

CRITERION 2: INSTRUCTIONAL PROGRAMS

2.1 DEGREE OFFERINGS

The school shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's degree in at least the five areas of knowledge basic to public health. The school may offer other degrees, professional and academic, and other areas of specialization, if consistent with its mission and resources.

2.1.a. An instructional matrix presenting all of the school's degree programs and areas of specialization. If multiple areas of specialization are available within departments or academic units shown on the matrix, these should be included. The matrix should distinguish between public health professional degrees, other professional degrees and academic degrees at the graduate level, and should distinguish baccalaureate public health degrees from other baccalaureate degrees. The matrix must identify any programs that are offered in distance learning or other formats. Non-degree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.1.

The UNTHSC-SPH offers professional degrees at the master and doctoral levels and an academic degree at the doctoral level. The academic doctoral program is a Doctor of Philosophy (PhD in Public Health Sciences) with five concentrations: Biostatistics, Epidemiology, Behavioral and Community Health, Environmental Health Sciences, and Health Services and Policy. The professional doctorate is a Doctor of Public Health (DrPH) generalist degree with a focus on leadership in public health practice. The SPH's professional master's degrees are the MPH-Professional Option (MPH-PO), a generalist degree with 42 semester credit hours, and the six MPH concentrations with a minimum of 48 semester credit hours: Biostatistics, Epidemiology, Community Health, Environmental and Occupational Health Sciences, Health Management and Policy, and Maternal and Child Health. These degree programs are identified in **Table 2.1.a.1**. The Program Directors Committee provides the oversight for all of the MPH concentrations. The membership of this committee includes the Program Director for each concentration and a representative for the MPH-PO from the Department of Public Health Education. The DrPH Program Committee's membership includes representatives from each of the departments in the SPH. The PhD Program Committee is comprised of representatives of each of the five concentrations.

Table 2.1.a.1: Instructional Matrix (CEPH Data Template 2.1.1)

Degree/Specialization	Academic	Public Health Professional	Other Professional	Minimum Required Credits
Master's Degrees				
Master of Public Health – Community Health		MPH		48
Master of Public Health - Biostatistics		MPH		48
Master of Public Health – Environmental & Occupational Health Sciences		MPH		48
Master of Public Health – Epidemiology		MPH		48
Master of Public Health – Health Management and Policy		MPH		48
Master of Public Health – Maternal and Child Health		MPH		48
Master of Public Health – Professional Option (on campus and online)		MPH		42
Master of Health Administration			MHA	60
Doctoral Degrees				
Doctor of Philosophy in Public Health Sciences – Behavioral and Community Health	PhD			90
Doctor of Philosophy in Public Health Sciences – Biostatistics	PhD			90
Doctor of Philosophy in Public Health Sciences – Environmental Health Sciences	PhD			90
Doctor of Philosophy in Public Health Sciences – Epidemiology	PhD			90
Doctor of Philosophy in Public Health Sciences – Health Services and Policy	PhD			90
Doctor of Public Health		DrPH		60
Joint Concentrations				
Biostatistics and Epidemiology		MPH		54-57
Environmental and Occupational Health Sciences & Epidemiology		MPH		54-57
Dual Degree				
DO/MPH		DO/MPH		42-48
MPH/MS in Applied Anthropology ¹	MPH/MS			42-48
MPH/MSN ²	MHA/MSN			42-48

¹This is a dual degree with the MPH concentration in Community Health (Dept. BACH)²This is a dual with the MPH concentration in Health Management and Policy (Dept. HMAP). The MPH/MSN is being phased out and therefore the SPH did not admit any students in the 2014-2015 academic year. No changes will be made to the existing curriculum and students that are currently enrolled will continue to be advised and move toward degree completion under the same degree plans implemented at the time of matriculation. The program will continue to be active until all enrolled students graduate.

Master of Health Administration (MHA)

The MHA Program is located in the Department of Health Management and Policy in the School of Public Health. The 60 SCH degree program is designed for aspiring and committed early career professionals who are interested in careers in health services administration in such settings as hospitals; managed care organizations; medical group practices; ambulatory, long-term care, insurance and pharmaceutical companies; consulting firms; government agencies; and for-profit and nonprofit sector organizations. Through an internship and a final integrative experience, students are asked to incorporate, synthesize, and apply their knowledge within both an operational and a community context. The result is an organizational perspective that encourages students to integrate knowledge from a range of management and leadership disciplines while emphasizing accountability for effective performance. The MHA student handbook is provided in **Appendix 4.4.a.1** in the **Electronic Resource File**.

Master of Public Health Degree (MPH)

The UNTHSC-SPH offers the MPH degree program, in which students acquire a sound educational background for competent practice in the field of public health. This professional degree program provides opportunities for students to obtain broad knowledge and basic skills in the core areas of public health. Students who have earned a professional degree, e.g., MD, DO, JD, or another master's degree or who have at least three years of experience may earn the generalist MPH-Professional Option (MPH-PO). Students who elect to enter an MPH with a concentration acquire proficiency in one or more specialized areas through advanced coursework, and gain experience in applying advanced knowledge in community settings through the public health practice experience.

All MPH students are required to complete all five core courses in the essential disciplines of public health: biostatistics (BIOS 5300), epidemiology (EPID 5300), behavioral and community health (BACH 5300), environmental and occupational health sciences (EOHS 5300), and health management and policy (HMAP 5300). Students are able to earn the MPH degree through one of six concentration areas: 1) biostatistics, 2) epidemiology, 3) behavioral and community health, 4) environmental and occupational health, 5) health management and policy, and 6) maternal and child health. A school-wide generalist MPH, the MPH-Professional Option (MPH-PO) admitted its first students in fall 2011. Over the last few years, all of the courses required for this 42 SCH degree program have been made into online course offerings, allowing students to take either face-to-face or online courses, or a combination to complete their degree. Students in the MPH-PO and all six concentrations are required to pass the Certified in Public Health Examination (CPH) offered through the National Board of Public Health Examiners (NBPHE). They may sit for the examination according to the requirements of the NBPHE. Program Profiles for each degree encourage that students sit for the examination approximately mid-way through their degree program and after they have taken all five core courses. All MPH students must pass the CPH to be awarded their MPH degree. MPH students may sit for the CPH examination multiple times until they pass; however, if they fail to pass after the time limit for the degree (six years), they are dismissed from the MPH degree program.

Students in the MPH-PO and in all of the six concentrations are required to complete a practice experience that requires a project and poster presentation. The culminating experience for the six concentrations is a comprehensive examination or thesis, while the MPH-PO students take a capstone course. The MPH student handbook is provided in **Appendix 4.4.a.1**.

Joint Concentration Offerings

The School has established two joint degree concentrations in the MPH in biostatistics and epidemiology, and epidemiology and environmental and occupational health sciences. Students take the required courses and comprehensive examinations in each concentration, select electives from an approved list of courses, and select a practice experience with a focus in one of the concentration areas.

Dual Degree Offerings

The UNTHSC-MPH has established three dual degree programs: 1) MPH/MS-Anthropology, a collaboration with the Department of Anthropology on the main campus of the University of North Texas (UNT) in Denton, Texas, 2) MPH/DO, a collaboration with the Texas College of Osteopathic Medicine (TCOM) on the same UNTHSC campus where the SPH resides, and 3) MPH/MSN, a collaboration with the School of Nursing at the University of Texas Arlington (UTA) on the main campus of UTA in Arlington, Texas. The latter program has been discontinued and therefore the SPH did not admit any students in the 2014-2015 academic year. No changes will be made to the existing curriculum and students that are currently enrolled in the MPH/MSN will continue to be advised and move toward degree completion under the same curriculum plans implemented at the time of matriculation. The program will continue to be active until all current students have graduated.

Doctor of Public Health Degree (DrPH)

The UNTHSC-SPH offered the Doctor in Public Health (DrPH) with four concentrations until the fall of 2009. DrPH students were allowed to complete their degrees within their chosen concentration (Biostatistics, Epidemiology, Social and Behavioral Sciences, or Health Management and Policy) or they could apply for a transfer into the new generalist DrPH established in the fall of 2009. The DrPH – Concentration degree programs required completion of 65 SCH, including a comprehensive examination and a dissertation. The DrPH student handbook is provided in **Appendix 4.4.a.1**.

The new DrPH was designed to be an advanced, professional degree that focused on developing public health leaders who would advance the field of public health through the integration and application of the seven domains identified by the ASPPH Core Competency Model: 1) Advocacy, 2) Communication, 3) Community and Cultural Orientation, 4) Critical Analysis, 5) Leadership, 6) Management, and 7) Professionalism and Ethics.

This generalist DrPH program is designed for students who have earned a Master's degree, preferably an MPH. Well-qualified applicants who are "early career" with limited work experience are considered for admission, alongside "mid-career" professionals who have approximately four-five years of experience in public health or a related field. Students admitted to the DrPH without an MPH degree are required to complete the five core MPH courses through the UNTHSC-SPH or may transfer in equivalent courses, up to 12 SCH. DrPH students are required to complete 60 SCH, which includes passing the Certified in Public Health Examination, if they have not already done so during or after their master's studies, and an Integrated Competency Evaluation (ICE) which is a comprehensive examination focusing on a self-assessment of one's competency strengths and weaknesses, that occurs over a two to three semester period at the end of their degree program. The DrPH students in doctoral residency apply knowledge and skills in developed competencies while completing public health practice work experience that further develops competencies that have not yet been mastered. Students defend their residency before the DrPH Program Committee, SPH Faculty, and invited public.

Doctor of Philosophy Degree (PhD)

The PhD program in **Public Health Sciences** prepares professionals for research, teaching, and service with the overall objective of improving the health of populations. To meet this objective, all students in the program pursue excellence in conducting research and disseminating knowledge. The primary focus is on research that advances knowledge and facilitates discovery regarding etiology, interventions, and policies that promote health at the individual, population, societal, and/or global levels. The PhD student handbook is provided in **Appendix 4.4.a.1**.

At the same time that the DrPH-Concentration degree programs were being phased out, the UNTHSC-SPH developed the PhD in Public Health Sciences to be offered within five concentrations: 1) Biostatistics, 2) Epidemiology, 3) Behavioral and Community Health, 4) Environmental Health Sciences, and 5) Health Services and Policy. The PhD degree program was approved by the Texas Higher Education Coordinating Board (THECB) in April 2011 and the first students were admitted in fall 2011. Students who were still active in the DrPH-Concentration degree programs were given the opportunity to apply to the PhD degree program or remain in their DrPH-Concentration degree program. If admitted to the PhD, they were able to apply up to 42 SCH for advanced standing.

The PhD degree requires 90 SCH post baccalaureate degree. Entering students work with their Academic Advisor to identify graduate level coursework that can be applied to the PhD core courses and/or the concentration required courses, and/or electives, for approval by the PhD Program Committee. No more than 42 SCH can be included as transfer credits and advanced standing credits.

The PhD core courses consist of 33 SCH, which include 15 SCH of the master's level core courses and an additional 18 SCH of advanced courses in biostatistics, methods, ethics, scientific and grant writing, and pedagogy. The concentrations have varied numbers of student credit hours for concentration core courses and elective courses, for a total of 45 SCH. The dissertation across all concentrations is 12 SCH. **Table 2.1.a.2** outlines the SCH required for each concentration.

Table 2.1.a.2: SCH Required for Each Concentration

PhD Public Health Sciences	Behavioral & Community Health	Biostatistics	Environmental Health Sciences	Epidemiology	Health Services & Policy
Core 5000-level ¹	15	15	15	15	15
Core 6000-level ²	18	18	18	18	18
Concentration Core ³	24	33	21	39	27
Concentration Electives ³	21	12	24	6	18
Comprehensive Exam	0	0	0	0	0
Dissertation	12	12	12	12	12
Total	90	90	90	90	90

¹Core 5000 are the MPH core courses required for PhD students without an MPH.

²Core 6000 are the doctoral core courses required for all PhD students regardless of concentration.

³Concentration Core and Electives when combined equal 45 semester credit hours in each concentration.

PhD in Public Health Sciences – Concentration: Behavioral and Community Health

The concentration in behavioral and community health provides a rigorous scientific approach to the study of the psychological, social, and cultural factors that impact human health and health behavior. Doctoral graduates are expected to have an understanding of these factors at multiple social-ecological levels, including: individual, interpersonal, organizational, community, and population. In addition, the concentration prepares them to perform basic and applied research, to teach, and to serve communities with the goals of promoting healthy lifestyles, reducing risk behaviors, and eliminating health disparities related to race, ethnicity, socioeconomic status, or gender.

PhD in Public Health Sciences – Concentration: Biostatistics

The concentration in biostatistics focuses on the reasoning and methods for using data as evidence to address public health and biomedical questions. It is an approach and a set of tools for designing studies, analyzing data, quantifying evidence, and making decisions. The doctoral curriculum prepares the student for three roles (researcher, collaborator/communicator, and educator) that are commonly expected of a biostatistician.

PhD in Public Health Sciences – Concentration: Environmental Health Sciences

The concentration in environmental health sciences prepares doctoral students to research, teach and apply knowledge on the interrelationships between the environment and human health and their regional, national and global significance. Doctoral graduates are expected to be well equipped to apply their research skills and knowledge to recognize, evaluate and prevent exposures that may adversely impact human health and environmental quality, whether in the natural or in the human-made environment.

PhD in Public Health Sciences – Concentration: Epidemiology

The concentration in epidemiology prepares doctoral students who are contemplating a career as scientists employed in academia, research institutions, or in research units within industry or other agencies and organizations. The program is comprehensive, with a strong emphasis on epidemiologic methodology, theory, and practice. The broad and rigorous training fully equips the graduate with the skills necessary for conducting cutting-edge epidemiologic research within the many areas of public health.

PhD in Public Health Sciences – Concentration: Health Services and Policy

The concentration of health services and policy prepares doctoral students for careers in research, teaching, and service in the broad field of health care services and policy. The program's aim is to strengthen students' knowledge and skills with respect to theories, research methodologies, and analytical skills. Graduates are expected to have developed competencies that address a variety of issues, including health care access, cost-effectiveness, and process quality and outcomes evaluation.

2.1.b. The school bulletin or other official publication, which describes all degree programs identified in the instructional matrix, including a list of required courses and their course descriptions. The school bulletin or other official publication may be online, with appropriate links noted.

Information about the SPH's academic programs including a list of all required courses is provided on the SPH website at. Detailed course descriptions are provided through the electronic UNTHSC Catalog. The website links are provided below:

SPH Programs: http://web.unthsc.edu/info/20005/school_of_public_health/714/future_students

UNTHSC Catalog: <http://catalog.unthsc.edu/>

A schedule of courses and instructors for the last three years is provided in the **Electronic Resource File - Appendix 2.1.b.1**. All course syllabi organized by degree program, and course evaluations done through the IDEA System are also provided in the same appendix.

2.1.c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The UNTHSC-SPH offers multiple degree programs that afford students a wide choice of disciplines on which to focus their professional and academic public health degrees. The students are challenged to succeed academically in a culture of graduate education on a health science center campus whose programs foster academic rigor and professional accomplishment. Given the number and quality of the public health degree programs offered, the UNTHSC-SPH exceeds the requirements set forth by CEPH for accreditation.

Weaknesses:

The School will be refining the DrPH program with regard to the recommendations of the ASPPH Framing the Future DrPH Committee.

Plans:

The UNTHSC-SPH has a strong strategic planning process that will guide the improvement of degree programs. The ASPPH Framing the Future for the DrPH will assist in the refinement of this practice-oriented degree. In addition, an MPH/DrPH Advisory Council being formed to provide guidance and counsel to the SPH's program committees dedicated to these degree programs.

Several undergraduate universities have approached the UNTHSC-SPH about possible combination undergraduate/graduate 3-2 programs that will allow undergraduate students to enter into the master's program in their senior year. Dialogue is ongoing with the College of Education at the University of North Texas-Denton; the Medical Laboratory Sciences program at Tarleton State University, Fort Worth Campus; and in public health at the University of North Texas-Dallas.

Joint concentrations in biostatistics and epidemiology and environmental and occupational health sciences have been developed and are being implemented during the 2014-2015 academic year.

2.2 PROGRAM LENGTH

An MPH degree program or equivalent professional public health master's degree must be at least 42 semester-credit units in length.

2.2.a. Definition of a credit with regard to classroom/contact hours.

The Texas Higher Education Coordinating Board (THECB) determines the regulations for what constitutes a semester credit hour (SCH). Traditionally-delivered three semester credit hour courses should contain 15 weeks of instruction (45 contact hours) plus a week for final examinations so that such a course contains 45 to 48 contact hours depending on whether there is a final exam. (See Texas Administrative Code, Title 19, Part I, Chapter 4, Subchapter A, Rule 4.6. [http://info.sos.state.tx.us/pls/pub/readtac\\$ext.TacPage?sl=R&app=2&p_dir=&p_rloc=102433&p_tl oc=&p_ploc=&pg=1&p_tac=102433&ti=19&pt=1&ch=4&rl=6&dt=&z_chk=1730471&z_contains=Sem ester%20Credit%20Hour%20](http://info.sos.state.tx.us/pls/pub/readtac$ext.TacPage?sl=R&app=2&p_dir=&p_rloc=102433&p_tl oc=&p_ploc=&pg=1&p_tac=102433&ti=19&pt=1&ch=4&rl=6&dt=&z_chk=1730471&z_contains=Sem ester%20Credit%20Hour%20)

Relative to that regulation, the UNTHSC 2014-2015 Catalog states that normally, lectures will meet one hour per week for each semester credit hour (SCH). For the exceptions, the Schedule of Classes will explain meeting times. The SCH formula is 15 contact hours (including examinations) equals 1 SCH for didactic courses. Laboratory based courses require 30 contact/clock hours for 1 SCH.

2.2.b. Information about the minimum degree requirements for all professional public health master's degree curricula shown in the instructional matrix. If the school or university uses a unit of academic credit or an academic term different from the standard semester or quarter, this difference should be explained and an equivalency presented in a table or narrative

All of the MPH degree concentrations offered at the UNTHSC-SPH require at least 42 semester credit hours (units) (SCH). The MPH-PO requires 42 SCH and all single-concentration MPH degree programs require at least 48 SCH. The MPH degree programs with joint concentrations require 54-57 SCH. In the dual degree programs, student complete between 42 and 48 SCH for the MPH degree.

2.2.c. Information about the number of professional public health master's degrees awarded for fewer than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.

No MPH degrees are awarded with less than 42 SCH.

2.2.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

All MPH degree programs offered at the UNTHSC-SPH require a minimum of 42 semester credits for graduation.

Weaknesses:

None

Plans:

The UNTHSC-SPH reviews all of our degree programs on an annual basis. Our strategic planning process ensures that we set new goals for achieving excellence in our academic offerings. There are no plans to change required SCH for any degree program or concentration.

2.3 PUBLIC HEALTH CORE KNOWLEDGE

All graduate professional degree public health students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

2.3.a. Identification of the means by which the school assures that all graduate professional degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each program. See CEPH Data Template 2.3.1.

All the graduate professional degree programs (MPH and DrPH) require that students take at least one course that covers fundamental principles and concepts in each of the five core areas of public health. These core courses are listed in **Table 2.3.a.1** (syllabi are included in **Appendix 2.1.b.1**). All MPH students are required to take these courses as part of the curriculum, and DrPH students who do not have an MPH are required to take them as a pre-requisite. The learning objectives for these required courses contribute to the MPH core competencies (see Criterion 2.6) and provide students with a strong foundation of public health core knowledge.

In circumstances where students request a transfer of MPH core coursework, the appropriate department representative, usually the department chair or program director, assesses all syllabi for content equivalency. Courses completed in CEPH accredited programs and schools of public health are considered comparable to the core courses taught in the SPH. More detailed reviews are performed in cases where the coursework taken is in programs and schools not accredited by CEPH.

To ensure successful achievement of the competencies and learning outcomes associated with the core courses, upon completion of the core courses, all MPH students and students that do not have an MPH are required to enroll in PHED 5000 – CPH Comprehensive Examination. In this course students take the Certified in Public Health Examination (CPH) that covers the five core areas of knowledge and eight cross cutting areas. The CPH Exam is a required milestone for all MPH students.

Table 2.3.a.1: Core Public Health Knowledge for MPH and DrPH Degrees (CEPH Data Template 2.3.1)

Core Area of Knowledge	Course Number and Title ¹	Credits
Social & Behavioral Sciences	BACH 5300 Theoretical Foundations of Individual & Community Health	3
Biostatistics	BIOS 5300 Principles of Biostatistics or BIOS 5301 Foundations of Biostatistics (for Biostatistics concentration students)	3
Epidemiology	EPID 5300 Principles of Epidemiology	3
Environmental Health Sciences	EOHS 5300 Environmental Determinants of Health I	3
Health Services Administration	HMAP 5300 Introduction to Health Management & Policy	3

¹Syllabi are included in Appendix 2.1.b.1

2.3.b. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

All students in the MPH and the DrPH Programs are required to take a foundational course in each of the five core areas. The required courses were designed to provide the content and learning experiences needed to achieve the public health core competencies, which are discussed in detail in Criterion 2.6. Upon completion of the core courses, students are required to enroll in PHED 5000 and successfully pass the Certified in Public Health Examination.

Weaknesses:

Results from the CPH Examination suggest that the content in core courses should be reviewed relative to the content anticipated by the field as reflected in the examination. Although the CPH examination is only one measure of appropriate core content, it does provide a national standard against which to review our courses.

Plans:

We plan on continuing to require the 5 MPH core courses and the CPH Examination for the MPH Program and for DrPH students. In addition, after completion of the CEPH self-study and review process, the School will evaluate the results of the ASPPH Framing the Future MPH report as one means of assessment of the core content as the field evolves.

