

**Council on Education for Public Health
Adopted on March 2, 2019**

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT THE
PONCE HEALTH SCIENCES UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
September 20-21, 2018

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CRITERIA:
Accreditation Criteria for Schools of Public Health & Public
Health Programs, amended October 2016

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INTRODUCTION

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the Ponce Health Sciences University Public Health Program. The report assesses the program's compliance with the *Criteria for Schools of Public Health and Public Health Programs, amended October 2016*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation, the submission of an electronic resource file with additional documentation, and a visit in September 2018 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, instructional faculty, students, alumni, and community representatives. Although the university and program are bilingual, and the site visit review team requested English language documents where possible, some documents were presented in Spanish. This presented challenges and limitations to validating criteria. The program provided a Spanish/English translator on site for meetings with faculty, students, alumni, and community representatives.

Ponce Health Sciences University (PHSU) is a private, for-profit institution located in Ponce, Puerto Rico. PHSU was originally established in 1977 by the Pontifical Catholic University of Puerto Rico. Through the years, the institution has gone through several different leadership and organizational structures and name changes. In 1980, the institution was named the Ponce School of Medicine. Most recently, the institution was the Ponce School of Medicine and Health Sciences (PSMHS). In 2014, the Arist Medical Sciences University Public Benefit Corporation acquired PSMHS and created what is now PHSU.

PHSU is authorized by the Puerto Rico Council on Education and has been accredited by the Middle States Commission on Higher education since 2003 and was reaffirmed in 2013. The university is also accredited by other specialized accreditors in medicine, psychology, and medical education.

The university's academic units include four schools: School of Medicine, School of Education and Health Sciences, School of Nursing, and School of Behavioral and Brain Sciences. These schools award degrees such as the MD, MS in medical sciences (MSM), PhD in biomedical sciences, MS in biomedical sciences, BSN, PsyD, PhD in clinical psychology, MS in school psychology, post-graduate certificates in neurosciences of learning, and a certificate in family and couples therapy. The public health program is housed in the School of Education and Health Sciences.

The public health program was initiated in 2000, and the first cohort of MPH students enrolled in 2002. The program was accredited by CEPH in 2013 for a five-year term with interim reporting. The program offers three MPH degrees: epidemiology, environmental health, and generalist. The program also offers a DrPH in epidemiology. Current enrollment for the program is 75 students in the master's degree program and 61 in the doctoral degree program.

Instructional Matrix - Degrees and Concentrations			
Master's Degrees	Academic	Professional	Campus based
Generalist		MPH	MPH
Epidemiology		MPH	MPH
Environmental Health		MPH	MPH
Doctoral Degree	Academic	Professional	
Epidemiology		DrPH	DrPH

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met with Commentary			
Designates appropriate committees or individuals for decision making, implementation		The program has an administrative structure that allows for the execution of all of its major functions.	<p>PHP is implementing a formal process, through the re-organization of all the programmatic committees to ensure the participation of non-primary faculty and the interaction between non-primary faculty and between primary and non-primary faculty. (see attachment A1.1). In the re-organization process we eliminated six committees: DrPH Marketing, seminars, service, laboratories, and the accreditation committee. The functions and responsibility of these committees were integrated into the committees that were kept, which are: admissions, assessment, research, curriculum, and workforce. A new program committee was added: External Advisory Committee.</p> <p>Initiatives include the restructuring of responsibilities and functions of the curriculum committee. The committee is now composed of 7 instead of 10 members, and it has been evaluated and identified as a complex committee. Another initiative was to revise the curriculum manual of the program. As</p>	<p>Click here to enter text.</p>
Faculty have opportunities for input in all of the following: <ul style="list-style-type: none"> • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities 		<p>With 11 standing and two ad hoc committees, the structure is comprehensive, albeit complex. The standing committees include Admission, Curriculum, DrPH Program, APE, Marketing, Assessment, Research, Seminar, Workforce Development, Service, and Laboratories. The ad hoc committees are responsible for faculty searches and accreditation. Committees range in size from three to 10 members. Given the number of committees, virtually all faculty populate several committees in various combinations.</p>		
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program		<p>Degree requirements and curriculum design are important responsibilities of the program and are managed through the Curriculum Committee. That committee, the program's largest, includes eight program faculty and two program students. In addition, the university's assistant dean of curriculum and faculty development is an appointed ex officio member to provide consultation with respect to her expertise in pedagogy. During the site visit, the committee members were able to articulate their role</p>		

		<p>in review of new and existing courses and in making recommendations for final approval by the full faculty in their monthly all-faculty meetings. Faculty who met with the site visit team asserted that the program faculty are the sole decision-makers with respect to the MPH and DrPH curricula, with the exception of IHD-919: Inter-Professional Perspectives in Health Disparities, a compulsory university-wide one-credit online course.</p> <p>The Curriculum Committee also discusses policies and processes related to student assessment, with final decisions vetted by the faculty as a whole.</p> <p>The program's Admissions Committee of three faculty and one student reviews applications and makes admissions decisions in accordance with established program policies.</p> <p>Faculty recruitment is the responsibility of an ad hoc committee that normally includes two program faculty and one student. While faculty recruitment is at the program level, faculty promotion and tenure applications are reviewed at the university level. The program is represented on the university committee by two faculty members who are able to provide input.</p> <p>The program has a Research Committee, which is composed of four faculty and an alumnus. The major</p>	<p>part of the action plan integration and participation of the non-primary faculty in the program committees. This committee will meet four times a year (once in each trimester and once in the summer), giving the non-primary and primary faculty will work together. PHP will take care of technology arrangements such as Go to Meeting and Zoom so that the non-primary faculty can participate fully. Other measures taken will be to send the agenda and discussed minutes in the faculty meetings via email.</p>	
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		<p>functions of the committee are maintenance of the faculty research database and administration of the seed grant program. Additionally, a Laboratories Committee, which is populated with six faculty and the same alumnus, is responsible for ensuring the coordination and functioning of the laboratories within the program. Together, the Research and Laboratories Committees engage in strategic planning for the program's research-related goals. In the future, the program plans to solicit External Advisory Board input into that process through an annual meeting of that group.</p> <p>The program charges a Service Committee with maintenance of the faculty service database and coordination of the program's responses to community requests for service and professional development.</p> <p>The team reviewed the membership of program faculty on university-wide committees. These committees are responsible for major university functions, including academic standards and assessment, Faculty Council, student promotions, faculty development and evaluation, faculty grievances, IRB, curriculum, and space allocation, among others. Each committee had at least one program faculty or student representative. The site visit team concluded that the program has adequate representation and input on matters pertinent to the larger university community.</p>		
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		<p>The commentary refers to the lack of evidence of a formal mechanism to ensure engagement by the non-primary faculty and interaction among the non-primary faculty and between primary and non-primary faculty in ways designed to benefit the program. One non-primary faculty member serves on the Research and Laboratories Committees. With that exception, all other committees are populated only by primary faculty. Minutes of selected faculty meetings, which were provided to the team during the site visit, did not appear to have regular representation of non-primary faculty in those meetings. Program leaders acknowledged the limited non-primary faculty engagement and attributed that to timing of the meetings. However, on-site discussions with non-primary faculty indicated that individuals were invited to program functions and meetings, but most of the non-primary faculty members' full-time positions outside of the program constrained their ability to fully engage in programmatic functions.</p>		
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A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Students have formal methods to participate in policy making & decision making		At the time of the site visit, the program had student representation on nine of its 13 standing and ad hoc committees. Vacancies are filled by student volunteers who are interested in program service. On site, the team heard from students that these formal opportunities allow them to be active participants in the ongoing improvement of the program. Furthermore, the students told the team that positions on these decision-making committees are one element of many formal and informal systems for student engagement.	Click here to enter text.	Click here to enter text.
Students engaged as members on decision-making bodies, where appropriate		<p>In addition to committee representation, each class elects representatives to serve as their liaisons with the faculty. Many class representatives were available to meet with the team during the site visit and expressed the importance of their role in communicating between the faculty and their cohort.</p> <p>The program also has a student association with elected officers. This student-focused and student-run organization was dormant until 2018 when current students revitalized it at the encouragement of program faculty. While a relatively new body, the students who met</p>		

		with the team were enthusiastic about the association and proud of the service projects undertaken thus far.		
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A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Defines a vision, mission statement, goals, statement of values		<p>The program's vision is as follows:</p> <p><i>The vision of Public Health Program commits and aspires to be a leader in preparing public health professionals, by excellence in academia and by building and expanding public health knowledge and competency, to improve the health of communities and populations locally and across the world.</i></p> <p>The program's mission is as follows:</p> <p><i>The mission of Public Health Program at PHSU is to provide the highest quality education, research and population-based services. This will be accomplished through an innovative, dynamic, responsive public health curriculum while preparing ethical competent professional public health practitioners and researchers to be able to excel in promoting and protecting health in the community and in a diverse, globalized society.</i></p>	<p>In response to the concern of the accreditation team to our institution, the PHP initiated a process of revision of the mission and vision of the program. This process will end in the summer of 2019. The plan of action includes: (a) PHSU revision and updating of its vision and mission; (b) PHP creation of a committee that will be working with this revision and updating the program's mission and vision so that it agrees with the institution's; (c) using as goal the summer of 2019, the committee will present the findings to the external committee, primary and non-primary faculty, the work accomplished so that they can give us their recommendations as part of the action plan we aligned the institutional vision and mission with the program's mission and vision. We used the current PHSU and PHP mission and vision statements (see attachment B1.1)</p> <p>Answering the CEPH accreditation team's concern relating to the unification of the goals of the MPH and DrPH programs, so they can become</p>	<p>The Council reviewed the program's response to the site visit team's report, which demonstrates an appropriately defined set of goals for the program as a whole. Therefore, the Council determined that the program has addressed the second concern identified in the team's report; no interim reporting is required for this specific issue.</p>
Taken as a whole, guiding statements address instruction, scholarship, service				
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success				
Guiding statements reflect aspirations & respond to needs of intended service area(s)				
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes				

		<p>The program articulates a comprehensive and relevant set of values that reinforce its work: integrity, respect, diversity, service, evidence-based, population perspective, community empowerment, and balance.</p> <p>Two sets of goals guide the program, one centered on the master's and another for the doctoral program. The MPH has five overarching goals: three related to instruction, one for research, and one for service.</p> <p>The DrPH program has one overarching goal to “educate professionals with the knowledge and skills in the epidemiological method as applied to diverse areas of specialization in the identification of health needs and risk factors, and in the evaluation of health programs for the prevention, protection and treatment of illnesses.” Supporting the goal are five objectives, which appear to be comparable to learning outcomes or competencies.</p> <p>The first concern relates to the fact that the guiding statements do not provide the specificity to allow the program to allocate resources or guide program evaluation. The vision statement does not specify how the community/world would be different if the program achieved its mission. While interviews conducted during the site visit allowed the team to develop a clearer sense of the program's identity and future aspirations, the statements miss the opportunity to help the program to</p>	<p>program goals, we did unify the goals of both programs (See attachment t B1.2 and B1.3). This establishes the aligning of the institutional and program mission/vision and goals/objectives</p>	
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		<p>carefully define the unique populations it wishes to serve, delineate the boundaries of its intended reach, develop relevant curricula, and guide evaluation efforts.</p> <p>The second concern pertains to the separation of program goals. Program goals should be under the umbrella of the entire public health program and not separated by degree level. Instruction, research, and service goals should relate to the program as a unit. The goals guide the program's evaluation and assessment plan, which is representative of all degrees offered in the unit of accreditation.</p>		
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B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		Students enrolled in the MPH degree have a maximum time of four years for completion. The MPH cumulative graduation rates exceed the required threshold at 96%, 96%, 93%, and 97% for the 2013-14, 2014-15, 2015-16, and 2016-17 cohorts, respectively.	The Doctoral Program in Public Health with specialty in Epidemiology (DrPH) at PHSU was initiated in 2007. It was designed within a timeframe of nine (9) years. The program is currently approved by the Council on Education of Puerto Rico (CEPR) and accredited by the Middle States Commission on Higher Education (MSCHE). The PHP, including the Dr.PH obtained full accreditation by the Council on	Click here to enter text.
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees		Doctoral students have a maximum of nine years to complete their degrees.		

