College of Graduate and Professional Studies

Graduate Programs in Public Health

Self-Study

Prepared for the Council on Education for Public Health

November 2018

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List of Acronyms Used

AA	Academic Advisor
APE	Applied Practice Experience
APHA	American Public Health Association
APHA- SA	American Public Health Association - Student Assembly
ASPPH	Association of Schools and Programs of Public Health
CASPER	Community Assessment for Public Health Emergency Response
CDC	Centers for Disease Control and Prevention
CEPH	Council on Education for Public Health
CETL	Center for the Enrichment of Teaching and Learning
CGS	College of Graduate Studies
CGPS	College of Graduate and Professional Studies
COM	College of Osteopathic Medicine
CV	Curriculum Vitae
EC	Enrollment Counselors
ERF	Electronic Resource File
F & A	Facilities and Administrative Cost Recovery
FERPA	Family Educational Rights and Privacy Act
GAPSA	Graduate and Professional Student Association
GPA	Grade Point Average
GPPH	Graduate Programs in Public Health
GRE	Graduate Record Examinations
HCPH	Harris County Public Health
HRSA	Health Resources and Services Administration
ID	Instructional Designers
ILE	Integrative Learning Experience
ITS	Information Technology Services
LMS	Learning Management System
LOA	Leave of Absence
MCDA	Maine Career Development Association
MM	Marketing Manager
MPH	Master of Public Health
MPHA	Maine Public Health Association
MTTG	Maximum Time to Graduation
NACES	National Association of Credential Evaluation Services
NEASC	New England Association of Schools and Colleges
NIH	National Institute of Health
NIMHD	National Institute on Minority Health and Health Disparities

OGPA	Office of Graduate and Professional Admissions
OLS	Online Learning Specialist
ORTL	Online Research and Teaching Librarian
OWL	Online Worldwide Learning
OWS	Online Writing Specialist
PHANYC	Public Health Association of New York City
PI	Principal Investigator
POD	Point of Dispensing
RIF	Research Infrastructure Fund
RHI	Rural Health Immersion
RPT	Reappoint, Promotion, Tenure
SARA	State Authorization Reciprocity Agreements
SASC	Student Academic Success Center
SME	Subject Matter Expert
SOTL	Scholarship of Teaching and Learning
SSS	Student Support Specialists
UFA	University Faculty Assembly
UNE	University of New England
WCHP	Westbrook College of Health Professionals

Introduction

1) Describe the institutional environment, which includes the following:

a. year institution was established and its type (eg, private, public, land-grant, etc.)

The University of New England (UNE) has a rich and varied history. In 1939, Franciscan monks formed the College Seraphique, a high school and junior college to educate boys of Quebecois decent. In 1952, the institution became a four-year liberal arts college called St. Francis College. As St. Francis College struggled financially in the late 1970's, the College of Osteopathic Medicine opened on the campus of St. Francis, and the two became UNE in 1978. In 1996, Westbrook College, founded in 1831 as the Westbrook Seminary in Portland, merged with UNE. Today, UNE stands as a private, nonprofit university with locations in Biddeford (Maine, USA), Portland (Maine, USA), and Tangier (Morocco).

b. number of schools and colleges at the institution and the number of degrees offered by the institution at each level (bachelor's, master's, doctoral and professional preparation degrees)

UNE's two Maine campuses house its undergraduate, graduate, and professional programs, while Tangier is home to an innovative semester abroad program that offers pre-health, laboratory-based, and basic science courses in addition to instruction in cultural studies and other traditional college courses. UNE offers more than 40 undergraduate and 32 graduate/professional programs.

UNE has six distinct colleges contributing to the University's overall mission to "provide students a highly integrated learning experience that promotes excellence through interdisciplinary collaboration and innovation in education, research, and service."

The six colleges are:

1. College of Arts and Sciences http://www.une.edu/cas
   More than 30 majors for the Bachelor program, two Master of Science (MS) programs and one Professional Science Master (PSM)

2. College of Dental Medicine http://www.une.edu/dentalmedicine
   Doctor of Dental Medicine (DMD) degree

3. College of Graduate and Professional Studies https://online.une.edu/
   Five Master's degrees (Public Health, Applied Nutrition, Social Work, Education, Health Informatics) and one Doctor of Education (EdD) degree

4. College of Osteopathic Medicine http://www.une.edu/com
   Doctor of Osteopathic Medicine (DO) degree

5. College of Pharmacy http://www.une.edu/pharmacy
   Doctor of Pharmacy (PharmD) degree

6. Westbrook College of Health Professionals http://www.une.edu/wchp
   a. Eleven baccalaureate degree programs, five Master's degrees, one Doctoral degree in Physical therapy

c. number of university faculty, staff and students

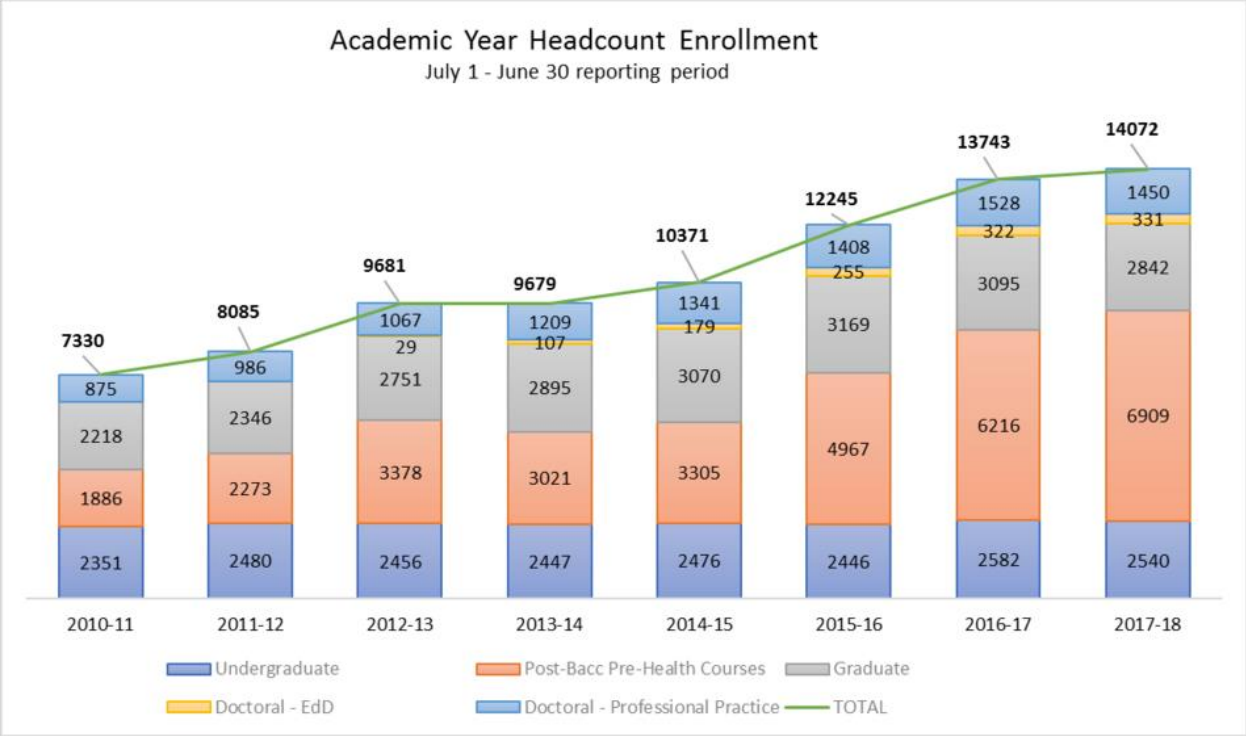
Most recent data (December 2017) indicate that UNE had 390 FTE (285 full-time, 314 part-time) faculty involved in instruction and research. There were 743 FTE staff (731 full-time, 36 part-time).

More details on the number of university faculty and staff can be found at: https://www.une.edu/sites/default/files/2017_faculty_staff_by_occupational_category_8-1.pdf

In the 2017-2018 academic year (July 1, 2017 to June 30, 2018), there were 7,163 students at UNE. The total enrollment includes both on-campus (50%) and online (48%) students; however, this number excludes the 6909 students who enrolled in the online Science Prerequisites for Health Professions program as non-matriculated students.

Of the 7163 students, 2540 were undergraduate students, 2842 were graduate students, 1450 were doctoral candidates in professional practice and 331 were doctoral candidates in education.

The following chart showing enrollment headcounts can be found at https://www.une.edu/about/glance



d. brief statement of distinguishing university facts and characteristics

UNE has been recognized for its academic quality and excellent return on investment. UNE has been included in the 2018 edition of the Princeton Review's Best 382 Colleges guide, which lists only the top 15% of four-year colleges and universities in the U.S. Other accolades for UNE can be found at https://www.une.edu/about/glance

e. names of all accrediting bodies (other than CEPH) to which the institution responds. The list must include the regional accreditor for the university as well as all specialized accreditors to which any school, college or other organizational unit at the university responds

UNE is accredited by the New England Association of Schools and Colleges (NEASC), which accredits schools and colleges in the six New England states. Accreditation by the association indicates that the institution has been carefully evaluated and found to meet standards agreed upon by qualified educators. UNE's date of initial accreditation was December 1, 1966 and the last accrediting review was conducted in April 2017. Following a successful review, the University is fully accredited through 2027, when the next site visit will take place.

In addition to the institutional accreditation by NEASC, some UNE programs and colleges have specialized accreditation bodies and membership societies. Details of such accreditation, membership and notices can be assessed on the UNE's webpage through https://www.une.edu/registrar/2017-2018-academic-catalog/accreditation-memberships-and-other-notices

f. brief history and evolution of the public health program (PHP) and related organizational elements, if applicable (eg, date founded, educational focus, other degrees offered, rationale for offering public health education in unit, etc.)

In 2002, the College of Osteopathic Medicine (COM) established the Certificate of Advanced Graduate Study in Public Health. Based on students' interest and a 2004 feasibility study, the Master of Public Health (MPH) program was subsequently established in the Spring of 2005 and housed within COM.

The original mission, goals, and objectives were first developed as part of the feasibility study; they were generated by the Dean of the COM, the Director of the Public Health program, and an Advisory Committee composed of program faculty, faculty from both COM and the Westbrook College of Health Professions (WCHP) and approved by the University Faculty Assembly, Provost, President, and Board of Trustees.

In 2009, the public health programs were moved from COM to the newly established College of Graduate Studies (CGS). At the time of this move, the mission, goals, and objectives were reviewed and approved by the public health program leadership, Advisory Committee, and faculty as being in alignment with UNE's vision and strategic plan.

In 2011, the Graduate Programs in Public Health (GPPH) received its first accreditation from the Council on Education in Public Health (CEPH).

In 2013, then President Danielle Ripich made the decision to temporarily move GPPH to the WCHP.

In Spring 2014, CGS was realigned to house all fully online programs at UNE, and was renamed as the College of Graduate and Professional Studies (CGPS). At this time, GPPH returned to CGPS from its temporary home in WCHP. Substantive Change Notices associated with the organizational changes were submitted and accepted by CEPH in 2013 and 2014.

GPPH is part of UNE's CGPS that currently houses the following online graduate programs:

- Public Health
- Health Informatics
- Applied Nutrition

- Social Work
- Education

as well as the Science Prerequisites for Health Professions, which is a non-matriculating post-baccalaureate program.

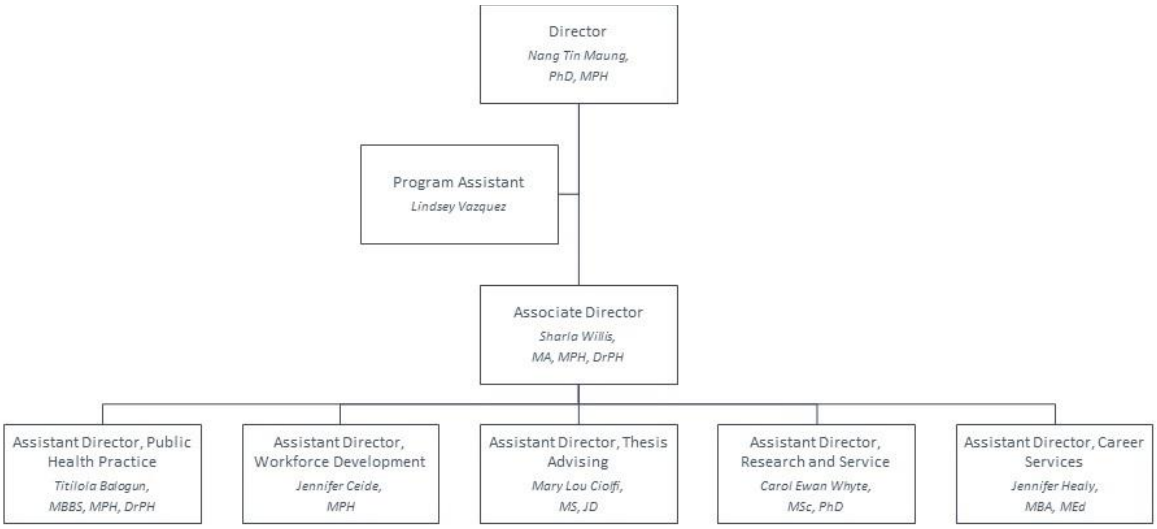
UNE recognizes that the needs of online, adult learners are different than those of traditional, on-campus students. Providing one “home college” for all online programs within CGPS allows the University to ensure that curriculum, policies, and procedures are established with the online student at the core. The College is equipped to assess student needs and provide the services necessary to ensure success.

Transitioning the online programs, including GPPH, to UNE’s CGPS assured consistency and cohesiveness across program options and a solid commitment to the students’ academic experience. Specific operational resources for online learning are dedicated to CGPS including marketing, recruitment, enrollment, and instructional design. CGPS is dedicated to providing comprehensive student support and visionary instructional design, ensuring that graduates from UNE possess the competencies and skills needed to become leaders in the field.

2) Organizational charts that clearly depict the following related to the program:

a. the program’s internal organization, including the reporting lines to the dean/director

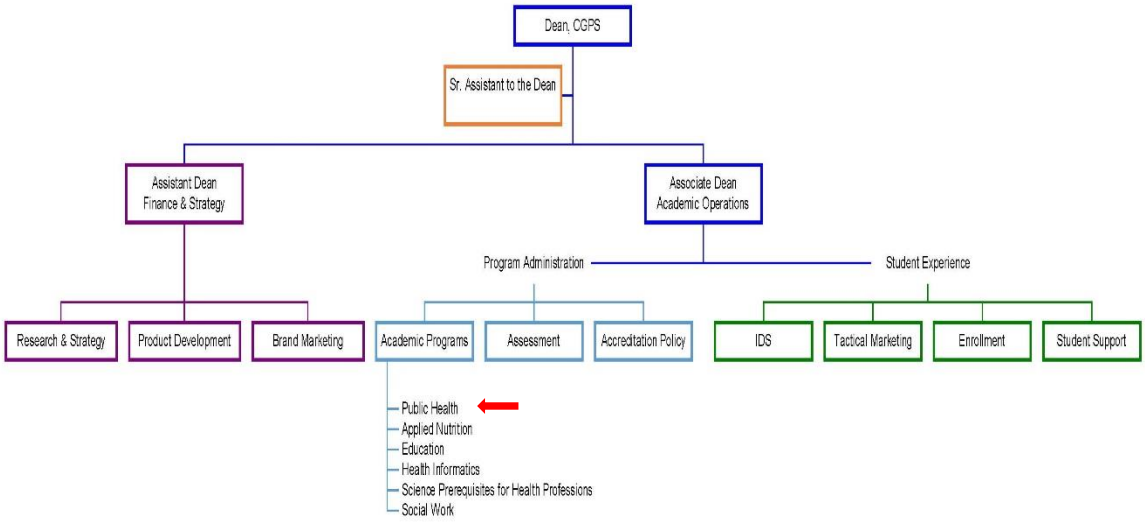
The organizational chart below (ERF Intro-1) shows the reporting lines within the Graduate Programs in Public Health. As of October 2018, the Director of GPPH reports directly to the Dean of the CGPS. Once the Associate Dean of CGPS position, which is currently under recruitment, is filled, the Director of GPPH will report to the Associate Dean.



b. the relationship between program and other academic units within the institution. Ensure that the chart depicts all other academic offerings housed in the same organizational unit as the program. Organizational charts may include committee structure organization and reporting lines

The following organizational chart (ERF Intro-2) shows the relationship between GPPH and other academic units within CGPS. CGPS has five graduate programs as well as the Science

Prerequisite for Health Professionals program; public health is shown with a red arrow in the chart. Each program has a director and a number of faculty and staff.

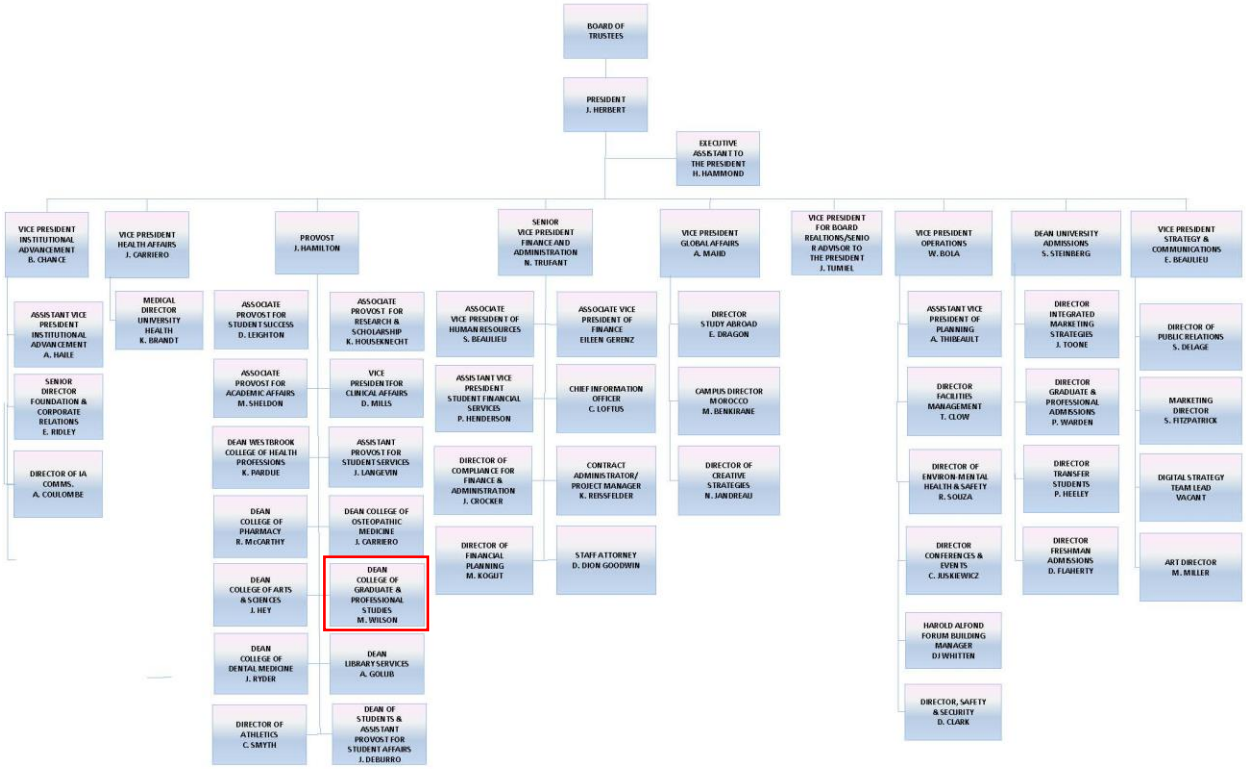


c. the lines of authority from the program's leader to the institution's chief executive officer (president, chancellor, etc.), including intermediate levels (eg, reporting to the president through the provost)

See the organizational charts on the next two pages (ERF Intro-3 and ERF Intro-4). Dean Wilson of CGPS is highlighted with a red rectangle in each of the chart.

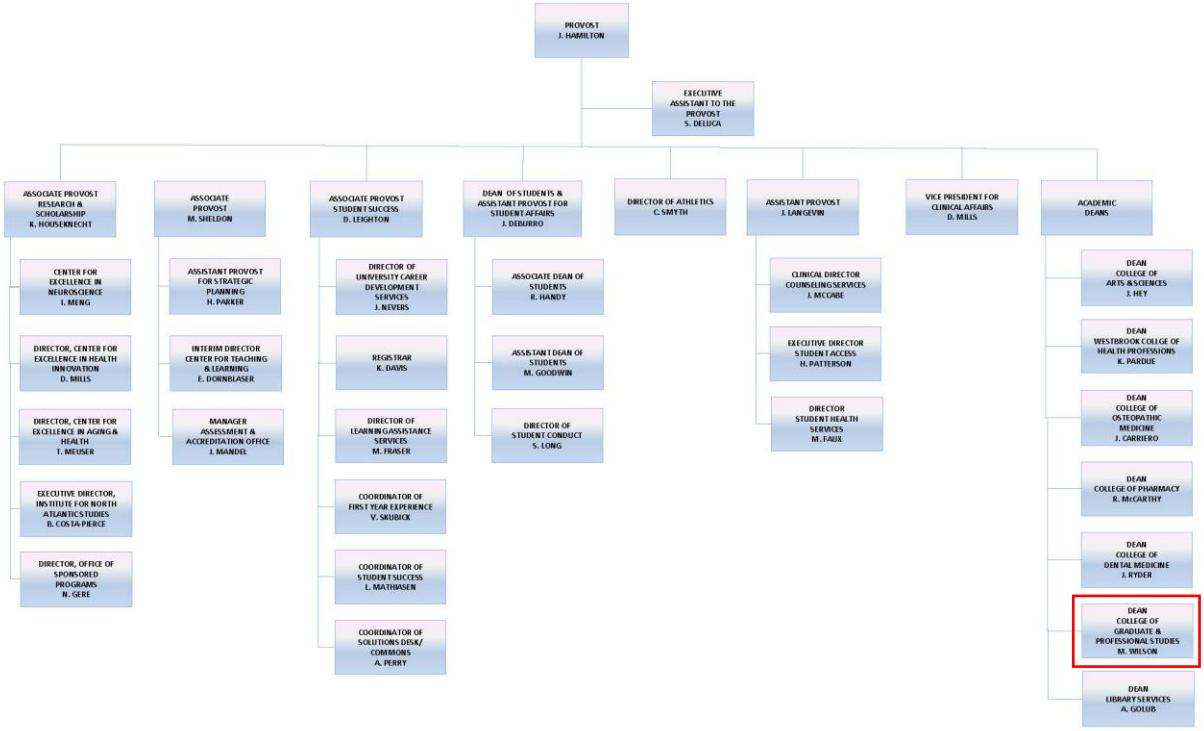
UNIVERSITY OF NEW ENGLAND

Management Overview



UNIVERSITY OF NEW ENGLAND

Academic Affairs



d. for multi-partner programs (as defined in Criterion A2), organizational charts must depict all participating institutions

Not applicable

3) An instructional matrix presenting all of the program's degree programs and concentrations including bachelor's, master's and doctoral degrees, as appropriate. Present data in the format of Template Intro-1.

GPPH offers a generalist MPH degree program as shown in the instructional matrix below:

Template Intro-1

Instructional Matrix - Degrees and Concentrations						
Master's Degree			**Categorized as public health***	**Campus based**	**Executive**	**Distance based**
	Academic	**Professional**				
Generalist Track		*MPH*	*x*			x

4) Enrollment data for all of the program's degree programs, including bachelor's, master's and doctoral degrees, in the format of Template Intro-2.

As of October 2018, the headcount of active students (i.e., those who have taken at least one course within the past calendar year) in the generalist MPH program is 541.

Template Intro-2

Degree		**Current Enrollment**
Master's		
	MPH	541

A1. Organization and Administrative Processes

The program demonstrates effective administrative processes that are sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation.

The program establishes appropriate decision-making structures for all significant functions and designates appropriate committees or individuals for decision making and implementation.

The program ensures that faculty (including full-time and part-time faculty) regularly interact with their colleagues and are engaged in ways that benefit the instructional program (eg, participating in instructional workshops, engaging in program specific curriculum development and oversight).

1) List the program's standing and significant ad hoc committees. For each, indicate the formula for membership (eg, two appointed faculty members from each concentration) and list the current members.

   GPPH solicits input from both full-time and part-time faculty as well as community stakeholders when making programmatic and curricular decisions. Standing and ad-hoc committees that regularly contribute to GPPH operations are described below.

   The formula for membership is shown in the table, and current members for all standing committees are listed below. Members of the Advisory Committee and Curriculum Committee volunteer for the membership by responding to calls for memberships through email or newsletter announcements. If the number of interested individuals exceeds the number of available seats, an election will be held. All members have the same level of authority to suggest and discuss pertinent issues, and contribute to decision-making. Full details including the charge and decision-making procedure for each standing and ad-hoc committee are included in ERF A1-1.

Standing	Ad-Hoc
Admissions Committee - *Membership: all GPPH primary faculty*	CEPH Self-Study Committee - *Membership: all GPPH primary faculty, CGPS Director of Academic Policy and Accreditation, CGPS Director of Assessment*
Advisory Committee - *Membership: two to four GPPH primary faculty, three to five external stakeholders, two to four adjunct faculty, two to three student representatives and one to three alumni representatives*	Program Competencies Work Group - *Membership: all GPPH primary faculty*
Curriculum Committee - *Membership: two to four GPPH primary faculty, three to five adjunct faculty with various areas of expertise, two to four student representatives and two to four alumni representatives*	Faculty and Staff Search Committee - *Membership: all GPPH primary faculty and two other CGPS staff based on the position being recruited*
Faculty Meetings - *Membership: all primary and adjunct faculty of GPPH*	Mini-Grant Committee - *Membership: all GPPH primary faculty,*
Team Meetings - *Membership: all GPPH primary faculty and Program Assistant*	Student Affairs Committee - *Membership: GPPH Program Director and three to five students, including two APHA-SA officers (APHA-SA officers decide who will represent)*
Cross Functional Meetings - *Membership: All GPPH primary faculty, GPPH Program Assistant and at least one representative from CGPS units such as Enrollment, Student*	

Support, Instructional Design, and Research and Strategy	
American Public Health Association – Student Assembly (APHA-SA) - *Membership: One adjunct faculty advisor and elected student officers*	

Admissions Committee – Current Membership:

- Titilola Balogun, Assistant Director of Public Health Practice
- Jennifer Ceide, Assistant Director of Workforce Development
- Mary Lou Ciolfi, Assistant Director of Thesis Advising
- Carol Ewan Whyte, Assistant Director of Research and Service
- Jennifer Healy, Assistant Director of Career Services
- Nang Tin Maung, Program Director
- Sharla Willis, Associate Program Director

Advisory Committee – Current Membership:

GPPH Representatives:

- Nang Tin Maung, Program Director
- Sharla Willis, Associate Program Director
- Carol Ewan Whyte, Assistant Director of Research and Service
- Jennifer Ceide, Assistant Director of Workforce Development
- Jennifer Healy, Assistant Director of Career Services

Adjunct Faculty:

- Rebecca Arsenault, Public Health Administration
- Ivan Most, Environmental and Occupational Health

Community Stakeholders:

- Nélida R. Berke, Minority Health Program Coordinator, Portland Public Health
- Rosalia Guerrero, Manager, Community Health Worker Training Program at University of Texas School of Public Health
- Christina Holt, Research Director, Department of Family Medicine, Maine Medical Center
- Toho Soma, Interim Director of Center for Excellence in Health Innovation, UNE

Students:

- Taina Brezault
- Mae L'Heureux
- Puneet Sarni, APHA-SA Vice President (2018-2019)

Alumni:

- Emily Bartlett, MPH '18, Graduate Research Assistant, UNE Primary Care Training and Enhancement grant
- Brittany Roy, MPH '16, Senior Epidemiology Associate at Alkermes

Curriculum Committee – Current Membership:

GPPH Representatives:

- Nang Tin Maung, Program Director
- Sharla Willis, Associate Program Director
- Titilola Balogun, Assistant Director of Public Health Practice
- Mary Lou Ciolfi, Assistant Director of Thesis Advising

Adjunct Faculty:

- Anne Hunt, Biostatistics and Emergency Preparedness
- Patricia Poteat, Program Planning and Evaluation
- Deborah Shields, Policy
- Kenyatta Stephens, Epidemiology
- Kathleen Welch, Global Health and Emergency Preparedness

Students:

- Jason Kirchick
- Erika Penrod, APHA-SA Campus Liaison (2018-2019)

Alumni:

- Jamie Wren, MPH ’15 , Research Associate, Margaret Chase Smith Policy Center, University of Maine
- Franchesca McNeil ’15, ICO4MCH Coordinator, Robeson County Health Department

Faculty Meetings– Current Membership:

All primary and adjunct faculty of GPPH are invited to attend and participate

Team Meetings– Current Membership:

- Titilola Balogun, Assistant Director of Public Health Practice
- Jennifer Ceide, Assistant Director of Workforce Development
- Mary Lou Ciolfi, Assistant Director of Thesis Advising
- Carol Ewan Whyte, Assistant Director of Research and Service
- Jennifer Healy, Assistant Director of Career Services
- Nang Tin Maung, Program Director
- Sharla Willis, Associate Program Director
- Lindsey Vazquez, Program Assistant

Cross-Functional Meetings– Current Membership:

GPPH:

- Titilola Balogun, Assistant Director of Public Health Practice
- Jennifer Ceide, Assistant Director of Workforce Development
- Mary Lou Ciolfi, Assistant Director of Thesis Advising
- Carol Ewan Whyte, Assistant Director of Research and Service
- Jennifer Healy, Assistant Director of Career Services
- Nang Tin Maung, Program Director
- Sharla Willis, Associate Program Director
- Lindsey Vazquez, Program Assistant

Enrollment:

- Nicole Lindsay, Director of Enrollment
- Katherine Blessis, Enrollment Counselor II
- Kat Davis, Enrollment Counselor I
- Holland Wegner, Enrollment Counselor III

Student Support:

- Emily Hill, Student Support Specialist II
- Hayley Kinsella, Senior Student Support Specialist
- Zachary York, Student Support Specialist I

Marketing:

- Carly Lops, Marketing Manager

Instructional Design:

- Tara Treichel, Instructional Designer

American Public Health Association – Student Assembly at UNE – Current Membership:

- Faculty Advisor: Jennifer Gunderman, Adjunct Faculty
- President: Mansoor Shafqat
- Vice President: Puneet Saini
- Campus Liaison: Erika Penrod
- Secretary: Tamar Tomlinson

2) Briefly describe which committee(s) or other responsible parties make decisions on each of the following areas and how the decisions are made:

a. degree requirements

The Curriculum Committee and GPPH Primary Faculty through Team Meetings are primarily responsible for ensuring adequate degree requirements. For example, two GPPH primary faculty members (Assistant Director of Public Health Practice and Assistant Director of Thesis Advising) consulted with other primary faculty and adjunct faculty in defining the requirements for Applied Practice Experience (APE) and Integrative Learning Experience (ILE). During the Fall 2017 meeting, the Curriculum Committee discussed and approved the revised list of required courses to ensure adequate competency attainment by all GPPH graduates.

Decisions by the Curriculum Committee and faculty are made through consensus following extensive discussions; voting may be required if consensus is not reached. All members are expected to contribute to discussions and the final decision.

b. curriculum design

The Associate Program Director, the Curriculum Committee, and GPPH Primary Faculty through Team Meetings are regularly involved in curriculum design discussions and decisions. The Associate Program Director oversees GPPH curriculum and gathers input through several means: consulting with Subject Matter Experts (SMEs) to define and ensure course objectives, holding course reflection meetings with faculty, and engaging faculty in curriculum conversations during faculty meetings and team meetings. The Assistant Director of Thesis Advising is responsible for the design of the ILE and the Assistant Director of Public Health Practice is responsible for the design of the APE; these individuals regularly seek input from primary faculty during team meetings and from preceptors and ILE supervisors through course reflections.

Decisions by the Curriculum Committee and faculty are made through consensus following extensive discussions; voting may be required if consensus is not reached. All members are expected to contribute to discussions and the final decision.

c. student assessment policies and processes

The Associate Program Director works with SMEs and Instructional Designers (ID) to define student assessment activities and processes within GPPH courses. Input from faculty are

also gathered during course reflection meetings, which are held every term. The Associate Program Director and the SMEs make the final decisions on student assessments.

d. admissions policies and/or decisions

The Admissions Committee makes admissions decisions and regularly reviews admission policies and data. When making admissions decisions, two committee members review each application and apply the weighted criteria of the program's admission rubric (ERF A1-2). Each renders a decision to admit or deny the applicants and provides narrative support for that decision. If both committee members are in agreement, the decision stands. If the decisions are different, a third committee member is asked to review the application as a tie breaker.

Admissions data such as undergraduate Grade Point Average (GPA) and other demographic information are also reviewed and discussed during Cross-Functional Meetings with other support units. Any recommendations made during Cross-Functional Meetings are considered by the Admissions Committee, which makes final decisions regarding any changes to admission policies or procedures.

e. faculty recruitment and promotion

A search committee comprised of GPPH primary faculty and CGPS staff representatives makes decisions for hiring primary faculty positions. The Program Director chairs the hiring committee, and all members review the applications to identify candidates for an interview. During the interview, the committee members ask questions and evaluate candidates using a rubric (a sample rubric is provided in ERF A1-3). Each committee member votes in making the final hiring position.

Hiring of adjunct faculty begins with resume reviews by the Program Director and Associate Program Director. Candidates with expertise in specific areas of our curriculum as demonstrated by their credentials and work experiences are then interviewed by a GPPH primary faculty member, and hiring decisions are made based upon the interviewer's recommendation. GPPH primary faculty interview candidates.

GPPH has a relatively flat structure and does not have a traditional faculty model for promotion. However, the Dean of CGPS, with input from the Program Director, makes decisions for merit-based raises for primary faculty based on annual reviews.

f. research and service activities

The Assistant Director of Research and Service has primary responsibility for planning, tracking, and promoting research and service activities. The Advisory Committee provides input regarding research and service trends and opportunities to GPPH faculty and students, and the Assistant Director of Research and Service shares a report annually at a Curriculum Committee meeting and Faculty Meeting to solicit feedback. The Assistant Director of Research and Service and primary faculty make final decisions based on feedback and input from these committees.

3) A copy of the bylaws or other policy documents that determine the rights and obligations of administrators, faculty and students in governance of the program.

1) UNE faculty handbook with UNE faculty bylaws (ERF A1-4)
2) CGPS faculty bylaws (ERF A1-5)
3) Student handbooks for UNE and CGPS (ERF A1-6)
4) CGPS faculty development tool (ERF A1-7)

4) Briefly describe how faculty contribute to decision-making activities in the broader institutional setting, including a sample of faculty memberships and/or leadership positions on committees external to the unit of accreditation.

All GPPH primary faculty are members of the CGPS Faculty Assembly and contribute to discussions and decision-making as a faculty body. At the broader institutional setting, primary faculty are encouraged to contribute to the university community through service and committee memberships. Some examples of faculty contribution to decision-making activities within UNE include:

Carol Ewan Whyte and Nang Tin Maung – serve as senators on the University Faculty Assembly (UFA) and vote on decisions that are made by UFA. Within UFA, Carol Ewan Whyte serves on faculty affairs and financial affairs committees and Nang Tin Maung serves on research and scholarship committee and academic affairs committee. Nang Tin Maung is the Chair of the CGPS senators to UFA, as such, serves on the CGPS executive committee.

Nang Tin Maung – serves on the steering committee for university-wide interprofessional education initiatives.

Sharla Willis – serves as an UFA Grievance Committee member.

Titilola Balogun – serves as a member of the Research and Scholarship Workgroup and member of the UNE Strategic Planning Committee.

Mary Lou Ciolfi and Carol Ewan Whyte – served as members of the CGPS Bylaws committee responsible for developing the bylaws for CGPS primary and adjunct faculty.

5) Describe how full-time and part-time faculty regularly interact with their colleagues (self-study document) and provide documentation of recent interactions, which may include minutes, attendee lists, etc.

The committees described above are excellent opportunities for all GPPH stakeholders to provide input regarding program policies and operations. GPPH also provides additional opportunities for faculty to interact with their colleagues. Such interactions among faculty occur most often through faculty meetings, course kick-off meetings and course reflection meetings.

For example, at a recent faculty meeting, GPPH faculty expressed concerns regarding academic integrity issues among some students and offered their experiences and advice/helpful tips to each other. In addition, the faculty provided feedback to the GPPH administration regarding Student Support Specialists (SSS) and their role in facilitating students' success. The minutes from the meeting are included in ERF A1-8. One of the decisions made during this meeting was to make available guidelines for addressing common faculty concerns, and an online repository was subsequently developed: https://sites.google.com/a/une.edu/gpph-faculty-info/home

Faculty who are teaching different sections of the same course also interact in many ways. First, during "course kick-offs", faculty meet with the GPPH Program Director, the Subject Matter Expert who designed the course, and a CGPS Instructional Designer to discuss program policies, course design and content as well as instructional technologies and strategies. During these meetings, faculty often give each other advice based on their previous experiences with the course, and make plans to check in with each other (often via group email) while the course is in session. This allows for consistency among various faculty members while providing beneficial peer support among GPPH faculty. A typical agenda for kick-off meetings is provided in ERF A1-9.

GPPH courses have a "lead instructor" who is primary faculty or adjunct faculty with significant

teaching experience within GPPH. The lead instructors check in regularly with other faculty teaching the same course, often offering tips, sharing useful resources, and discussing common questions from students. In practice-based courses (GPH 747 or GPH 743), a primary faculty member always oversees the course and works with adjunct faculty to ensure that any question related to practice requirements can be adequately answered.

Once a course is completed, all faculty who taught the course participate in a "course reflection/review meeting" facilitated by the GPPH Associate Program Director. During these meetings, faculty share their experiences and provide feedback on course content and design. If faculty cannot attend the meeting, they are asked to provide a written summary of their experience with the course. Suggestions from these meetings are utilized to improve the course and student/faculty experiences. Recently, a common theme arose related to course rubrics and how they could be made more effective. This information was used to redesign the rubrics for all GPPH courses. Sample notes from the course reflection meetings, a copy of the guidelines for the rubrics redesigned based on these reflections, and an information sheet developed for faculty can be found in ERF A1-10**.**

Another way that GPPH faculty interact with each other is by participating in training webinars designed to ensure instructional excellence. These interactive webinars are developed by the CGPS Instructional Design team and/or UNE's Center for the Enrichment in Teaching and Learning (CETL), and are attended by faculty from various UNE programs. As such, they are valuable venues for professional development and peer interactions. Some recent webinars developed by CGPS Instructional Design can be found at http://vision.une.edu/tag/webinar/

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH provides many opportunities for faculty to interact and provide input on various areas of the program operations. All GPPH primary faculty are members of the CGPS Faculty Assembly, and two serve as senators of the University Faculty Assembly (UFA). Key committees comprised of faculty, students, alumni, and community stakeholders meet regularly to offer valuable feedback and suggestions. Students are encouraged to take on leadership activities that enhance their skills as students and future public health professionals; officers in these student groups have also been active in various program committees to bring the student voice to program administration.

