
	MPH 504 (2)	MPH 505 (2)	MPH 506 (2)	MPH 503 (2)	
	MPH 530 (2)	MPH 531 (2)	MPH 532 (2)	MPH 533 (2)	
Year 2	1 st 7 Weeks	2 nd 7 Weeks	1 st 7 Weeks	2 nd 7 Weeks	
	MPH 534 (2)	MPH 535 (2)	Elective (2)	MPH 590 (1)	
	Elective (2)	Elective (2)	Elective (2)	MPH 692 (2)	
	Elective (2)	Elective (2)			

Appendix D: Transition Plan from the MHS program to MPH Program

Pending approval of the MPH program proposal, all MHS students will be notified regarding changes in the program as early as possible during the Fall 2020 semester. Most students will be able to seamlessly transition to the proposed MPH program. However, each student will be encouraged to meet with the new program director prior to the beginning of Fall 2020 to review their existing plan of study and to make adjustments, if necessary.

Beginning Academic Year 2021-2022, all MHS students who have not completed their plan of study will substitute our new MPH coursework for previously existing MHS coursework. These MHS students will all be required to meet with the new program director to create a formal plan of study that clearly includes these substitutions prior to Spring 2021. In all cases, for graduation, MHS students will be required to complete the total number of graduate hours outlined in their original catalog year if they chose not to transition to the new MPH program. In cases where a 2-hour course is substituted for a 3-hour course, other MHS/MPH coursework will be used to account for the differences. The program director reserves the right to make other substitutions when it is in the best interest of the student.

I. PLANNED STUDENT ENROLLMENT

	FY 21		FY 22		FY 23		FY 24	
	FTE	Headcou	FTE	Headcount	FTE	Headcoun	FTE	Headcoun
A. New enrollments	6	10	13.2	22	13.2	22	13.2	22
B. Shifting enrollments	12	20	11.9	19.8	18	30	21.7	36
Total Enrollment	18	30	25.1	41.8	31.2	52	34.9	58

II. REVENUE

	FY 21		FY 22		FY 23		FY 24	
	On-	One-time	On-going	One-time	On-going	One-time	On-going	One-time
1. New Appropriated Funding I	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2. Institution Funds	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
3. Federal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4. New Tuition Revenues from Increased Enrollments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
5. Student Fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
6. Other (i.e., Gifts)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Revenue	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020**

ATTACHMENT 1

III. EXPENDITURES

	FY 21		FY 22		FY 23		FY 24	
	On-	One-time	On-going	One-time	On-going	One-time	On-going	One-time
A. Personnel Costs								
1. FTE	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2. Faculty	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
3. Adjunct Faculty	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4. Graduate/Undergrad Assist	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
5. Research Personnel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
6. Directors/Administrators	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
7. Administrative Support Pers	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
8. Fringe Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
9. Other:	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Personnel and Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	FY 21		FY 22		FY 23		FY 24	
	On-	One-time	On-going	One-time	On-going	One-time	On-going	One-time
B. Operating Expenditures								
1. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2. Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
3. Other Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
4. Communications	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
5. Materials and Supplies	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
6. Rentals	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
7. Materials & Goods for Manufacture & Resale	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
8. Miscellaneous	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Operating Expenditures	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Page 26

	FY 21		FY 22		FY 23		FY 24	
	On-going	One-time	On-going	One-time	On-going	One-time	On-going	One-time
C. Capital Outlay								
1. Library Resources	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2. Equipment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Capital Outlay	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
	FY 21		FY 22		FY 23		FY 24	
D. Capital Facilities Construction or Major Renovation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E. Indirect Costs (overhead)								
Utilities	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maintenance & Rep	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES:	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Net Income (Deficit)	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

MEMORANDUM OF UNDERSTANDING

Between

Idaho State University

And

Boise State University

DocuSign Envelope ID: 6B006384-12DE-4749-B218-77F0FDC15F1B

THIS MEMORANDUM OF UNDERSTANDING ("MOU"), ENTERED INTO BY AND BETWEEN IDAHO STATE UNIVERSITY ("ISU") and BOISE STATE UNIVERSITY ("BSU"), State of Idaho institutions of higher education.

WHEREAS, Policy III.Z of the IDAHO STATE BOARD OF EDUCATION (BOARD) lists ISU as the institution with statewide program responsibility for the Master of Public Health Degree; and

WHEREAS, the Treasure Valley has been designated as BSU's service region in BOARD Policy III.Z.; and

WHEREAS, the preparation of Master of Public Health graduates is an important task for higher education in Idaho and nation-wide; and

WHEREAS, ISU offers a Master of Public Health degree in face to face evening in Pocatello and the Treasure Valley and asynchronous online formats; requires a thesis or project and an oral examination; and requires the GRE for admission; and

WHEREAS, BSU offers a Master of Health Sciences degree in a face to face evening format in the Treasure Valley with emphases in Health Policy, Health Promotion, and Health Services Leadership; offers a thesis and oral examination or project option; and does not require the GRE for admission; and

WHEREAS, BSU has determined that BSU students would be better served by receiving a Master of Public Health Degree; and therefore, desires to transition its existing Master of Health Sciences to a Master of Public Health with emphases in Prevention and Intervention

Programming, Systems Analysis and Innovation, and Health Management and Leadership;
and

WHEREAS, BSU has determined that there exists in the Treasure Valley the need for Master of Public Health program that differs from the General Emphasis of ISU and offers emphases in Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership; and

WHEREAS, the development of a Master of Public Health program by BSU and the existence of a Master of Public Health program at ISU could potentially serve as a stepping stone to the eventual creation of a collaborative School of Public Health between ISU and BSU and to offer doctoral level degrees, specifically a Ph.D. degree and a Doctor of Public Health degree; and

WHEREAS, the Board has directed the institutions under its governance to avoid duplication of programs, where possible, and to collaborate, where possible.

NOW, therefore, subject to required approvals, including by the Council of Academic Affairs and Programs (CAAP) and the BOARD, and in accordance with BOARD Policy III.Z, and Policy III.G, ISU and BSU hereby agree to act in accordance with the following:

1. BSU agrees to support the continued offering by ISU of its Master of Public Health degree with a general emphasis and for ISU to develop other emphasis areas that are not duplicative with BSU.
2. ISU agrees to support the transition by BSU of its Master of Health Sciences degree to a Master of Public Health degree with emphases in Prevention and Intervention Programming, Systems Analysis and Innovation, and Health Management and Leadership and for BSU to develop other emphasis areas that are not duplicative with ISU.
3. ISU and BSU agree to cooperate, as feasible, in the sharing of graduate-level courses by enabling students to take courses in one another's programs, by co-teaching

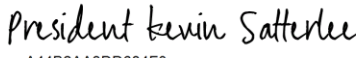
courses, by allowing transfer of electives and certificate, and/or by cross listing courses.

4. ISU and BSU will work to facilitate the utilization of faculty members from each institution as appropriate to staff graduate student committees.
5. ISU and BSU agree to work together to explore the possibilities of a joint School of Public Health and joint doctoral level degrees.
6. ISU and BSU will work to facilitate the collaboration of faculty members from each institution in research in the realm of Public Health.
7. Under this agreement neither BSU nor ISU relinquish any of their rights or responsibilities under Policy III.Z.

This MOU between ISU and BSU shall be effective the 30th day of June, 2020.

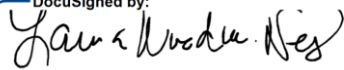
This agreement is executed by the authorized representatives of Idaho State University and Boise State University.

Idaho State University:

DocuSigned by:

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Kevin Satterlee, J.D.
President, Idaho State University

7/9/2020 | 1:37 PM PDT

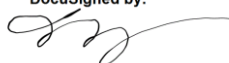
Date

DocuSigned by:

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Laura Woodworth-Ney, Ph.D.
Provost and Executive Vice President

7/4/2020 | 8:55 AM MDT

Date

Boise State University:

DocuSigned by:

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Marlene Tromp, Ph.D.

President, Boise State University

6/25/2020 | 3:03 PM PDT

Date

DocuSigned by:

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Tony Roark, Ph.D.

Interim Provost and Vice President for Academic Affairs

6/25/2020 | 2:30 PM PDT

Date

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

SUBJECT

Graduate Medical Education Report

REFERENCE

December 2017	Board approved the Ten-Year Strategic Plan for Graduate Medical Education
June 2018	Board approved first reading of Board Policy III.C. Graduate Medical Education Committee
August 2018	Board approved second reading of Board Policy III.C. Graduate Medical Education Committee
August 2019	Board received an update on the status of graduate medical education in Idaho and the Board's 10-year Graduate Medical Education plan

APPLICABLE STATUTE, RULE, OR POLICY

Idaho Code §33-3720
Idaho State Board of Education Governing Policies & Procedures, Section III.C.

BACKGROUND/DISCUSSION

Graduate Medical Education (GME) represents the time period of professional medical training after medical school in which residents (which are employees, not students) learn to be independent, competent, safe, and skilled clinicians who will become licensed and certified in particular specialties. This training period typically lasts from 3-7 years after medical school. Medical students are recruited from medical schools nationally and globally to Idaho GME residency programs. Completion of the residency program also marks completion of the necessary training for residents to become practicing, skilled, and caring physicians.

Idaho currently ranks 49th in the United States for physicians per capita and 49th in the U.S. for number of GME "residency" positions per capita. Since 50-75% of residency program graduates live within 100 miles of where they graduate, there is a direct correlation among the number of GME residency programs, the number of GME residents in training, and the retention rate of the physician workforce in a state. GME is the essential ingredient to help build Idaho's current and future healthcare workforce.

With funding from the legislature, a GME Ten-Year Strategic Plan (Plan) was created in 2017 to increase the number of GME programs in Idaho from nine to twenty-one over the course of a decade. Additionally, there will be an expansion from four fellowships to nine during this timeframe. Fellowships consist of an extra year of GME training in a specialized area after completion of a residency. This Plan will increase the total number of residents and fellows in training from 141 in 2017 to 356 in 2028. This will result in the number of graduates from Idaho's GME programs going from 52 per year in 2017 to 124 per year in 2028.

IMPACT

The overall impact of the Ten-Year Strategic Plan will be to produce an additional 1,440 physicians beyond what would have been produced without the Plan. The State of Idaho will only contribute one-third of the expense to train each physician and will eventually pay approximately \$14 million/year when the Plan is fully built out. At least 50% of these physicians will be retained in the State of Idaho. Since each physician will generate approximately \$1.9M per year in economic impact and 12 jobs, the economic impact to Idaho will be approximately \$1.9 billion and 12,000 new jobs. This will represent a 15.9 to 1 return on investment to Idaho while at the same time ensuring more accessible and affordable care of high quality and lower cost.

