

Colorado School of Public Health Strategic Plan, 2019-2024

Letter of Introduction

This Strategic Plan for the Colorado School of Public Health (ColoradoSPH) extends from 2019 through 2024, corresponding to years eleven through fifteen of the school's existence. These will be pivotal years for ColoradoSPH, as we set strategic directions while no longer contending with the start-up of a three-campus school. This strategic plan emphasizes the essential work that is vital to the continued success, impact, and relevance of the school.

THE PRESENT STATE OF PUBLIC HEALTH IN COLORADO

While Colorado is among the healthiest states on some indicators, the list of Colorado's priority topics identified at local, state, and national levels covers a wide array of health concerns (see Appendix Table 1). The top 10 causes of death in Colorado reflect the need to address non-communicable diseases, injury, and the rising rate of Alzheimer's disease (see Appendix Table 2). Some of the public health challenges for Colorado are long-standing on national and statewide lists of public health priorities: obesity, mental health and substance abuse, and injury, for example. Some remain targets but have changed in nature. The tobacco problem has shifted rapidly with the unanticipated arrival of addicting vaping products and their epidemic spread among youth. The potential for emerging infectious diseases remains, superimposed onto ongoing concern for HIV/AIDS, influenza, West Nile Virus, and others. Meanwhile childhood immunization rates in Colorado are among the lowest in the nation. Environmental issues are also pressing, with current concern high for the impact of the oil and gas industry on Colorado's public health and for the increasing ozone concentrations along the Front Range, driven in part by rapid population growth. Climate change is anticipated to bring more wildfires and more heat waves, along with the possibility of drought and its sequelae. Further, the state's legalization of cannabis needs careful study and surveillance for its consequences.

In addition to the breadth of issues facing our state, the strategic plan also acknowledges the diversity of the state—its population, its geography, its health care systems, its economy, and more. This heterogeneity is reflected in the disparities in health outcomes across the state's counties (see Appendix Figure 1 and Table 3). Its rural areas have poorer health outcomes and more limited access to health care, exacerbated by shifts in health care delivery and closure of rural hospitals. Social determinants of health, a focus integral to the ColoradoSPH, also vary widely, and Colorado's population growth is bringing new issues as neighborhoods are changed by gentrification and rising costs of housing.

Public health has continued to evolve in response to increased recognition of the need to engage communities and to address the root causes that drive health and disease. Additionally, we can readily anticipate that public health problem-solving and interventions will be grounded in expanding data on population health and health care. There are new opportunities for engagement with the health care systems charged with population health management.

ANTICIPATING FUTURE NEEDS – CONNECTING THE ROCKY MOUNTAIN REGION TO THE WORLD

Looking to the future, many trends can be anticipated that are relevant to this strategic plan: continuing population growth and development of the state and the Rocky Mountain Region; emerging public health problems overlaid on ongoing challenges; the interconnectedness of global health; and grappling with the health consequences of climate change. To have meaningful impact, the ColoradoSPH needs to evolve without interruption. Included in the steps to be taken are: embedding inclusive practices throughout the school; balancing distance learning with in-class experiences; leveraging new technologies, such as artificial intelligence, across the research enterprise; and acknowledging the evolving prominence of data sciences and the inherent challenges in using ever more abundant data to advance public health. Our range of partnerships needs to be extended, on and off our campuses.

We are ideally positioned for an increasingly relevant and impactful future for our school. We are committed to strengthening what is essential as we anticipate emerging challenges.

We thank the members of the Steering Committee; our dedicated faculty, staff, and students who served on Working Groups; facilitators and strategic planners at Corona Insights; and our community members who participated in the process and offered their input on the future of the school.

STRATEGIC PLANNING STEERING COMMITTEE

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Introduction

PLANNING PROCESS

Strategic planning began in September 2018 with anticipated completion of the process by June 2019 and school-wide discussion and approval by the fall of 2019. The initiative was led by Dana Dabelea (Co-chair of the Steering Committee) and Jonathan Samet (Co-chair and dean), with coordination by the Office of the Dean.

This was an opportune time for strategic planning: 1) the school's dean, Jonathan Samet, had passed the one-year mark; 2) A new Department chair (Health Systems, Management and Policy) had been recruited and the chair search for Community and Behavioral Health was anticipated to be closed as this plan is completed; 3) the context for the school was evolving both externally and internally; and 4) the school's current strategic plan extended only through 2018.

There have been past strategic planning efforts, initially related to the school's founding, and subsequently a strategic plan was developed for the period 2013-2018, and a Self-Study was conducted in 2015 as required by the Council on Education for Public Health (CEPH) for reaccreditation. In 2016, there was a look-back regarding progress on the Strategic Plan for 2013-2018.

An overall Steering Committee for the strategic planning process was appointed. The 16-person Steering Committee represented the School's three campuses, its diverse disciplines and programs, and its faculty, staff, and students. The Steering Committee met regularly throughout the strategic planning process. The process involved: 1) the development of an overall and accepted plan by the Steering Committee; 2) implementation of working groups with foci determined by the Steering Committee through an open process; 3) development of reports by the groups for communication to the school and revision after feedback; and 4) agreement on the final report and its recommendations after dissemination across the three campuses and receipt of broad input.

Groups external to the school, e.g., the Colorado Department of Public Health and Environment, were asked to provide input on the school and its priorities moving forward. The school's Advisory Board also offered input during the process and the leadership of the three participating universities was consulted. Stakeholder interviews were held with a total of 19 internal and external stakeholders, and a strategic planning priorities survey was conducted internally across faculty, staff, and students. Reports for the interviews are available on the ColoradoSPH website [here](#).

As determined by the Steering Committee, five Working Groups, each with co-leads, were tasked with considering and recommending strategic goals in the following five areas:

Education: Teresa Sharp and Molly Lamb

Research: John Adgate and Jini Puma

Public Health Service & Practice: Lee Newman and Virginia Visconti

School Life Diversity & Inclusion: Cerise Hunt and Anne Starling

School as a Unit: Tracy Nelson, John Kittelson, and Dani Brittain

The groups worked independently, yet, by the very nature of the work conducted, several of the identified strategies and measures of success were relevant to multiple focus areas. In the body of the strategic planning document such overlap is intentional and reflective of the fact that similar strategies will ultimately accomplish multiple goals.