Weaknesses:

While the governance responsibilities of GPPH primary faculty are clearly outlined in UNE's handbook, CGPS only recently developed faculty bylaws, and elected its first executive committee on June 6, 2018.

Plans:

CGPS faculty bylaws will be evaluated and updated yearly as necessary. GPPH will continue to involve adjunct faculty, students, and community stakeholders in program administration to ensure that their voices are adequately represented. GPPH will also continue using various forums to ensure that all faculty interact with colleagues and provide valuable feedback to improve the program. In addition, GPPH is planning monthly "journal clubs" for primary and adjunct faculty beginning in January 2019. Faculty members will be asked to read an article of common interest (e.g., how to engage online learners, changing landscape of graduate education, what exactly is "precision public health") and come together for discussions. These optional journal clubs will help foster a sense of professional community among GPPH faculty.

A2. Multi-Partner Programs **(applicable ONLY if functioning as a "collaborative unit" as defined in CEPH procedures)**

Not applicable

A3. Student Engagement

Students have formal methods to participate in policy making and decision making within the program, and the program engages students as members on decision-making bodies whenever appropriate.

1) Describe student participation in policy making and decision making at the program level, including identification of all student members of program committees over the last three years, and student organizations involved in program governance.

   As described in A1, there is one student-led group specific to GPPH: American Public Health Association – Student Assembly (APHA-SA). Jennifer Gunderman, an assistant lecturer at UNE and adjunct faculty of GPPH, is the faculty advisor to UNE-APHA-SA. This group is led by four students: Mansoor Shafqat (President), Puneet Saini (Vice President), Erika Penrod (Campus Liaison), and Tamar Tomlinson (Secretary). They hold regular meetings with students, interact through social media, and bring forth relevant concerns or suggestions to the program. The student group is encouraged to facilitate any meeting between program administrators and the students. For example, a "town-hall meeting" was organized by APHA-SA in summer 2017 semester so that students can interact with the program administration and provide feedback or ask questions.

   In September, 2018 GPPH convened an ad-hoc Student Affairs Committee in order to help identify ways that will facilitate ongoing communications between the student body and program administration. This committee has four student members: Bernadette Amihere, Jeannine Klos, Mansoor Shafqat and Puneet Saini. GPPH Program Director consults with the students as needed. The committee is currently working on identifying an online platform where students can anonymously post questions and comments. The committee is also organizing a town-hall meeting, which will be held in November 2018.

   Students are also invited to serve on the Advisory Committee and Curriculum Committee. GPPH aims to have three to five student members on each committee. When a student position on a committee becomes open, all students are notified via email with the information and expectations, and they can self-nominate. Thus far, there have been limited numbers of students volunteering to serve on committees, and elections have not been necessary.
   However, if there are more interested students than open positions, all students will vote on student representatives. Student members have the same rights and responsibilities as other members of the committees.

   Over the last three years, the following individuals have served as student members (some are continuing as alumni members) of the Advisory Committee and Curriculum Committee.

Advisory Committee

- Emily Bartlett, MPH '18
- Mae L'Heureux, MPH '18
- Puneet Sarni, MPH '18
- Taina Brezault, MPH '18
- Alison Braid, MPH '17
- Samantha Paradis, MPH '16
- Brittany Roy, MPH '15

Curriculum Committee

- Averell Johns, MPH '20
- Sheena Jones, MPH '18

- Rana Kasper, MPH ‘18
- Jason Kirchick, MPH ‘18
- Erika Penrod, MPH ‘19

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
GPPH has an active APHA-SA student group that is involved at both the program and national levels. The 2017-2018 campus liaison of UNE APHA-SA, Carley Anderson, received the campus liaison of the year award at the APHA annual meeting in Atlanta. Likewise, the 2017-2018 APHA-SA president, Emily Bartlett, attended the conference as a member of the national programming board. In November, 2018, Ms. Bartlett will begin her three-year chair position as the chair-elect for the National APHA-SA. These campus leaders facilitate regular meetings with students and serve on program level committees to participate in policy-making or decision-making. In addition to having student representatives on program committees, GPPH encourages the student group to organize or request meetings/events that facilitate interactions among faculty, administrators, and students.

Weaknesses:
As an online program with students who work full-time and/or have family commitments, it can be a challenge to find students who wish to actively participate in program committees.

Plans:
GPPH will continue to encourage student-led groups to actively connect with students through various means: social media, professional development seminars, guest speakers, and meetings with program administrators. GPPH will emphasize the role of student participation in program decisions or policies and encourage students to serve on committees. GPPH will also actively find ways to facilitate transparent communications between the student body and GPPH administration. To this end, a Student Affairs Committee has been convened and the committee has been actively working with the Program Director to identify and test methods of communications such as an online forum.

A4. Autonomy for Schools of Public Health

Not applicable.

A5. Degree Offerings in Schools of Public Health

Not applicable.

B1. Guiding Statements

The program defines a *vision* that describes how the community/world will be different if the program achieves its aims.

The program defines a *mission statement* that identifies what the program will accomplish operationally in its instructional, community engagement and scholarly activities. The mission may also define the program's setting or community and priority population(s).

The program defines *goals* that describe strategies to accomplish the defined mission.

The program defines a statement of *values* that informs stakeholders about its core principles, beliefs and priorities.

1) A one- to three-page document that, at a minimum, presents the program's vision, mission, goals, and values.

   ERF B1-1 provides a summary of the development of GPPH vision, mission, goals and measurable objectives. GPPH Advisory and Curriculum committees, along with CGPS leadership, provided guidance for the initial development of the vision, mission and goals. GPPH primary faculty contributed extensively in defining and refining the goals and measurable objectives. All faculty were invited to provide input and feedback. The vision, mission, goals, and values are published online at https://online.une.edu/public-health/mission/

2) If applicable, a program-specific strategic plan or other comparable document.

   UNE is currently going through a strategic planning process for academic years 2018-2023; as of October, 2018, public comments have been collected and the draft was approved by UNE's Board of Trustees in November, 2018. The final strategic plan for UNE is expected to be adopted in early 2019. GPPH will develop a program-specific strategic plan beginning in Spring 2019 to ensure alignment with university's strategic goal. As a precursor to a program-specific strategic plan, GPPH has outlined an analysis of strengths and weaknesses with input from the primary faculty (ERF B1-2). GPPH has also discussed a strategic framework and possible future directions with the Advisory Committee (ERF B1-3).

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths:
   GPPH's mission and vision statements speak to the aspiration and characteristics of the program, faculty, and students. Various stakeholders provided input and feedback in the development of vision, mission, goals, and objectives. Defining and refining goals and measurable objectives is a faculty-driven process with GPPH primary faculty leading the efforts and making final decisions through discussions and consensus.

   There is a strong commitment by the primary faculty and college leadership to ensure that the vision, mission, and goals remain relevant and that a strategic plan is in place to guide the future of the program. GPPH's committee members have the expertise and dedication to help develop the initial framework, which will be further refined with input from Curriculum Committee, faculty, students, and alumni when the program-specific strategic planning begins in 2019.

   Weaknesses:
   Under the leadership of the new president and provost who joined UNE in the 2017-2018 academic year, UNE is currently developing its university-wide strategic plan that has been

approved by the Board of Trustees in November, 2018. The final strategic plan for the university is expected to become available in early 2019. To ensure alignment with the University's strategic goals, GPPH will wait until 2019 to develop and adopt a program-specific strategic plan.

Plans:

The GPPH Program Director will develop a timeline for the development and review of a strategic plan in 2019. The draft framework developed with input from the Advisory Committee (ERF B1-3) will be shared through a webpage for input by other stakeholders (staff, adjunct faculty, students, alumni, and community partners): http://success.une.edu/public-health/strategic-planning-2018/ . There will be several meetings with these stakeholders for the purpose of gathering and discussing feedback.

B2. Graduation Rates

The program collects and analyzes graduation rate data for each degree offered (eg, BS, MPH, MS, PhD, DrPH).

The program achieves graduation rates of 70% or greater for bachelor's and master's degrees and 60% or greater for doctoral degrees.

1) Graduation rate data for each degree in unit of accreditation. See Template B2-1.

   Graduation rate data for the MPH degree at GPPH are shown in the following page using Template B2-1.

Calendar Year	Cohort of Students	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
2012-2013	# Students entered	99						
	# Students withdrew, dropped, etc.	4						
	# Students graduated	0						
	Cumulative graduation rate	NA						
2013-2014	# Students continuing at beginning of this school year (or # entering for newest cohort)	95	196					
	# Students withdrew, dropped, etc.	12	11					
	# Students graduated	7	0					
	Cumulative graduation rate	7.07%	NA					
2014-2015	# Students continuing at beginning of this school year (or # entering for newest cohort)	76	185	220				
	# Students withdrew, dropped, etc.	2	19	11				
	# Students graduated	24	12	0				
	Cumulative graduation rate	31.31%	6.12%	NA				
2015-2016	# Students continuing at beginning of this school year (or # entering for newest cohort)	50	154	209	237			
	# Students withdrew, dropped, etc.	3	9	25	11			
	# Students graduated	40	73	12	0			
	Cumulative graduation rate	71.72%	43.37%	5.45%	NA			
2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	7	72	172	226	283		
	# Students withdrew, dropped, etc.	1	3	14	32	14		
	# Students graduated	5	50	87	27	1		
	Cumulative graduation rate	76.77%	68.88%	45.00%	11.39%	0.35%		
2017-2018	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	19	71	167	268	253	
	# Students withdrew, dropped, etc.	0	1	7	6	24	15	
	# Students graduated	0	12	47	86	44	4	
	Cumulative graduation rate	**76.77%**	75.00%	66.36%	47.68%	15.90%	1.58%	
2018-2019	# Students continuing at beginning of this school year (or # entering for newest cohort)	1	6	17	75	200	234	110
	# Students withdrew, dropped, etc.	0	1	1	3	10	14	2
	# Students graduated	0	1	5	31	21	2	0
	Cumulative graduation rate	76.77%	**80.00%**	72.25%	63.72%	24.25%	0.85%	

2) Data on doctoral student progression in the format of Template B2-2.

Not applicable

3) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

GPPH has three starts (i.e., when new students can take their first course as a matriculated student) per year: Summer, Fall, and Spring. Therefore, the 2012-2013 cohort contains students who matriculated in either Summer 2012, Fall 2012 and Spring 2013. If a student takes one class per eight-week term (six classes a year), it takes three years to complete the program. If a student takes two classes per term, the MPH program can be finished in about 18 months.

Students cannot graduate with an MPH within one calendar year. It is important to note, however, that students are administratively withdrawn from the university if they do not take at least one course per year. If a student is withdrawn, they are included in the "withdrawn" count. When many of them reapply and return to finish their degree, these individuals are counted in the new entering cohort and it may look like it only takes them a year to finish the degree where in fact they only had one or two courses to complete for the program. For example, in the above chart, four students from 2017-2018 entering cohort "graduated" in the same year. These students were administratively withdrawn due to inactivity for more than a year, and they had only the practicum course to finish. In 2017-2018 academic year, they returned to finish their practicum and the MPH degree.

The maximum time to graduation for the MPH program is six years, and the graduation rates are calculated based on this. The table above includes data for all MPH students (part-time and full-time). GPPH defines full-time students as those who take six or more courses per year.

GPPH had a 77% graduation rate for the entering cohort of 2012-2013, and is already well above the minimum 70% for the 2013-2014 cohort.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Not applicable

B3. Post-Graduation Outcomes

The program collects and analyzes data on graduates' employment or enrollment in further education post-graduation, for each degree offered (eg, BS, MPH, MS, PhD, DrPH).

The program achieves rates of 80% or greater employment or enrollment in further education within the defined time period for each degree.

1) Data on post-graduation outcomes (employment or enrollment in further education) for each degree. See Template B3-1.

Template B3-1

Post-Graduation Outcomes	**2016-2017 Number and Percentage**	**2015-2016 Number and Percentage**	**2014-2015 Number and Percentage**
Employed	121 (71%)	114 (83%)	54 (75%)
Continuing education/training (not employed)	2 (1%)	2 (1%)	3 (4%)
Not seeking employment or not seeking additional education by choice	0	0	0
Actively seeking employment or enrollment in further education	16 (9%)	4 (3%)	2 (3%)
Unknown	31 (18%)	13 (10%)	13 (18%)
Total	170	133	72
Outcome Rae	88%	97%	97%

2) Explain the data presented above, including identification of factors contributing to any rates that do not meet this criterion's expectations and plans to address these factors.

Post-graduation outcomes are assessed through an online survey (see ERF B3-1 for the survey tool). Alumni receive the survey one year after graduation – for example, those who graduated in May 2015 received the survey in June 2016. The surveys are sent three times per year in June, September and January. The survey is open for two months and reminders are sent every two weeks. To minimize the number of students with unknown outcomes, current employment information is also obtained from LinkedIn profiles or through personal emails from SSS.

For all years, the employment rates are satisfactory and range from 88% to 97%. The rates of employment are calculated by dividing the number of students who are employed, enrolled in additional education, or not seeking employment or not seeking additional education by choice by the total number of students whose status is known in the cohort, as outlined in the CEPH data template.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

Post-graduation employment rates of GPPH alumni have been consistently high. The majority of our adjunct faculty, following the scholar-practitioner model, are full-time professionals in the field, and mentor any interested students regarding career opportunities. A full-time position of Assistant Director of Career Services was added to GPPH in the 2017-2018 academic year to

provide more career services to students and alumni.

Weaknesses:
GPPH graduates reside in locations across the US and the world, which makes connecting with them after graduation a challenge. It is also a challenge to get a high response rate to the employment survey; for example, only 100 (59%) of the 2016-2017 graduates responded to the survey.

Plans:
Two new positions, Assistant Director of Career Services and Assistant Director of Workforce Development, will be critical in maintaining long-term relationships with alumni by offering training programs of interest to GPPH alumni. GPPH have also started to reach out to alumni who report that they are actively looking for employment and connect them with GPPH career advisors. This relationship building may facilitate better response rates.

CGPS is in the process of contracting with Portfolium, and once implemented (expected in early 2019), all students will be required to use this digital portfolio as part of the curriculum. This can be a platform to maintain a connection with alumni and know their post-graduation outcomes.

B4. Alumni Perceptions of Curricular Effectiveness

For each degree offered, the program collects information on alumni perceptions of their own success in achieving defined competencies and of their ability to apply these competencies in their post-graduation placements.

The program defines qualitative and/or quantitative methods designed to maximize response rates and provide useful information. Data from recent graduates within the last five years are typically most useful, as distal graduates may not have completed the curriculum that is currently offered.

1) Summarize the findings of alumni self-assessment of success in achieving competencies and ability to apply competencies after graduation.

   In order to get self-assessment data, alumni are sent an online survey (ERF B4-1) one year after graduation, and asked about their employment status as well as their perceptions of the extent to which the UNE MPH program prepared them in various competency areas. The survey was developed in October, 2017; therefore, those who graduated in Summer 2016 and Fall 2016 were sent the survey in Fall 2017 and those who graduated in Spring 2017 were sent the survey in Spring 2018. The survey was left open for two months and reminders were sent every two weeks.

   Out of the 170 individuals who graduated in the 2016-2017 academic year, 100 participated in the survey (59% response rate). Ninety-five alumni (56% of 2016-2017 graduates) responded to the question “To what extent did the UNE MPH program prepare you in the following areas: …”. Full results of the survey are included in ERF B4-2, and a summary table is shown below.

   On average across all competencies, 87% of respondents felt either prepared or well-prepared through their MPH program. The percentage of alumni who felt prepared or well prepared is highest for the following areas: understanding of social determinants of health (97%), written communication (94%), ethical practice (94%), and understanding of health care systems and their role in public health (93%).

   The percentage of alumni who felt prepared or well prepared is lowest for quantitative skills (i.e., Biostatistics, Epidemiology) at 72% and leadership and management at 77%. At least one person answered “not prepared” for the following areas: quantitative skills, written communication, leadership and management, program planning and evaluation, and the ability to advocate for policies and programs that will improve health in diverse populations.

To what extent did the UNE MPH program prepare you in the following areas:

	Not prepared	Somewhat prepared	Prepared	Well Prepared	N/A	Total	Prepared or Well Prepared
Ability to select and employ appropriate methodologies to address public health problems	0%	11%	34%	52%	3%	94	86%
Quantitative skills (e.g., Biostatistics, Epidemiology)	1%	24%	32%	40%	2%	94	72%
Understanding of health care systems and the role of public health	0%	4%	22%	70%	3%	94	93%
Ethical practice	0%	4%	30%	63%	2%	93	94%
Written communication	1%	4%	28%	66%	1%	94	94%
Oral communication	0%	15%	35%	47%	3%	95	82%
Leadership and management	2%	19%	33%	44%	2%	94	77%
Cultural competence and health disparities	0%	3%	27%	66%	3%	95	94%
Understanding of social determinants of health	0%	1%	21%	76%	2%	95	97%
Program Planning and Evaluation	2%	10%	33%	52%	3%	94	85%
Ability to advocate for policies and programs that will improve health in diverse populations	1%	6%	28%	60%	4%	95	88%
							Average=87%

2) Provide full documentation of the methodology and findings from alumni data collection.

ERF B4-1 is the survey tool sent to all alumni one year after graduation. Question 11 specifically deals with alumni self-assessment of success in achieving competencies. ERF B4-2 includes a PowerPoint with complete findings of the survey for 2016-2017 graduates. Slide 8 summarizes alumni perceptions on competency attainment. This survey is sent to alumni one year after graduation so that they will be able to assess the competency attainment as it relates to their employment, if any.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH has established a systematic way to assess alumni perception of competency attainment after graduation. Nearly 60% of alumni responded to the survey and the data validated anecdotal evidence from faculty and students regarding the need for more quantitative training. GPPH also has the agility and resources to make adjustments in a timely manner; the Associate Program Director worked closely with SMEs and IDs to revise GPPH required and elective courses to increase the use and management of data. For example, Research Methods and Principles of Epidemiology, both required courses, have been revised to include more rigorous data analysis and data management. Biostatics II has been added as an elective so that students can further develop their quantitative skills. Other elective courses such as Applied Epidemiology, Obesity Epidemic: A Public Health Perspective, and Infectious Disease Epidemiology have been revised to include the use of data analysis tools such as Stata. Together, these changes are designed to provide more rigorous quantitative methods training for our MPH students.

For program planning and evaluation, 85% of the respondents felt prepared or well-prepared and 2% felt not prepared. GPPH has also received feedback from the Curriculum Committee and several faculty that program planning and evaluation skills are critical for a successful public health practitioner and for practice-based courses. As such, Program Planning and Evaluation has become a required course for all students beginning with the 2018-2019 cohort.

Weaknesses:

The response rate for the alumni survey was 59%, lower than desired.

Plans:

GPPH aims to improve the response rates by connecting with alumni more regularly and offering post-graduation services and trainings. GPPH is in the process of building stronger relationships with alumni through career services and workforce development trainings; and this will ultimately increase the percentage of alumni who will provide feedback regarding competency attainment.

B5. Defining Evaluation Practices

The program defines appropriate evaluation methods and measures that allow the program to determine its effectiveness in advancing its mission and goals. The evaluation plan is ongoing, systematic and well-documented. The chosen evaluation methods and measures must track the program's progress in 1) advancing the field of public health (addressing instruction, scholarship and service) and 2) promoting student success.

1) Present an evaluation plan that, at a minimum, lists the program's evaluation measures, methods and parties responsible for review. See Template B5-1.

   Template B5-1 is shown below.

Evaluation measures	Identify data source(s) and describe how raw data are analyzed and presented for decision making*	Responsibility for review
Education		
Education Goal # 1: Enroll and support qualified students		
Student's Undergraduate GPA	Program Director produces Salesforce reports based on application information, and prepares graphs showing percentage of applicants and enrolled students with undergraduate GPA of 3.0 or better	Admission Committee at the beginning of each semester (May, September and January)
Racial, ethnic, and gender diversity of the student body	Program Director produces Salesforce reports based on application information, and prepares graphs to visualize the racial, ethnic and gender information of applicants and enrolled students	Admission Committee at the beginning of each semester (May, September and January)
Student satisfaction with academic advising	Research and Strategy team produces a summary report based on annual Student Satisfaction Survey (sent every Spring) and presents it to the cross-functional team	GPPH primary faculty and cross-functional team every Summer semester
Student satisfaction with student support services	Research and Strategy team produces a summary report based on annual Student Satisfaction Survey (sent every Spring) and presents it to the cross-functional team	GPPH primary faculty and cross-functional team every Summer semester
Education Goal # 2: Cultivate a learning environment that values diversity and cultural competence		
Student perception of faculty's ability to facilitate student participation and show respect for diverse perspectives	CGPS Director of Assessment produces summary report based on student feedback in course evaluations	All faculty at the Summer faculty meeting
Student and faculty perception of whether the program fosters a climate that respects diversity and cultural competence	Research and Strategy team produces a summary report based on annual Student Satisfaction Survey Associate Program Director produces a summary report based on annual Faculty Survey	GPPH primary faculty and cross-functional team every Summer semester All faculty at the Summer faculty meeting
Education Goal # 3: Ensure all graduates possess the knowledge, skills, and values necessary for public health practice		
Faculty perception on relevance and rigor of course materials	Associate Program Director produces a summary report based on annual Faculty Survey	All faculty at the Summer faculty meeting

Demonstration of competency attainment through APE and ILE projects	Assistant Director of Public Health Practice and Assistant Director of Thesis Advising produce a summary report based on APE and ILE evaluations	Curriculum Committee at the Fall Curriculum Committee meeting
Alumni and employer perception of competency attainment	Program Director produces a summary report based on the annual Alumni Survey	Curriculum Committee at the Fall Curriculum Committee meeting Advisory Committee at the Spring Advisory Committee meeting
Graduates employed in positions self-identified as public health-related within one year of graduation	Program Director produces a summary report based on the annual Alumni Survey	Curriculum Committee at the Fall Curriculum Committee meeting Advisory Committee at the Spring Advisory Committee meeting
Education Goal # 4: Recruit, retain and support qualified instructors		
Competitive compensation for faculty	Program Director produces a summary report based on Chronicle Data	CGPS Dean every May
Active public health practitioners as adjunct faculty	Program Assistant produces a summary table based on updated faculty CV	Program Director and Associate Program Director when making adjunct faculty teaching assignment decision every term.
Professional development opportunities for primary faculty	CGPS Director of Assessment produces a summary report based on focus group discussions with primary faculty every Spring	CGPS Dean every May
Faculty perception of feedback and technical support to help them improve	Associate Program Director produces a summary report based on Annual Faculty Survey	All faculty at Summer faculty meeting

Research		
Research Goal # 1: Sustain a scholarly research agenda to advance the field of public health		
Primary faculty has protected time to allow for meaningful research and scholarly activities	CGPS Director of Assessment produces a summary report based on focus group discussions with primary faculty every Spring	Program Director and CGPS Dean every May
Faculty and students are actively involved in scholarly activities	Assistant Director of Research and Service collects data on current GPPH scholarly activities through requests for updates, and produces a summary report	All faculty at the Fall faculty meeting Board of Trustees report every May and November
Provide and share funding and scholarly opportunities with faculty and students	Assistant Director of Research and Service identifies opportunities and shares them through an online portal as well as email communications. The number of opportunities shared are included in the annual research report	All faculty at the Fall faculty meeting
Research Goal # 2: Support scientific inquiry among students		
Faculty will mentor students during the design and execution of ILE	Assistant Director of Thesis Advising prepares a summary report of student satisfaction with mentoring through the ILE course evaluation	Assistant Director of Thesis Advising, Associate Program Director and ILE supervisors every semester
Students will apply for GPPH mini grants to support scholarly projects or dissemination of scholarly work	Assistant Director of Research and Service prepares a mini grant report, which includes information on the amount funded, the project and method(s) of dissemination	All faculty at the Fall faculty meeting
Research Goal # 3: Support a collaborative scholarly environment for students and faculty		
Faculty and students pursue scholarly collaborations with other UNE departments, community members and students	Assistant Director of Research and Service collects data on collaborative scholarly activities by faculty and students through requests for updates, and includes the information in the annual research report**.**	All faculty at the Fall faculty meeting

Service		
Service Goal # 1: Facilitate student and faculty participation in service activities with a public health focus		
Create, identify and share opportunities in which faculty, staff and students can perform community service together	Assistant Director of Research and Service identifies opportunities and shares them through an online portal as well as email communications, and includes the information in the annual research report.	Primary faculty at a team meeting in November
Students and faculty participate in professional and community service activities with a public health focus	Assistant Director of Research and Service collaborates with GPPH Marketing Manager (MM) to conduct service survey every Fall semester, and includes the information in the annual research report	Primary faculty at a team meeting in November
Service Goal # 2: Identify and support workforce development needs		
Collaborate with community stakeholders to determine workforce development needs	Assistant Director of Workforce Development collects data through community conversations and produces a report in November	Primary faculty at a team meeting every Spring Advisory Committee at the Spring Advisory Committee meeting
Develop resources and implement training opportunities to advance the field of public health	Assistant Director of Workforce Development documents the training opportunities and implementation processes every November	Primary faculty at a team meeting every Spring Advisory Committee at the Spring Advisory Committee meeting

2) Briefly describe how the chosen evaluation methods and measures track the program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success.

Each of the educational, research and service goals relates to GPPH vision, mission and values. GPPH believes that the program's role in advancing the field of public health is by:

1. Recruiting and supporting qualified students, and preparing them for a meaningful career in public health.
2. Creating a diverse, respectful, and collaborative educational environment.
3. Giving students access to faculty with credentials and real-world work experiences in their fields of instruction.
4. Highlighting the value of research and service in public health careers, and encouraging faculty and students to participate in research and service activities.
5. Ensuring that students gain relevant knowledge and skills necessary to become successful public health practitioners.
6. Establishing meaningful relationships with community stakeholders to inform the needs and progress in the field of public health.

Taken together, the evaluative measures summarized in the table above provide a framework for assessing how well GPPH is performing in its role in advancing the field of public health.

3) Provide evidence of implementation of the plan described in Template B5-1. Evidence may include reports or data summaries prepared for review, minutes of meetings at which results were discussed, etc. Evidence must document examination of progress and impact on both public health as a field and student success.

The folder ERF B5 includes evidence of implementation of the plan described in Template B5-1. The ERFs are as follows:

ERF B5-1
Admissions Committee Reports (2017-2018, 2018 Summer, 2018 Fall)
Meeting minutes of the 2018 Summer and 2018 Fall Admissions Committee Meeting

ERF B5-2
Student Satisfaction Survey results from 2015, 2017, 2018
2018 Student Satisfaction Survey presentation and discussions

ERF B5-3
Summary results on student perception of faculty's respect for diverse opinions

ERF B5-4
2018 Faculty Survey report
Meeting minutes of the 2018 Summer faculty meeting

ERF B5-5
ILE Competency Attainment Report
APE Competency Attainment Report
Curriculum Meeting Minutes (Fall 2018)

ERF B5-6
2016-2017 graduates' survey results
Employer survey results
Meeting minutes of the Fall 2018 Curriculum Committee Meeting

ERF B5-7
Report to the Dean regarding faculty satisfaction

ERF B5-8
Table of adjunct faculty work experience

ERF B5-9
2018 Research and Service Report
Minutes of the 2018 Fall faculty meeting
Board of Trustees Reports (2018)

ERF B5-10
Survey results of student satisfaction with mentoring in ILE (Summer 2018)

ERF B5-11
Summary of community conversations

ERF B5-12
Summary of training opportunities implemented in 2018

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
GPPH has articulated a plan to collect and review data to track the progress related to its outcome measures. The review process includes diverse stakeholders such as primary faculty, adjunct faculty, various GPPH committees, college support staff, and the Dean.

Weaknesses:
Workforce development activities have been spearheaded by the Assistant Director of Research and Service. While these activities are valuable, GPPH recognizes the need for a full-time individual who can help determine the workforce needs, implement training programs and elevate the role of GPPH in advancing the field of public health.

Plans:
A full-time Assistant Director of Workforce Development joined the GPPH team on June 25, 2018. This position is responsible for determining the workforce needs, developing resources, implementing training programs, and elevating the role of GPPH in advancing the field of public health. The Assistant Director of Workforce Development has already spearheaded a three-part financial management series and conducted community conversations to inform workforce development activities.

B6. Use of Evaluation Data

The program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.

The program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.

1) Provide two to four specific examples of programmatic changes undertaken in the last three years based on evaluation results. For each example, describe the specific evaluation finding and the groups or individuals responsible for determining the planned change, as well as identifying the change itself.

Example 1

A summary of the 2017 community conversations (ERF B6-1) revealed that the public health workforce needs more training on financial management principles and grant development. Based on this finding, GPPH worked with an adjunct faculty with grant writing expertise to develop a grant writing webinar. The two-hour interactive webinar was held on March 28, 2018.

Over twenty community members working in public health attended the webinar, and it was made available to the public on YouTube:
https://www.youtube.com/watch?v=nhfnKb34ays&feature=youtu.be

A three-part series on financial management principles was developed by Rebecca Arsenault, an adjunct faculty member with appropriate expertise, and held between September and October, 2018.

Example 2

According to the 2018 Annual Faculty Survey (ERF B6-2), GPPH faculty are encountering many students who experience difficulty with professional writing. GPPH has made some changes at the admissions and student support levels to help address the concern. First, beginning in the 2017-2018 admission cycle, the Admissions Committee paid increased attention to applicants' writing ability as evidenced in well-developed goal statements.

GPPH's new student orientation was revised, and beginning in Fall 2018, GPPH added a new writing assignment to be reviewed by faculty. The faculty will then identify any students that may require extra writing support, and connect them with appropriate writing resources available at UNE. GPPH is also working with an adjunct faculty member to create a free, non-credit writing seminar; students experiencing writing difficulties will be encouraged, or in some cases required, to take the seminar. This seminar will be available to students beginning in Spring 2019.

Recent curriculum revisions have also been designed to address this issue. For example, GPH 714: Principles of Public Health is the first course every student takes; it has been revised to add one week that focuses on public health research and writing skills. Likewise, GPH 726: Social and Behavioral Health, a required course, was revised to focus on finding and writing about evidence as one of its primary learning objectives. Curriculum wide, rubrics have been revised to place 20% of a grade on writing skills.

Example 3

Based on feedback from faculty during course reflections in Summer 2017 (summarized in ERF B6-3), two concerns were identified with the rubrics used for grading in all GPPH courses. The first was with rubric alignment and whether the rubrics were accurately assessing the content and

skills measured by some course assignments and discussions. The second was the ease of use and whether faculty could accurately grade the quality of the student work based on the wording of some rubrics. Since these concerns were raised in courses across the program, the Associate Director of Curriculum worked with faculty, SMEs, and Instructional Design to review all course rubrics for content. A college-wide emphasis on communication and research skills was incorporated into the rubrics, and a new rubric scale was implemented for all courses to allow faculty to focus on grading the quality of student work (ERF B6-4)

Initial revisions based on faculty feedback were presented at the Fall 2017 faculty meeting (ERF B6-5). Based on additional feedback from the faculty, further revisions were made to improve rubric utility (ERF B6-6). See ERF B6-7 and B6-8 for examples of the initial rubric and the final rubric. Discussions of grading and the use of the rubrics is addressed in materials sent to faculty each term (ERF B6-9). Feedback collected in ongoing course reflections has indicated that the revisions to the rubrics have increased faculty's ability to accurately assess student work, though there is still discussion related to application and nomenclature for categories (ERF B6-10).

Determining quantitative measures has been difficult due to the number of changes undertaken in course content across the curricula during the time the rubrics were changed and the labor-intensive nature of data abstraction from our current LMS. The Associate Director of Curriculum will continue to educate faculty on the use of rubrics and to refine rubrics to promote accurate and rigorous grading. Faculty input will continue to be sought in course reflections and a specific question will be added to the 2019 Faculty Survey to address grading and rubric use.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

The examples above demonstrate that GPPH has the agility, leadership support, and expertise to make quality improvements based on review of outcome measures. GPPH also has primary faculty with specific administrative duties who can take the lead in collecting and analyzing data for outcome measures, translating the evaluation findings, implementing changes, and articulating how they impact the program as a whole. The three examples are chosen because they highlight changes led by the Assistant Director of Workforce Development and Associate Program Director.

Weaknesses:

GPPH involves faculty and committees in review of outcome measures and planning changes/improvements accordingly; however, GPPH could do a better job of communicating the findings and associated changes with the student body as well.

Plans:

GPPH will work with APHA-SA to brainstorm ways that the program evaluation data can be communicated to students. As of Fall 2018, APHA-SA and GPPH administration have agreed to hold town-hall meetings every semester. These town-hall meetings may be used to discuss evaluation data and programmatic changes.

C1. Fiscal Resources

The program has financial resources adequate to fulfill its stated mission and goals. Financial support is adequate to sustain all core functions, including offering coursework and other elements necessary to support the full array of degrees and ongoing operations.

1) Describe the program's budget processes, including all sources of funding. This description addresses the following, as applicable:

   a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.

      Primary faculty of GPPH (who have both administrative and teaching responsibilities) hold 12-month appointments with the University. Their salaries are included in the program's operating budget, and are fully guaranteed. Primary faculty may seek external funding in the form of research grants. The UNE faculty handbook describes its externally funded grants policy as follows:

      > *Indirect Costs and Budget Relief: Certain grants and contract sources provide for indirect-cost reimbursement to cover overhead and other costs incurred by the University but not directly covered by the grant. Budgeted items directly covered by the grant, such as salaries of the Project Director/Investigator, faculty and staff release time, and equipment are figured into budget relief. All indirect-cost and budget-relief revenues from a grant will first be allocated to pay for replacement personnel, if any, and direct costs incurred by grant implementation. Remaining funds will be allocated to the Office of Scholarship and Research for strategic investments in the University, the college that the grant originated from, and the research program of the Principal Investigator listed on the grant. In order to support changing University priorities, the indirect cost distribution model will be evaluated on an annual basis by the Office of Scholarship and Research, and listed on the VP for Research website.*

      Adjunct faculty and SMEs are contracted on a course-by-course basis. Their salaries are also calculated into the program's operating budget based on the projected numbers of courses to be taught, refreshed, redesigned, or developed.

   b) Briefly describe how the program requests and/or obtains additional faculty or staff (additional = not replacements for individuals who left). If multiple models are possible, indicate this and provide examples.

      The GPPH budget is developed annually by the Program Director in collaboration with the CGPS Assistant Dean of Finance and Strategy. Each January, the Program Director and Assistant Dean of Finance and Strategy together review the expenditures in the prior year, consider program growth, professional and industry opportunities, and other funding needs to support both the administrative staff and faculty in order to comprise a proposed budget. As this budget is developed, the Program Director consults with primary faculty to review the workload, enrollment numbers, and future plans, and requests additional positions as needed or projected. Additionally, the Assistant Dean of Finance and Strategy and the Program Director work closely with department heads in Enrollment, Student Support, and Instructional Design to ensure those areas are adequately staffed to support those operational areas for the program. Next, this proposed budget is submitted to the Dean for review and approval, after which it is sent to the Provost, Senior Vice President of Finance and Administration, and the Director of Financial Planning for final review. Finally, the budget is reviewed and approved by the President and the Board of Trustees.

The budget is considered a living document, and can be modified to accommodate student enrollment changes. Mid-year, the University provides a window of opportunity to request new funding called “Fall Adjustments”. During this Fall Adjustment period, the Assistant Dean of Finance and Strategy, and the Program Director identify whether or not the program’s funding is sufficient for the remainder of the year. If more primary faculty or staff resources are needed, a Position Request is submitted in conjunction with requests to increase the budget following the same approval chain listed previously. If increased student enrollment requires more course sections, the cost of providing the additional sections (i.e., adjunct faculty salaries and other support personnel time) is requested following the budget approval process.

For example, in the 2016-2017 academic year, the program identified a need for an additional person to work with students planning their practice-based experience. A proposal was made to the CGPS Dean, who then reviewed and processed the approval through the Provost, Senior Vice President of Finance and Administration, and the Director of Financial Planning as described above. As a result of the request, a full-time position (Assistant Director of Thesis Advising) was added to GPPH. Similarly, two new positions in the areas of career services and workforce development were proposed and approved in the 2017-2018 academic year to accommodate the needs of the program.

c) Describe how the program funds the following:
   a. operational costs (programs define “operational” in their own contexts; definition must be included in response)

      CGPS is primarily a tuition-driven college, and operational costs are budgeted and funded based on recruitment, enrollment, and retention goals and projections. Operational costs are defined as non-salary expenditures allocated to the GPPH program, including but not limited to items such as professional development, travel, dues and subscriptions, books, technology software, accreditation, printing, and postage. This operational budget also includes a miscellaneous fund for unplanned expenses. To develop an operational budget, the Program Director, in concert with the Assistant Dean of Finance and Strategy, sets goals for recruitment, enrollment, and retention. The Program Director consults with the primary faculty to ensure that adequate amounts of funds are available, especially for program development, professional development, travel, and accreditation.

      Tuition and enrollment projections are developed annually as part of the program’s budget planning process, are monitored each term, and are reassessed as part of the University’s Fall Adjustments process once per fiscal year by the CGPS Assistant Dean of Finance and Strategy. To project the next year’s revenue for GPPH, enrollment trends are examined over the lifetime of the program with specific emphasis on the most recent academic year trends. The Assistant Dean monitors and records average term-to-term retention of current students, and tracks projected growth (or decline) in new students. The retention average is used in concert with an assumption of expected student graduation to calculate an estimated projection of currently enrolled students continuing in the program. That figure is combined with the projected new admissions for each term in the year to provide an estimated student headcount. This student headcount is then translated into credit hours, based on the program average credit hour enrollment per student, per semester. This number, multiplied by cost per credit hour, provides the projected tuition revenue for the program for the upcoming fiscal year. See ERF C1-1 for charts that illustrate how CGPS projections are made.

b. student support, including scholarships, support for student conference travel, support for student activities, etc.