		<p>The concern relates to the low graduation rates of the DrPH degree program. With the exception of the 2008-09 cohort, the graduation rates for the DrPH program have failed to consistently meet the minimum expectation of at least 60%. For example, the 2009-10 cohort has a current graduation rate of 35% and an attrition rate of 29%. The 2010-11 cohort has a graduation rate of 33% and an attrition rate of 50%, meaning that this cohort will not achieve the minimum graduation rate. The 2011-12 cohort has an attrition rate of 38%, with three more years for students to complete their degree. The 2012-13 cohort did not enroll any students in the doctoral program, but the 2013-14 cohort enrolled seven students with two that have graduated at the time of the site visit. The program did not enroll doctoral students in the 2014-15 cohort.</p> <p>To increase the graduation rate of DrPH students, the program established a corrective action plan in 2015 that includes recruiting and hiring new faculty members, creating a new Research Committee, updating the curriculum, connecting students with research mentors, referring at-risk students to academic counselors, updating the dissertation manual, and increasing the number of software programs in the computer lab for doctoral student use.</p> <p>Through its own evaluation methods, the program has found that the cumulative effect of the corrective action</p>	<p>Education for Public Health (CEPH) on June 11, 2013.</p> <p><u>Additional Faculty Members:</u></p> <p><u>1. New Recruitment</u> The program's plan to improve graduation rates for DrPH degree initiated in 2015 when the program administration changed. Seven (7) new faculty were hired for the epidemiology track. Skype and Go to meeting and Zoom modality have been incorporated into our program, through which another two (2) epidemiologists offer their courses from Washington. These epidemiologists are also members of some doctoral dissertation committees.</p> <p>The current total faculty for the epidemiology track is:</p> <p><u>Classroom Teaching</u></p> <ul style="list-style-type: none"> • Juan Carlos Orengo, Ph.D, MPH, MD - Senior Epidemiologist • Diego Zavala, Ph.D; MS - Senior Epidemiologist • Iván Iriarte, MS, MD, - Senior Epidemiologist • Jessica Irizarry, Ph.D; MPH • Melissa Marzán, DrPH, MPH • Luisa Morales, DrPH • Ruby Serrano, DrPH, MPH • Iris Martinez, Dr.PH, MPH <p><u>Skype /Go to Meeting/ Zoom Modality</u></p> <ul style="list-style-type: none"> ▪ Manuel Bayona, PhD; MPH, MD 	
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		<p>plan has decreased the DrPH attrition rate. Before the implementation of these methods, the average attrition rate per cohort was 26%, and the program has reduced the average rate to 10% after the corrective action. While overall graduation rates are improving, the program has not yet demonstrated that it can consistently move its doctoral students through the curriculum within the maximum allowable time.</p>	<ul style="list-style-type: none"> ▪ Carolina Álvarez Dr.PH, MD <p>The program has also hired six (6) other faculty to support the doctoral dissertations. The new faculty are:</p> <ol style="list-style-type: none"> 1. Yashira Sánchez, Ph.D - Enviromental Track 2. Clara Isaza, Ph.D - General Track 3. Rafael Bredy, MS, MD - General Track 4. Frank Fraticell, Ph.D - General Track 5. Jose Soto, Ph.D - General Track 6. Juan Alberto Santiago Cornier, Ph.D; MD – General Track <p>The institution has authorized the Program to appoint one (1) new faculty for the general track (health administration) for fiscal year 2018-2019.</p> <p><u>2. Development of Research Lines</u></p> <p>Through the PHP Research Committee and the seed money provided by the PHSU, the faculty has increased and developed different research lines. This has helped doctoral students to incorporate research through the work study. The work study helps the students identify research topics during the early stages of the program.</p>	
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			<p><u>Academic Coordination:</u></p> <ol style="list-style-type: none"> 1. The DrPH Coordinator established a series of meetings with thesis directors to discuss the status of each student. Other issues discussed were: <ul style="list-style-type: none"> • Follow-up of doctoral students who could not finish their doctoral studies due to the hit of Hurricane Maria. • Development of an individualized work plan for each dissertation student. • Establishment of tentative graduation dates. 2. The DrPH Coordinator established a series of meetings with all the cohorts (individually) to know their concerns, needs and recommendations to help them during the dissertation period. <ul style="list-style-type: none"> • DrPH Students Need Assessment questionnaire to be administered annually. <ul style="list-style-type: none"> ○ The Need Assessment has been effective, and it has allowed to identify students' problems. • Students Perception Survey <ul style="list-style-type: none"> ○ To evaluate the student's perception in relation to: Number of class, Faculty Advisory, Classroom to be administered annually 	
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			<ul style="list-style-type: none"> • Students satisfaction with faculty office electronic survey <ul style="list-style-type: none"> ○ To revise the faculty schedule for the office hours to attended doctoral students when they are available, to be administered annually. (See attachment B2.1) <p>It was possible to identify that the dissertation process has delayed many of our students from obtaining their doctoral degree. A plan has been established to help these students accelerate this process.</p> <p>The following Seminars with practical topics, style refresher to update concepts related to how to make dissertations have been implemented:</p> <ul style="list-style-type: none"> • How to select a theme for dissertation • How to be successful in graduate studies • Use library database • APA • IRB • Plagiarism • EndNote • SPSS • R Program • Red Cap I (how to build a database) • Red Cap II (questionnaires construction) • Epi Info 	
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			<p><u>Practicum orientation</u></p> <ol style="list-style-type: none">1. Orientation provides students with the recommendation of making their practices in places where they can develop a possible theme for dissertation. This orientation has allowed the students to have background information on the chosen theme prior to enrolling for the first time, network with professionals, or realize that the theme of investigation that they wanted to pursue is not viable.2. The practicum coordinator, has made sure that doctoral students complete their practicum orientation, which is a graduation requirement, during the earlier stages of the program.3. New practice sites have been identified outside of Puerto Rico<ol style="list-style-type: none">a. Wyckoff Heights Medical Center in New Yorkb. Hispanic Serving Health Professions Schools (HSHPS).4. To comply with the new 2016 criteria, an evaluation and updating of the DrPH curriculum was executed.<ol style="list-style-type: none">a. Incorporating courses related to administration of health services, health policy, leadership, teaching	
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			<p>and bioethics, among others.</p> <ul style="list-style-type: none"> b. Incorporating other types of modalities in the integrative learning experience (before culminating experience), which will have an impact on the students completing its doctorate in less time. c. Within the curriculum updating, doctoral students will begin to identify dissertation themes from their first year. This will be established during a research methods course where faculty presented their research. <p><u>Workforce Development</u></p> <p>Doctoral students receive the calendar of conferences offered in workforce development via email. Many of these topics are related to the investigation process. Some examples of the topics covered are: IRB, mathematical models, data quality and others.</p> <p><u>Calls for Employment and Post - doctoral Positions</u></p> <ul style="list-style-type: none"> 1. Every week or every two weeks through the PHP career office, doctoral students receive calls for employment and post - doctoral positions via email. 	
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			<p>These emails are sent to encourage students to complete their dissertations in reasonable time and to not deplete from their timeframe.</p> <p><u>Cumulative Graduation Rates</u></p> <p>The action plan implemented to improve graduation rates has been effective. The following data provides the evidence:</p> <p>PHP calculated the cumulative graduation rate. The PHP has determined that the time for completion of a DrPH is five years, and it is for this reason that we calculate the cumulative Graduation rate using the cohorts of students that had been in the program for 5 or more years in the academic year 2017-2018, according to Table B2.2, Cumulative Graduation Rate. (See attachment B2.2)</p> <p>The cohorts studied were 2008-09, 2009-10, 2010-11, 2011-12, 2012-13, and 2013-14, with a total number of 55 students.</p> <p>At the end of academic year 2017-18, 28 students belonging to these cohorts had finished their DrPH. One student from the 2014-15 cohort also graduated. Not taking this last student (2014-15 cohort) into account the Cumulative Graduation Rate of the cohorts previously mentioned is 51% (28/55). At the end of</p>
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			<p>academic year 2017-18, 13 students were expected to graduate, but the arrival of hurricane Maria, Category 4-5, in September of 2017, devastated the island and was a direct cause for 6 of the students not being able to finish their dissertation in the planned time. If these students had been able to finish as planned, the Cumulative Graduation Rate would be 62%.</p> <p>Implementation of the action plan (CAPA) in March of academic year 2014-15, had as a result that in three academic years the Cumulative Graduation rate went from 7.5% (3 graduates/ 40 students) to 51% (28 graduated/ 55 students) or 62% if hurricane Maria's effect is discounted. This indicated an increase in the Cumulative</p> <p>Graduation Rate of 680% (from 7.5 to 51%) or 826% (from 7.5 to 62%). (See attachment B2.2).</p>	
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B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The post-graduation outcome rate for MPH graduates exceeds the requirement. In 2014-15, 100% of the graduates were either employed or continuing education. In 2015-16, 96% of graduates were employed or continuing education, and 100% of MPH graduates in 2016-17 were employed.	PHSU, together with PHP, are developing initiatives to keep track of alumni. We are using social media such as Facebook and Instagram, to publish information about services up-to-date information regarding the Institution and the Program. The PHP Career and Alumni office is working several initiatives: (1) expanding the alumni database (2) the construction of a service and education section for the alumni linked to the main page of the Program. These initiatives will be implemented beginning in academic year 2019-20.	Click here to enter text.
Chooses methods explicitly designed to minimize number of students with unknown outcomes		For the last three years, 2014 through 2017, 100% of DrPH graduates reported being employed.		
Achieves rates of at least 80% employment or enrollment in further education for each public health degree		<p>The program uses a DrPH and an MPH annual alumni survey to collect information. This survey collects a variety of information but also includes post-graduation outcome measures. The program has success with collecting data on program graduates using a survey. The response rates to the annual alumni surveys are high, with only a handful of graduates choosing not to respond each year.</p> <p>Although the program is able to maintain contact with graduates through the annual alumni survey, it is still developing supplemental forms to gather information on graduates. The program is exploring the use of social</p>		

		media to maintain constant contact with graduates, as well as creating an alumni directory.		
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B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		<p>The program redeveloped the annual alumni survey in June 2018 to gather information related to alumni perceptions of the curriculum. The survey is tailored to the student's degree level. Using a Likert scale of "not well prepared," "moderately prepared," or "well prepared," MPH graduates rate their preparedness in general public health areas such as biostatistics, epidemiology, health policy and management, leadership, professionalism, program planning, and systems thinking. Alumni also provide feedback on their abilities related to working as an effective member of a team, communication skills, critical thinking, and community contributions. DrPH graduates rate their preparedness in areas such as advocacy, communication, cultural orientation, leadership, and professionalism and ethics.</p> <p>Over 60 alumni completed the annual alumni survey; 75% of the respondents were master's alumni. The survey is scheduled to be sent every June and will be sent to each cohort in their graduation year as well as two years post-graduation.</p>	<p>PHP has developed a series of instruments to collect the perceptions of the alumni related to curricular effectivity in the areas of: application in the workplace, skills, competencies and identification of needs for professional growth. The instruments used to collect the data will offer quantitative as well as qualitative information. For qualitative data gathering we will be using focus groups. This will give us information regarding alumni perception in the areas mentioned above. (See attachment B4.1) Quantitative data will be gathered using the following methods: 1. MPH and DrPH alumni survey, designed to evaluate application of skills, quality of teaching, professional growth needs, and services to alumni. This instrument will be administered annually in electronic and printed forms at the Public Health</p>	<p>The Council reviewed the program's response. The response demonstrates that a number of committees have taken responsibility for monitoring incoming alumni feedback and developing responses. The Council agreed that the program's response addressed this component of the team's concerns, the second concern identified in the team's report, so no reporting will be required on this specific issue.</p>
Documents & regularly examines its methodology & outcomes to ensure useful data				
Data address alumni perceptions of success in achieving competencies				
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements				