2.4 PRACTICAL SKILLS

All graduate professional public health degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students' areas of specialization.

2.4.a. Description of the school's policies and procedures regarding practice experiences, including the following:

- selection of sites
 - methods for approving preceptors
 - opportunities for orientation and support for preceptors
 - approaches for faculty supervision of students
 - means of evaluating student performance
 - means of evaluating practice placement sites and preceptor qualifications
 - criteria for waiving, altering or reducing the experience, if applicable
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The DrPH and MPH both require a practice experience. The policies and procedures regarding the practice experience in these two programs are outlined below.

MPH Program

MPH students enroll in PHED 5297 - MPH Practice Experience, after completion of 21 semester credits. These credits include the MPH core courses and PHED 5197 - MPH Professional and Academic Development (PAD). The Practice Experience is completed in a variety of settings that provide the opportunity for students to observe, engage, and be mentored in the application of public health knowledge as it relates to their areas of concentration. The practice experience requires a minimum of 200 contact hours and culminates in a final project that consists of an oral and a poster presentation at the end of the semester.

The internship process for each student involves (1) The Coordinator of Academic Services (oversees all administrative requirements), (2) the Practice Experience Liaison (oversees site identification), (3) the Academic Advisor (concentration specific faculty advisor) and (4) the Assistant Director for Student and Academic Services who also serves as the instructor for PHED 5297 (oversees student conduct and performance while on-site). Descriptions of each role are provided in **Appendix 2.4.a.1** in the **Electronic Resource File**.

Selection of Sites

Selection of practice sites is a joint process that involves the student, the Practice Experience Liaison and the Academic Advisor. The primary criterion for selecting the site is that each site must be able to place the student with a project that aligns with the overall MPH competencies as well as with the competencies of the individual concentration. This is enforced through the project agreement. The practice experience liaison will meet with each potential site and provide the site with a site supervisor packet that includes information about the School of Public Health and each concentration, as well as the roles and responsibilities of the student, academic advisor, site supervisor, coordinator, liaison, and instructor of the course, as well as the timeline and expectations of the site supervisor. At that time, the liaison will review the list of projects that the site has available to determine if a project meets the MPH competencies as well as the departmental competencies.

Approval of MPH Site Supervisors

Site supervisors are approved through a formal process that requires the site supervisor to submit the site supervisor identification form, which requests information regarding their educational background and years of experience in the field of public health. Site supervisors for the Public Health Practice Experience are required to have an advanced degree in public health or a related field, and/or a minimum of 5-years related experience in the department where the intern will be placed. Agencies and site supervisors that have worked with the MPH students in the past three academic years are provided in **Appendix 2.4.a.2** in the **Electronic Resource File**. Site supervisor qualifications, including job titles and credentials, are also included.

Orientation and Support for MPH Site Supervisors

All site supervisors receive a site supervisor packet when they are approved to participate in the practice experience. This packet includes the roles and responsibilities of the student, academic advisor, site supervisor, coordinator, liaison, and instructor of the course. Site supervisors also receive a timeline and a list of expectations for the student, academic advisor, and site supervisor. In addition, the Assistant Director contacts the site at the beginning of the semester, twice during the semester, and at the conclusion of the semester to monitor the student and solicit feedback from the site supervisor.

Faculty Supervision of Students

Once a student is eligible for the practice experience, they initiate the process by contacting the Coordinator for Academic Services. The Coordinator for Academic Services is responsible for meeting with the student and verifying eligibility, discussing the type of practice experience desired, reviewing the resume/CV and the cover letter, and going over the professional conduct requirements. The Coordinator for Academic Services then refers the student to the Practice Experience Liaison, who assists in identifying potential sites. The student is then responsible for initiating contact and setting up interviews.

Once the student has secured a potential site, their Academic Advisor does a final review to ensure that:

1. The site supervisor/preceptor has the appropriate skills to guide the practice experience.
2. The site appropriately matches the student's area of specialization.
3. The proposed practice experience and related project will engage and reinforce the required competencies.

When approved, the Academic Advisor works closely with the student to develop the Project Agreement and any related IRB approvals. The administrative oversight in this process is provided by the Coordinator who is responsible for maintaining all signed agreements, providing the student with the permission number required for enrollment in the MPH Practice Experience (PHED 5297), and overseeing any further documentation required by the site.

During the practice experience, students are expected to maintain regular contact with their Academic Advisors, while providing periodic updates on their progress. To ensure that communication is maintained, the student is required to check-in at the beginning, at mid-point, and prior to completion of the practice experience. The Academic Advisor is responsible for approving the final project and related poster presentation and through regular consultations to ensure that all competencies and goals are being addressed.

At the beginning of each semester, all academic advisors are required to attend a mandatory orientation to the practice experience. During this session, the expectations of the academic advisor, site supervisor, and student are communicated to each advisor. Each advisor receives a packet of information at that time to include a timeline, a breakdown of responsibilities, and a document that delineates each person's role.

Evaluation of Student Performance

Once the student is on-site, the Assistant Director for Student and Academic Services works closely with the site supervisor to assess the student's progress, conduct, and overall professionalism. The Assistant Director also works closely with the student to ensure they are satisfied with the placement and the overall experience. The Academic Advisor is included on all communication, ensuring transparency and providing oversight in the event that problems arise. As explained earlier, before a student can begin the practice experience, a project agreement that identifies the competencies to be addressed must be completed and signed. The Faculty Advisor works closely with the student to ensure that the proposed project aligns with specific MPH core and concentration competencies. Once the project agreement is approved, the student is then able to begin working on site.

Throughout the practice experience that site-supervisor assesses student performance against the competencies. Towards the end of the experience, after approval from the Academic Advisor and the site-supervisor, the student prepares an oral presentation and a poster outlining their final project. The student then presents their work at the practice experience poster session that occurs at the end of each semester. The Assistant Director, Academic Advisor, and site supervisor all review the poster and provide individual assessments. This feedback, along with the site supervisor's evaluation of the student's performance, professional behavior, contribution to the agency, and competency mastery, is used to assign a final grade for the MPH Practice Experience (PHED 5297). Sample student posters and all evaluation forms are provided in **Appendix 2.4.a.1**.

To improve the practice experience, each semester focus groups are conducted to gather feedback from students. This information, along with the feedback provided by the site supervisor, is reviewed by the Practice Committee, where suggestions for improvement are addressed and implemented. An example of one such improvement is that in AY 2014-2015 students will now be completing an oral presentation, in addition to the poster session presentation.

Evaluation of Practice Sites and Site Supervisor Qualifications

Each student provides an evaluation of the internship site and preceptor at the completion of the internship. This information, as well as feedback from the Faculty Advisory and Assistant Director, are used by the program to determine whether to continue to use the site.

Waiving, Altering or Reducing the Experience

All MPH students are required to successfully complete the MPH Practice Experience prior to graduating from the program. UNTHSC-SPH does not accept or permit waivers, alterations, or reductions to the practice experience.

DrPH Program

The DrPH Residency is intended to assist students with developing evidence-based leadership skills by interaction and collaboration with senior public health practitioners through a "hands on" application experience in a health service organization. The purpose of this residency is to provide the student with a practice-based leadership experience in which the student can apply the DrPH Core Competencies learned in the classroom and from previous work experiences. In addition, the

residency will provide the student with an opportunity to appreciate the complexity of public health organizations and the individuals who comprise them, and will also provide insight for further development of skills and knowledge needed throughout their public health careers.

Selection of Sites

The selection of the Residency site and the Major Project are developed in a collaborative process involving the student, site supervisor, faculty mentor, and DrPH Program Director (Academic Advisor). The student's Faculty Mentor and DrPH Program Director may recommend a student to a particular site based on their academic performance and prior work experience, as well as the competencies that need to be developed. Once the student and site supervisor have completed the Residency Learning Contract and have agreed upon a Major Project, the DrPH Program Director obtains final approval of the Residency from the DrPH Committee.

Approval of DrPH Site Supervisors

Potential site supervisors are interviewed by the DrPH Program Director. The purpose of this interview is to assess the potential site supervisor's knowledge of the DrPH degree competencies and their commitment to helping prepare DrPH-level practitioners. The findings from these interviews and the candidate's qualifications are shared with the DrPH Committee. The Committee approves the appointment of site supervisors. A preferred qualification includes the DrPH degree. In cases in which the potential site supervisor does not hold the DrPH degree, the DrPH Committee considers the academic training, years of experience in the field, and expertise of the candidate. Agencies and site supervisors that have worked with the DrPH students are provided in **Appendix 2.4.a.2**. Site supervisor qualifications, including job titles and credentials, are also included.

Orientation and Support for DrPH Site Supervisors

The DrPH Program Director has primary responsibility for the orientation of the DrPH site supervisors. Orientation takes place after DrPH Committee approval and prior to the start of the DrPH student's Residency. The orientation includes an onsite visit with the site supervisor and follow-up communication as needed. The Faculty Mentor has primary responsibility for the support of site supervisors during a student's Residency. This support includes at least two onsite visits with the site supervisor and their student mentee.

Faculty Supervision of Students

Faculty Mentors communicate closely with site supervisors, and are responsible for reporting to the DrPH Program Director on the student's progress in the Residency. Faculty Mentors are responsible for conducting mid-residency and end-of-residency reviews of the DrPH student.

Faculty Mentors expect site supervisors to assume the role of a professional mentor, by actively supervising his/her residency student and sharing valuable leadership and management tools that were used over the years and have helped to shape his/her career path. Faculty Mentors also expect the site supervisor to include their DrPH mentee in the operational activities of the organization's leadership team. Thus, while the responsibility of mentoring the DrPH student is a shared responsibility of the Faculty Mentor and the site supervisor, other organizational leaders and staff members invariably mentor the DrPH student as well.

Evaluation of Student Performance

Pre-Residency: In Professional Development II (PHED 6124), the student identifies residency preferences based on an assessment of their competencies and professional interests. This process is evaluated by the course instructor and the DrPH Program Director. The student is then responsible for collecting information on potential residency sites. After a Residency Site has been

approved by the DrPH Program Director in consultation with the site supervisor and Faculty Mentor, the student is responsible for developing a Learning Contract. A final Learning Contract must be approved by the DrPH Program Director, site supervisor, and Faculty Mentor, preferably prior to the start of the Residency, but no later than the third week of the Residency. In addition, the student is responsible for completing a Major Project Outline and securing IRB approval.

During Residency: The DrPH Residency (PHED 6397) consists of a minimum of 720 contact hours, to be completed in a minimum of 18 and a maximum of 36 calendar weeks, depending on the number of hours per week that the student dedicates to their Residency. In many Residencies, the number of hours will exceed 720. When to begin and conclude their residency and how many hours per week the student will complete has to be outlined in the Residency Learning Contract, which is an agreement between the student, site supervisor, the Faculty Mentor, and the DrPH Program Director.

Although each experience will have its own unique characteristics, all DrPH Residencies must have five major components that are designed to achieve the program's objectives and develop the DrPH competencies:

1. The opportunity for the student to work under the direction of a senior-level executive who serves as the student's site supervisor;
2. An orientation to the mission, vision, goals and objectives of the organization, including a period of time devoted to an organizational rotation;
3. A position within the organization with leadership and management responsibilities, which should include planning and directing meetings, as well as writing documents and providing oral presentations of the tasks accomplished;
4. The assignment of a Major Project that meets both the student's training needs and the needs of the organization, which, at the end of the Residency, is presented at their Residency Defense.
5. Sufficient exposure to the internal and external environment of the organization.

An important Residency assignment is the Major Project, which must be a substantive contribution to public health practice and to the Residency site and for which the student must be fully responsible. In addition, the student must demonstrate competency development. In collaboration with the site supervisor and the Faculty Mentor, the student develops a Major Project concept and outline prior to the beginning of the Residency. The scope of the project is defined and developed by the site supervisor. The student is responsible for developing a proposal that includes a work plan, and this proposal is presented and approved by the Faculty Mentor and DrPH Program Director early in the Residency. In addition, the Major Project protocol is reviewed by the UNTHSC Institutional Review Board (IRB) for approval. The completed Major Project will be presented at the Residency site and at their Residency Defense before the DrPH Committee.

The student has to defend the DrPH Residency to the DrPH Program Committee and address, at a minimum, the following:

- Description of the Residency site;
- Residency activities;
- Significant contributions;
- Value of Residency experience;
- Competencies mastered and enhanced, and
- Major Project overview.

Throughout the Residency, the student is responsible for maintaining a Student Work Log, which is reviewed every two weeks by their site supervisor and their Faculty Mentor. At the end of the Residency, the student is responsible for completing the Major Project Report which is reviewed by the site supervisor and Faculty Mentor.

Post-Residency: After the Residency is completed, the site supervisor evaluates the DrPH student. This evaluation is submitted to the DrPH Program Director. The student is responsible for submitting the Reflection and Self-Evaluation to the DrPH Program Director. In preparation for the Residency Defense before the DrPH Committee, the student prepares a Residency Binder that contains all materials developed during the course of the residency. In advance of the Residency Defense, the contents of the binder are reviewed by members of the DrPH Committee. The student's final grade in the DrPH Residency is based on the DrPH Committee's overall evaluation of the Learning Contract, Work Log, Major Project Report, Site Supervisor Evaluation, student Reflection and Self-Evaluation, Residency Defense performance, and Residency Binder quality. All required forms for the DrPH Residency are provided in **Appendix 2.4.a.1**. Samples of hard-copy student residency binders will be available for review during the site visit.

Evaluation of DrPH Residency Sites and Site Supervisor Qualifications

After completion of the Residency, the student is responsible for completing the Evaluation of Residency Site form. The form is not shared with the site supervisor. In addition, the DrPH Program Director receives a confidential report from the Faculty Mentor about the performance of the site supervisor.

Waiving, Altering or Reducing the Experience

All DrPH students are required to successfully complete the Residency prior to graduating from the Program. UNTHSC-SPH does not accept or permit waivers, alterations or reductions to the Residency experience.

2.4.b. Identification of agencies and preceptors used for practice experiences for students, by program area, for the last two academic years.

Over the past two academic years (2012-13 and 2013-14), MPH students have obtained their practice experience in 187 different agencies. These agencies include ones in local, state, national and international settings. This practice experience also includes work with such entities as governmental and non-governmental agencies, non-profit organizations, health care organizations, and industry. Agencies and site supervisors that have worked with the MPH and DrPH students in the past three academic years are provided in **Appendix 2.4.a.2**.

2.4.c. Data on the number of students receiving a waiver of the practice experience for each of the last three years.

The MPH and DrPH Programs do not permit waivers of the practice experience requirement.

2.4.d. Data on the number of preventive medicine, occupational medicine, aerospace medicine and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.

Not applicable

2.4.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

The criterion is met.

Strengths:

Students in the two professional programs (MPH and DrPH) are required to demonstrate their public health competency through a formal practice/residency experience. Both programs further require that students fulfill Professional and Academic Development (PAD) requirements prior to the experience. The PAD, a co-curricular requirement in all programs in the UNTHSC-SPH, is designed to enhance student academic and professional development through activities that focus on building public health knowledge and competency development.

MPH

Identified strengths of the MPH Practice Experience include the centralization for all practice experience information in the Office of Admission and Academic Services. This fosters cohesion in communication between students, faculty, staff, and site supervisors. The Practice Experience is a clearly defined process that involves three key support roles (the Coordinator of Academic Services, the Practice Experience Liaison, and the Assistant Director for Student and Academic Services), that all handle the administrative and programmatic functions of the practice experience. This support enables the Academic Advisor to spend time mentoring the student, ensuring related competencies are being strengthened, and providing consultative support on the development of the final project and poster presentation.

DrPH

Two major strengths identified in the DrPH program are that students obtain a significant amount of professional experience in their Residencies and that considerable attention has been given to the development of a form to document important requirements and milestones in the Residency experience. The Residency includes opportunities for students to work on developing the DrPH competencies in a real-world setting.

Weaknesses:**MPH**

The site supervisor, academic advisor, and Assistant Director all use the same assessment form to evaluate the student. Consideration needs to be given to the development of a separate assessment form that allows the preceptor to evaluate the student on all levels of performance, including competency mastery.

DrPH

It is sometimes difficult to identify senior site supervisors who have the time to adequately supervise DrPH students and to integrate these students into clear leadership roles. A formal process for identifying the capacity of Residency Sites to provide leadership training should be developed.

Plans:

Future plans include the cultivation and development of residency and practice experience sites in the DFW Metroplex, the engagement of site supervisors in an appreciation lunch, process improvement to begin engaging residency and practice sites much earlier in the process, and, beginning academic year 2014-2015, each site will be visited at least once or will receive a follow-up conference call (if out of state).

2.5 CULMINATING EXPERIENCE

All graduate professional degree programs, both professional public health and other professional degree programs, identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

2.5.a. Identification of the culminating experience required for each professional public health and other professional degree program. If this is common across the school's professional degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.

MPH

The culminating experience for MPH students in all concentrations; biostatistics, community health, environmental and occupational health sciences, epidemiology, health management and policy, maternal and child health, and the professional option, occurs in two parts. (1) The first part of the culminating experience is the Certified in Public Health Examination (CPH). All MPH students are required to take the CPH examination and pass. The SPH considers the CPH examination an adequate assessment of the core knowledge and competencies that students in public health are expected to have. Upon completion of the five cores courses, students register for CPH examination and must pass it as a requirement for successful academic progress. The SPH uses the CPH as a direct assessment of competency mastery in the core area of public health and the related core competencies. (2) The second part of the culminating experience is the concentration-specific comprehensive examination for all concentrations except the MPH professional option which has a capstone course requirement. The capstone and each comprehensive examination address the competencies and learning outcomes specific to each concentration. Departments are provided with the flexibility to develop comprehensive exams in any chosen format, however, all questions must map back to identified concentration competencies. In certain circumstances students opt to take the thesis option in lieu of the comprehensive examination. In these cases, faculty advisors work closely with students to identify competencies and learning outcomes to be addressed. The MPH comprehensive examination in each concentration is outlined below. Sample comprehensive examinations are provided in **Appendix 2.5.a.1** located in the **Electronic Resource File**.

MPH Concentration Comprehensive Examinations

The Departments administer the concentration comprehensive examinations every fall and spring semester. Students are allowed three attempts to pass the departmental comprehensive examination. All students must register for the concentration comprehensive examination under the appropriate zero credit hour course number, i.e., BACH 5001, BIOS 5001, EOHS 5001, EPID 5001, HMAP 5001, or MACH 5001. The purpose of the comprehensive examination is to test the student's broad knowledge and concentration competencies, and the application and integration of the knowledge and competencies to solve problems in different areas of public health. All questions directly relate back to concentration competencies and are a direct assessment of competency achievement.

Biostatistics: Three-hour exam, free-response with some multiple choice and true-false questions. Students are allowed to use a calculator and bring two pages of written or typed notes. The Comprehensive Exam Coordinator completes initial review, i.e., "marks" the exam answers. The exam is then circulated to all faculty members for feedback and verification of marks. All questions

are mapped to the MPH biostatistics concentration competencies. Sample examination questions from each concentration with answer keys showing competency mapping are included in **Appendix 2.5.a.1.**

Community Health: Three-hour-140-item multiple choice examination completed in a proctored classroom. Students are not allowed to use any materials during the examination or ask questions of faculty proctor. The examination items were created by a BACH faculty committee specifically for the purpose of creating a psychometrically sound instrument. The items were designed to assess higher order thinking in seven related areas: health behavior theory, data management and statistical computing, participatory approaches to improving community health, community assessment and program planning, quantitative research methods, qualitative research methods, and community health program evaluation.

Environmental and Occupational Health Sciences: Three-hour examination completed in a proctored classroom. Two faculty members grade the exam. The grading faculty members follow a system in which 3 scores are used in each question. Depending on how the student's response meets the expectations, a score is assigned to the question: 2 for a satisfactory response, 1 for a good response, and 0 for a response that needs much improvement. There are a total of 11 questions. The maximum score a student can receive is 22. The cut-off score is 13, which means that if a student has 13 and higher, the student will pass the exam. Sample examination questions and answer keys showing competency mapping are included in

Epidemiology: Three-hour exam, mostly multiple choice with free-response and short answer questions, and problems that examine students' qualitative and quantitative knowledge of epidemiology methods and information. This is a closed book, proctored exam wherein the student can bring only a calculator. The exam is usually given on a Friday morning. Currently, the MPH exam is 82 questions in length. The faculty generates and circulates an MPH Comprehensive Examination grading rubric. The Comprehensive Examination Coordinator marks the examination accordingly and disseminates the results.

Health Management and Policy: Four-hour exam, short answer and essay questions, administered with faculty proctors present. If a consensus is not reached among faculty graders or if remediation is deemed appropriate, the same committee may choose to provide an opportunity for part or all of the exams to be retaken as an oral exam. The exam assesses student ability to apply knowledge to health management and policy concepts formulated around the concentration competencies.

Maternal and Child Health: Essay exam completed over the course of 72 hours. The exam will be administered to students by e-mail on Friday morning at 9AM and will be due the following Monday morning at 9AM. Students are allowed to use their texts and/or lecture notes and materials. The exam is designed to assess the student's competency mastery through higher order thinking by applying their knowledge of social and behavioral science theory, community health, research methods and/or knowledge of policy and advocacy to address a designated maternal child health problem. The exam will be graded by two faculty members using an MPH Comprehensive Examination rubric. Faculty graders will reach a consensus as to whether the student has passed or failed the exam.

MPH Thesis Option:

Students who complete the thesis option must obtain approval from the academic advisor, MPH Director, and the Department Chair. It is recommended that the thesis be completed over a period of 2 semesters. The thesis option is only recommended to those students who are pursuing a career in research.