Each year, GPPH receives $ 20,000 from CGPS's contingency fund to support faculty and student research and conference travels in the form of mini-grants. Students are encouraged to pursue collaborative research with faculty and/or present at conferences, and they may request funding through the mini-grant application found at: http://success.une.edu/mph_opportunities/new-gpph-mini-grant-program-available/ . The Graduate and Professional Student Association (GAPSA) at UNE has a budget for student activities organized by the GPPH student organization, UNE APHA-SA. UNE also has a number of scholarships and financial aid opportunities that are funded

In addition to the support described above, the program collaborates with the SSS team to ensure that students are supported during their studies. SSS serve as liaisons between students and UNE services by connecting them with appropriate departments and individuals. For example, a student may have a question about transcripts and SSS will then direct them to the online registrar contact. Three SSS are dedicated to the GPPH students. Budget for SSS is funded separately by the College's Online Worldwide Learning (OWL) unit (see note at bottom of Template C1-1 for a description of this unit). Each year, the Program Director, the Director of Student Support Services and the Assistant Dean of Finance and Strategy meet to ensure that support services meet the needs of GPPH students.

c. faculty development expenses, including travel support. If this varies by individual or appointment type, indicate this and provide examples

GPPH primary faculty are supported through the allocation of professional development, travel, and program development funds, all of which are budgeted as part of the program's operational budget. As described above, the Program Director, the Assistant Dean of Finance and Strategy, and the Dean calculate these costs based on the number of primary faculty in the program and their projected needs. The Program Director has the discretion to allocate this funding to any opportunity identified that will support the teaching, research, and service of the faculty. At the beginning of each fiscal year, the Program Director asks primary faculty to identify relevant conferences and training activities. The professional development fund is distributed among the primary faculty, who can propose a conference or training that aligns with their professional interests. For example, in the 2018-2019 academic year, the Assistant Director of Public Health Practice has chosen to attend and present her research at the annual meeting of the American Public Health Association (APHA), while the Assistant Director of Thesis Advising, whose professional background is in law and public health policy, plans to attend a public health policy conference.

For adjunct faculty, professional development and conference travel funds are allocated through the mini-grant program. Priority is given to faculty who agree to mentor one or more GPPH students in their research project or present original research at a national/international conference.

d) In general terms, describe how the program requests and/or obtains additional funds for operational costs, student support and faculty development expenses.

As described in C1 1b, the budget is considered a living document, and can be modified to accommodate student enrollment changes. The budgeting process at the University begins in December of the year preceding the budget with the issuing of planning paperwork. In January, the expenditures in the prior year are reviewed and the Program Director consults

with primary faculty to review the workload, enrollment numbers, and future plans to identify any additional operational resource needs. All requests for additional funds for operational costs, student support, and faculty development expenses are included during this budget development process. The proposed budget is submitted to the Dean, who works with the Assistant Dean of Finance and Strategy to review and approve requests. Next, the proposed budget is sent to the Provost, Senior Vice President of Finance and Administration, and Director of Financial Planning for final review. Final review and approval are done by the President and the Board of Trustees.

Mid-year, the University provides a window of opportunity to request new funding called "Fall Adjustments". During this Fall Adjustment period the Assistant Dean of Finance and Strategy and the Program Director identify whether or not the program's funding is sufficient for the remainder of the year. If more primary faculty or staff resources are needed, a Position Request is submitted in conjunction with requests to increase the budget following the same approval chain listed previously. If increased student enrollment requires more course sections, the cost of providing the additional sections (i.e., adjunct faculty salaries and other support personnel time) is requested following the budget approval process.

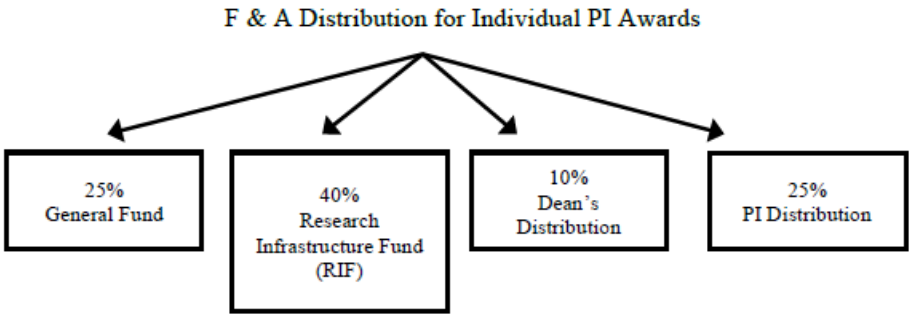
e) Explain how tuition and fees paid by students are returned to the program. If the program receives a share rather than the full amount, explain, in general terms, how the share returned is determined. If the program's funding is allocated in a way that does not bear a relationship to tuition and fees generated, indicate this and explain.

UNE utilizes a hybrid centralized budgeting model in which existing resources are allocated to preserve current operational requirements and new resources generated by growth are allocated annually based on strategic priorities. Under this model, each program may propose an operating budget and part-time faculty salaries based on enrollment projections and staffing needs. There is not a formula for how much of the tuition and fees paid by students are returned to the program. As described above, the GPPH Program Director works with CGPS Dean and CGPS Assistant Dean for Finance and Strategy to plan and request any additional budget request for growth, which is then moved through the budget approval process.

Indirect or central support costs such as information technology, human resources, finance/accounting, payroll, financial aid, student accounts, registrar, library, and campus services are maintained and funded centrally and are not allocated to schools and/or programs. Wage and benefit increases for each academic program are also funded centrally through the annual budget process. While programs are not charged a tax rate to maintain central support operations, there are target ranges for financial performance to which programs are expected to adhere in order to ensure the continued financial health of the institution.

f) Explain how indirect costs associated with grants and contracts are returned to the program and/or individual faculty members. If the program and its faculty do not receive funding through this mechanism, explain.

While GPPH primary faculty positions are fully funded and do not rely on grants or contracts, faculty are encouraged to apply for external funding. Any indirect costs associated with grants and contracts are distributed per the university's policy. The University's policy for Facilities and Administrative Cost Recovery (F&A) distribution, revised in August, 2017, is included below and can be found at:
https://drive.google.com/file/d/0B7PmehIQdg_SVHhBcENHSmpIaEk/view



UNE's Office of Sponsored Program explains the distribution model as follows:

> *UNE faculty have comparatively heavy teaching loads in relation to their colleagues at research intensive institutions. This distribution model recognizes that, at this stage of UNE's development, providing incentives to PIs, colleges, and centers to expand their research activity is critical. It is expected that this distribution will result in greater research activity and funding at UNE.*
>
> ***The PI Distribution** provides a financial incentive for PIs to conduct their research by returning 25% of a project's recovered F&A directly to an internal UNE account under the control of the PI to be used in support of and/or expansion of that faculty member's current and future research.*
>
> ***The Research Infrastructure Fund (RIF**) shall be used to help contribute to the ongoing development and expansion of research capacity at UNE. New faculty start up packages, shared research resources, faculty and student research mini-grants, and other strategic investments designed to increase research volume and improve the administrative support that faculty receive are all appropriate uses of this fund. Requests for use of these funds shall be in writing, and have the endorsement of a UNE Dean and Center Director (when applicable). Deans and Center Directors may also request use of these funds. This fund shall be jointly administered by the RIF Committee, consisting of the Provost, the Vice President of Finance and Administration, the Interim Vice President for Research, and the Director of Research Administration.*
>
> *Requests for use of the RIF for faculty start up packages, urgent equipment replacement (for which there are inadequate other sources), hard-dollar match, or emergencies will be evaluated on a rolling basis. Requests for mini-grant funding shall follow the application process set by the administrator of each existing program.*
>
> *Requests to the RIF for non-urgent research resources (e.g. conference support, research equipment, bridge funding) will be considered at least semi-annually on a regular schedule, and will be preceded by a UNE-wide announcement of their availability. If non-emergency requests are received after these dates, they will be considered with the requests submitted for consideration for the following due date. Requestors shall be notified within 30 days of the deadlines as to the result of their request.*
>
> *Successful requests for RIF funds will be clearly written, describe in detail how the funds will be used, identify any other available institutional resources to help support the request, and most importantly, indicate how an award of funds will*

develop research capacity at UNE and/or improve the probability of future external awards to UNE. Any request to utilize RIF funds as hard dollar match or otherwise on a grant application shall also be made using this method, and shall be documented on the UNE pink sheet along with any other match commitments. Requests for RIF funds should initially be submitted concurrently to the interim Vice President for Research and the Director of Research Administration, who will obtain any other necessary approvals, track all requests and commitments, and notify the requestor of all approvals or denials.

***The Dean's Distribution** shall be 10%. There is also budget relief which results from grant-funded faculty salaries that shall remain within the college, providing some incentive at the college level for increasing faculty participation in research.*

The General Fund is the university overhead, and will be used for general university operations.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the responses must make clear the financial contributions of each sponsoring university to the overall program budget. The description must explain how tuition and other income is shared, including indirect cost returns for research generated by the public health program faculty appointed at any institution.

Not applicable

2) A clearly formulated program budget statement in the format of Template C1-1, showing sources of all available funds and expenditures by major categories, for the last five years.

Template C1-1

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019
Tuition & Fees	$4,181,711	$5,929,277	$7,015,077	$7,322,161	$6,508,293
Gifts					
Total	$4,181,711	$5,929,277	$7,015,077	$7,322,161	$6,508,293
Expenditures					
Faculty Salaries & Benefits	$589,576	$535,206	$807,314	$969,572	$1,275,470
Staff Salaries & Benefits	$98,829	$165,419	$298,480	$402,622	$589,922
Operations	$297,402	$198,793	$194,145	$200,892	$202,190
Travel	$34,751	$8,279	$16,462	$19,065	$16,000
Other (Direct Costs)	n/a	n/a	n/a	n/a	n/a
Other (Costs of OWL services*)	$665,640	$818,622	$1,021,178	$749,636	$956,526
Total	$1,686,198	$1,191,113	$2,337,579	$2,341,787	$3,040,108

**OWL (Online Worldwide Learning) is the University's business unit for all fully online programs. The services in this unit include marketing, recruitment and enrollment, student retention and support, and instructional design services. These services are used exclusively by those online programs within the College of Graduate and Professional Studies and have been designed to provide the unique services required by online programs and their students. All marketing activities for online programs in CGPS, to include brand and tactical marketing, are handled within the OWL unit. All applications to online programs are packaged by the OWL enrollment team. Online students are supported through a team of online student support specialists assigned to each online*

program. And all courses within the College are designed through the collaboration between the College's instructional designers and the program's subject matter experts (SMEs). The costs shown here represent the program's proportion of OWL services used.

If the program is a multi-partner unit sponsored by two or more universities (as defined in Criterion A2), the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget.

Not applicable

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
UNE and CGPS leadership are committed to providing adequate financial resources for quality instructions and student services within GPPH. The Program Director is heavily involved in the budgeting process and GPPH primary faculty provide meaningful input. The budgeting process is also flexible in that there is an opportunity to make mid-year adjustments.

Weaknesses:
At UNE, there is no defined formula for how tuition and fees paid by students are returned to the program.

Plans:
While there is no defined formula for how tuition and fees paid by students are returned to the program, the university and college leadership, Program Director and primary faculty are committed to providing quality instruction and services to the students. Various outcome measures (described in B) are in place to ensure that the program is meeting its educational, research and service goals. There is a flexible and defined process to request additional financial resources as the need arises.

C2. Faculty Resources

The program has adequate faculty, including primary instructional faculty and non-primary instructional faculty, to fulfill its stated mission and goals. This support is adequate to sustain all core functions, including offering coursework and advising students. The stability of resources is a factor in evaluating resource adequacy.

Students' access to a range of intellectual perspectives and to breadth of thought in their chosen fields of study is an important component of quality, as is faculty access to colleagues with shared interests and expertise.

All identified faculty must have regular instructional responsibility in the area. Individuals who perform research in a given area but do not have some regular expectations for instruction cannot serve as one of the three to five listed members.

1) A table demonstrating the adequacy of the program's instructional faculty resources in the format of Template C2-1.

Template C2-1

	FIRST DEGREE LEVEL			SECOND DEGREE LEVEL	THIRD DEGREE LEVEL	ADDITIONAL FACULTY
CONCENTRATION	**PIF 1**	**PIF 2**	**PIF 3**	**PIF 4**	**PIF 5**	
Generalist Degree MPH	Nang Tin Maung 1.0	Carol Ewan Whyte 1.0	Titilola Balogun 1.0	NA	NA	PIF: 4 Non-PIF: 47

TOTALS:

Named PIF	3
Total PIF	7
Non-PIF	47

2) Explain the method for calculating FTE for faculty in the templates and evidence of the calculation method's implementation. Programs must present calculation methods for primary instructional and non-primary instructional faculty.

All primary faculty, listed in Template E1, work full-time within GPPH. They teach regularly in addition to their administrative responsibilities, and dedicate time to research, scholarship, and service. Primary faculty are also involved in course development as SMEs.

Adjunct faculty members, listed in Template E2, are contracted to teach courses that align with their expertise, based on review of their educational degrees and work experience. Adjunct faculty teach one to six courses per year, depending on course needs and faculty availability. Since adjunct faculty follow a scholar-practitioner model, they have other commitments to their time outside of their GPPH teaching commitments. Faculty teach just one course per term with a course cap of 20 students. They spend on average 15 hours per week teaching, which is approximately 37.5% FTE per week. Based on this, we calculate that each eight-week course contract is equivalent to 5.8% annual FTE. Adjunct faculty occasionally are contracted as SMEs to design new or update existing courses in their area of expertise. These contracts are equivalent to a teaching contract in FTE calculation. In addition, adjunct faculty members may serve as ILE supervisors or consultants on specific tasks, e.g., developing writing resources for

students or leading seminars. ERF C2-1 documents faculty teaching assignments for courses in Spring, Summer and Fall 2018. ERF C2-1 also includes an overview of each faculty member's teaching load for the 2018 calendar year. This information is used to calculate FTE for individual instructors.

3) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

Not applicable

4) Data on the following for the most recent year in the format of Template C2-2. See Template C2-2 for additional definitions and parameters.

Template C2-2. Faculty regularly involved in advising, mentoring and the integrative experience

Faculty Advisor General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Master's	77	22	120

Student Support Specialist (SSS) General advising & career counseling			
Degree level	**Average**	**Min**	**Max**
Master's	158	100	213

Primary Faculty Advising in MPH integrative experience		
Average	**Min**	**Max**
2	1	3

Adjunct Faculty Advising in MPH integrative experience		
Average	**Min**	**Max**
2	1	2

Both a Faculty Advisor and an SSS support each GPPH student, so the full student body is represented in both of the General Advising tables in C-2 below. Primary faculty serve as Faculty Advisors and provide public health specific advice and mentoring. Due to new primary faculty joining GPPH, current academic advising loads are uneven but will equalize over time. SSS provide support to students in areas related to policies, registration, and accessing resources for time management and other skills that will help them during their studies. The variation in student load for SSS is due to one specialist also acting as a supervisor of SSS.

The ILE became part of the GPPH curriculum in the Summer 2018 semester and offers an additional opportunity for faculty advising. The Summer course offerings had six students

working with one primary and three adjunct faculty. The Fall semester had five students with one primary and three adjunct faculty. The enrollment for Spring 2019 will be 16 students with two primary and eight adjunct faculty. For future semesters, faculty will work with a maximum of five students per semester as described in D7.

5) Quantitative data on student perceptions of the following for the most recent year:

   a. Class size and its relation to quality of learning (eg, The class size was conducive to my learning)

      Students complete a course evaluation at the end of each course responding to questions on a four-point scale from strongly disagree to strongly agree. In Summer 2018, 95% of students who answered the question "The class size was conducive to my learning" stated that they "strongly agree" or "agree" with the statement. This percentage was 97% in the Spring 2018 and 95% in the Fall 2017 semesters. Refer to ERF C2-2 for data from course evaluations.

      In addition to the course evaluations, students are asked about class size and its relation to quality of learning in the annual student satisfaction survey. In the 2018 Student Satisfaction Survey, 100% of respondents (66 students) either agreed or strongly agreed with the statement "the class size is conducive to my learning" (ERF C2-3, Slide 29).

   b. Availability of faculty (ie, Likert scale of 1-5, with 5 as very satisfied)

      As a fully online university, the majority of student interactions with faculty are through academic advising conversations (addressed in H1) and classes taken within the program. GPPH asks two questions related to faculty availability on our course evaluations on a four point scale from strongly disagree to strongly agree. The first question addresses general availability, "The instructor was accessible to students." In Spring 2018, 92% of responding students agreed or strongly agreed with this statement, which was similar to the Fall 2017 and Summer 2017 results (92% and 93% respectively). The second question addresses office hours specifically, "The office hours addressed my needs." In Spring 2018, 92% of students agreed or strongly agreed with this statement as well (92% Fall 2017 and 94% Summer 2017).

      In addition to the course evaluations, students are asked about availability of faculty in the annual student satisfaction survey. In the 2018 Student Satisfaction Survey, 95% of the survey respondents either agreed or strongly agreed with the statement "I have been satisfied with the availability of the program faculty". 5% disagreed with the statement (ERF C2-3, Slide 20).

6) Qualitative data on student perceptions of class size and availability of faculty.

   When asked, "How did the class size impact your learning in this course?", students commonly replied that due to the course being online, the question was not applicable or that class size had no impact on their learning. These responses were seen among students irrespective of their response to the quantitative question, "The class size was conducive to my learning."

   The majority of students who did feel that the class size impacted their learning felt it had a positive impact. Students mentioned two main benefits in response to how the class size affected their learning. The first related to their relationship with their instructor and the ability to receive feedback as illustrated by the following quote: "Smaller class size allowed for more individualized learning and mentoring."

The second, and most common, benefit that students mentioned related to the impact that the class size had on interaction with other students through the discussion boards, as illustrated by the following quote:

> "Class size was ideal; there were just enough students to allow for diversity in the discussion boards, but not too much that it was impossible to read all posts."

Students were also asked, "How did the instructor's availability during the course affect your learning of the subject?" While comments were overwhelmingly positive, a few students did express concern about their instructor due to delays in grading or responding to questions posed in the course or by email. The quote below addresses the impact on students when faculty are not available:

> "Professor … lacked availability during this course. She didn't answer student questions within a timely manner before assignment due dates. A lack of presence can have a negative effect on a learner. Being available and present is extremely important for students enrolled solely in online programs. Professor … seemed to not care about this course or the students."

As reflected by the 92% of students who agreed that faculty were available and the office hours met their need, the majority of comments reflected a positive experience with faculty availability and described how "timely response to questions helped us to better understand the material to finish our work on time." Elements of the following quote were reflected in the majority of experiences described in response to this question:

> "Dr. …'s prompt response to student questions was integral to effective learning. Course questions were applicable to all students, and her timely responses helped each of us succeed in the week's coursework. Dr. … responded to my emails within 24 hours, and usually less than that. I knew throughout the course that if I was `stumped`, I could reach out via email or course message and she would respond in a thoughtful and timely manner."

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
Our faculty, both primary and adjunct, bring a range of public health experiences to the program and classroom. Students have overwhelmingly positive perceptions of class size and the availability of faculty. Expectations for faculty availability are clarified when hiring adjuncts. Course evaluations are one of the supporting documents used in future adjunct hiring decisions, and timely and substantive feedback by faculty is evaluated here and through peer reviews during courses.

Weaknesses:
Currently, GPPH measures student perceptions of class size and faculty availability only in the course evaluations, and academic advising loads are spread unevenly due to new primary faculty joining the program.

Plans:
To address the weaknesses identified above, GPPH will add a question to future annual student surveys to gain an understanding of class size and faculty availability for the program as a whole. Over time, faculty advising loads will be spread evenly among the seven primary faculty, as described in detail in H1.

C3. Staff and Other Personnel Resources

The program has staff and other personnel adequate to fulfill its stated mission and goals. The stability of resources is a factor in evaluating resource adequacy.

1) A table defining the number of the program's staff support for the year in which the site visit will take place by role or function in the format of Template C3-1. Designate any staff resources that are shared with other units outside the unit of accreditation.

   Template C3-1 Program Staff and Support Services HC and FTE
   *Those shared with other units are marked with * and their FTEs are calculated accordingly*

Role/Function	HC	FTE
Program Assistant	1	1
Marketing Manager*	1	0.5
Enrollment Counselors	2	2
Student Support Specialists	4	3.5
Instructional Designers*	9	2
Online Learning Specialist*	1	0.2
Online Writing Specialist*	1	0.2
Online Research and Teaching Librarian*	1	0.2
Subject Tutors for GPPH Students	Varies	Varies

2) Provide a narrative description, which may be supported by data if applicable, of the contributions of other personnel.

   Program Assistant
   This is a full-time (40 hrs/week) position dedicated to GPPH. This position assists with administrative functions such as processing of adjunct faculty contracts, handling student petitions submitted through SSS, scheduling meetings and maintaining meeting minutes, and supporting primary faculty with administrative functions as needed.

   Marketing Manager (MM)
   This position reports to the Director of Marketing within CGPS. One MM works with GPPH as well as the Science Prerequisites for Health Professional Programs (0.5 FTE in each program). The MM is involved in strategic planning, creative direction, and budgeting for campaigns and initiatives across various marketing channels, including digital, email, print, paid search, and social media. In addition, the MM collaborates with the program to produce a monthly GPPH newsletter distributed via email to GPPH faculty, students and community members who opted to receive the newsletter.

   Enrollment Counselors (EC)
   This position reports to the Director of Enrollment within CGPS. There are two full-time ECs who are dedicated to GPPH. ECs help applicants navigate through the application process; they are also responsible for ensuring that all application materials are complete before submitting them to the Admission Committee. Once the Admission Committee makes a decision on an application, ECs communicate the decision to the applicants.

   Student Support Specialists (SSS)
   This position reports to the Director of Student Support within CGPS. There are three full-time SSS who are dedicated to GPPH. Once an applicant is admitted to the program, they are assigned a support specialist, who has a conversation with the student welcoming them to the program and helping them navigate through processes such as financial aid, orientation, and

registration. SSS interact with every student (who is taking a class) via email or phone at least once during the term. SSS are often the first point of contact when a student requires assistance, and they help connect students with other resources such as the Student Academic Success Center (SASC), Financial Aid Office, Registrar, Academic Advisors (AAs), or the Assistant Director of Career Services. They also facilitate the petition-filing process by ensuring that all appropriate forms and supporting materials are included and complete before forwarding them to the program.

Instructional Designers (ID)
This position reports to the Assistant Director of Instructional Design within CGPS. ID are shared among the CGPS programs but at any given time, 2.0 FTE-equivalent ID are dedicated to GPPH. ID are responsible for project management and collaboration with SMEs, faculty, and the program to maintain, refresh, redesign, and build new online learning experiences for a variety of courses while also supporting faculty as they teach a course. ID complement all course development by providing and/or facilitating necessary consulting and training to faculty and staff on instructional best practices for adult learners; coaching instructors on the use of computer-based instructional and multimedia applications; assisting with the technical and programmatic developments of assigned projects and applications; and providing assistance with planning and coordinating materials with the course instructor(s) and the program.

Online Learning Specialist (OLS)
An OLS, located in the University's Student Academic Success Center (SASC), provides assistance to online students within areas including but not limited to writing, research, study skills, time management, and communication skills. One full-time OLS is shared among the five graduate programs within CGPS.

Online Writing Specialist (OWS)
An OWS, located in the University's Student Academic Success Center (SASC), works exclusively with online students to provide services such as one-on-one synchronous writing support appointments and creation of writing resources. The OWS also collaborates with Program Directors and OLS on the timing and content of writing resources for online students. One full-time OWS is shared among the five graduate programs within CGPS.

Online Research and Teaching Librarian (ORTL)
An ORTL, a full-time staff person of the UNE library, is shared among the five graduate programs within CGPS. The ORTL provides asynchronous orientation and instruction for online students on the use of the library to access scholarly literature. The ORTL also works closely with the program to ensure that electronic and print versions of textbooks are easily accessible to online students and instructors.

Subject Tutors for GPPH Students
Subject tutors are part-time employees of UNE's Student Academic Success Center (SASC), and provide tutoring in various subjects. GPPH shares the course schedules with SASC so that an appropriate numbers of tutors can be available. SASC provides a summary report of usage after each semester. For example, as seen in the sample report provided in ERF C3-1**,** 50 unique students made 145 visits and utilized about 122 hours in the 2018 Summer term. Most of the visits in the A term were for GPH 716 Biostatistics (54 visits) and GPH 714 Principles of Public Health (19 visits). In the B term, most of the visits were for GPH 719 Research Methods (20 visits).

3) Provide narrative and/or data that support the assertion that the program's staff and other personnel support is sufficient or not sufficient.

In the 2018 Student Satisfaction Survey, the vast majority (96%) of respondents were satisfied with their SSS and found them to be helpful, timely, friendly and approachable (ERF C3-2, Slides

23 and 24 for quantitative data; Slides 51, 52 and 53 for qualitative data). Most of the respondents also indicated that they were highly satisfied with the structure, the design and layout of courses in Blackboard (ERF C3-2, Slide 14); this attests to the success of the collaborative work between GPPH instructional designers and faculty. When asked to describe their experience with SASC, many respondents said that they were satisfied with services available through SASC (ERF C3-2, Slide 54).

The sufficiency of the program's staff and other personnel was also assessed during the focus group discussions with GPPH primary faculty. As summarized in ERF C3-3**:**

> *The faculty is extremely pleased with the services offered by the other units in the College, and specifically notes the contributions of the other units to the work of the primary faculty, the adjunct faculty, and to our students.*
>
> *The faculty notes the pressing need for administrative support for the paperwork and coordination efforts related to the practicum, APE, and ILE. They note that the current Program Assistant has a full-time job supporting the program and cannot take on the heavy responsibilities associated with the practice experience planning process.*
>
> *The faculty is also concerned about the caseload for the Student Support Specialists supporting the program's students. While no failures to support GPPH students came to mind, the faculty recommends reexamining the target student caseload based on the size of the program and the needs of its students.*

Another way that the sufficiency of the program's staff and other personnel was assessed was through the annual survey of both primary and adjunct faculty. In the 2018 Faculty Survey, 79% of faculty chose "agreed" or "strongly agreed" to the statement "GPPH provides me with sufficient ongoing support and training to be an effective online instructor". See ERF C3-4 for the full report of the 2018 Faculty Survey, and refer to Table 1 for a summary.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH receives support from various staff with CGPS and UNE. SSS work most closely with students, and annual student satisfaction survey results consistently show that students are very satisfied with the support they receive. IDs work most closely with faculty in designing and maintaining courses on Blackboard. Survey results also indicate that students are satisfied with course content, design and layout.

Weaknesses:

Currently, GPPH does not directly measure satisfaction with other support units. The marketing team does not interact directly with students and faculty. However, other support staff such as EC, OLS, OWS, ORTL and subject tutors have interactions with students; therefore, it may be helpful to directly measure satisfaction with their services. Faculty also feel that areas such as paperwork coordination during APE and ILE or practicum can benefit from more administrative support.

Plans:

GPPH will work with other UNE units to implement a formal method to track GPPH student satisfaction with services offered in those units. GPPH Program Assistant is now offering part-time help to coordinate APE/ILE paperwork, which has been working well according to faculty feedback.

C4. Physical Resources

The program has physical resources adequate to fulfill its stated mission and goals and to support instructional programs. Physical resources include faculty and staff office space, classroom space, student shared space and laboratories, as applicable.

1) Briefly describe, with data as applicable, the following. (Note: square footage is not required unless specifically relevant to the program's narrative.)
    - Faculty office space

      The primary faculty of GPPH has office space in UNE's Innovation Hall building. CGPS occupies a large wing on the 2nd floor of Innovation Hall; it is designed with an open-floor concept; everyone's, including the Dean's, workplace is on the open floor. Access is limited to the employees in order to protect student information handled within the office. Two large conference rooms, three small-group rooms, and twelve individual carrels are available within the CGPS wing for faculty and staff use. In addition, various conference rooms and study spaces at UNE (both Portland and Biddeford campus) are also available to GPPH faculty and staff.

    - Staff office space

      The floor with faculty offices is shared among different units of CGPS: Marketing, Enrollment, Instructional Design, Student Support, and Academic Programs (including GPPH primary faculty and staff listed above).

    - Classrooms

      GPPH is fully online, and students are located in diverse geographical areas. As the University provides online distance education and on-site student placements in states other than Maine, the University actively pursues state authorization in states that require such and routinely monitors for changes in regulations. The University participates in State Authorization Reciprocity Agreements (SARA) as an institutional member from the state of Maine.

      There is no on-campus physical space needed for student learning and engagement in online programs. Instead, these needs are satisfied by UNE's Learning Management System (LMS), Blackboard, which provides students and faculty with an integrated learning environment and learning community hub. Incoming students to the online programs are provided with an extensive online orientation to UNE's approach to online education, the program, Blackboard, and other University resources available to online students.

    - Shared student space

      While the physical space is not needed for GPPH students, they have access to the physical resources on UNE campuses including the libraries, classrooms, and other facilities including study rooms, athletic facilities, and student lounges.

    - Laboratories, if applicable to public health degree program offerings

      Not applicable

2) Provide narrative and/or data that support the assertion that the physical space is sufficient or not sufficient.

As stated above, the Blackboard LMS is the platform on which the teaching and learning occur within GPPH. The 2017 Student Satisfaction Survey shows that 100% of the 52 respondents were satisfied with their experience using Blackboard as it relates to course progression (ERF C4-1, Slide 20)**.** Similarly, in the 2018 Student Satisfaction Survey, the majority of respondents reported being generally satisfied with the LMS (ERF C4-2, Slide 14), although 32% disagreed that there are sufficient mobile features in Blackboard.

During the 2018 primary faculty focus group discussions (ERF C4-3), the participants noted that "the current open-floor plan office design for the college is conducive to collaboration, enhances opportunities to see and greet colleagues, and aids in quick consultations with others, especially those in other units of the college." However, there was "widespread, but not unanimous, opposition to the open-office plan, noting that this layout makes distraction a constant obstacle to productivity".

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
The Blackboard LMS meets the needs of students, and technical support is available through both the UNE information technology services and CGPS IDs. Faculty and staff have office space in a newly renovated building on campus, and the open floorplan encourages collaboration among faculty and staff.

Weaknesses:
An open-space concept is not yet common in academic settings. All CGPS employees are professionals who are highly trained on FERPA and the protection of student information. Nevertheless, according to comments from faculty, an open-space is not optimal for some conversations with students where sensitive information may be discussed. As noted above, some faculty are opposed to the open office plan due to noise and distraction that result from sharing an open space with enrollment and student support teams, who are frequently on the phone with students.

Plans:
CGPS IDs are committed to ensuring that Blackboard technology continues to meet the needs of online students and faculty. Annual surveys to faculty and students will continue to assess whether current physical resources, including the LMS that is used as "classrooms", are adequate. Concerns with open floor offices have been communicated to the Dean, and as a result, all academic programs have been moved to a separate side of the building, which has allowed the faculty to focus without hearing phone conversations in the background.

C5. Information and Technology Resources

The program has information and technology resources adequate to fulfill its stated mission and goals and to support instructional programs. Information and technology resources include library resources, student access to hardware and software (including access to specific software or other technology required for instructional programs), faculty access to hardware and software (including access to specific software required for the instructional programs offered) and technical assistance for students and faculty.

1) Briefly describe, with data if applicable, the following:
   - library resources and support available for students and faculty

GPPH faculty, staff, and students have access to two UNE libraries and all of the resources that they offer.

The Ketchum Library on the Biddeford campus was built in 1970 and renovated in 1991 and 2014. The main level offers an art gallery, clusters of public access computers, reference books, journals, reserve materials, and library offices. The upper level houses circulating books and quiet study areas. The lower level includes the Windward Cafe and study rooms as well as the St. Francis Room, which accommodates gatherings of up to 90 people.

The Abplanalp Library on the Portland campus was renovated in 2001. Journals and study areas are located on the lower level. Public access computers are available on the main level and in the 24/7 computer room located within the library. Reference materials are located on the main level, and the circulating collection and study areas are located on the upper level.

In addition to the physical library locations, UNE provides many resources to its online students. The UNE Library's online catalog, electronic databases, and full-text electronic journals and books are accessible via the Web from on and off campus. Remote access is beneficial to students and faculty, and of particular benefit to distance education students. Online students can access the library resources and receive support through a dedicated portal: http://www.une.edu/library/online-students. In addition, a full-time online librarian is also available to support GPPH faculty and students; this position is shared among the five graduate programs within CGPS.

The Faculty and students have access to all UNE library services such as:

- Web access databases
- ebooks, ejournals and enewspapers
- Open 24 hours per day, five days per week during the fall and spring semesters
- Public access computers
- Data jacks and wireless access throughout each building
- Remote access to all electronic resources and online catalog
- More than 135,000 volumes
- More than 125,000 print and electronic full text journal titles
- More than 660,000 electronic books
- More than 200 databases covering all subject areas in the curriculum
- More than 11,500 DVDs and streaming video
- In-depth research access to several special collections
- Reference, research and literature search assistance
- Individual and course-related library research instruction
- Circulation and reserves
- **Interlibrary loan** and intercampus delivery
- MaineCat and **WorldCat**
- GPACU libraries on-site borrowing
- Photocopiers, scanners, fax machines and microfilm readers/printers

- Group and individual study spaces
- Thesis binding and collection for UNE students
- More than 60,000 square feet of library space
- More than 50 undergraduate and graduate students hired by Library Services to staff the Circulation Desks

A current UNE login serves as a UNE Library Services login.

- student access to hardware and software (including access to specific software or other technology required for instructional programs)

  GPPH supplements the library holdings with faculty-created and faculty-curated materials from textbooks, journals, open educational resources, videos, and lectures that are applicable and relevant to the professional competencies public health students are mastering.

  UNE also has a Kanopy subscription with "over 10,000 streaming films, documentaries and training videos from 800 producers, including PBS, Media Education Foundation, Criterion Collection, California Newsreel, HBO, First Run Features, BBC and more", which can be utilized by students to supplement classroom materials.

  All UNE students also receive a subscription to the citation management system, Refworks. GPPH faculty and students are encouraged to use Refworks in their courses, and receive training through CGPS: http://success.une.edu/blackboard-support/refworks/. In addition, students receive access to REDCap, which is used in GPH 713 Infectious Disease Epidemiology.

  Students are required to purchase the Stata software required for Biostatistics class.

  In the 2018-2019 academic year, CGPS has been approved to purchase Portfolium, an electronic portfolio system that can help showcase work by students and faculty. Once the purchase is finalized, GPPH students and faculty will have access to Portfolium to facilitate learning and collaboration.

- faculty access to hardware and software (including access to specific software or other technology required for instructional programs)

  GPPH faculty receives the same access to hardware and software as students. In addition, faculty and SMEs have access to software such as Stata, Screencast-O-Matic, Zoom and GoToMeeting through GPPH. Faculty and SMEs are encouraged to identify and suggest software that can facilitate teaching and learning. Those who teach Biostatistics receive a subscription to Stata software.

- technical assistance available for students and faculty

  CGPS ID work closely with faculty and SMEs to develop and maintain courses in Blackboard. All new faculty receive an introduction to the Blackboard LMS through faculty orientation. If faculty encounter any technical issues while teaching a class, they can use the "course feedback" form within Blackboard, which then sends instant notification to the ID team. They may also contact ID directly through email. During a course revision or development process, SMEs work with a dedicated ID who checks in regularly with the SME to provide technical assistance ranging from recording videos to crafting effective assignment prompts.

  In addition to individualized assistance, ID also develop and curate training content to help faculty. Samples of these resources can be found at:
  https://vision.une.edu/category/instructional-design/

IDs collaborate with UNE's information technology Services (ITS) in providing technical assistance for students and faculty. Services provided by ITS are outlined on the following webpage: http://www.une.edu/its. Students and faculty can contact the helpdesk via email or phone for prompt attention. ITS offices are open between 7:30am and 6:30pm daily, and students can get assistance through a "HelpDesk" number 24/7. More information about hours and phone numbers can be found at: https://une1.sharepoint.com/sites/its/SitePages/About.aspx If the technical assistance is specific to library resources, students and faculty can contact the library or the ORTL as described in the "library resources" section.

2) Provide narrative and/or data that support the assertion that information and technology resources are sufficient or not sufficient.

Of respondents to the 2017 Student Satisfaction Survey, 68% indicated that library resources were helpful in driving their success at UNE (ERF C5-1, Slide 29). For those who contacted information technology services for assistance, 100% of respondents were also very satisfied or satisfied with their experiences (ERF C5-1, Slide 25). Similarly, 69% of respondents to the 2018 Student Satisfaction Survey (ERF C5-2, Slide 23) indicated that library resources were helpful in driving their success at UNE. When asked to describe their experience with the library, many students gave positive qualitative answers (ERF C5-2, Slides 55 and 56). In addition, 93% of respondents to the 2018 Student Satisfaction Survey (ERF C5-2, Slide 50) indicated that they are satisfied with the technical assistance provided by the HelpDesk.

Eighty-nine percent of respondents to the 2018 Faculty Survey (ERF C5-3) agreed or strongly agreed that they know who to ask for help if something unexpected comes up in their course, and a majority (85%) feel the necessary technology is in place to support their effective instruction. In addition, faculty are asked to identify any needs and request that instructional design videos be developed for faculty or students to address identified topics, such as providing feedback within the Blackboard LMS or reading feedback received.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
CGPS has a team of ten ID (2.0 FTE to the program) who work closely with GPPH to support the information and technology needs of our faculty and students. There is also an ORTL dedicated to the college. Surveys indicate that faculty and students receive adequate support.

Weaknesses:
Currently, the satisfaction survey does not directly ask the question "How satisfied are you with library resources?" Library resources are included in a list of services that drive student success. To report the quantitative data more directly, there may be a need to modify the question.

Plans:
GPPH will continually evaluate our use of technology and library resources to ensure it meets the needs of our students and faculty, and the changing technological landscape. GPPH will also discuss with the research and strategy team to modify survey questions to directly assess satisfaction with library or technology services.

D1. MPH & DrPH Foundational Public Health Knowledge

The program ensures that all MPH and DrPH graduates are grounded in foundational public health knowledge.

The program validates MPH and DrPH students' foundational public health knowledge through appropriate methods.

1) Provide a matrix, in the format of Template D1-1, that indicates how all MPH and DrPH students are grounded in each of the defined foundational public health learning objectives (1-12). The matrix must identify all options for MPH and DrPH students used by the program.