		<p>Based on the first round of collected feedback, the program realized that the survey needs some modifications. The program also intends to contact alumni to invite them to meetings and focus groups to gather meaningful information.</p> <p>The first concern pertains to the lack of an ongoing, systematic process to collect alumni perceptions of curricular effectiveness. The survey the program uses was redeveloped within the last year and has only been administered once. Although there are plans to regularly collect this data, this survey is not yet an established collection method.</p> <p>The second concern is that alumni self-assessment in the areas queried was not positive. Based on survey results, only 50% of MPH alumni felt prepared in the area of biostatistics, 67% felt prepared for environmental health, 74% for epidemiology, 67% for leadership and professionalism, 57% for program planning, and 48% for systems thinking. Similarly, DrPH alumni did not report feeling prepared in certain areas outlined on the survey. For example, 50% of the respondents felt prepared in the areas of advocacy and communication, 69% for community/cultural orientation, and only 56% in the area of leadership. However, 80% of doctoral alumni felt prepared in the area of professionalism and ethics.</p> <p>Despite the seemingly low positive feedback, site visitors were told how instrumental the program was in some graduates' careers. Students and alumni who met with the team attributed the success they have now in their career</p>	<p>Program Alumni Meeting (Back to Home). The career coordinator was responsible for administering the instrument at the first meeting, scheduled for December 14, 2018. (See attachment B4.2)</p> <p>2. Employer survey: this instrument will serve to receive the input of the employers of alumni, so we can evaluate the skills acquired during their time in the Program, and how these are applied to the work place. This instrument will be administered yearly by the Career Coordinator and will be sent to the administrators of the work place where our alumni are working in January 2019 (See attachment B4.3)</p> <p>3. Public Health Practitioners-Educational Needs and Professional Growth Questionnaire: The function of this questionnaire is to evaluate and identify the needs of our alumni as public health practitioners, planning of educational activity calendar and professional development programs for the academic year. This questionnaire will be administered in the Public Health Program Alumni Meeting (Back to Home), an all the communities of interest of the PHP as described in criteria F3. The Career Coordinator will be responsible for the administration of this survey. (See attachment B4.4)</p>	
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		<p>to their degree and experiences in the program. One alumna drove over two hours for the site visit because she wanted to share her positive experiences with the program.</p> <p>The alumni survey also asks graduates about their agreement with statements that include, “The program at PHSU prepared me to engage in a diverse world” and “The graduate program prepared me for my current career.” Additionally, the survey requests that alumni provide their general opinion on the alignment of the curriculum with work requirements and functions in the professional field. Data pertaining to alumni perceptions in these areas were not available for review by the team at the time of the visit.</p> <p>The program could not share specific plans to improve on students’ preparedness in the identified areas. Instead, the program shared plans to modify the survey to obtain better and more meaningful information. The program also plans to collect more qualitative data through meetings and focus groups.</p>	<p>The following program committees will be using the data collected by these qualitative and quantitative instruments:</p> <p><u>Curriculum Committee:</u> To make curricular updates</p> <p><u>External Advisory Committee:</u> To make recommendations regarding the strategic plan development, curriculum updates, new academic offerings and job placement.</p> <p><u>Assessment Committee:</u> To evaluate acquired competencies and how they are used in the labor area.</p> <p><u>Workforce Development Committee:</u> the instruments used to help develop the calendar of educational and professional development activities will be the alumni survey, employee survey, and the professional development and growth questionnaire. We anticipate that competencies and skills of the new public health practitioners will be strengthened.</p> <p><u>Career Services Coordinator:</u></p> <p>Will use the obtained data to evaluate employer feedback in relation to skills and competencies (strengths and weakness) job placements and salary.</p> <p>The Program, together with the Career office and the Workforce Committee,</p>	
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			<p>prepared an action plan to respond to the findings identified in the alumni survey administered in June 2018.</p> <p>Areas identified as needing strengthening by the alumni in the alumni survey were incorporated the 2019 Workforce Development calendar (See attachment B4.5) The areas identified where: biostatistics, environmental health, epidemiology, leadership, professionalism, program planning, system thinking, advocacy, and cultural competence. These topics will be offered in the following modalities: prudential, "going to meeting", recordings that will be placed in the alumni page at PHP.</p> <p>One of the initiatives taken by PHP is inviting the alumni to audit some of the courses, to review and refresh concepts, competencies, and skills. This will be implemented beginning in February 2019, at the start of the third academic trimester.</p> <p>We are expected to be able to begin, in January 2019, the strengthening of the alumni section of the web page with articles, interviews, books, recommendations, speaker announcements, etc.</p> <p>At the program level we have also made some adjustments to strengthen some</p>	
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			<p>of the weak areas identified by the students, such as: <u>System Thinking</u></p> <p>The Curriculum was revised so that all the specialties take this course in their first year of their master's studies. A series of workshops were also implemented for both students and faculty. <u>Health Care Administration:</u> The curriculum was revised so all specialties take this course in the first year of their master's degree.</p> <p><u>Biostatistics:</u> While the professor offers the course there are teaching assistants to help with any questions, The Program offers individual tutors, free of charge, as well as reviews by the professors teaching the course when it's time for the comprehensive exams. Related to the comment offered by the accreditation team in reference to not having seen the quantitative data of the perception questionnaire given to the MPH and DrPH alumni, in the following areas:</p> <ul style="list-style-type: none"> • <i>"The program at PHSU prepared me to engage in a diverse world"</i> • <i>"The graduate program prepared me for my current career."</i> • <i>Provide their general opinion on the alignment of the curriculum with work</i> 	
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requirements and functions in the professional field

Once again, the evidence that was previously presented during the site visit process is submitted for consideration

Quantitative data follows:

Alumni Survey June 2018:

Premise	DrPH + MPH Alumni	
	n =	%
The PHP prepared me to engage a diverse world.	51	82
The graduate Program prepared me for my career.	48	77
Provide their general opinion on the alignment of the curriculum with work requirements and functions in the professional field.	52	84

			<p>The alumni perception survey was revised and modified to include qualitative premises.</p> <p>4. Public Health Program Workforce Development Calendar 2019</p> <p>The workforce for public health practitioner is changing, demanding and comprehensive, which implies a great challenge for the maintenance of all the necessary skills and competencies. Our worked force is focused on: doctors, residents, dentist, researchers, nurses, pharmacists, health educators, environmental, and public safety professionals, researchers, optometrists, case managers, students, alumni among others.</p> <p>Our responsibility as a Program is to offer training so that public health practitioners are prepared with the skills, competencies and knowledge to be able to work in the changing field of public health field.</p> <p>List of professional growth trainings for the period 2019-2020</p> <ul style="list-style-type: none"> • Observational research design& pilot studies. • Biostatistics in the 4 components of original presentation: Introduction, Methodology, Results and Discussion 	
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			<ul style="list-style-type: none"> • Quality control in data management and research protocol. • Bioethics in research. Forms and evaluation process at Ponce Research Institution (IRB) • Mathematical modeling in epidemiology and sciences • Addressing Public Healthcare Problems through Real World (RW) Observational Studies • Citizen participation in the legislative assembly • Leadership and professionalism • Statistics in decision making • Public Health and environmental health as they converge? • Modern epidemiology • Program Planning Steps • What is critical thinking? • Topic in Advocacy: Child Abuse & Neglect • Basic Cultural Competence Principles: • System Thinking <p>2018 Dec -MPH and DrPH Alumni Survey Data (See attachment B4.6)</p>	
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B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
<p>Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success</p>		<p>The program's Assessment Committee, comprising three faculty and one student, has developed a three-year plan that addresses five goals in the following areas: research, academic excellence, service, infrastructure, and diversity/disparities. For each goal, there are several measures that allow the program to capture a broad understanding of how it is functioning across a variety of domains.</p>	<p>As an answer to the concern expressed by the accreditation team, (a) once the program's mission and vision was aligned with the institution's, we proceeded to look at the program's goals and goals of the evaluation plan. This was all part of our plan of action (See attachment B5.1).</p>	<p>Click here to enter text.</p>
<p>Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined responsible parties & cycles for review</p>		<p>The first concern relates to the lack of alignment between the guiding statements and the goals in the evaluation plan. As described in Criterion B1, the program has five overarching MPH-related goals and one DrPH-related goal. However, the goals presented as the program's guiding statements do not match the goals that appear to be directing the evaluation plan. For example, the program's goal related to service written in the guiding statements in Criterion B1 is "To contribute to the improvements of the populations' health by providing high quality health care services, technical assistance, and consulting services." The goal related to service in the evaluation plan is to "Build vibrant collaborative relationships with local and global communities, government, and private sector." It is challenging for the program to truly measure success or challenges against its own mission, vision, and goals if the evaluation plan does not align its measures to the actual guiding statements.</p>	<p>Also, as part of the action plan, we proceeded to incorporate a table with the description of the evaluation instruments in the PHP Assessment Manual. This is a descriptive table, and it provides the following: (1) name and codes used to identify every instrument; (2) purpose (what do we want to obtain with each one); (3) how will we use the data obtained; (4) target audience; (5) person responsible for administering it; and (6) frequency of administration.</p> <p>(See attachment B5.2a, B5.2b and B5.3)</p> <p>The mentioned instruments were developed and revised to help obtain data to evaluate the services offered to students, faculty, to the community, alumni, and health practitioners. It will</p>	

		<p>Despite the lack of alignment between the guiding statements and the evaluation plan, several measures appear to have clear linkages to advancing the field of public health, e.g., numbers of publications and presentations, number of health professionals and non-program health students trained in public health research methods, proportions of courses that include community interactions or address issues related to Puerto Rico's unique population, and number of workforce continuing education trainings offered.</p> <p>Other measures allow the program to evaluate how it is promoting student success, e.g., research grant funding available for students, graduate satisfaction with the curriculum, innovation and currency of the courses, and faculty development for those with below-standard course evaluation scores.</p> <p>In addition, there are several other measures that appear to be process indicators or operational/curricular requirements. Examples include inclusion of competencies on syllabi, pass rate on comprehensive examinations, satisfaction of faculty with infrastructure and resources, inclusion of the program associate dean in budget decision making, and inclusion of leadership, ethics, and social justice in coursework.</p> <p>For each measure, the team was able to determine how and from where data are obtained and who participates in the review process. For instance, for Goal A.1: Research portfolio will grow, one measure within that goal monitors the proportion of faculty who submit external grant proposals. The program's Research Committee gathers data from the faculty self-report, compiles it within their</p>	<p>help evaluate and maintain identified weakness areas.</p>	
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		<p>annual report, and presents it to the full faculty for review annually.</p> <p>The second concern is the lack of evidence of a systematic, ongoing, and well-documented plan for program evaluation. The team was unable to review minutes documenting routine meetings of governance bodies in which stakeholders were engaged in abstracting data from relevant sources, interpreting those data, making plans based on findings, acting, and evaluating the success of the improvement efforts. Furthermore, the evidence presented to the team showed that the program evaluation process, headed by the Assessment Committee, was only recently initiated. Committee meeting minutes date back to January 2017, indicating to site visitors that the systematic procedure of evaluation is a new process.</p>		
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B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met with Commentary			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		<p>The program presents evidence that it uses data to make program changes. Two examples clearly and directly link to data that emerged from the evaluation system. One such example is the implementation of various strategies to address the below-threshold DrPH graduation rate. Based on student surveys and informal conversations with doctoral students, the program identified and implemented new methods to get students through the</p>	<p>To answer the accreditation team's comment the PHP has developed a plan of action with the data obtained from the evaluation instruments.</p> <p>The program committees using this data will be assessment, curriculum, admissions, research, external</p>	<p>Click here to enter text.</p>
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation				