Implementing Our Plan

This strategic plan sets out goals for ColoradoSPH—figuratively, what we want to do and where we want to go in fulfilling our mission. The plan that follows sets out diverse activities for advancing the school in the general areas of education and training, practice, and research, and also enhancing our diversity and advancing the culture and “brand” of the school, while better integrating the three campuses. The plan is ambitious and, inevitably, there will be more than we can do, and priorities will need to be set. Thus, following the approval of the strategic plan, formal attention will be given to its implementation. As a school, we will assign priorities to what the plan proposes, and we will use our existing governance structure, supplemented by working groups, to move forward with implementation. The strategic plan includes indicators that will be used to track progress; some apply for the short-term and others for the long-term. The needed, complementary implementation plan will be developed separately.

Having clear success measures is central to a successful strategic planning process that leads to change. This plan provides the success measures and the anticipation that there will be gains. One initial step in the implementation of the plan will be quantification of what constitutes success for these measures. Such quantification will be based in careful consideration by the faculty and staff with the most knowledge to guide institutional change in each area. There will be a need to identify measurable outcomes and to set targets. We look forward to engaging the school community in that important task.

Our Fundamental Tenets

The fundamental tenets of our school are listed below, as a basis for the alignment of the strategic plan with mission, vision, and core principles.

Our Mission: To promote the physical, mental, social, and environmental health of people and communities in the Rocky Mountain Region, across our nation, and globally. The mission will be accomplished through collaborations in education, population-directed research, and public health practice, reaching out to and bringing together institutions, agencies, and diverse populations.

Our Vision: The Colorado School of Public Health will become one of the nation's premier institutions for public health education, research, and practice by delivering programs that are based in science, proven in practice, and adapted through creativity to meet pressing population health needs.

Our Commitment to Diversity and Equity: Our commitment is to build a diverse and representative academic community that recognizes and incorporates social and economic justice in relation to health. We strive to build and maintain an inclusive, culturally responsive environment, spanning training and education, policies and procedures, and our faculty, staff, and students.

Call to Action and Strategic Context

The planning process highlighted several areas of strategic importance for the Colorado School of Public Health — to which we are compelled to respond based on what we learned from our community and our scan of the external environment.

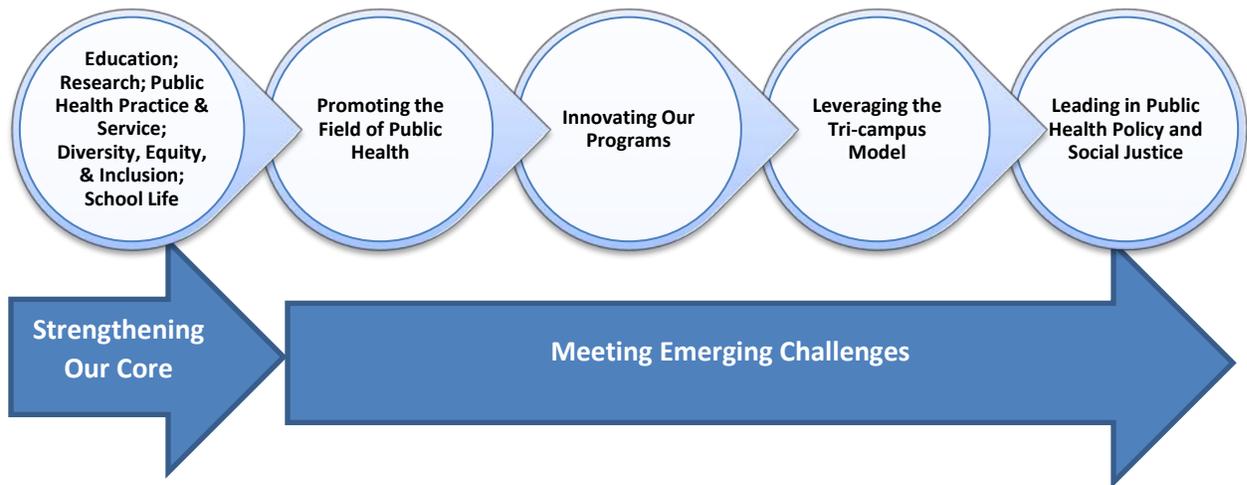
At the 10-year mark, the school's three-campus model is functioning and now is the time to look for synergies from activities across the campuses. Educational modalities and opportunities are changing rapidly and there is an impetus for offering more distance-based courses and certificates. Such offerings will not only better reach across our campuses but extend to the diverse targets for further training across the state and region. Moreover, in its second decade, the school is ready to extend its external presence, engaging more thoroughly with the state's public health problems.

Our strategic goals are designed to collectively address the following.

1. Foster a culture of diversity, equity, and inclusion in everything we do.
2. Develop a public health workforce prepared to address real-world opportunities and challenges.
3. Advance our research enterprise to further current strengths and create opportunities for future innovation.
4. Grow partnerships and collaborations to more deeply connect our mission with local to global communities and public health professionals jointly committed to advancing health across the region.
5. Translate and communicate the significance of public health research to the general public, elected officials, and policy-makers.
6. Enhance our influence with local, state, and regional leaders across government, nonprofit, and civil society sectors.
7. Leverage a tri-campus approach to our academic, research, practice, and service goals.

Strategic Goals

This plan is divided into two sections: 1) *Strengthening Our Core* and 2) *Meeting Emerging Challenges*. The former speaks to what has been built over the school’s first 10 years, while the latter addresses what is to come as the landscape of public health continues to bring new challenges and opportunities.



Strengthening Our Core

This section of the plan focuses on the goals that will strengthen our existing commitments to education, research, public health practice and service, diversity, and a collaborative tri-campus community. For each area, it includes relevant goals, strategies, and success metrics.

AREA 1: EDUCATION

Introduction: We are committed to improving the training of students and the development of the public health workforce in Colorado, the Rocky Mountain Region, nationally, and globally. We will emphasize high quality, affordable, practice-and research-based educational programs on each of the partner campuses so that our students are prepared to address real-world opportunities and challenges.