Template D1-1

Content Coverage for MPH

Content	Course number(s) or other educational requirements
1. Explain public health history, philosophy and values	GPH 714 Principles of Public Health: Week 1, Introduction to Public Health
2. Identify the core functions of public health and the 10 Essential Services	GPH 714 Principles of Public Health: Week 1, Introduction to Public Health
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	GPH 714 Principles of Public Health: Week 3, Epidemiology & Biostatistics
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	GPH 714 Principles of Public Health: Week 3, Epidemiology & Biostatistics
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	GPH 714 Principles of Public Health: Week 1, Introduction to Public Health Week 4, Social & Behavioral Health
6. Explain the critical importance of evidence in advancing public health knowledge	GPH 714 Principles of Public Health: Week 2, Public Health Research and Writing
7. Explain effects of environmental factors on a population's health	GPH 714 Principles of Public Health: Week 6, Environmental Health
8. Explain biological and genetic factors that affect a population's health	GPH 714 Principles of Public Health: Week 3, Epidemiology & Biostatistics
9. Explain behavioral and psychological factors that affect a population's health	GPH 714 Principles of Public Health: Week 4, Social & Behavioral Health
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	GPH 714 Principles of Public Health: Week 4, Social & Behavioral Health
11. Explain how globalization affects global burdens of disease	GPH 714 Principles of Public Health: Week 7, Global Health
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	GPH 714 Principles of Public Health: Week 8, One Health

2) Document the methods described above. This documentation must include all referenced syllabi, samples of tests or other assessments and web links or handbook excerpts that describe admissions prerequisites, as applicable.

   The syllabus for GPH 714 Principles of Public Health and copies of all quizzes are available in ERF D1-1 and ERF D1-2. Pages 4 to 6 of the syllabus shows the grading rubrics for written assignments.

3) If applicable, assessment of strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths:
   GPH 714 Principles of Public Health is the first course that every student takes when entering the MPH or Graduate Certificate in Public Health program. The course is designed to meet the 12 foundational public health knowledge learning objectives defined by CEPH (Template D1-1). Students are assessed on their achievement of these learning objectives through graded course discussions, assignments, and quizzes. Development by a team of SMEs allowed GPPH to create a course that covers the breadth of public health topics, while allowing more in-depth exploration of each topic with an expert in the field. The goals of the course are to provide an overview of the courses students will be taking during their public health studies and introduce them to terminology and important skills they may not have been exposed to previously, such as searching for peer-reviewed literature and incorporating scientific evidence into their writing.

   Weaknesses:
   Not Applicable

   Plans:
   Student and faculty feedback are solicited from each term through CoursEval and course reflection calls, respectively. Feedback is considered and revisions are made to strengthen the course. Minor changes were made to quiz wording after the Spring term; feedback from the Summer term led to a revision to the initial assignment, and faculty and student feedback led to the environmental health lecture and assignments being replaced. GPPH will continue this process to ensure all students are grounded in foundational public health knowledge.

D2. MPH Foundational Competencies

The program documents at least one specific, required assessment activity (eg, component of existing course, paper, presentation, test) for each competency, during which faculty or other qualified individuals (eg, preceptors) validate the student's ability to perform the competency.

Assessment opportunities may occur in foundational courses that are common to all students, in courses that are required for a concentration or in other educational requirements outside of designated coursework, but the program must assess *all* MPH students, at least once, on each competency. Assessment may occur in simulations, group projects, presentations, written products, etc. This requirement also applies to students completing an MPH in combination with another degree (eg, joint, dual, concurrent degrees). For combined degree students, assessment may take place in either degree program.

1) List the coursework and other learning experiences required for the program's MPH degrees, including the required curriculum for each concentration and combined degree option. Information may be provided in the format of Template D2-1 or in hyperlinks to student handbooks or webpages, but the documentation must present a clear depiction of the requirements for each MPH degree.

   Template D2-1

Requirements for MPH degree		
Course number	Course name*	Credits (if applicable)
GPH 714	Principles of Public Health	3
GPH 712	Principles of Epidemiology	3
GPH 716	Biostatistics	3
GPH 719	Research Methods	3
GPH 726	Social and Behavioral Health	3
GPH 738	Program Planning and Evaluation	3
GPH 702	Policy: An Interprofessional Approach	3
GPH 706	Public Health Administration	3
GPH 722	Environmental Health	3
GPH 743	Applied Practice Experience	3
Electives	5 electives, 3 credits each	15
GPH 744	Integrated Learning Experience	1
	Total Credits	46

2) Provide a matrix, in the format of Template D2-2, that indicates the assessment activity for each of the foundational competencies. If the program addresses all of the listed foundational competencies in a single, common core curriculum, the program need only present a single matrix. If combined degree students do not complete the same core curriculum as students in the standalone MPH program, the program must present a separate matrix for each combined degree. If the program relies on concentration-specific courses to assess some of the foundational competencies listed above, the program must present a separate matrix for each concentration.

Template D2-2

	Assessment of Competencies for MPH	
Competency	*** Course number(s) and name(s)**	**Specific assessment opportunity**
Evidence-based Approaches to Public Health		
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	GPH 712 Epidemiology	Case Studies (Weeks 1, 2, 3, 4, 6 & 7) Students complete a series of case studies applying epidemiological methods to a variety of health conditions and situations. These include: defining agent, host, and environment for three health conditions; using descriptive epidemiological data and health indicators to identify priority health issues for a community; applying knowledge of case-control studies to an analysis of smoking and lung cancer; applying understanding of cohort studies to an analysis of developmental delays among children born near uranium mines; completing an outbreak investigation; and creating screening tools for children with Down Syndrome.
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	GPH 719 Research Methods	Final Project (Course wide) During the course, students work weekly on developing a mixed methods research manuscript using secondary data analysis. As part of this process, they identify a research question and select an analysis approach appropriate for addressing the question. Both quantitative and qualitative data are analyzed and reported. They describe the methods they selected and provide critique for their colleagues. In week 2, they analyze a previous study design for strengths and weaknesses, consider the impact of alternative options, and apply this process to their own study design.

3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	GPH 716 Biostatistics GPH 719 Research Methods	GPH 716 Week 5 Students define the steps needed to evaluate the continuous response and continuous explanatory variable research question and then they perform the appropriate hypothesis test with Stata. They explicitly show each step: Define the parameter of interest; state the hypotheses; determine the test statistic and p-value considering any necessary assumptions; decide whether to reject or not reject the null hypothesis; and clearly state a conclusion in the context of the problem. GPH 719 Week 5 Students use ATLAS-ti to analyze qualitative interview data. Students choose the analytic approach that best fits their research question. Students will use ATLAS-ti to review the interview quotes, code the interviews, practice grouping their codes, develop a qualitative codebook, review the data for trends, and explore various data visualization features included in ATLAS-ti to present their qualitative results in a clear and visually appealing way. Although students will work with ATLAS-ti during weeks 1-7, students will be assessed on their use of ATLAS-ti during the week 5 discussion post and assignment in which they submit the mixed methods results section, including all applicable tables, charts, and graphs.
4. Interpret results of data analysis for public health research, policy or practice	GPH 716 Biostatistics	Final Project (Course wide) Students consolidate their results of their analyses conducted throughout the course, presenting their interpretation in a written final report similar to a research article one would submit for publication. The report includes: primary and secondary research questions; methods including statistical hypothesis tests used; results including descriptive statistics and statistical associations using graphs and tables; and a discussion/conclusion that includes their interpretation of the data and recommendation for further study.
	Public Health & Health Care Systems	
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	GPH 714 Principles in Public Health	Week 5 – Health Policy and Administration Students identify how the organization and structure of health care, public health and regulatory factors in the US contribute to the utilization of health care services, and respond to a classmate by describing factors beyond utilization that can impact overall healthcare costs. Week 6 – Environmental Health Students identify and research a recent environmental exposure incident. They explain the exposure, who was affected, possible effects, how and why it happened, and discuss the role of governmental agencies to solve the incident and prevent future occurrences. In their response they compare the exposure they chose to a classmate's, particularly comparing the governmental and regulatory agencies involved in responding to the two exposures. Week 7 – Global Health

		Students select and study an international health organization and compose a letter from a World Health Organization official requesting a collaboration on an outbreak. They then respond to a classmate's letter representing a different partner organization presenting that organization's skills and resources that could be of use and posing any questions that need to be considered by WHO before proceeding.
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels	GPH 722 Environmental Health	Week 2 The week focuses on environmental ethics and social justice. Students discuss how socioeconomic status affects choice in living environment in terms of access to quality food/water, exposure to toxic chemicals, etc. and consider the role that structural bias and racism can play in both living environment and environmental exposure. They are also asked to address the role that public health professionals should play in addressing these inequities within communities and society as a whole.
	Planning & Management to Promote Health	
7. Assess population needs, assets and capacities that affect communities' health	GPH 738 Program Planning and Evaluation	Week 2 Using public data, students analyze their population, describing its needs and assets. They also describe additional data collection strategies to create a more comprehensive community assessment.
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs	GPH 738 Program Planning and Evaluation	Week 1 Students propose a way to engage the community in a culturally competent manner when developing a health intervention program. In response to their colleagues, students offer suggestions for increasing intersectional efforts to engage with people or organizations outside the health sector (e.g. housing, economic development, education).
9. Design a population-based policy, program, project or intervention	GPH 738 Program Planning and Evaluation	Final Project (Course wide) During the course, students develop a grant proposal in response to an RFP to address one of three topics for a geographically specific target population. The population-based proposal includes a needs assessment, goals and objectives, a program plan, evaluation plan, logic model, and budget. Students compose portions of the project each week, and compile and edit into the final version.
10. Explain basic principles and tools of budget and resource management	GPH 706 Public Health Administration	Week 7 Students provide a comprehensive explanation to staff describing the four types of budgets — statistical, operating (income and expense), cash, and capital — required for a successful organization and how these relate to the budgeting process responsibilities for a department manager.

11. Select methods to evaluate public health programs	GPH 738 Program Planning and Evaluation	Week 6 Students are asked to describe three different potential effect evaluation designs that could be used for their proposed program, and to explain the benefits and limitations of each design. They use this information to develop their intervention plan for the final project, selecting the evaluation method that best fits their needs.
	Policy in Public Health	
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	GPH 702 Policy: An Interprofessional Approach	Students address the multiple dimensions of the process of policy-making in small group discussions weekly. Peer evaluation is integral to the process. Week 1 Describe the role of scientific evidence in the interface between policy and politics and utilize specific examples from existing policies and a range of levels of governing and policymaking. Week 2 Discuss the role of evidence and differing interpretations or priorities among audiences and stakeholders in identifying policy solutions. Week 3 Develop a problem statement taking into public resources and authorizations. Week 4 Develop a problem summary taking into account multiple perspectives, and the strength and ethical application of evidence used to support. Week 5 Develop and present policy alternatives using guidelines including ethics. Week 6 Identify evaluative criteria and more fully evaluate their policy alternatives. Week 7 Present their written testimony and provide critiques to their colleagues.
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes	GPH 726 Social & Behavioral Health	Week 2 Based on course readings, students propose a strategy for identifying key stakeholders in their communities, and for building partnerships within the community. They describe how they would include the needs and perspectives of multiple members within the coalition.
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations	GPH 702 Policy: An Interprofessional Approach	Weeks 7 & 8 Students develop persuasive oral and written remarks advocating for (or against) a particular policy approach before a governmental (federal, state, local) or organizational decision-making body, specifically addressing the impact of that policy on individuals, populations, or communities. Students will tailor their remarks to make them appropriate and compelling for the issue involved in their policy scenario and to the target audience.

15. Evaluate policies for their impact on public health and health equity	GPH 702 Policy: An Interprofessional Approach	Policy Analysis (Weeks 2-8) Students analyze a BMI screening policy throughout the course to produce a policy analysis report and oral testimony for a legislative body. During the course they develop a problem statement, describe the policy context, identify alternatives and evaluative criteria, and explain the potential health and social impact of the policy options on individuals and communities. Health equity is addressed specifically in Weeks 2 and 6.
	Leadership	
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	GPH 706 Public Health Administration	Throughout the course, students work on assignments that will inform the final presentation they present in the role of the Executive Director of Healthy Community Brookfield (HCB), to its Board of Directors Week 2 In the role of the Chair of the Board of Directors, students prepare an agenda to orient the new Executive Director to the organization. In a discussion this week, they evaluate the skills that make a good leader and discuss why different organizations may need different leadership styles. Week 4 As Public Relations Director, students prepare a White Paper for the Executive Director assessing the current state of community relations with recommendations for relationship building based on guiding principles of community engagement. This skill is reinforced through a discussion related to evaluating an existing organization's community-relations challenge. Week 5 Students evaluate the New Hampshire Red Cross Strategic Plan, Vision and Mission. They then complete a SWOT Situational Analysis, and revise the Mission and Vision for HCB. Week 7 Students use the above information to prepare an oral presentation providing an overview of HCB, a summary of key environmental factors impacting the organization, a SWOT analysis and proposed approaches to conducting a five-year strategic plan that will assure organizational success for HCB in the future.
17. Apply negotiation and mediation skills to address organizational or community challenges	GPH 706 Public Health Administration	Week 3 Students participate in a negotiation role-play in which two students conduct a recorded meeting in the roles of the Executive Director of Healthy Community Brookfield (HCB) or the Director of the local health department to negotiate concerns regarding deficiencies in HCB's fulfillment of a contract for three funded programs. Students also prepare a written description of how they would use mediation strategies to address the same scenario.
	Communication	

18. Select communication strategies for different audiences and sectors	GPH 702 Policy: An Interprofessional Approach GPH 706 Public Health Administration GPH 726 Social & Behavioral Health	GPH 702 - Weeks 7 & 8 Students develop persuasive oral and written remarks advocating for (or against) a particular policy approach before a governmental (federal, state, local) or organizational decision-making body, specifically addressing the impact of that policy on individuals, populations, or communities. Students will tailor their remarks to make them appropriate and compelling for the issue involved in their policy scenario and to the target audience. GPH 706 – Week 7 Students develop an oral presentation for a board of directors, and prepare an email to staff describing the budget process. GPH 726 – Weeks 7 & 8 Students develop a written report for a community coalition, and then present a brief summary of this report to the coalition.
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	GPH 702 Policy: An Interprofessional Approach GPH 706 Public Health Administration GPH 716 Biostatistics GPH 719 Research Methods GPH 722 Environmental Health GPH 726 Social & Behavioral Health GPH 738 Program	GPH 702 - Written policy analysis and oral testimony for a governing body GPH 706 - Oral presentation of an organizational analysis and strategic plan to a board of directors GPH 716 & 719 - Written journal articles aimed at the scientific community GPH 722 – Written abbreviated environmental impact statement and presentation to a decision-making body GPH 726 - Written report and oral presentation to a community coalition GPH 738 - Written research proposals for funders

	Planning & Evaluation	
20. Describe the importance of cultural competence in communicating public health content	GPH 726 Social & Behavioral Health	Week 5 Students analyze whether an intervention is culturally competent and offer suggestions to improve it if not, discussing the importance of cultural competence in communicating public health content.
	Interprofessional Practice	
21. Perform effectively on interprofessional teams	GPH 702 Policy: An Interprofessional Approach	Whole Course A group of SMEs representing the fields of public health, nutrition, social work, education, and health informatics developed the course. Students from these disciplines work together on interprofessional teams to develop a policy analysis relevant to their discipline, but informed by all of the disciplines. The steps are outlined above in Competency 12. In weeks 3-7, they submit their work to their peers for feedback. Throughout the process, students are assessed on the quality of the feedback they provide their colleagues as well as their integration of multiple perspectives in the revision of their work. In the final policy analysis paper, they are assessed on how well they incorporate the feedback from their instructor and peers, including those from other disciplines, to refine their final document. Week 8 Students compose a written reflection of how the experience of working in interdisciplinary teams informed the process of policy analysis. They discuss interprofessional competencies, the challenges they faced applying them, and how this experience will affect their work going forward.
	Systems Thinking	
22. Apply systems thinking tools to a public health issue	GPH 706 Public Health Administration	Week 6 Students gain practice with systems thinking approaches by identifying a non-healthcare system issue affecting Americans, and describing how systems thinking could assist in addressing this issue. They further develop this understanding through a discussion with colleagues to identify alternative solutions. Then, they apply the systems thinking skills they developed by writing a paper identifying a public health challenge, and using the course readings as a reference, select and describe how they would apply one systems thinking theory, one method and one tool to address this issue.

3) Include the most recent syllabus from each course listed in Template D2-1, or written guidelines, such as a handbook, for any required elements listed in Template D2-1 that do not have a syllabus.

   Syllabi for all required courses are included in the folder ERF D2-1. Final projects referred to in Template D2-2 are also included in the folder.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths:
   The core curriculum was assessed and redesigned to assure that all 22 competencies are met within the courses required for all students. Beginning in the 2018/2019 academic year, two additional courses were added to the total required courses in order to allow more instructional time for application of the core competencies. A structured order of classes has also been implemented to ensure that students build on what they learn in previous classes. Students are now required to complete all required courses before beginning their APE or elective courses.

   Weaknesses:
   GPPH has not been able to fully assess the new progressive structure of required courses, as it began with students enrolling in Summer 2018, though students who enrolled earlier have been encouraged to follow this structure.

   Plans:
   GPPH continually evaluates course structure and content, including faculty perception of course alignment with competencies, and revises as needed. As part of this process, GPPH is developing a pre/post assessment of student perception of their exposure to and perceived level of competency for the program and foundational competencies addressed in each of the required courses. We plan to have this in place by Summer 2019.

D3. DrPH Foundational Competencies

Not applicable

D4. MPH & DrPH Concentration Competencies

The program defines at least five distinct competencies for each concentration or generalist degree at each degree level in addition to those listed in Criterion D2 or D3.

The program documents at least one specific, required assessment activity (eg, component of existing course, paper, presentation, test) for each defined competency, during which faculty or other qualified individuals (eg, preceptors) validate the student's ability to perform the competency.

If the program intends to prepare students for a specific credential (eg, CHES/MCHES) that has defined competencies, the program documents coverage and assessment of those competencies throughout the curriculum.

1) Provide a matrix, in the format of Template D4-1, that lists at least five competencies in addition to those defined in Criterion D2 or D3 for each MPH or DrPH concentration or generalist degree, including combined degree options, and indicates at least one assessment activity for each of the listed competencies. Typically, the program will present a separate matrix for each concentration.

   Template D4-1

Assessment of Competencies for MPH		
Competency	**Course number(s) and name(s)**	**Specific assignment(s) that allow assessment**
1. Synthesize and incorporate scientific evidence into professional writing	GPH 738 Program Planning and Evaluation	Final Project Throughout the course, students learn and develop the components of a successful grant application, including identifying and incorporating scientific evidence supporting proposed programs or interventions to address a health issue of interest. For the final project, they assemble these components to write and submit a grant application for a fictitious funder.
2. Search databases and critically analyze peer reviewed literature	GPH 726 Social and Behavioral Health	Week 4 Students search PubMed to identify five intervention articles. They provide a written analysis of the studies, how they relate to theory, and conclude which theory or theories are most relevant to intervention development for their health issue.
3. Develop strategies for qualitative and quantitative data management.	GPH 719 Research Methods	Weeks 4 & 5 In GPH 719, students develop strategies for data management in two ways. First, during week 4, students will review best practices for managing qualitative and quantitative data during the week 4 module lecture. Students will then have an opportunity to test their knowledge via a 14-question quiz that is due at the end of week 4. Both the module lecture and quiz cover data management topics such as: data storage, ethical sharing of data with research staff, how to maintain participant confidentiality through proper data management, when to establish a data management plan, and the components of a strong data management plan, in addition to other key aspects of data management. Second, students will actively practice skills related to data handling and management as they work with

		quantitative and qualitative data for their final project.
4. Evaluate the use of financial resources and management techniques by public health programs to achieve goals and sustainability.	GPH 738 Program Planning and Evaluation	Week 8 Assignment Students evaluate the use of financial resources to achieve goals and sustainability. They submit a three year budget and budget justifications explaining the process and assumptions of the budgeting. Students explain the association between funds requested and program activities, and how the program or program impact will be sustained after funding ends.
5. Describe the use of technological applications in health interventions	GPH 726 Social and Behavioral Health	Week 5 Students identify and describe a technological application used to promote health, and analyze whether it is a successful strategy.

2) For degrees that allow students to tailor competencies at an individual level in consultation with an advisor, the program must present evidence, including policies and sample documents, that demonstrate that each student and advisor create a matrix in the format of Template D4-1 for the plan of study. Include a description of policies in the self-study document and at least five sample matrices in the electronic resource file.

   Not applicable

3) Include the most recent syllabus for each course listed in Template D4-1, or written guidelines for any required elements listed in Template D4-1 that do not have a syllabus.

   See ERF D2-1 for syllabi for GPH 719 Research Methods, GPH 726 Social and Behavioral Health and GPH 738 Program Planning and Evaluation, and the test referred to in Template D4-1.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths:
   GPPH's program competencies were developed to address workforce skills identified as important to its public health community and faculty. The program competencies are reinforced by a college-wide emphasis on writing skills. These competencies and the foundational competencies are reinforced during other required and elective courses.

   Weaknesses:
   The three required courses that address the five program competencies have recently been redesigned; therefore, limited data exists to assess effectiveness.

   Plans:
   GPPH continually evaluates course structure and content through student and faculty feedback to assess how well they meet these competencies and will revise as needed. As described above, a pre/post assessment of student perception of their exposure to and level of competency for the program and foundational competencies is currently being developed and will be in place by Summer 2019.

D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

The applied practice experiences allow each student to demonstrate attainment of at least five competencies, of which at least three must be foundational competencies (as defined in Criterion D2). The competencies need not be identical from student to student, but the applied experiences must be structured to ensure that all students complete experiences addressing at least five competencies, as specified above. The applied experiences may also address additional foundational or concentration-specific competencies, if appropriate.

The program assesses each student's competency attainment in practical and applied settings through a portfolio approach, which demonstrates and allows assessment of competency attainment. It must include at least two products. Examples include written assignments, projects, videos, multi-media presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the program or by individual students) in any physical or electronic form chosen by the program.

1) Briefly describe how the program identifies competencies attained in applied practice experiences for each MPH student, including a description of any relevant policies.

   The APE at GPPH uses a practicum/internship format that can be completed in a 16-week Fall, Spring, or Summer semester. While in the field, students are also enrolled in an online Blackboard seminar for 16 weeks where they complete reflection papers that address leadership, communication, interprofessional practice, and systems thinking. They are also engaged with other students on discussion boards where they support each other as members of a shared community of practice and discuss issues related to their professional development. The Assistant Director of Public Health Practice and the Assistant Director of Thesis Advising serve as the practicum coordinators for GPPH. In this role, they work with students in the planning phase of the APE. The APE instructor refers to the person who facilitates GPH 743 as students complete their field projects in a given semester. The practicum coordinators alternate as the APE instructors.

   Students who have completed the nine required GPPH courses are eligible to take the APE course. The expectation is that students take the course before selecting their electives, however the APE can be taken with an elective course that closely aligns with the tasks they will be completing in the field.

   The older practicum course, GPH 747 Integrated Public Health Practicum, is still available. Students who matriculated prior to the 2018-2019 academic year may choose the four-credit GPH 747 (which combines the field experience with the capstone paper) or the new APE/ILE combination for the same four credits. For students who matriculated in or after Summer 2018, the APE course is the only option for the field experience. They must complete both APE and ILE courses to be eligible for an MPH.

   Competencies to be attained by the practice experience are determined before the student is cleared to take the class. At least six months before enrolling in the APE, students have a one-on-one discussion with their practicum coordinator by phone or email to discuss the specific APE competencies that align with their interests and plans for the MPH degree. Currently, students are required to demonstrate the attainment of at least five foundational competencies of their choosing. Starting in the spring of 2019, students will have the option to choose only foundational competencies or include program competencies to their list. Whichever plan they choose, the requirement will be a minimum of five competencies, three of which must be foundational. Before the APE is approved by the practicum coordinator, students must submit:

- A preceptor and site pre-approval form (ERF D5-2)

This ensures that the selected site and the preceptor are appropriate to provide a high-quality learning experience for the student.

- An APE learning contract (ERF D5-3)

This form describes the project, identifies a minimum of two final products that will be created for the site, the tasks that the student will undertake in order to complete the products, and the competencies attained in the process. This is where the student and preceptor identify a process for how the competencies will be attained. The preceptor's signature certifies that the project is feasible and that the products will be useful to the site. The practicum coordinator signs off to approve the contract, indicating that the final products listed meet the academic requirements for an APE and that the tasks outlined will help the student attain the listed competencies.

About mid-way through the APE course, students submit a report on the progress they have made creating the products identified in the learning contract as well as the attainment of competencies. This report, signed by the student and preceptor and reviewed by the APE course instructor, is an opportunity for the student, the preceptor and the APE course instructor to identify any issues and introduce new or revised products as needed. At the end of the experience, students submit the products they created, a synopsis of their work to be shared with other students, and a final report detailing the products, the process of creating the products, and how the student demonstrated mastery of their competencies. The APE instructor reviews the final products as well as the preceptor's evaluation of the student's work, and assesses the student's work according to the course rubric.

Template D5-1 is in the ERF with the title: ERF D5-1 – Sample matrices for 6 students.

2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

1. APE Website: This site contains all the information students need to successfully complete the APE planning process. http://success.une.edu/public-health/applied-practice-experience/
2. Preceptor and Site Pre-Approval Form: This form is submitted to the practicum coordinator who approves the preceptor and site before the student proceeds with further planning. A copy of this form is in ERF D5-2
3. APE Learning Contract: This form details the competencies, tasks and products students will create for their sites. A copy of this form is in ERF D5-3.
4. APE Manual: This is a PDF document of the APE planning process that students can download and save. http://cgps.une.edu/assets/public-health/UNE-MPH-Applied-Practice-Experience-Manual.pdf
5. GPH 743 syllabus: While working in the field, students are enrolled in a three-credit hour course on Blackboard. A copy of the syllabus for Summer 2018 is in ERF D5-4.
6. APE Progress Report: This form is used to track students' progress in the field about mid-way through the course. A copy of this form is in ERF D5-5.
7. Student's Final Report: This form summarizes the competencies, tasks and final products created by the student at the end of the APE. A copy of this form is in ERF D5-6.
8. Preceptor's Evaluation: At the end of the experience, preceptors take a survey to provide feedback on the student's performance. A copy of this survey is in ERF D5-7.

3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (ie, Template D5-1 and the work products/documents that demonstrate at least five

competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

The APE was piloted in Spring 2018 with six students. Documentation and complete sets of materials developed by these students are included in ERF D5-8. They are:

- APE learning contract
- Progress report
- Final report
- Products created
- Synopsis page

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

There are multiple points in the planning process where the program is actively involved with helping students identify and reach out to suitable APE sites. The first of these is in GPH 714 Principles of Public Health course, which is the first required course in the program. One of the assignments in this course requires students to identify public health agencies in their communities. In addition, in students' first semester in the program, they are required to enroll in the Professional Preparation Workshop where professional skills including creating a resume and cover letter, approaching internship sites, email etiquette and general professionalism are taught.

Outside of coursework, live informational webinars are organized by the practicum coordinators at least once per semester to discuss topics related to how to find a suitable APE site, qualifications of the preceptor, the paperwork that will need to be completed, etc. These sessions are recorded and shared on the website so that students can refer to the information discussed as they plan.

Finally, at least six months before students enroll in the APE course, they are expected to reach out to their practicum coordinator to discuss specific APE competencies that align with their interests and plans for the MPH degree. All these interactions with students get them ready to complete the APE.

Weaknesses:

GPPH is a fully online program, with students in various geographical locations. While this attracts a diverse population of students, the program faces challenges in connecting students with suitable practice experience sites. While the practicum coordinators provide individualized guidance, students must take the initiative to secure an appropriate site and preceptor. We currently only have one formal academic-practice partnership with the City of Portland Department of Public Health where a number of students may be placed for their APE every semester. In addition, because it is not practical to visit every site where students are completing their APE, we rely significantly on preceptors to provide feedback on the students' performance and attainment of competencies while at the practice site.

Plans:

Since this is still a very new process, GPPH will continue to solicit feedback from students, preceptors and APE course instructors on the entire process through surveys and evaluation reports. We will also continue to seek academic-practice partnerships with sites across the country and globally. In addition, in order to keep our preceptors updated on the new APE requirements, we plan to conduct preceptor training webinars once per semester starting in Spring 2019.

D6. DrPH Applied Practice Experience

Not applicable

D7. MPH Integrative Learning Experience

MPH students complete an integrative learning experience (ILE) that demonstrates synthesis of foundational and concentration competencies. Students in consultation with faculty select foundational and concentration-specific competencies appropriate to the student's educational and professional goals.

Professional certification exams (eg, CPH, CHES/MCHES, REHS, RHIA) may serve as an element of the ILE, but are not in and of themselves sufficient to satisfy this criterion.

The program identifies assessment methods that ensure that at least one faculty member reviews each student's performance in the ILE and ensures that the experience addresses the selected foundational and concentration-specific competencies. Faculty assessment may be supplemented with assessments from other qualified individuals (eg, preceptors).

1) List, in the format of Template D7-1, the integrative learning experience for each MPH concentration, generalist degree or combined degree option that includes the MPH. The template also requires the program to explain, for each experience, how it ensures that the experience demonstrates synthesis of competencies.

Template D7-1

MPH Integrative Learning Experience	
Integrative learning experience (list all options)	How competencies are synthesized
High quality written paper: ● Research paper ● Program evaluation, or ● Policy paper	For all three paper options, students self-select foundational and program competencies in the ILE Proposal Form (ERF D7-2) and complete the table that aligns selected competencies with the project task(s) that will likely lead to achievement of those competencies. Students must choose at least two foundational competencies and two program competencies. Students submit draft and revised versions of the ILE proposal to faculty and, ultimately, to their ILE supervisors for feedback as described in the process below. A final list of approved competencies and aligned project tasks is submitted in the ILE Clearance Form (ERF D7-3) that ILE supervisors must approve in order for students to be able to register for the ILE course (GPH 744). The final ILE product, and the scholarly activity leading to it, is assessed by each student's ILE supervisor, who is also the student's course instructor for GPH 744, a graded course on Blackboard. Achievement of ILE competencies is also assessed by the ILE supervisors at completion of GPH 744 using an electronic survey platform and scoring according to competency achievement levels.

2) Briefly summarize the process, expectations and assessment for each integrative learning experience.

Overview

Over the past six months, the program has been implementing its transition away from a single-pathway capstone paper within GPH 747, the Integrated Public Health Practicum course. As of May 2018, all incoming students will complete the updated bifurcated pathway that includes the APE course (GPH 743), taken after completion of all required courses, and the final paper-writing ILE course (GPH 744), a 1-credit required course that students take upon completion of all required and elective courses.

This new bifurcated pathway has occasioned updated roles for two of GPPH's primary faculty who also currently share practicum coordinator duties. While they continue to share the work of supporting students in locating field placements, their new roles of Assistant Director of Public Health Practice and Assistant Director of Thesis Advising provide each with more defined areas of oversight as the transition becomes fully implemented. The Assistant Director of Thesis Advising is primarily responsible for development of the GPH 744 course content and oversight of the course delivery; creation of ILE forms, processes, and web content; and supporting students in the development and refinement of ILE topics and proposals in preparation for identifying primary or adjunct faculty to serve as ILE supervisors.

The program's updated approach to ILE provides students three options for a high-quality written paper that will serve as their culminating MPH academic experience. The program can now accommodate those students who wish to engage in quantitative or qualitative research, public health program evaluation, or policy analysis. Accordingly, students now have a choice of three options for a high-quality final written paper for their ILE: a research paper, a program evaluation paper, or a policy analysis paper.

Students begin thinking about the integration and alignment of their public health interests and the public health education competencies early on in their UNE MPH experience with the four-week non-credit Professional Development Workshop, in which the competencies are initially introduced and their alignment with the curricula explained. This conversation about integration and synthesis of competencies with coursework continues between students and their AAs at particular points during the progress of a student's academic plan (see APE/ILE Timeline at ERF D7-1).

Pre-ILE

General ILE planning for all three ILE paper options is the same and students begin thinking about possible ILE topics within the APE course. During the APE, students have an opportunity to develop ideas for an ILE proposal; they can brainstorm ideas with their classmates and their APE instructor within the course or with the Assistant Director of Thesis Advising outside the course. Students submit an ILE proposal as an assignment in APE. They choose an ILE topic within one of the categories of research, program evaluation, or policy analysis and they self-select a minimum of two foundational competencies and two program competencies that align with their own academic and/or professional goals as well as with the project topic and proposed methods (e.g. a policy analysis that will involve semi-structured interviews with key policy informants would align with competency #2 regarding qualitative data collection). The ILE proposal includes identification of ILE tasks that align with students' selected competencies. Students receive feedback on their ILE proposal from the APE instructor and student peers.

ILE Planning

After completion of APE, students continue with their elective courses. Approximately seven months before students are scheduled to take the ILE course (GPH 744), SSS send a notice alerting them to begin "pre-ILE" activities. They are asked to contact the Asst. Director of Thesis Advising to discuss ILE topics and submit an ILE Proposal Form (ERF D7-2). Some students are satisfied with the ILE proposal developed earlier in the APE course, in which case the Assistant Director of Thesis Advising reviews the proposal and selected competencies and discusses suggested revisions or updates with the student, if necessary.

Other students may wish to make substantial revisions to the ILE proposal developed in APE or may wish to develop a new proposal. These students work with the Assistant Director of Thesis Advising on a new or updated ILE proposal, including appropriate selection of public health competencies.

When ILE proposals are sufficiently detailed and ready for assignment of an ILE supervisor, the Assistant Director of Thesis Advising, the GPPH Program Director, and the Associate Program Director, work together to identify ILE supervisors and assign them to student projects based on the content of each ILE proposal. The assigned ILE supervisor, a primary or adjunct faculty member, is selected based on subject matter or methodologic expertise appropriate for the ILE topic and to support students in either research, program evaluation, or policy work. Students can have input into the choice of ILE supervisor.

ILE Preparation

Once an ILE supervisor is assigned, students work one-on-one with their ILE supervisor during the ILE preparation phase and have additional opportunity to review and revise competencies based on discussion with and feedback from ILE supervisors. During this ILE preparation phase, the ILE supervisors meet regularly with their student(s) and guide and monitor their scholarly activities, providing necessary input and feedback to insure that ILE objectives will be met, educational competencies developed, and timelines maintained. The ILE supervisor is responsible for guiding, coaching, and supporting the student so the student is fully prepared to begin the writing phase of the project when GPH 744 begins. Students and ILE supervisors are encouraged to use a workplan to support mutual accountability for the progress of the project. An example workplan template is provided to students and ILE supervisors **(**ERF D7-4).

ILE Course

Before students can register for GPH 744, ILE supervisors review an updated ILE proposal in an ILE Clearance Form **(**ERF D7-3). The ILE Clearance Form includes a final selection of competencies and accompanying activities to achieve those competencies and is signed by both the student and their ILE supervisor and submitted to the Assistant Director of Thesis Advising. Once GPH 744 begins, ILE supervisors transition to the role of ILE course instructors for their students. GPH 744 course is a full 16-week, semester-long course and the content is delivered through Blackboard. Each ILE student is enrolled in the one-credit course, and each student's ILE supervisor has access to the course as ILE Instructor. The structure of GPH 744 in Blackboard reflects the three ILE paper options; there are three tracks in the course and some variation in assignments, but students and ILE instructors from all tracks interact and support each other using the discussion boards in a community of practice, much like in APE. ILE instructors grade assignment submissions and discussion posts for their students only.

The timeline below provides a visual of the student's academic exposure to ILE planning from the Pre-ILE phase through final product delivery at the end of GPH 744.

Assessment of students' scholarly work and writing is assessed through grading of GPH 744 discussion posts and assignments on Blackboard and the submission of the final written paper and accompanying project presentation to ILE supervisors and student peers. Assessment of the achievement of the selected competencies is accomplished by each student's ILE supervisor at the close of the course using the ILE Competency Achievement Assessment (ERF D7-5).

Student satisfaction with ILE processes and GPH 744 course feedback is collected through an online survey (ERF D7-10). A summary report from students enrolled in GPH 744 during Summer 2018 is located at ERF D7-11.

3) Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students.

- See GPH 744 syllabus (ERF D7-6)
- See ILE Manual (ERF D7-7)
- See UNE ILE webpage (ERF D7-8)

4) Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.

- See ILE Competency Achievement Assessment (ERF D7-5)
- See Summary Report on ILE Competency Achievement Summer 2018 (ERF D7-12)

5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.

GPH 744 was offered for the first time in Summer 2018 and final papers from the six enrolled students are located at ERF D7-9.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths

Students have a long "runway" for thinking about and planning for their ILE. They have an opportunity to work closely with the Assistant Director of Thesis Advising and their assigned ILE supervisors over an extended period. ILE supervisors are selected from a substantial pool of experienced and knowledgeable primary and adjunct faculty based on experience with the topic and/or methods of the students' ILE proposals. ILE supervisors work closely with students to finalize competencies and accomplish all tasks necessary to the final high-quality written paper and the mentoring relationship extends through enrollment in GPH 744 and completion of the project paper and presentation.

Weaknesses

GPPH's second offering of GPH 744 is currently underway (Fall 2018) and we continue to work with the first group of ILE supervisors from Summer 2018 to develop faculty and student tools that better facilitate both the ILE planning, preparation, and writing processes. Students need more information about ILE expectations and timeline so that there is a smooth ILE proposal process and ILE supervisor selection process. The new ILE Manual and web content will help fill that gap. GPPH will continue to strengthen the competency assessment process and gather feedback from ILE supervisors on their assessment experiences.

We also find that students arrive at ILE planning in various stages of preparedness. For those who are less prepared (e.g. no defined topic), there may be insufficient one-on-one time with faculty to complete all of the topic development, study design, and potential IRB activities in ways that are practically and financially viable for the program over the long term. The ILE Preparation

phase may need additional structure for both students and ILE supervisors in order to achieve more consistent preparedness for all three ILE project options.

Plans

The Assistant Director of Thesis Advising will continue to review ILE process issues, successes and challenges of the planning process, the ILE course structure and content, and the development of additional competency assessment tools and rubric entries in discussions with previous and current ILE supervisors and through review of student course feedback. This review will be used for ongoing course and process improvement, and updates to the ILE Manual. Further, while there is a competency assessment survey that ILE supervisors complete at the end of GPH 744, we plan to include a midterm competency achievement check-in for students and ILE supervisors in Spring 2019.

To address the lack of preparedness of some ILE students, GPPH has proposed development of an advanced elective course for each of the three ILE tracks (ERF D7-13). These advanced research, program evaluation, and policy courses would provide a more structured preparation process for students before the ILE and standardize the information and guidance that students receive. These courses will include lectures, discussions and assignments that scaffold towards the final written product that will be completed during the ILE course. This proposal was reviewed at the GPPH Curriculum Committee meeting on November 7, 2018 and approved (ERF D7-14). GPPH will pursue an implementation plan that targets offering these advanced elective courses in Summer 2019.