<p>findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)</p>		<p>curriculum. Methods include developing an introductory doctoral-level research course to be completed in the first year and better alignment between students and faculty mentors. The second example is the creation of a new staff position to assist students with job and internship placements. The position was created in response to feedback from students about the need for resources to support them in identifying site placements.</p> <p>Students told site visitors that the program is effective in soliciting their feedback, both formally and informally and that the program acts to remediate problems that students raise. An example provided to site visitors indicated that the students complained about a lack of dedicated space to use outside of the classroom. Program leaders worked with university leaders and carved out a dedicated public health student space with a computer lab.</p> <p>The commentary relates to the thinly documented regular, substantive review of evaluation data. The program engages in reviews of evaluation findings, but has a limited record of sustaining and documenting such reviews. Systematic review does not appear to be part of a feedback loop yet. Faculty stated that Hurricane Maria, which hit the island in September 2017, altered its priorities for a period of time away from the administrative aspects. However, as described above, there is evidence</p>	<p>committee, and the career coordinating office.</p> <p>Each committee prepares a report and presents to the primary and non-primary faculty and to the external committee, regarding the use of the information obtained, their plan of action, and how this aligns with the objectives/mission/vision of the program.</p>	
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		that the program identifies areas of improvement that prompts change.		
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C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		The program's expenditures have increased from over \$1.0 million in 2013 to \$2.7 million in the 2018 budget. Revenues have exceeded expenditures in three of the last six reported budget years. Some budget line items have fluctuated, such as the travel line, which went from \$25,000 in 2013 to \$9,000 in the 2018 budget, and student support increased from \$14,000 in 2013 to \$60,464 in the 2018 budget. Overall, the program has a healthy, robust budget. The program is encouraged to pursue external funding, which may be used at the program's discretion.	Click here to enter text.	Click here to enter text.
Financial support appears sufficiently stable at time of site visit		Faculty salaries are determined by the program's leader, who is also the dean. Salaries are based on faculty rank and the institutional faculty compensation scale. Faculty salaries may be supplemented with external research funds. Salaries may increase or decrease based on the term of the research grant. If the program needs to request additional faculty positions, it uses the ratio of one professor for every 10 students to justify additional funding. Program leaders told site visitors that since 2003,		

		<p>all requests for additional faculty had been approved by the university.</p> <p>The program defines operational costs as expenses directly associated with the program for the fiscal year. Examples of operational costs include faculty support for conference participation, teaching supplies, laboratory supplies, and funding for official program activities. Operational costs do not include expenses of departments that provide support, such as administrative, student services, and academic divisions.</p> <p>All tuition and fees are returned to the program. Any net income is allocated to institutional support. The program is expected to cover all program expenses as well as a portion of the expenses of supporting units. If the enrollment projection is not achieved, the budget is subject to a reduction proportional to the enrollment shortage. University leaders stated to the site visit team that they recently filed an application with the US Department of Education to increase funds for work-study opportunities.</p> <p>All research operations are carried out under the administration of the Ponce Research Institute (PRI). The current indirect cost of PRI is 56.8% and is approved until June 30, 2019. Some federal agencies have other pre-established indirect cost rates that vary, but unless stated</p>		
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		specifically when a request for proposal is released, the program faculty default to the PRI rate.		
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C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
School employs at least 21 PIF; or program employs at least 3 PIF		The program maintains sufficient faculty levels. The total number of primary instructional faculty (PIF) is 17, and the total number of non-primary instructional faculty is 18. Each public health concentration meets the minimum PIF count.	PHP modified the "Perception Questionnaire of Active Students in the Public Health Program (Academic Year 2017-2018) where perception of students regarding variables such as class size, number of students, advising, and how they feel being a student at PHP of PHSU.	The Council reviewed the program's response to some conflicting data about availability of faculty office hours. In general, students reported satisfaction with faculty attention, and the program's response indicated that faculty were increasing office hours, so the Council determined it appropriate to change the finding for this criterion from met with commentary to met.
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable		The MPH generalist has six PIFs and nine non-PIFs. The MPH in environmental health has three PIFs and four non-PIFs. The MPH and DrPH in epidemiology have eight PIFs and five non-PIFs, which is sufficient to satisfy the expectation for two degree levels.	The new version included quantitative and qualitative items. The new questionnaire will be administered to PHP students in 2019.	
Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable		The program follows the institution's definition of full-time for faculty. PHSU defines a full-time faculty member as one that contributes 27-40 hours a week to the institution. This definition was used in the calculation of faculty FTE for the program. All program faculty meet the university's definition of full-time, and the program states that all	(See attachment C2.1))	
Ratios for general advising & career counseling are appropriate for degree level & type			Regarding the accredited team comment about the availability of faculty to meet with doctoral students	

Ratios for MPH ILE are appropriate for degree level & nature of assignment		faculty contribute to teaching, research, service, and mentoring. The teaching and administrative workloads vary, which accounts for the difference in the program FTE. Faculty stated during the site visit that the program must follow the institution's definition of full-time, but almost all of the public health faculty dedicate close to 40 hours a week to the program.	in person, PHP will revise the time the faculty reserves for student attention.	
Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable	N/A		With our desire to improve the quality of the service offered to the doctoral students in mind, PHP has decided to administer the doctoral student satisfaction survey in electronic form. One of the topics to explore in this survey is the identification of more accessible hours for in person meetings between faculty and students.	
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable		The program maintains appropriate general advising and career counseling ratios. General advising ratios are separated by degree level. The average advising load for faculty with respect to master's degree students is three, with a maximum of four students. The ratios are identical for doctoral students. Students and alumni were complimentary of the program's advising services.		
Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)		The program maintains these same ratios for the MPH integrative learning experience as well as the DrPH integrative project. The average advising and mentoring load for faculty for both degree levels is three, with a minimum of one and maximum of four students per faculty member.		
Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities)		Both MPH and DrPH students appear to be satisfied with the program's class size and its relation to quality of learning. Through a survey administered to graduate students in 2017-18, 82% of respondents agreed that class sizes are adequate to promote discussion in the courses. Roughly 77% also agreed that the atmosphere in the classroom provides for effective collaboration between students and professors. The program does not collect any qualitative data related to student perceptions of class size, but visitors did get feedback from students during the site visit.		

		<p>MPH students appear to be satisfied with faculty availability. A needs assessment survey that was administered in 2016-17 found that MPH students rated the availability of faculty as a 4, on a Likert scale where 1 is very dissatisfied and 5 is very satisfied. In the updated survey administered in 2017-18, 65% of MPH students agreed that faculty office hours were adequate, and 82% agreed that professors are available to answer questions using technology. Absent qualitative data from the program, site visitors were able to discuss faculty availability with current students. All of the students indicated that faculty are always available to meet. One student explained that he works full time, has a family, and is working toward his MPH. His professor met in the evening with him because that was the only time the student had available in his day to meet.</p> <p>The commentary relates to the need for attention to some aspects of doctoral student satisfaction with faculty availability. Results from the 2016-17 needs assessment survey indicated that doctoral students were neither satisfied nor dissatisfied with availability of faculty. A survey administered in 2017-18 found that DrPH students were not satisfied with faculty office hours, with 69% of doctoral student respondents not in agreement that faculty office hours are adequate. However, respondents were more than satisfied with the ability to reach faculty by email, phone, or Skype. Seventy-seven percent of doctoral students stated that professors are available to answer questions through various technologies. During the site visit, the team received positive feedback from DrPH students regarding availability of faculty. One doctoral candidate described weekly meetings with her</p>		
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		thesis director and another described multiple weekly contacts with another faculty member.		
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C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals		<p>The program has 3.0 FTE support staff consisting of two administrative assistants and a career and program promotion coordinator. These positions are not shared with other units outside of the program and each devotes 40 hours per week to the program. The coordinator position was approved in 2017 and focuses on student support activities related to internships and job placements. Discussions with faculty and students confirmed that staff positions are meeting current needs and are fully able to support the program's mission and goals.</p> <p>Program leaders indicated the need for a public health assessment coordinator to direct program assessments and develop action plans. These duties are currently handled by two teaching faculty members, but there are plans to fund this new position on a part-time basis.</p>	Click here to enter text.	Click here to enter text.
Staff & other personnel resources appear sufficiently stable				

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		The public health program and its labs are located in a building that is shared with the nursing program and the Purchasing and Receiving Department. Within the building, the program is allocated 14 closed offices, two conference rooms, a student study area, three staff office spaces, and a lobby reception area. All program classes are held in this building in four dedicated classrooms and four labs.	Click here to enter text.	Click here to enter text.
Physical resources appear sufficiently stable		Computer labs are offered in a separate building with additional laboratory and research activities space in the research building. The program has identified the need for small conference rooms to meet individually with students as well as a need for increased student study areas and faculty research space. The program has submitted a master plan to the university to guide the development of a new physical facility for the program as it contemplates growth for the program. However, through discussions with university leaders, the team learned that the program was not going to receive their request for a new physical facility because the entire campus is going to be rebuilt with recent monies received from a donor. As described by the university president, the campus is going to have larger academic buildings, student dorms, and a skywalk connection to the hospital across the street in order to		

		<p>establish an academic health center, which would greatly benefit all of the university's disciplines.</p> <p>Both students and faculty agreed that the space for the program is more than adequate. The program shares classroom space with the nursing program, but the nursing classes are held during the day, and public health classes are in the evening, so there is never classroom space conflict. Students praised the university and the program for providing alternative student lounge space after Hurricane Maria in 2017 destroyed the building that formerly served as the student lounge.</p>		
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C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Adequate library resources , including personnel, for students & faculty		The university has adequate library and IT resources. During the site visit, students expressed satisfaction with current resources and specifically noted that the library is now open 24 hours a day, seven days a week with eight rooms dedicated to student use for private study. Additionally, the library has 60 computers for use by students, faculty, and staff. The library provides students and faculty with access to online data resources through Athens and participates in interlibrary loans if a book or journal is needed from other libraries. Faculty and students	Click here to enter text.	Click here to enter text.
Adequate IT resources, including tech assistance for students & faculty				
Library & IT resources appear sufficiently stable				

		<p>have support from three professional librarians, four library assistants, and one secretary.</p> <p>The institute has an Educational Technology Division that supports students, faculty, and staff in using Moodle, the online learning management system. All program faculty have SPSS, Berkeley Madonna, STELLA, Minitab, and End Note on their office computers. During the site visit, students also noted that the program provides an iPad to each student, and Wi-Fi is available throughout the campus. Program faculty have access to numerous other IT services and delivery platforms that assist in teaching techniques.</p>		
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D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		All MPH students are required to enroll in the three-credit course MPH 5101: Fundamentals of Public Health, which the program uses to deliver the 12 foundational knowledge areas. DrPH students are also required to enroll in the course unless they have completed a CEPH-accredited MPH degree. A review of the course syllabus and additional course materials provided during the site visit allowed the team to validate coverage of selected knowledge areas in that course.	<p>To assure and validate the didactic coverage of all knowledge areas we requested the professor to once more revise the didactic content of the course and provide evidence of those two (2) learning objectives with their corresponding assessment activity.</p> <p>Learning objective #11, <i>Explain how globalization affects global burden of disease</i>, will be covered by Dr J.C.</p>	The changed the finding for this criterion from partially met to met, based on the program's response. The site visitors' concern related to inadequate documentation that foundational knowledge areas 11 and 12 were included in the curriculum. The program provided documentation that changes in the didactic content of the MPH 5101

		<p>The concern relates to the fact that the site visit team was unable to validate didactic coverage of two of the knowledge areas: #11: Explain how globalization affects global burden of disease and #12: Explain an ecological perspective on the connections among human health, animal health, and ecosystem health (e.g., One Health). During the site visit, faculty indicated to the team that knowledge area #11 may be covered in an emerging diseases course that will be developed in the future.</p>	<p>Orengo, as a special guest speaker at the Research Methodology course, MPH 7333, on February 4, 2019. There are four (4) papers reviewed by the speaker for the discussion of the topic. A model for the implications, relationship and conclusion of the concept with its corresponding activity rubric will be requested as an assignment. (See attachment D1.1).</p> <p>Learning objective #12, <i>Explain an ecological perspective on the connections among human health, animal health, and ecosystem health</i> was covered by Dr. M Roubert with a practical exercise including the design of their own flowchart explaining how each action is connected within the environment. A rubric was provided for the assessment of the objective. (See attachment D1.2).</p> <p>Also, a new syllabus template requesting specific data related to every learning objective, competency and proper assessment activity has been provided to assure the attainment of the criterion (See attachment D1.3). A new MPH 5101 course syllabus including assignments and rubrics was created and provided for your revision (See attachment D1.4).</p>	<p>course resulted in adequate coverage of knowledge areas 11 and 12.</p>
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D1 Worksheet