MPH Professional Option Capstone:

MPH Professional Option students are required to complete a capstone course (PHED 5302) which is designed to allow students the opportunity to apply principles, methods and techniques learned in the MPH-PO program to a practical public health problem. Professional Option students participate as members of a team to conduct a project in partnership with a local public health organization that is focused on a public health problem or need.

DrPH

The culminating experience for students in the DrPH program consists of three parts: (1) the Certified in Public Health Examination (CPH), (2) the Integrated Competency Evaluation (ICE) examination, and (3) the Doctoral Residency which includes the Major Project. These are outlined below.

CPH Examination (CPH)

If a DrPH student has not earned the CPH upon admission to the program, he/she must take and pass the Certified in Public Health Examination (CPH). If the student comes into the program without an MPH, he/she must take all five core courses to qualify for taking the CPH. Passing the CPH is required as it is considered that the CPH is an adequate assessment of the core knowledge and competencies that students in public health are expected to have.

Integrated Competency Evaluation (ICE)

To be advanced to candidacy, the DrPH student must pass the Integrated Competency Evaluation (ICE) which is the comprehensive examination for the DrPH degree program. The ICE is a self-assessment that is prepared in a prescribed written format and presented in a binder to the DrPH Committee for review. The binder contents represent a portfolio of the student's work based on competency mastery. The student defends their ICE written work in an oral presentation before the DrPH Committee. Each DrPH student is expected to provide a Self-Assessment of each of the 54 competencies defined under the seven domains as outlined in the ASPH Education Committee – Doctor of Public Health (DrPH) Core Competency Model, Version 1.3, November 2009. Students have two attempts to successfully pass the ICE. Should a student not pass, the DrPH Committee prescribes a Professional Development Plan for the student to carry out before taking the exam again. Those who do not pass after two attempts are dismissed from the program.

The minimum requirements for sitting for the ICE are as follows:

- Completion of all required courses except for PHED 6124.
- Enrollment in the Integrated Competency Examination (ICE) course (PHED 6000) in the semester in which the ICE is taken.
- Permission of the DrPH Program Director.

DrPH Residency/Major Project

The DrPH Residency provides students with leadership experience in public health practice through directed work in practice settings. Students are required to commit a minimum of 720 contact hours to the residency experience and produce a doctoral-level Major Project that relates to the work conducted within the residency, contributes to the field of public health practice, and

meets DrPH program competencies. Placements and practice activities are selected to complement the student's academic and professional plans. The DrPH residency may be completed over the period of two or three semesters with approval of an academic advisor. The student must maintain continuous enrollment in PHED 6397 until the requirements are complete; a minimum of 9 SCH is required. Pass/No Pass grading is used.

Other Professional Programs – MHA

HMAP 5302 – MHA Capstone serves as the culminating experience for students in the MHA Program. All MHA students are required to successfully complete and pass the course in order to graduate and receive their degree. The capstone course is designed to allow students the opportunity to apply methods and techniques learned in the MHA Program to a practical health administration problem. Students participate in a capstone project that highlights the challenges in the healthcare industry, showing the need for increased transparency, communication, and service integration.

Capstone Project

The capstone project requires students to identify a new service, product or innovative process to integrate into the current healthcare environment. Students are organized into teams of 2-3, depending on class size, and are asked to create a business plan to implement this new delivery of care. The business plan requires students to identify macro and micro healthcare industry trends, understand the voice of the customer, conduct a financial analysis, define marketing and promotion plans, and design an implementation/operational plan. All these elements culminate in a business plan that provides feasible implementation and financial returns for what they are proposing. Students are then asked to organize into teams that are aligned with their experience/expertise and interests. Each team uses in-class time and outside class time to organize, develop, advance, and finalize its business plan. Students are evaluated on the development of their project plan and their business plan, which includes interim reports and presentations as well as the final written business plan and presentation. The use of this approach in the Capstone course allows the Program to assess students' application and integration of key knowledge, skills and competencies gained throughout the Program's facets, including that of the MHA internship.

2.5.b. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The School has developed a two-step process for the comprehensive examination for the MPH degree. Using the CPH examination allows the School to have a standardized assessment of our students on core public health knowledge and competencies. We believe that this is an approach that should become more typical for the MPH degree and that adds to the professionalization of the field. Each Department can then design concentration comprehensive examinations and grading processes that meet the needs of students in specific concentrations. Additionally, the DrPH program has developed a unique method of assessing competency mastery through the Integrated Competency Evaluation (ICE).

Weaknesses:

The School has not yet formalized a process to evaluate those students who are not successful with the CPH examination or the comprehensive examinations.

Plans:

The School will continue to improve on methods for assessing demonstration of competencies mastery in the culminating experience. In addition, the data provided by the National Board of Public Health Examiners on the pass/fail rate of the Certified in Public Health Examination taken by our students will be analyzed and reviewed. This process will address the efficacy of the CPH requirement as part of the culminating experiences for the MPH and DrPH degree plans.

2.6 REQUIRED COMPETENCIES

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The school must identify competencies for graduate professional public health, other professional and academic degree programs and specializations at all levels (bachelor's, master's and doctoral).

2.6.a. Identification of a set of competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the program (e.g., one set each for BSPH, MPH and DrPH)

Upon graduation from all programs in the SPH, students are expected to have achieved a high level of competency mastery in both the program core and the concentration specific competencies. Each program has a uniquely defined set of competencies and learning outcomes that are used to guide the development of the curriculum and set a standard for the public health knowledge and skills students are expected to gain. The MPH core competencies and DrPH competency domains are listed below. Section 2.6.c provides a comprehensive outline of competencies and learning outcomes for all programs in the School of Public Health; MPH – core and concentration, DrPH, PhD and MHA.

MPH Core Competencies

The MPH core competencies were adopted from the Association of Schools of Public Health Education Committee, MPH Core Competency Project (Version 2.3, May 2007) and address the **five core areas** of public health as outlined in Criterion 2.3. The core competencies are listed below.

- **MPH Core C1: Public Health Knowledge & Skills**
The MPH student will apply basic knowledge and skills of the core public health sciences that include: biostatistics, epidemiology, health management and policy, behavioral and community health, and environmental and occupational health, to the prevention of illness and injury and the promotion of population health.
- **MPH Core C2: Integration of Theory and Practice**
The MPH student will demonstrate the effective integration of theory and practice related to public health issues that affect diverse populations, through a thesis or comprehensive examination and a practice experience.
- **MPH Core C3: Communication and Informatics**
The MPH student will gather, organize, and manage data and information effectively to address public health issues through oral and written communications to diverse professionals and lay audiences.
- **MPH Core C4: Diversity and Culture**-The MPH student will demonstrate the ability to interact with both diverse individuals and communities to produce or impact an intended public health outcome.

- **MPH Core C5: Professionalism**-The MPH student will apply ethical principles to the practice of public health in a variety of settings, demonstrating personal integrity while embracing diverse communities.

DrPH Core Competencies

UNTHSC-SPH has adopted the DrPH Core Competency Model developed by the Association of Schools and Programs of Public Health (ASPPH) to identify competencies essential for the successful development of leaders in the field of public health practice. The DrPH Residency is intended to develop and strengthen the competencies listed under each domain, which include advocacy, communication, community/cultural orientation, critical analysis, leadership, management, and professionalism/ethics. DrPH Core Competencies are developed and improved upon through practical experiences, as well as through completion of projects and tasks during the residency. Site supervisors are asked to evaluate the student's competence in each of the areas at the end of the residency. The DrPH Competency domains are presented below. A complete matrix of the DrPH competency domains and learning outcomes is presented in 2.6c.

- **DrPH – C1 (Domain A): Advocacy**
The ability to influence decision-making regarding policies and practices that advance public health using scientific knowledge, analysis, communication, and consensus-building.
- **DrPH – C2 (Domain B): Communication**
The ability to assess and use communication strategies across diverse audiences to inform and influence individual, organization, community, and policy actions.
- **DrPH – C3 (Domain C): Community/Cultural Orientation**
The ability to communicate and interact with people across diverse communities and cultures for development of programs, policies, and research.
- **DrPH – C4 (Domain D): Critical Analysis**
The ability to synthesize and apply evidence-based research and theory from a broad range of disciplines and health-related data sources to advance programs, policies, and systems promoting population health.
- **DrPH – C5 (Domain E): Leadership**
The ability to create and communicate a shared vision for a positive future; inspire trust and motivate others; and use evidence-based strategies to enhance essential public health services.
- **DrPH – C6 (Domain F): Management**
The ability to provide fiscally responsible strategic and operational guidance within both public and private health organizations for achieving individual and community health and wellness.
- **DrPH – C7 (Domain G): Professionalism and Ethics**
The ability to identify and analyze an ethical issue; balance the claims of personal liberty with the responsibility to protect and improve the health of the population; and act on the ethical concepts of social justice and human rights in public health research and practice.

2.6.b. Identification of a set of competencies for each concentration, major or specialization (depending on the terminology used by the program) identified in the instructional matrix, including professional and academic graduate degree curricula and baccalaureate public health degree curricula

These competencies are provided in the matrices in section 2.6.c.

2.6.c. A matrix that identifies the learning experiences (eg, specific course or activity within a course, practicum, culminating experience or other degree requirement) by which the competencies defined in Criteria 2.6.a and 2.6.b are met. If these are common across the program, a single matrix for each degree will suffice. If they vary, sufficient information must be provided to assess compliance by each degree or specialty area. See CEPH Data Template 2.6.1.

Students in the SPH acquire the fundamental knowledge and skills necessary to achieve mastery of program competencies through required coursework, field experiences such as the MPH Practice Experience and the DrPH Residency, various integrative learning experiences including the CPH examination, the concentration-specific comprehensive examinations, preliminary examinations, and professional and academic development (PAD) requirements, as well as other co-curricular activities. These experiences and how they relate to competency achievement are mapped in program-specific competency matrices that are all provided in the **Electronic Resource File in Appendix 2.6.c.1**. Each matrix identifies the relationship between courses, competencies, and learning outcomes, and also identifies primary assessment methods used each course. To help student's relate the competency matrix to the courses they enroll in, the SPH has a standard syllabus template that includes a section where faculty are required to display requires the competencies , learning outcomes and assessment methods primarily covered in the course. All syllabi are located in **Appendix 2.1.b.1**.

Competency /Learning Outcome Key:

In each competency matrix, **I** indicates a course where a competency is **primarily** introduced/gained, and **R** indicates a course where a competency is further **reinforced**. Whenever a competency is identified as being assessed in a course, the learning outcomes that will be primarily gained are identified with an **X**. Finally, a **PR** indicates that the competencies and LOs may **possibly** be gained through different activities including co-curricular activities, field experiences, and comprehensive examinations. While each of these experiences involves different goals, activities and objectives, they all provide students with the opportunity to expand on one or more of the program competencies and further reinforce mastery. The key is presented below:

- **I = (introduced):** Competency is formally introduced and gained through exposure to key public health concepts.
- **R = (Reinforced):** Competency is further reinforced through the synthesis of public health concepts
- **X = Learning Outcome (LO)** is primarily gained in the course
- **PR =** Competencies and LOs may possibly be reinforced

While all competency matrices are available in the **Electronic Resource File**, for reference, the DrPH competencies as well as the MPH and PhD core competencies are presented below: **Figures 2.6.c.1, 2.6.c.2, and 2.6.c.3**.

Figure 2.6.c.1: MPH CORE Competencies and Learning Outcomes (CEPH Data Template 2.6.1)

KEY

Introduced (I) - Competency is formally introduced

Reinforced (R) - Competency is reinforced

X - Learning Outcome (LO) is primarily gained

PR - Competency and LOs may possibly be reinforced (while each experience involves different goals and activities, they all provide opportunities to expand on one or more competencies)

MPH-Core Competency 1: Public Health Knowledge & Skills		BACH 5300	BIOS 5300	BIOS 5301	EOHS 5300	EPID 5300	HMAP 5300	PHED 5197	PHED 5000	DEPT¹ 5297
<p>The MPH student will apply basic knowledge and skills of the core public health sciences that include: biostatistics, epidemiology, health management and policy, behavioral and community health, and environmental and occupational health, to the prevention of illness and injury and the promotion of population health.</p> <p><i>Assessment Methods Used: Exams, papers, projects and reports, oral presentations, case studies, reflections, class participation, simulations, PeerWise, practice experience.</i></p>		Theoretical Foundations of Individual and Community Health	Biostatistics for Public Health I	Foundations of Biostatistics	Environmental Determinants of Health	Principles of Epidemiology	Introduction to Health Management and Policy	Professional and Academic Development (PAD)	Certified in Public Health Examination	Public Health Practice Experience
										<i>Culminating Experience</i>
		I	I	I	I	I	I	I	PR	PR
LO 1.1	Comprehend competency based education.	X	X	X	X	X	X	X	PR	PR
LO 1.2	Discuss the inter-relationship among the five core areas of public health.	X	X	X	X	X	X	X	PR	PR
LO 1.3	State the core functions of public health.	X	X	X	X	X	X	X	PR	PR
LO 1.4	Identify the relationship between public health and other professions (inter-professionalism).	X	X	X	X	X	X	X	PR	PR
LO 1.5	Explain “population health” and contrast it to individual health.	X	X	X	X	X	X		PR	PR
LO 1.6	Describe the impact that legislative and judicial processes, respectively, may have on public health.						X		PR	PR
LO 1.7	Describe consequences of health behaviors, especially in relationship to morbidities and mortality.	X							PR	PR
LO 1.8	Explain the importance of a theoretically driven and evidence-based approach to health promotion.	X	X	X	X	X	X		PR	PR
LO 1.9	Recognize the importance of a social ecological approach to health promotion planning.	X							PR	PR
LO 1.10	Participate in research, evaluation, and quality improvement planning in professional practice settings.	X	X	X	X	X	X		PR	PR
LO 1.11	Appropriately employ and interpret descriptive and inferential statistical techniques including tables, graphs, t-tests, chi-square tests, and regression analysis.		X	X		X			PR	PR
LO 1.12	Calculate, interpret and understand how to use unadjusted and adjusted rates, odds ratios, relative and attributable risks.		X	X					PR	PR
LO 1.13	Interpret environmental and occupational impacts on health.				X	X			PR	PR

¹Students register for the course in their respective departments/concentrations (BACH, MACH, BIOS, EPID, EOHS, HMAP, PHED)

Criterion 2: Instructional Programs

2.6 Required Competencies

MPH-Core Competency 2: Integration of Theory and Practice The MPH student will demonstrate the effective integration of theory and practice related to public health issues that affect diverse populations, through a thesis or comprehensive examination and a practice experience <i>Assessment Methods Used: Exams, papers, projects and reports, oral presentations, case studies, reflections, class participation, simulations, PeerWise, practice experience.</i>		BACH 5300	BIOS 5300	BIOS 5301	EOHS 5300	EPID 5300	HMAP 5300	PHED 5197	PHED 5000	DEPT ¹ 5297
		Theoretical Foundations of Individual and Community Health	Biostatistics for Public Health I	Foundations of Biostatistics	Environmental Determinants of Health	Principles of Epidemiology	Introduction to Health Management and Policy	Professional and Academic Development (PAD)	Certified in Public Health Examination	Public Health Practice Experience
		I	I	I	I	I	I	I	PR	PR
LO 2.1	Identify and strengthen the skills required for the thesis or comprehensive exam, and the practice experience.	X	X	X	X	X	X	X	PR	PR
LO 2.2	Define and identify theories and models that are used to explain human behaviors on both the individual and community level.	X			X	X	X		PR	PR
LO 2.3	Select theories that are applicable and relevant to specific intervention targets and settings.	X	X	X	X	X	X		PR	PR
LO 2.4	Explain initiation, maintenance, and cessation of risk behaviors using theoretical constructs.	X							PR	PR

MPH-Core Competency 3: Communication and Informatics The MPH student will gather, organize, and manage data and information effectively to address public health issues through oral and written communications to diverse professionals and lay audiences. <i>Assessment Methods Used: Exams, papers, projects and reports, oral presentations, case studies, reflections, class participation, simulations, PeerWise, practice experience.</i>		BACH 5300	BIOS 5300	BIOS 5301	EOHS 5300	EPID 5300	HMAP 5300	PHED 5197	PHED 5000	DEPT ¹ 5297
		Theoretical Foundations of Individual and Community Health	Biostatistics for Public Health I	Foundations of Biostatistics	Environmental Determinants of Health	Principles of Epidemiology	Introduction to Health management and Policy	Professional and Academic Development (PAD)	Certified in Public Health Examination	Public Health Practice Experience
		I	I	I	I	I	I	I	PR	PR
LO 3.1	Comprehend the tools used to gather data and information at the graduate level.	X	X	X	X	X	X	X	PR	PR
LO 3.2	Produce graduate level written and oral presentations for diverse audiences in both formal and informal settings.	X	X	X	X	X		X	PR	PR
LO 3.3	Use statistical software to manage data, create reports and solve statistics problems.		X	X					PR	PR
LO 3.4	Make clear and meaningful written and oral presentations based on a statistical analysis, to health professionals and educated lay audiences.		X	X					PR	PR
LO 3.5	Interpret study results.		X	X					PR	PR
LO 3.6	Explain how the collection and measurement of data pertain to health care management.						X		PR	PR
LO 3.7	Craft and present, both orally and in writing, a stance on a health policy or health care management issue						X		PR	PR
LO 3.8	Demonstrate an ability to identify, collect and interpret relevant environmental and occupational health information and communicate findings.				X				PR	PR

¹Students register for the course in their respective departments/concentrations (BACH, MACH, BIOS, EPID, EOHS, HMAP, PHED)

Criterion 2: Instructional Programs

2.6 Required Competencies

MPH-Core Competency 4: Diversity and Culture The MPH student will demonstrate the ability to interact with both diverse individuals and communities to produce or impact an intended public health outcome. <i>Assessment Methods Used: Exams, papers, projects and reports, oral presentations, case studies, reflections, class participation, simulations, PeerWise, practice experience.</i>		BACH 5300	BIOS 5300	BIOS 5301	EOHS 5300	EPID 5300	HMAP 5300	PHED 5197	PHED 5000	DEPT ¹ 5297
		Theoretical Foundations of Individual and Community Health	Biostatistics for Public Health I	Foundations of Biostatistics	Environmental Determinants of Health	Principles of Epidemiology	Introduction to Health management and Policy	Professional and Academic Development (PAD)	Certified in Public Health Examination	Public Health Practice Experience
		I	I	I	I	I	I	I	PR	PR
LO 4.1	Comprehend the impact of public health in the community.	X	X	X	X	X	X	X	PR	PR
LO 4.2	Explore the meaning of diversity in preparation for practice experience.	X	X	X	X	X	X	X	PR	PR
LO 4.3	Differentiate among availability, acceptability, and accessibility of health care across diverse populations.	X					X		PR	PR
LO 4.4	Understand the existence of health disparities in the U.S. and populations affected.	X			X	X	X	X	PR	PR
LO 4.5	Work with students from a variety of backgrounds to solve public health problems.	X	X	X	X	X	X	X	PR	PR

MPH-Core Competency 5: Professionalism The MPH student will apply ethical principles to the practice of public health in a variety of settings, demonstrating personal integrity while embracing diverse communities. <i>Assessment Methods Used: Exams, papers, projects and reports, oral presentations, case studies, reflections, class participation, simulations, PeerWise, practice experience.</i>		BACH 5300	BIOS 5300	BIOS 5301	EOHS 5300	EPID 5300	HMAP 5300	PHED 5197	PHED 5000	DEPT ¹ 5297
		Theoretical Foundations of Individual and Community Health	Biostatistics for Public Health I	Foundations of Biostatistics	Environmental Determinants of Health	Principles of Epidemiology	Introduction to Health management and Policy	Professional and Academic Development (PAD)	Certified in Public Health Examination	Public Health Practice Experience
		I	I	I	I	I	I	I	PR	PR
LO 5.1	Develop a professional resume and cover letter.							X	PR	PR
LO 5.2	Identify individual communication style and strengths.							X	PR	PR
LO 5.3	Produce professional presentations.							X	PR	PR
LO 5.4	Comprehend the guidelines and procedures for IRB and CITI training.		X	X				X	PR	PR
LO 5.5	Describe the guidelines and regulations related to use of confidential data and ethical design of research studies.	X	X	X	X	X	X		PR	PR
LO 5.6	Describe basic statistical concepts that are presented in public health.		X	X					PR	PR
LO 5.7	Comprehend the application of ethics in epidemiologic studies.					X			PR	PR

¹Students register for the course in their respective departments/concentrations (BACH, MACH, BIOS, EPID, EOHS, HMAP, PHED)

Figure 2.6.c.2: DrPH Competencies and Learning Outcomes (CEPH Data Template 2.6.1)

KEY

Introduced (I) - Competency is formally introduced

Reinforced (R) - Competency is reinforced

X - Learning Outcome (LO) is primarily gained

PR - Competency and LOs may possibly be reinforced (while each experience involves different goals and activities, they all provide opportunities to expand on one or more competencies)