The third year of the Ten-Year Strategic Plan was intended to be implemented through support provided by the FY2021 budget request, but the impact of COVID-19 and the resultant budget reductions made implementation impossible. The FY22 budget would seek to reestablish progress related to the Ten-Year GME Strategic Plan.

ATTACHMENTS

Attachments 1 – 5, Idaho GME Annual Report, Report Attachments, Budget, Table of Programs, and Dashboard

STAFF COMMENTS AND RECOMMENDATIONS

The GME Committee will coordinate implementation of the Ten-Year Strategic Plan, including assessment and evaluation of the plan toward meeting desired outcomes associated with expanding the delivery of medical care across the state.

BOARD ACTION

This item is for informational purposes only.

July 18, 2020

The Idaho 2020 Graduate Medical Education Committee Annual Report

Ted Epperly, M.D., GME Coordinator

Moe Hagman, M.D., Chairman

Mary Barinaga, M.D. Vice Chair

Todd Kilburn, CFO, (OSBE)

EXECUTIVE SUMMARY:

As the Idaho Ten Year Graduate Medical Education (GME) Strategic Plan enters its third year, it has been very successful in meeting its purpose and vision. In just these two years, the plan has grown new GME (residency) programs from 9 to 12 (33.3% increase), and has also expanded the number of residents and fellows in training from 134 to 195 (46% increase). .

With this growth, Idaho has moved from 49th in the United States for the number of primary care physicians per 100,000 people to 45th. Additionally, Idaho has moved from 49th for the number of GME resident physician positions per 100,000 to 47th, this is significant progress! If the Idaho State Board of Education, Governor Little, and the Idaho Legislature continues to support the FY2020 Budget Plan, this will fund 33 new residents and fellows in existing programs and will develop 5 new residency/fellowship programs in the next year.

The Idaho Graduate Medical Education Committee (GMEC) provides oversight of the Ten Year GME Strategic Plan, as well as also overseeing the metric dashboard that

holds all programs accountable for meeting our desired outcomes. All programs are meeting the goals of accreditation, which include 100% resident position fill rates, as well as having over 50% of their graduates staying in Idaho. Additionally, almost all programs are over 30% of their graduates staying in rural and urban underserved communities in Idaho, and, all programs are of high quality with high Board Certification pass rates.

The Ten Year Idaho GME Plan has successfully lived up to its commitment to help grow and enhance the physician work force in Idaho. The Idaho GMEC would like to thank the Idaho SBOE, OSBE, Governor's Little and Otter, JFAC and Idaho Legislature for their steadfast support. Onward!

1. Current Status:

July 1, 2020 will mark the beginning of the third year of the Idaho Ten Year Graduate Medical Education Strategic Plan. Our Ten Year GME strategic plan has been innovative and garnered national attention as a way to help states increase their physician workforce. This is particularly true in rural states like Idaho. The Ten Year GME plan was approved by the Idaho State Board of Education on December 5th, 2017, and has stimulated the growth of graduate medical education (residency) programs in the state of Idaho from 9 to 12 during this period. The plan has also seen the expansion of the number of GME residents and fellows in training from 134 to 195 in our state. These twelve programs can be seen on Attachment One and consist of 8 family medicine residency programs, 2 internal medicine residency programs and 2

psychiatry programs. Additionally, we have four fellowships in sports medicine, obstetrics, geriatrics and HIV medicine.

The Ten Year GME Plan calls for the build out to 21 GME residency programs with 347 residents and fellows in training in the state of Idaho over the next decade. This is much needed as Idaho ranks 49th in the United States for the number of physicians per 100,000 people. Idaho ranked 49th for the number of primary care physicians per one hundred thousand and 49th for the number of GME resident positions per 100,000 at the plans inception. According to the most recent data from the American Association of Medical Colleges (AAMC), Idaho has now advanced from 49th to 45th for the number of primary care physicians per capita and from 49th to 47th for the number of GME residents per capita.

2. Fiscal Year 2021 Funding

The fiscal year 2021 budget that was requested by Governor Little and approved by the Joint Finance and Appropriations Committee and ultimately by the Idaho State Legislature, is a \$1.25 million-dollar budget for this coming year that will fund 25 new resident positions. Seven of these 25 new positions will be in Family Medicine, 11 in Internal Medicine and 7 in Psychiatry. These new resident positions will be in the communities of Rexburg, Idaho Falls, Pocatello and Boise.

The initial request to the Governor's office and to the State Board of Education was for \$2.5 million dollars, but this was voluntarily pared down by the Idaho Graduate Medical

Education Committee when we were notified that the state of Idaho would be asking all agencies to cut funding and to plan on 1% fiscal year 2021 cuts and 2% or more for fiscal year 2022. The Idaho GMEC paired the budget from \$2.5 million to \$1.25 million dollars to be in line with the Governor's request and to be accountable, responsible and respectful. It was appreciated by the Idaho GMEC that the only two areas that were not subjected to the 1% fiscal year 2020 hold back were the K-12 education, and the Idaho Health Education Programs.

3. Closure of Bingham Memorial Program

During this last year, we were all surprised and disappointed to hear of the sudden closure of the Bingham Memorial Internal Medicine Residency Program effective on June 30, 2020. The reason for this closure was due to withdrawal of accreditation by the Accreditation Council for Graduate Medical Education (ACGME). The reasons for withdrawal of accreditation are unknown as they have been embargoed by the Bingham residency program. Of their 10 current residents, one will graduate in 2020 and the others were placed at the Eastern Idaho Regional Medical Center Internal Medicine Program, the University of Washington Boise Internal Medicine Program and the rest found places in other programs in the United States. With the closure of the Bingham Internal Medicine Residency Program, the Governor recommended and the state legislature rescinded \$635,000 dollars that was being paid to this program back to the state general fund. Therefore, the new funding requested for fiscal year 2021 was \$615,000 in new monies ($\$1.25\text{M} - \$635\text{K} = \615K).

4. Next Year's Budget Request (Fiscal Year 2022)

The state of Idaho will be entering into the fourth year of Idaho's Ten Year GME Plan with the contemplation of the fiscal year 2022 GME budget request. The Executive Committee of the Idaho Graduate Medical Education Committee prepared a \$2.192 million dollar request for fiscal year 2022 which the Idaho Graduate Medical Education Committee approved at its April 2020 quarterly meeting. This request will fund 33 new residents and fellows in training across the 12 existing programs and five new programs that will be developed. Please see Attachment Two for the FY2022 Budget request of the Ten Year GME Plan. The new programs that will be developed with this funding are (1) a new Psychiatry residency at Eastern Idaho Regional Medical Center, with four residents per class; (2) a new Addiction Medicine fellowship in Boise (FMRI) with one fellow per year; (3) a new Addiction Medicine fellowship in Boise (Boise Internal Medicine) with three fellows in training per year; (4) one Clinical Pharmacy resident in Boise at the FMRI; (5) a Behavioral Health fellowship for Family Physicians in Coeur d'Alene.

Additionally there will be expansion growth of one Internal Medicine physician at the Boise Internal Medicine Program; four new Psychiatrists in training at the Western Idaho Psychiatry Residency, six Family Medicine residents for the new class in Idaho Falls; the next class of three new eastern Idaho ISU Psychiatry residents in Pocatello; and an expansion of two new Family Medicine residents at the Rural Training Track (RTT) program in Rexburg. Please see Attachment Three for a table that shows these residency and fellowship programs and their current and new physician trainees.

These new positions for fiscal year 2022 will join the 195 residents and fellows already in training. This will help meet the ongoing needs of an expanding population and a physician workforce to meet that, especially in a state that not only needs it, but that our recent Covid-19 pandemic has demonstrated the continued need for primary care and mental health professionals.

5. Current Location of Idaho GME Programs and Idaho's Resident Physicians

Please refer to Attachment One and Three to see where the current Idaho GME programs, residents and fellows are located. Please note colors in green represent the 195 current residents and fellows in place as of the fiscal year 2021 budget and those in red represent the 33 new residents and fellows. This will bring the total to 228 by June 30, 2021 as noted in red. This growth places us well on our way to the anticipated goal of 347 physicians in training by the end of the Ten Year GME plan.

6. New GME programs on the Near Horizon

There are two known programs that are under serious consideration for the near future. The first of these will be a pediatric residency program sponsored by the Family Medicine Residency of Idaho (FMRI) in conjunction with St. Luke's Regional Children's Hospital in Boise. The second is the growth of a new rural training track program or rural program sponsored by the Family Medicine Residency of Idaho (FMRI) out of the Nampa Family Medicine Residency Program. Discussions are now ongoing around the location of this new rural program. Further on the horizon are the considerations for a

General Surgery program and an Emergency Medicine residency program as well as several new fellowships.

7. Graduate Medical Education Outcomes - Metrics and Dashboard

Please see Attachment Four, which represents the dashboard of the Idaho Graduate Medical Education Committee in regards to the agreed upon metrics to move the Idaho Ten Year GME Strategic Plan forward with outcomes that are meaningful and relevant to the state of Idaho. As you can see on the dashboard, all programs have 100% fill rates from thousands of applicants that want to come to these programs. Additionally all programs are ACGME accredited. Almost all programs exceed the rolling five-year average of the percent of physicians being retained in Idaho at greater than 50%. Also, almost all programs have done an excellent job in having greater than 30% of the graduates serve in rural Idaho or in urban underserved Idaho. Lastly, as noted on the dashboard, you will see that all programs are of high quality and almost all exceed the threshold for success in board certification pass rates as measured by a rolling five-year average.