GOAL 1: OFFER HIGH QUALITY EDUCATIONAL PROGRAMS THAT DRAW HIGH QUALITY STUDENTS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|--|
| Strategically place MPH degree concentrations, other degree options (BS, MS, PhD/DrPH) and workforce development opportunities on each of the partner campuses. | <ul style="list-style-type: none"> Relevant courses and workforce development opportunities that align with school’s mission, priorities and campus expertise are identified and implemented at each campus |
| Continuously enhance and update the curriculum and course contents to ensure that our graduates are competitive in today’s job market and are prepared for the future. | <ul style="list-style-type: none"> Students graduate with skills valued by employers, as evidenced by hire rates, positive feedback from employers, and the types of jobs that students are obtaining. |
| Embed more practical experiences throughout the educational program to advance each student’s education as we strengthen connections between practicum/curriculum and public health work. | <ul style="list-style-type: none"> Increase in the number of practice-based learning courses. Increase in enrollment in practice-based learning courses. Increase in the number of community partners seeking and maintaining partnerships with the school. |
| Enhance affordability of our educational programs through expanded financial support, such as scholarships, training grants, and graduate assistantships/fellowships. | <ul style="list-style-type: none"> Increase in the proportion of students receiving financial support. Increase in the funds available for student support. |
| Expand the student mentorship to include public health practice, research, and career mentoring and training. | <ul style="list-style-type: none"> More students voice satisfaction with mentoring received. |

AREA 2: RESEARCH

Introduction: Collectively the faculty across our three universities advance notable research. Our faculty are nationally and internationally recognized for research efforts and expertise in fields such as American Indian & Alaskan Native Health; Occupational Health, Safety, and Wellness; Chronic Disease – Cardiovascular, Diabetes, Obesity, and Cancer; Community-Engaged Research and Interventions; Environmental Epidemiology; Food and Food Systems; Health Policy; and Data Sciences. We excel at training researchers and are committed to expanding our training into the specific niches that are unique to our faculty and their research. Our current research strengths need to be maintained and expanded to remain competitive as a leading institution in specific areas of public health research. A challenge to the school is maintaining and building strong research programs that draw on the complementary strengths of the three-campus model. We can address this challenge by developing adequate infrastructure to promote research collaborations across the institutions.

GOAL 1: SUSTAIN AND EXPAND EXISTING RESEARCH STRENGTHS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|--|
| Expand research funding in core areas of strength (listed above). | <ul style="list-style-type: none"> Increased research funding in core areas of strength. |
| Expand research infrastructure to facilitate all aspects of grant development and performance. | <ul style="list-style-type: none"> Increase in the number of resources available to support faculty and students engaged in research. |
| Continue to address and further enhance the focus on cross-cutting areas such as health disparities, prevention research, community-engaged research, and effective approaches for translation and dissemination. | <ul style="list-style-type: none"> Expanded research funding in cross-cutting areas. Increase in the application of our research findings, as evidenced in publications and improved public health outcomes in the communities we serve. |
| Develop support for junior faculty so they can contribute to expanding strength in these areas. | <ul style="list-style-type: none"> Increase in the number of junior faculty participating in research in core areas. |
| Partner across campuses on interdisciplinary projects where feasible and where value is added. | <ul style="list-style-type: none"> Expanded research funding for collaborative projects across the 3 institutions. |
| Develop adequate infrastructure to promote research collaborations across the institutions. | <ul style="list-style-type: none"> Expanded research funding for collaborative projects across the 3 institutions. Increase in the number of research collaborations across the institutions. |
| Promote partnerships and collaborations locally, nationally and internationally. | <ul style="list-style-type: none"> Increase in visibility as captured by bibliometric indicators from ISI or Google Analytics. Increase in the number of partnerships and collaborations, locally, nationally and |

| OBJECTIVES | SUCCESS MEASURE(S) |
|------------|--------------------|
| | internationally. |

AREA 3 : PUBLIC HEALTH PRACTICE & SERVICE

Introduction: Public health practice is central to who we are as a school, and is crucial for enhancing engagement in practice-based education, research, translation, and partnerships. Now is an opportune time to advance the identity of public health practice within the School and build the Colorado School of Public Health brand around that identity. We will work towards being a model for how a state school of public health advances public health across the state.

GOAL 1 : ESTABLISH THE SCHOOL’S IDENTITY AROUND PUBLIC HEALTH PRACTICE AND SERVICE

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|--|
| Map the state and local ecosystem of practice in order to better define our position and the points for action. | <ul style="list-style-type: none"> • Increased ability to identify new opportunities for our public health practice. |
| Create a system to identify and track all partners (community, state, national, internationally). | <ul style="list-style-type: none"> • Increased ability to identify new opportunities for our public health practice. • Increased collaboration among internal and external stakeholders. |
| Ensure that features of public health practice are explicit in ColoradoSPH communications, including grand rounds, websites, and descriptions of projects and initiatives. | <ul style="list-style-type: none"> • Increased opportunities for faculty, students and staff to engage with the public, policy makers, public health practitioners, and the media. |

GOAL 2 : ESTABLISH, SUSTAIN AND EXPAND OUR NETWORK OF COMMUNITY PARTNERSHIPS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Systematically develop and recognize partners and partnerships. | <ul style="list-style-type: none"> • An increase in partnerships generated through continued practice activities. • High level of partner satisfaction as assessed by periodic surveys. |
| Assure that the school’s efforts for the training of students and the public health workforce reflect perspectives from stakeholders in all public health agencies and organizations (state, city, and county) in Colorado communities. | <ul style="list-style-type: none"> • High level of partner satisfaction as assessed by periodic surveys. |
| Provide professional training and experience on | <ul style="list-style-type: none"> • An increase in the number of community-based organizations that approach ColoradoSPH to |

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|---|
| community engagement for students. | collaborate, reflecting enhanced reputation. |
| Incorporate service learning into the curriculum for all concentrations. | <ul style="list-style-type: none"> • An increase in the number of community-based organizations approaching ColoradoSPH to collaborate, reflecting enhanced reputation. |
| External community/stakeholder partnerships become engrained in the culture of the school. | <ul style="list-style-type: none"> • Increase in the number of sustained ColoradoSPH partnerships -- these partnerships reflect diverse problems and populations. • High level of partner satisfaction as assessed by periodic surveys. |