D8. DrPH Integrative Learning Experience

Not Applicable

D9. Public Health Bachelor's Degree General Curriculum

Not Applicable

D10. Public Health Bachelor's Degree Foundational Domains

Not Applicable

D11. Public Health Bachelor's Degree Foundational Competencies

Not Applicable

D12. Public Health Bachelor's Degree Cumulative and Experiential Activities

Not Applicable

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences

Not Applicable

D14. MPH Program Length

An MPH degree requires at least 42 semester-credits, 56 quarter-credits or the equivalent for completion.

Programs use university definitions for credit hours.

1) Provide information about the minimum credit-hour requirements for all MPH degree options. If the university uses a unit of academic credit or an academic term different from the standard semester or quarter, explain the difference and present an equivalency in table or narrative form.

   The MPH program requires that students complete a total of 46 credit hours. This includes nine required courses (27 credits), five elective courses (15 credits), APE (3 credits) and ILE (1 credit). Students who matriculated prior to the 2018-2019 academic year are only required to take seven required courses and may choose to take the Integrated Public Health Practicum (4 credits) in place of the ILE and APE. The number of required credits (46 hours) remain unchanged; due to the two new required courses, students now select five electives instead of seven.

   CGPS operates on a three-semester system (Summer, Fall and Spring) with six eight-week sessions (Session A and Session B) in each semester. Students must complete the MPH program in six or fewer years.

2) Define a credit with regard to classroom/contact hours.

   In accordance with UNE policy, a three-credit course is equivalent to 45 contact hours of instruction (Carnegie Method). Courses in GPPH are asynchronous. For online programs, it is common to combine the Carnegie definition's 45 hours of “contact hours” (watching lectures and supplemental videos, interacting with faculty and peers through discussions) with the 90 hours of expected "out-of-class work” to reach an expected time commitment of approximately 135 hours of work per three-credit course. Each GPPH course is designed to be completed with that commitment of time from students.

   All courses in the MPH program are three credits with the exception of the ILE, which is a one-credit course, and the GPH 747 Integrated Public Health Practicum (four-credit course) that is being phased out to replace with the APE/ILE combination. .

D15. DrPH Program Length

Not applicable

D16. Bachelor's Degree Program Length

Not applicable

D17. Academic Public Health Master's Degrees

Not applicable

D18. Academic Public Health Doctoral Degrees

Not applicable

D19. All Remaining Degrees

Not applicable.

D20. Distance Education

The university provides needed support for the program, including administrative, communication, information technology and student services.

There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

1) Identify all public health distance education degree programs and/or concentrations that offer a curriculum or course of study that can be obtained via distance education. Template Intro-1 may be referenced for this purpose.

   The public health program at UNE CGPS is fully online, providing a rigorous and flexible educational opportunity for working professionals. Students are expected to work in the field alongside other public health professionals in a face-to-face setting during the APE.

2) Describe the public health distance education programs, including

   a) an explanation of the model or methods used,

      GPPH uses the Blackboard LMS, which is funded and hosted by UNE. The UNE Blackboard LMS is available to all faculty and staff at UNE for the development of courses and online training programs.

      Courses are developed by SMEs with relevant education and field expertise in the specific content area. The SMEs define learning outcomes and develop learning and assessment activities, supported by an ID. SMEs consult with the Associate Program Director to assure that course content addresses GPPH goals and public health competencies. Teaching faculty review the course for quality control and provide additional comments for revision during course development and the course reflections.

      GPPH primary and adjunct faculty teach classes of no more than 20 students. Each teaching faculty is responsible for facilitating classroom discussions, providing substantive feedback on assignments, and answering students' questions on the course materials. Teaching faculty are selected for their educational and professional experience related to the course topic and are encouraged to incorporate their background into their interaction with students.

      The UNE Blackboard LMS provides students with quick and secure access to class materials, assignments, course calendars, syllabi, and course content as well as offering a host of other tools designed specifically to assist in meeting student learning needs.

      Course material is largely provided to the students asynchronously; however, there are start dates and deadlines for assignments and exams. Classes are divided into eight modules and students must complete the work in each module in the corresponding week of the class. In addition to lectures, any webinars or presentations in class are delivered online through meeting platforms such as GoToMeeting or Blackboard Collaborate and are recorded for students to access at any time and as many times as they desire.

      To ensure regular and meaningful interactions among online students and faculty, all GPPH classes contain discussion boards. Most classes have weekly discussions. Students must compose an original post addressing the week's prompt, and one or two guided responses to their classmates. Some classes require work within smaller groups of five or

fewer students. Faculty communicate regularly with students and participate in and facilitate meaningful discussions.

Faculty grade all discussion posts and assignments; faculty are required to provide substantive feedback using the commenting tools in Blackboard and the rubrics. Faculty are also required to hold weekly office hours, at a set time or by-appointment. In addition, every faculty must post a weekly announcement; the content may be personalized by the faculty and includes important announcements from the program, learning tips for the week, general feedback on the previous week's assignment, trends and relevant resources from the field, etc. Together, these course design components facilitate regular and substantive interaction among online students and faculty.

b) the program's rationale for offering these programs,

The primary reason for the development and implementation for the UNE's MPH program was to address the public health workforce needs across the United States and around the world. As such, the online format was the most flexible and sustainable way in which to offer a quality MPH program to students in various geographical locations including distant, rural areas. The ability to complete courses on an asynchronous schedule allows many working professionals to obtain the education needed to enhance their skill sets and advance their careers.

Many applicants to UNE's MPH program are working professionals who would not have the time or means to pursue an MPH degree in a traditional, face-to-face setting. In fact, many cite the fact that the program is "fully online" and "CEPH-accredited" as their main reasons for choosing UNE.

c) the manner in which it provides necessary administrative, information technology and student support services,

As a college with online graduate programs, CGPS is structured with administrative and student support services tailored towards online students. The GPPH Program Administration (Program Director; Program Assistant; Associate Program Director; Assistant Director of Public Health Practice; Assistant Director of Thesis Advising; Assistant Director of Research and Service; Assistant Director of Workforce Development; and Assistant Director of Career Services) and adjunct faculty work closely with the CGPS support units to ensure students' success.

Administrative and student support teams/activities include:

Enrollment Counselors – communicate with potential applicants via phone and email to increase understanding of online learning. They work closely with SSS to ensure that new students are ready to begin orientation.

Student Support Specialists – have a conversation with new students to perform an initial learning assessment and identify potential risks (financial, personal, academic) so that adequate support is provided throughout the program. SSS are in close contact with students throughout their MPH studies; they have phone conversations with students at least once for each term that they are enrolled in a class. Students on leave of absence are contacted once a semester to maintain communication. In addition, they serve as a liaison between students and faculty, and perform outreach to provide support to underperforming students.

GPPH Administration – speaks with students if any academic or programmatic concerns

arise and provides academic and professional development advising. Members of the GPPH administrative team are also primary faculty with significant teaching responsibilities and work with students and faculty to ensure sound educational experiences.

Instructional Design Team – ID have graduate degrees in education or pedagogy and work closely with SMEs to develop academically sound course materials. They also provide technical support with Blackboard LMS during course development and while courses are in session.

Student Academic Success Center (SASC) – MPH students have access to SASC, which provides a comprehensive array of academic support services including workshops, tutoring, writing support, and individual learning consultations.

Library Services -- All online students have full access to the UNE library and its holdings. The UNE library provides students with access to current research from major scholarly journals as well as an extensive selection of current scholarly books, including many course textbooks, offered electronically. In addition, a full-time ORTL is shared among the five CGPS programs (i.e., 0.2 FTE for GPPH) to help support online faculty and students.

Technology Support -- There is substantial technology support for students and faculty. An ID is assigned to each course to assist faculty; faculty use a "course feedback form" within Blackboard or email for prompt assistance by the ID. There is a Help Desk for students and faculty offering assistance 24 hours per day, seven days a week. Information on how to contact the Help Desk is in every syllabus. UNE maintains logs to track any problems or concerns with Blackboard or other technology issues. IDs meet regularly with the Associate Program Director to discuss these issues and their resolutions.

d) the manner in which it monitors the academic rigor of the programs and their equivalence (or comparability) to other degree programs offered by the university, and

UNE MPH program has SMEs and faculty who are experienced educators and practitioners ensuring that the courses are of high quality. At the end of each course, course reflections are held with the faculty who taught the course, and notes from these reflections and feedback received from faculty during the course are gathered. Students' perceptions of the academic rigor of courses are assessed via course evaluations after each session. Feedback from these sources is reviewed to propose updates as necessary. In addition, the Associate Program Director consults with SMEs, faculty, and GPPH committees to regularly review the curriculum and course designs.

The recent course revision of GPH 713 Infectious Disease Epidemiology is an example of this process. Faculty teaching the course in Spring 2018 expressed concern that it lacked sufficient rigor in the assignments and rubrics (ERF D20-1). Some students expressed a similar concern that while the course was interesting and educational, they hoped to have more opportunities for practical application of epidemiological skills (ERF D20-2). To address these concerns, GPPH's Associate Program Director reviewed the course and syllabi of similar courses offered by other institutions, and recommended to the Program Director that the course be revised before being offered again (ERF D20-3). The Program Director contracted one of the GPPH adjunct faculty, a Director of Epidemiology and Research Training at the University of Chicago, to revise the course to include the development of an epidemiological survey. The revised course was offered beginning Fall 2018 (ERF D20-4).

Assignment deadlines are stated in the syllabus and in Blackboard along with a clear late policy. Grading rubrics are developed by the SMEs, with input from faculty, and ID, and are made available to students in their courses. The "SafeAssign" plagiarism-detection

software is available for faculty to use when grading. Preceptors evaluate students during their APE.

There is no on campus MPH program at UNE. GPPH adheres to academic standards set forth by UNE to ensure that the MPH program is comparable to other graduate degree programs offered by the university. For example, students must have a GPA of 3.0 or better to graduate, must earn a B- or better to receive credits for a course, and must not get two Fs during the MPH program. In addition to assessment activities within courses, students' achievement of competencies is also assessed through preceptors, APE instructors, and ILE supervisors.

e) the manner in which it evaluates the educational outcomes, as well as the format and methods.

Several means are currently used to evaluate the educational outcomes, format and methodologies:

- Course evaluations (filled out by students) – course specific feedback is gathered from each course section and analyzed to identify student satisfaction with the course and feedback they may offer related to course content. See ERF D20-2 for an example of the course specific student raw data.
- Faculty Meetings and Course Review Meetings in which faculty and SMEs discuss any concerns regarding course designs and academic rigor. Faculty meetings and the annual faculty survey provide programmatic level evaluation (ERF D20-5 and ERF D20-6). Course Reflections (ERF D20-1) provide course specific feedback.
- Systematic monitoring of the outcome measures related to the program's objectives (e.g., competency attainment, job placement rate, student satisfaction)

3) Describe the processes that the university uses to verify that the student who registers in a distance education course (as part of a distance-based degree) or a fully distance-based degree is the same student who participates in and completes the course or degree and receives the academic credit.

UNE utilizes single sign-on technology across all university platforms, including the LMS. Single sign-on technology is an authentication technology that requires users to use a single username and password across multiple platforms. This technology also includes unique security prompts for password resets to ensure the username is not compromised. Upon admission to UNE, students are provided a unique student ID and Nor'easter login, which allows them to securely log in to the systems. There is no additional cost associated with identity verification for UNE students. Students only access official university systems and complete their work through logging in with their unique ID. Additionally, all official university communication transpires through UNE email, which is derived from the student's unique ID, to ensure that communication to and from the student is verified as trustworthy. Many courses also require live or recorded presentations, which helps verify students' identity.

All new students complete a code of conduct training and quiz in the orientation seminar, and course syllabi include policies on academic integrity. In addition, academic integrity is covered explicitly in lectures, readings, and testing in Module 2 of GPH 714 Principles of Public Health, the first course all students take upon beginning their MPH. Faculty receive guidance related to academic integrity, including identifying and addressing plagiarism, each term they teach. (See ERF D20-7 for a recent example of information shared with faculty.)

GPPH assesses incidences related to academic integrity individually to ensure that penalties are appropriate to the incident. Many times incidents of plagiarism result from student's misunderstanding of proper citation and incorporation of references in their work. As an academic institution, our first response is to ensure that there is an understanding of expectations and how

to properly cite work during their MPH studies and professional life. Due to this, we have discussed the matter extensively with our faculty in course reflections and faculty meetings. Faculty are also provided clear guidance in a document available to faculty online (ERF D20-8).

If faculty identify plagiarism or other violations of academic integrity within their course, they contact the Associate Program Director identifying the student and documenting the issue. The Associate Program Director reviews the incident within the course and reviews the student's record to see if there are any previous incidents on file. Based on this information, faculty are given guidance on how to address the matter with the student. Serious or repeat violations are referred to the Program Director and may lead to failing a course or to expulsion from the program.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
All courses within GPPH undergo evaluation by students and multiple faculty each semester. GPPH has an Associate Program Director who works closely with SMEs and IDs to ensure that courses maintain relevance and rigor. Interactions between faculty and students are valued and encouraged in faculty feedback and discussions. Having an ID team within CGPS who are familiar with GPPH courses and work closely with GPPH administration allows GPPH to provide rapid technical support to address faculty and student needs.

Weaknesses:
Not Applicable

Plans:
Not Applicable

E1. Faculty Alignment with Degrees Offered

Faculty teach and supervise students in areas of knowledge with which they are thoroughly familiar and qualified by the totality of their education and experience.

Faculty education and experience is appropriate for the degree level (bachelor's, master's, doctoral) and the nature of the degree (research, professional practice, etc.) with which they are associated.

1) Provide a table showing the program's primary instructional faculty in the format of Template E1-1. The template presents data effective at the beginning of the academic year in which the final self-study is submitted to CEPH and must be updated at the beginning of the site visit if any changes have occurred since final self-study submission. The identification of instructional areas must correspond to the data presented in Template C2-1.

Template E1-1

Primary Instructional Faculty Alignment with Degrees Offered						
Name	**Title/ Academic Rank**	**Tenure Status or Classification**	**Graduate Degrees Earned**	**Institution(s) from which degree(s) were earned**	**Discipline in which degrees were earned**	**Current instructional area(s)**
Balogun, Titilola	Assistant Director of Public Health Practice	Non-tenure	DrPH	University of Texas Health Science Center	Community Health Practice	APE, Research Methods, Community Assessment
			MPH	University of Texas Health Science Center	Community Health Practice / Maternal and Child Health	
			MBBS	Ahmadu Bello University, Nigeria	Medicine and Surgery	
Ceide, Jennifer	Assistant Director of Workforce Development	Non-tenure	MPH	Tulane University School of Public Health and Tropical Medicine	Public Health	Program Planning & Evaluation
Ciolfi, Mary Lou	Assistant Director of Thesis Advising	Non-tenure	JD	University of New Hampshire School of Law	Law	Public Health Policy, APE, ILE
			MS	University of Southern Maine, Muskie School of Public Service	Health Policy & Management	
Ewan Whyte, Carol	Assistant Director of Research and Service	Non-tenure	Ph.D.	Tropical Medicine Research Institute, The University of the West Indies, Jamaica	Human Nutrition/Epidemiology	Maternal & Child Health
			MPhil.	Tropical Medicine Research Institute, The University of the West Indies, Jamaica	Human Nutrition/Epidemiology	
			M.Sc.	Tropical Medicine Research Institute, The University of the West Indies, Jamaica	Human Nutrition/Epidemiology	

Healy, Jennifer	Assistant Director of Career Services	Non-tenure	MBA	Northeastern University	Business Management	Professional Preparation Workshop, Financial Management
			MEd	Cambridge College	Psychology, Counseling	
Tin Maung, Nang	Program Director	Non-tenure	PhD	UMASS Medical School	Infectious Disease	Global Health
			MPH	Harvard T.H. Chan School of Public Health	Global Health	
			Graduate Certificate	University of New England	Health Informatics	
Willis, Sharla	Associate Program Director	Non-tenure	DrPH	University of Illinois at Chicago	Community Health Sciences, Maternal and Child Health	Social & Behavioral Health
			MPH	University of California Los Angeles	Population and Family Health, International	
			MA	University of California Los Angeles	Latin American Studies	

2) Provide summary data on the qualifications of any other faculty with significant involvement in the program's public health instruction in the format of Template E1-2. Programs define "significant" in their own contexts but, at a minimum, include any individuals who regularly provide instruction or supervision for required courses and other experiences listed in the criterion on Curriculum. Reporting on individuals who supervise individual students' practice experience (preceptors, etc.) is not required. The identification of instructional areas must correspond to the data presented in Template C2-1.

Template E1-2: Non-Primary Instructional Faculty Regularly Involved in Instruction (2018-2019)

Name	Academic Rank^	Title and Current Employment	FTE or % Time Allocated	Graduate Degrees Earned	Institution(s) from which degree(s) were earned	Discipline in which degrees were earned	Current instructional area(s)+
Arsenault, Rebecca	Adjunct Faculty	CEO/ President, Franklin Community Health Network (Retired)	41%	DHA	Capella University	Healthcare Administration	Public Health Administration Community Assessment
				MS	Boston University	Nursing	
Banerjee, Srikanta	Adjunct Faculty	Analyst, Johns Hopkins Bloomberg School of Public Health	23%	PhD	Walden University	Epidemiology	Biostatistics Practicum/Capstone
				MD	American University	Medicine	
				MPH	Des Moines University	Public Health	
				MS	Johns Hopkins University	Geospatial Analysis	
Barman, Monica	Adjunct Faculty	Adjunct Faculty, UNE	17%	MD	University of Vermont College of Medicine	Child and Adolescent Psychiatry, Medicine	Principles of Public Health Practicum/Capstone
				MPH	University of Southern Maine, Muskie School of Public Service	Public Health	
Brown, Susan	Adjunct Faculty	Senior Biostatistician III, Rho Incorporated	6%	PhD	University of Massachusetts, Amherst	Epidemiology	Epidemiology
				MA	Marist College	Psychology	
Byas, Damien	Adjunct Faculty		23%	PhD	University of New Mexico	Community Health	Epidemiology Biostatistics

		Senior Research Fellow, Center for Organizational Research. Epidemiologist, BPH Foundation		MA	Jacksonville State University	Health Promotion	
Callahan, Katie	Adjunct Faculty	Assistant Professor, University of Maine at Farmington	35%	DrPH	East Tennessee State University	Epidemiology	Epidemiology ILE
				MPH	San Diego State University	Epidemiology	
Clay, Lauren	Adjunct Faculty	Assistant Professor, D'Youville College; Adjunct Assistant Professor, Program of Population Impact, Recovery and Resiliency, New York University	29%	PhD	University of Delaware School of Public Policy and Administration	Disaster Science and Management	Emergency Preparedness Epidemiology Principles of Public Health
				MPH	Drexel University	Public Health	
Cooksey, Adrian	Adjunct Faculty	STD and Viral Hepatitis Program Administrator, Florida Department of Health	29%	DrPH	Florida A&M University	Epidemiology	Epidemiology Public Health Administration Policy ILE
				MPH	Florida A&M University	Biostatistics	
Dickerson, Aisha	Adjunct Faculty	Postdoctoral Research Fellow, Environmental & Occupational Medicine and Epidemiology Program, Harvard T.H. Chan School of Public Health	17%	PhD	University of Texas Health Science Center	Epidemiology, Biostatistics	Epidemiology Biostatistics Environmental Health
				MSPH	University of Alabama at Birmingham	Epidemiology, Biostatistics	

DiMaio, Leanne	Adjunct Faculty	Manager, Populations Health and Wellness, Tufts Health Plan	35%	DCN	Maryland University of Integrative Health	Clinical Nutrition	Health Literacy Health Informatics
				MS	NY Chiropractic College	Applied Clinical Nutrition	
				MBA	St. Josephs College	Business Administration	
Dougherty, Stephen	Adjunct Faculty	Adjunct Faculty, Social Work, UNE	12%	PhD	Fordham University	Social Work	Policy
				MSW	Fordham University	Social Work	
Doyle, Rebekah	Adjunct Faculty	Health Educator III, Canadian County Health Department, Oklahoma	23%	PhD	Walden University	Public Health	Health Literacy Community Assessment
				MS	Arkansas Tech University	Emergency Management and Homeland Security	
				RN	Northeastern State University	Nursing	
Drewette-Card, Rebecca	Adjunct Faculty	President, Public Health Partners	17%	DrPH	Boston University	Social and Behavioral Sciences	Community-Based Participatory Research
				MSPH	University North Carolina, Chapel Hill	Health Policy and Administration	
Falls, Elizabeth	Adjunct Faculty	Program Director, Environmental Toxicology Program, Ocean Research & Conservation Association	17%	PhD	University of Florida	Food Science and Human Nutrition	Environmental Health
				MS	Florida State University	Food and Nutrition	

Gunderman, Jennifer	Adjunct Faculty	Assistant Lecturer, UNE	35%	MPH	Emory University	Maternal and Child Epidemiology	Epidemiology Maternal and Child Health ILE
Hunt, Anne	Adjunct Faculty	Biostatistician/ Epidemiologist, Hunt Consulting Associates. Statistical Mentor, Columbia University	35%	ScD	Harvard University	Biomedical Computing	Emergency Preparedness Biostatistics
				MS	Harvard University	Biostatistics	
				MS	Harvard University	Epidemiology	
Kaley, Lori	Adjunct Faculty	Managing Director, LA Sutherland Group	6%	MS	Husson University	Business, Health Care Management	Policy
				MS	University of Maine, Orono	Human Development, Nutrition	
Karlsen, Micaela	Adjunct Faculty	Director, Lifestyle Medicine Economic Research Consortium; Co-Investigator, Tufts Friedman School of Nutrition	17%	PhD	Tufts Friedman School of Nutrition Science and Policy	Nutritional Epidemiology	Obesity Epidemiology
				MS	Johns Hopkins Bloomberg School of Public Health	Human Nutrition and Public Health	
Kuhrt, Sharon	Adjunct Faculty	Manager, Quality Improvement, Priority Health	17%	DNP	Northeastern University	Nursing Practice	Health Informatics
				MS	Regis University	Nursing	
Lim, Kim	Adjunct Faculty	Program Director, New Hampshire Adult Behavioral Risk Factor Surveillance System (BRFSS)	6%	PhD	Southern Illinois University at Carbondale	Community Health Education	Occupational Health
				MPH	State University of New York at Albany	Epidemiology	

				MPA	Southern Illinois University at Carbondale	Public Affairs	
Lino, Stephanie	Adjunct Faculty	Research Analyst III, County of Los Angeles, Department of Children and Family Services	17%	DrPH	Loma Linda University	Health Education/ Health Promotion	Maternal & Child Health Community Assessment Principles of Public Health
				MPH	Charles R. Drew University of Medicine and Science	Public Health	
Makelarski, Jennifer	Adjunct Faculty	Director of Epidemiology and Training, Lindau Laboratory at the University of Chicago	41%	PhD	The University of Iowa	Epidemiology	Epidemiology Biostatistics ILE
				MPH	Missouri State University	Epidemiology	
Matoff-Stepp, Sabrina	Adjunct Faculty	Director, Office of Women's Health, DHHS	6%	PhD	University of Maryland	Community and Public Health	Maternal & Child Health ILE
				MA	University of Maryland	Health Education	
McGill Rogers, Tia	Adjunct Faculty	Postdoctoral Fellow, Harvard T.H. Chan School of Public Health	35%	PhD	Georgia State University	Behavioral Science	Social & Behavioral Health Research Methods
				MPH	Emory University	Behavioral Science and Health Promotion	
Most, Ivan	Adjunct Faculty	Consultant, Strategic Occupational Health Management	35%	ScD	University of Massachusetts Lowell	Work Environment Policy	Environmental Health Occupational Health ILE
				MS	Rensselaer Polytechnic Institute	Mechanical Engineering	

Napier, Rachaline	Adjunct Faculty	Public Health Epidemiologist, Riverside University Health System	6%	DrPH	Capella University	Epidemiology	Epidemiology
				MPH	The Ohio State University	Health Behavior and Health Promotion	
Nelson, Joni	Adjunct Faculty	Postdoctoral Scholar, Medical University of South Carolina	6%	PhD	University of South Carolina	Health Promotion, Education and Behavior	Practicum/Capstone
				MS	Medical University of South Carolina	Microbiology and Immunology	
O'Brien, Liam	Adjunct Faculty	Associate Professor, Statistics, Colby College	29%	PhD	Harvard University	Biostatistics	Biostatistics
Omogbai, Clara	Adjunct Faculty	Health Educator, California Health Collaborative	12%	DrPH	Loma Linda University	Health Promotion and Education	Global Health
				MPH	Tulane University	International Health and Development	
				MLS	University of Ibadan, Nigeria	Library and Information Science	

Poteat, Patricia	Adjunct Faculty	Fulltime Faculty, Rochester Institute of Technology, NY	35%	EdD	University of Rochester	Health Systems Administration, Education Leadership, Program Evaluation	Principles of Public Health Research Methods Health Informatics ILE
				MS	Rochester Institute of Technology	Health Systems Administration	
Pritchard, Andrew	Adjunct Faculty	Quality Improvement Project Manager, IHA	6%	MPH	University of Michigan School of Public Health	Health Management and Policy, Program Evaluation, Global Health	Research Methods
Rankine, Nicole	Adjunct Faculty	President, Healthy Young People Excel, Inc.	17%	PhD	Walden University	Community Health Education	Social & Behavioral Health Environmental Health
				MPH	Walden University	Public Health	
				MS	Georgia State University	Biology	
Raphael, Monae	Adjunct Faculty	Senior Writer and Researcher, One River Grants	29%	DrPH	New York Medical College	Health Policy and Management	Community Based Participatory Research Policy Principles of Public Health Grant Writing
				MPH	Morgan State University	Public Health	
				MBS	University of Medicine and Dentistry of New Jersey	Biomedical Science	

Richie-Zavaleta, A. Carli	Adjunct Faculty	Adjunct Faculty, UNE	17%	DrPH	Drexel University	Community Health and Prevention	Practicum/Capstone
				MA	University for Peace Costa Rica	International Peace Studies	
				MA	California State University San Marcos	Applied Sociology	
Rosebush, Joanna	Adjunct Faculty	Research Associate, University of Maine System; Consultant Clinical Dietician, Community Health and Counseling Services	6%	PhD	University of Maine	Food and Nutrition Science	Obesity Epidemiology
				MS	University of Maine	Food Science and Human Nutrition	
Roy, Brittany	Adjunct Faculty	Healthcare Associated Infections Specialist, Maine Center for Disease Control and Prevention	6%	MPH	University of New England	Public Health	Principles of Public Health
Roy, Monique	Adjunct Faculty	Assistant Director, Education, UNE	6%	MA	University of Southern Maine	Organizational Leadership Studies	Policy
Shields, Deborah	Adjunct Faculty	Executive Director, MassEquality	6%	JD	Northeastern University School of Law	Law	Policy
				MPH	Boston University School of Public Health	Public Health Law, Bioethics and Human Rights	

Shropshire, Eric	Adjunct Faculty	Public Health Analyst, Eagle Medical Services	6%	DHSc	Nova Southeastern University	Health Systems Strengthening	Community Based Participatory Research
				MPH	Benedictine University	Health Education and Promotion, Health Management and Policy	
Stephens, Kenyatta	Adjunct Faculty	Senior Epidemiologist, Carter Consulting, Inc.	6%	PhD	Walden University	Epidemiology	Epidemiology
Tuff, Raegan	Adjunct Faculty	Monitoring and Evaluation Specialist, Centers for Disease Control and Prevention	29%	PhD	Morehouse School of Medicine	Health Promotion and Behavior	Program Planning & Evaluation Social & Behavioral Science
				MPH	University of Georgia College of Public Health	Social and Behavioral Science	
Wade, Janet	Adjunct Faculty	Director, Healthy Kingston Initiative	6%	DNP	University of Massachusetts, Amherst	Public Health Nursing Leadership	Principles of Public Health
				MPH	Tulane School of Public Health and Tropical Medicine	International Health/Health Education	
Welch, Kathleen	Adjunct Faculty	Adjunct Professor in Global Community Health, Tulane University	29%	PhD	Tulane University	International Health	Global Health Emergency Preparedness
				MPH	Tulane University	Epidemiology, Sociology	
				MA	The Ohio State University	Education	
Wentworth, Leah	Adjunct Faculty		17%	PhD	University of Iowa	Occupational/ Environmental Health	Occupational Health

		Project Researcher, Office of Academic Health and Hospital Affairs, State University of New York System Office		MPH	University of Massachusetts Amherst	Health Policy and Management	
Williams, Mollie	Adjunct Faculty	Executive Director, The Family Van	17%	DrPH	University of North Carolina at Chapel Hill	Health Policy and Management	Program Planning & Evaluation ILE
				MPH	University of Michigan	Health Behavior and Health Education	
Wimsatt, Maureen	Adjunct Faculty	Epidemiology Manager, California Rural Indian Health Board, Inc.	12%	PhD	University of Maryland	Human Development	Epidemiology ILE
Zamboni, Joseph	Adjunct Faculty	Program Director, Maine Long-Term Care Ombudsman Program	12%	JD	University of Maine School of Law	Law	Policy Public Health Administration ILE
				MPH	University of Southern Maine, Muskie School of Public Service	Public Health	
				MPPM	University of Southern Maine	Public Policy and Management	

3) Include CVs for all individuals listed in the templates above.

   See ERF E1-1 for faculty in template E1-1 and ERF E1-2 for faculty in template E1-2

4) If applicable, provide a narrative explanation that supplements reviewers' understanding of data in the templates.

   Not applicable

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

   Strengths:
   GPPH has primary and adjunct faculty who teach in areas in which they have work experience or academic credentials. Expertise among GPPH primary faculty is diverse and includes Epidemiology, Maternal and Child Health, Financial Management, Policy, Social and Behavioral Health, Global Health, and Health Education. GPPH adjunct faculty are scholar practitioners passionate about leveraging their knowledge and expertise in the field when teaching and supervising students.

   Weaknesses:
   Not Applicable

   Plans:
   Not Applicable

E2. Integration of Faculty with Practice Experience

To assure a broad public health perspective, the program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Programs encourage faculty to maintain ongoing practice links with public health agencies, especially at state and local levels.

To assure the relevance of curricula and individual learning experiences to current and future practice needs and opportunities, programs regularly involve public health practitioners and other individuals involved in public health work through arrangements that may include adjunct and part-time faculty appointments, guest lectures, involvement in committee work, mentoring students, etc.

1) Describe the manner in which the public health faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if applicable. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

   GPPH actively recruits and retains faculty who bring diverse and complementary experiences to the program. With a scholar-practitioner model, faculty bring public health knowledge from both their formal academic training and ongoing professional practice.

   The faculty at GPPH fall into two categories:

   1) Primary faculty are employed full-time in GPPH. They have academic credentials and prior experiences in public health and have both administrative and teaching responsibilities.
   2) Adjunct faculty and SMEs work part-time in GPPH. Following the scholar-practitioner model of CGPS, GPPH adjunct faculty and SMEs are hired because of significant work experience in the field. The majority of GPPH adjunct faculty and SMEs work full-time in public health outside of academia and receive instructional support and applicable training through GPPH. All faculty providing instruction in a course are able to provide input into the course content and bring their different perspectives to the concepts being taught.

   As shown in Templates E1-1 and E1-2, GPPH faculty and SMEs possess diverse training/credentialing and hold diverse positions within the field of public health; they truly fit the scholar-practitioner model. Some of the faculty have full-time positions with public health agencies (e.g. adjunct faculty Adrian Cooksey works as the STD and Viral Hepatitis Program Administrator for the Florida Department of Health) while others, like Stephanie Lino who is a Research Specialist for the County of Riverside Department of Public Social Services, are actively engaged in research and scholarly activities. These different focus areas help the program stay connected to public health priorities at various levels. Our adjunct faculty, by virtue of their current positions in public health, are aware of trends and gaps in the field as well as “real-life” issues in public health.

   The use of this scholar-practitioner model ensures that the public health faculty bring valuable and current experiences from the field of practice. These experiences are integrated into courses through course designs and instruction by SMEs, and classroom discussions led by faculty. Instruction in CGPS is conducted predominantly by this part-time faculty. CGPS does not follow a traditional faculty model; instead, the emphasis is placed on ensuring that our faculty members are professionals in their field and bring to the role of instructor the application of theory to current practice as well as the challenges that they confront in their professional setting. This enables our curricula to be authentic and current, and for faculty to develop these capacities in our graduate students.

Our faculty are passionate lifelong learners. They combine a deep curiosity and commitment to solving problems in their field or area of expertise with a desire to share their knowledge and ideas with students as they constantly evolve in their own careers. GPPH faculty members have extensive and diverse experiences from the field of practice and research, and faculty integrate their perspectives from the field into the classroom through course development, discussion, and assignments. As students progress through the program, they are exposed to different perspectives, which broadens their view of public health concepts and their application to real world problems.

GPPH values research and embraces its importance in helping faculty stay current in their field. As many of the students in our program are located throughout the world, this requires a research model that extends beyond UNE's geographic location. This collaborative research model is different from the more traditional approach, in which each faculty member has both teaching and research responsibilities. Within the structure of GPPH, scholar-practitioners bridge the gap between academia and the real world, blending scholarly research with practical application to solve complex problems in their professions and sharing these skills with the students.

GPPH faculty are active in diverse public health-related fields. They develop curriculum and provide instruction and mentoring throughout a student's entire journey. This unique structure of the program means that GPPH is able to provide each student with valuable first-hand knowledge of key public health concepts and evidence-based approaches to addressing problems with diverse root causes which makes CGPS GPPH graduates more likely to make a difference in the health of their communities.

2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
The scholar-practitioner model of GPPH ensures that faculty have public health practice experience outside of the classroom. Faculty and SMEs with professional experience work together to review and provide feedback on courses in reflection meetings (refer to ERF E3-5), further supporting authenticity of GPPH curriculum.

Weaknesses:
Not applicable

Plans:
Not applicable

E3. Faculty Instructional Effectiveness

The program ensures that systems, policies and procedures are in place to document that all faculty (full-time and part-time) are current in their areas of instructional responsibility and in pedagogical methods.

The program establishes and consistently applies procedures for evaluating faculty competence and performance in instruction.

The program supports professional development and advancement in instructional effectiveness.

1) Describe the means through which the program ensures that faculty are informed and maintain currency in their areas of instructional responsibility. The description must address both primary instructional and non-primary instructional faculty and should provide examples as relevant.

   Primary Faculty:
   GPPH primary faculty only teach courses that align with their educational background and expertise documented in their CVs. Financial resources are available through the GPPH budget for primary faculty to attend professional development training and conferences. During 2018, conferences attended by primary faculty included, but are not limited to, the American Public Health Association Annual Meetings, Maine Public Health Association Annual Meeting, Associated Schools and Programs of Public Health, UNE Center for the Enrichment of Teaching and Learning Faculty Workshop, and Reframing Aging Symposiums. Primary faculty are encouraged to allocate 20% of their time to research/scholarship efforts so that they may stay current with their areas of interest and expertise. Primary faculty also gain knowledge of the field through regular interactions with community stakeholders and public health employers through service activities, meetings, and trainings offered by UNE, such as recent grant writing and financial management webinars described in section F. Ongoing professional development is one of the criteria addressed in annual reviews with the Program Director.

   Adjunct Faculty:
   Following the scholar-practitioner model, GPPH employs SMEs and adjunct faculty who are credentialed and active practitioners in their areas of instructional responsibilities. Before assigning an adjunct faculty to a course, the Program Director and Associate Program Director assess alignment through review of updated CVs. The Program Director holds annual review conversations with each faculty using the Faculty Development Tool (https://docs.google.com/forms/d/1SS8Pz6Oujxkak7KsCQ24BEIbxf5MOtoU5KN6qnZNilw/edit). Professional Development as well as Research and Scholarship Activities are two categories included in the development tool, thereby ensuring that faculty maintain currency in their areas of instruction. Support for research and scholarship activities is available from GPPH through mini-grants; this support helps faculty stay abreast of advances and best practices in the field. For example, Rebecca Arsenault, a GPPH adjunct faculty, is a recently retired CEO/President of a community hospital in Maine. She brings significant practice experience to the classroom. In the 2017-2018 academic year, GPPH supported her professional development by providing a mini-grant to support the presentation of her research at the 2017 APHA meeting in Atlanta. During the same period, this faculty member developed the new GPH 706 Public Health Administration course for inclusion as one of GPPH's required courses.

2) Describe the program's procedures for evaluating faculty instructional effectiveness. Include a description of the processes used for student course evaluations and peer evaluations, if applicable.

   There are several ways in which GPPH evaluates faculty instructional effectiveness:

   Midcourse Blackboard Review and feedback by GPPH Administration:

Between week 2 and week 4 of each term, the GPPH Associate Program Director evaluates teaching faculty within Blackboard on various indicators of instructional effectiveness, such as feedback provided to students on graded assignments, grading timeliness, and faculty communication with students through discussions and announcements. Faculty are encouraged to share their professional experiences relevant to the course. Faculty receive a report with feedback so that any corrective actions may be taken. Faculty are encouraged to speak with the GPPH Associate Director regarding any concerns or needs for additional training. See ERF E3-1 for sample reports from Summer 2018 semester.

Faculty Development Tool:
On an annual basis, all active adjunct faculty complete a self-assessment tool (ERF E3-2), and hold a meeting with the Program Director. In addition to the items on the self-assessment tool, the faculty and the Program Director discuss the results of course evaluations, Blackboard reviews, needs for training and support, and goals for the future.

Peer Mentoring by Lead Adjunct Faculty:
GPPH appoints a lead faculty if a course is taught in multiple sections with different instructors. When there are only two sections, a lead faculty is assigned if the other instructor is teaching that particular course for the first time. A lead faculty has been recognized by students and peers as an effective and engaged instructor who is familiar the subject matter and with GPPH policies. The lead faculty is responsible for maintaining communication with the instructional team for the course during that term. The lead faculty can provide feedback and advice to the other instructors to ensure instructional effectiveness and consistency across course sections.

Student Course Evaluations:
At the end of each course, students are asked to complete course evaluations, which contain a set of questions to evaluate faculty instructional effectiveness (e.g., availability, knowledge, engagement, timeliness of grading, quality of feedback). The surveys are anonymous. Each faculty receives the results of student course evaluations after the survey closes. Sample student course evaluations are provided in (ERF E3-3). Information from the student evaluations are reviewed with the faculty annually, and are used in adjunct faculty hiring decisions in conjunction with other assessments as outlined in the Faculty Selection Guidelines (ERF E3-4) that were shared with faculty and discussed at the Summer 2018 faculty meeting.