8. Summary:

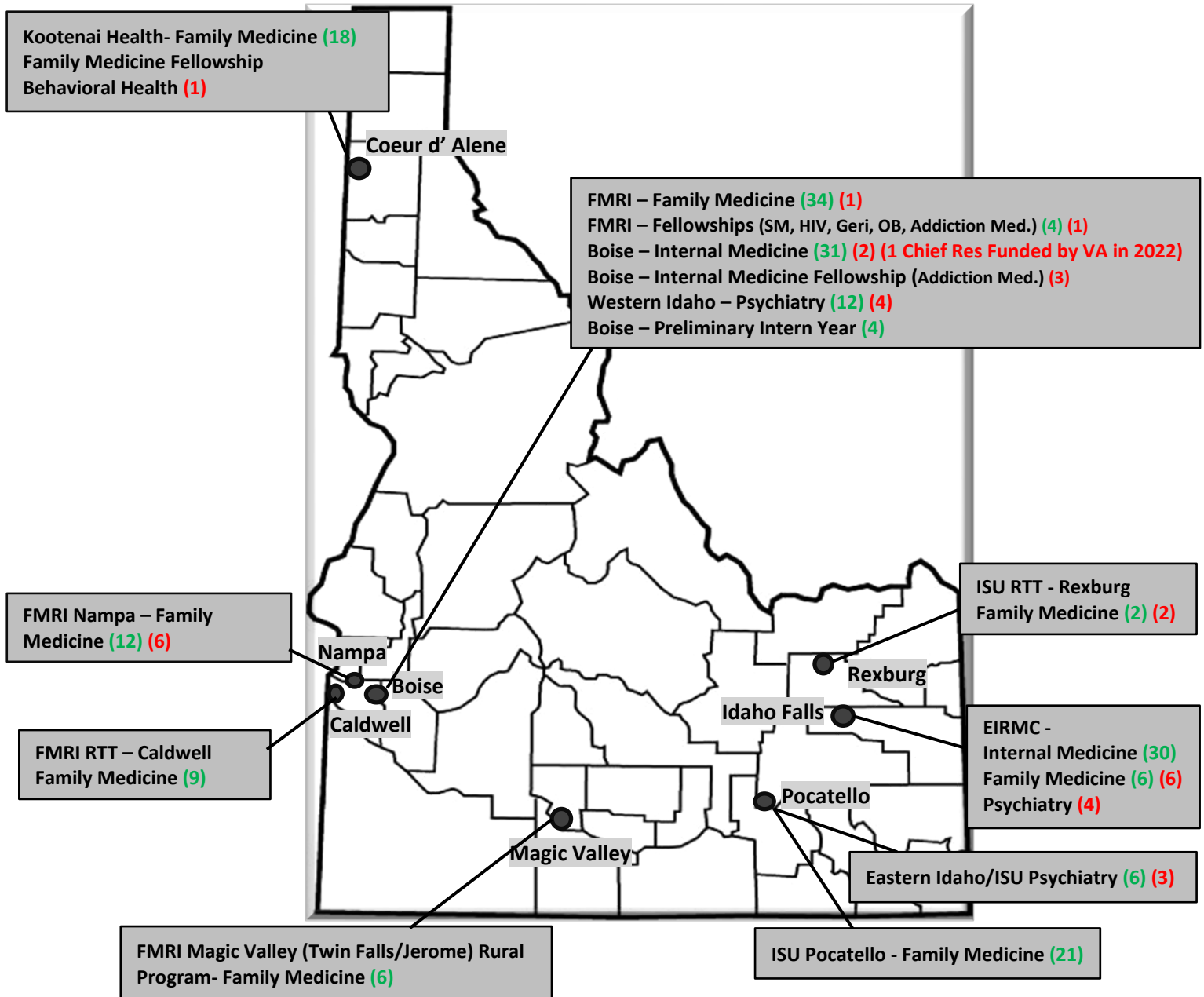
The state of Idaho's Ten Year Graduate Medical Education Strategic Plan has been a success. Despite shifting funding priorities and a global pandemic, the Plan has continued to grow new GME residency programs and train new GME residents in these programs for the state of Idaho. The Ten Year Idaho GME Strategic Plan has grown from nine core residency programs, and with the approval of the fiscal year 2022

budget, will have 13 core programs and 7 Fellowships in place. The number of GME residents in training has gone from 134 in 2017 to 195 in 2020 and will grow by 33 more with the approval of the fiscal year 2022 budget request to 228. New programs are in the pipeline. These include Pediatrics and Family Medicine, two specialties that are still much needed in the state. By all metrics, the Ten Year GME Strategic Plan has demonstrated improvements in the outcomes of primary care physicians per capita in Idaho, the number of GME resident physicians per capita in Idaho, retention rates of graduates that exceed 50% for the state of Idaho and high-quality residents being trained. This year saw the unfortunate closure of one of the GME Residency Programs in Blackfoot for reasons of accreditation. All other programs are in much stronger accreditation shape and are looking at bright futures.

We would all like to thank the Idaho State Board of Education for its steadfast support and vision to help create a stable and growing physician workforce for the state of Idaho. Without that support and encouragement of the Board of Education members as well as from the Office of the State Board of Education (OSBE) this plan may have never seen the light of day. We also want to thank both Governor Otter and Governor Little, the Joint Finance and Appropriations Committee (JFAC) and the Legislature of Idaho for their steadfast support and encouragement of moving the Idaho Ten Year GME plan forward.

Attachment Two – GME Programs and Resident and Fellow Locations in Idaho as of July 1, 2020

Program and Fellowship Locations (2020)



Current Resident and Fellows in Idaho as of July 1, 2020 = 195

Potential New Residents and Fellows in Idaho as of July 1, 2021 = 33

Total Number of Residents and Fellows if FY2022 budget for new Residents and Fellows Approved = 228

Attachment Three - FY 2022 Budget Request of the Ten Year GME Plan**Ten Year GME FY 2022 Budget Increase Request**

Draft 4/13/2020									
Program	Current Funding per FTE	Existing Residents/Fellows (FY2022)		New Residents / Fellows (FY 2022)		Other		Total FY 2022 Requested Funding Increase	
		FTEs	Increase Funding to \$45K	FTEs	Funding at \$60K	FTEs			
Family Medicine Residency of Idaho	\$ 40,000								
Boise Family Medicine		34	\$ 170,000	1	\$ 60,000		\$ -	\$ 230,000	
Caldwell FM Rural Training Track		9	45,000		-		-	45,000	
Magic Valley FM Rural Training Track		6	30,000		-		-	30,000	
Nampa Family Medicine		12	<i>funded</i>	6	<i>funded</i>				
Fellowships (SM, HIV, GER, OB)		4	<i>funded</i>						
Addiction Medicine Fellowship				1	60,000			60,000	
Boise Pharm D Resident						1	30,000	30,000	
Total		65	\$ 245,000	8	\$ 120,000	1	\$ 30,000	\$ 395,000	
Idaho State University	\$ 40,000								
Pocatello Family Medicine		21	\$ 105,000		\$ -		\$ -	\$ 105,000	
RTT Rexburg Resident		2	<i>funded</i>	2	120,000		-	120,000	
ISU Offset							75,000	75,000	
Total		23	\$ 105,000	2	\$ 120,000		\$ 75,000	\$ 300,000	
Kootenai	\$ 40,000								
Coeur d'Alene Family Medicine		18	\$ 90,000		\$ -		\$ -	\$ 90,000	
FM/Behavioral Health Fellowship				1	\$ 60,000			\$ 60,000	
Total		18	\$ 90,000	1	\$ 60,000		\$ -	\$ 150,000	
Boise Internal Medicine	\$ 20,000 (Increase to 22,500)								
Boise Internal Medicine		29	\$ 72,500	1	\$ 60,000			\$ 132,500	
Preliminary Year Intern Program		4	10,000				-	10,000	
IM Chief Resident		2	5,000	1	<i>(funded VA)</i>			5,000	
Addiction Medicine Fellowship				3	180,000		-	180,000	
Total		35	\$ 87,500	5	\$ 240,000		\$ -	\$ 327,500	
Western Idaho Psychiatry	\$ 49,725								
Boise Core Program		12	(Already funded above \$45K)	4	\$ 240,000		\$ -	\$ 240,000	
Total		12	\$ -	4	\$ 240,000		\$ -	\$ 240,000	
Eastern Idaho Regional Medical Center	\$ 40,000								
Internal Medicine		30	(Funded)						
Family Medicine		6	(Funded)	6	\$ 360,000			\$ 360,000	
Psychiatry				4	\$ 240,000			\$ 240,000	
Total		36	<i>funded</i>	10	\$ 600,000		\$ -	\$ 600,000	
Eastern Idaho / ISU/Psychiatry	\$ 60,000								
UU/ISU Psychiatry		6	<i>funded</i>	3	\$ 180,000		\$ -	\$ 180,000	
Total		6	<i>funded</i>	3	\$ 180,000		\$ -	\$ 180,000	
Grand Total		195	\$ 527,500	33	\$ 1,560,000	1	\$ 105,000	\$ 2,192,500	

Attachment Four – Table of Idaho GME Programs with Current and Proposed Residents and Fellows

	Existing Residents/Fellows (FY2021)	New Residents / Fellows (FY2022)	Other (FY2022)
<u>Family Medicine Residency of Idaho</u>			
Boise Family Medicine	34	1	
Caldwell FM Rural Training Track	9		
Magic Valley FM Rural Training Track	6		
Nampa Family Medicine	12	6	
Fellowships (SM, HIV, GER, OB)	4		
Addiction Medicine Fellowship		1	
Boise Pharm D Resident			1
Total	65	8	
<u>Idaho State University</u>			
Pocatello Family Medicine	21		
RTT Rexburg Resident	2	2	
ISU Offset			
Total	23	2	
<u>Kootenai</u>			
Coeur d'Alene Family Medicine	18		
FM/Behavioral Health Fellowship		1	
Total	18	1	
<u>Boise Internal Medicine</u>			
Boise Internal Medicine	29	1	
Preliminary Year Intern Program	4		
IM Chief Resident	2	1	
Addiction Medicine Fellowship		3	
Total	35	5	
<u>Western Idaho Psychiatry</u>			
Boise Core Program	12	4	
Total	12	4	
<u>Eastern Idaho Regional Medical Center</u>			
Internal Medicine	30		
Family Medicine	6	6	
Psychiatry		4	
Total	36	10	
<u>Eastern Idaho / ISU/Psychiatry</u>			
UU/ISU Psychiatry	6	3	
Total	6	3	
Grand Total	195	33	1

INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

ATTACHMENT 5

Attachment Five – Idaho GME Program Dashboard and Metrics

Report to SBOE from GME Committee – Dashboard – 6/8/2020

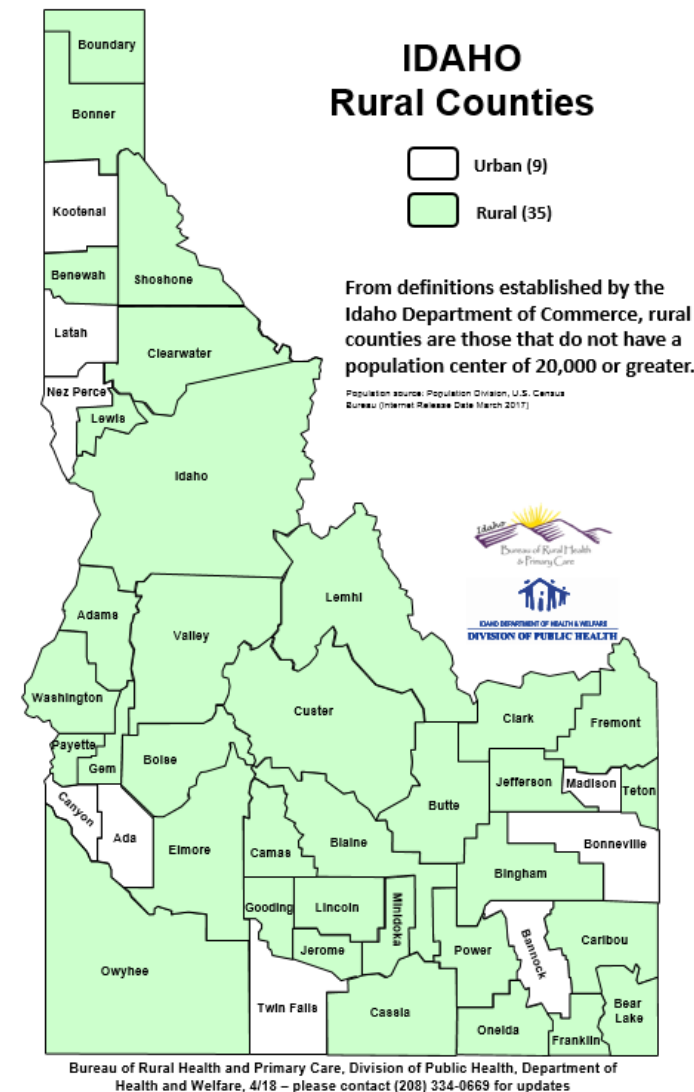
Program	First Graduating Class	100% Fill Rate Intern Class	ACGME Accreditation	Graduates Practicing in Idaho as Measured by Rolling 5-year Average ≥50% - Fam Med ≥40% - Int Med ≥30% - Psych ≥30% - Emerg Med ≥30% - Surgery	≥30% of Graduates in Idaho Serve in Rural or Underserved Areas by Rolling 5-year Average		≥80% Board Certification Pass Rate for Graduates as Measured by Rolling 5-year Average
					Rural*	Urban Underserved [#]	
FMRI – Boise	1976	100%	Yes	31 of 55 / 56%	4 of 31 / 13%	18 of 31 / 58%	44 of 44 / 100%
FMRI – Fellowships	1999	100%	Yes	11 of 18 / 61%	1 of 11 / 9%	7 of 11 / 64%	16 of 16 / 100%
FMRI – Caldwell RTT	1998	100%	Yes	11 of 14 / 79%	5 of 11 / 45%	3 of 11 / 27%	11 of 11 / 100%
FMRI – Magic Valley RTT	2012	100%	Yes	6 of 10 / 60%	3 of 6 / 50%	3 of 6 / 50%	8 of 8 / 100%
FMRI – Nampa	2022	100%	Yes	NA	NA	NA	NA
ISU – Pocatello	1994	100%	Yes	18 of 35 / 51%	4 of 18 / 22%	11 of 18 / 83%	35 of 35 / 100%
ISU – Rexburg RTT	2022	100%	Yes/Prelim	NA	NA	NA	NA
Kootenai Family Medicine	2017	100%	Yes	17 of 24 / 71%	2 of 17 / 12%	3 of 17 / 18%	18 of 18 / 100%
Kootenai – Fellowship	2021	NA	NA	NA	NA	NA	NA
Boise Internal Medicine	2014	100%	Yes	22 of 40 / 55%	1 of 22 / 5%	5 of 22 / 23%	30 of 38 / 79%
Boise IM – Fellowship	2022	NA	Yes	NA	NA	NA	NA
Western Idaho Psychiatry	2010	100%	Yes	10 of 16 / 63%	0 of 10 / 0%	10 of 10 / 100%	14 of 16 / 88%
EIRMC Internal Medicine	2021	100%	Yes	NA	NA	NA	NA
EIRMC Family Medicine	2023	NA	Yes	NA	NA	NA	NA
EIRMC Psychiatry	2025	NA	NA	NA	NA	NA	NA
UofU/ISU Psychiatry	2024	NA		NA	NA	NA	NA

Key: Green – measure met Yellow – measure nearly met Red – not meeting measure

*Definition of Rural Idaho – According to the Idaho Department of Commerce, rural counties in Idaho are defined as those with <20,000 population. 35 of 44 counties in Idaho are rural by this definition. Non-rural counties are: Ada, Bannock, Bonneville, Canyon, Kootenai, Latah, Madison, Nez Perce, and Twin Falls.

#Definitions of Underserved Idaho

1. Primary Care Underserved - 97% of all of Idaho qualifies as a Health Professional Shortage Area (HPSA) for primary care. The only areas without a primary care HPSA designation are Ada County, half of Blaine County (Sun Valley area), and half of Bonneville County (Idaho Falls area).
2. Mental Health Care - 100% of Idaho (all counties and areas) are mental health HPSA's.
3. All FQHCs and Community Health Centers serve underserved Idaho.



INSTRUCTION, RESEARCH, AND STUDENT AFFAIRS
AUGUST 26, 2020

SUBJECT

University of Utah School of Medicine 2019 Annual Report

REFERENCE

June 2008	The Board approved a revised three-year contract between the University of Utah School of Medicine and the State Board of Education.
December 2013	The Board approved a revised three-year contract between the University of Utah School of Medicine and the State Board of Education.
September 2016	The Board approved a revised three-year contract between the University of Utah School of Medicine and the State Board of Education.
December 2016	The Board received the annual University of Utah School of Medicine Report.
October 2017	The Board received the annual University of Utah School of Medicine Report.
December 2018	The Board received the annual University of Utah School of Medicine Report.

BACKGROUND/DISCUSSION

Since July 1976, the State Board of Education (Board) has maintained an agreement with the University of Utah School of Medicine (UUSOM) to reserve a specific number of seats for Idaho residents at the in-state tuition and fee rate established by UUSOM for residents of Utah. The Board pays annual fees to support Idaho resident students enrolled under this agreement.

During the 2016 legislative session, two additional seats per year were approved for this cooperative agreement. Beginning in FY 2017, two additional seats were added to the incoming class of students, increasing annual enrollment in the program by 10 students. In FY 2020, that brought the total number of students in the program to 40.

As part of the Board's contract with UUSOM, the Board receives an annual report which provides program information to include an overview of the four-year curriculum and clerkships.

ATTACHMENTS

Attachment 1 – University of Utah School of Medicine 2019 Annual Report

STAFF COMMENTS AND RECOMMENDATIONS

The report includes a financial overview of support provided for ten students in Academic Year 2018-2019 and an admissions summary consisting of names and hometowns of those first year Idaho-sponsored students.

BOARD ACTION

This item is for informational purposes only.



University of Utah School of Medicine

Idaho State Board of Education Annual
Report

August 2020





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Mission Statement

The University of Utah School of Medicine serves the people of Utah and beyond by continually improving individual and community health and quality of life. This is achieved through excellence in patient care, education, and research. Each is vital to our mission and each makes the others stronger.

- We provide compassionate care without compromise.
- We educate scientists and health care professionals for the future.
- We engage in research to advance knowledge and well-being.

Vision of the University of Utah

The “One U” vision of the University of Utah is to work together to solve big problems in society and to optimize our campus resources to create an exceptional educational experience for our learners.”

Vision of the School of Medicine

To create an exceptional learning experience for our students to promote their development into competent and caring professionals. To achieve our vision of exceptional learning, we value:

1. Relationships built on trust and mutual respect;
2. Talents and ability of each member of the learning community to contribute according to his or her talents;
3. Responsibility of each member of the community to one another;
4. Accountability towards professional standards of attitudes and behavior; and Respect for diversity of perspectives and the inclusive spirit of teamwork.

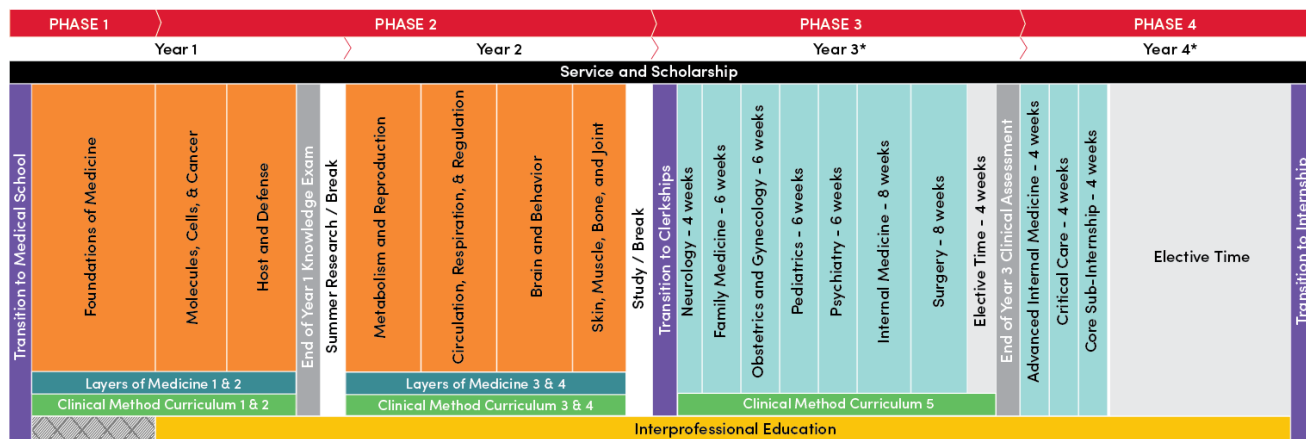
Table of Contents

<u>Overview of the Four Year Curriculum</u>	<u>Page Number</u>
Phase 1:	
Clinical Medicine	5
Medical Sciences	5
Medical Arts and Humanities	5
Phase 2:	
Clinical Medicine	5
Medical Sciences	6
Medical Arts and Humanities	6
Phase 3:	
Clinical Medicine	6
Medical Sciences	6
Medical Arts and Humanities	6
Phase 4:	
Interprofessional Education	6

Idaho Affairs Update Program Leadership <ul style="list-style-type: none"> • Dr. Benjamin Chan • Dr. Kerry Whittemore • Dr. Sarah Franklin • Dr. Lucy E. Hansen • Dr. Stephanie Lyden • Dr. Elizabeth Botts Public Affairs and Outreach Efforts	8 - 9 10
Admissions <u>Academic Requirements</u> Bachelor's Degree GPA MCAT Premedical Course Requirements <u>Activity Recommendations</u> Community Engagement Clinical Exposure Intellectual Curiosity	10 -11 11-14
Admissions Reports	15
Idaho Sponsored Students	16
Observational Experience	17
Idaho Rural Outreach Program (IROP)	17

Clinical Medical Education in Idaho Family Practice Clinical Clerkship	18 - 20
Family Medicine Volunteer Clinical Faculty in Idaho	20
Financial Report 2019-2020	22
School of Medicine Graduate Reports Idaho Matches Idaho Student Information Students Who Completed their Residency at the UUSOM	23 - 27
Idaho Psychiatry Information Rural Track Overview Rotations Idaho track, 4-Year Program Schedule	28
Idaho Psychiatry Financial Report 2019-2020	31
Idaho Psychiatry 2020 Match Results	31- 32

MD Program Curriculum



*Course & elective order varies

Overview

The curriculum is designed to produce highly skilled physicians who are technically proficient, caring, compassionate and capable of adapting to the changing health care demands of the 21st century. Active learning approaches, critical thinking skills and information management techniques are all a part of our educational environment. Our curriculum builds upon the strengths of traditional learning methods and explores areas of study opened up by the explosion of biomedical knowledge and the transformation of America's health care delivery system.