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

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		<p>All MPH students take the same 12 core courses in their first year of the program. Courses address fundamentals of public health, biostatistics, epidemiology, environmental health, management, bioethics, psychosocial aspects of health, communication, health policy, and perspectives in health disparities.</p> <p>The concern is that not all foundational competencies are appropriately covered and assessed in the curriculum. Site visitors could not validate the majority of the foundational competencies. Most competencies could not be validated due to the lack of an obvious didactic component as well as the lack of a rigorous and appropriate assessment opportunity. For example, didactic coverage could not be verified through the syllabus for competency #17. This particular competency requires students to apply negotiation and mediation skills; however, the assessment instrument is an exam, which misaligns with the verb of the competency. Other foundational competencies for which reviewers could not validate both the didactic component and an appropriate assessment are #2, 3, 7, 8, 13, 16, and 21.</p>	<p>To assure and validate all MPH didactic coverage and/or assessment opportunity of all foundational competencies in MPH Core courses (1st year, we requested that the faculty revise their courses once more. They were instructed to be sure they properly align each competency, and their verbs with the proper corresponding assessment opportunity. The matrix with foundational competencies with their correspondent activity is provided. (See attachments D2.1).</p> <p>To assure each faculty member understood this requirement, we provided and trained them with several <u>didactic</u> materials, such as <i>Bloom's taxonomy of measurement and actions verbs</i> and <i>Webb depth of knowledge DOK-Norman Model</i>. (See attachment D2.2).</p> <p>Several didactic workshops will be designed and required of <u>all</u> faculty members, including professional services faculty. The delivery of the workshops will be both on site and recorded to assure secondary faculty</p>	<p>The Council reviewed the program's response and accept the program's documentation as evidence of sufficient assessment for the competencies mentioned in the team's report. The program provided course syllabi and an updated template demonstrating the curricular elements that provide didactic coverage and assessment of each of the highlighted foundational competencies. The Council changed this finding from partially met to met.</p>

		<p>With some competencies, reviewers were able to validate didactic coverage of a competency but not an appropriate assessment opportunity. An example is foundational competency #14; site visitors were able to validate the didactic underpinning of the competency in the course, but could not validate the assessment. In this case, students were assessed on this competency using a true/false exam, whereas the competency requires a student to advocate. Other examples of this deficiency are foundational competencies #5, 6, 11, and 15.</p> <p>Program faculty stated that they believe that most of the foundational competencies are taught and appropriately assessed; however, the best examples were not presented to the site visit team. Faculty also agreed that some assessment opportunities did not match the verb of the competency. Additionally, the program has created a new syllabus template that only a few courses have implemented in the trimester of the site visit. An initial review of the syllabus template suggests that it is more detailed and may be better positioned to connect course content with competencies, outcomes, and assessment activities.</p>	<p>will be able to comply with this requirement. The suggested frequency of scheduling these workshops will be monthly. These workshops will be provided by PHSU qualified personnel with formal academic doctoral degrees in education including curriculum and health education.</p>	
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D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to the breadth of settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	Yes
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes
4. Interpret results of data analysis for public health research, policy or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & societal levels	Yes
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design or implementation of public health policies or programs	Yes
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	Yes
11. Select methods to evaluate public health programs	Yes
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics & evidence	Yes
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply principles of leadership, governance & management, which include creating a vision, empowering others, fostering collaboration & guiding decision making	Yes
17. Apply negotiation & mediation skills to address organizational or community challenges	Yes
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	Yes
21. Perform effectively on interprofessional teams	Yes
22. Apply systems thinking tools to a public health issue	Yes

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Assesses all DrPH students, at least once, on their ability to demonstrate each foundational competency (see worksheet for detail)		<p>All DrPH students take a set of core courses that cover the foundational competencies. These 16 courses include topics such as epidemiological research methods, biostatistics, public health leadership and advocacy, planning and evaluation, bioethics, health administrations, survey questionnaire design, teaching epidemiology, and advanced biostatistics.</p> <p>The concern is that not all DrPH foundational competencies are appropriately taught and assessed in the curriculum. As with the MPH curriculum, site visitors could not validate the majority of the doctoral foundational competencies. Most of the competencies could not be validated due to a lack of didactic coverage as well as the lack of a rigorous and appropriate assessment opportunity. For example, DrPH foundational competency #14, Design a system-level intervention, could not be validated because the content coverage is not clear on the syllabus, and the assessment requires students to peer review papers. The assessment does not align with the verb of the competency. Examples of other foundational DrPH competencies with similar challenges are #1, 2, 6, 8, 11, 16, 17, 19, and 20.</p>	<p>To assure and validate all DrPH didactic coverage and/or assessment opportunity of all foundational competencies we requested the faculty to revise their courses again. They were instructed to be sure they properly align each competency, and their verbs with the proper correspondent assessment opportunity. The matrix with foundational competencies with their correspondent activity is provided. (See attachment D3.1)</p> <p>To assure each faculty member understood this requirement, we provided and trained them with several <u>didactic</u> materials, such as <i>Bloom's taxonomy of measurement and actions verbs</i> and <i>Webb depth of knowledge DOK-Norman Model</i> (See attachment D3.2).</p> <p>Several didactic workshops will be designed and required of <u>all</u> faculty members, including professional services faculty. The delivery of the workshops will be both on site and recorded to assure secondary faculty will be able to comply with this requirement. The suggested frequency of scheduling these workshops will be</p>	<p>The Council reviewed the program's response and accept the program's documentation as evidence of sufficient assessment for the competencies mentioned in the team's report. The program provided course syllabi and an updated template demonstrating the curricular elements that provide didactic coverage and assessment of each of the highlighted foundational competencies. The Council changed this finding from partially met to met.</p>

		<p>With some competencies, reviewers were able to validate didactic coverage of a competency but not an appropriate assessment opportunity. An example is foundational competency #5, Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies. The program provided the DPH 6300: Public Health Leadership & Advocacy syllabus for review. The team was able to validate didactic coverage of the competency but did not find the assessment to be appropriate. The program assesses this competency through an exam. The exam questions ask students to fill in the blank and answer multiple choice questions, which do not require candidates to apply the competency. Other examples of this deficiency are foundational competencies #4, 10, 15, and 18.</p> <p>The program will also be using new syllabus templates for DrPH courses similar to the MPH courses, which may improve the ability to document content and assessments.</p>	<p>monthly. These workshops will be provided by PHSU qualified personnel with formal academic doctoral degrees in education including curriculum and health education.</p> <p>Also, a new DrPH syllabus template requesting specific data related to every foundational competency and proper assessment activity was provided to assure the attainment of the criterion. Assignments rubrics translated into English are provided. (See attachments D3.3-D3.4)</p>	
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D3 Worksheet

DrPH Foundational Competency	Yes/CNV
1. Explain qualitative, quantitative, mixed methods & policy analysis research & evaluation methods to address health issues at multiple (individual, group, organization, community & population) levels	Yes
2. Design a qualitative, quantitative, mixed methods, policy analysis or evaluation project to address a public health issue	Yes
3. Explain the use & limitations of surveillance systems & national surveys in assessing, monitoring & evaluating policies & programs & to address a population's health	Yes
4. Propose strategies for health improvement & elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders & other partners	Yes
5. Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior & policies	Yes
6. Integrate knowledge, approaches, methods, values & potential contributions from multiple professions & systems in addressing public health problems	Yes
7. Create a strategic plan	Yes
8. Facilitate shared decision making through negotiation & consensus-building methods	Yes
9. Create organizational change strategies	Yes
10. Propose strategies to promote inclusion & equity within public health programs, policies & systems	Yes
11. Assess one's own strengths & weaknesses in leadership capacities, including cultural proficiency	Yes
12. Propose human, fiscal & other resources to achieve a strategic goal	Yes
13. Cultivate new resources & revenue streams to achieve a strategic goal	Yes
14. Design a system-level intervention to address a public health issue	Yes
15. Integrate knowledge of cultural values & practices in the design of public health policies & programs	Yes
16. Integrate scientific information, legal & regulatory approaches, ethical frameworks & varied stakeholder interests in policy development & analysis	Yes
17. Propose interprofessional team approaches to improving public health	Yes
18. Assess an audience's knowledge & learning needs	Yes
19. Deliver training or educational experiences that promote learning in academic, organizational or community settings	Yes
20. Use best practice modalities in pedagogical practices	Yes

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		The program has defined at least five distinct competencies for each concentration and degree level. The MPH in environmental health concentration has five competencies that require to students to go beyond the foundational competencies. The MPH generalist degree has nine competencies, with at least five that are distinct from the foundational competencies. The MPH in epidemiology has seven competencies, with at least five that are distinct. DrPH students demonstrate eight concentration competencies that appear to be appropriate for the degree type and level.	To assure and validate MPH (general and epidemiology tracks) and DrPH didactic coverage and/or assessment opportunity of their specialty competencies we requested the faculty to revise their courses again. They were instructed to be sure they properly align each competency, and their verbs with the proper corresponding assessment opportunity (See attachments D4.1-D4.3)	The Council appreciates the program's response but was not able to validate compliance based on the information provided.
Assesses all students at least once on their ability to demonstrate each concentration competency			To assure each faculty member understood this requirement, we provided and trained them with several <u>didactic</u> materials, such as <i>Bloom's taxonomy of measurement and actions verbs</i> and <i>Webb depth of knowledge DOK-Norman Model</i>	
If applicable, covers & assesses defined competencies for a specific credential (eg, CHES, MCHES)	N/A	The concern is that site visitors could not validate that all students are assessed at least once on their ability to demonstrate each competency. Similar to the foundational competencies, the visitors either could not find clear didactic coverage of the skill, the assessment was not appropriate, or both. The team was able to successfully validate two of the concentration competencies for the MPH generalist track; however, the rest of the concentration competencies could not be validated. The team could only validate two of the MPH in	Several didactic workshops will be designed and required of <u>all</u> faculty members, including professional services faculty. The delivery of the workshops will be both on site and recorded to assure secondary faculty will be able to comply with this requirement. The suggested frequency	

		<p>epidemiology's concentration competencies; the rest could not be validated.</p> <p>Concentration competencies where the didactic coverage was validated, but the assessment was not, include the MPH generalist concentration competencies #5 and 6; MPH in epidemiology concentration competencies #2, 3, 4, 6, and 7; DrPH epidemiology concentration competency #3.</p> <p>For one concentration competency, the team was not able to validate didactic coverage, but was able to validate an assessment. This is true for MPH generalist concentration competency #8.</p> <p>There are also concentration competencies in which the team could neither validate didactic coverage of the competency nor validate an appropriate assessment opportunity. These include MPH generalist competencies #2, 3, 4, and 7 and DrPH in epidemiology competency #4.</p> <p>Although reviewers were able to identify at least five appropriate competencies for each concentration as required by this criterion, some concentration competencies were not distinct from the foundational competencies, such as the MPH generalist competency #4 and MPH in epidemiology competency #4. One</p>	<p>of scheduling these workshops will be monthly. These workshops will be provided by PHSU qualified personnel with formal academic doctoral degrees in education including curriculum and health education.</p> <p>MPH & DrPH new syllabi includes every specialty competencies and proper assessment activities to assure the attainment of the criterion. Assignments rubrics translated into English are provided.</p> <p>Although the MPH in Environmental Health was validated by CEPH site visit team, we revised every track syllabus by using the new template.</p>	
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		concentration competency is not written at the depth the team finds appropriate for a graduate degree: the MPH in epidemiology concentration competency #5 requires students to describe the health needs of a population based on introductory-level epidemiological indicators.		
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D4 Worksheet

Based on final Council decision

Instructions to unit: When preparing the interim report, use this document to determine:

- 1) which competencies need to be rewritten to define a more advanced level of knowledge and skill
- 2) which items need to more clearly document an assessment activity

- If an item has a “no” in column 1, you must rewrite the competency statement itself AND define and document a clear assessment activity through narrative in your revised version of Template D4-1 and the corresponding syllabus or other documentation. If an activity is mapped to a quiz or exam, you must provide a sample copy of the exam or question.
- If an item has a “yes” in column 1 and a “CNV” in column 2, you do not need to rewrite the competency statement, but you must define and document a clear assessment activity through narrative in your revised version of Template D4-1 and the corresponding syllabus or other documentation. If an activity is mapped to a quiz or exam, you must provide a sample copy of the exam or question.
- If an item has a “yes” in both columns, no action is required. Simply reprint the existing information for that competency in the version of Template D4-1 that you submit with your interim report.

