SYLLABUS
PHPM 574: Public Health Policy & Management
FALL 2017
October 5, 2017

Time: Tuesdays, 4:00 – 6:50 pm

Location: Drachman Hall, Rm A-118

Instructor: Kenneth Schachter, MD, MBA
kschacht@email.arizona.edu
520-626-7960 (office)
Drachman Hall, A-216
Office hours by appointment

TA: Preshit Nemdas Ambade
preshitambade@email.arizona.edu

A. Catalog Description:
Management processes/roles of public health professionals; health service organizations; policy issues and resource utilization/control; human resources management; public health trends. Grading: Regular grades are awarded for this course: A B C D E. May be repeated for credit 1 time (maximum 2 enrollments).

B. Course Description:
This is a survey course. Its intention is to introduce students with and without public health experience to a wide variety of public health topics and issues through readings, activities, and self-reflection in a team-based learning environment.

C. Course Prerequisites: None

D. Required Text:
• Novick & Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Leiyu Shi, DrPH, MBA, MPA; James A. Johnson, PhD, MPA, MS; ISBN: 978-1-4496-8833-2; 2014

E. Overall Course Learning Objectives: This course provides an overview of a broad range of public health topics. By the end of the course you should be able to:
1. Identify major components and issues in the organization, financing, and delivery of the U.S. public health system
2. Describe the legal and ethical bases of public health
3. Describe how public policy both creates and solves public health problems
4. Apply principles of strategic planning
5. Demonstrate leadership skills for building partnerships
6. Describe the principles of marketing and social marketing
7. Discuss the policy process for improving the health status of populations
8. Communicate health policy issues using appropriate channels and technologies
9. Describe the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives
10. Recognize and practice good teamwork

F. MPH Core Competencies Covered: Excerpted from Tier 1 of the “Core Competencies for Public Health Professionals”, revised and adopted by the Council on Linkages Between Academia and Public Health Practice on June 26, 2014: www.phf.org/corecompetencies

Analytical Skills
1. Describes factors affecting the health of a community (e.g., equity, income, education, environment)
2. Applies ethical principles in accessing, collecting, analyzing, using, maintaining, and disseminating data and information
3. Selects valid and reliable data
4. Identifies gaps in data
5. Collects valid and reliable quantitative and qualitative data
6. Describes public health applications of quantitative and qualitative data
7. Describes assets and resources that can be used for improving the health of a community (e.g., Boys & Girls Clubs, public libraries, hospitals, faith-based organizations, academic institutions, federal grants, fellowship programs)
8. Describes how evidence (e.g., data, findings reported in peer-reviewed literature) is used in decision making

Policy Development/Program Planning Skills
9. Identifies current trends (e.g., health, fiscal, social, political, environmental) affecting the health of a community
10. Gathers information that can inform options for policies, programs, and services (e.g., secondhand smoking policies, data use policies, HR policies, immunization programs, food safety programs)
11. Describes implications of policies, programs, and services

Communication Skills
12. Communicates in writing and orally with linguistic and cultural proficiency (e.g., using age-appropriate materials, incorporating images)
13. Suggests approaches for disseminating public health data and information (e.g., social media, newspapers, newsletters, journals, town hall meetings, libraries, neighborhood gatherings)
14. Facilitates communication among individuals, groups, and organizations
15. Describes the roles of governmental public health, health care, and other partners in improving the health of a community

Cultural Competency Skills
16. Describes the concept of diversity as it applies to individuals and populations (e.g., language, culture, values, socioeconomic status, geography, education, race, gender, age, ethnicity, sexual orientation, profession, religious affiliation, mental and physical abilities, historical experiences)
17. Describes the diversity of individuals and populations in a community
18. Describes the ways diversity may influence policies, programs, services, and the health of a community
19. Recognizes the contribution of diverse perspectives in developing, implementing, and evaluating policies, programs, and services that affect the health of a community
20. Describes the value of a diverse public health workforce

Community Dimensions of Practice Skills
21. Describes the programs and services provided by governmental and non-governmental organizations to improve the health of a community
22. Suggests relationships that may be needed to improve health in a community
23. Describes the importance of community-based participatory research