Medical students receive basic science instruction and the critical skills of communicating with, examining and diagnosing patients through all 4 years. Instruction integrates Medical Sciences, Medical Arts and Humanities and the Clinical Method Curriculum.

Phase 1 (4 months):

Students develop a solid foundation in the sciences basic to medicine (e.g. anatomy, physiology, biochemistry and genetics). Additional introductory instruction will include elements of the doctor patient relationship and how to communicate as a healthcare professional.

- **Clinical Medicine:** Interviewing & physical examination skills.
- **Medical Sciences:** Establishes the foundation for Phase 2 with the sciences basic to medicine and an overview of body systems.
- **Medical Arts and Humanities:** Confidentiality, professionalism, ethics, communication along with medical informatics and medical systems.

Phase 2 (18 months):

- **Clinical Medicine:** Students attend and see patients in primary care clinics as well as gain exposure to subspecialty practices.
- **Medical Sciences:** Seven specific sections, Molecules, Cells and Cancer; Host and Defense; Metabolism and Reproduction; Circulation/Respiration and Regulation; Brain and Behavior; Skin/Muscle/Bone and Joint; are combined with integrated, content-specific Medical Arts and Clinical Medicine.
- **Medical Arts and Humanities:** Includes professionalism, medical informatics & economics, medical systems etc.

Phase 3 (12 months):

- **Clinical Medicine:** Is emphasized as students experience inpatient and tertiary care through Clerkships. Clerkships include: Family Medicine, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry, General Surgery and Neurology.
- **Medical Sciences:** Via didactic instruction and integrated into the clinical experience.
- **Medical Arts and Humanities:** Via didactic instruction and integrated into the clinical experience.

Phase 4 (12 months):

Students develop advanced skills through sub-internship, Critical Care, Advanced Internal Medicine and elective courses. They prepare for entry into residency by selecting a curriculum specific to their career specialty interests.

Interprofessional Education (IPE) (Years 1 - 4):

UUSOM students are required to complete an Interprofessional Education course during each of their four years. The IPE curriculum consists of foundational courses and interprofessional simulations such as Telemedicine and Disaster Preparedness.

Idaho Affairs Update

Program Leadership



Dr. Benjamin Chan is a Board Certified physician in General Psychiatry and Child & Adolescent Psychiatry. He graduated from the University of Utah School of Medicine in 2004. He completed his residency at George Washington University in Washington DC and Fellowship at University of Maryland in Baltimore, MD. He returned to Utah in 2010 and joined the faculty in the Department of Psychiatry. He works as an inpatient hospitalist at the University Neuropsychiatric Institute (UNI) treating children and adolescents with a wide variety of acute psychiatric conditions. He was appointed Assistant Dean of Admissions in March of 2012 and Assistant Dean of Idaho Student Affairs in July 2014. In July 2017 he was promoted to Associate Dean of Admissions and Idaho Affairs.

Assistant Directors of RUUTE (Rural & Underserved Utah Training Experience) and Regional Affairs (including Idaho/Montana/Wyoming)



Dr. Kerry Whitemore is a general pediatrician for the University of Utah. She grew up in upstate NY and attended Villanova University for her undergraduate education. She attended medical school at McGill University in Montreal, Canada before moving to Salt Lake City for her pediatric residency. She works in a clinic in Salt Lake City that serves predominantly refugee and immigrant patients. Since her undergraduate years, she has been committed to becoming a physician for underserved communities. She has been involved in teaching medical students and residents in pediatric medicine since joining the University of Utah in 2014. She thinks that educating students in rural and underserved settings is vitally important in order to see the full scope of medicine and also to encourage students to go back and practice in underserved areas in the future. **Course Director:** Caring for the Underserved: Rural and Refugee Health. **Area of focus:** Rural Faculty Development



Dr. Sarah Franklin is an Associate Professor at the University of Utah who focuses on health sciences research. She oversees a basic science research laboratory which seeks to understand the role of epigenetics in the development of cardiac hypertrophy and heart failure. Dr. Franklin is passionate about exposing young individuals to new career paths in medicine and science, creating meaningful educational opportunities for students, and mentoring them along their academic journey. She grew up on a cattle ranch in rural Utah, loves the outdoors, international travel, global humanitarian work and hopes to visit all 190+ countries in her life. **Course Director:** Innovation and Research. **Area of Focus:** Rural research opportunities



Dr. Lucy E. Hansen is originally from Portsmouth Virginia and attended medical school at Virginia Commonwealth University. She moved to Salt Lake City to complete her pediatric residency at the University of Utah. During her residency, Lucy fell in love with Utah and decided to make it her home. She joined the faculty at the University of Utah and now works in the Rapid Treatment Unit (RTU) at Primary Children's Hospital as an

Assistant Professor in the Division of Pediatric Emergency Medicine. She has also found a passion for working with medical students and has multiple roles within the University of Utah School of Medicine, including core faculty for the Clinical Method Curriculum, and Master Clinician Observer. She has also worked for the University of Utah Sustainable Campus Initiative Fund through the Office of Sustainability. **Course Director:** Sustainability, Medicine, and Health. **Area of Focus:** Building community among rural students & professional identity formation



Dr. Stephanie Lyden was born and raised in Wyoming. Following her undergraduate education at the University of Wyoming, she was a clinical research assistant for the National Institutes of Health's stroke team in Bethesda, MD. She later attended medical school at the University of Washington in Seattle, WA; where she completed various clinical rotations throughout Washington, Idaho, Montana and Wyoming. She then went on

to complete a neurology residency at Rush University Medical Center in Chicago, IL. She completed a vascular neurology fellowship at the University of Utah in Salt Lake City and then decided to stay on as faculty. At present, she also completes an outreach clinic in Jackson, WY every month. She has an interest in developing ways to improve access to specialty care in rural settings and likes the idea of using new technology, such as telemedicine, to help achieve this. She feels that exposure to these different healthcare settings in medical school can enrich the education of students to become more well-rounded, conscientious providers. **Course Director:** Virtual Care: Telemedicine for Future Providers. **Area of Focus:** Technology to improve care and access with rural patients

Assistant Training Director, Psychiatry Idaho Rural Track



Dr. Elizabeth (Beth) Botts is a native of Oklahoma earned her medical degree at the University of Oklahoma Health Sciences Center in Oklahoma City, Oklahoma. She then completed a residency at the University of Utah and a child and adolescent psychiatry fellowship at Vanderbilt University while serving as the Chief Resident during her fellowship training. At the University of Utah and Vanderbilt, Dr. Botts has participated in numerous teaching opportunities, program improvement projects, and committee involvement including establishing autism and eating disorder "tracks" on the child/adolescent inpatient units. She is first and foremost a patient advocate and educator with a drive

for improving access to mental healthcare. Dr. Botts is very passionate about the Idaho Track and its success and has volunteered to lead in its development.

Public Affairs and Outreach Efforts

In January 2019 Drs. Chan and Botts met with the Idaho State Legislature (Joint Finance Appropriations Committee) to request funds to create an Idaho Psychiatry residency program. The state legislature allocated funds in the amount of \$180,000.00 to establish three psychiatry residency positions. These residents will spend the first two years of their residency in Salt Lake City and will spend the final two years in Southeastern Idaho.

In June 2019, representatives from the Admissions Office and the MD/PHD program participated in the Inland Northwest Pre-Med Summit at the University of Idaho in conjunction with representatives from WWAMI and other medical schools in Idaho and Washington. The summit provided an opportunity for medical school applicants to participate in and learn about multiple mini interviews and personal statement writing as well as the admissions process for each of the schools attending.

Representatives from the Admissions Office attended graduate fairs at Boise State, BYU-Idaho and Idaho State University to discuss our medical school. The Admissions Office strives to make sure Idaho applicants have the resources needed to help them develop strong applications to medical school.

Admissions

To meet the mission and vision of the University of Utah School of Medicine, Admissions seek applicants who will emphasize community, relationships, and professionalism in the learning culture through the Exceptional Education Experience (ELE). ELE promotes the creation of a foundation that develops self-motivated, system-thinking, patient-centered, evidence-based, life-long learners. Our admissions requirements and recommendations reflect these values.

Academic Requirements

Bachelor's degree

- An applicant's bachelor's degree must be completed at a regionally accredited institution in the United States or Canada prior to matriculation to the University of Utah School of Medicine.
- Accepted students will be required to provide official transcripts for each college attended, and the degree must be posted on the transcript prior to matriculation.

No specific or recommended undergraduate major required

- The University of Utah School of Medicine recommends that students choose a major field for which they have enthusiasm and interest.

GPA

Grade point average (GPA) includes all grades received for college credit using the AMCAS GPA calculation. If a course is repeated, both grades received for that course are calculated into the GPA. Applicants must have a science, non-science and overall GPA of at least 3.00 or above to be eligible for consideration.

MCAT

- For the 2020-2021 application cycle, a minimum MCAT score of 124 in all sections with a combined score equal or higher than 500 is required to be considered further.
- All applicants are required to take the MCAT within **four (4)** years of their application. Only MCAT dates after January 1, 2017 will be considered for the 2020-2021 cycle.
- An applicant's **most recent** MCAT score will be considered.

Premedical Course Requirements

Chemistry: Four semesters/six quarters that should include a general chemistry series with labs and an organic chemistry series with labs. We will accept AP credit for one semester with a score of four or five.

Physics: Two semesters/three quarters with labs.

Writing/Speech: Two semesters/three quarters of courses that emphasize written or verbal communication.

Biology: Two semesters/three quarters. One course must be in Cell Biology or Biochemistry.

Social Science: One semester/one quarter

Humanities: One semester/one quarter.

Activity Recommendations

Community Engagement: Demonstrated leadership experience and service activity within the community.

Leadership and community engagement are vitally important for all medical school applicants, as the medical profession is strongly oriented toward leadership and service within one's community.

Dedication, determination, and decision making with a willingness to contribute to the welfare of others are indicators of one's ability to succeed in medicine. Individuals with

these attributes readily accept leadership positions and are assets to their community and the medical profession.