Student Support Specialists:
SSS are enrolled in each course and can provide helpful information regarding effectiveness of faculty. Since SSS work closely with students, they receive informal student feedback regarding faculty instructional effectiveness. While SSS have no supervisory role in the program, their presence in the class and interaction with students allows them to alert the Program Director of potential problems for further investigation or intervention.

3) Describe available university and programmatic support for continuous improvement in faculty's instructional roles. Provide three to five examples of program involvement in or use of these resources. The description must address both primary instructional faculty and non-primary instructional faculty.

CGPS has an eight-module "faculty orientation course" for new faculty or those who desire additional training. The orientation was developed by a group of CGPS Program Directors in collaboration with ID and SSS, and covers various topics such as CGPS faculty expectations, use of Blackboard and its features, working with online students, how to give effective feedback, and how to seek support from program administration.

UNE's Center for The Enrichment of Teaching and Learning (CETL) also provides support for continuous improvement in faculty's instructional roles. CETL sends weekly emails with links to articles and resources for best practices in teaching, develops and curates teaching resources

that faculty can access as needed, provides one-on-one consultations, and holds live workshops designed to increase instructional effectiveness. More information on services provided by CETL can be found at http://www.une.edu/cetl/teaching-resources.

Primary and adjunct faculty are encouraged to utilize the resources provided by CETL. In May 2018, two primary faculty and the entire CGPS Instructional Design staff attended a full day workshop on understanding and promoting student engagement in the classroom. In June 2018, CETL provided a webinar from the speaker that focused on the same topic with an emphasis on online engagement. This webinar was shared with all faculty.

The CGPS Instructional Design team also develops and curates helpful resources for faculty. These include tools to help with faculty professional development, tools that may be useful in classrooms and articles and links that discuss various teaching methodologies (http://vision.une.edu/tag/instructional-design/). In addition, live and recorded webinars are offered on a regular basis to support faculty. Some recent webinars developed by CGPS Instructional Design can be found at http://vision.une.edu/tag/webinar/.

4) Describe the role of evaluations of instructional effectiveness in decisions about faculty advancement.

CGPS does not follow the traditional tenure-track model. Primary faculty receive a merit-based salary adjustment at the beginning of each fiscal year. Renewal of adjunct faculty contracts are based on satisfactory evaluations from the various sources described above and in the Faculty Selection Guidelines (ERF E3-4). Adjunct faculty with repeated strong evaluations from various sources are provided with additional incentives such as the opportunity to teach consistently (as their schedules allow), and to serve as lead instructors or ILE Supervisors.

5) Select at least three indicators, with one from each of the listed categories that are meaningful to the program and relate to instructional quality. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the lists that follow, the program may add indicators that are significant to its own mission and context.

Faculty currency
Peer/internal review of syllabi/curricula for currency of readings, topics, methods, etc.

GPPH courses are taught in multiple sections, which means that several faculty members with expertise in the particular subject area are able to regularly assess the course content for relevancy and currency. As described in criterion A1, after each term, all faculty who taught the course participate in a "course reflection/review meeting" facilitated by the GPPH Associate Program Director. During these meetings, faculty share their experiences and provide feedback on course content and design, which serves as a valuable team evaluation of the course. Sample notes from these meetings are included in ERF E3-5.

The Associate Program Director uses these notes to identify revisions and updates needed within a course. These revisions can range from editing the wording of a specific prompt or rubric to suggesting new readings to recommending larger changes that may require a full revision to update the course. The course reflection process was implemented in Summer 2017. Prior to that, an informal process focused primarily on feedback from the lead instructor or SME.

Since implementing the course reflections, two courses were identified by faculty that needed major revision: GPH 725 Financial Management and GPH 704 Public Health Law and Ethics. Both of these courses were removed from the course calendar and fully revised. As part of this revision process, we have implemented a formal opportunity for SMEs to receive outside feedback on the course from other faculty within GPPH with expertise in the topic while in the

course development stage. GPH 725 will be offered again beginning in Fall B 2018, and GPH 704 will be offered again beginning Summer A 2019.

Annual or other regular reviews of faculty productivity, relation of scholarship to instruction

As described above, all GPPH faculty complete the faculty development tool (ERF E3-2) and meet with the Program Director annually. The self-assessment tool contains information on faculty productivity and instructional effectiveness, and the annual review serves as an opportunity to identify any additional support or training a faculty may need. Course evaluations and midcourse Blackboard reviews are also discussed at this time. The annual review is also an opportunity for faculty to provide feedback to the Program Director regarding program operations.

Adjunct faculty are hired through course specific contracts, with invitations to teach sent out approximately eight weeks before a term begins. Based on the multiple data points listed above and information gleaned from the faculty CVs, the Associate Program Director makes recommendations regarding the continued offering of contracts to individual faculty. Over the past three years, GPPH has seen an increase in the relation of faculty scholarship to instruction helped by changes in our course schedule.

In the 2016/2017 academic year, courses were offered just once per year with the exception of GPH 714, which was offered every semester. During the 2017/2018 academic year, GPPH transitioned to offering courses more often with the goal of offering every course each semester by the 2018/2019 academic year. GPPH achieved that goal and now offers the nine required courses each semester, plus one required course twice (this course changes each semester). We also offer each elective once per semester. See ERF E3-7 for copies of the academic calendars for the past three years and below for a summary of the change in number of courses offered per semester and the average number of sections taught per course.

Academic Year	**2016/2017**	**2017/2018**	**2018/2019**
Number of Required Courses Offered in Fall Semester	3	6	10
Average Number of Sections per required course	10	6	3
Number of Elective Courses Offered in Fall Semester	6	7	13
Average Number of Sections per elective course	4	4	2

The change in course schedule has provided students additional options in course selection and the ability to take their required courses in order, no matter which semester they start. By offering fewer sections of a greater number of courses each semester, GPPH is better able to match faculty specialization, based on education and work experience, to the courses they teach. It also allows GPPH to work with a smaller number of faculty on a more consistent basis, increasing faculty involvement in the program throughout the year.

Faculty instructional technique

Frequency of internal quality reviews of existing courses or curricula

Courses in GPPH are designed by a faculty member who acts as the SME for that course. Quality reviews of courses are done each time a course runs. After each term, the GPPH Associate Program Director meets with all faculty teaching the course to solicit their feedback and identify any need for course revisions. This information is discussed with the SME who developed

the course if there is need for minor revisions. If a course is in need of a redesign, a SME is identified to design the course. The SME may be the same person who previously developed the course, or a different faculty member with extensive relevant subject matter expertise.

Over the past three years, the process of internal quality review of existing courses has been formalized through the course reflection process. Even those courses that run only one section, such as GPH 718 Biostatistics II complete a course reflection with the Associate Program Director. As these courses are not always taught by the SME who developed them, GPPH is able to solicit multiple perspectives on the course and address any concerns.

Student satisfaction with instructional quality

Course evaluations, anonymously completed by students at the end of each term, contain a set of questions to determine student satisfaction with instructional quality. These include students' perceptions of a faculty's knowledge, accessibility, ability to facilitate a positive classroom environment, and timeliness of grading. While student satisfaction has been high overall, we have seen an improvement over the past three years in the majority of these measures (ERF E3-8).

Program-level outcomes

Courses that are team-taught with interprofessional perspectives

GPPH's required policy course (GPH 702) was recently redesigned by an interdisciplinary team of faculty from the CGPS programs of public health, social work, health informatics, nutrition, and education. The course will be taught by faculty representing these disciplines, and will have students enrolled from all graduate programs within the college. The course was offered for the first time in Fall 2018, and will be offered every semester.

Implementation of grading rubrics

All GPPH courses have grading rubrics that are developed with input from SMEs, ID, and the Associate Program Director. The grading rubrics ensure fairness in grading and consistency across multiple sections of a course. During course review meetings in the 2016-2017 academic year, a common theme of concerns arose regarding course rubrics and how they could be made more effective. The Associate Program Director worked with faculty and SMEs to incorporate the feedback in the redesign of rubrics for all GPPH courses. Sample notes from the course reflection meetings and a copy of the guidelines for the rubrics redesigned based on these reflections can be found in ERF E3-6. Rubrics are included in all course syllabi. Faculty have reported in course reflections that the change in course rubrics has improved their ability to accurately assess the quality of students' work.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH ensures faculty currency by 1) employing SMEs and adjunct faculty who are credentialed and active practitioners in their areas of instructional responsibilities, and 2) emphasizing the importance of research and scholarship activities during faculty assessment. All new faculty complete faculty orientation designed to familiarize them with concepts related to online teaching and adult learning. ID and UNE's CETL provide support for continuous improvement in faculty's instructional roles through videos, articles, and webinars. Faculty are provided with feedback in timely manner, and through various sources including mid-course reviews, peer reviews, annual assessment, and student course evaluations. GPPH faculty are actively involved in review of the curricula through course reflection meetings, and GPPH continues to seek ways to increase engagement.

Weaknesses:

Currently, professional development and instructional effectiveness activities are optional for faculty; they are not required conditions for employment. As a result, there are variations in faculty participation in activities designed for continuous improvement of instructional effectiveness. In addition, GPPH does not currently track faculty use of available resources (i.e., videos and webinars).

Plans:

GPPH primary and adjunct faculty will be required to complete an annual training on instructional effectiveness. This training will be developed in consultation with the Assistant Director of Workforce Development, the Associate Program Director, UNE CETL, and CGPS ID, and will be implemented in the 2019-2020 academic year. It will include modules with videos, articles, and assessment activities. The content will be updated yearly based on faculty feedback on usefulness of the materials. In addition, a theme has emerged from the 2018 faculty evaluations, which is that faculty would like a forum to regularly discuss teaching strategies with each other (even if they are teaching in a different area). GPPH will plan and facilitate a monthly faculty journal club beginning in 2019. All participating faculty will read an article or watch a video every month and come together to discuss the article or video of the month. For example, one article may be “How to engage online students in discussion boards”; after reading the article of the month, faculty will discuss the strategies mentioned in the article as well as their own strategies. This article club will be optional but attendance will be encouraged and tracked, and incentives may be considered if needed.

E4. Faculty Scholarship

The program has policies and practices in place to support faculty involvement in scholarly activities. As many faculty as possible are involved in research and scholarly activity in some form, whether funded or unfunded. Ongoing participation in research and scholarly activity ensures that faculty are relevant and current in their field of expertise, that their work is peer reviewed and that they are content experts.

The types and extent of faculty research align with university and program missions and relate to the types of degrees offered.

Faculty integrate research and scholarship with their instructional activities. Research allows faculty to bring real-world examples into the classroom to update and inspire teaching and provides opportunities for students to engage in research activities, if desired or appropriate for the degree program.

1) Describe the program's definition of and expectations regarding faculty research and scholarly activity.

   GPPH recognizes the importance of research and scholarship in educating qualified and competent public health professionals and in maintaining currency among faculty. This importance is clearly stated in the program's mission and is embraced by the faculty. The scholarship model used by GPPH is a collaborative one that builds research and scholarly relationships both within UNE, among primary and adjunct faculty, and with external research partners.

   Primary faculty are expected to pursue scholarly activities and mentor students. Up to 20% of primary faculty time can be allocated towards research and scholarly activities relevant to their professional development and aligned to their area/s of instruction. Adjunct faculty are encouraged to engage in scholarly activities related to public health. The faculty development tool used for annual evaluations of adjunct faculty states the expectation as follows:

Criterion 5: Scholarship and Service

We believe in a practitioner- scholar faculty model. This model values the knowledge and skills that the faculty brings from their workplace.

We acknowledge that most students in CGPS are working adults for whom the capacity to build a professional network and develop skills with immediate utility in their field were central to their choice of degree and institution.

Baseline	**Effective** *(In addition to baseline components)*	**Exemplary** *(In addition to baseline and effective components)*
☐Holds specific conferred graduate degrees stipulated by CGPS programs. In most cases, a terminal degree is preferred if not required. ☐Provides and updates professional role, affiliations and other information for University website.	☐Attends professional organization offerings/continuing education credits or community service specific to program. ☐Serves as advisor to students on topics of career development and best practice.	May be engaged in: • ☐publishing and /or presenting in industry specific forums • ☐service on professional boards • ☐Journal reviewing • ☐University/College committee work

   GPPH adjunct faculty are scholar practitioners engaged in scholarship in their daily work, and this enables them to bring real-life experience and practical approaches to many public health issues. Faculty members are also encouraged to involve students in their research and scholarly activities. Students are invited to participate based on their interests and the project's needs. Research and scholarly work include individual projects, collaborative research with colleagues at UNE, or with outside entities. Refer to ERF E4-1 for a list of publications, professional

presentations, and grant submissions by GPPH primary and adjunct faculty between 2015 and 2018.

Faculty who serve as SMEs are also encouraged to incorporate research-related project-based activities into required and elective courses as an instructional tool to enrich the curricula. Such activities are viewed as a positive way to involve students at all levels in research, especially those who otherwise might not have the interest or opportunity due to their employment status or prior professional training.

2) Describe available university and program support for research and scholarly activities.

UNE and GPPH have several mechanisms in place to support research and scholarship activities. These are described below:

1. In the Fall of 2015, the Center for Excellence in Interprofessional Education was renamed the Center for Excellence in Health Innovation, reflecting a focus on innovative learning activities and research opportunities for UNE students and faculty in the nexus between health care transformation, public health, and education. The Center for Excellence in Health Innovation focuses on clinical settings and building public health competencies by working collaboratively with UNE's colleges and students. The Center has expanded interprofessional education in clinical settings for UNE's students and implemented research projects related to interprofessional practice. The clinical interprofessional opportunities include those with population health and health informatics learning activities.

   The renaming and refocusing of this Center has facilitated both the growth and reach of our program's collaborative research model. GPPH has established a strong collaboration with the Center and faculty, students, and alumni are actively engaged in scholarly activities originating from this Center.

2. CETL is a resource that supports innovative, vibrant, and effective teaching and learning. CETL serves all university educators including faculty (adjunct, part-time, full-time), lab instructors, teaching assistants, academic staff (developmental specialists, librarians, advisors), and tutors. Opportunities include Scholarship of Teaching and Learning (SoTL) mini-grants awarded annually. The SoTL mini-grant program supports research in an area of teaching that may impact student learning, motivation and/or retention. GPPH primary and adjunct faculty are encouraged to apply for these mini-grants.

3. UNE's Office of Research and Scholarship supports an established mini-grant program, awarded annually. New in 2018 is an additional mini-grant program being offered by this office. This new mini-grant program is dedicated to projects with a focus on aging and health. The Assistant Director of Research and Service is a part of the team of UNE researchers and administrators focused on the development of the Center and research programs within the new Center for Excellence in Aging and Health. GPPH primary faculty are eligible to apply to this mini grant program.

4. Primary Faculty are eligible to compete for all available UNE research funds (e.g. the University annual mini-grant programs and CETL Mini-Grant) but adjunct faculty are unable to apply to many of these programs. Given the importance the program places on research and scholarly activities for all faculty, a mini-grant program was developed for GPPH in September 2017. This mini-grant program, funded by CGPS, supports research by all faculty, and GPPH adjunct faculty and students can apply for funds to support their research and scholarly activities.

Information on the GPPH Mini-Grant Program may be found at:
http://success.une.edu/mph_opportunities/new-gpph-mini-grant-program-available/

In addition to these available opportunities and in further support of conducting research and scholarly activities, GPPH has a full-time position that facilitates and strengthens collaborative research across UNE, among faculty and students, and with external partners. The Assistant Director of Research and Service supports the program's involvement in research and scholarly activities by developing programs and processes, identifying and developing collaborations, and documenting ongoing research activities.

3) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students.

These examples include both primary and adjunct faculty.

1. **Jennifer Gunderman**, Adjunct Faculty and SME – Ms. Gunderman is the preceptor for a HRSA-funded study being conducted by the Center for Excellence in Health Innovation in rural Maine to improve interprofessional work. This work informs her instruction in GPH721 Foundations of Maternal and Child Health, where students assume roles of different health professionals while working on case studies.

2. **Titilola Balogun**, Primary Faculty and Assistant Director of Public Health Practice – Dr. Balogun is the PI on a CETL-funded mini-grant that examines the feedback received from preceptors on working with the MPH students and from students on their field experience. This ongoing study is providing valuable information on how the students and preceptors perceive the field experience and areas for improvement. As the Assistant Director of Public Health Practice, Dr. Balogun is able to use the information being gathered to inform her processes, and interactions with the students and preceptors as they prepare and undergo the field experience of the MPH program.

3. **Sharla Willis**, Primary Faculty and Associate Program Director – Dr. Willis is involved as a co-investigator with Dr. Balogun on the CETL-funded project described above. She is able to use the information from this work to directly inform curriculum for the field experience.

4. **Aisha Dickerson**, Adjunct Faculty – Dr. Dickerson is currently the PI for a project funded by the NIH/NIMHD that aims to determine the associations between ambient air exposures, psychosocial stressors attributed to sociodemographic disparities, and overall cardiovascular health recorded in six leading national prospective cohort studies. As she works on this project, Dr. Dickerson is able to share her knowledge of environmental health and environmental epidemiology with her students as an instructor for the required course GPH 722 Environmental Health.

5. **Jennifer Makelarski**, Adjunct Faculty – Dr. Makelarski worked for many years as a director of epidemiology and research training where she oversaw research and training efforts including funding proposals, study design, protocol development and implementation, and statistical analysis; mentored fellows and medical, graduate and college students on research projects. She is using this expertise to redesign GPPH epidemiology courses and provide instruction for epidemiology and biostatistics courses.

4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.

Example 1

Carol Ewan Whyte - Dr. Carol Ewan Whyte, Assistant Director of Research and Service, is working on a recently funded research project that will conduct nutritional assessment of older adults living in long-term care facilities in Maine to test the efficacy and accuracy of a validated

tool. For this project, three MPH students along with students from several different disciplines and UNE colleges (medical, dental, nutrition, and pharmacy) will work as part of an interprofessional team to conduct research activities such as data collection, data management, data analysis, and reporting. This project, *Nutritional Assessment of Maine's Elders – A Look Using a Validated Tool: The NAME Study*, was funded by UNE's new Center for Excellence in Aging and Health.

Details of the opportunity shared with students can be found at:

http://success.une.edu/mph_opportunities/paid-research-opportunity-graduate-research-assistants-needed-urgently/

Example 2

Jennifer Gunderman - Ms. Gunderman works closely with MPH students to introduce them to interprofessional education as part of a grant funded by HRSA through the Center for Excellence in Health Innovation. As part of this grant, MPH students are trained alongside students from other disciplines and UNE colleges at a rural federally qualified heath center in Maine. They learn the skills needed for team-based care, the application of the social determinants of health to clinical care, oral health knowledge, health literacy, and shared decision making with patients.

Details of the related opportunities shared with students can be found at:

http://success.une.edu/mph_opportunities/une-mph-student-research-assistant/

http://success.une.edu/mph_opportunities/graduate-research-assistants-needed-immediately/

Example 3

Titilola Balogun - Dr. Balogun works with MPH students on research projects. One funded project, *Adolescent Health in Maine: A Needs Assessment,* aims to identify trends and correlate mental health symptoms, sexually transmitted disease, sexual behavior, and substance use among high school students in Maine from 2013 – 2017. An MPH student currently works with Dr. Balogun on this project as a Graduate Research Assistant. The student learned data management skills, how to analyze secondary data, and scholarly writing skills, and presented a poster at the Maine Public Health Association (MPHA) annual conference in Augusta, ME in October, 2018. This project was funded by the UNE mini-grant program. More information on this and other UNE presentations can be found at:

https://vision.une.edu/une-online-graduate-programs-public-health-mpha-2018/

5) Describe the role of research and scholarly activity in decisions about faculty advancement.

Within CGPS, the traditional academic reappointment, promotion and tenure (RPT) standards are not applied. Faculty do not advance along any of the traditional ladders. However, the traditional standards serve as guidelines for assessing teaching, scholarly work, and service to evaluate faculty competence.

The evaluation of faculty involves the following five areas: course preparation, feedback and assessment, teaching strategies, faculty/professional development, and scholarship and service. GPPH expects that all faculty will meet all baseline components and will work to develop a skillset that benefits both the faculty and the program. The scholarship and service criterion and evaluation categories are shown below:

Criterion 5: Scholarship and Service

We believe in a practitioner- scholar faculty model. This model values the knowledge and skills that the faculty brings from their workplace.

We acknowledge that most students in CGPS are working adults for whom the capacity to build a professional network and develop skills with immediate utility in their field were central to their choice of degree and institution.

Baseline	**Effective** *(In addition to baseline components)*	**Exemplary** *(In addition to baseline and effective components)*
☐Holds specific conferred graduate degrees stipulated by CGPS programs. In most cases, a terminal degree is preferred if not required. ☐Provides and updates professional role, affiliations and other information for University website.	☐Attends professional organization offerings/continuing education credits or community service specific to program. ☐Serves as advisor to students on topics of career development and best practice.	May be engaged in: • ☐publishing and /or presenting in industry specific forums • ☐service on professional boards • ☐Journal reviewing • ☐University/College committee work

Primary faculty are reviewed annually per the UNE Employee Handbook, which, in turn, informs decisions regarding merit-based salary increases and retention. Primary faculty are evaluated on their involvement in scholarly activities during their annual review, and share their goals related to research and scholarship with the Program Director during these evaluation meetings.

A college-wide system for annual review of adjunct faculty is in place and serves as a formal way to gather information about performance. Refer to the faculty development tool (ERF E4-2) for details. The Program Director shares observations and assessments with the faculty member and uses all data in decisions regarding retention of the faculty member and future assignments. As shown in the Faculty Selection Guide (ERF E4-3), GPPH considers current presentations and peer-reviewed publications when selecting its faculty to ensure adjunct faculty remain current in the field through research and scholarly activities. SMEs, who develop and redesign courses, are selected from faculty who have extensive real-world knowledge evidenced by current scholarly work in the field.

6) Select at least three of the measures that are meaningful to the program and demonstrate its success in research and scholarly activities. Provide a target for each measure and data from the last three years in the format of Template E4-1. In addition to at least three from the list that follows, the program may add measures that are significant to its own mission and context.

Template E4-1. Outcome Measures for Faculty Research and Scholarly Activities[1]				
Outcome Measure[2]	**Target**	**Year 1 2015-2016**	**Year 2 2016-2017**	**Year 3 2017-2018**
Percentage of total faculty participating in research activities	50	50	67	71
Number of articles published in peer-reviewed journals	20	40	31	18[3]
Number of presentations at professional meetings	30	78	32	35

*1 – List of research and scholarly work included as **ERF4-1.***

2 – Outcome measures reflect activities of the total faculty (primary and adjuncts).

3 - Number of manuscripts under review=8

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

With a scholar-practitioner model, GPPH faculty stay current in their field through scholarly activities and bring this knowledge into the instruction provided to the students. This enriches the curricula and allows the program to graduate students who are exposed to the most current knowledge and best practices in the field of public health. Faculty are located across the country and globally, so their work allows GPPH to effectively train a diverse student population. GPPH also encourages students to take part in research. With many faculty being active researchers, students are able to take part in research activities and apply the skills learned in their courses to real-life situations.

Since GPPH adjunct faculty are employed outside of academia, GPPH places more emphasis on teaching and work experience rather than traditional academic research. Nevertheless, both primary and adjunct faculty recognize the important part research plays in staying current in the field and stay involved in many research and scholarly activities.

Weaknesses:

As an online program, connecting faculty with others conducting similar or complementary research, and connecting students with faculty conducting research and other scholarly activities is a challenge.

Plans:

GPPH is working with the other programs within CGPS to implement a digital platform that allows sharing of ideas at a level not currently possible by the current system. This platform, Portfolium, is under contract negotiation with ITS; it is expected to be available in 2019. In the meantime, the Assistant Director of Research and Service collects opportunities then shares them with students on a dedicated webpage. GPPH anticipates that this new digital platform will address many aspects of this challenge and further increase the number of faculty-student collaborations.

E5. Faculty Extramural Service

The program defines expectations regarding faculty extramural service activity. Participation in internal university committees is not within the definition of this section. Service as described here refers to contributions of professional expertise to the community, including professional practice. It is an explicit activity undertaken for the benefit of the greater society, over and beyond what is accomplished through instruction and research.

As many faculty as possible are actively engaged with the community through communication, collaboration, consultation, provision of technical assistance and other means of sharing the program's professional knowledge and skills. While these activities may generate revenue, the value of faculty service is not measured in financial terms.

1) Describe the program's definition and expectations regarding faculty extramural service activity. Explain how these relate/compare to university definitions and expectations.

   The University Faculty Handbook clearly identifies service as part of the evaluation criteria in each faculty category, including non-tenure and adjunct faculty positions. The 2018 Faculty Handbook can be found at the following site: https://www.une.edu/sites/default/files/une_faculty_handbook_revised-january2018_april2018_aug2018.pdf

   While the University defines service in the traditional academic sense of activities devoted to the benefit of the institution, GPPH expands that definition to include involvement with, and service to, the community. Serving the community by increasing the health and well-being of its members is a core part of GPPH's mission. Although involvement in service is not a condition of employment, it may be a preferential factor in decisions around faculty assignments. Primary faculty and adjunct faculty are encouraged to be involved in professional and community service, and participate in a wide range of activities within their communities.

2) Describe available university and program support for extramural service activities.

   GPPH works with the larger university to form both formal and informal collaborations that allow faculty and students to become directly involved in service.

   Formal Agreements – For example, a formal agreement was established between UNE's Global Health Initiative with the University of Cape Coast, Ghana, to create the Ghana Health Partnership. The partnership between Ghana Health Service and the Ghana Mission has been ongoing since 2011, and continues to provide service, research, and training opportunities for public health students and faculty at UNE.

   CGPS administration fully supports GPPH faculty participation in extramural service activities. As GPPH works with community partners to develop opportunities for service, faculty is able to take time to participate in service activities. One such example is a recent opportunity in which primary faculty, students, SSS, marketing, and enrollment teams from CGPS worked together for an afternoon to help the organization, Partners for World Health, pack containers with medical supplies that were shipped to Nigeria and other locations requiring these valuable supplies. Faculty and staff were encouraged to participate and allowed to take time off from regular work to complete this very important service event.

   More information on this event can be found here: https://vision.une.edu/volunteer-week-challenge-winter-2017/

3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.

- Carol Ewan Whyte, Assistant Director of Research and Service, serves on the Portland Public Library Health Advisory Board. As a member of this advisory board, Dr. Ewan Whyte provides input for a grant to the library from the NIH/National Network of Libraries that is working with immigrants, refugees, the homeless population, and teens to help them identify appropriate, trustworthy medical information on the internet, and improve health education among these vulnerable populations. She is able to use information gathered from this work to help in her instruction in GPH 721 Foundations of Maternal and Child Health where a module is dedicated to adolescent health.

- Jennifer Gunderman, Adjunct Faculty – *Carry the Future*. Ms. Gunderman serves as the Global Strategy Officer and is actively involved in this association which provides safe and appropriate equipment and supplies to families fleeing to Greece. Her work with this organization is directly related to her course development and instruction in GPH 721 Foundations of Maternal and Child Health as she includes this information in her course lessons. Information includes challenges and lessons learned in working with vulnerable populations and emerging maternal health issues.

- Kathleen Welch, Adjunct Faculty – Dr. Welch is a member of the Permanent Advisory Committee for developing the LA Alzheimer's State Plan for Louisiana. This plan has a focus on emergency preparedness for those with dementia. Along with membership on this committee, Dr. Welch is the assigned advocate/ambassador for Representative Cedric Richmond of Louisiana and is instrumental in passing legislation for the prevention and treatment of Alzheimer's, and just recently authored a children's book on the topic titled, *Sometimes Even Elephants Forget*. Dr. Welch brings the expertise gained from these highly visible positions to her teaching as an instructor for GPH 709 Public Health Emergency Preparedness.

- Nang Tin Maung, Program Director – Dr. Tin Maung serves as a member of the Steering Committee for the Planetary Health Alliance, a new initiative involving several universities and interest groups working to determine the effect of climate change on human and animal health and the interplay of both. As a global health expert, she is able to use the experiences gained from this service activity to help her students understand the effect of the changing global climate on public health outcomes. She also serves as a board member of a non-profit organization, Worcester Refugee Assistance Project (www.worcesterrefugees.org).

- Titilola Balogun, Assistant Director of Public Health Practice – Dr. Balogun is a reviewer for the Journal of Tropical Pediatrics. Her academic writing experience and skills are used to help students develop their writing skills and write quality research papers.

4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.

   Non-UNE adjunct faculty are not included in these examples. N= 8 (Primary Faculty and Jen Gunderman, who is a lecturer at UNE in addition to her role within GPPH)

   - Community Service Week 2017
     - December 2017 was designated as a month of giving back. During this month, students and faculty were encouraged to find a community organization in their area and provide service. In Portland, Maine, program faculty, student, and support teams from CGPS worked together to provide service to a local organization. http://success.une.edu/mph_opportunities/gpph-volunteer-week-contest-2017-december-4th-18th/
       - Number of faculty participants – 7/8
       - Number of student participants – 8

- Carry the Future
    - Due to the recent civil unrest in Syria, there are many families escaping to Greece. Ms. Gunderman works with the group Carry the Future to provide items needed by families to transport their infants and young children safely. Students are encouraged to participate and have been involved in the project. http://success.une.edu/mph_opportunities/international-volunteer-opportunity-carry-the-future/
        - Number of faculty participants – 1/8
        - Number of student participants – 0

- Public Health Emergency Preparedness Training 2017
    - Each year, UNE works with local community partners to provide disaster preparedness training. During the training, participants are also able to receive the influenza vaccine. Each year, GPPH primary faculty (Drs. Balogun and Ewan Whyte) publicize the event to public health students and work with the Center for Excellence in Health Innovation to operationalize the events. Ms. Gunderman is actively involved in the event planning and execution. Public health students are encouraged and participate at different stations during the event alongside primary faculty. http://success.une.edu/mph_opportunities/public-health-emergency-preparedness-point-of-dispensing-training-students-urgently-needed/
        - Number of faculty participants – 3/8
        - Number of student participants – 3

5) Select at least three of the indicators that are meaningful to the program and relate to service. Describe the program's approach and progress over the last three years for each of the chosen indicators. In addition to at least three from the list that follows, the program may add indicators that are significant to its own mission and context.

Percent of faculty participating in extramural service activities

All GPPH faculty (primary and adjunct) are encouraged to participate in extramural service activities. Faculty have the full support of GPPH and CGPS, and can take time off from work to complete community or professional service activities. Among the seven primary faculty, five or 71% are currently actively involved in service activities. Over 60% of adjunct faculty currently participate in service activities. The Assistant Director of Research and Service will continue to work with faculty to maintain our high commitment to extramural service.

Number of faculty-student service collaborations

With faculty and students located in diverse geographical locations, GPPH's Assistant Director of Research and Service works to connect faculty with students in their locations who may be interested in working with them on service activities. This work has its inherent challenges but progress is being made with newly implemented processes. These include faculty or community partners sharing information about opportunities with the Assistant Director of Research and Service who, in turn, shares the opportunities with students via the established webpage on the student portal, or through targeted emails for those living in specific geographic areas. Faculty who are teaching a course also share opportunities directly with students through announcements in Blackboard. Additionally, the Assistant Director of Research and Service actively seeks to identify appropriate service opportunities that are shared, and acts as the resource to connect faculty with interested students. With these processes, GPPH anticipates an increase in the number of faculty-student service collaborations.

Number of community-based service projects

Many of GPPH faculty work on community-based service projects as part of their professional life, and are encouraged to continue these activities. These opportunities are identified by numerous means that include community partners, faculty, students, and the Assistant Director of Research and Service who also works to share these opportunities with faculty and encourage their

participation. With these processes in place, GPPH anticipates an increase in the number of community-based service projects.

The table below provides information on these selected indicators for the period of 2015-2018.

Service Indicators for the Period 2015-2018

	2015-2016	**2016-2017**	**2017-2018**
Percent faculty participating in extramural service activities*****	49%	60%	73%
Number of faculty-student service collaborations	3	4	5
Number of community-based service projects by faculty*	88	60	65

***Includes both primary and adjunct faculty*

Details about faculty (primary and adjunct) community and professional service activities for the period of 2015-2018, can be found in ERF E5-1.

6) Describe the role of service in decisions about faculty advancement.

GPPH is based upon a scholar-practitioner faculty model and does not participate in the traditional RPT process. However, it is important to note that GPPH encourages and supports faculty involvement in service activities.

As scholar practitioners, GPPH adjunct faculty understand the importance of giving back to their community and are involved in numerous service activities. They provide significant expertise to numerous community and state-wide agencies and professional organizations. A list of faculty service activities is included as ERF E5-1.

Through e-mail communications and regular reminders at faculty meetings, faculty are encouraged to share service opportunities with the Assistant Director of Research and Service and to involve students whenever possible. The Assistant Director of Research and Service also works to identify and share relevant service opportunities from across the country and the world with faculty. The Program Director, as part of the annual evaluation, solicits information on involvement in service activities from faculty. This information is included in decisions around faculty retention.

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
Although GPPH does not practice a traditional RPT process to incorporate service expectations into faculty advancement decisions, it encourages and supports both primary and adjunct faculty to participate in extramural service activities. Primary and adjunct faculty actively engage in extramural service in their local and professional activities.

Weaknesses:
Not Applicable

Plans:
Not Applicable

F1. Community Involvement in Program Evaluation and Assessment

The program engages constituents, including community stakeholders, alumni, employers and other relevant community partners. Stakeholders may include professionals in sectors other than health (eg, attorneys, architects, parks and recreation personnel).

Specifically, the program ensures that constituents provide regular feedback on its student outcomes, curriculum and overall planning processes, including the self-study process.

1) Describe any formal structures for constituent input (eg, community advisory board, alumni association, etc.). List members and/or officers as applicable, with their credentials and professional affiliations.

GPPH has two committees as formal structures for constituent input. They are:

1) Advisory Committee, which is charged with guiding and assisting GPPH administration by making recommendations that reflect the needs of industry and the community.

2) Curriculum Committee, which is charged with maintaining the quality, integrity, and relevance of CGPS educational programs, and providing guidance and oversight to ensure that all curricula are sound, comprehensive, and responsive to the evolving needs of students, employers, and the community.

Community (i.e., non-primary faculty or student) members of the Advisory Committee are:

- Rebecca Arsenault, Retired President and CEO of Franklin Community Health and Adjunct Faculty, UNE
- Emily Bartlett, MPH ’18, Graduate Research Assistant, UNE Primary Care Training and Enhancement (PCTE) grant
- Nélida R. Berke, MPH, Minority Health Program Coordinator, Portland Public Health
- Rosalia Guerrero, MBA, Manager, Community Health Worker Training Program at University of Texas School of Public Health
- Christina Holt, MD, Research Director, Department of Family Medicine, Maine Medical Center
- Ivan Most, ScD, PE, Adjunct Professor of Engineering, University of Southern Maine and Adjunct Faculty of Environmental and Occupational Health, UNE
- Brittany Roy, MPH ’16, Senior Epidemiology Associate at Alkermes
- Toho Soma, MPH, Interim Director of Center for Excellence in Health Innovation, UNE

Community (i.e., non-primary faculty or student) members of the Curriculum Committee are:

- Anne Hunt, ScD, University of North Carolina, Center for Health Promotion and Disease Prevention, Chapel Hill, NC, Adjunct Faculty, UNE
- Franchesca McNeil ’15, ICO4MCH Coordinator, Robeson County Health Department
- Patricia Poteat, EdD, Senior Lecturer, Department of Service Systems, University of Rochester
- Deborah Shields, JD, MPH, Staff Attorney and Educator, Justice Research Institute, Jamaica Plains, MA

- Kenyatta Stephens, PhD, Senior Epidemiologist, Carter Consulting, Atlanta, GA
- Kathleen Welch, PhD, Adjunct Professor in Global Community Health, Tulane University
- Jamie Wren, MPH '15, Research Associate, Margaret Chase Smith Policy Center, University of Maine

2) Describe how the program engages external constituents in regular assessment of the content and currency of public health curricula and their relevance to current practice and future directions.

Advisory Committee and Curriculum Committee meetings are held two times a year. In these meetings, GPPH faculty, students, alumni and external constituents discuss the curriculum, policies, and operations of GPPH to ensure their relevance to current practice and future directions.

In addition, GPPH regularly solicits input from preceptors, adjunct faculty and employers, who are active public health practitioners. Feedback from external constituents are regularly reviewed and taken into consideration when making programmatic decisions. For example, perception of workforce development needs are used, in conjunction with community conversations described in section F, to inform workforce development offerings. Employer and alumni perceptions of competency attainment are discussed with the Curriculum Committee to guide the conversations regarding GPPH curriculum.

Survey of Preceptors (ERF F1-1)
At the end of each semester, GPPH sends out a survey to all preceptors. In this survey, Preceptors are asked a number of questions including:

1) judgement of the student's work (on a scale of 1 to 5)
2) judgement of the student's competency attainment (On a scale of 1 to 4)
3) recommendations for the program
4) perception of workforce development needs in the field of public health

The survey tools and results from the most recent surveys (Summer 2018 semester) are included in ERF F1-1.

Survey of Adjunct Faculty (ERF F1-2)
GPPH adjunct faculty are active practitioners of public health; they have the experience and knowledge to assess student outcomes and curriculum as they relate to successful employment in the field of public health. Many of them also hold leadership positions in public health agencies, and can provide feedback on program operations. Adjunct faculty are surveyed on a yearly basis for their feedback. The adjunct faculty survey tool and results for 2018 are included in ERF F1-2.

Survey of Employers (ERF F1-3)
To ensure that GPPH adequately prepares graduates for the workforce, employers are asked to rate their employee's competency attainment. The employer survey tools and results are included in ERF F1-3.

3) Describe how the program's external partners contribute to the ongoing operations of the program. At a minimum, this discussion should include community engagement in the following:

a) Development of the vision, mission, values, goals and evaluation measures

To ensure that the GPPH vision, mission, and objectives align with the vision of CGPS and its students, GPPH engaged relevant stakeholders to review and update the vision, mission and goals in Fall 2016. The timeline associated with development of current mission and goals is as follows:

- **10/27/16** - GPPH Curriculum Committee Meeting held. Current GPPH mission and objectives were reviewed by GPPH primary faculty and committee members, and discussions focused on important characteristics that should be reflected in the mission and goals.

- **10/28/16 – 11/21/16** - Several meetings with GPPH primary faculty were held to create a draft mission and objectives.

- **11/15/16** – CGPS Leadership team was sent a draft of proposed mission/objectives for review and input.

- **11/23/16** – Advisory Committee members were sent a draft of revised mission/objectives.

- **11/28/16** – Advisory Committee Meeting – Discussed proposed mission/objectives.

- **12/2/16** – Final input of mission/goals due from Committee and Advisory committee members.

- **12/6/16** – Proposed mission/goals sent to faculty for input.