GOAL 3: ENHANCE AND SUPPORT FACULTY, STUDENTS, AND STAFF ENGAGEMENT WITH PRACTICE

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|--|
| Promote public health practice as scholarship by ensuring that practice activities receive increased weighting in promotions and tenure review. | <ul style="list-style-type: none"> • Increase in the number of faculty who engage in public health practice. • Increase in the number of publications related to public health practice. |
| Regularly showcase public health practice through campus- and community-based convenings. | <ul style="list-style-type: none"> • Increase in the number of communications and events dedicated to showcasing public health practice. |
| Support the dissemination of public health practice. | <ul style="list-style-type: none"> • Increase in the number of publications related to public health practice. |
| Reward those committed to public health practice (community partners, students, staff and faculty). | <ul style="list-style-type: none"> • Creation of incentives provided to the faculty, students and staff who engage in public health practice. • Creation of incentives provided to the partners with whom we engage in public health practice. |
| Provide mentoring and guidance to faculty, students and staff on developing the scholarship of practice by bringing together individuals who are very engaged in public health practice and those who are not/may not know how to get started. | <ul style="list-style-type: none"> • Increase in the number of faculty, students and staff who engage in public health practice. |
| Promote faculty membership and leadership in professional associations. | <ul style="list-style-type: none"> • Increase in the number of faculty who are members and/or leaders in professional associations. |

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|--|
| Provide resources for faculty, students, and staff to engage in leadership opportunities. | <ul style="list-style-type: none"> • Increase in the number of leadership positions held by ColoradoSPH faculty, students, and staff within the ColoradoSPH academic world. • Increase in the number of leadership positions held by ColoradoSPH faculty students and staff in positions outside of academia, including advisory boards, state-level commissions, local government advisory groups, and state- and local-level task force efforts. |
| Offer in-house awards/recognition for leaders in and out of the ColoradoSPH academic world | <ul style="list-style-type: none"> • Regularly recognize leadership roles in ColoradoSPH e-newsletters, social media, website, Dean’s updates, and the school’s annual reports. |

AREA 4 : DIVERSITY, EQUITY, AND INCLUSION

Introduction: This focus area encompasses strengthening the ColoradoSPH community culture by fostering inclusive excellence, to ensure that diversity, equity, and inclusion are central to the school’s academics, research, practice and service.

GOAL 1 : BUILD AND MAINTAIN A DIVERSE GROUP FACULTY, STUDENTS AND STAFF

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|--|
| Recruit, appoint, promote, and retain high quality and diverse faculty and staff. | <ul style="list-style-type: none"> • Increase in the number of high-quality and diverse faculty and staff hired at ColoradoSPH. • Increase in the duration of high-quality and diverse staff and faculty employment at ColoradoSPH. • Increase in the number of promotions and leadership positions held by diverse faculty and staff at ColoradoSPH. |
| Recruit and retain high quality and diverse student body. | <ul style="list-style-type: none"> • Increase in the number of diverse students enrolled at ColoradoSPH. • Ensure an excellent graduation rate of diverse students. |
| Create a strong public health educational pipeline program to continuously identify, recruit, support, and mentor underrepresented students and faculty. | <ul style="list-style-type: none"> • Increase in the number of pipeline projects/initiatives that provide education, mentorship and professional development of undergraduate, graduate, and post-docs. • Increase in the number of diverse students enrolled at ColoradoSPH. • Increase in the number of diverse faculty hired at ColoradoSPH. • Increase in the duration of diverse faculty employment at ColoradoSPH. |
| Secure funding to support recruitment and retention of faculty, staff who belong to historically marginalized and identified priority populations (e.g., first generation, Hispanic/Latino, African American/Blacks, Native American and rural populations) | <ul style="list-style-type: none"> • Expanded funding available to recruit and retain faculty and staff who belong to historically marginalized and identified priority populations |
| Promote student and faculty diversity by ensuring that eligible NIH grants are using the diversity supplement option | <ul style="list-style-type: none"> • Increase of under-represented research faculty and students |

GOAL 2 : PROVIDE PROGRAMS THAT ENSURE AN INCLUSIVE AND EQUITABLE COMMUNITY DEDICATED TO THE DEVELOPMENT OF PUBLIC HEALTH SCHOLARSHIP AND TO PRACTICE THAT ADVANCES HEALTH EQUITY

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Hire personnel and earmark budget to support the advancement of ColoradoSPH’s diversity, equity, and inclusion efforts. | <ul style="list-style-type: none"> • Increase in the number of staff and faculty dedicated to supporting the advancement of ColoradoSPH’s diversity, equity, and inclusion efforts. • Expanded funding earmarked to support the advancement of ColoradoSPH’s diversity, equity, and inclusion efforts. |
| Assure that the curricula of all programs contain clear and distinct learning competencies and courses regarding diversity, inclusion, cultural proficiency and the achievement of health equity and identify the required and non-required courses that encompass this material. | <ul style="list-style-type: none"> • Presence of clear and distinct learning competencies regarding diversity, inclusion, cultural proficiency and the achievement of health equity throughout the curricula of ColoradoSPH. • Identified set of required and non-required courses that encompass this material. • At least one course specifically focused on diversity, inclusion, cultural proficiency or the achievement of health equity is required for students within every degree program and on all campuses of the ColoradoSPH. |
| Train all faculty, students, and staff through co-curricular and tailored activities to create an inclusive environment. | <ul style="list-style-type: none"> • Increase in the number of trainings available to faculty, students, and staff to create an inclusive environment. |
| Recognize outstanding teaching and mentoring that reflect the School’s commitment to diversity, equity, and inclusion. | <ul style="list-style-type: none"> • Increase in communications and activities that highlight outstanding teaching and mentoring reflecting the School’s commitment to diversity, equity, and inclusion. |
| Recognize exceptional staff whose work reflects the School’s commitment to diversity, equity, and inclusion. | <ul style="list-style-type: none"> • Increase in communications and activities that highlight exceptional staff members whose work reflects the School’s commitment to diversity, equity, and inclusion. |
| Engage in research that develops and evaluates evidence-based solutions to health disparities that are driven largely by social, economic, and environmental factors. | <ul style="list-style-type: none"> • Increase in the number of research publications that develop and evaluate evidence-based solutions to health disparities that are driven largely by social, economic, and environmental factors. |
| Partner with local and regional leaders to advance equity and social justice. | <ul style="list-style-type: none"> • Increase in the number of relevant partnerships that are focused on or reflect ColoradoSPH’s commitment to diversity, equity, and inclusion. |