Expectations:

- Service and leadership activities should occur within the past 5 years.
- Leadership activities should last longer than 3 months.
- Leadership experience can be earned through either employment or service, while acts of community service must be served without reward or compensation.
- The admissions committee will take into account whether the applicant has consistently maintained involvement in a variety of experiences where they have expressed a sincere interest.
- Experiences can be performed domestically or abroad.

Examples:

- Educational, university-based, or community-based activities: tutoring, club participation, humanitarian aid, etc.
- Leadership roles through employment: training, managing, plan implementation, etc.
- Activities through a religious organization: teaching, mentoring, leading, etc.
- Other activities that engage the community.

Clinical Experience: Demonstrated understanding of the typical day of a physician, interaction with different specialties, medical environments, and patients with meaningful experiences in a clinical setting.

Working alongside physicians and some health care professionals is helpful in determining future career goals, and it is important that the applicant has a thorough understanding of what it is like to be a practicing physician. This includes having some idea of how science is involved in patient care as well as being comfortable around individuals who are physically and/or mentally ill. This knowledge is best obtained through a combination of direct patient services and physician shadowing.

*** Due to COVID-19 and other general patient privacy concerns, the committee recognizes that there are many barriers for pre-medical applicants to shadow health care professionals at this time.*

Expectations:

- Participation in activities must have occurred since high school graduation.
- Patient care experiences can include international work, however, strong domestic (U.S. or Canada) experience is recommended.
- Direct patient exposure is expected, and best obtained by volunteering or working directly one-on-one with patients.
- Physician shadowing-type experiences should be conducted with a physician in the U.S. or Canada.
- Direct patient exposure **does not include** indirect patient care such as housekeeping, staffing the information desk, administration, or working in a

pharmacy. Any type of indirect patient exposure should not be counted towards this criteria.

- Caring for an ill family member should not be counted towards this criteria.
- Some applicants have functioned as military medics, EMT's, nurses, CNA's, MA's, etc. When applicants are certified as EMT's, CNA's, etc. the Admissions Committee will take into account whether the applicant has actually functioned as an EMT, CNA, etc.

Examples:

- Shadowing allopathic and osteopathic physicians, interns, residents, fellows, physician assistants, nurse practitioners, nurses, EMT's, and paramedics.
- Shadowing primary care physicians is encouraged when possible.
- Locations can include hospitals, emergency rooms, clinics, nursing care facilities, hospice, group homes, home health, rehabilitation centers, humanitarian projects, etc.
- Other acceptable experiences include being a medical scribe, a clinical research coordinator (if it includes interaction with patients), and telehealth providers (if supplementing a non-telehealth experience)

Intellectual Curiosity: Involvement in activities that demonstrate an applicant's pursuits of intellectual curiosity, participation, and achievement.

Applicants should identify their involvement in academics, research, creative endeavors, performance, and other activities that demonstrate an applicant's pursuits of intellectual curiosity, participation, and achievements. Success in the medical field requires life-long learning, teachability, flexibility, curiosity, and engagement.

Applicants should express how these activities will assist their preparation for medical school, and ultimately their performance as a physician.

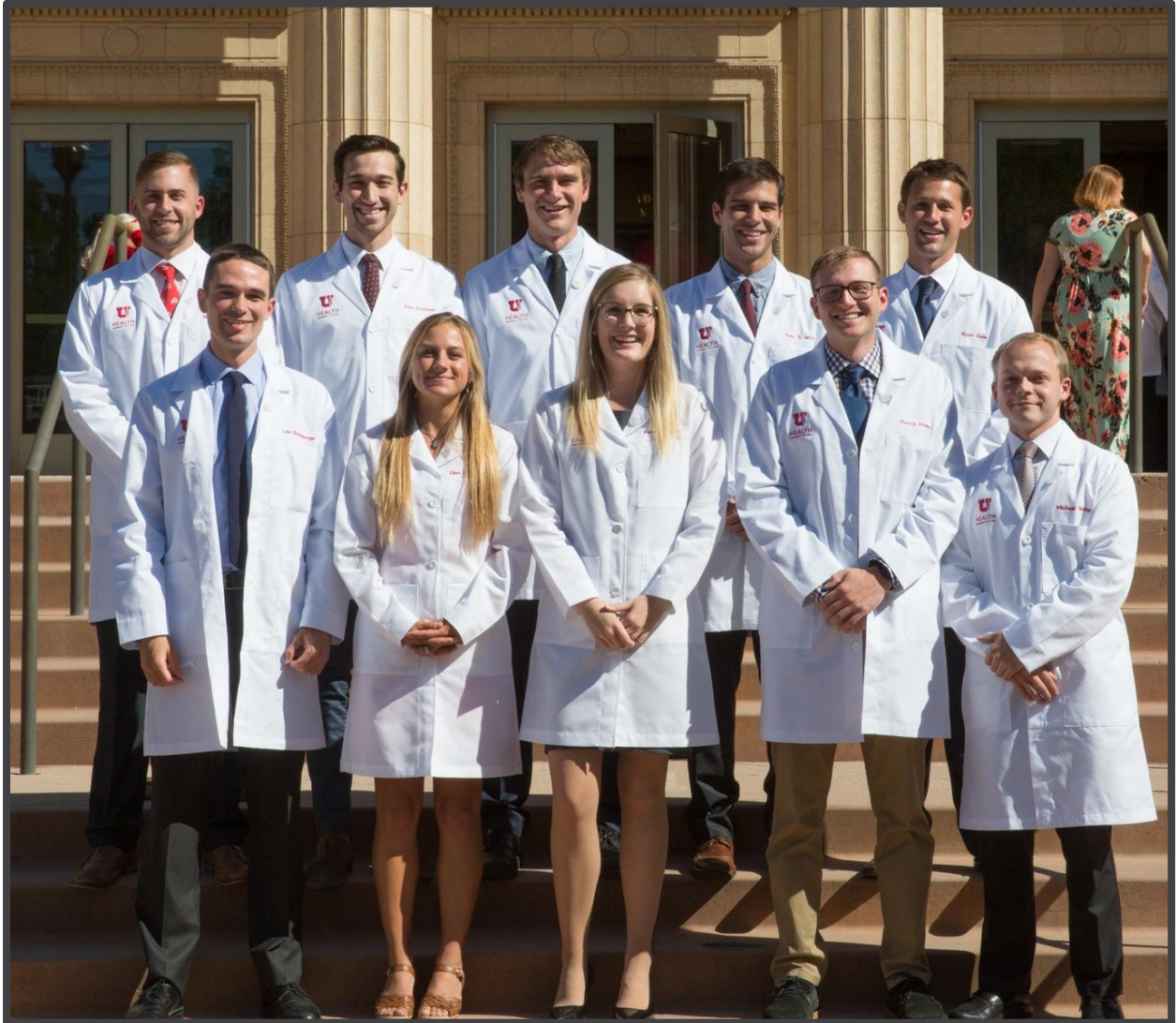
Expectations:

- Participation in activities must have occurred since high school graduation.
- Activities should be identified whether they are part of a class or an independent activity.
- Applicants should be prepared to describe their specific role and the hypothesis or goal of the activity.
- Include the number of hours involved and whether the activity resulted in a publication, poster, conference presentation, thesis, capstone project, patent, performance, distributed recordings, awards or recognition, etc.
- If your activity was published or "in press", please provide the specific citation and, if possible, a website link.
- It is recommended to include a letter of recommendation from your advisor or supervisor in any activity where you have felt the most intellectual growth.

Examples:

- Research -Including biomedical, science, technology, engineering, mathematics, social science, humanities, agriculture, ethics, fine arts studies, etc.

- Continuing Education-Courses taken outside of your degree to further your education or skills- Learning an additional language, trade/tech courses, international development experiences
- Creative interests that expand thinking- Academics, performance, creative endeavors, entrepreneurship, etc.



Entering Idaho Class of 2021

Admissions Reports

Admissions Summary

Academic Year	Idaho Med Student Applicant Pool	Selected for Interviews	Accepted for Admission	Sponsored Students	Non-Sponsored Students
2019-2020	155	65	18	10	0
2018-2019	163	49	24	10	1- Transfer
2017-2018	125	50	24	10	0
2016-2017	118	40	20	10	0
2015-2016	125	50	14	10	0
2014-2015	100	45	12	8	0
2013 - 2014	118	52	11	8	0
2012 - 2013	105	50	16	8	0
2011 - 2012	89	40	14	8	1
2010 - 2011	95	49	12	8	0
2009-2010	84	45	14	8	2
2008-009	108	64	12	8	1
2007-2008	116	61	13	8	0
2006-2007	93	43	9	8	1
2005-2006	112	57	13	8	0
2004-2005	86	47	11	8	1
2003-2004	84	33	14	8	4
2002-2003	99	53	17	8	0
2001-2002	88	50	13	8	4

2000-2001	96	50	13	8	1
1999-2000	88	42	9	6	0



Idaho Sponsored Students, Class of 2024

Last Name	First Name	City at Time of Application	State at Time of Application	Birth City	Birth State/Country
Askaryar	Sajjad	Boise	ID	Kabul	Afghanistan
Bautista	Catherine	Boise	ID	Fairbanks	AK
Giauque	Nathan	Provo	UT	Moscow	ID
Jones	Andrew	Cedar City	UT	Boise	ID
Lewis	Jake	Holladay	UT	American Fork	UT
Nesbitt	Kristin	Moscow	ID	Boise	ID
Seifert	Rachel	Sandpoint	ID	Sebastopol	CA
Smith	Tyler	Eagle	ID	Eagle	ID
Starley	Sierra	Provo	UT	Twin Falls	ID
Tokle	John	Pocatello	ID	Pocatello	ID

Observational Experience

A physician shadowing scholarship is generally offered to first year medical students. The experience is typically completed in the summer between the first and second year of medical school. To receive the scholarship, students must shadow a rural family practice physician in Idaho for one week.

Students are required to submit an essay that explains their intentions and why they would like to be considered for the scholarship.

****Because of the COVID-19 epidemic, the scholarship was not offered for the summer of 2020, but Madeline DeAngelo took the opportunity to shadow a physician in December 2019 and again in March 2020. Madeline was reimbursed for her mileage to Idaho for both trips.**

"While shadowing Dr. Borton, I assisted her while she performed a biopsy, learned how to remove sutures, and was shown what an infected biopsy site looks like. It was eye-opening to see a variety of different skin conditions- all presenting with different rashes and affecting patients to differing degrees. I'm looking forward to learning more about dermatological diseases in medical school because of this shadowing experience."