(Domain A) DrPH Competency 1: Advocacy The ability to influence decision-making regarding policies and practices that advance public health using scientific knowledge, analysis, communication, and consensus-building.		HMMap 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMMap 5328: Human Resources Management	HMMap 5340: Public Health Law	HMMap 5330: Health Finance I	HMMap 6310: Advanced Health Policy	HMMap 6320: Leadership for Public Health	HMMap 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development(PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency ¹
		<i>Culminating Experience</i>																		
		I						R	I		I	I	R	R	R		I	PR	PR	PR
LO 1.1	Present positions on health issues, law, and policy.								X		X		X	X	X		X	PR	PR	PR
LO 1.2	Influence health policy and program decision-making based on scientific evidence, stakeholder.								X		X		X	X			X	PR	PR	PR
LO 1.3	Utilize consensus-building, negotiation, and conflict avoidance and resolution techniques.	X							X				X	X			X	PR	PR	PR
LO 1.4	Analyze the impact of legislation, judicial opinions, regulations, and policies on population health.								X		X		X	X	X		X	PR	PR	PR
LO 1.5	Establish goals, timelines, funding alternatives, and strategies for influencing policy initiatives.												X	X			X	PR	PR	PR
LO 1.6	Design action plans for building public and political support for programs and policies.							X			X		X	X			X	PR	PR	PR
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																				

(Domain B) DrPH Competency 2: Communication The ability to assess and use communication strategies across diverse audiences to inform and influence individual, organization, community, and policy actions.		HMAP 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMAP 5328: Human Resources Management	HMAP 5340: Public Health Law	HMAP 5330: Health Finance I	HMAP 6310: Advanced Health Policy	HMAP 6320: Leadership for Public Health	HMAP 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development(PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency
		<i>Culminating Experience</i>																		
		I	I					R	R						R	R	I	R	I	PR
LO 2.1	Discuss the inter-relationships between health communication and marketing.		X														X	PR	PR	PR
LO 2.2	Explain communication program proposals and evaluations to lay, professional, and policy audiences.															X	X	PR	PR	PR
LO 2.3	Employ evidence-based communication program models for disseminating research and evaluation outcomes.							X									X	PR	PR	PR
LO 2.4	Guide an organization in setting communication goals, objectives, and priorities.	X						X						X			X	PR	PR	PR
LO 2.5	Create informational and persuasive communications.												X	X		X	X	PR	PR	PR
LO 2.6	Integrate health literacy concepts in all communication and marketing initiatives.																X	PR	PR	PR
LO 2.7	Develop formative and outcome evaluation plans for communication and marketing efforts.							X									X	PR	PR	PR
LO 2.8	Prepare dissemination plans for communication programs and evaluations.							X						X			X	PR	PR	PR
LO 2.9	Propose recommendations for improving communication processes.	X						X						X			X	PR	PR	PR
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																				

<p>(Domain C)</p> <p><u>DrPH Competency 3: Community/Cultural Orientation</u></p> <p>The ability to communicate and interact with people across diverse communities and cultures for development of programs, policies, and research.</p>		HMMap 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMMap 5328: Human Resources Management	HMMap 5340: Public Health Law	HMMap 5330: Health Finance I	HMMap 6310: Advanced Health Policy	HMMap 6320: Leadership for Public Health	HMMap 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development(PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency	
		I	I		I	I		R	R	R				I	R	R		I	PR	PR	PR
		Culminating Experience																			
LO 3.1	Develop collaborative partnerships with communities, policy makers, and other relevant groups		X					X					X	X			X	PR	PR	PR	
LO 3.2	Engage communities in creating evidence-based, culturally competent programs.							X	X								X	PR	PR	PR	
LO 3.3	Conduct community-based participatory intervention and research projects.																X	PR	PR	PR	
LO 3.4	Design action plans for enhancing community and population-based health.				X	X		X	X					X			X	PR	PR	PR	
LO 3.5	Assess cultural, environmental, and social justice influences on the health of communities.	X	X		X			X	X	X			X		X		X	PR	PR	PR	
LO 3.6	Implement culturally and linguistically appropriate programs, services, and research.				X												X	PR	PR	PR	
<p>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD</p>																					

(Domain D) <u>DrPH Competency 4: Critical Analysis</u> The ability to synthesize and apply evidence-based research and theory from a broad range of disciplines and health-related data sources to advance programs, policies, and systems promoting population health.		HMAP 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMAP 5328: Human Resources Management	HMAP 5340: Public Health Law	HMAP 5330: Health Finance I	HMAP 6310: Advanced Health Policy	HMAP 6320: Leadership for Public Health	HMAP 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development(PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency
		<i>Culminating Experience</i>																		
		R	I	I	I	I	R	R	R					R	R	R		I	PR	PR
LO 4.1	Apply theoretical and evidence-based perspectives from multiple disciplines in the design and implementation of programs, policies, and systems	X			X	X			X								X	PR	PR	PR
LO 4.2	Interpret quantitative and qualitative data following current scientific standards			X		X	X	X	X								X	PR	PR	PR
LO 4.3	Design needs and resource assessments for communities and populations.					X		X									X	PR	PR	PR
LO 4.4	Develop health surveillance systems to monitor population health, health equity, and public health services.					X											X	PR	PR	PR
LO 4.5	Synthesize information from multiple sources for research and practice	X		X	X	X	X	X	X				X	X			X	PR	PR	PR
LO 4.6	Evaluate the performance and impact of health programs, policies, and systems	X	X	X		X	X	X	X				X	X			X	PR	PR	PR
LO 4.7	Weigh risks, benefits, and unintended consequences for research and practice.			X		X	X	X	X				X	X	X		X	PR	PR	PR
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																				

(Domain E) <u>DrPH Competency 5: Leadership</u> The ability to create and communicate a shared vision for a positive future; inspire trust and motivate others; and use evidence-based strategies to enhance essential public health services.		HMAP 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence - Based Public Health	HMAP 5328: Human Resources Management	HMAP 5340: Public Health Law	HMAP 5330: Health Finance I	HMAP 6310: Advanced Health Policy	HMAP 6320: Leadership for Public Health	HMAP 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development (PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency	
		R	I												R		R	I	PR	PR	PR
		<i>Culminating Experience</i>																			
LO 5.1	Communicate an organization’s mission, shared vision, and values to stakeholders.	X												X			X	PR	PR	PR	
LO 5.2	Develop teams for implementing health initiatives.													X			X	PR	PR	PR	
LO 5.3	Develop capacity-building strategies at the individual, organizational, and community level.													X			X	PR	PR	PR	
LO 5.4	Influence others to achieve high standards of performance and accountability.													X			X	PR	PR	PR	
LO 5.5	Guide organizational decision-making and planning based on internal and external environmental research.													X			X	PR	PR	PR	
LO 5.6	Prepare professional plans incorporating lifelong learning, mentoring, and continued career progression strategies.	X	X											X		X	X	PR	PR	PR	
LO 5.7	Create a shared vision.	X												X			X	PR	PR	PR	
LO 5.8	Develop capacity-building strategies at the individual, organizational, and community level.	X												X			X	PR	PR	PR	
LO 5.9	Demonstrate a commitment to personal and professional values.	X	X											X		X	X	PR	PR	PR	
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																					

(Domain F) DrPH Competency 6: Management The ability to provide fiscally responsible strategic and operational guidance within both public and private health organizations for achieving individual and community health and wellness.		HMAP 6322: Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMAP 5328: Human Resources Management	HMAP 5340: Public Health Law	HMAP 5330: Health Finance I	HMAP 6310: Advanced Health Policy	HMAP 6320: Leadership for Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development(PAD)	PHED 6000: Preliminary Exam	PHED 6002: Integrated Competency Eval. (ICE)	PHED 6397: DrPH Residency
		R							R		I		R			I	PR	PR	PR
		<i>Culminating Experience</i>																	
LO 6.1	Implement strategic planning processes.	X												X		X	PR	PR	PR
LO 6.2	Apply principles of human resource management.	X								X				X		X	PR	PR	PR
LO 6.3	Use informatics principles in the design and implementation of information systems.	X														X	PR	PR	PR
LO 6.4	Align policies and procedures with regulatory and statutory requirements.	X								X				X		X	PR	PR	PR
LO 6.5	Deploy quality improvement methods.	X												X		X	PR	PR	PR
LO 6.6	Organize the work environment with defined lines of responsibility, authority, communication, and governance.	X								X				X		X	PR	PR	PR
LO 6.7	Develop financial and business plans for health programs and services.											X				X	PR	PR	PR
LO 6.8	Establish a network of relationships, including internal and external collaborators.													X		X	PR	PR	PR
LO 6.9	Evaluate Organizational performance in relation to strategic and defined goals.	X								X		X		X		X	PR	PR	PR
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																			

(Domain G) DrPH Competency 7: Professionalism and Ethics The ability to identify and analyze an ethical issue; balance the claims of personal liberty with the responsibility to protect and improve the health of the population; and act on the ethical concepts of social justice and human rights in public health research and practice.		HMAP 6322 Organizational Management	PHED 6122: Professional Development in PH I	PHED 6314: Methods for PH Studies I	BACH 6300: Advanced Theories of Individual & Comm. Health	EPID 6311: Applied EPID for PH	PHED 6118: Methods for PH Studies II	PHED 6316: Adv. Program Design & Evaluation for PHP	PHED 6325: Evidence – Based Public Health	HMAP 5328: Human Resources Management	HMAP 5340: Public Health Law	HMAP 5330: Health Finance I	HMAP 6310: Advanced Health Policy	HMAP 6320: Leadership for Public Health	HMAP 6360: Ethical Issues in Public Health	PHED 6124: Professional Development in PH II	PHED 6050: Professional & Acad. Development (PAD)	Culminating Experience			
		I	I								I				R	R		I	PR	PR	PR
LO 7.1	Manage potential conflicts of interest encountered by practitioners, researchers, and organizations.	X													X	X		X	PR	PR	PR
LO 7.2	Differentiate among the administrative, legal, ethical, and quality assurance dimensions of research and practice.										X				X			X	PR	PR	PR
LO 7.3	Design strategies for resolving ethical concerns in research, law, and regulations										X				X			X	PR	PR	PR
LO 7.4	Develop tools that protect the privacy of individuals and communities involved in health programs, policies, and research.										X				X			X	PR	PR	PR
LO 7.5	Prepare criteria for which the protection of the public welfare may transcend the right to individual autonomy.										X				X	X		X	PR	PR	PR
LO 7.6	Assess ethical considerations in developing communications and promotional initiatives.	X									X				X	X		X	PR	PR	PR
LO 7.7	Demonstrate cultural sensitivity in ethical discourse and analysis.		X												X	X		X	PR	PR	PR
Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, oral testimony, PeerWise, simulations, policy-briefs, in-class examinations, preliminary examination, comprehensive examination, residency, PAD																					

Figure 2.6.c.3: PhD CORE Competencies and Learning Outcomes (CEPH Data Template 2.6.1)

KEY

Introduced (I) - Competency is formally introduced

Reinforced (R) - Competency is reinforced

X - Learning Outcome (LO) is primarily gained

PR – Competency and LOs may possibly be reinforced (while each experience involves different goals and activities, they all provide opportunities to expand on one or more competencies)

PhD-Core C1		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific & Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Research Theories: Synthesize historical, contemporary, and emerging theories and paradigms of significance to public health.		<i>Culminating Experience</i>										
				I	R	I	R	R		PR	PR	PR
LO 1.1	Synthesize literature-based information using systematic processes.			X	X	X	X	X		PR	PR	PR
LO 1.2	Apply appropriate theories and conceptual framework/models to address public health issues and research.			X	X	X		X		PR	PR	PR
<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												
PhD-Core C2		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Critical Analysis: Critically evaluate the strengths and weaknesses of existing research evidence and identify significant gaps in knowledge.		<i>Culminating Experience</i>										
				I	R	I	R	R	R	PR	PR	PR
LO 2.1	Identify the strengths, weaknesses and limitations of existing literature.			X	X	X	X	X	X	PR	PR	PR
LO 2.2	Formulate a research questions/hypothesis to address knowledge gaps.			X	X	X		X		PR	PR	PR

Criterion 2: Instructional Programs

2.6 Required Competencies

<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												
PhD-Core C3		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific & Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Research Methodology: Comprehend, design and apply relevant and advanced research methods based on rigorous standards of evidence.										<i>Culminating Experience</i>		
		I	I	I		I	R	R		PR	PR	PR
LO 3.1	Apply various research methods in public health.					X	X	X		PR	PR	PR
LO 3.2	Apply a study design to a specific public health research question.	X	X			X		X		PR	PR	PR
LO 3.3	Analyze data to address research questions.	X	X	X			X			PR	PR	PR
<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												
PhD-Core C4		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific & Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Scientific Communications: Develop professional skills in scientific and grant writing, oral communication, and teaching.										<i>Culminating Experience</i>		
		I	I	I	R	I	R	R	R	PR	PR	PR
LO 4.1	Prepare and submit peer reviewed publications and abstracts.					X	X	X		PR	PR	PR
LO 4.2	Use effective communication strategies for different audiences.	X	X	X	X	X	X		X	PR	PR	PR
LO 4.3	Prepare research/grant proposals.					X		X		PR	PR	PR

Criterion 2: Instructional Programs

2.6 Required Competencies

<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												
PhD-Core C5		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific & Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Ethics: Uphold the highest ethical standards in all professional endeavors, including the design and implementation of research and the participation of human subjects.		<i>Culminating Experience</i>										
					R	I		R	R	PR	PR	PR
LO 5.1	Identify ethical issues associated with public health practice and research.				X	X		X	X	PR	PR	PR
LO 5.2	Apply ethical concepts in the conduct of research.				X	X				PR	PR	PR
LO 5.3	Assess ethical consideration in developing and evaluating programs.				X					PR	PR	PR
<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												
PhD-Core C6		BIOS 5310 Biostatistics for Public Health II	BIOS 5311 Regression and ANOVA	BIOS 6300 Advanced Methods in BIOS	HMAP 6360 Ethical Issues in Public Health	PHED 6310 Methods for Public Health Studies	PHED 6118 Seminar in Public Health Research	PHED 6220 Scientific Grant Writing	PHED 6321 Pedagogy in Public Health	DEPT 6000 Doc. Dissertation	DEPT 6395 PhD Comp Exam	DEPT 6051 Prof. & Acad. Devlpt
Discovery and Translational Theory: Conduct investigative research, including areas that facilitate the translation and application of discovery to practice.		<i>Culminating Experience</i>										
							R			PR	PR	PR
LO 6.1	Interpret research findings and derive implications for public health.						X			PR	PR	PR
LO 6.2	Demonstrate how evidence influences or is translated into public health.						X			PR	PR	PR
<i>Assessment Methods Used: participation, self-assessments, faculty-assessments, projects, community leadership, workshops, reflections, journal club, manuscripts, papers, statistical applications, proposals, teaching, written/oral critiques, NIH Mock Study, comprehensive examination, dissertation, PAD</i>												

¹Students register for the course in their respective departments/concentrations (BACH, BIOS, EPID, EOHS, HMAP, PHED)

2.6.d. Analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of the observations and analysis, such changes should be described.

The matrices in Criterion 2.6.c represent an ongoing evaluative process that the School uses to measure student achievement of the competencies. To date, feedback on student mastery has come from student and alumni self-assessment measures, practice experience projects, site supervisor feedback and student/advisor meetings. Each year, this feedback is discussed in departmental faculty meetings and school of public health retreats where necessary modifications of curricula are identified. Examples of school-wide changes that have resulted from this process include the development of PAD for all programs, introduction of MPH competency self-assessments, an introductory seminar on MPH core and concentration competencies, the identification of concentration program coordinators, and the introduction of the competency alignment process. This process requires all SPH departments to develop measurable learning outcomes for competencies in each program and to use the 5 point scale as a universal way of measuring competency achievement across all programs. This requirement is further discussed in Criterion 2.7.

Concentration-specific competency reviews occur annually. Examples of curricular changes that have resulted from competency reviews in recent years include:

Behavioral and Community Health

In the fall of 2013, the School of Public Health decided to launch a new MPH concentration in maternal and child health. This decision grew out of the significant amount of faculty involvement in maternal and child research and practice, particularly in the areas of infant mortality and violence against women. The new MPH-MACH concentration is housed within the Department of Behavioral and Community Health. In August 2014, five new MPH students were admitted to the MACH concentration. In September 2014, a new faculty member, with a background in reproductive epidemiology, was hired to serve as Director of the new concentration.

Environmental and Occupational Health Sciences

The Department organized a meeting of local environmental and occupational health professionals in AY 2010 that resulted in revision of EOHS competencies. After their recommendations, the competencies were better directed towards professional needs of employers and changing professional requirements. Moreover, they associated specific generalized learning outcomes that were identified as either core (all MPH students) or concentration (EOHS Concentration) and specific to each competency. These competency revisions resulted in modifications of core courses in order to better integrate competency content, development of new courses (such as EOHS laboratory and methods course), and development of a certificate program in Geographic Information Systems, for public health assessment.

2.6.e. Description of the manner in which competencies are developed, used and made available to students

The development of competencies for all degree programs is a school-wide effort. Department chairs lead the developmental efforts within the concentrations for the MPH and the concentrations in the PhD program. The DrPH Program Committee which contains representatives from across the SPH is responsible for the development and management of the competencies for the DrPH degree.

The Program Directors Committee (formerly the Curriculum Committee) is responsible for the oversight and final approval of all professional and academic programs. This committee is responsible for coordinating efforts with regard to curriculum development and integration of programs, and of academic policies and procedures. Competencies for all degree programs are posted on the SPH website and are outlined in the “Program Profile” documents that are utilized in the SPHAAR orientation sessions upon matriculation, and by Academic Advisors in their counseling and advising sessions with students across all programs. In addition, the course syllabi list all relevant competencies covered within courses.

MPH Competencies:

The competencies for each of the concentrations were developed by the faculty within the department that offers the concentration. Multiple resources were utilized to finalize the competencies including national resources, professional organizations, accreditation standards, community advisory groups and professionals in their respective disciplines. Core competencies were developed similarly. Departmental faculty members reviewed the competencies and mapped them to each of the courses required in their concentrations. Reviews occur every academic year and courses are modified as needed to ensure identified competencies are covered.

DrPH Competencies:

In 2009 the SPH moved toward the development of a sole DrPH degree program, and away from the previous model with concentrations. The appropriate competencies agreed upon by the DrPH Program Committee were taken from work carried out by the ASPPH (formerly the ASPH). Several of the SPH faculty members were active in the ASPH work groups and contributed to the refinement of guidelines for a DrPH degree aimed at preparing individuals for public health evidence-based leadership. The domains identified in the ASPH Education Committee’s Doctor of Public Health (DrPH) Core Competency Model, Version 1.3, November 2009 ASPH were adopted as the core competencies for the DrPH degree program.

PhD Competencies:

As the DrPH with concentrations was phased out, the SPH developed the PhD in Public Health Sciences degree program with the five concentrations. The PhD Program Committee served as a task force to study different public health PhD degree programs across the nation, assess the regional demands, and gather input from colleagues in the public health field on the structure of the degree and the core and concentration-specific competencies. The committee garnered input from the SPH faculty before finalizing the competencies, which have been reviewed on an annual basis.

Other Instructional Programs**MHA Competencies:**

Development of competencies in the MHA is guided by academic, professional and accreditation standards of the discipline. The MHA is accredited by the Commission on Education of Healthcare Management Education (CAHME). CAHME criteria require that programs have competencies that align with the mission and targeted employment market, and that are periodically reviewed for relevance. The MHA program competencies were originally developed with input from students, faculty, the MHA Advisory Council, and the National Center for Healthcare Leadership (NCHL). The first step in this process involved mapping all MHA Program courses with all the competencies that were identified in the NCHL Model across the three domains (Transformation, Execution and People). Once all the courses were mapped, the NCHL provided input into the level of coverage of each competency by course and helped faculty identify which competencies were critical to developing early career leaders.

These basic competency domains that are crucial in the training of early career leaders were then augmented with other competencies aligned with the mission and vision of the MHA Program. This alignment required revising the relevant content in courses to make sure that all competencies were fully covered. Competencies are now reviewed annually and updates are made available to students during orientation, PAD and on the MHA program website.

2.6.f. Description of the manner in which the program periodically assesses changing practice or research needs and uses this information to establish the competencies for its educational programs.

The School assesses changing practice needs in several ways. First, the School has active engagement with the community through the Public Health and Prevention Council, a group of senior health and health-related leaders in Tarrant County who provide ongoing input into specific projects and into the school's strategic plan. This body decided in the summer of 2014 to develop a subunit which would serve as an Advisory Council for the MPH and DrPH programs. Members of this subgroup would be individuals who lead major public health organizations and hire our graduates, preceptors for both programs, and alumni of both programs. The Council would focus directly on competencies for these programs and other changes needed in the curriculum of each. A separate group that was organized for our MHA program has been very effective in this regard. School faculty members also serve on numerous boards, councils, committees, and advisory bodies in the Metroplex, providing immediate insight into how the competencies of our professional programs should be altered in response to changes in the structure and functioning of these grassroots organizations. These organizations are identified in Section 3.2: Service. At the broader level of the state and nation, school faculty engage in the activities and serve on units of professional bodies that provide opportunities to understand the changing world of public health practice. For example, Dr. Kurz is the Chair of the National Board of Public Health Examiners (NBPHE), which constantly reflects on the content of the Certified in Public Health Examination. Most recently, the NBPHE completed a job task analysis for entry and middle level public health roles funded by the Robert Wood Johnson Foundation and, although this information is not yet published, Dr. Kurz can bring his insights from this work to the School as it assesses its competencies on an ongoing basis. Participation in the annual and semi-annual meetings of the Association of Schools and Programs in Public Health (ASPPH), Academy Health, and disciplinary professional bodies provide additional opportunities for valuable insight on changes in the field of public health and competency development. For example, our initial competency development for the DrPH program began with active involvement in the ASPPH DrPH competency development project. The School will be paying careful attention to the ASPPH Framing the Future initiative which will impact the direction of the MPH and the DrPH programs.