GOAL 3 : FOSTER A DIVERSE AND INCLUSIVE ENVIRONMENT THROUGH CAMPUS ENGAGEMENT ACTIVITIES AND TRAINING THAT CELEBRATES DIVERSITY TO ENHANCE CULTURAL PROFICIENCY

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|--|
| <p>Offer training and community engagement activities that activate and prepare our school to improve public health and promote social justice to advance health equity.</p> | <ul style="list-style-type: none"> • We have dedicated personnel responsible for leading strategic diversity and inclusion efforts that advance inclusive excellence in support of ColoradoSPH values, goals, and priorities. • Professional development and multicultural events are held annually. • Diversity and inclusive excellence efforts are embedded in the goals of all ColoradoSPH departments and centers. • Pipeline projects/initiatives that provide education, mentorship and professional development of undergraduate, graduate, and post-docs. |
| <p>Conduct climate surveys to assess and periodically re-evaluate perceived inclusivity within the ColoradoSPH, workforce and student body.</p> | <ul style="list-style-type: none"> • Positive results of climate survey, with metrics depicting change in each of the measures over time, and, where possible, comparison to partner institutions. |

AREA 5 : SCHOOL LIFE

Introduction: This focus area encompasses strengthening ColoradoSPH sense of community by developing more opportunities to engage across faculty, staff, and students on the three campuses; diversifying our funding sources across the three campuses; and emphasizing an environment of professional development that reaches all campuses. Professional development opportunities and an emphasis on purposefully building a stronger sense of community across our faculty, staff, and students will be critical.

As a school with three separate campuses, we need to both broaden and diversify our funding portfolio and seek more long-term base funding for important programs and activities. Each of the three universities that comprise the Colorado School of Public Health has a particular funding model with a distinct mixture of grant, tuition, and state funds. This heterogeneity creates barriers to the effective working of the school as a unit. If we are to strengthen the core of the school as a unit, and address emerging challenges, we must begin by addressing the limitations of our financial model, which creates complicated interactions and potentially negative consequences across the campuses.

GOAL 1 : DIVERSIFY OUR FINANCIAL SOURCES BEYOND TUITION AND GRANTS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Support efforts directed at developing collaborations, including building cross-institutional programs. | <ul style="list-style-type: none"> • Develop funding mechanisms to support cross-institutional programs and collaborations. • Increase in the number of face-to-face collaborations. • Reduce the financial and institutional constraints to cross-institutional programs and collaborations. • Increase in the number and quality of incentives for efforts to develop and/or sustain cross-institutional programs and collaborations. |
| Support sabbaticals, including cross-institutional mini-sabbaticals, that allow faculty from one campus to spend substantial periods of time on another campus to solidify cross-institutional research projects, educational programs, and public health practice/policy projects. | <ul style="list-style-type: none"> • Increase in the number of faculty using sabbaticals to spend time on and collaborate with another institution at the ColoradoSPH. |
| Develop student fellowship programs to support students from one campus to spend substantial periods of time on another campus to facilitate innovative educational, research, and practice projects. | <ul style="list-style-type: none"> • Increase in the number of student fellowship programs that occur across institutions and facilitate innovative educational, research, and practice projects. |

GOAL 2 : BUILD A SENSE OF COMMUNITY AMONG STUDENTS, FACULTY, AND STAFF

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|--|
| Foster a culture of committed engagement among students, faculty, and staff (e.g., campus activities). | <ul style="list-style-type: none"> • Increase the number of educational or co-curricular events held each calendar year. |
| Enhance marketing, communication, and accessibility of co-curricular professional development events for students, faculty, and staff. | <ul style="list-style-type: none"> • Increase in the awareness and accessibility of co-curricular professional development events, as evidenced by an increase in the number of participants across students, faculty, and staff. |

GOAL 3 : PROMOTE AND DEVELOP AN ENVIRONMENT THAT SUPPORTS FACULTY AND STAFF PROFESSIONAL DEVELOPMENT

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Establish funding outside of grants to support staff and faculty training and professional development. | <ul style="list-style-type: none"> • Expanded funding aimed specifically at supporting faculty and staff training and professional development. |
| Enhance and strengthen mentorship programs for both junior and senior faculty. Consider the need for both career mentors and scientific mentors; multiple different people may be needed at different stages. | <ul style="list-style-type: none"> • Workshops are offered around career exploration and skill development on each of three campuses for faculty. • Establish mentorship programs for faculty ranks (e.g., PRA, senior faculty) for which a program does not already exist. • All ColoradoSPH faculty have a clear plan for professional growth (career trajectory), with regular review and feedback on progress with the plan. |
| Establish mentorship and professional development programs for staff. | <ul style="list-style-type: none"> • Workshops are offered around career exploration and skill development on each of three campuses for staff. • Establish mentorship programs for staff. • All ColoradoSPH staff will have a clear plan for professional growth (career trajectory), with regular review and feedback on progress with the plan. |

Meeting Emerging Challenges

At the 10-year mark, our school has had considerable impact on the field of public health already, particularly within the state of Colorado. As we chart our course forward, we have opportunities before us to position ColoradoSPH even more firmly in the state, regional, and global arenas as a critical leader and innovator dedicated to advancing the field of public health. We have a remarkable set of assets across our three campuses and we intend to further leverage those assets to prepare for an increasingly relevant and impactful future for the ColoradoSPH.

We know that the population of our state and region has grown dramatically in recent years and we expect that trend to continue. Serving an increasingly diverse and populous state means we will have to be strategic in our approach to meeting the evolving public health needs of our communities.