- **12/16/16** – Proposed mission/goals sent to CGPS Leadership team (Dean and Directors) for further review and input.

- **1/10/17** – Final GPPH mission/objectives sent to faculty and students

To comply with the 2016 CEPH criteria, some of the objectives/goals were modified with extensive input from GPPH primary faculty. The modifications were shared with the Advisory Committee for discussion during the April 2018 meeting (ERF F1-4).

b) Development of the self-study document

GPPH primary faculty collaborated to develop a draft of the self-study. Following the consultation meeting in January 2018, the draft, as well as comments from CEPH staff, was shared with Advisory Committee and Curriculum Committee members. Another draft was developed in June 2018 and submitted to CEPH. GPPH solicited volunteers through a monthly newsletter (refer to the letter from the program in ERF F1-5 June 2018 newsletter). Several student and adjunct faculty volunteers reviewed the self-study document and offered suggestions.

In September 2018, the draft (edited with comments from the constituents above and CEPH) was made available to all interested parties for comments through https://online.une.edu/public-health/third-party-ceph-comments/ . All stakeholders are notified about the availability through the September newsletter (ERF F1-6)

c) Assessment of changing practice and research needs

Due to the scholar-practitioner model, GPPH adjunct faculty and SMEs are active practitioners of public health and can inform the program regarding changing practice and research needs. These needs are discussed in course development or course review meetings as well as in the committee meetings described above. Market research analyses performed by the CGPS Research and Strategy team also inform the program of changing landscapes in public health and higher education in general.

d) Assessment of program graduates' ability to perform competencies in an employment setting

GPPH developed a survey for employers of GPPH graduates in October 2017. When alumni are surveyed regarding their employment status (one year after graduation), they are asked for the email address of their supervisors. This information is optional, but if an email address is entered, the supervisor is contacted with the employer survey. In the employer survey, employers/supervisors are asked to anonymously rate the GPPH graduate's ability to perform a set of public health competencies in the workplace. See ERF F1-3 for the employer survey tool and results.

4) Provide documentation (eg, minutes, notes, committee reports, etc.) of external contribution in at least two of the areas noted in documentation request 3.

a) Development of the vision, mission, values, goals and evaluation measures
See ERF F1-7 for committee meeting minutes related to vision, mission, values and goals

a) Assessment of program graduates' ability to perform competencies in an employment setting
See ERF F1-3 for the employer survey tool and results. This survey is designed to assess graduates' ability to perform competencies in an employment setting

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH is committed to engaging relevant stakeholders in order to collect feedback regarding student outcomes, curriculum, and program operations. Formal committees and regularly scheduled surveys facilitate this process.

Weaknesses:

The employer survey is new and recently began in the 2018-2019 academic year. As an online program with graduates spread across the US, it is challenging to collect feedback from employers (i.e., employers may be hesitant to provide "anonymous" feedback if they are only working with one UNE graduate). So far, only about twenty alumni (~10%) have given us permission and employer contact information, and thirteen employers, including the Maine Medical Center, have responded to the survey.

Plans:

GPPH will continue to communicate the value and anonymity of the employer survey to students in an effort to obtain more permission and employer contact information from alumni.

F2. Student Involvement in Community and Professional Service

Community and professional service opportunities, in addition to those used to satisfy Criterion D4, are available to all students. Experiences should help students to gain an understanding of the contexts in which public health work is performed outside of an academic setting and the importance of learning and contributing to professional advancement in the field.

1) Describe how students are introduced to service, community engagement and professional development activities and how they are encouraged to participate.

GPPH students are introduced to the importance of participation in service or volunteer activities and community engagement during an introductory call with their AAs. All new students in the program receive this introductory call during the second session of their first semester. During this call, the AA explains the importance of engagement within one's community and encourages new students to consider becoming involved in service and volunteer activities. A copy of the talking points used by the AAs for this introductory call is included as (ERF F2-1).

Follow-up calls are conducted with students by AAs throughout the time the student is enrolled in the program. Each call is used as an opportunity to reinforce the importance of service and community engagement as a public health professional.

In the GPPH mandatory non-credit workshop that all new students take in the second semester of their program, service and community engagement are stressed as ways to learn and grow, as well as being a part of the spirit of public health. This workshop, the Professional Preparation Workshop, was launched on June 27, 2018. The syllabus of this workshop is included as ERF F2-2.

To support student participation in these activities, several processes are in place:

1. Since January 2017, all opportunities are shared with students via a centralized electronic system: https://success.une.edu/mph-opportunities/ . All opportunities, including service, community engagement, and professional development, are vetted for relevance to the public health students' needs and development and then posted on this webpage. All students are made aware of the webpage as a useful resource for finding opportunities as part of their orientation calls and through periodic reminder emails from their SSS.
2. In addition to posting the opportunities on this webpage, if an opportunity is for students from specific geographical regions, the Assistant Director of Research and Service works with the team of SSS to send targeted emails to students living in these areas. To date, 59 opportunities related to service, community engagement, and professional development have been posted on this webpage. The webpage is maintained by the Assistant Director of Research and Service who also works closely with the CGPS's marketing team to get information about opportunities to our students.
3. GPPH also includes information about opportunities in a monthly newsletter, *GPPH News*, which is sent to all current students, recent graduates, and faculty. There is a dedicated column for public health opportunities in the monthly newsletter and this space is used to feature upcoming events or to remind students of the importance of service. Additionally, faculty often share these opportunities with their students in class as part of the weekly announcements which increases the likelihood of the opportunities being seen. GPPH newsletters published in 2018 to date are included in ERF F2-3.
4. Recognizing that our students are adult learners often with full-time jobs, families, and limited time, GPPH also aims to make engagement in service and community activities desirable and fun. With this approach, more students may participate in activities and learn the intrinsic value of being engaged with their community and advancing their field. GPPH endeavors to help

students make the connection between the academic knowledge they gain and the application of this knowledge to real-life situations through service and community engagement. For example, in 2017, GPPH conducted a volunteer week contest where students and faculty were encouraged to volunteer, post photos of themselves engaged in the activities, and enter for a chance to win a textbook. This contest was open to all students. In Maine, the GPPH team participated in a community service project together to celebrate the end of the week's activities. GPPH plans to hold a volunteer week annually; the next one will be in December, 2018.

5. Professional service activities are among those shared via the dedicated webpage and are deployed to specific areas as needed. To increase participation in professional development activities, the GPPH mini-grant can be used to cover the costs of attending conferences, conducting research, and other scholarly activities as part of the students' professional development. All students are told about the mini-grant program through several means (AAs, SSS, GPPH monthly newsletter, webpage), and are encouraged to identify opportunities that match their needs and apply for the available funds.
6. GPPH's Faculty Liaison, Ms. Gunderman, worked with the student leaders of the APHA-SA to develop *Fireside Chats*. As part of this series, which was started in 2017, practicing public health professionals are invited to the meetings to discuss their careers and the skills used on a daily basis to effectively do their jobs. These professionals not only act as resources for students to learn about the different focus areas within the public health field but also as examples for engaging in professional services as public health professionals.

2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

GPPH shares opportunities and encourages students to participate in national organizations such as the APHA and other state or local organizations. For example, this post was widely shared with students to encourage representation in the 2017 APHA meeting: http://success.une.edu/mph_opportunities/apha-2017-annual-meeting-and- expo/

The following examples illustrate professional and community service opportunities in which public health students have participated in the last three years.

APHA Student Participation

GPPH students are active in the national APHA chapter. They have been named a 2016 Leadership Challenge APHA Annual Meeting Scholarship recipient, given oral presentations at APHA 2017, and been selected as Co-Chair of the National APHA-SA. GPPH students have also served as NYC affiliate representatives to the governing council, as Region II representatives to the Council of Affiliates serving NYC, NYS, NJ, and Puerto Rico, and as Student Assembly Programming Co-Chair. In 2018, a now recent graduate was named Co-Chair of the national APHA-SA.

- Number of students/alumni involved in national leadership – 3
- Number of students/alumni presenting in 2016 – 1
- Number of students/alumni presenting in 2017 – 5

MPHA Student Participation

GPPH students and recent graduates presented at MPHA's 2017 annual conference held in October. One presentation was titled: "One of UNE's Efforts to Increase the Number of Rural Health Providers", and showcased the work of one student as part of the interprofessional team working on the Rural Health Immersion (RHI) program funded by a HRSA grant to the Center for Excellence in Health Innovation.

Information about this conference that was shared with students can be found here:

http://success.une.edu/mph_opportunities/mpha-2017-call-for-abstracts-and-early-bird-registration/

- Number of students presenting in 2017 – 3

Similarly, in 2018, GPPH shared an opportunity to attend MPHA: https://success.une.edu/mph_opportunities/mpha-2018-early-bird-registration-call-for-abstracts-we-can-help-you-get-there/. A group of three students (one current and two very recent graduates) presented alongside GPPH primary faculty, Dr. Titilola Balogun and research partners from CEHI and the Portland Public Health Department at MPHA 2018. More information on the MPHA 2018 student presentations, including the titles of their presentations, can be found here: https://vision.une.edu/une-online-graduate-programs-public-health-mpha-2018/

- Number of students presenting in 2018 – 3

PHANYC Student Participation

Between 2016 and 2017, a GPPH student served the Public Health Association of New York City (PHANYC) in several capacities. She created a "Think Tank" for the Public Health Association of New York City, served as President-Elect and Social Media Specialist Volunteer, and gave an oral presentation at the 2017 PHANYC Annual Meeting and Student Symposium. The presentation was titled, *ACA: A Game Changer for Women*.

Information on a PHANYC event shared with students can be found here: http://success.une.edu/mph_opportunities/phanyc-programming-think-tank-919/

- Number of students – 1

UNE Health Professions Expo 2018

A recent GPPH graduate represented the field of public health as a panelist at UNE's First Annual Health Professions Expo held on March 10, 2018. She fielded questions from local and regional high school students, recent college graduates, and other persons contemplating pursuing a career in the field of public health. This event was also attended by GPPH primary faculty who gave a presentation on the role of public health in addressing the issues in the case study.

- Number of students/alumni – 1

Examples of Community Service Participation

Hurricane Harvey CASPER opportunity in Texas 2017.

After Hurricane Harvey, Harris County Public Health (HCPH) conducted a community assessment for public health emergency response (CASPER) in selected neighborhoods of Aldine, TX. GPPH students were able to work as part of a team to administer surveys to victims to identify needs. http://success.une.edu/mph_opportunities/hurricane-harvey-casper-volunteer- opportunity/

- Number of students - 1

Due to our established partnership with the HCPH in Texas, in September 2018, two GPPH students took part in the 2018 CASPER exercise. http://success.une.edu/mph_opportunities/volunteer-casper-opportunity-aldine-tx-september-8-2018/

- Number of students - 2

Public Health Emergency Preparedness Training in Maine.

In Fall 2016 and 2017, the University of New England Center for Excellence in Health Innovation partnered with UNE colleges, including the CGPS, and several area public health agencies to provide a Point of Dispensing (POD) public health emergency preparedness training for students

to learn about public health. The POD exercise is a test to activate Maine's strategic national stockpile to simulate a bioterrorism response.

GPPH students were recruited, and worked alongside students from nursing, pharmacy, and medicine to staff each event. Student volunteers worked alongside the Maine CDC, Portland Public Health, Cities Readiness Initiative, and the Maine Medical Reserve Corp to dispense "mock" medication and administer flu vaccines as part of the simulated scenario**.** GPPH primary faculty also participated in this event. http://success.une.edu/mph_opportunities/public-health-emergency-preparedness-point- of-dispensing-training-students-urgently-needed/

- Number of students 2016 – 3
- Number of students 2017 – 3

UNE Day of Service 2017 and 2018 in Maine.

On September 23, 2017, UNE held its third Annual Day of Service. The Annual Day of Service honors UNE's core values of service and civic engagement. GPPH students were able to work with other members of UNE in their local communities to lend a hand. Most activities involved physical improvements and service to a variety of organizations and the university provided participants with transportation, meals, and materials needed to serve. http://success.une.edu/mph_opportunities/une-day-of-service-september-23-2017/

Students also participated in the 2018 Day of Service held this past September.

- Number of students 2017 – 3
- Number of students 2018 – 4

Community Health Fair in Maine 2017 and 2018.

UNE, in partnership with the Portland Public Library, hosted the second annual Community Health Fair in October 2017. The Health Fair was free and open to the public; it provided health education, screenings, and outreach. Students from UNE, including GPPH students, shared their experiences and answered general questions about their chosen field. http://success.une.edu/mph_opportunities/community-health-fair-october-3-2017/

Dr. Ewan Whyte and UNE continued to be involved in the Health Advisory Board at the library and helped in planning the third annual Community Health Fair that was held in October, 2018.

- Number of students 2017 – 2
- Number of students 2018 – 1

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH currently employs several processes to introduce geographically-dispersed students to the importance of service and community engagement. These approaches have allowed students the opportunity to become involved in activities that allow them to apply their public health knowledge to real world situations. The program continues to conceive of ways to improve participation in these activities by busy students and build a stronger mindset among all students.

Weaknesses:

Collecting data on participation in the shared opportunities is a challenge due to the geographically-dispersed nature of students. Another weakness is that while many students would like to do more service, they have limited time as working professionals with family responsibilities.

Plans:
In an effort to provide a tangible incentive for students to become more involved in service and professional engagement, GPPH will offer a Service Cord that can be earned by students as they complete the program. Students who meet established criteria (e.g. number of hours and accountability) will receive a service cord at graduation. This program will be implemented in the 2018-2019 academic year. In anticipation of the launch of this program, in October 2018, students completed a brief survey to determine the current level of service being done. They were asked to provide the approximate number of hours they have volunteered their time in professional and community service activities since starting the program. We received 63 responses. The results of this survey are summarized in the table below. These results, which provide a snapshot of the current level of community and professional engagement, will become our baseline data and used to help determine the impact of our work over time. The survey responses are included in ERF F2-4.

Additionally, our students were also provided with the link to one of the largest online database of volunteering opportunities, and encouraged to identify organizations in their geographic locations that work on causes of interest to them;
https://success.une.edu/mph_opportunities/volunteermatch-finding-opportunities-to-give-back/
It is hoped that by knowing where to find opportunities close to home, those students who are currently not engaged in service will consider giving back.

Moving forward, as part of the service cord initiative, students will complete brief bi-annual surveys to provide timely information on their professional and community service activities. These surveys will not only provide data on current service activities but also create the opportunity for the program to further encourage the mindset of activism. Data from the service cord initiative will be included in the GPPH annual service report.

Number of service hours	Community Service	Professional Service
None	24	28
1-4	7	8
5-9	7	6
10-19	7	5
20-29	7	4
30-39	3	0
40-50	2	2
>50	2	7
Definitions	***Community Service**: Any volunteer activity done within the community not related to public health*	***Professional Service**: Work done within the field of public health that allows the sharing of knowledge and skills, and is not paid employment. This includes work with public or private organizations on issues related to public health, serving as board members and officers of professional organizations like UNE APHA-SA, APHA-SA, and involvement with local public health advisory boards.*

F3. Assessment of the Community's Professional Development Needs

The program periodically assesses the professional development needs of individuals currently serving public health functions in its self-defined priority community or communities.

1) Define the program's professional community or communities of interest and the rationale for this choice.

   GPPH's professional community of interest is public health practitioners in the US and abroad. Public health employers, preceptors, and adjunct faculty who are active practitioners in the field of public health represent this community.

   As a 100% online college, GPPH students are located across the US and abroad necessitating that workforce development activities engage employers where students live and work. GPPH is located in Maine but only about 10% of its students live in the state. GPPH works closely with the major employers of our local graduates (local public health departments and Maine Medical Center, the state's largest employer of healthcare professionals). However, in order to ensure that the program is responsive to the professional development needs of the diverse communities represented by GPPH's student population, a broad focus is required to include the needs of the representatives above.

2) Describe how the program periodically assesses the professional development needs of its priority community or communities, and provide summary results of these assessments. Describe how often assessment occurs

   In order to ensure that GPPH offers programs that meet the needs of the community of interest, several approaches are employed:
   a. Public Health Leader Conversations are held annually with employers of public health professionals.
   b. Beginning in 2018, current faculty are asked annually, "In your work in the field, what workforce development needs do you see among public health professionals?"
   c. Beginning in Summer 2018, preceptors are asked at the end of each semester, "In your work in the field, what workforce development needs do you see among public health professionals?"

   Summary Results of Assessments

   Public Health Leader Conversations – Between December 2016 and April 2017, program faculty along with the CGPS's Research and Strategy team conducted one-on-one telephone conversations and an in-person session with local personnel currently involved in employing and supervising public health graduates in Maine. The purpose of these conversations was to gauge their knowledge of the public health landscape, emerging trends, and how well CGPS was preparing graduates to meet their identified current and future needs.

   From the 2017 conversations, it was determined that the program is meeting the needs of the workforce. Areas for improvement included the need for graduates who are competent in oral and written communication, knowledgeable of financial matters, and the changing role of the public health professional. Full documentation of the questions administered and findings are included in ERF F3-1.

   In 2018, we engaged public health leaders in a conversation once again, but sought participants outside of Maine. Professionals from New York and Louisiana were engaged and a conversation similar to that of 2017 was carried out. The purpose was to identify essential skills for success, to understand specific characteristics/competencies that are sought after during the hiring process, and to identify topics of interest for professional development events for staff.

Based on the 2018 conversations, technical skills were not emphasized as much as they were in 2017. Cultural competency/humility remained an area of interest, while community engagement, motivational interviewing, and the understanding of policy and advocacy were identified as critical skills. A summary of the questions and responses can be reviewed in ERF F3-1.

Interestingly, the 2018 faculty survey had "strong communication skills, presentation skills, writing in plain language" as workforce needs (ERF F3-3). Likewise, the preceptors identified "soft skills' such as communication, community engagement, understanding of social determinants of health as skills gaps/workforce development needs. Refer to ERF F3-2, preceptor surveys (Summer 2018) for full results.

Based on these results, the Assistant Director of Workforce Development is exploring workforce development offerings that focus on motivational interviewing and presentation/communication skills.

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

Due to GPPH's vast geographical reach, our ability to gauge professional development needs across many areas is enhanced. As we continue to conduct further public health leader conversations with professionals working in the US and abroad, we will be able to analyze public health trends and gaps from various geographical perspectives as well as from various industries doing public health work.

Weaknesses:

Although highlighted as a strength, the broadness of our community of interest also creates a few challenges to be managed. The varying gaps and trends according to region makes it difficult to determine which subject areas to focus on as we produce professional development events. The inability to address all concerns in an intentionally effective and timely way is another challenge due to our vast community.

Currently, workforce needs assessment activities are employer-centered. As students transition into the workforce, there is no protocol in place that encourages students to identify gaps in skills relevant to desired jobs. Through this assessment, students could be connected to resources designed to fill identified gaps in skill.

Plans:

GPPH plans to develop three workforce development trainings in the 2019 calendar year. Based on the assessments described above, GPPH will propose workforce development offerings that focus on motivational interviewing and presentation/communication skills. This proposal will be discussed at the Spring 2019 Advisory Committee meeting for input and approval. In order to avoid duplication of efforts, GPPH will also identify existing resources that align with expressed needs by collaborating with organizations that focus on public health professional development (e.g., New England Public Health Training Center). Such collaborations will broaden GPPH's resource pool, while presenting opportunities for co-development and cost-sharing.

To further bolster efforts directed towards meeting professional development needs, the Assistant Director of Workforce Development will invite students who are two semesters away from completing all coursework to discuss professional development needs. During the discussion, students will indicate their sector of interest and explore skill gaps related to that specific field. A professional development action plan (ERF F3-4) will be initiated and carried out until outlined goals are met. This collaboration with students is expected to progress beyond graduation. The professional development action plan activity will be implemented during the 2018-2019 academic year.

We will continue to establish ourselves as public health experts in a way that leads to being recognized by the broader community. For example, in August 2018, a partnership with Maine Center for Disease Control and Prevention's workforce program was formed. Based on a preliminary survey deployed by Maine CDC, employee-retention was an area in need of further investigation. Due to the limited resources of the agency to carry out comprehensive assessments, the expertise of the Assistant Director of Workforce Development was solicited to plan and conduct upcoming focus groups in 2019. Working with the CDC's Accreditation & Workforce Development Coordinator, a total of four focus groups will be held. The focus groups will assess employee satisfaction as it relates to workforce retention and serve as a preliminary step in identifying workforce needs at Maine CDC.

F4. Delivery of Professional Development Opportunities for the Workforce

The program advances public health by addressing the professional development needs of the current public health workforce, broadly defined, based on assessment activities described in Criterion F3. Professional development offerings can be for-credit or not-for-credit and can be one-time or sustained offerings.

1) Describe the program's process for developing and implementing professional development activities for the workforce and ensuring that these activities align with needs identified in Criterion F3.

   Professional development activities are designed in response to information gathered from GPPH's community of interest. In addition to this information, these activities are also informed by feedback from the Advisory Committee, faculty, alumni, community partners, and community members who approach the program with ideas perceived to be beneficial to the program.

   Once a need is identified, there are two major pathways to developing and implementing professional development activities:

   1. Should a new resource be needed to fill the identified gap, the Assistant Director of Workforce Development works with program administration to identify available SMEs who can develop the resource. With the wealth of expertise among the scholar-practitioner adjunct faculty, GPPH works to first identify available adjuncts with the relevant expertise. If the expertise is lacking among the adjunct faculty, GPPH reaches out to local, regional, and national experts in the field. Once identified, meetings are held where the SME is informed of the need, the required content, and deadline. Regular check-in meetings occur to answer questions and provide any additional information needed by the SME to ensure a high quality product is delivered to the program.

   2. If it is determined that a course offering is needed to fill an identified gap in the curriculum, the Associate Program Director and the Assistant Director of Workforce Development work together to identify required SMEs and facilitate work by the SME with the ID team to develop and implement the professional development activity or product.

   Once new professional development activities or products are developed, they are made available to the workforce via appropriate media – these may be in person or by electronic venues to reach the largest number of people within the public health workforce. As an online college with members of our community of interest located across the nation and globe, GPPH predominantly offers professional activities or products as webinars or as online courses, as these formats enable the college to archive the activity or product to make them available on demand for persons in different locations/time zones. The webinars are recorded and shared with all interested individuals.

2) Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (ie, individuals who are not faculty or students at the institution that houses the program).

   Grant writing webinar:
   With the current level of funding available for public health initiatives decreasing, it is very important that high quality grant proposals are produced if one is to be successful. From the community conversations held in 2017, this area was identified as being in need of improvement among public health professionals. Preceptors of students and other community partners, students, and alumni also shared this concern with the program. In response to these requests, a grant writing webinar was developed and offered in March 2018. Titled, "*Effective Grant Writing for Public Health Professionals*" the webinar was developed by Monae Raphael, a GPPH adjunct faculty member who currently works as a grant writer. It was well received with very positive

feedback (ERF F4-1). The number of community participants was over 20 and included people from six states and Canada. The recording of the video is available at: https://youtu.be/nhfnKb34ays.

Included with this recording is a survey that gives viewers the ability to give feedback and to suggest topics for future webinars for public health professionals. The plan is make this the first in a series of webinars that address related topics of importance to public health professionals as identified by GPPH's community of interest.

Details about the grant webinar development, deployment, attendees, evaluation results and next steps are included as ERF F4-1.

Financial management webinar:
Oftentimes, public health professionals are required to develop budgets and administer funds as part of their responsibilities. The need for financial management was another need identified through discussions with communities of interest and requested by community partners, faculty, students, and alumni. To help fill this identified gap, the "Fundamentals of Financial Management and Budgeting for Health Practitioners" webinar was developed by Rebecca Arsenault, a GPPH adjunct faculty member who has 30 years of experience in hospital administration. The webinar was launched on September 19, 2018 and was designed as a three-session series, with each part airing every two weeks until its completion. Subject areas included: organization goals, relevant terminology, types of budgets and processes, performance management, financial controls, budget variance analysis, and corrective action plans.

Participants were not required to attend all sessions, but were highly encouraged to do so. An average of 14 participants from six states attended all three sessions. A final report of the webinar is included in ERF F4-2.

Following its completion, the recording of sessions one, two, and three were made available on our MPH Page on YouTube. The links are:
https://www.youtube.com/watch?v=viVyG_zPEwE

https://www.youtube.com/watch?v=twWBf-BwfO8

https://www.youtube.com/watch?v=47KHaVgsuz4

3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths
As a 100% online program that utilizes current technologies, GPPH is able to develop strong relationships and hold meaningful conversations with its community of interest despite the geographical distance. GPPH faculty is able to work with diverse communities of interest which enables the program to help improve public health knowledge in various areas across the nation and the globe. GPPH's professional products and activities have a wide reach and benefit public health professionals who may not otherwise be able to obtain the knowledge necessary to improve their performance in the workforce.

Weaknesses
As GPPH continues to develop and disseminate educational programs, participation and engagement remain areas of concern. Similar to concerns outlined previously in criterion F3, the extreme broadness of our community of interest makes it difficult to create events that are relevant to every community member. Being intentionally specific as it pertains to content is crucial when considering relevance and appropriateness; however, in doing so, there be a sense

of irrelevancy among other groups.

Plans

There are two methods that GPPH will adopt to improve participation and to broaden the breadth of subjects to be covered: 1) collaborating with other organizations that focus on public health professional development, and 2) partnering with other disciplines within the university to deliver professional development opportunities. Such collaborations will also connect GPPH to existing opportunities that are available and easily accessible by our community of interest.

G1. Diversity and Cultural Competence

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the program's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the program's scholarship and/or community engagement.

1) List the program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

   Using 2015 data from SOPHAS, the centralized application service for public health, the Association of Schools and Programs of Public Health (ASPPH) reported that only 30% of public health program applicants identified with underrepresented ethnic minorities, and only 28% were male.

   In accordance with such data, GPPH defines the program's priority populations as follows:
   1) Individuals of color (target of 30% based on ASPPH average)
   2) Males (target of 25% based on ASPPH average)

   These two priority populations are the same for students, faculty, and staff. However, GPPH also believes that diversity of thought and students' work experience add much value to classroom discussions and interactions. As such, GPPH defines two more priority populations for students:

   3) Individuals born outside of the US
   4) Individuals working in the field of public health

2) List the program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request 1.

   As outlined in the educational goals, GPPH has the goal to retain and recruit diverse and qualified students and faculty. In accordance with the goal, GPPH has the following targets:

   Student Diversity
   1) 30% of enrolled students represent a diversity of racial and ethnic groups
   2) 25% of enrolled students identify as male
   3) 25% of enrolled students are born outside of the US
   4) 40% of enrolled students are working in the field of public health

   ERF G1-1 includes data for these goals from the past three years (2018-2019 data does not include Spring 2019 admission cycle, as final numbers will not be available until January 2019). Unknowns are included in the denominator when calculating the percentages.

Students who did not identify as White

2016-2017 32% (18% unknown)
2017-2018 36% (5% unknown)
2018-2019 42% (0% unknown)

There has been an upward trend of MPH enrollees who did not identify as White. When the program was first accredited in 2011, only 10% of the newly matriculating students did not identify as White. Therefore, GPPH is making tremendous progress and currently meeting the racial diversity goal.

Students who identify as male

2016-2017 18% (13% unknown)
2017-2018 22% (0% unknown)
2018-2019 32% (0% unknown)

While GPPH is close to its goal of enrolling 25% male students, it has not met its goal in the past two years. GPPH has been working with the Marketing department to target recruitment efforts to males but has had limited success. Efforts to meet this goal will continue, and we have discussed identifying male-dominant sectors (e.g., engineering, surgical residents) and increasing our advertising efforts in those sectors.

Students born outside of the US

2016-2017 not tracked
2017-2018 26% (0% unknown)
2018-2019 28% (0% unknown)

Since GPPH started tracking country of birth in the 2017-2018 academic year, the goal has been met.

Students working in Public Health

2016-2017 47% (18% unknown)
2017-2018 53% (0% unknown)
2018-2019 55% (1% unknown)

GPPH has been meeting its goal of having a mix of individuals who are new to public health and those who are already working in the field.

Faculty Diversity (ERF G1-5)
1) 30% of faculty represent a diversity of racial and ethnic groups
2) 25% of faculty identify as male

Faculty who did not identify as White

2016-2017 28% (0% unknown)
2017-2018 38% (1% unknown)
2018-2019 39% (1% unknown)

There has been an upward trend of GPPH faculty who did not identify as White. In the past three years, GPPH has met its goal.

Faculty who identify as male

2016-2017	24% (0% unknown)
2017-2018	23% (0% unknown)
2018-2019	16% (0% unknown)

GPPH has been very close to its goal of having 25% male faculty in two out of the past three years. However, the percentage dropped to 16% in 2018-2019 academic year. GPPH is currently not recruiting new faculty; however, when GPPH hires new faculty, this diversity goal will be considered and efforts will be made to recruit more male faculty. As stated above, the field of public health seems to attract more females than males, and recruiting male students and faculty may continue to be a challenge.

3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

The marketing, enrollment, and student support teams at CGPS collaborate with GPPH administration to recruit and retain a diverse student population. The process begins with a regular review of application and enrollment data by the GPPH Admissions Committee. If the data suggests that GPPH may need to focus its recruitment efforts on certain populations, the Admissions Committee brainstorms strategies with the MM. The conversations may also happen in the cross-functional meetings if broader input is desired. For example, after reviewing the 2017-2018 admissions data, the Admission Committee wondered if GPPH should be recruiting more international students. The topic was raised at a cross-functional meeting, and the Marketing and Enrollment departments explained challenges in recruiting international students. The biggest challenge is that international students are not eligible for financial aid, and over 90% of GPPH students utilize some form of financial aid for their MPH program. It was decided that recruitment of international students will be a longer term goal, and discussions with stakeholders for possible strategies will continue. In the meantime, GPPH will continue to track and work on the goal of enrolling students who are born outside of the US.

Representatives from GPPH Marketing and Enrollment attend conferences and events to recruit diverse individuals. For example, the annual meeting of “Unite for Sight” covers topics that are highly relevant to international communities; therefore, representation at this meeting is a way to recruit racially diverse students and faculty.

GPPH also ensures that its MPH curriculum is attractive to both “career changers” and those who are already working in the field of public health. GPPH primary faculty and the Curriculum Committee worked together to review and update the MPH curriculum between 2016 and 2018. The number of required courses ensure a strong foundation for those who are new to public health, and final projects in these courses are designed in a way that those who are already working in public health can showcase their skills. It is hoped that this will attract a balanced mixed of individuals with varying experiences in public health.

In order to attract more non-White males, GPPH has focused its advertising efforts. ERF G1-6 shows samples of Facebook advertising campaigns in which the target population were non-White men between 21 and 55 years of age.

4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

UNE recognizes the value of diverse working and living environments and offers a range of services and supports to promote ethnic, religious, socio-economic, and gender diversity. UNE is a founding member of the Diversity Hiring Coalition, “a consortium of Maine employers committed to increasing the diversity of their workforces, and working to make Maine a more welcoming place for all people.” With these efforts, GPPH is able to recruit faculty and staff with diverse cultural backgrounds.

A strength associated with GPPH’s fully-online MPH program is that students and faculty come from all over the US and around the world. As such, faculty and students are expected to engage with each other in a manner that is sensitive to cultural and racial diversity. Course evaluations filled out by students assess the cultural sensitivity of a faculty as well as the ability to facilitate an inclusive and respectful classroom environment. This sets the expectation for both faculty and students that cultural diversity and competency is highly valued in the GPPH community.

GPPH curriculum is designed to meet competencies around diversity and cultural competence. Specific assessment activities are outlined in Criterion D of this report.

5) Provide quantitative and qualitative data that document the program’s approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

As described above in 2, GPPH is quite successful in recruiting and retaining priority populations among students and faculty. However, recruiting males remain a challenge as the field of public health itself seems to attract more females than males. This is true for both students and faculty.

6) Provide student and faculty (and staff, if applicable) perceptions of the program’s climate regarding diversity and cultural competence.

Starting in the Spring 2017 semester, students were asked their perceptions of the program’s climate with respect to diversity and cultural competence. In the 2017-2018 academic year, over 95% of students who answered the relevant questions in the course evaluations either agreed or strongly agreed with the statements: “The instructor was sensitive to diversity (e.g. race, class, culture, gender, sexual orientation)” and “The instructor showed respect for the questions and opinions of students”. ERF G1-4 shows percentages of students who answered “agreed” or strongly agreed” to these statements in different terms between 2017 and 2018.

To supplement the course evaluations, GPPH added an assessment of the climate regarding diversity and cultural competence to the annual Student Satisfaction Survey. Of the 55 students who provided a response (22% response rate), 98% agreed or strongly agreed with the statement “CGPS fosters a climate that respects diversity and cultural competence” (ERF G1-2).

Faculty perceptions of the climate regarding diversity and cultural competence are assessed in the annual faculty survey. Of the 81 faculty who taught during the 2017-2018 academic year, 53 completed the survey (65% response rate) and 94 percent agree or strongly agree that GPPH fosters a climate that respects diversity and cultural competency (ERF G1-3, Table 1, Row 2).

7) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

Course evaluations reveal that over 95% of students feel that their instructors were sensitive to diversity and showed respect for questions and opinions of students. Likewise, the 2018 Student Satisfaction Survey shows that 98% of survey respondents either agreed or strongly agreed that CGPS fosters a climate that respects diversity and cultural competence. In addition, 94% of faculty agree that GPPH fosters a climate that respects diversity and cultural competence. GPPH consistently meets the goal to recruit and retain at least 30% of students who are non-White.

Weaknesses:
Prior to the 2018-2019 academic year, students were asked about their perceptions of the program's climate regarding diversity and cultural competence only in the course evaluations. GPPH is currently not meeting its gender diversity goals; although possible strategies have been discussed with the marketing team, they have not yet been implemented.

Plans:
Beginning in the 2018-2019 academic year, students and faculty are asked if they agree with the statement "GPPH fosters a climate that respects diversity and cultural competence" in annual surveys. GPPH will continue to track and review its definition of diversity with primary faculty and its committees. At the beginning of 2019, GPPH primary faculty will meet with the marketing team to agree on two or more strategies to increase recruitment of more males into the program. The effectiveness of these strategies will be reviewed after one full-year of admission cycles.

H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

1) Describe the program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

   Academic advising in GPPH is a shared responsibility among SSS and AA, who are also primary faculty of GPPH. SSS are full-time employees of CGPS; four (3.5 FTE) SSS are dedicated to GPPH students. They are responsible for onboarding each new student, and they speak with each student at least once every term that the student is taking a class. Students have access to SSS as soon as they are enrolled, and each new student speaks with an SSS on the phone before beginning orientation. On this phone call, the SSS conducts a learning assessment and notes any potential risk factors (e.g., full-time job with family responsibilities, language barriers) so that appropriate level of support can be given. SSS are well-versed in GPPH requirements (number of required courses, APE/ILE requirements, course calendars). They are also the first point of contact when students need help with registration, financial aid, and communicating with faculty.

   AAs complement the work of SSS by providing advising specific to public health. As primary faculty in GPPH, AAs are very knowledgeable about the program; the field and courses; and are able to provide advising regarding elective courses, APE/ILE projects, and public health careers. The procedure for AA assignments is as follows:

   1) New students begin at the beginning of term A each semester (e.g., Spring A, 2018)
   2) At the end of term A, each new student is randomly assigned an AA, and AAs are given a list of advisees
   3) During term B, AAs contact their advisees by email and ask them to sign up (on calendly.com) for an introductory phone meeting
   4) AAs use the guidelines shown in the advising manual (ERF H1-1) during and after their introductory meeting

   Students are required to meet with their AAs at least three times: at the beginning of their program establish the advisor-advisee relationship, after completing 21 credits to discuss electives, and prior to ILE to discuss plans and review competency attainment. Each semester, SSS supplies the program with a list of students who need to have their 21-credit or pre-ILE advising meeting. AAs contact those students to schedule a meeting and use the guidelines in ERF H1-1 for the meetings.

   The following table is a summary of the academic advising functions of SSS and AAs.

	Academic Advisor	Student Support Specialist
Helps with Orientation and Registration; Onboarding; Referrals to financial service or registrar		✓

Develops and tracks individualized plan/course order for required courses		✓
Helps with Blackboard Navigation		✓
Advise and support students on issues related to time management, work/life balance, and financial aid		✓
Advocates for students in program and course matters		✓
Follows up on referrals by faculty; e.g. SASC		✓
Informs student of Academic Advisor		✓
Refers student to Academic Advisor, as needed		✓
Helps student select electives appropriate to their public health goals	✓	
Provides expertise in subject matter and profession	✓	
Provides professional mentoring to students	✓	
Connects student with additional experts in program; e.g. adjunct faculty	✓	
Refers student to the Assistant Director of Career Services, as needed	✓	

2) Explain how advisors are selected and oriented to their roles and responsibilities.

AAs have both teaching and administrative responsibilities in the MPH program. They have appropriate public health credentials and meet research and scholarship expectations for primary faculty. Therefore, they are well-oriented to their advising roles and responsibilities. To ensure consistency among AAs, standard guidelines (ERF H1-1) are used during the advising meetings.

New SSS are selected through UNE's hiring procedures. They are oriented to the role by the Director of Student Support and senior SSS. Through orientation and ongoing training, they become familiar with the program, degree requirements, course offerings and calendars, and study plans. They refer to published resources such as the student handbook and GPPH catalog when working with students. SSS meet weekly with the GPPH Program Director, which helps to ensure that they have necessary knowledge of the field and the program to guide students.

Aside from these activities, there is currently no formal training for AAs, as formal AA structure began at the beginning of 2018. AAs are keeping track of any challenges or training needs that may arise, and discuss them at team meetings. If substantive formal trainings are required, they will be planned and implemented.

3) Provide a sample of advising materials and resources, such as student handbooks and plans of study, that provide additional guidance to students.

A copy of the advising manual is included in ERF H1-1. A sample of plan of study can be found in ERF H1-2, and the CGPS student handbook can be found in ERF H1-3. ERF H1-4 shows a schematic of important check points/milestones during the MPH program (e.g., when academic advising meetings occur, when to plan for and complete ILE and APE).

4) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

ERF H1-5 contains data on student satisfaction with academic advising. The data was collected through student satisfaction surveys in 2015, 2017, and 2018. Note that no survey was sent out in 2016 while the Research and Strategy team worked to streamline the survey processes.

In 2015, before the formal AA process was implemented, over 95% of respondents (n=150) indicated that they were satisfied with advising received through SSS. Refer to the 2015 survey in ERF H1-5.

In the 2017 Student Satisfaction Survey, 80% of GPPH student respondents (n=65) indicated that they were very satisfied or satisfied with the academic advising and mentoring they received. Refer to the 2017 survey in ERF H1-5. Approximately 382 students received the survey; the response rate is 17%.