The School assesses research needs that affect our competencies in several ways. First, several school faculty members serve on review panels for the National Science Foundation, the Centers for Disease Control and Prevention, and other organizations. This service provides direct insight into the changing demands of the research community at the highest levels, insights the School must consider as it refines its competencies. In addition, the School works in conjunction with the Texas Prevention Institute, one of the nine Health Institutes of Texas at the Health Science Center, to sponsor the Office of Research Services (ORS). This unit brings faculty and others together from across the Health Science Center and from outside groups who are interested in prevention and health services research through a Works in Progress Series, Research Schmoozes, and content focused groups. Through these activities, the School stays current on the needs of research teams

studying many topics and how these needs should impact the competencies that drive our degree programs. See Section 3.1: Research for a more detailed description of these ORS activities.

Information from these sources is integrated into our curricula through self-assessment processes such as school retreats, annual reviews of the strategic plan, departmental operational assessments and self-study requirements. As indicated in 2.6.d, these processes develop a foundation for continual competency development that incorporates the changing needs in practice and research.

2.6.g. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Each program has a set of required competencies with clearly identified learning outcomes that are made available to students at orientation and on the School's website. These competencies are periodically reviewed and feedback from program stakeholders, which include faculty, students, alumni, site supervisors, and employers is used to guide curricula changes and overall competency development. In AY 2014-2015, the school is piloting the competency alignment process, which aims to assess competency achievement through the assessment of learning outcomes using information based on the formal assessment of learning outcomes through course activities. In this way, the School is attempting to get beyond perceptual assessments of competency acquisition, although this information can be useful, to include direct measures based on performance of tasks by students as part of course requirements. These measures may be used to grade students, but the School believes that these measures should be summed across students to demonstrate the level of competency acquisition through specific related learning outcomes.

Weaknesses:

At this time, the primary weakness is the difficulty of integrating these direct measures in a routine fashion through Canvas, our learning management system. The Health Science Center's academic technology staff and key staff are working with us to accomplish the task of creating an easily applied method of summing learning outcomes and relating them to a rubric which identifies the extent to which the learning outcome has been achieved by students in the program.

Plans:

Competencies and associated learning outcomes will continue to be updated using many sources of information. The competency alignment process will be implemented across all programs by fall of 2014, with completion by fall of 2015, and data will be used to inform the success of curricula and competency development and implementation.

2.7 ASSESSMENT PROCEDURES

There shall be procedures for assessing and documenting the extent to which each professional public health, other professional and academic degree student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

2.7.a. Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for identifying competency attainment in practice and culminating experiences.

The SPH uses several methods to monitor and evaluate student progress in achieving the expected program competencies. At the point of admission, students are provided with the competencies. As they begin their program, competencies are provided at orientation, highlighted on their curriculum plans, and made available on the website. Competencies are measured and tracked in a number of ways that are outlined below.

School Level Competency Assessments

SPH Academic Program Assessment

Each year the SPH prepares an assessment report on the progress of its academic and professional programs. This report uses the established competencies as the primary evaluation measure to track both student and program performance. The reporting mechanism used is the TracDat system which enables schools and programs to document outcome measures, targets, assessments methods, results and action plans from year to year. The areas that the SPH has chosen to track on an annual basis to assess student competency development and achievement are:

- The Certified in Public Health Examination (a measure of student achievement of the public health core competencies)
- Departmental Comprehensive Examinations (a measure of student achievement of the concentration-specific competencies)
- Site Supervisor/Preceptor evaluations of student performance and competency mastery (a measure of a student's ability to perform the competencies in the field)
- Professional and Academic Development - PAD (A course within each program designed to provide students with professional development skills pertinent to the degree and required competencies)

The SPH believes these are important targets to track, as they directly assess student competency mastery of the core and concentration specific competencies. The results also highlight areas that need improvement and provide the opportunity for innovative action plans to be developed around competency mastery. For example, in the fall of 2013 the UNTHSC established the Academic and Program Assessment Review Team (APART), a team that was charged with reviewing the assessment plans, results, and proposed actions of each program, and with reporting findings to the provost and Council of Deans. The review of the SPH by the APART was extremely beneficial and led the SPH to explore a more in-depth way of assessing competency mastery at the course level. In the fall of 2014, the SPH introduced the "Competency Alignment Process" (discussed below) as a way of reinforcing competency-based education through faculty engagement. The APART assessment report of the SPH 2012-2013 program outcome measures and the SPH response to the Provost are included in **Appendix 2.7.a.1** located in the **Electronic Resource File**.

SPH Competency Alignment Process

All courses in the SPH assess competency mastery through various assessment methods that include quizzes, tests, in-depth papers, oral presentations and examinations. At the course level, faculty outline competencies on their syllabi and map them to assessments that are done throughout the semester, enabling student to see how competencies are introduced and reinforced throughout the curriculum. To further engage faculty in assessing student progress through competencies and not just through traditional grades, in the fall of 2014 the SPH implemented the Competency Alignment Process. This 10-step process, outlined in **Appendix 2.6.c.1** in the **Electronic Resource File**, requires all SPH departments to develop measurable learning outcomes for competencies in each program and to use the 5 point scale as a universal way of measuring competency achievement across all programs:

- 5: Outstanding (Met – High achievement)
- 4: Good (Met - Clearly acceptable)
- 3: Acceptable (Met – Satisfactory achievement)
- 2: Needs Improvement (Not met – Less than satisfactory)
- 1: Unacceptable (Not met – Not acceptable)

To enable data to be collected in an electronic format, the SPH is collaborating with the UNTHSC Center for Innovative Learning (CIL) to use Canvas, the learning management system adopted by the University as the primary medium for faculty to link their course assessments to the learning outcomes and competencies. This linkage is intended to allow faculty to directly measure student competency achievement at the course level, and will enable departments and program directors to review competency achievement at both the course and program level. In the spring of 2014, this pilot was first tested with courses in the Department of Environmental and Occupational Sciences. In the fall 2014, select faculty from the other SPH departments began assessing competency mastery in Master’s level courses, with some using canvas to do this assessment. In the spring of 2015, select faculty teaching courses online and at the doctoral level also began implementing competency assessment. Although still a pilot project, the SPH has experienced the positive impact of developing learning outcomes for each defined competency and using this process to provide students with both the traditional letter grade and the competency achievement score on a 5 point scale. Students are beginning to assess their performance and public health skillset in direct relation to the learning outcomes and competencies defined in a course, helping them further prepare to enter the public health workforce. The SPH aims to have all courses implementing this assessment by the spring of 2016. Results of this initial pilot are provided in the **Appendix 2.6.c.1**.

Graduating Student Survey

All graduating students in the SPH are sent the Graduating Student Survey, which gives them an opportunity to assess their educational experience. The survey aims to gather feedback on the entire student experience starting at the point of recruitment and admission, and continuing through to graduation and subsequent employment. The survey also asks students to assess their readiness to enter the public health workforce by asking questions related to competency achievement and overall mastery. The SPH Dean, Associate Dean of Academic Affairs, and the Department Chairs review the feedback and use it to inform programmatic developments. It is through this type of student feedback that both strengths and weaknesses in advising are identified and improvements systematically made to the programs and student competency development. The survey tool and analysis of results are further discussed in Criterion 2.7.e.

Program Level Competency Assessments

Professional Public Health Degree Program Assessments

MPH

Students register for PHED 5197 Professional and Academic Development in the first semester of enrollment. The first class is dedicated to providing an introduction to public health, with an in-depth look at the five core areas of public health and the related cross-cutting core and concentration-specific competencies. Students in the PAD course take pre and post competency assessments that help establish a foundation for the core courses. Upon completion of the five cores courses, MPH students are required to register for, and successfully pass, the Certified in Public Health Examination (CPH). The SPH uses the CPH as a direct assessment of competency mastery in the core area of public health and the related core competencies. A final programmatic assessment is done through the concentration-specific comprehensive examination. These examinations directly measure student mastery in the concentration competencies.

DrPH

DrPH students register for PHED 6122 Professional Development 1 in their first semester. In this course students receive an in-depth competency overview and put together a professional development plan that highlights the competencies and how they plan to achieve them. This is further reinforced by the DrPH PAD course, which focuses on building competency through targeted doctoral –level activities that are approved and assessed by the DrPH Director and the DrPH Committee. Competency development is further assessed through the preliminary examination that DrPH students take after completion of the first year. The examination helps determine the competency areas that students need to reinforce in preparation for the Integrated Competency Evaluation (ICE) and the Doctoral Residency. During Residency, student competency is assessed by the site supervisor and if there are areas of competency deficiency, the DrPH Director, with input from the DrPH Committee, works with the student to develop an action plan to move them towards competency mastery.

Academic Degree Program Assessments

PhD

The PhD program uses the following methods to monitor and evaluate each student's academic progress. (1) Each competency and associated learning outcome is identified in the syllabi of the associated required courses for each program. For each of the PhD required core courses (see **Table 2.12.d.1**), the instructor, through an assessment of the associated learning outcomes, performs an evaluation of mastery of each core competency addressed in the course. The concentration specific competencies are similarly evaluated for each required concentration course. (2) Depending on earned credit hours, each PhD student is required to perform a minimum number of activities associated with professional and academic development. This performance is submitted at the end of each academic year for evaluation by the student's advisor and PhD Committee. (3) Specific milestones of the program, such as the timing of the comprehensive exam, dissertation proposal, and dissertation defense, are identified and progress followed. Timely achievements of these milestones are indicators of successful progress and competency achievement. And, (4) indirectly tied to competencies is the student's semester and cumulative GPA. At the end of each academic year each of these are evaluated by the advisor/mentor, department chair, and PhD committee. The department chair, working with the advisor/mentor prepares a progress letter for each student in their respective concentration indicating satisfactory or unsatisfactory progress based on these evaluations. If satisfactory progress is reported, then the letter repeats expectations for continued satisfactory progress. If the progress is not found satisfactory, the student's letter will outline where the deficiency is and what actions need to be

taken, and typically will require consultation between the student and advisor for development of remediation plans. Although this letter will be developed at the end of each academic year, the student and academic advisor/mentor will typically be meeting on a regular bases and identify unsatisfactory progress early.

Other Instructional Program Assessments

MHA

The MHA Program assesses student competency mastery in multiple ways. At the program level competency mastery is assessed through targeted student self-assessments done at 4 points in the student's MHA career (first semester, pre-internship, post internship, and at graduation). These data along with feedback from internship site supervisors is used to measure the student's competency progression, providing multiple data points for any intervention needed. At the course level, the MHA program is participating in the Competency Alignment Process and gathering data on competency mastery in two courses, HMAP 5050 Professional and Academic Development and HMAP 5394 Internship.

2.7.b. Identification of outcomes that serve as measures by which the program will evaluate student achievement in each program, and presentation of data assessing the program's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees included in the unit of accreditation (including bachelor's, master's and doctoral degrees) for each of the last three years. See CEPH Data Templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of graduates at any level who can be located, an explanation must be provided. See CEPH Outcome Measures Template.

Degree Completion Rates

All SPH program graduation rates for the last three years are summarized in **Table 2.7.b.1**. For each degree program summarized in the table, the percent graduated was determined by the number who enrolled in a given cohort, divided by the number who graduated within the maximum time to graduate. For example, the MPH program allows six years for completion in order to accommodate part-time students. The percent graduated for 2013-14 is therefore based on the cohort that started 6 years earlier, in 2009-2010. All percentages are derived from data in the degree completion tables for all programs (MPH, MHA, DrPH and PhD) are provided in **Appendix 2.7.b.1** in the **Electronic Resource File**.

DrPH

A review of **Table 2.7.b.1** below shows that while degree rates are reasonably high for the PhD, MPH and MHA, the DrPH concentration-specific degree program fell below 70% in AY 2012-2013, and 2013-2014. After considerable review of the DrPH, in the fall of 2009 the SPH made the decision to re-envision the program and shift it from a concentration-specific focus in the areas of biostatistics, clinical research, disease prevention and control, environmental health sciences, epidemiology, health management and policy, and social and behavioral sciences, to a focus in public health practice. This new focus has been successful in attracting and retaining strong students, and, as noted in the table, graduation rates are much higher. The School graduated the first DrPH Practice student in AY 2011-2012, and to date, a total of 16 students have graduated.

PhD

The PhD Program began in the fall of 2011 and has graduated a total of 6 students. These numbers are not referenced in the table as the allowable time to graduate is 7 years. A detailed overview of the completion rates for the PhD program is available in **Appendix 2.7.b.1**.

MHA

The MHA Program, (also presented in detail in **Appendix 2.7.b.1**) began in the fall of 2008 and graduated the first cohort of students in 2012-2013. The Program allows 6 years for completion and has therefore not recorded graduation data for 2011-2012.

Table 2.7.b.1: Summary of Degree Completion Rates (CEPH Data Template 2.7.1)

Program	Maximum time to Graduation (MTTG)	Percent Graduated (based on MTTG)					
		2011-2012		2012-2013		2013-2014	
MPH	6 Years	Cohort Entering 2007-2008	69%	Cohort Entering 2008-2009	73.4%	Cohort Entering 2009-2010	70%
MHA	6 Years	Cohort Entering 2007-2008	N/A	Cohort Entering 2008-2009	90%	Cohort Entering 2009-2010	100%
DrPH Concentration Specific (former)	7 Years	Cohort Entering 2006-2007	N/A	Cohort Entering 2007-2008	30.1%	Cohort Entering 2008-2009	66.7%
DrPH Practice (current)	7 Years	Cohort Entering 2006-2007	N/A	Cohort Entering 2007-2008	N/A	Cohort Entering 2008-2009	100%
PhD	7 Years	Cohort Entering 2006-2007	N/A	Cohort Entering 2007-2008	N/A	Cohort Entering 2008-2009	N/A

Job Placement Rates

Table 2.7.b.2 below shows job placement rates for graduates of the MPH, DrPH, PhD and MHA for the past three years. These data are collected through surveys done at the time of graduation and is supplemented by information gathered by the Office of Admission and Academic Services (OAAS) through contact with Alumni within 12 months of graduation. Placement and destination information is reported each year in the CEPH Annual Reports which are available in **Appendix 2.7.b.2** in the **Electronic Resource File**.

Table 2.7.b.2: Job Placement/Destination of Graduates (CEPH Data Template 2.7.2)

Program and Destination (Summary of all Programs) ¹	Number (n) and Percent (%)					
	2011-2012		2012-2013		2013-2014	
(MPH, DrPH, PhD & MHA combined totals)	(n)	(%)	(n)	(%)	(n)	(%)
Employed	64	91%	86	83%	109	92%
Continuing Education/Training (not employed)	0	0	6	6%	8	7%
Actively Seeking Employment	6	9%	8	8%	0	0
Not Seeking Employment (not employed and not seeking education or training)	0	0	3	3%	1	1%
Unknown	0	0	0	0	0	0
Total	70	100%	103	100%	118	100%

¹Individual program data are presented in the table below

Program and Destination (summary by individual program)	Number (n) and Percent (%)					
	2011-2012		2012-2013		2013-2014	
MPH	(n)	(%)	(n)	(%)	(n)	(%)
Employed	64	91%	64	83%	87	91%
Continuing Education/Training (not employed)	0	0	4	5%	8	8%
Actively Seeking Employment	6	9%	7	9%	0	0
Not Seeking Employment (not employed and not seeking education or training)	0	0	2	3%	1	1%
Unknown	0	0	0	0	0	0
MPH Total	70	100%	77	100%	96	100%
Program and Destination	Number (n) and Percent (%)					
	2011-2012		2012-2013		2013-2014	
DrPH	(n)	(%)	(n)	(%)	(n)	(%)
Employed	16	91%	8	100%	6	100%
Continuing Education/Training (not employed)	0	0	0	0	0	0
Actively Seeking Employment	1	9%	0	0	0	0
Not Seeking Employment (not employed and not seeking education or training)	0	0	0	0	0	0
Unknown	0	0	0	0	0	0
DrPH Total	17	100%	8	100%	6	100%
Program and Destination	Number (n) and Percent (%)					
	2011-2012		2012-2013		2013-2014	
PhD	(n)	(%)	(n)	(%)	(n)	(%)
Employed	1	100%	3	100%	1	100%
Continuing Education/Training (not employed)	0	0	0	0	0	0
Actively Seeking Employment	0	9%	0	0	0	0

Not Seeking Employment (not employed and not seeking education or training)	0	0	0	0	0	0
Unknown	0	0	0	0	0	0
PhD Total	1	100%	3	100%	1	100%
Program and Destination	Number (n) and Percent (%)					
	2011-2012		2012-2013		2013-2014	
MHA	(n)	(%)	(n)	(%)	(n)	(%)
Employed	8	89%	13	87%	15	100%
Continuing Education/Training (not employed)	0	0	0	0	0	0
Actively Seeking Employment	1	0	1	7%	0	0
Not Seeking Employment (not employed and not seeking education or training)	0	0	1	7%	0	0
Unknown	0	0	0	0	0	0
MHA Total	9	100%	15	100%	15	100%

2.7.c. An explanation of the methods used to collect job placement data and of graduates' response rates to these data collection efforts. The program must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collecting employment data.

At the time of graduation, all students complete the Graduating Student Survey (discussed in Criteria 2.7.a and 4.4.c) that requires they provide post-graduation contact information and details pertaining to employment. Post-graduation, contact information is used to update alumni records through personal correspondence, the use of social media such as LinkedIn and Facebook, and alumni receptions at national conferences including the American Public Health Association (APHA) annual conference. In the summer of 2014, the SPH also participated in the ASPPH pilot alumni survey, gathering employment information on graduates from 2013. In the fall of 2014, the SPH developed a supplemental alumni survey to be completed by January 2015. Through these mechanisms, alumni employment data are kept current. Alumni graduation and employment data, including the ASPPH Alumni Survey, the Graduating Student Survey, and the SPH Alumni Survey, are located in **Appendix 2.7.c.1** in the **Electronic Resource File**.

Table 2.7.c.1: Job Placement Data Collection Methods and Response Rates

Program	Data Collection Methods and Response Rates							
	Graduating Student Survey ¹ (# Graduates from 2011-12 to 2013-14)		ASPPH Alumni Survey ² (# Graduates Spring, Summer, Fall 2013)		SPH Alumni Survey ³ (# Graduates from 2011-12 to 2013-14)		Other Mechanisms ⁴ (Information available through OAAS)	
MPH	245	100%	37/89	42%	92/200	46%	50/245	20%
DrPH	21	100%	5/5	100%	6/16	38%	16/21	76%
PhD	5	100%	3/3	100%	3/5	60%	4/6	50%
MHA	31	100%	2/15	13%	13/15	87%	21/31	68%

¹Response rate is 100% as all graduating students are required to complete the Graduating Student Survey (refer to Appendix 2.7.c.1)

²Response rate is 25%. Survey was sent to 118 alumni, all graduates from 2013. A total of 54 responded. (Refer to Appendix 2.7.c.1)

³SPH alumni survey was sent to 200 MPH, 15 MHA, 16 DrPH, and 5 PhD students.

⁴Other Mechanisms are supplemental to formal collection measures. These include personal communication, social media (Facebook and LinkedIn), alumni receptions and faculty communication with former advisees.

2.7.d. In fields for which there is certification of professional competence and data are available from the certifying agency, data on the performance of the program’s graduates on these national examinations for each of the last three years.

The Certified in Public Health Examination (CPH) offered through the National Board of Public Health Examiners (NBPHE) is a required milestone for all students in the MPH Program and is also required for students who enter the DrPH and PhD programs without a prior MPH. After successful completion of the five core courses, students enroll in PHED 5000 – CPH Comprehensive Examination and are registered for the CPH Examination by the SPH. Students may sit for the examination multiple times until they pass; however, if they fail to pass after the time limit for the degree (six years for the MPH), they are dismissed. The SPH covers registration costs for the first three attempts. **Table 2.7.d.1** shows the pass rate for SPH students and alumni over the past four years. For each of the years presented the UNTHSC SPH results have either been close to, or above, the national average. The overall pass rate for UNTHSC SPH test-takes for February 2011 – May 2014 is 82%. The confidential NBPHE reports that provide all examination pass rates will be made available for review during the site visit.

Table 2.7.d.1: Pass Rates on Certified in Public Health (CPH) Examination 2011-2014

	CPH Examination Pass Rate (# who took the exam)							
	2011	2012		2013		2014		
	February	February	October	February	October	February	May	October
SPH Students ¹	100% (1)	100 (3)	81% (26)	83% (67)	90% (73)	79% (50)	80% (20)	N/A
SPH Alumni	70% (16)	77% (44)	73% (11)	67% (4)	75% (3)	100% (3)	100% (1)	N/A
All Test Takers ²	86%	84%	82%	85%	76%	79%	79%	N/A

¹NBPHE data reports on the CPH pass rate for all UNTHSC SPH students and alumni will be available for review during the site-visit.

²Test was offered once in 2011, twice in 2012 and 2013, and three times in 2014. Results for October 2014 have not yet been received.

2.7.e. Data and analysis regarding the ability of the program’s graduates to perform competencies in an employment setting, including information from periodic assessments of alumni, employers and other relevant stakeholders. Methods for such assessment may include key informant interviews, surveys, focus groups and documented discussions.

The competency of SPH graduates is assessed through data from four main sources: employers, site supervisors, graduating students, and alumni. For all SPH graduates, competency is assessed at graduation through the Graduating Student Survey, and once they are in the field, through an alumni survey. For students in the MPH and DrPH programs, additional data are gathered from site supervisors after the practice (MPH)/residency (DrPH) experiences, and from employers. Both the alumni survey and the employer survey were implemented in the fall of 2014. Prior to this, alumni and employers were contacted through informal measures. Data for the MPH and DrPH programs are presented in **Tables 2.7.e.1 and 2.7.e.2**.