Madeline DeAngelo
December 2019

"During my shadowing experience, I assisted with a biopsy on a patient with pain, erythematous, scaling, macules covering 60% of her body. The physician was unsure what these lesions were, so we did several biopsies of various lesions to send off to pathology at UCSF. Before doing the biopsy, the provider took me into her office after her physical exam of the patient and told me her line of thinking, what her differential was, and what her plan was. It was wonderful to see all of her medical knowledge come together, even though she didn't have a final diagnosis, for how to best help this patient. I really enjoy being able to shadow strong, female providers!"

Madeline DeAngelo
March 2020

Idaho Rural Outreach Program (IROP)

The Idaho Rural Outreach Program (IROP) IROP encourages medical students to meet with Idaho middle school or high school students with the intent to spark in interest in the health care field. The goal is to have a significant impact on the shortage of health care providers in Idaho.

Since its creation in 2007, medical students, through IROP have traveled to high schools in various rural areas of Idaho including: Malad, Meridian, Marsh Valley, Soda Springs, Sandpoint, Bear Lake, Burley, Preston, the Boise area, Twin Falls, McCall and the surrounding area, Idaho Falls and Rexburg.

Medical students are required to do a presentation that discusses different career options in healthcare such as medical assistant, pharmacist, dentist, doctor, nurse practitioner, physician assistant, etc. They are also required to provide the students with a hands-on learning experience.

Clinical Medical Education in Idaho

During an Idaho medical student's third year, the Family Medicine Clinical Clerkship is completed in Idaho with a community-based family medicine preceptor.

Currently there are 10 Idaho medical students who complete their Family Medicine rotation in Idaho. During 2019-2020 one student from Utah completed a family medicine rotation in Idaho. Three students from Utah have requested to complete their family medicine rotation in Idaho for the 2020-2021 academic year.

Family Practice Clinical Clerkship

Brief Description of Clerkship

During the clerkship, all students develop competencies in patient care, systems-based practice, lifelong-learning, and professionalism. Students assess and manage acute, chronic, and preventive medical issues in the outpatient family medicine setting. Students also engage in reflective and interactive activities throughout the month, designed to develop awareness and hone skills for physician-patient relationships. These relationships are an essential and powerful tool for good care of patients.

The majority of time is spent in direct patient care, most of which occurs in the outpatient family medicine clinic. The patient care is under the direction of a board-certified family physician member of the clerkship faculty team. Settings are diverse and include inner city, rural, urban, and suburban. This range of choices, as well as the opportunity to conduct patient care in the community, where the majority of Americans seek care, makes the Family Medicine Clerkship unique. In addition to clinical work, there is time dedicated to reading, completing projects and assignments, and attending educational sessions.

Clerkship Goals

As a result of completing the Family Medicine Clerkship:

1. Students will be able to integrate their clinical reasoning skills with their scientific background through broad-spectrum hands-on patient care in the primary care setting.
2. Students will be able to see patients collaboratively with their preceptor, managing the full spectrum of acute, chronic, and preventive care needs that are addressed in the primary care setting.
3. Students will be able to develop therapeutic relationships with patients, families and communities.
4. Students will be able to understand how the principles of Family Medicine can help create a more efficient and effective health care system.
5. Students will be able to be more prepared to serve their community, by taking an active learning role in patient care, navigation of complex health systems, lifelong learning, and professional commitment.



Jake Erickson, University of Utah Medical Student completing his six week Family Medicine rotation in his hometown of Rexburg Idaho

Picture Reference: Seasons Medical by Madison Memorial. (2020, July 24). Jake Erickson, University of Utah Medical Student [Photograph]. Seasons Medical Supports the Education of One of the Rexburg's Own. <https://seasonsmedical.com/news/seasons-medical-supports-the-education-of-one-of-rexburgs-own/>

Timeline

The clerkship is six weeks in duration. Students are expected to be active in clinical duties for the majority of the days, however there are required weekly or bi-weekly didactic sessions (online) as well as dedicated time for students to prepare for the shelf exam and to complete the various assignments. Students will be working in the

preceptor model, which means the student will work similar hours to the physician each day.

Preceptors/Site Requirements

The preceptor(s) must be board-certified in family medicine, and hold a University of Utah Volunteer Clinical Faculty appointment with the Department of Family and Preventive Medicine. The clinical site must also have a current affiliation agreement with the University of Utah School of Medicine.

Formative Clinical Performance Assessment

All Phase III Clerkships employ a common formative feedback form that includes both a Student Self-Assessment and Faculty Evaluation of Student section (*Formative Clerkship Feedback Form*). This self-assessment and feedback is intended to be formative in nature and will not be used in the calculation of Preceptor Evaluation data for final grade determination.

Preceptor Evaluations

All Phase III Clerkships employ a common preceptor evaluation form (online) that instructs evaluators to select performance-based behaviors along multiple dimensions that best represent the student's highest sustained performance during the preceptor's period of observation.

Family Medicine Volunteer Clinical Faculty in Idaho

Physician	Location	Phone
Bennett, Barry, MD	2775 Channing Way Idaho Falls, ID 83404	208-524-0133
Bloom, Joan, MD	30544 Highway 200 Ponderay, ID 83852	208-263-6300
Brown, Aaron, MD	730 North College Road, Suite A Twin Falls, ID 83301	208-814-8000
Campbell, R. Bret, DO	1404 Pomerelle Ave., Suite B Burley, ID 83318	208-878-9432
Crane, Peter, MD	465 Washington Street Montpelier, ID 83254	208-847-4495
Crump, William, MD	3090 Gentry Way, Suite 200 Meridian, ID 83642	208-887-6813
Dunn, Scott, MD	520 North Third Avenue Sandpoint, ID 83864	208-263-1441
Franson, John, MD	292 South 3 rd West Soda Springs, ID 83276	208-547-3118

Gibby, Mark, MD	45 North 1 st East Preston, ID 83263	208-852-2755
Gunther, Julie, MD	302 West Idaho Street Boise, ID 83702	208-381-6500
Holtz, Andrew, DO	3080 East Gentry Way, Suite 200 Meridian, ID 83642	208-884-3770
Johnson, M. Cole, DO	526 Shoup Avenue, West Suite E Twin Falls, ID 83301	208-733-1112
Ludwig, Jason, DO	13150 West Persimmon Lane Boise, ID 83713	208-938-3663
MacDonald, Frank Duncan, MD	6052 West State Street Boise, ID 83703	208-955-6405
Maier, Michael, MD	3301 North Sawgrass Way Boise, ID 83704	208-376-9592
MacDonald, Jara, MD	740 McKinley Avenue West Kellogg, ID 83837	208-783-1267
Moorhouse, Aaron, DO	13150 West Persimmon Lane Boise, ID 83713	208-938-3663
Moses, Nicole, MD	2083 Hospitality Lane Boise, ID 83716	208-333-8502
Nasser, Waj. E., MD	1520 West State Street Boise, ID	208-947-7700
Ostermiller, Dan, MD	211 Forest Street McCall, ID 83638	208-634-2225
Paris, Richard	1450 Aviation Dr. Suite 100 Hailey, ID 83333	208-788-3434

Packer, Michael, MD	1 Professional Plaza Rexburg, ID 83440	208-356-9231
Riske, Terrance, MD	8181 Cornerstone Drive Hayden Lake, ID 83835	208-772-0785
Rousseau, Leanne, MD	925 East Polston Avenue Post Falls, ID 83854	208-618-0787
Ruske, Nicole, MD	709 North Lincoln Avenue Jerome, ID 83338	208-814-9800
Satterfield, Trevor, MD	775 Pole Line Avenue, Ste 105 Twin Falls, ID 83301	208-814-8000
Watson, Joseph, MD	393 E 2 nd North Rexburg, ID 83440	208-356-5401
Wilson, Martha, MD	2017 1 st Street South Nampa, ID 83651	208-466-5359

Financial Report 2019-2020

The Idaho State Board of Education subsidizes ten seats at the University of Utah so these students are able to pay in-state tuition. For the academic year 2019-20, Idaho students paid \$41,783.64 in tuition and fees. Idaho students also paid a surcharge of \$1,878.00 which was returned to Idaho (to the Idaho Rural Physician Incentive Program). The State of Idaho paid \$45,400/per student.

A portion of the subsidy that the University of Utah receives from the ISBOE went towards:

Direct student support:

Administrator Travel	\$1,412.34
Student Rotation Expenses*	
• First-Year Job Shadowing Stipend	\$1,100.00
• Third/Fourth-Year Rotation Expenses	\$10,336.42
• Idaho Rural Outreach Program (IROP)	\$0.00*
Idaho Medical Association U of U Student Rep Expenses	\$0.00*

Boise Physician Support Salary	\$5,100
Administrative Support Salary	\$83,070.29
Total	\$101,019.05

The remainder of the funds were used for educational advancement of Idaho Medical Students.

*Due to COVID-19 Pandemic, IROP and IMA conference travel were suspended.

Covered expenses for rotations:

- **First-Year Job Shadowing Stipend:** \$1,100.00 shadowing scholarship was awarded.
- **Mileage:** Students round trip between Salt Lake City and the rotation site (\$0.575/mile) and mileage is funded. If the distance between housing and rotation sites is more than 15 miles (\$0.575/mile) mileage will be provided as well.
- **Housing:** If renting an apartment or motel room, the reimbursement is \$125.00 per week. If staying with family or friends, students can give their lodging host a gift card, gift basket or take them to dinner. They can spend up to \$75.00 on this gift.
- **Preceptor:** \$518.33/week and a gift card, dinner, or gift basket of up to \$75.00.