We also know that the world, driven by technological advances, is increasingly an interconnected web of individuals and communities. We have the opportunity to establish a stronger connection between what we do at ColoradoSPH in the Rocky Mountain region and the rest of the world. Such a connection not only enhances our global reach and drives our ability to advance public health outcomes in communities across the world, but also offers the opportunity to serve as a convener and connector for the field of public health.

While the future is inherently difficult to predict, we expect it to hold a mix of both longstanding public health challenges (e.g., obesity) as well as emerging ones (e.g., vaping). To tackle these complex challenges in a meaningful way, we will need to be intentional about the roles we seek in relation to those challenges. We will need to be innovative in our education of students, researchers and practitioners to prepare them to lead in the field in addressing future public health challenges.

Considering the context in which we operate now and what we expect the future to hold, we envision our role in anticipating and responding to the emerging challenges in public health to center on:

- Promoting the field of public health
- Innovating our programs
- Leveraging the tri-campus model
- Leading in public health policy and advocacy
- These themes were drawn from the discussion of the steering committee and the five working groups

PROMOTING THE FIELD OF PUBLIC HEALTH

Introduction: For the ColoradoSPH, promoting the field of public health involves both preparing the public health workforce of the future in addition to serving as a convener to unify public health organizations and practitioners in efforts to tackle relevant public health challenges.

We will strive to expand our access to underserved students no matter where they are; we need to return trained public health practitioners and researchers to their communities. The ColoradoSPH also needs to be a point of linkage for the many public health entities within the state and region to other academic public health organizations and their capabilities and other resources.

GOAL 1 : PROMOTE THE FIELD OF PUBLIC HEALTH THROUGH EXPANDING OUR REACH AND FURTHERING COLLABORATIONS

| OBJECTIVES | SUCCESS MEASURE(S) |
|--|---|
| Extend our reach and assure equitable access by expanding educational opportunities statewide, regionally, and globally, including pursuing further opportunities for students to engage in distance-based learning. | <ul style="list-style-type: none"> • Increase the number of distance-based learning opportunities for students. • Increase in the number of students taking advantage of distance-based learning opportunities. |
| Increase access for underserved populations across all aspects of the school’s academic, research, practice, and service offerings. | <ul style="list-style-type: none"> • Increase in the number of students attending ColoradoSPH who represent underserved populations. |
| Strengthen the ecosystem of communities and practitioners in public health by serving as a convener for relevant public health issues. | <ul style="list-style-type: none"> • Increase in the number of and participation at convenings aimed at strengthening the ecosystem of communities and practitioners in public health. |
| Pursue collaborations and partnership opportunities that connect the Rocky Mountain region to the world. | <ul style="list-style-type: none"> • Increase in the number of external collaborations and partnerships aimed at addressing public health issues. |

INNOVATING OUR PROGRAMS

Introduction: Innovation—i.e., pursuing novel pathways to extend the impact of our research, education, practice, and service—will be required to genuinely prepare for and respond to the complex set of public health challenges of the future. As a field, public health faces a range of challenges both local (e.g., cannabis use) and global (e.g., climate change), both long-standing (e.g., tobacco use, obesity) and emerging (e.g., vaping). As a school, we commit to innovation in our educational programs to best prepare our students to address these multifaceted issues, and in our research approach to extend our capacity and deepen the impact we have on public health of our Colorado communities and beyond.

GOAL 1 : DEVELOP INNOVATIVE EDUCATIONAL PROGRAMS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|--|
| Equip our students to interact effectively with the evolving technologies and data science techniques required to address the public health challenges of the future. | <ul style="list-style-type: none"> • Increase in the number of trainings and course offerings available to students specifically focused on evolving technologies and data science techniques. |
| Bring global state-of-the-art educational practices to the Rocky Mountain Region through external collaborations and partnerships such as a global practicum program. | <ul style="list-style-type: none"> • Increase in the number of external collaborations and partnerships that lead to greater awareness at ColoradoSPH of global state of the art educational practices. |

GOAL 2 : INNOVATE OUR RESEARCH APPROACH TO MEET EMERGING PUBLIC HEALTH NEED

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|--|
| <p>Strengthen the capacity of our research enterprise to serve as an incubator and knowledge creator across the range of unexplored, emerging, and established areas, with the intention of informing public health practice.</p> <ul style="list-style-type: none"> • Unexplored areas are those we can surmise to exist at the intersections of fields, such as 1) population health management and climate change research; 2) use of virtual reality (VR) to advance public health practice; and 3) piloting of agile public health approaches in rural areas. • Emerging areas are developing public health issues such as vaping, cannabis, and the | <ul style="list-style-type: none"> • Increase in research funding across the research enterprise, and in particular, areas that are unexplored or emerging and have the potential to impact public health practice. • Increase in publications on emerging issues which might not have been possible using typical funding cycle sources. • Increase in awards and recognition of ColoradoSPH staff and/or students by journals and scientific societies. |

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| <p>reemergence of measles.</p> <ul style="list-style-type: none"> • Established areas are those long-standing in public health, including issues such as obesity and American Indian / Alaskan Native health. | |
| <p>Invest in state-of-the-art technology to advance our research agenda (e.g., Artificial intelligence [AI], VR, high speed mobile [5G] data).</p> | <ul style="list-style-type: none"> • More state-of-the-art technology available to students, faculty, and staff in service to our research agenda. |
| <p>Implement an “agile public health” approach, by having flexible resources that will allow designated units to respond to emerging public health issues outside of typical funding cycles.</p> | <ul style="list-style-type: none"> • Increase in new sources of funding using typical funding cycle sources which might not have been possible without “agile public health” support from ColoradoSPH. |
| <p>Bring global state of the art research practices to the Rocky Mountain Region through external collaborations and partnerships, and a visiting scholar’s program.</p> | <ul style="list-style-type: none"> • Increase in the number of external collaborations and partnerships that lead to greater awareness at ColoradoSPH of global state of the art research practices. |

LEVERAGING THE TRI-CAMPUS MODEL

Introduction: After 10 years, we now have a clear sense of our strengths, assets, and challenges as a school. As we look to an even more influential and relevant future for our school, we will leverage our existing assets to strengthen relationships and identify areas of need and opportunity. Our unique tri-campus model allows us to draw on a remarkable suite of expertise and resources; it is imperative that this be central to our approaches in the future. We will also engage our existing partners and collaborators to ensure we are meeting their needs.