Employer Assessments of MPH and DrPH Graduates

In the fall of 2014, the SPH interviewed and surveyed employers that have hired MPH and DrPH graduates. 20 employers that represent hospitals, health care providers, non-profit organizations, and state and local government were surveyed and asked to provide feedback on the ability of graduates to perform competencies on the job. They were also asked to recommend areas for inclusion in the curriculum. A total of seven employers responded (a 35% response rate) and

although their observations show that are satisfied with the ability of graduates to perform the competencies on the job, it was only a small group that responded. This is the first time that the SPH has administered a formal employer survey and we were only able to get 7 employers to participate. Steps are now being taken to build a database of employer contact information that can be used to solicit feedback on a regular basis. To collect this information the SPH is taking immediate action in two ways. First, employer information will now be collected through the Graduating Student Survey that students are required to complete at the time of graduation. Collecting employer contact information at graduation will enable the Office of Admission and Academic Services (OAAS) to follow-up with employers within 6 to 12 months of a student’s employment and receive feedback on how prepared our new graduates are when first entering the workforce. Secondly, as we continue to survey alumni that have been in the field longer than 12 - 24 months, we will now request employer information, both past and current, enabling us to assess employer perceptions of our graduates over time. Maintaining accurate employer information will not only enable the SPH to use employer feedback for continuous quality improvement of program curricula and related competencies, it will possibly create career placement opportunities for new graduates.

Data collected from the employer survey are presented below in **Tables 2.7.e.1** (assessment of MPH graduates) and **2.7.e.2** (assessment of DrPH graduates). The survey tool and responses are provided in **Appendix 2.7.c.1**.

Table 2.7.e.1: Employer Assessment of MPH Program Graduates’ Ability to Perform Competencies on the Job

MPH Program Core/Cross-Cutting Competencies (n=7)	Level of proficiency demonstrated at the time of employment (based on core competencies)	Overall, How well prepared were the graduates for the positions they were employed for?
	1=Excellent 2=Average 3=Below Av 4=Poor	1-Very Well Prepared 2- Somewhat Prepared 3-Not Prepared at All
Public Health Knowledge and Skills	1.5	Very Well Prepared
Integration of Theory and Practice	1.5	Very Well Prepared
Communication and Informatics	1.8	Very Well Prepared
Diversity and Culture	1.3	Very Well Prepared
Professionalism	1.3	Very Well Prepared

Table 2.7.e.2: Employer Assessment of DrPH Program Graduates’ Ability to Perform Competencies on the Job

DrPH Program Competency Domains (n=7)	Level of proficiency demonstrated at the time of employment	Overall, How well prepared were the graduates for the positions they were employed for?
	1=Excellent 2=Average 3=Below Av 4=Poor	1-Very Well Prepared 2- Somewhat Prepared 3-Not Prepared at All
Advocacy	2	Very Well Prepared
Communication	1	Very Well Prepared
Community/Cultural Orientation	1	Very Well Prepared
Critical Analysis	1	Very Well Prepared
Leadership	2	Very Well Prepared
Management	2	Very Well Prepared
Professionalism and Ethics	1	Very Well Prepared

Site Supervisor Assessments

At the completion of the MPH Practice Experience and the DrPH Residency, site supervisors complete student evaluations that are used by each program to assess graduating student preparedness for employment in the field. Feedback includes both quantitative and qualitative measures that continue to be used for overall program quality improvement.

MPH

Prior to the summer of 2014, the MPH site supervisor evaluation did not directly assess student competency. It focused primarily on overall student performance and asked site supervisor to complete a 1 rubric that assessed quality of work. The program used this information to assess student ability to perform in the field. In 2013-2014 the mean score of student performance was 9.48 on a 10-point scale showing that students were well prepared for the field. To supplement these data, in summer/fall 2014 the MPH Practice Committee made the decision to update the rubric and include competency measures directly related to the student practice experience. This updated site supervisor evaluation will be implemented in the spring of 2015. All MPH practice experience forms are included in **Appendix 2.4.a.1** in the **Electronic Resource File**.

DrPH

Site supervisors complete an evaluation that asks them to assess (i) student performance and (ii) student skill and development on a scale of 1 (needs improvement) to 4 (exemplary). Under performance, site-supervisors assess the student on dependability, resourcefulness, ability to work as a team member, communication skills (oral, written and presentation skills) and overall ability to apply academic preparation to the residency setting. In the skill and development section, site-supervisors are asked to rate student ability in each of the domain areas. In 2013-2014, one student completed the DrPH Residency. The mean score received in performance was 3.6/4 and the mean score received in skill and knowledge development (competency achievement) was 3.7/4. Both scores showed that the student was well-prepared for work in the field. All DrPH Residency forms are located in **Appendix 2.4.a.1**.

Self-Assessments: Graduating Student Survey and SPH Alumni Survey

In addition to data received from the employer and site supervisor surveys, data on the ability of program graduates to perform competencies in employment settings has primarily been gathered from the Graduating Student Survey. In the fall of 2014, the SPH sent a survey to alumni who graduated between fall 2011 and spring 2014. This survey asked them to provide feedback on their perception of competency mastery at the time of entering the workforce and asked alumni to select the competencies they used most in the field. The survey also asked their suggestions for program improvement as well as ways they wanted to stay involved. Data from both surveys on the MPH, DrPH and PhD are presented below in **Tables 2.7.e.3 – 2.7.e.5**. Overall, both graduating students and alumni felt they had achieved competency mastery and were well prepared to enter the workforce. The SPH Alumni Survey and the Graduating Student Survey are provided in **Appendix 2.7.c.1**.

Table 2.7.e.3: Self-Assessment of Competency Achievement - MPH Program Graduating Students and Alumni

MPH Concentration Areas ¹	Graduating Student Survey (Summer 2013-Summer 2014) ¹		MPH Alumni Survey (Graduates from 2011-2014)		
	Scale: 1=Excellent 2= Good 3 = Fair 4=Poor		Scale: 1=Excellent 2=Average 3=Below Average 4=Poor		
	(n) Total Responses ²	Mean Score	(n) Total Responses ³	Mean Score	Did the competencies adequately prepare you to work in the field?
BACH	n = 29	1.8	n = 24	1.7	Yes = 81%
BIOS	n = 16	1.6	n = 6	1.4	Yes = 83%
EOHS	n = 17	1.6	n = 6	1.4	Yes = 83%
EPID	n = 14	1.5	n = 29	1.3	Yes = 86%
HMAP	n = 19	1.9	n = 22	1.6	Yes = 81%
MPH Professional Option	n = 10	1.3	n = 5	1.1	Yes = 80%

¹Mean score of graduating student self-assessment of concentration-area competencies.

²Response rate of Graduating Student Survey = 100%. All graduating students are required to complete the survey.

³Response rate MPH Alumni Survey = 46%. Survey was sent to 200 MPH alumni and 92 responded.

Table 2.7.e.4: Self-Assessment of Competency Achievement - DrPH Program Graduating Students and Alumni

DrPH Competency Domain Areas	Graduating Student Survey (Summer 2013-Summer 2014) ¹		DrPH Alumni Survey (2011-2014) ³		
	Scale: 1=Excellent 2= Good 3 = Fair 4=Poor		Scale: 1=Excellent 2=Average 3=Below Average 4=Poor		
	(n) Total Responses ²	Mean Score	(n) Total Responses ³	Mean Score	Did the competencies adequately prepare you to work in the field?
Advocacy	n = 5	1.6	n = 6	1.4	Yes = 83%
Communication	n = 5	1.4	n = 6	1.4	Yes = 83%
Community/Cultural Orientation	n = 5	1.6	n = 6	1.4	Yes = 83%
Critical Analysis	n = 5	1.4	n = 6	1.8	Yes = 66% ⁴
Leadership	n = 5	1.4	n = 6	1.6	Yes = 83%
Management	n = 5	1.4	n = 6	1.1	Yes = 83%
Professionalism and Ethics	n = 5	1.4	n = 6	1.6	Yes = 83%

¹Mean score of graduating student self-assessment of DrPH competency domains.

²Response rate of Graduating Student Survey = 100%. All graduating students are required to complete the survey.

³Response rate of DrPH Alumni Survey = 38%. Survey was sent to 16 DrPH alumni and 6 responded.

⁴Critical analysis is consistently rated lower than other domains. To address this issue, in fall 2013 the DrPH implemented a preliminary exam and the Professional and Academic Development (PAD) course which both reinforce critical analysis.

Table 2.7.e.5: Self-Assessment of Competency Achievement – PhD Program Graduating Students and Alumni

PhD Core Competencies	Graduating Student Survey (Summer 2013- Summer 2014) ¹		PhD Alumni Survey (Graduates 2011-2014)		
	(n) Total Responses ²	Mean Score	(n) Total Responses ³	Mean Score	Did the competencies adequately prepare you to work in the field?
Research Theories	n = 5	1.6	n = 4	1	Yes = 100%
Critical Analysis	n = 5	1	n = 4	1.5	Yes = 100%
Research Methodology	n = 5	1.4	n = 4	1	Yes = 100%
Scientific Communications	n = 5	1.8	n = 4	1	Yes = 100%
Ethics	n = 5	1.2	n = 4	1	Yes = 100%
Management	n = 5	1.4	n = 4	1	Yes = 100%
Discovery and Translational Theory	n = 5	1.2	n = 4	1.5	Yes = 100%

¹Mean score of graduating student self-assessment of PhD core competencies.

²Response rate of Graduating Student Survey = 100%. All graduating students are required to complete the survey.

³Response rate PhD Alumni Survey = 80%. Survey was sent to 5 PhD alumni and 3 responded.

2.7.f. Assessment of the extent to which this criterion is met and an analysis of the program’s strengths, weaknesses and plans relating to this criterion.

This criterion is met with commentary.

Strengths:

The SPH has established procedures for evaluating student progress and achievement of competencies. The CPH exam is required and students and alumni perform close to, or above, the national average. Competency achievement is also assessed in various ways and new measures have been implemented to formally measure competencies at the course level. Competency achievement is well evidenced by feedback from employers, as well as by student and alumni self-assessment of competency achievement. MPH and DrPH students remain positive about their preparation for careers in practice and PhD students report high self-rating on the competencies that prepare them for careers in research and academia.

Weaknesses:

Previously the SPH did not request competency evaluation from MPH site supervisors. Beginning spring 2014, competencies will now be assessed. Competency measurement at the course level was implemented in the fall of 2014 using the Canvas learning management system.

Plans:

The SPH will continue to use stakeholder feedback for quality improvement. In addition, formal surveys will be sent to employers and alumni on a more regular timeline and the feedback will be used to further assess program curricula and competencies.

2.8 OTHER GRADUATE PROFESSIONAL DEGREES

If the school offers curricula for graduate professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

2.8.a. Identification of professional degree curricula offered by the school, other than those preparing primarily for public health careers, and a description of the requirements for each.

The other professional degree program listed in the instructional matrix, table 2.1.a is the Master of Health Administration (MHA). A detailed description of the program can be found on the program website and in the CAHME accreditation documents in **Appendix 2.8.a.1** located in the **Electronic Resource File**.

Credits: 60

Length: 5 Semesters

Practical Experience: Internship

Culminating Experience: capstone

Accrediting Body: Commission on Education of Healthcare Management Education (CAHME)

Website: <http://web.unthsc.edu/info/200511/mha>

The mission of the Master of Health Administration (MHA) Program is to create solutions for a healthier community by preparing early career students for effective organizational management through full and part-time campus study that is based on competencies and evidence-based practices needed to become exceptional managers and leaders. The program is designed for aspiring and committed early career professionals who are interested in careers in health services administration in such settings as hospitals; managed care organizations; medical group practices; ambulatory, long-term care, insurance and pharmaceutical companies; consulting firms; government agencies; and for-profit and nonprofit sector organizations

The MHA is a 60 SCH residential program that requires an internship and a final integrative experience which, in combination, allow students to incorporate, synthesize, and apply their knowledge within both an operational and a community context. The result is an organizational perspective that encourages students to integrate knowledge from a range of management disciplines while emphasizing accountability for effective performance.

2.8.b. Identification of the manner in which these curricula assure that students acquire a public health orientation. If this means is common across these other professional degree programs, it need be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program

Students in the MHA program are required to complete three of the five core courses completed by all MPH students: BIOS 5300: Principles of Biostatistics, EPID 5300: Principles of Epidemiology, and HMAP 5300: Introduction to Health Management and Policy. Students are also required to complete HMAP 5328: Human Resources Management, which considers occupational health issues. Social and Behavioral Science content is considered in HMAP 5350: Health Economics, as well as HMAP 5320: Health Services Management and HMAP 6224: Healthcare Management and Quality

Improvement, which consider institutional approaches to population health and patient behavior. In addition, MHA students participate in SPH inter-professional education events that further expose them to public health concepts.

2.8.c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

The MHA is accredited by CAHME, showing that it meets the requirements for the standard of excellence in healthcare management education. The curriculum is also designed to orient students to public health through coursework and inter-professional activities.

Weaknesses:

None identified at this time.

Plans:

MHA students will continue to take the identified public health cores and participate in inter-professional activities that expose them to public health. The program will continue assessing course content to assure that public health content is regularly updated.

2.9 BACHELOR'S DEGREE IN PUBLIC HEALTH

If the school offers baccalaureate public health degrees, they shall include the following elements:

- Required coursework in Public Health Core Knowledge**
- Elective Public Health Coursework**
- Capstone Experience**

2.9.a. Identification of all bachelor's-level majors offered by the school. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose

Not applicable

The UNTHSC School of Public Health does not have any bachelor's degrees.

2.9.b. Description of specific support and resources available in the school for the bachelor's degree programs

Not applicable

2.9.c. Identification of required and elective public health courses for the bachelor's degree(s). Note: The school must demonstrate in Criterion 2.6.c that courses are connected to identified competencies (ie, required and elective public health courses must be listed in the competency matrix in Criterion 2.6.d).

Not applicable

2.9.d. A description of school policies and procedures regarding the capstone experience

Not applicable

2.9.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Not applicable

2.10 OTHER BACHELOR'S DEGREES

If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

2.10.a. Identification of other baccalaureate degrees offered by the school and a description of the requirements for each. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

Not applicable

The UNTHSC School of Public Health does not have any other bachelor's degrees.

2.10.b. Identification of the manner in which these curricula assure that students acquire a public health orientation. If this means is common across these degree programs, it need be described only once. If it varies by program, sufficient information must be provided to assess compliance by each program.

Not applicable

2.10.c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

Not applicable

2.11 ACADEMIC DEGREES

If the school also offers curricula for graduate academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.

2.11.a. Identification of all academic degree programs, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

The School offers one academic degree, the Doctor of Philosophy (PhD) in Public Health Sciences, with concentrations in the five areas of (1) Epidemiology, (2) Biostatistics, (3) Behavioral and Community Health, (4) Environmental Health Sciences, and (5) Health Services and Policy. The PhD is presented in Criterion 2.1.a, **Table 2.1.A.1**. The PhD handbook is available in the **Electronic Resource File - Appendix 4.4.a.1**.

2.11.b. Identification of the means by which the school assures that students in academic curricula acquire a public health orientation. If this means is common across the school, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.

All PhD students obtain a public health orientation through required exposure to the curriculum of the five core courses of the MPH Program (Biostatistics, Epidemiology, Environmental Health, Behavioral and Community Health, and Health Management and Policy), and courses in public health research methods, ethics, and pedagogy. Additional public health emphasis occurs through the incorporation of public health concepts required in the concentration area, elective doctoral courses, and participation in required Professional and Academic Development (PAD) components (journal club, engagement in public health research and professional development activities, public health based professional and community service, and teaching in public health courses). Additionally, the combination of students from each of the five disciplines in the classroom for core and other courses ensures a rich diversity of opinions and viewpoints that are related to the public health curriculum presented.

National, regional and local speakers are invited to present on a diversity of public health and prevention-oriented seminars through the five departments and the Texas Prevention Institute. These serve as a forum to exchange and disseminate information on public health; provide student academic and professional development; and afford students the opportunity to learn about faculty service and research interests, as well as to interact with faculty, academic professionals, public health experts and community partners.

In addition to these seminars, there are numerous other opportunities presented for exposure to public health concepts and the exchange of ideas. These include the annual North Texas Health Forum and Conference on Health Disparities; the monthly works in progress series (WIPS) offered through the SPH Research Committee; the UNTHSC annual research appreciation day, where students and faculty present their ongoing work; and promotion and support for students to attend local, state, and national meetings, e.g., American Public Health Association, Texas Public Health Association, Academy Health, and concentration specific organization meetings.

2.11.c. Identification of the culminating experience required for each academic degree program. If this is common across the school's academic degree programs, it need be described only once. If it varies by degree or program area, sufficient information must be provided to assess compliance by each.

PhD

The PhD Program has three components in its culminating experience. The first component is the PhD comprehensive examination. In order to advance to candidacy for a PhD, students are required to pass a doctoral qualifying examination. The purpose of this examination is to evaluate whether the student has satisfactorily met the doctoral-level competencies and is prepared to proceed with dissertation research. Comprehensive exams for the PhD program are offered one-time each year, typically during the first full week of June. Students who do not pass the exam are offered one re-take. The re-take must be taken no sooner than one full semester later to allow for remedial actions, and no later than June the following year. The Department Chair and PhD Program Director must be notified by the student, with approval from the faculty mentor, at least two-months prior to the planned retake to schedule a date. If a student fails the exam a second time, he or she will normally be given the option to apply their credit-hours toward a terminal Master of Public Health degree. Each concentration implements the comprehensive examination in a different manner, but with similar expectations of rigor with examinations that map back to program competencies. ample comprehensive examinations are provided in **Appendix 2.5.a.1** located in the **Electronic Resource File**.

Behavioral and Community Health: The examination is comprised of a “closed book” written examination that occurs in two 5-hour sessions on consecutive days. The student must submit their responses at the end of each day. An evaluation committee of at least two regular faculty members and another regular faculty member from another SPH department will write and evaluate the examination. The result of the evaluation will be based on consensus or majority vote of the faculty. Students receive a grade of “Pass,” “Pass with Reservations,” or “Fail” on each question. Students must receive a grade of at least “Pass with Reservations” on all sections of the examination to advance to candidacy. If the faculty examination committee believes one or more examination questions need further evaluation, they may request a follow-up oral examination after the first examination responses are graded. Oral examinations are scheduled within two weeks of the student being notified of the results of their examination. Students who fail any part of the examination may be assigned remedial work by their faculty committee, including the possibility of additional coursework. Students will be allowed to re-take the comprehensive examination one time.

Biostatistics: The examination is a two-part exam. Part one is a 3-hour written exam constructed of free-response questions covering mainly mathematical statistics, and is completely closed reference. Part two is a three-day take-home exam covering, mainly, statistical methods and data analysis. The written examination is usually given on a Friday morning. After completion, the student is given the take-home portion to be returned the following Monday. The exam is initially graded by the department Ph.D. Comprehensive Exam Coordinator, then distributed to the Biostatistics faculty for evaluation and a recommendation of “Pass,” “Reassess,” “Conditional Fail,” or “Fail.” Students must receive a “Pass” to advance to candidacy. Students who receive a “Fail” are immediately terminated from the program, whereas a “Conditional Fail” allows the student to sit for the exam again during the next testing cycle. Students who receive a “Reassess,” are administered an additional oral examination within two weeks of the written exam, after which, the student will receive either a “Pass” or “Conditional Fail.”

Environmental Health: This written comprehensive examination is in the form of a seven-day take-home exam consisting of three question types covering the competency areas of the doctoral program and concentration. The question types include: (1) critical analysis of a peer-reviewed manuscript; (2) organization and analyses of a database; and (3) an evaluation of a case-study. Each of the 3 questions is judged independently by a minimum of three primary review faculty members and presented at a meeting of department faculty. Students must receive a “Pass” on all sections of the examination to advance to candidacy. If the faculty examination committee believes one or more examination questions need further evaluation, they may request a follow-up oral examination. Students who receive a “Not Pass” for any section of the examination, in consultation with their faculty committee, will be assigned remedial work, including the possibility of additional coursework, and only need to retake the failed portion(s).

Epidemiology: This written comprehensive examination is in the form of a 7-day take-home exam consisting of five question types covering the overarching competency areas of Research Theory, Critical Analysis, Research Methodology, Scientific Communication, Ethics and Discovery/Translational Research. The question types include: (1) critical analysis of a peer-reviewed manuscript; (2) organization and analyses of a database; (3) development of a study design and analytic methodology to address a self-generated hypothesis; (4) critical evaluation of a contemporary ethical issue; and (5) application and articulation of methods to resolve a methodological issue. Each of the 5 questions is judged independently by a minimum of three primary review faculty members, and presented at a meeting of department faculty. The student’s response to each question will be considered a “Pass” if the majority of the faculty vote “Pass.” In order to pass the examination, a student must pass by majority vote 4 of the 5 questions. An oral presentation may be requested for one or more questions if the faculty decides, by majority vote, that further evaluation or clarification is needed in order to determine whether the student has adequately demonstrated competency. Those students who receive a “Not Pass” for two or three questions are given one opportunity to re-take the exam for the questions receiving a “Not Pass.” If more than three questions receive a “Not Pass” the student must retake the entire exam.