MPH in Environmental Health Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Identify sources, means of exposure, and control methods for the principal chemical, physical and biological agents that affect human health.	Yes	Yes
2. Develop designs and interpret risk evaluations for human health.	Yes	Yes
3. Develop effective risk communication techniques.	Yes	Yes
4. Evaluate the impact of environmental intervention on human health.	Yes	Yes
5. Develop preventive measures and environmental control for public health.	Yes	Yes

MPH Generalist Concentration Competencies * Note: Criterion requires definition and mapping of at least 5 competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives.	Yes	Yes
2. Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.	Yes	CNV
3. Describe the role of social and community factors in both the onset and solution of public health problems.	Yes	CNV
4. Describe how social, behavioral, environmental, and biological factors contribute to specific individual and community health outcomes.	No	CNV
5. Identify resources, methodologies, and application of research in public health.	Yes	CNV
6. Apply ethical principles to public health program planning, implementation, and evaluation.	Yes	CNV
7. Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.	Yes	CNV
8. Apply evidence-based principles and the scientific knowledge base to critical evaluation and decision-making in public health.	Yes	CNV
9. Apply the core functions of assessment, policy development, and assurance in the analysis of public health problems and their solutions.	Yes	Yes

MPH in Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp assessed? Yes/CNV
* Note: Criterion requires definition and mapping of at least 5 competencies		
1. Identify and design the methodology of basic epidemiologic study designs to address hypothesis under different circumstances.	Yes	Yes
2. Design and conduct a population based study using secondary data from reliable data sources regarding a priority health-related phenomenon.	Yes	CNV
3. Utilize the application of statistical and epidemiological methods that are critical to epidemiologic inquiry including a qualitative component; manage and manipulate data sets in statistical and qualitative analysis software packages.	Yes	CNV
4. Adequately describe the health needs of a population by the appropriate interpretation of indicators of risk, morbidity, disability, mortality, and burden of disease.	No	CNV
5. Apply epidemiologic thinking and a public health approach to a model to explain exposures and potential associations that influence health and disease at the community and population levels.	No	Yes
6. Recognize potential ethical and legal issues and implement the concepts of ethical conduct and legal principles of research in epidemiologic studies.	Yes	CNV
7. Use laboratory technologies to develop disease severity indicators in epidemiological studies.	Yes	CNV

DrPH in Epidemiology Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp assessed? Yes/CNV
1. Evaluate and assess risk and protective factors associated with public health problems.	Yes	Yes
2. Demonstrate knowledge of the issues of bias, error, confounding, effect modification, sampling and how they relate to the interpretation of study results.	Yes	Yes
3. Carry out appropriate sample size and power calculations to ensure that a study is sufficiently powered to achieve the scientific aims or address a specific research hypothesis.	Yes	CNV
4. Translate basic research into epidemiologic applications.	Yes	CNV
5. Use computer software for data entry and database management and for summarizing, analyzing and displaying research results.	Yes	Yes
6. Critically review and interpret the scientific, statistical methods and epidemiological measures presented in public health and medical literature to identify strengths and weaknesses and identify potential biases in these studies.	Yes	Yes

7. Apply underlying scientific, statistical and epidemiological measures to design, plan and conduct a variety of public health and biomedical studies including cohort, case control, cross sectional and clinical trials.	Yes	Yes
8. Use methods of measurement—design data collection forms; determine the validity of the instrument; identify the presence and magnitude of measurement error; [adjust] for measurement error	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
All MPH students produce at least 2 work products that are meaningful to an organization in appropriate applied practice settings		All students participate in one or more applied practice experiences (APE) in which they complete an internship outside of an academic setting. The program allows students to complete a traditional internship and, starting in academic year 2018-19, course-based activities documented by competency-based evaluations. The program has an APE written activity rubric to guide MPH faculty members in providing coursework that fulfills the APE requirement. The first concern is that the program could not present evidence that each student produces two work products borne from a practice setting. The team reviewed all of the documentation presented as part of the APE, such as the handbook and relevant forms. It is not explicit in the student handbook that at least two work products must be produced that are beneficial to both the site and the student. Form 7: APE Internship Proposal Activity is the agreement form that is signed off by the student, preceptor, and faculty advisor. The agreement lists at least four activities students will complete while in the internship; however, activities do not necessarily translate to deliverables. This was further validated by review of sample forms provided to the team. Activities listed are	We document the products of five current students (CEPH 2016): Krysthal Figueroa (9 products), Nerushka Sánchez (11 products), Fabián Ramírez (5 products), Abisaín Santiago (5 products), and Frances Quiñones (3 products) (Attachments in D5.2 File). According to the <i>CEPH Accreditation Criteria. SPH & PHP, Amended October 2016</i> , in the Internship manual of the Public Health Program of PHSU, updates in November 2018, in page 5 we establish that "The PHSU PHP 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, journal entries, completed tests, projects, videos, multimedia presentations, spreadsheets, websites, posters, photos or other digital artifacts of learning. Materials may be produced and maintained (either by the school or program or by individual students) in any physical or	The Council reviewed the program's response and agreed there is evidence of policies and procedure to ensure that students are assessed by faculty advisors on competencies through at least two work products. Therefore, the Council changed the finding from partially met to met.
Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies				
All students demonstrate at least 5 competencies, at least 3 of which are foundational				
If applicable, combined degree students have opportunities to integrate & apply learning from both degree programs	N/A			

		<p>data entry and analysis, participation in a screening clinic, database management, visiting clinical sites, preparing oral presentations, and organizing of data tables. While these are valuable experiences, they are not framed in a way that requires producing an actual work product that is assessed for competency attainment by a qualified faculty member.</p> <p>Discussions with faculty who are actively involved in the APE indicated that some students produce work products such as infographics and brochures, but there was no evidence or documentation to support this claim. Additionally, there were no samples of course-based activity products for the team to review at the time of the site visit.</p> <p>The second concern pertains to the demonstration of competencies in the APE. The student, preceptor, and advisor agree on at least five competencies selected for the internship, but, without actual products, faculty cannot truly assess student mastery of the selected competencies in the applied practice setting. The faculty advisor completes Form 13: Practical Experience Final Grade Form. Nowhere on the form does it indicate that students successfully demonstrated competencies through the production of work products.</p>	<p>electronic form chosen by the school or program” (Attachment in D5.1 and D5.2 File).</p> <p>The internship manual of the Public Health Program of PHSU, updated in November 2018, in page 36, table 23 indicates that among the criteria of evaluation of students in internships, the following evidence requisites are established: “FA/TD documentation of students’ attained competencies” y “FA/TD documentation of students’ work products/deliverables” (Attachments in D5.1 File).</p> <p>The document DOC 10 ATTAINED COMPETENCIES FACULTY ADVISOR REPORT is generated, in which the advisor will identify, for each student, and by using the base and specialization competencies, each of the products generated by the student during their internship. It will also assign the competency that the product references, title and type of product , and explains how this product supports the attainment of the competency referenced. This form also documents that the student attained at least 5 competencies, and that at least 3 of those were base competencies. (Attachments in D5.2 File).</p>	
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		<p>Faculty advisors uses the student’s poster presentation as a component of the final grade; however, the poster is not a product produced for the organization or agency and is used solely for academic grading purposes. Preceptors do not provide specific feedback on attainment of competencies while the student is participating in the summer internship. Rather, preceptors assess the student’s ability in general areas such as adhering to agency regulations, professionalism, contributing to the agency goals, etc.</p> <p>Students who complete an internship have both an internship preceptor and a faculty advisor who monitor progress. Students use the electronic portal on Moodle to post their deliverables. The summer internship is a 100-hour requirement.</p> <p>Students from the 2016 and 2017 cohorts only completed the internship with poster presentation. Beginning in 2018, students are required to complete the internship along with a two-credit activity in a one-year time period for course-based activities. Students must deliver a final report and present a poster at the Public Health Program Scientific Meeting. Preceptors perform a final evaluation based on program criteria, and this feedback is weighed in the students’ final grade assessed by their faculty advisor.</p>	<p>Five evaluations are documented. These were done by the students’ faculty advisors and reference the competencies acquired by the students as evidenced by the products generated in the internship (Attachments in D5.2 File).</p> <p>In form 13: Practical Experience Final Grade Form it is documented as an evaluation criterion that the student has demonstrated the successful acquisition of the competencies as evidenced by the products generated in the internship (Attachments in D5.2 File).</p> <p>The Public Health Program is expanding its internship offerings outside of Puerto Rico through agreements that are in progress with HSHPS Graduate Fellowship Training Program Overview (GFTP), Wyckoff Heights Medical Center, Pacific Northwest National Laboratory and Programa Córdoba y Fernós de Internados Congresionales, which provides Work Based Experience through Internships, Fellowships, collaborations and job recruitments.</p>	
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		Faculty have extensive contacts with the Puerto Rico Health Department, the EPA office located in San Juan, and the local Red Cross. The APE site booklet lists 20 sites where students have completed internships, such as the Department of Health, Environmental Protection Office, Autism Center in Ponce, Puerto Rico Renal Council, and the Puerto Rico Civil Rights Commission. During the site visit, students identified the practice experience as a strength of the program, though they are interested in experiences located on the mainland as well and the program has limited access to such sites.		
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D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Students complete at least one applied project that is meaningful for an organization & to advanced public health practice		The DrPH applied practice experience (APE) summer internship is a planned, guided, and supervised 100-hour fieldwork experience. It is intended to answer specific needs, projects, or initiatives from the internship site. The program allows students to use their own work location as long as the practice experience is outside their normal job responsibilities. The program also identifies course-based work activities as a way for candidates to demonstrate competencies for the APE, but the team could not validate the types of activities or projects.	We are documenting the products of 5 current students (CEPH 2016): Linda Pérez (5 products), Alejandro Alvarado (4 products), Ariel Rodríguez (4 products), Soreli Santana (4 products), and Nicole Muñoz (4 products) (Attachments in D6.2 File). The document DOC 10 ATTAINED COMPETENCIES FACULTY ADVISOR REPORT is generated, in which the thesis director will identify, for each student, each of the products generated	The Council appreciates the program's response but could not validate compliance with this criterion based on the information provided.
Project(s) allow for advanced-level collaboration with practitioners				
Project(s) include reflective component				
Qualified individuals assess each work product & determine whether				

it demonstrates attainment of competencies				
Processes in place to ensure that project(s) demonstrate at least 5 competencies, including at least 1 related to leadership		<p>The first concern pertains to the inability of the program to ensure that all DrPH candidates produce at least one applied project that is meaningful for an organization. MPH and DrPH students use the same APE handbook and also the same forms. While review of student sample forms did show that most DrPH candidates are completing advanced-level projects such as creating databases and performing initial analyses on new data, some candidates are not producing any advanced-level projects. Site visitors observed that some students listed activities that would not satisfy this criterion's expectations, such as morning hospital rounds, data entry, patient education, and attending a community leaders meeting. DrPH students keep a complete log of the activities in which they are engaged during the 100 hours, but this also does not constitute an acceptable deliverable for this criterion. Discussions with faculty indicate that there is a recognition and commitment from faculty to elevate the work products of the DrPH candidates.</p> <p>As described in the APE handbook, each doctoral student completes an internship reflection. The program provides a guide for the final APE reflection. Students are expected to write about their attained competencies, skills, knowledge, and attitudes gained through the internship, and how the internship impacted the student personally and professionally. The site visit team reviewed these student reflections and determined that they were appropriate for the requirement.</p>	<p>by the student during their internship. It will also assign the competency that the product references, title and type of product, and explains how this product supports the attainment of the competency referenced. (Attachments in D6.1 File).</p> <p>Five evaluations are documented. These were done by the students' thesis directors and reference the competencies acquired by the students as evidenced by the products generated in the internships of Linda Pérez, Alejandro Alvarado, Ariel Rodríguez, Soreli Santana, and Nicole Muñoz (Attachments in D6.2 File).</p> <p>In form 13: Practical Experience Final Grade Form it is documented as an evaluation criterion that the student has demonstrated the successful acquisition of the competencies as evidenced by the products generated in the internship (Attachments in D6.2 File).</p>	