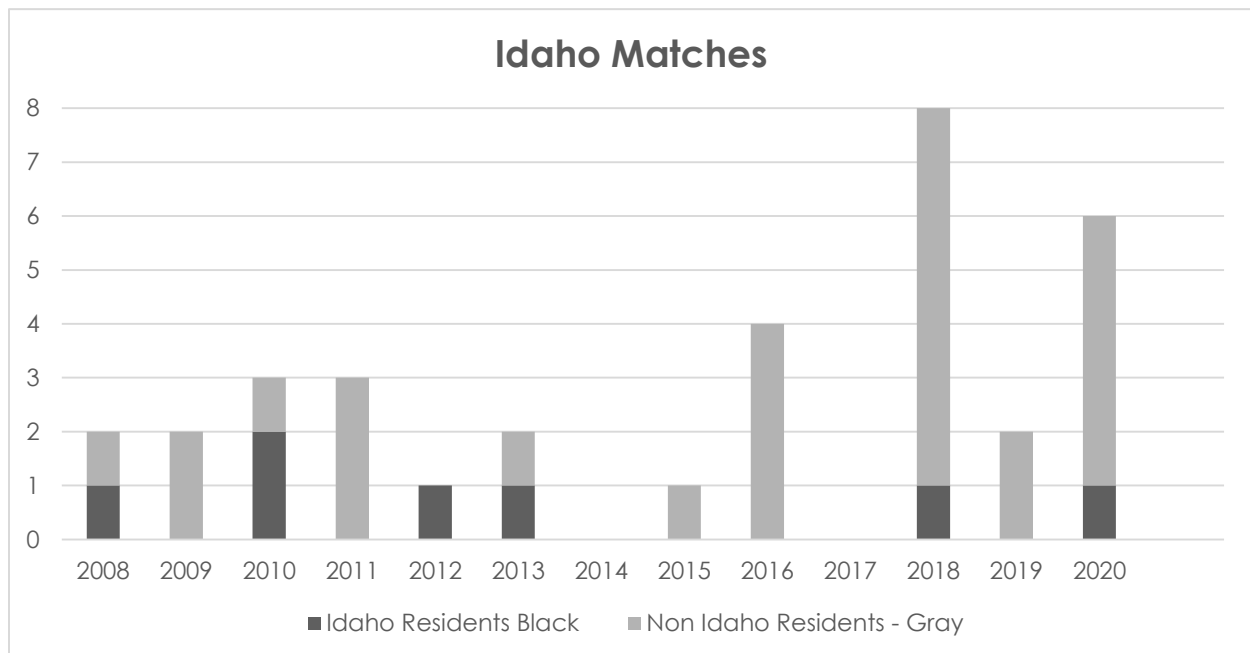
School of Medicine Graduate Reports

The following is a medical student graduate report of both Idaho sponsored and non-sponsored graduates.

Academic Year	Sponsored	Non-sponsored
2019-2020	10	0
2018-2019	10	1-transfer
2017-2018	10	0
2016-2017	10	0
2015-2016	10	0
2014-2015	8	0
2013-2014	8	1
2012 - 2013	8	2
2011 - 2012	8	4
2010 - 2011	9	3
2009-2010	6	4
2008-2009	7	1

2007-2008	8	0
2006-2007	8	1
2005-2006	8	4
2004-2005	8	0
2003-2004	8	4
2002-2003	9	1
2001-2002	5	0
2000-2001	6	0
1999-2000	6	7
1998-1999	6	2
1997-1998	6	1
1996-1997	6	3
1995-1996	6	3

Since 2008, **thirty-two UUSOM graduates have matched into Idaho GME Programs.** The following indicates the number of matched graduates each year, broken into Idaho residents and non-resident graduates



Below is the resident graduate report of those who chose to practice medicine in Idaho by academic year:

Academic Year	Idaho Residents: Number of Graduates	Specialty
2019-2020	5 : 243	1-Family Medicine 2-Medicine Preliminary 2-Psychiatry
2018-2019	3 : 268	2- OB/GYN 1- Foot and Ankle Orthopedic Surgery
2017-2018	9 : 251	3- Cardiovascular 1- Pediatrics 1- Neuroradiology 2- Vascular Surgery 1- Pain Medicine 1- Hematology and Medical Oncology
2016-2017	5 : 238	3- Pediatrics 2 Family Medicine
2015-2016	7 : 301	2 – OB/GYN 1 – Dental 1 – Physical Medicine and Rehabilitation 1 – Pulmonary and Critical Care 1 – Pediatric Emergency Medicine 1 – Geriatrics
2014 - 2015	6 : 289	1 - Family Medicine – OB 1 - Sports Medicine 2 - Internal Medicine 1 - Interventional Cardiology Fellowship 1 – Nephrology Fellowship
2013 - 2014	9 : 291	1 - Internal Med 1 - Dermatology 1 - Pathology 1 - Vascular Surgery 2 - Pain Med 1 - Nephrology 1 - Pediatric Gastroenterology 1 - Plastic Surgery
2012 - 2013	8 : 305	1 – Pediatrics 2 – Cardiology 1 – Pathology 1 – Internal Medicine 1 – Anesthesiology 1 - Hematology/Oncology 1 - PM&R
2011 - 2012	8 : 297	1 – Neurology 1 – Family Medicine 1 - Pediatrics 3 – Internal Medicine 1 – Emergency Medicine 1 – Dermatology

2010 – 2011	9 : 292	4 – Family Medicine 1 – Radiation Oncology 1 – Internal Medicine	1 – General Surgery 1 – Emergency Medicine 1 - Peds-Anesthesiology
2009 – 2010	7 : 266	1 – Medicine – Psychiatry 3 –Family Medicine 3 – Internal Medicine	1 – Pediatrics 1 – Emergency Medicine
2008 – 2009	7 : 287	1 – Anesthesiology 3 – Internal Medicine 1 – Family Medicine	1 – Pediatrics 1 – General Surgery
2007 – 2008	7 : 265	4 – Family Medicine 1 – Internal Medicine	2 – Anesthesiology
2006 - 2007	4 : 228	1 – Internal Medicine 2 – Pediatrics	1 – Pediatric Hematology/Oncology
2005 - 2006	8 : 214	2 – Sports Medicine 1 – Dental 1 – Pulmonary	1 – Pediatric Psychiatry 2 – Pediatrics 1 – Pathology



Graduating class of 2018

Idaho Psychiatry Information

Rural Track (Idaho) Overview

The Idaho Rural Track in Pocatello, has a mission to train community centered psychiatrists who will play an integral role in the development of mental health programs and practices in rural or high need communities where they will be able to use their creativity and passion to develop and fill diverse roles as advocates, consultants and leaders in various mental healthcare settings.

Residents will spend the majority of their first two years in Salt Lake City, UT working alongside fellow residents in the Adult Psychiatry program focusing on

mastering skills in general medicine as well as completing required inpatient and some subspecialty psychiatric rotations. Some rotations will be completed in Pocatello, including general medicine and inpatient psychiatry.

During years three and four, residents will transition to Pocatello, Idaho where they will continue to refine themselves as psychiatric specialists. During residents' third year, they will primarily focus on outpatient training with year four being dedicated to trainee-specific interests, passions and individualization.

We are certain that residents will leave the program well-prepared to serve patients in both inpatient and outpatient settings. The Idaho Psychiatry Track plans to continue to recruit three residents per year for the track. The first three residents started their training in the summer of 2020.

Rotations

Idaho track residents will spend one month during their post-graduate year ("PGY") PGY-1 year in Pocatello to complete an Internal Medicine rotation and again during their PGY-2 year to complete a month of Inpatient Psychiatry.

Idaho Track, 4-Year Program Schedule

Year 1 (In Salt Lake City)

4 Months	2 Months	6 Months
1 mo U of U Health IM 1 mo Idaho IM 1 mo VA IM 1 mo VA IM OP or U of U ED	Neurology 1 mo U of U Health 1 mo VA	Inpatient Psychiatry 1-2 mo must be at VA 1 mo in Addiction at UNI

VA = Veterans Administration

IM = Internal medicine

Year 2 (In Salt Lake City)

5 Months	1 Month	2 Months
Inpatient Psychiatry 2 mo at VA 1 mo Idaho	Geriatric Psychiatry (VA)	Consult/Liaison Psychiatry (C/L) 1 mo at VA 1 mo at UH

1 Months	1 Month	1 Month
Child and Adolescent Psychiatry	Emergency Psychiatry	Night Float

All residents are expected to complete a quality improvement (QI) project during their second year

Year 3 (Idaho)

Resident A

Monday	Tuesday	Wednesday	Thursday	Friday
Outpatient Clinic (VA)	Telepsych	Didactics	MHI/HW	Elective
Outpatient Clinic (VA)	C&L (Portneuf)	Didactics	MHI/ISU HC	Elective

Year 3 (Idaho)

Resident B

Monday	Tuesday	Wednesday	Thursday	Friday
Elective	Outpatient Clinic (VA)	Didactics	Telepsych	MHI/HW
Elective	Outpatient Clinic (VA)	Didactics	C&L (Portneuf)	MHI/ISU HC

Year 3 (Idaho)

Resident C

Monday	Tuesday	Wednesday	Thursday	Friday
MHI/HW	Elective	Didactics	Outpatient Clinic (VA)	Telepsych
MHI/ISU HC	Elective	Didactics	Outpatient Clinic (VA)	C&L (Portneuf)

HW = Health West Clinics

MHI = Mental Health Integration

ISU HC = Idaho State University Health Clinic

Elective options:

- Human Development Center
- Private Practice
- Research
- ISU Student Health Center (ISU HC)
- VA CBOC
- Telepsych (VA, Portneuf)
- MHI Health West
- Indian Health Services Health Clinic
- Other possibilities: Women's prison, HIV clinic, crisis center

Year 4 (Idaho)

12 Months
Outpatient Psychiatry 50% (includes VA Continuity Clinic, C&L, MHI), Electives 50%

- PGY 4 gets preference over electives
- All residents must do 1 full day in VA outpatient (consider 2 afternoons instead of a full day to accommodate inpatient if you are interested)
- All residents must do 1 month forensic psychiatry at ISH South
- One resident must do C&L Monday afternoon

Idaho Psychiatry Financial Report 2019-2020

On average, it costs about \$150,000 to train a resident each year. The money appropriated to the University of Utah from the state goes directly to the cost of residents' salaries. Monies to Idaho State University pays for administrative costs and some facilities charges related to the Idaho-Utah psychiatry program. The program must rely on other sources, such as the VA and grants, to fund the remaining cost.

Idaho Psychiatry 2020 Match Results

Every March there is the MATCH where fourth year medical students are matched into a residency program. The University of Utah Psychiatry program is excited to announce that more than 50 applicants applied for three seats in the new Idaho psychiatry track.

The following three physicians who matched are:



Daisha Orchard, MD - from Arco, Idaho - "I fell in love with psychiatry my third year of medical school at the University of Utah. I saw as a medical student what a caring and well-rounded training program they had to offer. When I found out about the Rural Idaho Track, I couldn't imagine a more perfect fit. This new program gave me an opportunity to train with amazing psychiatrists and facilities at a university program and train in a rural setting an hour

and a half away from my hometown. I'm so excited to be part of a program bringing psychiatric care to Utah and Idaho."



Christian Schmutz, MD - from Idaho Falls, Idaho - "As a student here, I loved my psychiatry rotations. While traveling around the country, I saw even more just how good we have it here. State of the art facilities, cutting edge research, and kind people in a city that's easy and fun to live in - what more could you ask for? Plus, the Idaho track was a strong pull for an Idaho boy."



Matthew Torbenson, MD - from Green Bay, Wisconsin- Matt grew up in Wisconsin but served his LDS mission in Eastern Idaho. His wife and family are already settled in Pocatello. He enjoys spending time with family, sports, hiking, camping, and "*Tough Mudder*" competitions.