Health Services and Policy: In consultation with the doctoral exam committee students choose to do either (1) a 5 day open-book, closed session (8am - 5pm) exam where they write an NIH format grant proposal on a given topic, or (2) a 5 day open-book, closed session (8am - 5pm) where they are asked to answer a research question using a dataset that is provided. After completion of (1) or (2), the student gives an oral presentation of the project to the doctoral exam committee. The exam addresses all HMAP PhD competencies and is administered after completion of required coursework. Within one week following completion of the project, the student will be required to present his/her findings to the doctoral exam committee. The exam may receive either a “Pass” or “Fail,” as determined by majority vote of the doctoral exam committee. In the event of a tie, the department chair casts the deciding vote. Students are notified of exam results, and comments from the doctoral exam committee are also provided. In the event of a “Fail,” the student is required to retake the exam when it is next offered. The student will be expected to consult with the doctoral exam committee and advisor/major professor regarding preparation for the next scheduled exam. This preparation may include retaking relevant courses.

The second and third component of the PhD culminating experience is the submission of a written and oral defense of the dissertation proposal, and then the final dissertation defense. These components are the same for all concentrations. This process allows for demonstration of: integration and synthesis of critical analysis in identifying knowledge gaps and proposing questions in the form of goals, aims and hypothesis to address these needs; design of ethical research

methodologies to answer the developed questions; and skill in communication. It is required that a student receive unanimous approval for the dissertation proposal defense from the Dissertation Committee prior to beginning the dissertation research. If the dissertation proposal is found to be not acceptable the candidate must address the inadequacies or propose a different research question. The final component is the dissertation defense, where the student is required to submit a written dissertation and perform an oral defense as the final academic assessment. If a dissertation is found to be not acceptable by the student's PhD Dissertation Committee, even with major revisions, the candidate is not recommended for the degree and may be dismissed from the program.

2.11.d. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Students in all the concentrations of the PhD in Public Health Sciences degree program acquire a broad public health orientation, as well as a depth of education in a specific discipline. They accomplish this by taking core public health courses in combination with their concentration specific courses, interacting with students in different areas, performing extra curricula professional and academic development activities, and participating in school-wide activities that address core public health competencies.

Weaknesses:

None

Plans:

We will continue to provide a competency-based program. We plan on expanding opportunities for doctoral students to gain teaching experiences, and on determining ways to get academic students even more involved with professional development-based activities.

2.12 DOCTORAL DEGREES

The school shall offer at least three doctoral degree programs that are relevant to three of the five areas of basic public health knowledge.

2.12.a. Identification of all doctoral programs offered by the school, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose. If the school is a new applicant and has graduates from only one doctoral program, a description of plans and a timetable for graduating students from the other two doctoral programs must be presented, with university documentation supporting the school's projections.

The School of Public Health offers two doctoral degrees, which comprise a total of six areas of specialization. Both advanced degree programs are designed to prepare leaders to advance the field of public health.

The Doctor of Public Health Degree in Public Health Practice (DrPH) emphasizes the scholarship of application. DrPH students focus on optimizing public health practice through the application of existing research. During the program, students develop skills in translating research findings into evidence-based practice in real-world community and health system settings. Courses focus on theory, research methods, organizational management, policy, advocacy, implementation science, program planning and evaluation, and community engagement. The prior DrPH, with concentrations, had offered specialization in the areas of Biostatistics, Epidemiology, Health Management and Policy and Social and Behavioral Science. In the fall of 2011, this program was modified to a single DrPH in Public Health Practice, and a PhD program with the five concentration areas began. Students in the DrPH Concentration with fewer than 24 SCH were offered the opportunity to apply to the PhD program or, the new DrPH program, or to complete the program into which they were originally accepted.

The Doctor of Philosophy Degree in Public Health Science (PhD) emphasizes the scholarship of discovery and integration. The program consists of five areas of concentration (Behavioral and Community Health, Biostatistics, Epidemiology, Environmental Health Sciences, and Health Services and Policy). PhD students focus on the creation of new knowledge through the testing of hypotheses. During the program, students develop skills in generating research questions to advance knowledge, research design, grant proposal development, collection and analysis of data, and communication of scientific findings. Courses focus on theory, research methods, statistics, and scientific writing. The doctoral programs were identified in **Table 2.1.a.1** under Criterion 2.1.a.

2.12.b. Description of specific support and resources available to doctoral students including traineeships, mentorship opportunities, etc.

Previously, the Associate Dean for Academic Affairs acted as the Director for both doctoral programs, however, due to the growth of the doctoral programs, each now has its own Director. This allows for greater attention for overseeing student progress and program development. Each doctoral program also has a committee for program oversight. Both the PhD and DrPH program committees are composed of a faculty member from each department or concentration within the School of Public Health that is active within the respective doctoral programs, and these individuals

serve as voting committee members. Also on each committee is the Associate Dean for Academic Affairs, staff members from the Office of Admission and Academic Services representing both recruitment and student services, and a student representative elected through the Public Health Student Government Association.

In support of the importance that mentoring plays in the careers of doctoral students, doctoral students are accepted into the PhD program that have a match to a faculty member that can be a mentor based on the concentration and focus area. This promotes involvement in research activities from the beginning of the student's program of study. Similarly, beginning in their first semester, DrPH students are also matched to faculty with existing community-based or health system-based projects in the DFW Metroplex. In the DrPH program, links with community organizations and health systems are important, and as such faculty mentors involve DrPH students in the academic-community partnerships of the School of Public Health.

The School has an orientation process for all students. As many activities concern all students, MPH and doctoral students are together for these sessions. For content specific to the doctoral programs, doctoral students meet together. The objectives of this orientation program are to 1) provide incoming students with relevant programmatic and institutional information needed to be successful; 2) establish close connections to the faculty; and 3) foster academic and social relationships with other members of their cohort.

Up to fifteen PhD and six DrPH doctoral students each year are offered a four-year partial scholarship starting the first year. Ten additional one-year competitive scholarships based on academic performance are available and offered following review by both the PhD and DrPH Doctoral committees and the School of Public Health Scholarship Committee. For doctoral students who meet the exceptional criteria, receive competitive scholarships, and are out of state, these scholarships allow for in-state tuition during the year these scholarships are provided. Doctoral students are also granted priority status for assignment as teaching assistantships, which often helps fund students in subsequent years if they are not fully supported through their faculty mentors or other funding awards.

Advanced doctoral students may also be eligible to qualify as Teaching Fellows and be reimbursed for academic teaching. The School continues to work on growing its scholarship funds to be able to provide additional funding and funding for continuous years to all doctoral students. For 2013-2014, teaching or research assistant positions were offered to 83% of the PhD and 100% of the DrPH new entering students, and to 41% of all PhD and 39% of all DrPH students. For 2014-2015, teaching or research assistant positions were offered to 83% of the PhD entering students, and 67% of the DrPH entering students, and 46% of all PhD and 60% of all DrPH students. The SPH offered funding of some type to all PhD students. The mentoring and instructional opportunities resulting from these assistantships enhance the training students receive in the classroom.

2.12.c. Data on student progression through each of the school's doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program. See CEPH Template 2.10.1.

Table 2.12.c.1 below shows progression of students through the doctoral programs.

Table 2.12.c.1: Doctoral Student Data for AY 2013-2014 (CEPH Data Template 2.10.1)

	DrPH Public Health Practice	PhD Public Health Science	DrPH Conc. Specific
# Newly Admitted in AY 2013-2014	5	5	0
# Currently Enrolled (Total)	17	25	1
# Completed Coursework during AY 2013-2014	0	1	0
# Advanced to Candidacy (Cumulative) during AY 2013-2014 ¹	0	2	0
# Graduated in AY 2013-2014	0	2	4

¹For the PhD program this is satisfactory completion of the comprehensive exam. For the DrPH program this is satisfactory completion of the integrated competency exam.

2.12.d. Identification of specific coursework, for each degree, that is aimed at doctoral-level education.

Doctor of Philosophy in Public Health Sciences Program

The PhD program in Public Health Sciences prepares professionals for research, teaching, and service with the overall objective of improving the health of populations. To meet this objective, all students in the program pursue excellence in conducting research and disseminating knowledge. The primary focus is on research that advances knowledge and facilitates discovery regarding etiology, interventions, and policies that promote health at the individual, population, societal, and/or global levels. The PhD program requires a minimum of 90-semester credit hours (SCH) and a post-baccalaureate degree and is offered on a full time basis. The credit hours are divided between public health sciences core courses (33 SCH), the dissertation (12), and concentration area courses (45). A student may apply up to 42 SCH of previously taken graduate level courses toward the completion of the PhD coursework (Advanced Standing). All such courses are subject to approval by the Academic Advisor and the PhD Program Committee. In addition, all students must satisfactorily complete a comprehensive exam and professional and academic development (PAD) requirements.

Upon completion of the PhD in Public Health Sciences core courses, the student will have demonstrated proficiency in the following competencies:

- **Research Theories:** Synthesize historical, contemporary, and emerging theories and paradigms of significance to public health.
- **Critical Analysis:** Critically evaluate the strengths and weaknesses of existing research evidence and identify significant gaps in knowledge.
- **Research Methodology:** Comprehend, design and apply relevant and advanced research methods based on rigorous standards of evidence.
- **Scientific Communications:** Develop professional skills in scientific and grant writing, oral communication, and teaching.
- **Ethics:** Uphold the highest ethical standards in all professional endeavors, including the design and implementation of research and the participation of human subjects.
- **Discovery and Translational Theory:** Conduct investigative research, including areas that facilitate the translation and application of discovery to practice.

Common requirements are shown in **Table 2.12.d.1** below. Following sections indicate the additional course work required as part of each concentration.

Table 2.12.d.1: PhD Program Core Courses

Course #	Credit Hours	Course Name
BIOS 5300 or BIOS 5301	3	Principles of Biostatistics
EOHS 5300	3	Environmental Determinants of Health I
EPID 5300	3	Principles of Epidemiology
HMAP 5300	3	Intro to Health Management and Policy
BACH 5300	3	Theoretical Foundations of Individual and Community Health
BIOS 5310	3	Intermediate Biostatistics
BIOS 6300	3	Advanced Methods for Biostatistics
HMAP 6360	3	Ethical Issues in Public Health
PHED 6314	3	Research Methods for Public Health Studies I
PHED 6118	1	Research Methods for Public Health Studies II
PHED 6220	2	Scientific and Grant Writing
PHED 6321	3	Pedagogy in Public Health
Total Core Courses	33	
6000 ¹	0	PhD Comprehensive Exam
6395	12	Doctoral Dissertation
6051 ²	0	PhD Professional and Academic Development
Total Culminating Experiences/Dissertation	12	
Total Core Program Credit Hours	45	

¹ Prefix for course number is based on department offerings (BACH, BIOS, EOHS, EPID, HMAP, and PHED)

² New course number beginning fall of 2015. Professional and Academic Development (PAD) experiences comprise annual activities in the areas of research, service, teaching and journal club, with the accumulations of minimum points each year based on cumulative credit hours earned.

Biostatistics PhD Concentration

The concentration in biostatistics (**presented in Table 2.12.d.2**) focuses on the reasoning and methods for using data as evidence to address public health and biomedical questions. It is an approach and a set of tools for designing studies, analyzing data, quantifying evidence, and making decisions. The PhD curriculum will prepare the student for three roles (researcher, collaborator/communicator, and educator), that are commonly expected of a Biostatistician. Upon completion of the PhD in Public Health Sciences degree with a concentration in Biostatistics, the student will have demonstrated additional proficiency in the following research competencies:

- Perform independent research where original/new biostatistical foundations, methodologies or applications are developed.
- Review and synthesize literature and proposals critically from a biostatistical point of view in preparation for future peer-reviewed publications and grant proposals.
- Adapt and apply existing statistical methods as dictated by the needs of a particular study or project as it relates to, but not limited to, study design and analysis.
- Effectively translate biostatistical ideas, methods, and results to collaborating colleagues.
- Identify biostatistical concepts and methods needed by specific population groups.
- Disseminate the concepts and methods effectively through lectures and written materials.

Table 2.12.d.2: Biostatistics Concentration

Course #	Credit Hours	Course Name
BIOS 6310	3	Probability and Statistical Inference
BIOS 6311	3	Linear Models
BIOS 6312	3	Methods of Survey Sampling
BIOS 6314	3	Categorical Data Analysis
BIOS 6320	3	Biostatistical Research and Consulting
BIOS 6322	3	Longitudinal Data Analysis
BIOS 6324	3	Survival Analysis
BIOS 6326	3	Methods of Clinical Trials
EPID 5312	3	Survey Research & Questionnaire Design
EPID 5313	3	Intro to Database Management and Statistical Computing
EPID 5310	3	Intermediate Epidemiology
Total Concentration Core Required Courses	33	
Concentration Electives ¹	12	
Total Concentration Courses Credit Hours	45	

¹Electives - 12 semester credit hours with no more than 9 semester credit hours at the 5000 level. Advisor approval must be provided for all electives.

Behavioral and Community Health PhD Concentration

The concentration in behavioral and community health (presented in **Table 2.12.d.3**) provides a rigorous scientific approach to the study of the psychological, social and cultural factors that impact human health and health behavior. An understanding of these factors at multiple social-ecological levels, including individual, interpersonal, organizational, community, and population levels, will be expected. Students will be prepared to perform basic and applied research, to teach, and to serve communities with the goals of promoting healthy lifestyles, reducing risk behaviors, and eliminating health disparities related to race, ethnicity, socioeconomic status, or gender. Upon completion of the PhD in Public Health Sciences degree with a concentration in Behavioral and Community Health, the student will have demonstrated proficiency in the following additional competencies:

- Identify the role and impact of the psychological, behavioral, social, and cultural factors that promote population health as well as those which contribute to increased morbidity and mortality.
- Effectively engage communities as partners in promoting health, reducing risk behavior, and changing social conditions that undermine public health and safety.
- Develop, test, and implement interventions designed to achieve social and behavioral change.
- Conduct scientifically rigorous research on the social and/or behavioral determinants of health, and ways to reduce health disparities.

Table 2.12.d.3: Behavioral and Community Health Concentration

Course #	Credit Hours	Course Name
BACH 5314	3	Quantitative Research Methods
BACH 6300	3	Advanced Theories of Individual and Community Health
BACH 6310	3	Qualitative Research Methods
BACH 5313	3	Introduction to Statistical Packages
BIOS 6312	3	Methods of Survey Sampling
BIOS 6314	3	Categorical Data Analysis
EPID 5310	3	Intermediate Epidemiology
HMAP 6380	3	Health Services Research I
Total Concentration Core Required Courses	24	
Concentration Electives ¹	21	
Total Concentration Courses Credit Hours	45	

¹Electives-21 semester credit hours with no more than 9 semester credit hours at the 5000 level. Advisor approval must be provided for all electives.

Environmental Health Sciences PhD Concentration

The concentration in environmental health sciences (presented in **Table 2.12.d.4**) will prepare students to research, teach and apply knowledge on the interrelationships between the environment and human health and their regional, national and global significance. Students will be equipped to apply their research skills and knowledge to recognize, evaluate and prevent exposures that may adversely impact human health and environmental quality, whether in the natural or human-made environment. Upon completion of the PhD in Public Health Sciences degree with a concentration in Environmental Health Sciences, the student will have demonstrated proficiency in the following additional competencies:

- Identify environmental agents and their sources, and discuss and describe the implications of sources, transport mechanisms, toxicodynamics, genetics, physiologic, psychological, social and cultural factors that influence exposure and/or health outcomes.
- Apply risk assessment and management strategies to environmental and occupational hazards.
- Employ the paradigms of environmental and occupational health (nature and sources of hazards; exposure, risk assessment and outcomes measures; susceptibility, culture, behavior, and disparities) to assess and design studies with environmental and occupational health implications.

Table 2.12.d.4: Environmental Health Sciences Concentration

Course #	Credit Hours	Course Name
EOHS 5331	3	Environmental & Occupational Sampling and Analysis Methods
EOHS 6340	3	Human Health Risk Analysis and Exposure Assessment
EOHS 5350	3	Environmental & Occupational Toxicology
EOHS 6300	3	Environmental Determinants of Health 2
EOHS 6391	3	Advanced Topics in Environmental and Occupational Health Sciences
EPID 5310	3	Intermediate Epidemiology
BIOS 6314	3	Categorical Data Analysis
Total Concentration Required Courses	21	
Concentration Electives ¹	24	
Total Concentration Courses Credit Hours	45	

¹Electives-24 semester credit hours with no more than 15 semester credit hours at the 5000 level, and 9 semester based credit hours must be methods courses. Advisor approval must be provided for all electives.

Epidemiology PhD Concentration

The concentration in epidemiology (presented in **Table 2.12.d.5**) prepares students contemplating a career as scientists employed in academia, research institutions, or in research units within industry or other agencies and organizations. The program is comprehensive, with a strong emphasis on epidemiologic methodology, theory, and practice. This broad and rigorous training will fully equip students with the skills they need to be engaged in conducting cutting-edge epidemiologic research within the many areas of public health. Upon completion of the PhD in Public Health Sciences degree with a concentration in Epidemiology, the student will have demonstrated proficiency in the following additional competencies:

- Describe the theory underlying epidemiological methods,
- Comprehend and apply epidemiologic methods to solve a variety of public health problems, and
- Conduct primarily etiologic or other analytic and descriptive research studies through appropriate formulation of a health problem, and the collection, assimilation, analysis, interpretation, and dissemination of data on human populations and the physical, chemical and biologic environment.

Table 2.12.d.5: Epidemiology Concentration

Course #	Credit Hours	Course Name
EPID 5312	3	Survey Research and Questionnaire Design
EPID 5313	3	Intro to Database Management and Statistical Computing
EPID 5314	3	Applied Data Analysis in Epidemiology
EPID 5318	3	Chronic Disease Epidemiology
EPID 5320	3	Infectious Disease Epidemiology
EPID 5310	3	Intermediate Epidemiology
EPID 6328	3	Secondary Data Analysis
EPID 6310	3	Advanced Methods in Epidemiology I
EPID 6312	3	Advanced Methods in Epidemiology II
EPID 6316	3	Molecular Epidemiology
BIOS 6326	3	Methods of Clinical Trials
BIOS 6314	3	Categorical Data Analysis
BIOS 6324	3	Survival Analysis
Total Concentration Required Courses	39	
Concentration Electives ¹	6	
Total Concentration Courses Credit Hours	45	

¹Electives-6 semester credit hours with no more than 3 semester credit hours at the 5000 level. Advisor approval must be provided for all electives.

Health Services and Policy PhD Concentration

The concentration of health services and policy (presented in **Table 2.12.d.6**) prepares students for careers in research, teaching, and service in the broad field of health care services and policy. The program's aim is to strengthen students' knowledge and skills with respect to theories, research methodologies, and analytical skills. By developing these tools, students will be able to address a variety of issues, including health care access, cost-effectiveness, and process quality and outcomes evaluation. Upon completion of the PhD in Public Health Sciences degree with a concentration in Health Services and Policy, the student will have demonstrated proficiency in the following additional competencies:

- Apply knowledge of the structures, performance, quality, policy, and environmental context of health and health care to formulate solutions for health policy problems.
- Identify and compare survey, qualitative and mixed methods of collecting primary health and health care data, and assemble secondary data from existing public and private sources.
- Develop a conceptual model to specify study constructs for a health services and policy

research question and develop variables that reliably and validly measure these constructs.

- Ensure the ethical and responsible conduct of research in the design, implementation, and dissemination of health services research.

Table 2.12.d.6: Health Services and Policy Concentration

Course #	Credit Hours	Course Name
HMAP 5326	3	Public Health Program Planning and Evaluation
HMAP 5350	3	Health Economics
HMAP 6300	3	Health Care Systems
HMAP 6310	3	Advanced Health Policy
HMAP 6330	3	Health Insurance and Managed Care
HMAP 6340	3	Health Care Law
HMAP 6350	3	Advanced Health Economics
HMAP 6380	3	Health Services Research I
HMAP 6382	3	Health Services Research II
Total Concentration Core Required Courses	27	
Concentration Electives ¹	18	
Total Concentration Courses Credit Hours	45	

¹Electives-18 semester credit hours with no more than 9 semester credit hours at the 5000 level. Advisor approval must be provided for all electives.

Doctor of Public Health Practice Program

The Doctor of Public Health (DrPH) degree in Public Health Practice (presented in **Table 2.12.d.7**) is an indication of distinguished scholarly accomplishment in the professional field. The DrPH program requires a minimum of 60-semester credit hours (SCH) post master's degree, and is offered on a full time or part-time basis.

The DrPH curriculum integrates the five core areas of public health, emphasizing work experience relevant to this advanced degree and addressing learning methods in the context of public health practice. To develop leadership skills, students interact and collaborate with senior public health practitioners through a variety of courses and the residency. Program content and learning experiences will address the public health competencies identified by the Association of Schools of Public Health (ASPH). Overall, upon completion of the DrPH program, the graduate will be able to demonstrate competencies in:

- **Advocacy** - Use scientific knowledge and ethical considerations to create and sustain active support for a cause or position with the intent of influencing decision-making regarding policies, practices and beliefs that advance public health at local, tribal, state, national, and international levels.
- **Communication** - Study and use communication strategies to inform and influence individual and community decisions that enhance health.
- **Community/Cultural Orientation** - Interact and communicate effectively with people of different cultures. This includes having:
 - An awareness of one's own cultural worldview;
 - Mature attitudes toward cultural differences;
 - Knowledge of different cultural practices and worldviews; and
 - Possession of cross-cultural skills.
- **Critical Analysis** - Develop, synthesize, interpret, and apply evidence-based research and theory from a broad range of disciplines and health-related data sources to facilitate studies, interventions and policies for promoting population health.

- **Leadership** - Inspire trust and motivate individuals and teams to use evidence-based strategies to envision and communicate a positive future that enhances essential public health services for all populations.
- **Management** - Provide fiscally responsible strategic and operational guidance for a variety of health -related organizations, both public and private, for the purpose of achieving individual and community health wellness.
- **Professionalism and Ethics** - Identify ethical issues, balance the claims of personal liberty against concerns about population health, consider the full spectrum of the determinants of health, identify the range of options for interventions, demonstrate the values and professional practices which form the basis of public health practice; understand and act upon the ethical concepts of social justice, virtue, and human rights; model accountability; and formulate and commit to personal and institutional development plans.