GOAL 3 : LEVERAGE OUR EXISTING ASSETS TO ANTICIPATE AND RESPOND TO THE EMERGING PUBLIC HEALTH NEEDS AND CHALLENGES ON STATE, REGIONAL, AND GLOBAL LEVELS

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Further develop and leverage a tri-campus approach to our academic, research, service and practice goals. | <ul style="list-style-type: none"> • Increased collaborative deployment of funding sources across campuses to invest in partnerships, educational experiences, professional development, and the research enterprise. • Increase in grant funding and collaborative research for ColoradoSPH. |
| Assure that Colorado’s needs for the training of students and the public health workforce include perspectives from all campus partners and public health agencies and organizations (state, city, and county) in Colorado communities. | <ul style="list-style-type: none"> • Greater collective impact of ColoradoSPH on state, regional, national, and global public health needs. |

LEADING IN PUBLIC HEALTH POLICY AND SOCIAL JUSTICE

Introduction: Effectively informing public health policy and advancing public health outcomes necessitates a shift in our thinking from research translation to influence and impact. We call on all elements of the ColoradoSPH to play a leadership role in benefiting public health for the residents of the Rocky Mountain region. Key to this effort will be developing the future public health leadership—primarily through our faculty, staff, students, alumni— equipping them to be the collaborative leaders that the region and the world will need.

GOAL 4 : SERVE AS A LEADER FOR COLORADO AND THE REGION IN PUBLIC HEALTH POLICY AND SOCIAL JUSTICE

| OBJECTIVES | SUCCESS MEASURE(S) |
|---|---|
| Expand the practical application, communication, and translation of our research. | <ul style="list-style-type: none"> • Increase in the number of requests for our participation on panels, advisory boards, initiatives, and efforts led by the State of Colorado, local governments, and civic entities, such as chambers of commerce. |
| Document and disseminate stories about the impact of ColoradoSPH activities. | <ul style="list-style-type: none"> • Increase in the number of communicated stories about the impact of ColoradoSPH activities. |
| Develop the future collaborative leaders of the public health workforce of Colorado and beyond, starting with our faculty, staff, students, and alumni. | <ul style="list-style-type: none"> • Increase in the number of leadership positions held by our faculty, staff, students, and alumni. |
| Build the school’s approach to leadership in public health policy, working closely with partners and collaborators to identify areas of need. | <ul style="list-style-type: none"> • Greater presence and input from partners and collaborators in identifying areas of need. • Increase in the number of requests for partnerships and leadership in public health policy. |
| Enhance our influence with local, state, and regional leaders across government, nonprofit, and civil society sectors. | <ul style="list-style-type: none"> • Increase in the application of our research findings, as evidenced in publications, partnerships, and improved public health outcomes in the communities we serve. • Increased impact of ColoradoSPH on state, regional, national, and global public health needs. |