Basic Public Health Science Skills
24. Describes the scientific foundation of the field of public health
25. Identifies prominent events in the history of public health (e.g., smallpox eradication, development of vaccinations, infectious disease control, safe drinking water, emphasis on hygiene and hand washing, access to health care for people with disabilities)
26. Describes how public health sciences (e.g., biostatistics, epidemiology, environmental health sciences, health services administration, social and behavioral sciences, and public health informatics) are used in the delivery of the 10 Essential Public Health Services
27. Retrieves evidence (e.g., research findings, case reports, community surveys) from print and electronic sources (e.g., PubMed, Journal of Public Health Management and Practice, Morbidity and Mortality Weekly Report, The World Health Report) to support decision making
28. Recognizes limitations of evidence (e.g., validity, reliability, sample size, bias, generalizability)
29. Describes evidence used in developing, implementing, evaluating, and improving policies, programs, and services

Financial Planning and Management Skills
30. Describes the structures, functions, and authorizations of governmental public health programs and organizations
31. Describes government agencies with authority to impact the health of a community
32. Describes public health funding mechanisms (e.g., categorical grants, fees, third-party reimbursement, tobacco taxes)
33. Contributes to development of program budgets

Leadership and Systems Thinking Skills
34. Incorporates ethical standards of practice (e.g., Public Health Code of Ethics) into all interactions with individuals, organizations, and communities
35. Describes public health as part of a larger inter-related system of organizations that influence the health of populations at local, national, and global levels
36. Describes the ways public health, health care, and other organizations can work together or individually to impact the health of a community
37. Identifies internal and external facilitators and barriers that may affect the delivery of the 10 Essential Public Health Services (e.g., using root cause analysis and other quality improvement methods and tools, problem solving)
38. Participates in professional development opportunities
39. Describes ways to improve individual and program performance

G. MPH Foundational Competencies
### MPH Foundational Competencies

**Evidence-based Approaches to Public Health**

2. Select quantitative and qualitative data collection methods appropriate for a given public health context

**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

11. Select methods to evaluate public health programs

**Policy in Public Health**

12. Discuss multiple dimensions of policy-making process, including the roles of ethics and evidence

13. Propose strategies to identify stakeholder and build coalitions and partnerships for influencing public health outcomes

14. Advocate for political, social, or economic policies that will improve health in diverse populations

15. Evaluate policies for their impact on public health and health equity

16. Apply principles of governance and management, which include creating a vision

17. Apply negotiation and mediation skills to address organizational or community challenges

**Communication**

18. Select communication strategies for different audiences and sectors

19. Communicate audience-appropriate public health content both in writing and through oral presentation

20. Describe the importance of cultural competence in communicating public health content

**Interprofessional Practice**

21. Perform effectively on interprofessional teams

**Systems Thinking**
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<tr>
<td>22.</td>
<td>Apply systems thinking tools to a public health issue</td>
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H. Course Requirements:

- **Teamwork** – This course is **NOT** lecture based. It uses **team-based learning**, which requires your active participation inside and outside of class. Typical in-class activities include: team assignments, oral team reports and presentations, full class discussions, and individual or collective reflection. Students will be assigned to small (5-7 people) teams during the first class. You’ll work in your team throughout the semester. Today’s professionals often work in groups, teams, and coalitions. This class will help you develop and/or refine the needed skills.

- **Readings** – You are expected to attend every class and come fully prepared to participate – i.e., having read all assigned materials and completed all assignments.

- **News Articles** – Every week, each team is expected to identify a current news or magazine article in the popular press (e.g., New York Times, Wall Street Journal, Washington Post, Business Week, Wired, NPR, Huffington Post, etc.) relevant to the week’s topic and readings. All team members are expected to have read and be able to present and critically discuss the article in class.

- **Team Quizzes** – Most classes will begin with individual and team quizzes to test your individual and shared understanding of the week’s assignments. All team members are expected to contribute their thoughts to the team quiz and teams are responsible for implementing a system that ensures that everyone is heard.

- **D2L Online Discussion Board** – In addition to the above, teams, and/or individual students will have weekly assignments on D2L’s online discussion board. You are expected to complete and post: (1) your initial response, (2) your responses to others’ postings, and (3) your responses to questions posed by others; on or before the indicated deadlines. Postings should be relevant to the questions posed and demonstrate that you have read, understand, and can meaningfully apply and extrapolate from the knowledge you’ve gained. You are encouraged to share relevant readings that were not assigned as well as relevant knowledge and experience. Comments or replies to other postings (e.g., "I really liked chapter 4" or "I agree with what Dana wrote") are not sufficient and will likely receive a zero grade. Similarly, poor grammar, lack of etiquette, insensitivity, rudeness, etc., will adversely affect your grade.