Table 2.12.d.7: DrPH in Public Health Practice

Course #	Credit Hours	Course Name
Pre-requisite required courses, or equivalent, prior to starting DrPH Program		
HMAP 5300 ¹	3	Intro to Health Management & Policy
BIOS 5300 ¹	3	Principles of Biostatistics
EOHS 5300 ¹	3	Environmental Determinants of Health I
BACH 5300 ¹	3	Theoretical Foundations of Individual & Community Health
EPID 5300 ¹	3	Principles of Epidemiology
DrPH Program Required Courses		
BACH 6300	3	Advanced Theories of Individual and Community Health
HMAP 6322	3	Organizational Management
HMAP 5330	3	Health Finance I
HMAP 5328	3	Human Resources Management
HMAP 5340	3	Public Health Law
HMAP 6320	3	Leadership for Public Health
HMAP 6360	3	Ethical Issues in Public Health
HMAP 6310	3	Advanced Health Policy
EPID 6311	3	Applied Epidemiology for Public Health
PHED 5000	0	CPH Comprehensive Examination
PHED 6000	0	Preliminary Examination
PHED 6002	0	Integrated Competency Evaluation
PHED 6050	0	DrPH Professional and Academic Development
PHED 6122	1	Professional Development in Public Health Practice I
PHED 6314	3	Methods for Public Health Studies I
PHED 6316	3	Advanced Program Design & Evaluation for Public Health Practice
PHED 6118	1	Methods for Public Health Studies II
PHED 6325	3	Evidence-Based Public Health
PHED 6124	1	Professional Development in Public Health Practice II
PHED 6397	9	Doctor in Public Health Residency
Total Credit Hours Required Courses	48	
Concentration Electives²	12	
Total Credit Hours	60	

¹MPH Core pre-requisite courses required for students entering DrPH program without an MPH.

²Electives - 12 semester credit hours with no more than 6 semester credit hours at the 5000 level. Advisor approval must be provided for all electives.

2.12.e. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths:

Two distinct doctoral programs have been developed, one on the scholarship of research and the other on the scholarship of practice. The PhD program allows for five areas of specialization culminating in a dissertation and an oral defense. The DrPH program culminates in a residency experience and project, and a residency oral defense and symposia presentation. These programs provide students with courses that address public health knowledge, practice and leadership.

Weaknesses:

The SPH continues its development of its new DrPH degree program. An important area for improvement is the perception of some faculty members of an applied doctoral degree. As most faculty members have a PhD degree, developing an understanding of the legitimacy of the new DrPH degree, which does not include a traditional dissertation, is ongoing. Second, the DrPH degree must develop more advanced courses to increase elective offerings. Areas for potential courses might include implementation science, participatory approaches to community practice, the history of public health, and public health systems and organizations.

Plans:

The school is working to increase the funding, scholarship amount, and funding period for doctoral students in both programs to make it more competitive with that of similar schools of public health, as well as to improve recruitment and retention of promising students. With the addition of new faculty, the respective departments are adding additional advanced course work for doctoral students. The School is also following the results of the ASPPH Framing the Future initiative with regard to recommendations for the DrPH degree.

2.13 JOINT DEGREES

Joint Degrees. If the school offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.

2.13.a. Identification of joint degree programs offered by the school. The instructional matrix in Criterion 2.1.a may be referenced for this purpose

The UNTHSC-SPH defines dual degree programs as formal programs that result in the awarding of two degrees. In this capacity, the SPH has three dual degree programs with the MPH. These programs are outlined in the instructional matrix in Criterion 2.1.a. and are also listed below:

- MPH/MS-Anthropology, a collaboration with the Department of Anthropology at the University of North Texas - Denton
- MPH/MSN, a collaboration with the School of Nursing at the University of Texas - Arlington
- MPH/DO, a collaboration with the Texas College of Osteopathic Medicine (TCOM) at the UNTHSC.

Students in these programs are evaluated and admitted separately to each school. Admission to one program does not assure admission to the other. Students complete requirements for each degree separately and receive diplomas and transcripts from each of the participating schools.

In each of the following programs, students must complete the MPH core curriculum, which includes a course in biostatistics, epidemiology, environmental health, health management and policy, and community health. **Table 2.13.a.1** shows new student enrollment for each of the dual-degree programs from 2011-12 to present.

Table 2.13.a.1: New Enrollment in Dual Degree Programs

Dual Degree Program	2011-2012	2012-2013	2013-2014	2014-2015
MPH/MS-Anthropology	0	0	6	3
MPH/MSN	0	0	1	1
MPH/DO	0	4	2	1

2.13.b. A list and description of how each joint degree program differs from the standard degree program. The school must explain the rationale for any credit sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.

Students in the dual degree programs are accepted using the same admission process and criteria required for all MPH students. The required course of study signifying the MPH coursework, shared coursework, and the required coursework from the secondary program is outlined in each program profile found online at: http://web.unthsc.edu/info/20005/school_of_public_health/2994/2014-2015_program_profile

MPH/MS-Anthropology

The MPH/MS Applied Anthropology dual degree program prepares public health professionals with an in-depth knowledge of medical anthropology. Students learn how to apply anthropological concepts to problems in public health practice. Students are prepared to perform community-based

research, analyze social and cultural influences on health and illness, and advocate for the elimination of local and global health disparities. This 2.5 year program prepares students for careers in research, public health, and public policy planning relating to health and health care in the U.S. or in an international setting.

The MPH/MS Applied Anthropology dual degree program is comprised of 63 credit hours. Students complete 36 credit hours in Public Health and 27 credit hours in Applied Anthropology to satisfy master's degree requirements in both Public Health and Applied Anthropology. Within the later 27 credit hours, 18 hours are shared by the UNTHSC School of Public Health and the Department of Applied Anthropology at UNT-Denton. A total of 12 of these credit hours from UNT-Denton (ANTH 5210, ANTH 5201, ANTH 5031, & ANTH 5041) are transferred to the students' MPH degree program to satisfy UNTHSC degree requirements. With the exception of Quantitative Research Methods (BACH 5314) and Qualitative Research Methods (BACH 6310), students in the MPH/MS Applied Anthropology dual degree program complete all required coursework in the UNTHSC MPH-Community Health concentration. Ethnographic and Qualitative Methods (ANTH 5031) and Quantitative Methods (ANTH 5041) at UNT-Denton are substituted for BACH 5314 and BACH 6310. Students complete Public Health Practice Experience (BACH 5297) and Applied Thesis (ANTH 5950) concurrently. Applied Thesis (ANTH 5950) includes a field experience that focuses on some aspect of public health. Consistent with School of Public Health policy, students in the MPH/MS Applied Anthropology dual degree program do not take the MPH Comprehensive examination because they complete a thesis. The MPH/MS Applied Anthropology curriculum is presented in **Table 2.13.b.1.**

Table 2.13.b.1: MPH/MS Applied Anthropology Dual Degree (63 Credits)

SPH Required Courses		36 Credit Hours
BACH 5300	Theoretical Foundations of Individual and Community Health	3
BIOS 5300	Biostatistics for Public Health I	3
EOHS 5300	Environmental Determinants of Health	3
EPID 5300	Principles of Epidemiology	3
HMAP 5300	Introduction to Health Management and Policy	3
BACH 5313	Data Management and Statistical Computing	3
BACH 5340	Community Assessment and Program Planning	3
BACH 5345	Participatory Approaches to Improving Community Health	3
BACH 5350	Community Health Program Evaluation	3
	Elective (<i>any course in SPH</i>)	3
	Elective (<i>any course in SPH</i>)	3
BACH 5297	Public Health Practice Experience (<i>Students take BACH 5297 and ANTH 5950 – Applied Thesis concurrently</i>)	1.5
PHED 5197	MPH Professional and Academic Development	1.5
Courses Accepted from UNT-Denton Department of Applied Anthropology		18 Credit Hours
ANTH 5210	Anthropology in Public Health	3
ANTH 5201	Medical Anthropology	3
ANTH 5031	Ethnographic and Qualitative Methods	3
ANTH 5041	Quantitative Methods	3
UNT MS Anthropology Required Courses		9 Credit Hours
ANTH 5010	Thought and Praxis I	3
ANTH 5021	Thought and Praxis II	3
ANTH 5050	Preparation for Practice and Applied Thesis	3
Culminating Requirements		6 Credit Hours
PHED 5000	Certified in Public Health Examination	0
ANTH 5950	Applied Thesis (6 SCH)	6

DO/MPH

The primary goal of the DO/MPH program is to provide clinical professionals with specialized public health training to develop, integrate, and apply culturally competent social, psychological, and biomedical approaches to the promotion and preservation of health. Physicians with training in public health may work in a wide range of positions in public, private, or academic settings. The MPH degree offers the physician a significant advantage when seeking jobs that involve planning and managing health systems, performing clinical research, determining the causes of disease, or planning and implementing disease control strategies. Physicians with the MPH degree work in health departments, federal agencies, managed care and other health provider organizations, schools of public health and medicine, in the private practice arena, and in many other federal and international agencies.

The MPH/DO student completes the coursework as outlined in the 42-credit Professional Option program profile using 12 semester credit hours that are transferred from the DO rural medicine program as elective credit. The DO/MPH curriculum is presented in **Table 2.13.b.2**.

Table 2.13.b.2: DO/MPH Dual Degree (42 Credits)

SPH Required Courses		25.5 Credit Hours
BACH 5300	Theoretical Foundations of Individual and Community Health	3
BIOS 5300	Biostatistics for Public Health I	3
EOHS 5300	Environmental Determinants of Health	3
EPID 5300	Principles of Epidemiology	3
HMAP 5300	Introduction to Health Management and Policy	3
HMAP 6360	Ethical Issues in Public Health	3
HMAP 6320	Leadership in Public Health	3
HMAP 5320	Health Services Management	3
PHED 5000	Certified in Public Health Examination	0
PHED 5197	Professional and Academic Development	1.5
Courses Accepted/Transferred from Texas College of Osteopathic Medicine (TCOM)		12 SCH
MEDE 7411	Fundamentals of Rural Medicine Practice I	3
MEDE 7624	Applied Principles of Rural Medicine I	3
MEDE 7416	Fundamentals of Rural Medicine Practice II	3
MEDE 7220	Applied Principles of Rural Medicine II	3
Culminating Requirements		4.5 SCH
PHED 5297	Public Health Practice Experience	1.5
PHED 5302	MPH-PO Capstone	3

MPH/MSN

The MPH/MSN is a 57 semester credit hour cooperative program offered by the University of North Texas Health Science Center School of Public Health and the University of Texas at Arlington School of Nursing (UTA-SON). The Health Management & Policy concentration is oriented toward nursing professionals who want to supplement their training with practical public health experience that is specifically geared toward management and policy.

The UNTHSC School of Public Health is not currently accepting applications for the MPH/MSN dual degree program due to the restructuring of the MSN program at the University of Texas –Arlington. At this time, their program is not accepting applications. The students who are currently enrolled will continue to follow the coursework that was provided to them upon admission. The MPH/MSN curriculum is presented in **Table 2.13.b.3**.

Table 2.13.b.3: MPH/MSN Dual Degree (57 Credits)

SPH Required Courses		24 Credit Hours
BACH 5300	Theoretical Foundations of Individual and Community Health	3
BIOS 5300	Biostatistics for Public Health I	3
EOHS 5300	Environmental Determinants of Health	3
EPID 5300	Principles of Epidemiology	3
HMAP 5300	Introduction to Health Management and Policy	3
HMAP 5326	Program Planning and Evaluation	3
HMAP 5350	Health Economics	3
HMAP 5340	Public Health Law	3
Courses Accepted/Transferred from UTA School of Nursing		9 Credit Hours
NURS 5382	Health Policy (Pre-req N5327) (Credit for HMAP 5312 – Health Politics and Policy)	3
NURS 5341	<i>Financial Management (Pre-req N5327) (Credit for HMAP 5330 – Health Finance I; 45 Practicum Hours)</i>	3
NURS 5342	Management of Nursing Operations (Pre-req N5341) (Credit for HMAP 5320 – Health Services Management; 45 Practicum Hours)	3
UTA School of Nursing Required Courses		18 Credit Hours
NURS 5327	NURS 5327 Theory FA/SP 3	3
NURS 5301	NURS 5301 Research FA/SP 3	3
NURS 5328	NURS 5328 Theory & Research Application (Pre-req N5327 & N5301) FA/SP 3	3
NURS 5311	NURS 5311 Nursing Management (Pre-req N5327) FA 3	3
NURS 5339	NURS 5339 Role of Administrator (Pre-req N5311) (1-6 90 Practicum Hours) FA 3	3
NURS 5340	NURS 5340 Management Seminar (1-6 90 Practicum Hours) (Students will take HMAP 5397)	3
Culminating Requirements		6 Credit Hours
HMAP 500	Comprehensive Exam	0
	Elective (SPH course approved by advisor)	3
	Elective (SPH course approved by advisor)	3
	OR	OR
HMAP 5395	Thesis	6

2.13.c. Assessment of the extent to which this criterion is met and an analysis of the school's strengths, weaknesses and plans relating to this criterion.

This criterion is met.

Strengths: All dual degree students receive the same MPH learning experiences and are assigned the same designated program advisor within their respective departments. In addition, with new leadership at UNTHSC and the new push toward inter-professional education, the School of Public Health is consistently asked to have greater integration with clinical degree programs.

Challenges: The major challenge is increasing the enrollment in our dual degree programs.

Plans: The UNTHSC School of Public Health is not actively engaged in creating new dual degree programs at this time.

2.14 DISTANCE EDUCATION AND EXECUTIVE PROGRAMS

Distance Education or Executive Degree Programs. If the school offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these programs must a) be consistent with the mission of the school and within the school's established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the school and university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the school offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The school must have an ongoing program to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. The school must have processes in place through which it establishes that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

2.14.a. Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instruction and student are separated in time or place or both. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

As indicated in the Instructional Matrix, Table 2.1.a.1, the School offers the MPH Professional Option (MPH PO) in an online distance learning format. The MPH PO requires 42 credit hours and can be completed in two years. The first cohort of students was admitted in AY 2010-2011. And since program inception, 15 students have graduated. Degree completion rates for the MPH PO are located in **Appendix 2.7.b.1** in the **Electronic Resource File**.

2.14.b. Description of the distance education or executive degree programs, including an explanation of the model or methods used, the School's rationale for offering these programs, the manner in which it provides necessary administrative and student support services, the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the School, and the manner in which it evaluates the educational outcomes, as well as the format and methodologies.

Online courses were developed to supplement courses offered in the classroom. To date, all courses offered in the online format have been courses that were converted from the classroom version. Online classes are offered in an eight-week format, which is different from the typical sixteen week semester classroom version. This allows for five sessions to be offered in an academic year: **Fall I**,

Fall II, Spring I, Spring II and Summer. The purpose of the eight week format is to allow the adult learner to concentrate on one course at a time.

The first online course was offered in the Fall I session of 2012. Subsequent semesters offered additional courses until the entire curriculum of the MPH Professional Option program was available in online courses as of Spring II, 2014.

Methods Used

Canvas is the Learning Management system used, and is one of the most user-friendly, open-source learning platforms available. Content delivery is achieved using multiple methods, which include recorded audio lectures that are combined with Power Point overheads through the use of Camtasia Relay software and screen-capture technology, required readings combined with case-study evaluations and discussion groups, and so on. For recorded lectures, Camtasia, or similar software, is a cost-effective way for faculty to record live lectures and meetings from a Mac or PC. These recordings are then uploaded to the class website on Canvas. This allows students to view lectures they could not attend and repeat lectures they did not understand.

Each class requires three to four hours per week of asynchronous lectures. Faculty and teaching assistants moderate online discussion groups for an additional six hours per week. Participation in online discussion groups is either encouraged or required. Other course activities may include reading textbooks, study guides, or other literature; participating in group or individual projects; and submitting recorded presentations and written work.

Rationale

The decision to offer classes in the online format was based on the results of the annual Student Satisfaction Survey conducted by UNTHSC (discussed in detail in Criterion 4.4.c). From several years of information obtain from the Survey, students requested that courses be offered in an alternative delivery method. Students stated that as undergraduate students, they had experienced online courses and were interested in the same offering for graduate courses. Online classes provide access to high-quality educational opportunities for students unable to attend the campus-based classes. The online format better meets the needs of working professionals seeking advanced training and credentials. Among these working professionals are physicians, nurses, veterinarians, dentists, and public health workers.

Student and Administrative Support

The UNTHSC Center for Innovative Learning, formerly the Center for Online Education, provides support services for faculty and students. The center also provides training and instruction for a variety of technology applications. The center provides various services for students, such as online tutoring and accommodations for students with disabilities. The center assists faculty in course development and provides ongoing technical support. Faculty advising is based on the program a given student is enrolled in. The MPH Online Program Director serves as the faculty advisor to all students who are in the MPH Professional Option, and the Certificate in Public Health Program. Students who take online courses associated with other programs all have designated advisors.

Academic Rigor

Distance learning classes use the same course learning outcomes, competencies, and the same evaluation methods as the campus classes. All online classes have the same expectations of student performance. There is no distinction made during the admission process as to whether students will be taking classes in an online or campus-based format.

Course syllabi are nearly identical to the course offered in the classroom. All competencies and learning outcomes are the same. The only difference is that the online syllabi include additional instructions on etiquette and standardized week start/stop times to ensure consistency amongst online courses. In addition, students evaluate all online courses through the IDEA System which is also used to evaluate campus courses. IDEA course evaluations are presented in **Appendix 2.1.b.1** and will be available for review during the site-visit.

The same survey instrument for teaching evaluations is used for both online and campus courses. Students' assessment of the quality of instruction is not significantly different for the online as compared to campus classes. All student papers are submitted to Turn-It-In, a similarity checking service. This service evaluates student manuscripts and identifies duplicate content that may indicate plagiarism.

The Quality Matters™ Program (www.qualitymatters.org) is a research-centered approach to quality assurance and continuous improvement for online learning. The goal of the program is to enable faculty to increase student engagement, learning, and satisfaction in online courses by implementing better course design. In January, 2014, one of our online classes (BIOS 5300) was certified by Quality Matters, receiving 93 out of a possible 95 points. As part of our commitment to continuous improvement, plans are underway for all online classes to be certified using Quality Matters.

How Outcomes Are Evaluated

Online and onsite courses are developed and delivered using identical competencies. Competency assessment is guided by standardized rubrics that are utilized by faculty and practicum preceptors. Competency assessments are based on various approaches, such as written papers, exercises, and practical skills. Course evaluations and student competency self-assessments did not find any significant differences between the online vs. campus classes.

2.14.c. Description of the processes that the school uses to verify that the student who registers in a distance education course or degree is the same student who participates and completes the course or degree and receives the academic credit.

During the AY 2010-1011, the SPH launched a series of policies and procedures that would lead to a culture of academic integrity. After an orientation and explanation of expectations for professional behavior and integrity, incoming SPH students sign an "Academic Integrity Agreement" indicating that they will adhere to the Student Code of Conduct and Discipline and all other policies related to ethical behavior during matriculation as a student within the SPH. This agreement is required of all students, including those who participate and complete online courses. In addition, each student signs an "Honor Statement for Examinations" for each of their examinations stating that no unauthorized assistance was given or received in the completion of the assessment.

To promote further the expectation of academic honesty and to provide high integrity online courses, the SPH has worked closely with the Center for Innovative Learning. Most recently in the fall of 2014, a work team led by the Associate Dean for Academic Affairs from the SPH joined members from the Center for Innovative Learning, the Office of Testing and Evaluation Services, the Vice-Provost and the Assistant Vice-Provost to explore options for online proctoring tools. The work team reviewed different resources for proctoring students in an online course format. The team identified ProctorTrack, an online proctoring tool developed by Canvas' premier partner Verificient Technologies, as being superior in quality and a strong match for utilization within the SPH and the UNTHSC.

The SPH piloted the implementation of ProctorTrack in a single course during the fall of 2014, BACH 5313/EPID 5313, Introduction to Database Management and Statistical Computing. At the completion of the pilot, the faculty instructor and the students provided feedback to the work team. Several factors including cost effectiveness, ease of use by the students, ease of utilization via Canvas by the online support staff, and the effectiveness in monitoring students' integrity were considered in the final selection of an online proctoring tool. After further deliberation with the Assistant Vice Provost, our Associate Dean for Academic Affairs finalized the implementation of the ProctorTrack for all of the SPH's online courses effective the spring of 2015. The SPH will continue to work closely with the Center for Innovative Learning in the roll-out of this initiative.

2.14.d. Assessment of the extent to which this criterion is met.

This criterion is met.

Strengths

The online process used by the SPH has several strengths. The course competencies, learning outcomes and academic rigor are the same for both online and campus classes. Course evaluation results for the online courses are not significantly different than those for the evaluations in the campus courses using the IDEA system. In addition, the Center for Innovative Learning provides support for distance learning to faculty and students. Moreover, the number of online courses offered, as well as the overall enrollment, has increased since its inception in 2012.

Weaknesses

The SPH does not currently use a verification service for student examinations, but is implementing ProctorTrack software for the spring 2015 semester.

Plans

As noted, the SPH plans to employ a third party verification service for all online examinations. Moreover, we plan to keep pace with new technologies for improving the student's experience and to achieve Quality Matters certification for all online classes. Additional online classes are under development in order to increase flexibility for distance students.