		<p>The second concern is that not all DrPH candidates may demonstrate the required competencies through their APE project. As described in the handbook, candidates are required to choose a minimum of five foundational and/or concentration-specific competencies. At least one competency must be from the leadership, management, and governance domain. However, the site visit team was not able to validate evidence that each student demonstrates the required competencies through the applied project. Similar to the MPH program, DrPH students must fill out Form 7: APE Internship Proposal Activity. This lists both the internship activities and the selected competencies for the project along with other meaningful information identified by the program. Review of sample forms by the team indicated that the documentation was often incomplete or inaccurate. For example, one student who completed the proposal in June 2018 listed the five selected competencies as general areas such as leadership and systems thinking, epidemiology, communication and informatics, biostatistics, and environmental health sciences, rather than identifying specific competency statements. Another example lists the leadership competency as “demonstrate transparency, integrity, and honesty in all actions;” however, this is not one of the CEPH foundational competencies, nor is it one of the program’s concentration competencies.</p>		
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D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Students complete project explicitly designed to demonstrate synthesis of foundational & concentration competencies		<p>The MPH integrative learning experience (ILE) has two components: a comprehensive examination and a reflection paper. Both components are completed in the final term of the course of study.</p> <p>The essay-based comprehensive examination is designed to assess a student's ability to synthesize public health competencies. It includes two parts, testing mastery of core competencies in part one and concentration competencies in part two. The core exam is written by the core course faculty and is offered as a closed-book, in-person exam lasting eight hours over two days. The concentration-specific exams are closed-book, in-person, four-hour exams written by the respective concentration course faculty.</p> <p>The first concern relates to the team's inability to validate that the examination allows students to synthesize within and across the foundational and concentration competencies. The team was provided a Spanish language draft of the 2019 core comprehensive exam, which reflects the revised curriculum, though the team repeatedly requested translated documents where possible. On site,</p>	<p>Dr. Soto Torres (ILE Coordinator) communicated to the Track Coordinators the new instructions for the Comprehensive Exam (COE): both foundational and concentration competencies will be integrated into one exam. Thus, there will be three exams only, one per track, each integrating foundational and concentration competencies. Each Track Coordinator is working with the track faculty to update the current COE draft. A meeting will be held in January 2019 between Dr. Soto Torres and the Track Coordinators to discuss the drafts and decide the logistics and rubrics for the exam, which will be administered in March 2019.</p> <p>All exams need to be submitted to Dr. Soto in the English language. Once Dr. Soto has the drafts, she will verify with Dr. Elizabeth Rivera whether these updated versions reflect integration and synthesis of competencies.</p>	<p>Click here to enter text.</p>
Project occurs at or near end of program of study				
Students produce a high-quality written product				
Faculty reviews student project & validates demonstration & synthesis of specific competencies				
If applicable, combined degree students incorporate learning from both degree programs	N/A			

		<p>faculty described the process used to write exam questions. Multiple faculty prepare each question, which they said allows for student synthesis of competencies. However, with the separation of the foundational and concentration examinations, there is less opportunity for integration and synthesis across those two sets of competencies. Graded comprehensive examinations were not available at the time of the site visit, and none of the students with whom the site visitors met had taken the exam yet.</p> <p>Despite not being able to review the core comprehensive exam, visitors were provided two different copies of the concentration comprehensive exam for the environmental health track. The exams require students to demonstrate different competencies. One exam contains questions that relate to determining pollution sources, calculating prevalence of diseases from a data sample, classifying exposure pathways and routes, selection of sampling points, and providing recommendations to comply with federal regulations. The other exam asks students to design an epidemiological study related to electromagnetic radiation exposure by answering questions related to study design, research questions, research objectives, study population, sampling type, data collection instruments, limitations, and biases. Discussions with faculty indicate that students only have to take one concentration comprehensive exam.</p>	<p>Measures includes:</p> <ul style="list-style-type: none"> • 3 Comprehensive exams (one per track) integrating foundational and track competencies will be provided. • Rubrics to assess integration and synthesis of competencies will be provided. <p>Track Faculty will update the current drafts with their respective Coordinators, who will send them to the ILE Coordinator, Dr. Soto Torres.</p> <p>The reflection paper has never been intended as the high-quality written product that demonstrates synthesis of competencies. Three comprehensive exams (refer to the information above), one per track, will be provided. Rubrics to assess demonstration & synthesis of specific competencies will be provided.</p>	
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		<p>Reviewers were provided a copy of the epidemiology concentration comprehensive exam, however reviewers were unable to validate competency synthesis since the exam was in Spanish.</p> <p>The program considers the second component of the ILE to be a reflection paper. The paper is a three- to four-page essay in which students are asked to reflect on the extent of achievement of academic and professional goals they set for themselves from a year-one action plan. Action plan goals can include program competencies, essential services, and core functions of public health that the student identified as most relevant for them. The reflection essay also requires an assessment of their comprehensive examination experience, including challenges to complete it as well as the courses and other learning experiences students felt were most useful in helping them to complete the ILE. Finally, the reflection paper requires graduating students to provide any recommendations for future students.</p> <p>The second concern relates to the inadequacy of the reflection paper as a high-quality written product that demonstrates synthesis of competencies. Without being able to verify the extent of the writing required for the essay-based comprehensive exam, the team used the reflection paper as demonstration of the written product. The reflection paper serves two main purposes: 1) a self-reflection of learning and 2) an evaluation of the public health program. The reflection paper in itself is less likely</p>		
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		to be useful as a means by which faculty can objectively assess competency attainment and integration. The high-quality written product is meant to be an organization and synthesis of thoughts and information. The reflection paper does not require this.		
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D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Students generate field-based products consistent with advanced practice designed to influence programs, policies or systems		The DrPH integrative learning experience has two components: a comprehensive examination and a doctoral dissertation.	This is a new curriculum that started during academic year 2017-2018 and students will take de CE during summer 2019. Graded examinations will be available during the fall session 2019.	
Products allow students to demonstrate synthesis of foundational & concentration competencies		Faculty described the comprehensive examination as a multi-component, essay-based assessment of competencies. Candidates take the exam after completion of all required core and concentration courses, which typically occurs in the second year. After completion of the exam, students complete electives, the applied practice experience, and the dissertation. Site visitors were provided a blank copy of the DrPH comprehensive examination to be administered in 2019 but were unable to review graded samples based on the current curriculum, as it had not been administered yet.	CEPH team founded a similarity upon de depth of rigorous between the environmental health MPH track specialty CE and DrPH CE I. However, that similarity responded to the fact that environmental health students are required to enroll in an environmental epidemiology health course and other methodology courses that are expected to be approved in any MPH degree.	
Qualified individuals assess student performance & ensure that competencies are addressed			There are indeed some similarities in the structure of those two questions but to comply and produce an appropriately rigorous examination for the DrPH	

		<p>The first concern relates to the lack of doctoral-level depth in the comprehensive examinations. There are two parts to the DrPH comprehensive exam. CE I describes a public health problem related to HIV control, and the doctoral student must design an epidemiologic study based on given information. However, the questions the doctoral candidates must address in CE I are almost identical to the questions related to the MPH environmental health concentration comprehensive exam. DrPH students must identify a problem, write a research question, develop research objectives and a hypothesis, select a study design, choose a sampling type, and develop a statistical plan. Almost all of these questions are also required for the master's-level students in their final comprehensive exam. The team expects that the work doctoral candidates produce be appropriately rigorous for the degree level and distinct from the master's-level expectations.</p> <p>All DrPH students must complete a doctoral dissertation under the mentorship of a committee comprising a minimum of three members. The chair must be a full-time university faculty member, and at least one of the members must have training or experience as an epidemiologist. All three members must be doctorally-trained, preferably in the field of public health. If the student's project requires special expertise, persons with extensive experience in a highly specialized area without doctoral training may be added to the committee as non-member consultants. The team was able to review completed dissertations, but no students have graduated from the current curriculum. While the dissertations will</p>	<p>degree level, doctoral faculty will revise again and improve the questions in the CE I. Faculty had been already notified and will deliver as expected for a DrPH level.</p> <p>Starting with the DrPH cohort 2022 (cohort that started in August 2017 with new curriculum) students will be required to develop a field-based dissertation consistent with the advanced practice nature of the degree.</p> <p>CE will provide for the examination and synthesis of all competencies. Dissertations will provide for the examination of several competencies depending upon the nature of the project. A rubric was provided to site visitors the CE assessment of competencies, but no rubric was provided for the dissertation. To provide evidence of that assessment, a new rubric for the attainment of competencies will be added to the DrPH Dissertation Manual (see attachment D8).</p>	
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		<p>undoubtedly provide opportunities for synthesis of competencies, faculty reported to the site visitors that competency assessment was the focus of the comprehensive examination, not the dissertation itself.</p> <p>The second concern is that DrPH students are not required to generate a field-based product consistent with the advanced practice nature of the degree. Almost all of the candidates product a research-based dissertation rather than a product that is appropriate for a professional degree. Faculty stated that field-based products such as creating surveillance systems, writing health policies, or community engagement projects are encouraged, but they are not required. Students tend to complete dissertations that are purely academic research endeavors.</p>		
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D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D12. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		<p>Each MPH concentration requires a total of 55 credits over a span of two years. Courses are offered in trimesters.</p> <p>Credits are defined by the Board of Education of Puerto Rico, and one credit equals 15 contact hours distributed in a trimester. Two credits are 30 contact hours, and three credits are 45 contact hours distributed in a trimester.</p>	Click here to enter text.	Click here to enter text.

D15. DRPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
DrPH requires at least 36 semester-credits of post-master's coursework or equivalent		<p>The DrPH requires a total of 63 credits. Students take 49 credits of required and elective courses that are doctoral-specific courses and include advanced biostatistics, teaching epidemiology, planning and evaluation of health programs, clinical trials, grant writing in epidemiology, and health economics. Doctoral students take a total of five credits in internships: a consulting practicum and the applied practice experience. The remaining nine credits are attributed to the dissertation.</p>	Click here to enter text.	Click here to enter text.
Defines credits appropriately—eg, credit for thesis writing or independent internship hours not included in 36				

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D16. BACHELOR'S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D19. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Not Applicable			

E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		The primary instructional faculty (PIF) are a well-qualified cadre of doctorally-prepared individuals representing a variety of disciplines, including seven with epidemiology degrees and four with degrees in environmental health/science. Based on educational background, PIF are appropriately associated with concentration offerings.	Click here to enter text.	Click here to enter text.
Faculty education & experience is appropriate for the degree level (eg, bachelor's, master's) & nature of program (eg, research, practice)		Ten faculty are on the tenure-track (nine assistant professors and one professor), and the remaining seven (two associate professors and five full professors) are considered academic and research faculty. There are eight		

		<p>faculty engaged in DrPH teaching, five of whom are junior in rank (assistant professor).</p> <p>Among the 17 PIF, most have graduate degrees from universities in Puerto Rico, which speaks to their familiarity with the population and health issues most relevant to the program's student body. Four members of the faculty concurrently hold senior public health positions in practice environments, and others have significant prior practice expertise, which they bring to bear on their teaching.</p> <p>The 23 non-PIF listed by the program regularly provide instruction and devote effort ranging from 0.05-0.2 FTE, with most contributing 0.1 FTE. With the exception of two non-PIF, all others hold professional or academic doctorates. The non-PIF individuals bring to the program expertise in a multitude of relevant fields including epidemiology, biostatistics, preventive medicine, life sciences, health law, environmental engineering, urban and regional planning, education, sociology, and business administration.</p> <p>In addition, the program presented a list of 32 secondary faculty who are available to mentor doctoral student research. Four of the 32 are university faculty ,and the other 28 are employed in a variety of settings including mainland and Puerto Rico universities, the CDC, the</p>		
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		Puerto Rico Cancer Registry, and pharmaceutical companies.		
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E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		All of the faculty have had previous work experience in public health. The faculty member who teaches food safety has worked for almost 30 years as a nutritionist and dietitian. Another faculty member worked previously at the US EPA, and one of the professors just spent a year working with the World Health Organization. The program encourages and supports faculty to maintain practice linkages. The site visit team confirmed that a large number of faculty are engaged and preserve professional relationships with a variety of Puerto Rico and international health agencies.	PHP is submitting the table with the list of invited speakers to the different courses (See attachment E2.1). These invited speakers are public health practitioners in different areas such as Department of Health Federal agencies, community-based organizations, community, health commissions, and others. PHP is also modifying the syllabuses so that they include the names of the invited speakers in the calendar of topics of each course. One of the initiatives of the plan of action mentioned previously is the establishment of meetings at the beginning of each trimester to discuss the organization of the beginning of the trimester, and a meeting during the summer period with the primary and non-primary faculty to discuss the work plan and the strategic plan of the academic year. Another initiative to	Click here to enter text.
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels				
Regularly involves practitioners in instruction through variety of methods & types of affiliation				
		The concern pertains to the limited evidence that practitioners are regularly involved in instruction. Upon review of the English language syllabi, the review team could not identify any courses where guest speakers are brought in. During the site visit, faculty could only list a few guest speakers. Based on additional conversations with faculty, the team learned that there are no adjunct appointments with practitioners in the field.		