- **Individual Reflections** – You will typically be asked at the end of each class to reflect individually or as a team on your course-related experiences for that week, using a dialectical journaling format. For example, you can ask yourself if there was anything that you found particularly meaningful and why... Or, if any important underlying beliefs or values were affirmed or violated, and why... Or, if some part of what you read, saw, heard, or experienced was especially relatable to your work and/or life experiences and why... Or, if as a result of what you read, saw, heard, or experienced you will do anything differently in the future and why... Or, if you plan to apply something you’ve learned, and how...

I. Grading/Student Evaluation: ≥90% = A; ≥80% = B; ≥70% = C; ≥60% = D; <60% = E

With **team-based learning**, your final grade will be based on your individual, team, and peer review grades. Individual and team grades will be awarded throughout the semester. Students who do not appear to be earning at least a “B” average for their individual performance by the middle of the term will be contacted by the instructor. The percentage contribution of (and in) each of the three grade categories is shown below.

<table>
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<tr>
<th>Individual performance:</th>
<th>Team performance</th>
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<tr>
<td>In-class participation (attendance, class discussions, presentations, and reflections)</td>
<td>D2L Discussions and Assignments</td>
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<td>15%</td>
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<table>
<thead>
<tr>
<th>Individual D2L Discussions and Assignments</th>
<th>Team quizzes</th>
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<td>10%</td>
<td>15%</td>
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J. **Class Attendance/ Absence Policy:**
Students are expected to participate in every class and to notify the instructor if they are unable to attend. There is no make-up work for the first missed class, though students are required to complete and turn in any online and/or written at-home assignments due for that class. Students will be assigned a make-up paper for each missed class after the first. For those classes, make-up paper grades will be substituted for missed team quiz grades. Because important aspects of instruction and learning take place in class, three or more absences may result in the loss of one or more letter grades, or a grade of incomplete. Holidays or special events observed by organized religions will be honored for those students affiliated with that particular religion with the same make-up requirements described above. Absences pre-approved by the UA Dean of Students or designee will be honored.

K. **Participation and Expectations:**
- Complete all required readings and assignments prior to each class
- Attend class and actively participate in online and in-class discussions
- Think analytically
- Be open to new ideas
- Focus on the readings and issues under discussion
- Avoid rambling or monopolizing team or class discussions
- Be courteous in your critiques and disagreements; avoid rudeness and personal attacks
- Actively contribute to team activities in and out of class, including team assignments and presentations

L. **Discussion Board Instructions and Grading Rubric:**
See attachment “A”

M. **Peer Review:**
The peer review portion of your grade will be determined by your teammates. There will be two formal peer reviews. The first, a practice peer review conducted mid-semester (5% of your final grade), will provide an opportunity for you to give and receive constructive anonymous feedback on team performance. The second, at the end of the semester will count toward 10% of your final grade. You will be grading each other based on four criteria – preparation, contribution, respect for others’ ideas, and flexibility.
- Preparation – Was your teammate when he/she came to class?
- Contribution – Did your teammate contribute to group discussion and group work?
- Respect for others’ ideas – Did your teammate encourage others to contribute to their ideas?
- Flexibility – Was your teammate flexible when compromise was needed?