In the 2018 Student Satisfaction Survey, 87% of GPPH student respondents (n=59) indicated that they were very satisfied or satisfied with the academic advising. Refer to the 2018 survey in ERF H1-5. Out of the 248 MPH students to whom the survey was emailed, 66 responded, resulting in a 27% response rate.

5) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

MPH students are required to complete an orientation before matriculating into the program. The self-paced orientation is designed to prepare students for success and provides an introduction and overview to UNE and GPPH. Activities in the orientation show students how to navigate the online learning environment, locate and access program resources, and learn about the tools and strategies that ensure a meaningful and collaborative learning experience throughout the program. Orientation also introduces students to the program's academic expectations such as use of AMA citation style, scientific writing, and academic integrity.

Orientation is delivered completely online in Blackboard, UNE's LMS. The orientation content is presented using the standard format for GPPH courses. Students work through seven learning modules consisting of lectures, readings, assignments, and quizzes. There is also a discussion post requirement in order to familiarize students with the use of the discussion board and introduce themselves to their classmates. Each module concludes with an assessment activity. Completion of the assessment activity allows students to move onto the next module. It is estimated that four to six hours are required to complete the orientation. Students can begin the orientation after their initial conversation with SSS and work through the modules at their own pace. All orientation activities must be completed before the first day of class.

The GPPH orientation syllabus is included in ERF H1-6.

6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
GPPH students receive individualized advising services from both SSS and AAs. Students keep in touch frequently and regularly with SSS, who can help them with time management skills and navigating such processes as registration, financial aid, and tutoring services. AAs connect with each student at important milestones (at the beginning, before electives, and before ILE) to give advising specific to public health.

With the addition of new primary faculty in the 2017-2018 academic year, GPPH was able to better define the advising structure and the role of AAs. Beginning in the Spring 2018 semester, AAs proactively contact each new advisee and discuss requirements/expectations individually.

Both types of advisors are very knowledgeable about the program and courses and are committed to student success.

Weaknesses
As the AA structure is new, GPPH needs to demonstrate the value of AAs so that students take the initiative to reach out to their AAs when assistance is needed. No formal training for AAs is currently in place, although AAs work together to support each other.

Plans:
AAs will continue to use the guidelines shown in ERF H1-1 to ensure systematic and timely academic advising for each GPPH student. AAs will reach out to their advisees and encourage them to utilize academic advising services. AAs will continue to talk about advising and training needs in team meetings and plan for formal training if needs are identified.

H2. Career Advising

The program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

   GPPH has a full-time position dedicated to offering career advising services tailored to public health graduate students and alumni. The Assistant Director of Career Services is focused on offering an assortment of career services and professional job seeking tools including resume development, cover letters, networking, interviewing, career planning, and a variety of work success topics. The GPPH Career Services webpage is at: http://success.une.edu/public-health/gpph-career-services/. Career Services also maintains a Public Health Job Board, which showcases current job opportunities and internships throughout the nation.

   Students are made aware of career services through AAs, faculty, SSS, online marketing (public health social media blog, and the GPPH newsletter) and through webinars with APHA-SA, as included in ERF H2-1. The link to the social media blog can be found at: https://vision.une.edu/jennifer-healy/

   Career services are available to public health students and alumni in the following ways:
   - One-on-one counseling sessions with a career advisor
   - "On demand" library 24/7 access to all materials organized by series
   - Small groups via the non- credit, mandatory professional preparation workshop
   - One-on-one conversations with a peer

   One-on-one counseling sessions
   Two individuals, the Assistant Director of Career Services and the Assistant Director of Research and Service, are available for one-on-one career counseling sessions with GPPH students. Students and alumni can schedule a one-on-one counseling session with a career services advisor via an online scheduling system, Calendly, or by emailing and arranging a time. Direct Calendly links are listed on the website and found here: https://calendly.com/jhealy3; and https://calendly.com/cewanwhyte . Once a student or alumnus contacts a career advisor, a one-on-one session is convened, and the student or alumnus then works with the advisor to create a plan of action specific to their needs. GPPH's Assistant Director of Career Services has several resources, such as resume and cover letter templates and networking tips, which are shared with students and alumni to help them create these essential job-seeking tools. Tips and current best practices are also shared. The student or alumnus remains in contact with the advisor until the services are no longer needed, which may mean job placement or acceptance into a desired program (e.g. medical school, internships).

   Peer-to-Peer Career Motivational Coach:
   The Peer-to-Peer motivational coach component of Career Services offers students the chance to

speak directly with a senior student, learn about the peer's journey, and gain advice regarding the importance of early career planning while being a student. Students also gain insight into how to use the online 24/7 career library resources to build a public health resume as well as obtain resources for other professional needs, discuss the power of networking, or help overcome a fear of networking. The Peer-to-Peer component went live on September 10, 2018; see ERF H2-2 for the description of this role**.**

Students can schedule a 15 minute meeting with the peer advisor directly through the career services website, at Calendly link https://calendly.com/psaini/15min/09-13-2018 . The pre-selected student peer advisor is a senior student in the program with leadership experience from APHA-SA. The peer advisor is coached by the Assistant Director of Career Services to focus the 15 minute sessions on career-related discussions. The peer advisor points students toward the online 24/7 career library resources and encourages them to start building or improving their public health resume by utilizing the resources posted there.

The peer advisor helps deliver three important career messages to students:

- Plan for your career early,
- Build your public health resume while being a student by finding a quality APE, public health internships, and/or public health volunteer experience to make yourself more marketable at graduation, and
- Promote the value of networking to build your professional community (ERF H2-3).

Students were made aware of this new service through the GPPH newsletter (ERF H2-4), and word of mouth through student leaders. A student satisfaction survey was generated for the Peer-to-Peer advising service (ERF H2-5).

"On demand" Career Library 24/7 access to all materials and resources

Students and alumni are able to access materials "on demand" at the online career library. Online career tools are being built with "reach" in mind – shorter video spots with instructions and templates to accommodate the 24/7 "on demand" access by all students. The development of library resources is ongoing. The resources are organized by "series" as a way to help the student navigate the library independently and find the desired resources quickly. Currently, there are three series: Writing, Networking, and Interviewing Series. Each series has a variety of resources for students to utilize independently. The library was promoted to students in an email sent by marketing (ERF H2-6) and included in the GPPH newsletter (ERF H2-7). In addition, SSS and AAs were coached by the Assistant Director of Career Services on the importance of marketing the career website library of resources to students, and to deliver the three key career development messages during related conversations with students (ERF H2-3)**.** The number of hits to the career library website is being racked by the CGPS marketing team, and usage will be monitored on an ongoing basis. Since July 2018, 258 hits to the career website have been recorded. Specific details on career development offerings, including the method and launch dates, are below. The link is: http://success.une.edu/public-health/gpph-career-services/

Writing Series:

- Public Health Resume Format Selection – Refer to ERF H2-8.
- Chronological Resume Builder – Refer to ERF H2-9.
- Chronological Resume Template with Tips – Refer to ERF H2-10.
- Hybrid Resume Builder - Refer to ERF H2-11.
- Hybrid Resume Template with Tips – Refer to ERF H2-12.
- Action Verbs for Resumes and Cover Letters – Refer to ERF H2-13.
- Transferable Skills – Refer to ERF H2-14.
- Cover Letter Template – Refer to ERF H2-15.
- Cover letters – Tips on how to match a cover letter to a specific job application. PowerPoint/video – launching Jan. 2019.

Networking Series:

- Elevator speech – Refer to ERF H2-16.
- Networking via email in 3 easy steps – Refer to ERF H2-17.
- Introduction to Networking – Refer to ERF H2-18.
- Digital Networking: A narrated PowerPoint on the power of using LinkedIn, launching Feb. 2019.
- UNE MPH LinkedIn Blitz: Promote community building through LinkedIn, encourage profiles for all MPH students and alums. Launching April 2019.

Interviewing Series:

- Informational Interviewing – refer to ERF H2-19.
- Behavioral Interviewing/Story Telling: What is it, how to prepare for it, and using stories effectively. Power point and video launching December 2018.
- What an MPH graduate can do for an employer – how to share the skills and competencies developed in our program, in layperson's language. Power point/video – launching January 2019.
- Professional self-introductions: How to answer "tell me about yourself" - first impressions matter. Launching February 2019.
- Mock Skype Interviews: One-on-one practice as needed with the Assistant Director of Career Services, and an "annual MPH mock interview event" which will connect interested students to a professional who conducts the mock interview and provides feedback to the student. It will run every winter semester, launching March 2019.

Planning Series:

- Salary Negotiations – a guide (document), launching March 2019
- Career Manual – an e-manual which includes all relevant information from above. Launching September 2019.

Professional Panel Series:

- Public Health Career Kaleidoscope part I – The first of a series of webinars focusing on the broad career areas in the public health field. Part 1 will include Environmental Health and Epidemiology. Faculty and alumni working in the designated field will discuss their experiences and hold a question and answer session. Planning is underway and the event will launch January 2019. Refer to ERF H2-20.
- Public Health Career Kaleidoscope part II – A second webinar with a question and answer opportunity focused on Global Health (domestic and international) will be conducted with faculty and alumni. Launching June 2019.

Life Success Series:

- Personal Branding – How to market yourself by synthesizing your brand in resumes, LinkedIn, and interviews. Launching 2019.
- Culture and Fit – Understanding organizational culture and fit in the job search. A narrated power point will launch in March 2019.
- Leadership – PowerPoint and video will launch July 2019.
- Diversity at work – Surface level, deeper level, personalities, the perks and challenges. PowerPoint will launch August 2019.
- Mentoring – A PowerPoint and video on mentoring, and the importance of tapping into professional advice, will launch May 2019. Additional efforts around mentoring will occur as follows: A database outlining all GPPH faculty's career and research interests is currently in development, which will help career advising staff members better match students with faculty mentors. Alumni will be contacted as potential mentors to current students.

Small groups via the creation of a non- credit, mandatory professional preparation workshop for current students.

Students may also access career materials through a newly created career workshop titled "Professional Preparation Workshop" (ERF H2-21).

The mandatory workshop began in Summer B June 2018, and will run in session B each semester. All students will take the workshop during their second session, after completing GPH714 Principles of Public Health. It is a four-week workshop that covers professional preparation and job search tools to help students prepare for their self-directed APE search, and stresses the importance of early career planning and networking. Students are put into small discussion groups for the entire course, which encourages peer-to-peer communication on career development, resume building, challenges, and opportunities. The four weeks include:

Week One:	Introduction to public health careers and elements of a successful public health resume
Week Two:	Creation of elevator speeches and public health resumes
Week Three:	Overview of APE and Networking
Week Four:	Informational interviewing and Thank You notes

Students are surveyed at the end of the four-week workshop through a confidential survey link, and are encouraged to provide feedback on the workshop and resources so that the Assistant Director of Career Services can make revisions based on student needs and feedback. These resources are the same resources posted in the online career library, and are vetted by students in the workshop. Completed surveys with satisfaction ratings are available in ERF H2- 22.

Examples of students participating in the small groups within the Professional Preparation Workshop.

Example 1: In Week two of the workshop, students share their recorded elevator pitch within small groups. One student shared an inspiring elevator pitch with classmates. According to other students' comments, this motivated them to make their own self-introduction as inspiring or interesting as possible. They experienced first-hand from another student in the program that an inspiring elevator pitch is a valuable professional communication tool.

Example 2: In Week three, students focus on networking, Students are required to reach out to a public health professional via an introductory email and attempt to secure time for an informational interview. One student dreaded the idea of networking, and even considered how he could pass the workshop without doing the assignment. The student utilized the networking resources, and along with positive encouragement from the instructor and peers, he reached out to an administrator of a local organization. The student met with the administrator and obtained an invitation to do his practicum at the organization due to the successful networking experience. The student shared his personal networking success story with his classmates the next day. He strongly encouraged his peers to become believers in the power of networking to open new doors.

Example 3: In Week four, students conduct informational interviews by phone or in the field as a way to build knowledge and connections with professionals in the field of public health. One student was able to meet with a senior level professional working in emergency preparedness. The student prepared for the meeting with questions she selected from the workshop question pool provided by the instructor, as well as her own questions based on her specific interests. She shared these questions with students in the workshop so that they could use these in their own mini-portfolio. At the end of the workshop, the student shared comments with the instructor, via the workshop evaluation survey and the submission of her mini-portfolio, that she had a rewarding experience and was very pleased to have met with a senior professional in her desired field. See ERF H2-27 and ERF H2-22.

In addition to offering this workshop to new students, under discussion is the launch of a professional development workshop geared toward unemployed MPH alumni to help them prepare for meaningful public health employment opportunities. The workshop will be very similar to the "Professional Preparation Workshop" but will focus on resumes, networking, and

interviewing skills. In September 2018, the Assistant Director of Career Services began proactively reaching out directly to alums who had participated in the annual student satisfaction survey and self-reported that they were unemployed or actively searching for a public health job. The Assistant Director of Career Services invited 11 alumni to make an individual counseling appointment to discuss job search strategies, networking, interviewing skills and resumes.

In addition to GPPH's efforts to bring career resources to students, UNE is working on the implementation of Handshake as an enterprise solution and the go live date is scheduled for January 2019. Handshake is an important recruiting platform to bring students, employers, and career staff to one central area. Handshake uses cutting edge technology to help students more easily connect with employers and source jobs, internships, event information, and on-campus recruiting opportunities. Employers use Handshake as a recruitment tool to identify qualified candidates for open positions and manage on-campus recruitment activities. As Handshake unfolds in late 2018 or early 2019, GPPH will capture the power of this platform to support direct employer/student interface.

UNE is also contracting with Portfolium, an online network which helps students connect learning with career opportunities. This network helps students showcase their skills, connect with faculty and other students with similar interests, and present themselves to prospective employers.

Role of Academic Advisors

Each student is assigned to a primary faculty for academic advising; AAs may provide career advice to the students, transfer the student to one of the two career advisors, or assist by making connections to adjunct faculty members who are currently working in the area of interest to the student. By combining the expertise of the primary faculty with that of the adjunct faculty, GPPH is able to provide career advice on all areas of public health to our students.

In addition to services offered by GPPH, all students are able to utilize the career services and offerings of UNE's Office of Career Services. The UNE Office of Career Services offers academic and career exploration assistance, self-assessment and personal interest exploration, resume and cover letter help, and job search strategy guidance. The office also maintains a database of health professions job listings http://www.une.edu/studentlife/portland/career/resources , coordinates the annual Portland Campus Career Fair, and serves as a liaison between the campus community and area health care employers. Students and alumni are able to attend career fairs and have access to online job databases. One-on-one consultations are also available with experts within this Center upon request.
The link is: http://www.une.edu/studentlife/portland/portland-campus-career-services

The UNE Office of Career Services at Portland estimates that approximately 500 UNE students and alumni utilize their career counseling service annually in one-on-one counseling visits. Of that, 75 – 100 of those visits are UNE alumni, and 325 – 400 are UNE students. The office estimates that they see five GPPH alumni and ten GPPH students annually.

Career advising is also integrated into student-centered activities. For example, GPPH faculty work with the UNE APHA-SA to design and publicize a guest series in which students and alumni are able to speak to primary and adjunct faculty in the program who are practicing public health professionals. This allows students to gain first-hand knowledge of skills and specific training the field requires, gain skills needed for the different areas of public health, and gain valuable networking skills. Some of the activities hosted by APHA-SA can be found on the group's social media page at: https://www.facebook.com/uneaphasa/

2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

The position for GPPH's Assistant Director of Career Services was nationally advertised and

candidates were interviewed to determine knowledge of the role and experience in similar positions. After an intensive interview process, the most suitable candidate was selected from the pool of eligible candidates. This full-time position is responsible for both one-on-one counseling and development of professional preparation workshops and other relevant resources. In addition, the Assistant Director of Research and Service, a certified professional career coach, also works as a part time career advisor, and holds one-on-one career counseling sessions with students and alumni.

The individuals providing career advising bring years of experience to the role. They are knowledgeable of the needs of employers in public health, the hiring process, the desired public health skillsets, the competitive job searching climate, the importance of networking, and the dynamic job market. Program-specific orientation to the role includes job-specific trainings about the program and expectations, meeting with staff members from various departments at CGPS to understand their roles and seek opportunities for collaboration, and meeting with the university's career service staff to build a collaborative relationship and learn about the resources offered from this center. In addition, memberships to national public health organizations such as the APHA, and local organizations such as the Maine Career Development Association (MCDA) and MPHA are sponsored by UNE, along with time to attend national conferences and webinars. These memberships and related activities allow for continued education and a broad understanding of career trends in the field of public health.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

Student Advising (n= 151 for 2015 to current).

Example 1 – Advice was provided to a student who had very limited experience and was curious about available public health jobs. The student worked with the advisor to learn about professions that require an MPH and potential certifications. The student developed a resume and cover letter that showcased public health knowledge and skills, social media profiles, business cards, practice interview techniques, and follow up protocol for after a job interview. After several months, the student found a position that met her needs.

Example 2 – A student was struggling to find a suitable practicum experience and her Practicum Coordinator referred her to the career advisor for assistance on her resume and cover letter. The career advisor met with the student by phone and noted that the student had valuable experience but her current resume was poorly organized and did not present her skills and accomplishments well. The career advisor asked questions to better understand the accomplishments achieved in each of her professional roles. The advisor helped the student rewrite her resume to present herself as a skilled professional with accomplishments that a public health employer would notice. The advisor also coached the student on how to write a cover letter to match the job she wanted. The student began sending resumes and cover letters with more confidence. Within weeks, the student reported that she was offered a practicum at an organization she was very excited about joining.

Example 3 – A student was receiving recognition and a pay raise at her place of employment, and the student's manager was open to considering a new title that would reflect the additional level of responsibility. The student was uncertain what her title should be; and she wanted the title to present herself for maximum success in public health. The student asked for assistance from the career advisor, who listened to what was important to the student, the work she was taking on, and her future goals. The advisor then researched titles and recommended a title that uniquely met the student's goals and would position her well in the field, addressed her increased responsibilities, and was in line with job market trends. The student secured the suggested title and salary increase.

Alumni Advising (n= 7 for 2015 to current)

Example: An alumna contacted the program for career advice after trying for some time to find a public health job. Through one-on-one consultations, the alumnus revealed that she is changing careers and was using a resume that did not showcase public health knowledge and skills, but rather those of the previous field. The alumnus worked with a career advisor to develop a public health resume and cover letter and determine possible employers in target areas. The advisor maintained contact with the alumnus throughout the process and learned she was able to find a job in a company that met her needs.

4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

With the strengthening of the career advising team and a dedicated public health career advisor, a career service satisfaction survey was developed in May 2018. Students are now asked to specifically rate their level of satisfaction with career advising in two ways: 1) annual student satisfaction survey, and 2) post career counseling surveys.

In the 2018 Student Satisfaction Survey, students are asked to rate their level of satisfaction as it relates to career counseling, and 73% of respondents (n=53, 21% response rate as 248 students got the survey) reported being very satisfied or satisfied with career counseling (ERF H3-23)

The first post career counseling survey (ERF H2-24), distributed through Red Cap, is sent directly after each career advising session with the student or alumnus. The second post career counseling survey (ERF H2-25), focused on those students working long term with the counselor, is sent after several counseling sessions. The survey results for both of these surveys are available in ERF H-26. While only 12 responses have been received thus far, all responses are positive with “extremely satisfied” responses.

5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:
GPPH is committed to furthering career services and recognizes the important return on investment career services offers students and alumni. Along with hiring a full-time Assistant Director of Career Services, resources and support from a multidisciplinary team within CGPS are available to promote and develop career resources for students and alumni. In addition, SSS and GPPH faculty are closely tied to students in need of career services and refer students to the Assistant Director of Career Services on a regular basis. One-on-one career counseling is provided by both the Assistant Director of Career Services and Assistant Director of Research and Service, who is a certified professional career coach.

Weaknesses:
Despite the program’s recent progress, building a community of partners who are engaged and working with GPPH students on career development is currently missing. Relationships with two important career community partners (employers and alumni) are weak. The lack of regional or national partnerships with employers limit the program’s ability to host recruitment campaigns between large, innovative, or topical public health employers and GPPH students. Lacking a robust alumni database also limit us when trying to access experienced alumni to participate in career development opportunities and limits knowledge of job openings for students.

Our online job database includes jobs and internships that are pre-selected and posted by the Assistant Director of Research and Service; however, access to more robust recruitment tools and job databases should be explored in the future.

Plans:

GPPH will obtain important feedback from students and alumni through the satisfaction surveys that have already been created and deployed, and will thus be in a position to improve or maintain career service offerings according to student/alumni feedback.

The program is already engaged in an initiative to build a community of advocates for our students. We will utilize Handshake and Portfolium to promote direct connections between students, alumni and employers. An Assistant Director of Workforce Development has been hired and is helping to build valuable relationships with employers. The peer-to-peer career community advising service is new and we will adjust this service based on student and peer feedback obtained in the first few months.

An online mentoring program which matches senior level students with alumni for conversations/Skype meetings over a specified time period for a specified number of sessions is in the conception stage. A database outlining faculty career and research interests will be developed in Spring 2019 and made available to career advisors and academic advisors to match students with willing faculty mentors. A Professional Workshop designed for alumni will be organized and offered to recent alumni looking for positions in public health.

H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate any formal complaints and/or grievances to program officials, and about how these procedures are publicized.

   CGPS provides avenues for students to voice their concerns through clearly defined channels depending upon the level and nature of the complaint. Student petitions fall into one of two categories:
   1.) academic*
   2.) professional behavior

   Petitions are resolved at the program level. Prior to pursuing a complaint, students are required to communicate with the faculty member or other parties involved in an attempt to resolve the issue.

   *A petition for a grade change may only be filed in instances where a student disagrees with the faculty evaluation due to:
   - Arithmetic or clerical error
   - Arbitrariness

   Barring the above categories, the academic judgment used in determining the merits of the grade is not reviewable.

   Petition Process

   Students document and communicate their concerns and complaints to their faculty and to the program through the following process:

1. The student must try to resolve the issue with the faculty within five business days of the initial event. If the student is unsatisfied with the result, s/he must contact an SSS (for the matter being petitioned) within five business days of the communication with the faculty member.

2. SSS will facilitate the petition process and will provide the student with the necessary petition form to complete. The completed petition must include a clear statement of the student's requested action, a summary of the conversation(s) with faculty or other involved parties, and appropriate supporting materials (including any items that provide relevant history or context of the issue).

3. The student must return the completed petition to SSS no later than five business days after the petition process has been initiated as referenced in step 2 above. The petition will be sent to Program Leadership by the SSS.

4. Program Leadership will review each petition and may contact the student, instructor, SSS, or other university personnel should additional information be necessary or helpful before rendering a decision. Depending upon the nature of the petition, students may be prevented from registering for a subsequent session or term until the petition is resolved. Decisions will be communicated to the student and SSS through UNE email by Program Leadership within seven business days of receipt of the petition. The Student Support Specialist will record the decision in the student's record.

Grievance Process

Student disagreement with a Program Leadership decision regarding petitions may be presented in the form of a grievance to the Dean of the CGPS. Grievances can only follow a petition and will be accepted **only in cases where there has been a procedural violation or a demonstrable mistake of fact**. A written grievance must be submitted to the Dean of the CGPS within five business days of written notification of the program decision. The grievance should succinctly state all facts relevant to **procedural violations or factual errors**.

1. If the student believes there has been a procedural violation or mistake of fact in the rendering of the Program Leadership decision on a student petition, the student should contact an SSS to discuss the grievance process.

2. The SSS will facilitate the grievance process and will provide the student with explanations of what information should be submitted for the Dean of CGPS to review in relation to the grievance.

3. As with the petition process discussed above, the student must return the materials related to a grievance Student Support no later than five business days after the academic decision has been rendered. The materials will be sent to the Dean's office by the SSS.

4. Upon receipt of the grievance, the Dean will appoint an Ad Hoc Appeals Committee comprised of the Dean or Designee, an unbiased faculty member from the program, and a member of the executive committee of CGPS Faculty. The student will present the grievance to the Appeals Committee via phone or web meeting within 10 business days of the appointment of the Appeals Committee. The Appeals Committee will review the grievance and supporting documentation.

   In presenting to the Appeals Committee, the student should provide an overview of the issue and introduce material of a substantiating nature; the Committee may request additional information from specific sources or individuals. Within five business days of the hearing, the Committee will forward to the Dean a summary of the grievance and its recommendations for resolving the grievance. Depending upon the nature of the grievance, students may be prevented from registering for a subsequent session or term until the grievance is resolved. The Dean, while taking the committee's recommendation into consideration, will render the decision on the grievance. The Dean's decision will be communicated via writing to the student and program within 7 business days of receipt of the Committee's report. The decision by the Dean is final.

   These procedures are outlined in the CGPS student handbook: http://cgps.une.edu/assets/CGPS-Student-Handbook/cgps-student-handbook.pdf. SSS also communicate these procedures with students when concerns are brought forward to them.

2) Briefly summarize the steps for how a complaint or grievance filed through official university processes progresses. Include information on all levels of review/appeal.

   The procedures are outlined in both UNE student handbook (ERF H3-1) and CGPS student handbook (ERF H3-2), and communicated to individual students through SSS. Student Support team members are often the first point of contact for students wishing to file a petition or grievance and guide students through the procedures to submit the petition or grievance along with supporting documents.

   As described above, any complaint or petition is handled first at the program level, and then students may file a grievance to the Dean if the student perceives that there has been a procedural violation or demonstrable mistake of fact by the program.

   In addition, UNE has a dedicated office to handle sexual misconduct, discrimination and harassment under Title IX as described below.

Sexual Misconduct, Discrimination, and Harassment under Title IX

UNE, in accordance with federal and state law, and University policy, prohibits any member of the faculty, staff, administration, trustees, student body, vendors, volunteers, or visitors to campus, whether they be guests, patrons, independent contractors, or clients, from harassing and/or discriminating against any other member of the University community because of that person's race, sex, sexual orientation, gender identity and expression, ethnicity or national origin, religion, age, creed, color genetic information, physical or mental disability, HIV status, or status as a veteran. All substantiated incidents of harassment discrimination and sexual misconduct, including sexual assault, dating violence, domestic violence and stalking will be met with appropriate disciplinary action, up to and including dismissal from the University.

The Title IX Coordinator is the individual designated by the President with responsibility for providing education and training about discrimination, harassment, and sexual misconduct, including sexual assault, dating violence, domestic violence or stalking to the University community and for receiving and investigating reports and complaints of discrimination, harassment and sexual misconduct in accordance with this policy.

All complaints of sexual misconduct, discrimination and/or harassment under this policy should be made to the Title IX Coordinator or a Deputy Title IX Coordinator. This includes complaints concerning administrators, trustees, supervisors, employees, staff, faculty, vendors, volunteers, students, athletes, and visitors.

The Title IX Coordinator/ Deputy Title IX Coordinators will: (1) provide oversight of any investigation of claims of sexual misconduct, harassment or discrimination in violation of this policy; (2) be available to assist any individual to access the resources of the University or the community in the event of any complaint under this policy; (3) assist anyone who wishes to report a crime to local law enforcement; (4) be responsible for all training and education programs and monitoring the campus climate with regard to sexual misconduct, harassment and discrimination; and (5) complete required annual reports to government agencies.

3) List any formal complaints and/or student grievances submitted in the last three years. Briefly describe the general nature or content of each complaint and the current status or progress toward resolution.

GPPH has a robust student support structure by which the SSS team acts as a liaison between students and the program or faculty when issues arise. Most student complaints (e.g., late grading, unclear feedback, inability to register for a desired class) are brought to the program's attention quickly through SSS so that mediation and resolution can occur in a timely manner. GPPH provides detailed rationales when communicating decisions on students' petition, and it is common practice for either the SSS team or Program Director to speak with the student to ensure accurate and complete information. Therefore, in the last three years, while there have been many petitions (grade dispute, refunds, late add to a class), there have not been any formal complaints or grievances.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH has a set of clearly-defined policies and procedures for student petition, grievance, and complaint processes. These are communicated through SSS and via the CGPS student handbook. Because GPPH practices a "high touch" model in which students have ready access to SSS who check-in with them every term, most concerns are brought to the attention of the Program Director immediately and resolved before escalation to a formal complaint stage.

Weaknesses:

Although a strength, the ability of GPPH to receive and resolve student concerns quickly and informally is also a weakness. Currently, most concerns are handled as petition; it may be beneficial to differentiate petition (in which a program decision is required, e.g., grade dispute) vs. a complaint (in which a decision is not necessarily required but student wants to document dissatisfaction).

Plans:

GPPH will work with SSS and Salesforce Administrators within CGPS to formally track and organize petitions; the conversations have begun and the procedures are expected to be implemented as early as Spring 2019. The Program Director will also work with the Director of Academic Policy and Accreditation and other Program Directors to better differentiate complaints vs. petitions. Any revisions resulting from these conversations will be included in the 2019-2020 student handbook.

H4. Student Recruitment and Admissions

The program implements student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program's various learning activities, which will enable each of them to develop competence for a career in public health.

1) Describe the program's recruitment activities. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

   Student recruitment is a shared responsibility between the program and the college's marketing and enrollment units. Individuals with expertise and experience in these areas manage the marketing and recruitment activities, and GPPH administration collaborates with those individuals in the branding and messaging of the program. GPPH markets to a national and international audience in an effort to attract a diverse student body, and representatives from the enrollment and marketing team attend professional meetings such as the MPHA, APHA, and Unite for Sight Annual Meeting to recruit potential students.

   The GPPH MM is responsible for launching marketing campaigns across a variety of channels in order to obtain high quality prospective students (referred to internally as "leads"). The channels that are currently used include: online digital advertising; paid search ads through Facebook, Bing, Google, and LinkedIn; online educational directories, such as gradschools.com; outbound email marketing; local and national radio advertising; industry events, such as the APHA and MPHA annual meetings; career fairs; and organization sponsorships. The MM works with internal and external resources to design effective advertising campaigns that speak to the mission of GPPH, with the ultimate goal of attracting qualified and interested prospective students.

   The College's Web Developer and inbound MM are responsible for the management of all web assets, including the program website pages on http://online.une.edu, and any landing pages or microsites used in marketing campaigns. The website provides detailed information about the program, including the goals, objectives, and admission criteria. The inbound MM also manages a blog, http://vision.une.edu, where stories are published related to GPPH student success, program and faculty news or achievements, and online learning strategies and tools. This team works collaboratively with the GPPH Program Director and public health team to create accurate and meaningful content. In relation to marketing campaigns, the College's Research and Strategy team assists in monitoring the competitive landscape to ensure that our marketing initiatives are comparable to other CEPH-accredited institutions. The team also conducts a GPPH market assessment that helps the program maintain continuous improvement and relevance. All of these marketing efforts assist in student recruitment efforts for GPPH.

   Inquiries resulting from marketing efforts are directed to ECs who are well-versed in the program content, admissions requirements, and the application process. They answer any questions the prospective student may have, and, if necessary, will connect the prospective student with the GPPH Program Director to discuss the field of public health in more depth. The ECs also pre-qualify prospective students to ensure they meet the admissions requirements outlined in the CGPS Eligibility and Application Policies and Processes. If applicants meet the admissions requirements, the ECs support and advise them throughout the application process. There are three application deadlines and three terms in which students may enroll in the program: Summer Term, Fall Term, and Spring Term. Students can enter the program at the beginning of any of the three term cycles. Once applications are complete, the GPPH Admissions Committee reviews them based on a set of admission requirements, and sends its decision to the enrollment team, which then sends the official decision letter to the applicants.

2) Provide a statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

The following list summarizes the admission requirements and procedures for MPH:

Admissions requirements for MPH:

- Bachelor's Degree* from a regionally accredited U.S. college or university, or its equivalent.

**Students currently completing their undergraduate studies are encouraged to apply to programs and, if admitted, are accepted on a conditional basis pending receipt of a transcript showing proof of graduation.*

All applicants with international degrees or coursework are responsible for having their transcripts evaluated for degree and grade equivalency to that of an accredited institution within the U.S. UNE accepts foreign educational credential evaluations from all NACES® members (http://www.naces.org/members.htm), as well as the American Association of Credentialed Registrars and Admissions Officers (http://www.aacrao.org/).

- Cumulative undergraduate GPA of 3.0, or higher

- Course Prerequisites: Demonstrated academic ability to succeed in graduate level work as evidenced by consistent academic performance in science and math courses.

In lieu of college-level courses in either, students may submit GRE subject test scores in mathematics or science, or the GRE quantitative ability score.

- Computer with Internet connection, including the hardware and software requirements described on the Technical Requirements page. Must also possess sufficient computer skills to navigate the Internet as all classes are accessed 100% online.

Application process for MPH:

Submission of:

- Completed online application: http://go.une.edu/apply
- Non-refundable application fee
- Resume or Curriculum Vitae
- Answers to the following questions:
    1) How has your previous education and/or professional experience(s) prepared you for graduate studies, particularly in the field of public health? (350 words max)
    2) Why is an online program the right fit for you? In answering this question, please address time management, self-motivation, access to technology, and computer literacy. (350 words max)
    3) Describe how you plan to use an MPH/GCPH to address or advance your career goals. (350 words max)
    4) Discuss an important public health issue in your community and how you could offer a contribution with an MPH/GCPH. (350 words max)
- Two recommendation forms (preferably from a professor or supervisor)
- Official transcripts reflecting conferral of a bachelor's degree from a regionally accredited institution. All transcripts are to be submitted from the original institutions.

Exceptions:

GPPH and the GPPH Admissions Committee, in collaboration with the Office of Graduate and Professional Admissions (OGPA), reserve the right to make exceptions to the admissions criteria and to make changes or exceptions to policies and procedures on a case by case basis, when it deems such a decision is necessary and appropriate.

Application Review and Decisions:

Applications are reviewed by the GPPH Admissions Committee on a rolling basis. At least two members of the Admissions Committee review each application; if the decisions differ, a third committee member is asked to review the application. Applicants are admitted for three start terms per year: Summer, Fall, and Spring.

3) Select at least one of the measures that is meaningful to the program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list, the program may add measures that are significant to its own mission and context.

GPPH aims to enroll academically strong students. In addition, as a flexible, online program, GPPH also aims to recruit and retain professionals who are working in the field and provide them with skills and credentials for career advancement.

Therefore, GPPH chooses and tracks the following outcomes measures for recruitment that relates to the following two outlined in CEPH criteria:

- Quantitative scores (eg, GPA, SAT/ACT/GRE, TOEFL) for newly matriculating students
- Percentage of newly matriculating students with previous health- or public health-related experience

Outcome Measure	Target	2016-2017	2017-2018	2018-2019
Percent of newly matriculating MPH students with an undergraduate GPA of 3.0 or better	70%	68% (226 enrolled, 208 known GPA, 153 with greater than 3.0)	79% (257 enrolled, 248 known GPA, 204 with greater than 3.0)	65% (112 enrolled, 107 known GPA, 72 with greater than 3.0)
Percent of newly matriculating MPH students who work in public health (answered yes to "are you currently employed in the field of public health?)	40%	34% (226 enrolled, 179 respondents, 76 answered yes)	53% (257 enrolled, 257 respondents, 135 answered yes)	54% (112 enrolled, 111 respondents, 61 answered yes)

Note that unknowns are included in the denominator. 2018-2019 data only includes Summer 2018 and Fall 2018. The 2018-2019 numbers will be updated when the 2019 Spring numbers become available in January 2019.

Data in the above table (ERF H4-1) shows that GPPH met the target for enrolling students with undergraduate GPA of 3.0 or better in the 2017-2018 academic year. The percentage (68%) in the 2016-2017 academic year was slightly lower than the target. The 2018-2019 data is not final since it does not include the Spring 2019 numbers. For a few students, undergraduate GPAs are not available because those students come from international colleges/universities where there is no GPA equivalent to the US colleges. These unknowns are included in the denominator.

GPPH has improved the percentages of newly enrolled students who are already working in the field of public health. Currently, the percentages exceed the goal of 40%. In 2016-2017, there were a lot of "unknowns", and they were included in the denominator for percentage calculations. An advanced degree in public health is highly valued among public health workers, and GPPH will continue to strive to meet the needs of public health professionals who are looking to advance in their careers.

4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

Strengths:

GPPH collaborates with CGPS's marketing and enrollment teams to recruit qualified students. All applicants to the public health program receive personal attention throughout the application process. When an inquiry for application is made, an EC speaks with the potential applicant regarding admission requirements and the application process. During the application process, the EC keeps track of and informs applicants of their status and completion of application materials. Nearly half of newly matriculated MPH students work in the field of public health; this indicates that GPPH provides value to those who are looking to advance their public health career through a flexible online program.

Weaknesses:

GPPH currently uses undergraduate GPA of 3.0 or better as an indicator of student qualifications. However, our admission review process is more comprehensive. As show in ERF A1-2 (Admissions Rubrics), GPA is considered along with consistent performance in math and science courses and recommendation letters to determine an applicant's academic ability to succeed in graduate-level courses. In addition, other factors such as motivation and drive to complete the program and public health field experience are also considered. This means that an applicant may be accepted with a low GPA but with strong recommendations and demonstrated commitment to the field of public health. Therefore, GPPH admission policies may need to be revised to better reflect the types of applicants the program strives to attract.

Plans:

As GPPH moves forward with the strategic planning process, we will discuss and further define the types of students the program wishes to attract. The Admission Committee will consider input from stakeholders, review current admission policies and make appropriate changes to ensure that GPPH's admissions policies aligns well with its recruitment goals.

GPPH currently has a partnership with Maine Medical Center and the preventative medicine fellows are able to get an MPH degree at a discounted rate. In order to continuing recruiting students who are working in the field of public health, GPPH will aim to negotiate similar tuition discounts and apply for training funding to establish scholarships for other partner agencies and for community public health workers.

H5. Publication of Educational Offerings

Catalogs and bulletins used by the program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

1) Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

   GPPH offers two programs: the 46-credit MPH and the 18-credit GCPH. Descriptions of and requirements for these programs are clearly outlined in https://online.une.edu/public-health/degrees/. The GPPH Program Director and Associate Program Director routinely check the webpage for accuracy of information.

   This page also contains a link to the academic calendar: http://www.une.edu/registrar/calendars/academic-calendars.

   Admissions policies are described at: https://online.une.edu/public-health/admissions/ and in the Graduate Public Health Catalog http://www.une.edu/registrar/2018-2019-academic-catalog/graduate-catalog/public-health. The catalog also contains grading policies, academic integrity standards and degree completion requirements.

   The CGPS student handbook for 2018-2019 can be found at: http://cgps.une.edu/assets/CGPS-Student-Handbook/cgps-student-handbook.pdf