Appendix: Tables & Figures

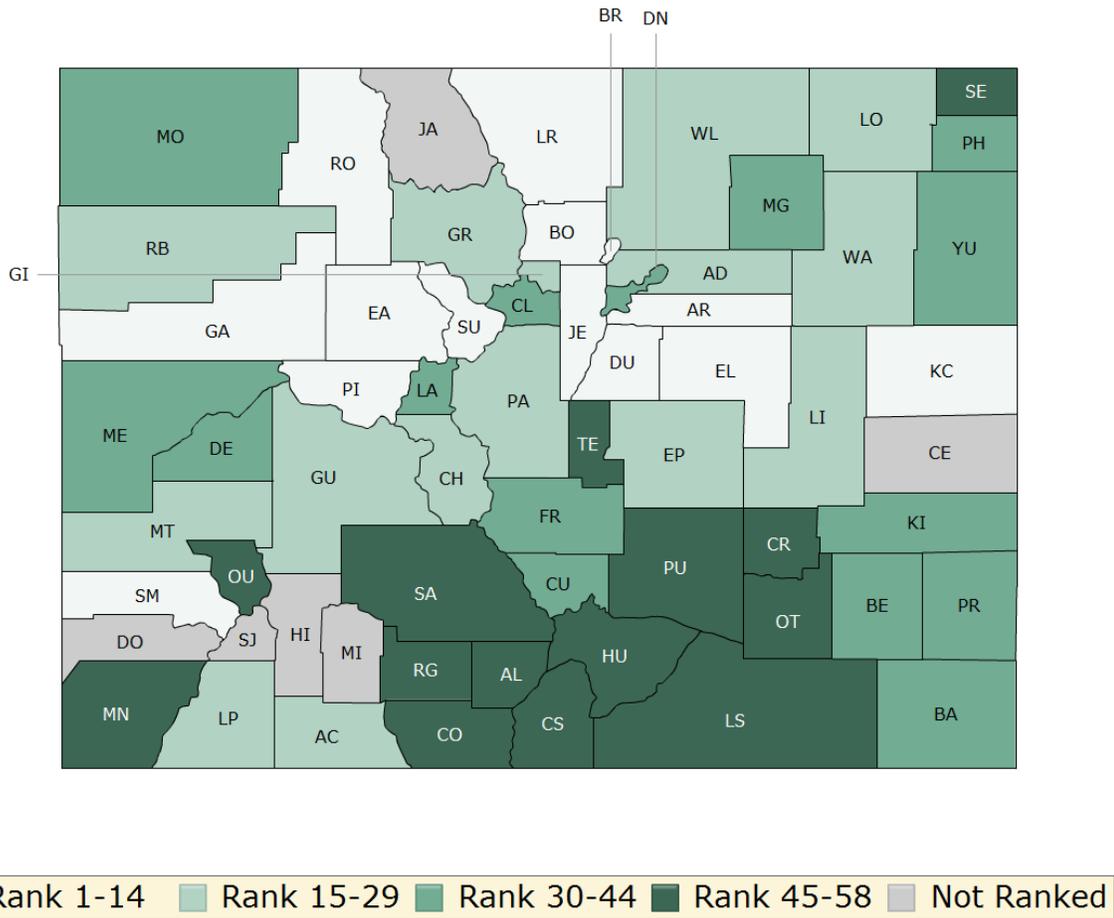
TABLE 1. ALIGNMENT OF LOCAL, STATE AND NATIONAL PRIORITIES, COLORADO

| | Local Priority – Frequency | Colorado Winnable Battle | Governor's Priority | CDC Winnable Battle | HP 2020 Leading Health Indicators Topics | EPA Priority |
|-------------------------------|----------------------------|--------------------------|---------------------|---------------------|--|--------------|
| Obesity | 43 | | | | | |
| Mental Health | 27 | | | | | |
| Substance Abuse | 22 | | | | | |
| Clean Water | 14 | | | | | |
| Safe Food | 13 | | | | | |
| Clean Air | 12 | | | | | |
| Access to Care | 11 | | | | | |
| Unintended Pregnancy | 8 | | | | | |
| Oral Health | 6 | | | | | |
| Injury Prevention | 5 | | | | | |
| Tobacco | 5 | | | | | |
| Infectious Disease Prevention | 1 | | | | | |
| Maternal and Child Health | 1 | | | | | |

Note: 53 LPHAs have prioritized as of December, 2014. This table does not show all priorities for each category, it only reflects those in common with at least one other. Additionally, priority wording may differ from source.

Shaping a State of Health, Colorado's Plan for Improving Public Health and the Environment, 2015-2019. CDPHE

FIGURE 1. DISTRIBUTION OF COLORADO HEALTH OUTCOMES BY COUNTY, 2018



University of Wisconsin Population Health Institute. County Health Rankings 2018.

TABLE 3. DIFFERENCES IN HEALTH OUTCOME MEASURES AMONG COUNTIES FOR RACIAL/ETHNIC GROUPS IN COLORADO, 2018.

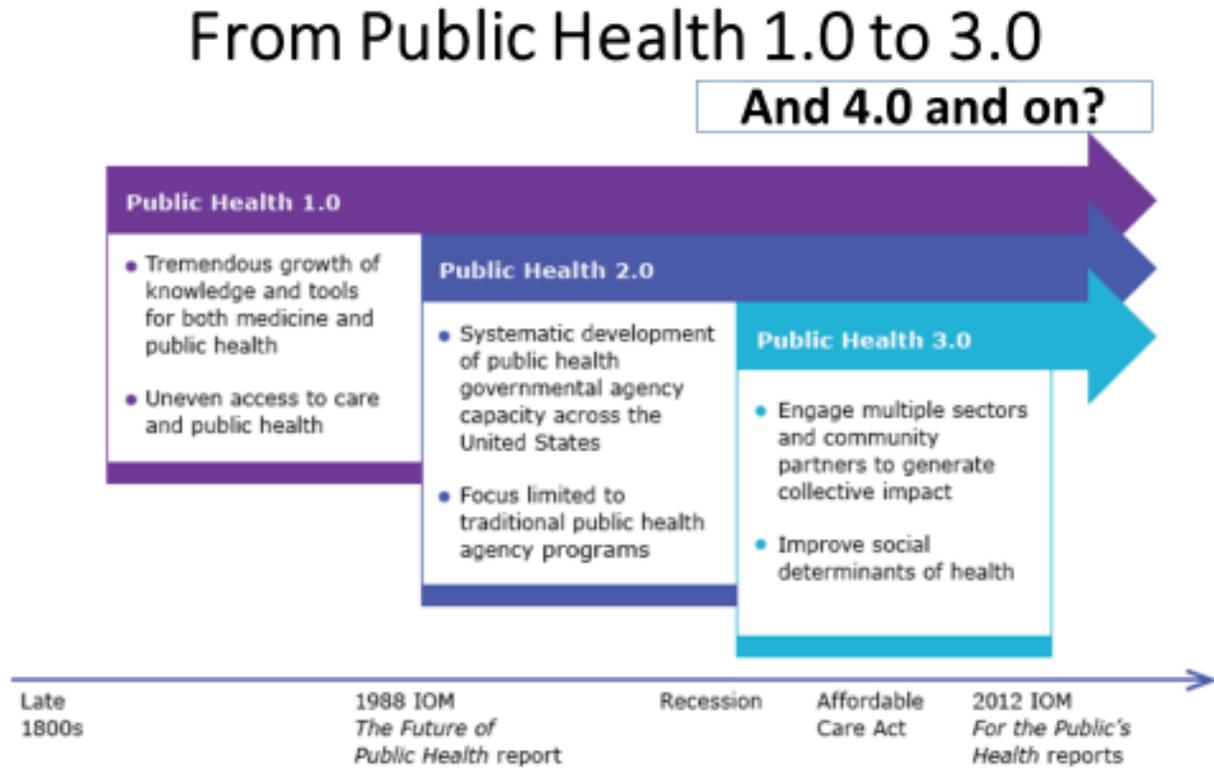
| | Healthiest CO County | Least Healthy CO County | AI/AN | Asian/PI | Black | Hispanic | White |
|---|---------------------------------|------------------------------------|--------------|-----------------|--------------|-----------------|--------------|
| Premature Death (years lost/100,000) | 3,300 | 10,100 | 9,300 | 2,900 | 8,200 | 5,900 | 5,600 |
| Poor or Fair Health (%) | 8% | 29% | 30% | 14% | 18% | 26% | 11% |
| Poor Physical Health Days (avg) | 2.5 | 4.8 | 7.5 | 1.4 | 3.0 | 3.6 | 3.3 |
| Poor Mental Health Days (avg) | 2.9 | 4.4 | 7.7 | 2.8 | 3.8 | 3.7 | 3.6 |
| Low Birthweight (%) | 9% | 16% | 9% | 11% | 13% | 9% | 8% |

American Indian/Alaskan Native (AI/AN), Asian/Pacific Islander (Asian/PI)

N/A = Not available. Data for all racial/ethnic groups may not be available due to small numbers

University of Wisconsin Population Health Institute. County Health Rankings 2018.

FIGURE 2. PUBLIC HEALTH 1.0 AND BEYOND



DeSalvo KB, Wang YC, Harris A, Auerbach J, Koo D, O'Carroll P. *Public Health 3.0: A Call to Action for Public Health to Meet the Challenges of the 21st Century. Prev Chronic Dis 2017;14:170017.*