N. **Course Schedule and Required Readings:** (See weekly course overviews for additional optional readings)
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<th>Date</th>
<th>Week</th>
<th>Topic</th>
<th>Required Readings</th>
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| 8/22  | Week 1| Getting started                                             | • CPH 574 Syllabus, Fall 2017 – Read in class  
• CPH 574 Tool Kit – Read in class  
• Davison S; Creating Working Norms and Agreements (3p) – Read in class  
• Michaelson, Making Feedback Helpful – Read in class  
• Plagiarism – Read in class  
• Public health core functions and essential services – Read in class  
• Dialectical journaling – Read in class |
| 8/29  | Week 2| Introduction to public health and working in teams          | • Novick & Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapters 1 (Overview of Public Health Administration) and 2 (Historical Developments in Public Health in the 21st Century) – pp. 1-32 (app. 24p reading)  
| 9/5   | Week 3| Organization of the public health delivery system           | • Novick & Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapter 5 (Organization of the Public Health System) – pp. 79-118 (app. 35p reading)  
• Fielding J, Teutsch S, Breslow L; A Framework for Public Health in the United States; Public Health Reviews, Vol. 32, No 1, 174-189  
• Gebbie C, Building a Constituency for Public Health Case Study, (10p)  
• Price P; If Tuberculosis Spreads..., New York Times Opinion Pages, July 8, 2014 (2p) |
| 9/12  | Week 4| Public health law and ethics                                | • Novick & Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapters 6 (Professionalism and Ethics in Public Health Practice) and 7 (Public Health Law) – pp. 119-158 (app. 35p reading)  
• Bayer & Fairchild: The Genesis of Public Health Ethics – Provides a brief history of bioethics and public health ethics. Compares and contrasts public health ethics to bioethics and discusses some of the challenges inherent in developing an ethic for public health (21p)  
• Gostin & Powers: Social Justice – Applies the concept of social justice to public health and discusses how the framework of social justice informs the ethics of public health (8p)  
• Alderman J, Dollar K, Kozlowski L; Understanding the origins of anger, contempt, and disgust in public health policy disputes: Applying moral psychology to harm reduction debates – Describes different moral perspectives, the emotions elicited by their perceived violation, and relates both to public health and political debates (16p) |
| 9/19  | Week 5| Policy and public health                                    | • Novick & Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapter 8 (Public Health Policy) – pp. 159-180 (18p)  
• Brown L; The Political Face of Public Health; Public Health Reviews, Vol. 32, No 1, 155-173 – Explores the tension between population health and politics (18p)  
• Fielding J, Briss P; Promoting Evidence-Based Public Health Policy: Can we have Better Evidence and More Action; Health Affairs 25 No. 4 (2006): 1969-1978 (10p)  
• Rosenstock; Attacks on Science: The Risks to Evidence-Based Policy – Describes |
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<tr>
<th>Date</th>
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<th>References</th>
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<td>9/26</td>
<td>Overview of management work: Managing programs and people</td>
<td>- Novick &amp; Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapter 11 (Human Resource Management for Public Health) – pp. 221-240 (app. 18p reading)&lt;br&gt;- Longest B; Logic Models as Aids in Managing Health Programs; Journal of Nursing Administration; Vol. 35, No. 12, December 2005 – Discusses three core management activities and how “logic models, depictions of what programs are intended to accomplish and how they will go about it”, can help program managers. (6p)&lt;br&gt;- Pfeffer J, Sutton R; Trust the Evidence, Not Your Instincts; The New York Times; September 3, 2011 (2p)&lt;br&gt;- The Core Competencies for Public Health Professionals (Read the introduction and review the Domains titled – “Policy Development/Program Planning Skills” and “Financial Planning and Management Skills”); Revised and Adopted by the Council on Linkages Between Academia and Public Health Practice: June 26, 2014; Available from: <a href="http://www.phf.org/corecompetencies">www.phf.org/corecompetencies</a></td>
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<td>Date</td>
<td>Topic</td>
<td>Reading</td>
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<td>10/24</td>
<td>Program design</td>
<td>Lardon C, Soule S, Kernak D, Lupie H; Using Strategic Planning and Organizational Development Principles for Health Promotion in an Alaska Native Community; Journal of Prevention &amp; Intervention in the Community, 39:65–76, 2011 – Illustrates some of the difficulties applying western constructs (e.g., strategic planning) in other cultures (13p)</td>
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<tr>
<td>10/31</td>
<td>Public health finance and budgeting</td>
<td>Novick &amp; Morrow’s Public Health Administration: Principles for Population-Based Management, Third Edition; Chapter 23 (Evidence-Based Public Health Management and Practice) – pp. 505-530 (app 18p reading)</td>
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<tr>
<td>11/14</td>
<td>Program evaluation and health care quality</td>
<td>Wakefield M, Loken B, Hornik R; Use of Mass Media Campaigns to Change Health Behavior; Lancet 2010; 376: 1261–71 – Reviews the outcomes of mass media campaigns in the context of various health risk behaviors (11p)</td>
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### 11/21
#### Week 14

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<tr>
<th>11/28</th>
<th>Advocacy</th>
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<tr>
<td><strong>No class</strong></td>
<td><strong>May begin researching final exam – an op-ed article</strong></td>
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### 11/28
#### Week 15

| **Advocacy** | **Chapman S; Advocacy for public health: a primer; Journal of Epidemiology and Community Health 2004;58:361-365 – 10 questions for public health advocates (5p)** |
| **If you are unfamiliar with, or just want to review, basic concepts on the ACA or health insurance coverage, view the following brief Henry J. Kaiser Family Foundation YouToon videos. Accessed 8/20/17** | **Health Care Costs 101: ACA Spurs Modest Growth; California Health Care Almanac; [http://www.chcf.org/~/media/MEDIA%20LIBRARY%20Files/PDF/PDF%20HealthCareCosts16.pdf](http://www.chcf.org/~/media/MEDIA%20LIBRARY%20Files/PDF/PDF%20HealthCareCosts16.pdf) – A chart book providing information on US health care spending, May 2016 edition (pp 1-13); Accessed 8/16/2017** |
O. Required Statements:

Communications:
You are responsible for reading emails sent to your UA account from your instructor and the announcements that are placed on the course web site. Information about readings, news events, your grades, assignments and other course related topics will be communicated to you with these electronic methods. The official policy can be found at: https://www.registrar.arizona.edu/personal-information/official-student-email-policy-use-email-official-correspondence-students

Disability Accommodations:
It is the University’s goal that learning experiences be as accessible as possible. If you anticipate or experience physical or academic barriers based on disability or pregnancy, please let me know immediately, so that we can discuss options. You are also welcome to contact the Disability Resources (520-621-3268) to establish reasonable accommodations (as it is very important that you be registered with the DRC). For additional information on Disability Resources and reasonable accommodations, please visit http://drc.arizona.edu/students

Code of Academic Integrity
Students are encouraged to share intellectual views and discuss freely the principles and applications of course materials. However, graded work/exercise must be the product of independent effort unless otherwise instructed. Students are expected to adhere to the UA Code of Academic Integrity, available through the office of the UA Dean Students: http://deanofstudents.arizona.edu/policies-and-codes/code-academic-integrity

Classroom Behavior: (Statement of expected behavior and respectful exchange of ideas):
Present policies to foster a positive learning environment, including use of cell phones, mobile devices, etc.). Students are expected to be familiar with the UA Policy on Disruptive Student Behavior in an Instructional Setting found at: http://policy.arizona.edu/education-and-student-affairs/disruptive-behavior-instructional-setting

Threatening Behavior Policy:
The UA Threatening Behavior by Students Policy prohibits threats of physical harm to any member of the University community, including to one’s self, http://policy.arizona.edu/education-and-student-affairs/threatening-behavior-students

Nondiscrimination and Anti-harassment Policy:
The University of Arizona is committed to creating and maintaining an environment free of discrimination, http://policy.arizona.edu/human-resources/nondiscrimination-and-anti-harassment-policy

UA Smoking and Tobacco Policy:
The purpose of this Policy is to establish the University of Arizona’s (University) commitment to protect the health of University faculty, staff, students, and visitors on its campuses and in its vehicles, http://policy.arizona.edu/ethics-and-conduct/smoking-and-tobacco-policy

**Syllabus Changes:**
Information contained in the course syllabus, other than the grade and absence policies, may be subject to change with reasonable advance notice, as deemed appropriate by the instructor.

**P. References**
- Please use the APA format. One good comprehensive source of information is Purdue's OWL (Online Writing Lab) website: http://owl.english.purdue.edu/owl/resource/560/01/
- All UA students have free access to RefWorks, EndNote, and/or Mendeley. Sign up for your free account through the UA Library website. Refworks will allow you to input all the data on your references, organize them into folders, and print bibliographies that you can copy and paste into your papers. You may still need to make some minor corrections (e.g., punctuation and/or capitalization). However, overall, it should save you a lot of time.

**Q. Telephone and Computer Use:** Computers only for class work. Cell phones on silent or vibrate mode.

**R. Plagiarism:** What counts as plagiarism?
- Copying and pasting information from a web site or another source, and then revising it so that it sounds like your original idea.
- Doing an assignment/essay/take home test with a friend and then handing in separate assignments that contain the same ideas, language, phrases, etc.
- Quoting a passage without quotation marks or citations, so that it looks like your own.
- Paraphrasing a passage without citing it, so that it looks like your own.
- Hiring someone to do your work for you or purchasing a paper through any on- or off-line source.
### A Partial Listing of Web Resources

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<tr>
<th>Topic</th>
<th>Web Sites</th>
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<tbody>
<tr>
<td>Health policy</td>
<td>Health Affairs: <a href="http://www.healthaffairs.org">www.healthaffairs.org</a></td>
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<td>American Public Health Association: <a href="http://www.apha.org">www.apha.org</a></td>
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<td>The Urban Institute: <a href="http://www.urban.org">www.urban.org</a></td>
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<td>Families USA: <a href="http://www.familiesusa.org">www.familiesusa.org</a></td>
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<td>Center for Health Care Strategies: <a href="http://www.chcs.org">www.chcs.org</a></td>
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<td>National Academy for State Health Policy: <a href="http://www.nashp.org">www.nashp.org</a></td>
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<td>Kaiser Family Foundation: <a href="http://www.kff.org">www.kff.org</a></td>
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<td>Rand Corporation: <a href="http://www.rand.org">www.rand.org</a></td>
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<td>Mathematica Policy Research: <a href="http://www.mathematica-mpr.com">www.mathematica-mpr.com</a></td>
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<td>The Washington Post: <a href="http://www.washingtonpost.com">www.washingtonpost.com</a></td>
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<td>Pro Publica: <a href="https://www.propublica.org/">https://www.propublica.org/</a></td>
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<td>Financing health services</td>
<td>Center for Medicare &amp; Medicaid Services: <a href="http://www.cms.gov">www.cms.gov</a></td>
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<td>Center on Budget &amp; Policy Priorities: <a href="http://www.cbpp.org">www.cbpp.org</a></td>
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<td>Kaiser Family Foundation: <a href="http://www.kff.org">www.kff.org</a></td>
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<td>Mental health</td>
<td>National Institute of Mental Health: <a href="http://www.nimh.nih.gov">www.nimh.nih.gov</a></td>
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<td>Bazelon Center for MH Law: <a href="http://www.bazelon.org">www.bazelon.org</a></td>
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<td>American Public Health Association: <a href="http://www.apha.org">www.apha.org</a></td>
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<td>Quality of health care</td>
<td>Institute for Healthcare Improvement (IHI) Open School: <a href="http://www.ihi.org/education/hiopenschool/courses/Pages/default.aspx">http://www.ihi.org/education/hiopenschool/courses/Pages/default.aspx</a></td>
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<td>The Joint Commission: <a href="https://www.jointcommission.org/">https://www.jointcommission.org/</a></td>
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<td>National Public Radio: <a href="http://www.npr.org">www.npr.org</a></td>
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<td>The Washington Post: <a href="http://www.washingtonpost.com">www.washingtonpost.com</a></td>
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<td>The Los Angeles Times: <a href="http://www.latimes.com">www.latimes.com</a></td>
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Attachment A

Discussion Board Instructions
Grading Rubric for discussion board, quizzes, and team presentations

D2L Discussion Board

In this course, you are expected to participate and interact with your classmates both in-class and online. A significant portion (35%) of your final grade will be based on your participation in weekly, online, D2L discussions. In addition to your own original responses, you are required to comment on the postings of at least two of your classmates each week. Your postings may be brief, but need to substantively contribute to the topic under discussion and reflect the quality of discourse characteristic of a professional level seminar. All of your postings should be well informed, respectful, and original.

• A well-informed posting requires that you have: (1) completed all readings and viewed all media; (2) conducted any necessary independent research; (3) carefully reviewed and considered the discussion question(s) before posting your own comments; and (4) carefully read other students’ postings before commenting on them.

• A well-informed posting responds to the question(s) asked, demonstrates understanding of the question(s), materials, and (when commenting) other responses; discusses relevant issues; and introduces cited information from additional credible sources where required or appropriate. Wikipedia and similar sources will not be counted as references. Use instead peer-reviewed journals; books; national newspapers or magazines; national, state or local public health agencies; national non-governmental public health agencies and foundations; etc.

• Respectful means that you avoid rude, condescending, disparaging, or obscene communication.

• Original means that you are: (1) expressing your own ideas in your own words, (2) appropriately crediting original sources when you are not, and (3) adhering to the University Code of Academic Integrity.

The following rubric will be used for grading:

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<th>Excellent (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pts)</th>
<th>None (0 pts)</th>
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<tbody>
<tr>
<td>a. Content</td>
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<td>b. Ideas/Organization</td>
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<td>c. Conventions</td>
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<td>TOTAL (a+b+c / 12)</td>
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- Content
  o Content demonstrates understanding of materials and responds to question(s) asked

- Ideas/Organization
  o Thoughts, ideas and recommendations are clear, interesting, persuasive, and – wherever appropriate – based on available scientific evidence. Content is organized in a manner that allows reader/listener to easily follow and understand.

- Conventions
  o Written reports adhere to writing conventions (e.g., spelling, grammar, punctuation, capitalization, and paragraphing)
  o Oral presentations are succinct and well organized with a beginning, middle, and end. Pictures are used to help enhance understanding. Graphics are simple and easily understood. There are no more than five bullet points per slide. Presenters speak slowly and clearly, engaging their audience.