			<p>distribute the minutes of the meetings to the non-primary faculty.</p> <p>PHP has prepared letters offering the academic rank of Adjunct Faculty to all non-primary faculty through the office of the Dean of Academic Affairs and the office of Human Resources. (See attachment E2.2)</p>	
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E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met with Commentary			
Systems in place to document that all faculty are current in areas of instructional responsibility		Teaching is highly valued within the university and the program. It is seen as an integral component of annual faculty evaluation and promotion and tenure decisions.	PHP has developed a plan of action focused on the growth of professional development of the primary and non-primary faculty. This plan will include the updating of knowledge skills, and pedagogy competencies.	Click here to enter text.
Systems in place to document that all faculty are current in pedagogical methods		Faculty participate in professional development opportunities to remain current within their assigned teaching areas. Examples of courses taken by four PIF include the NIMHD health disparities course for the health disparities course instructor, the Occupational Health and Safety Administration (OSHA) certification course for the environmental track coordinator, the Pan-American Health Organization/World Health Organization international health leaders training program for the international health course instructor, and the Puerto	This plan will begin with the administration of the PHP Faculty Development Survey to identify the pedagogical and educational needs, areas of interest and experience, and preferences regarding the type of activity among all the faculty (primary and non-primary), ((See attachment E3.1). This questionnaire will be administered during the summer of	
Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction				
Tracks indicators that provide meaningful information related to instructional quality				

<p>Supports professional development & advancement in instructional effectiveness for all faculty</p>		<p>Rico College of Physicians ethics course for the bioethics course instructor.</p> <p>Students are able to provide feedback about instructional effectiveness of the faculty through their completion of anonymous course evaluations and graduating student exit surveys. Course evaluation data are presented as one component of a faculty member's annual evaluation with the associate dean. Faculty who receive ratings of less than 3 (on a scale of 5) on multiple items are required to participate in remedial instruction training. Results of the evaluation of these faculty members are positive and show a 100% improvement in student course evaluations. The remedial training was so successful that in 2016-2017 all faculty were required to complete the same training as a "back to basics" update in pedagogical practices and techniques. The team was able to validate that requirements and offerings apply equally to non-PIFs as well.</p> <p>On site, the visitors learned that the program plans to begin supplementing the insight from student feedback with a peer evaluation system. The goal is to start in academic year 2018-2019. The university's assistant dean of curriculum and faculty development reported to the team that there is precedent for that process at the university, and her office is poised to assist the program.</p>	<p>2019. The Dean of the Program will oversee administering it. With the information obtained from this survey, PHP, together with the Curriculum and Faculty Development Dean, will develop a calendar of educational activities for all faculty of the PHP.</p> <p>Among the new institutional goals related to faculty development and with the objective of impacting the biggest number of primary and non-primary faculty, the Office of Faculty Development of the institution is acquiring instructional modules focused in different areas of pedagogy. These modules can be accessed in electronic form and will keep a record of which faculty are using it.</p>	
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		<p>The program's primary and non-primary faculty are able to access instructional offerings of the Office of the Assistant Dean of Curriculum and Faculty Development. Over the past three years, training has been provided in topics such as use of the RedCap system for data collection, electronic tools such as clickers for anonymous polling in class, Examsoft for exam item construction and response analysis, writing course objectives, structuring flipped classrooms, and grantsmanship. The program also supports the professional development of their faculty through external training activities. The team learned of at least two PIF who have participated in non-university professional development activities over the past three years.</p> <p>The program has identified three measures that are meaningful indicators of instructional quality and present evidence of their efforts in academic years 2014-15, 2015-16, 2016-17. As a measure of faculty currency, the program tracks faculty maintenance of relevant professional credentials and/or certifications. In the three previous years, 100% of the faculty were current in their relevant credentials and/or certifications. As an indicator of faculty instructional technique, the program set a target of 100% of faculty receiving scores of 3-5 (on a 5-point scale) of student satisfaction with instructional quality. Over the past three years, the program recorded 95%, 87%, and 90% of faculty scoring 3 or above on student satisfaction with instructional quality. The program's third indicator is courses that integrate community-based projects. The target is 20% of courses;</p>		
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		<p>however, the program has far exceeded the target with 50% in 2014-15, 80% in 2015-16, and 75% in 2016-17.</p> <p>The commentary refers to the fact that, while it appears that some primary and non-primary faculty have had professional development in the area of pedagogy and there are resources available to support this, the program lacks a systematic approach to ensuring that faculty are current in their areas of instructional responsibility and in pedagogical methods. Professional development opportunities are increasing; however, encouragement or requirement of these opportunities were ad hoc at the time of the site visit.</p>		
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E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		The program has a robust, albeit relatively nascent, research enterprise. Over the past few years, there has been a concerted effort on behalf of the program and the university to increase engagement in research. On site, visitors heard resounding support for and about the value of research engagement. Support for research is available at both the program and campus levels. Many faculty are	Click here to enter text.	Click here to enter text.
Faculty are involved in research & scholarly activity, whether funded or unfunded				

Type & extent of faculty research aligns with mission & types of degrees offered		highly productive scholars and provide multiple opportunities for students to develop research skills under their mentorship.		
Faculty integrate their own experiences with scholarly activities into instructional activities		The program and university expect and encourage primary faculty to be engaged in research. Research productivity is evaluated within the annual faculty evaluation process.		
Students have opportunities for involvement in faculty research & scholarly activities				
Tracks measures that are meaningful and demonstrate success in research and scholarly activities		<p>Faculty are engaged in a wide range of research, some of which is directly relevant to the concentration they instruct in. Recent projects have related to areas as diverse as surveillance, genetic epidemiology, vector-borne diseases, autism, diabetes, air and water testing, and gender violence. The program also describes a large proportion of bench lab and environmental monitoring studies. Selected faculty are engaged with epidemiologic studies and community-based research.</p> <p>The university supports the research enterprise through the umbrella of a dedicated campus entity, Ponce Research Institute, which acts as the home for university research. The campus Office of Research and Development provides pre- and post-award grants management, an English writing editor, and a grant writer.</p>		

		<p>The university participates in three collaborative mechanisms, which provide research infrastructure and resources including training, mentorship, pilot funding, nationwide networking, and data sharing. These mechanisms are the U54 with the Moffitt Cancer Center in Tampa, FL, the NIMHD Research Centers in Minority Institutions Translational Research Network, and the Puerto Rico Clinical and Translational Research Consortium of Universidad de Puerto Rico, Universidad Central del Caribe, and PHSU. Six of the program's primary faculty have directly benefitted from these mechanisms.</p> <p>The university also hosts an annual conference at which student and faculty work is presented. Six public health student abstracts were accepted for presentation at the 2017 conference. Five of those were from one professor's project, and the sixth one was under the mentorship of a different professor.</p> <p>Infrastructure to support and encourage research among faculty and students is also available at the program level. The program sponsors its own seed grant program that offers up to \$25,000 in funding per year. Projects are limited to one year of initial funding but can be renewed. All awards must fund at least one student position on the project. Thirteen projects funded under the seed grant program provided support and research exposure for 23 students in 2016 and 2017.</p>		
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		<p>As meaningful indicators of their success in scholarly activity, the program tracks three measures. The first outcome measure is presentations at professional meetings per year. The program has a target of at least 20 presentations by faculty per year. From academic years 2014-15, 2015-16, and 2016-17 the program has exceeded the target with 27, 29, and 26 faculty presentations at professional meetings per year. Related to faculty productivity, the program measures the percent of faculty having at least one publication submitted to an indexed peer-review journal per year. With a target of 50%, the program has recorded 21%, 78%, and 44% in the last three academic years. The program's third self-selected measure is the number of grant submissions per year. Instead of providing a number, the program records this as a percent with a target that 50% of faculty submit an external grant proposal as a PI or Co-PI per year. There was no data in 2014-15, 29% in 2015-16, and 53% in 2016-17. Taken as a whole, the indicators are appropriate, reasonable, and fairly aspirational.</p> <p>Students who met with site visitors were enthusiastic and laudatory about the faculty engagement in research and the opportunities made available to them for mentorship in that arena. The team heard multiple examples from students of instances in which informal conversations with faculty members about their research led to student involvement in those research projects. One student even</p>		
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		described that a past classmate was able to publish with the professor.		
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E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		The faculty handbook encourages faculty members to contribute in useful ways to the community. The program and the university provide financial support, extended health plan coverage, and use of university facilities to faculty engaged in extramural service activities.	Click here to enter text.	Click here to enter text.
Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means		<p>The handbook also states that faculty involvement in community service activities is an important criterion to determine evaluation and promotion. In the annual faculty evaluation, faculty members must demonstrate that 10% of their time is spent in community service.</p> <p>Faculty have participated as volunteers in service activities to help the homeless people of the Amor que Sana project and in an educational campaign directed toward the prevention of Zika, Dengue, and Chikungunya. One of the faculty has extensive experience with the Red Cross and applies his experience to the MPH course MPH 5104: Disaster Epidemiology. Another faculty member works with cancer survivors to improve their</p>		

		<p>understanding of the relationship between diet and disease and applies that experience to MPH 7063: Nutritional Epidemiology.</p> <p>Students have numerous opportunities to be involved in faculty service activities. Some of these include taking and processing water samples to help with a program called Water Monitoring Day, developing databases to assist CEPA (Ponce Center for Autism) in raising awareness of autism, and collecting essential clothing and food to support a non-profit that helps girls and teens in unstable home environments.</p> <p>The site visit team heard numerous examples of services that the program provided after Hurricane Maria. Statements provided by community members described faculty assistance in basic public health functions such as clean water, nutrition, vector-borne disease prevention, and dysentery and cholera prevention. Students were involved in some of these service activities by educating community residents about how to ensure that their water was clean enough to drink and educating residents on the importance of emptying standing water containers to prevent mosquito proliferation.</p> <p>The program has selected three indicators to measure its service commitment. The first measure is percent of primary instructional faculty participating in extramural</p>		
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		<p>service activities. The program has not established a target for this particular measure, but in 2014-15, 67% of PIF participated in service activities, in 2015-16 it was 80%, and 88% in 2016-17. The second indicator is the number of faculty-student service collaborations, with no established target. Data presented to site visitors showed three student-faculty collaborations in 2014-15, 11 in 2015-16, and 13 in 2016-17. The third indicator is the number of community-based service projects. The program has established a target of at least two community-based service projects per year. This target has been greatly exceeded in the last three years with 10 service projects in 2014-15, and 15 projects in both 2015-16 and 2016-17.</p>		
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F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		In the summer of 2018, the newly established 11-member External Advisory Committee met for the first time. Members were selected upon recommendation of faculty and coordinators and formally appointed by program leaders. The External Advisory Committee is scheduled to meet at least once a year. Minutes show that the committee discussed the self-study, the curriculum, and new courses at the initial meeting.	PHP revised the composition and the number of the members of the External Advisory committee based on their availability and accessibility. The original number of members was 11, and after revision it was agreed to reduce it to 7. Each of the seven members of the committee represents a specific area in the field of public health: epidemiology, environment health. general alumni	Click here to enter text.
Ensures that constituents provide regular feedback on all of these:				

<ul style="list-style-type: none"> • student outcomes • curriculum • overall planning processes • self-study process 			<p>from the masters and doctoral programs, and the community.</p>	
<p>Defines methods designed to provide useful information & regularly examines methods</p>		<p>Alumni provide regular feedback to the program through the annual alumni survey. The program solicits feedback on areas related to the curriculum, the applied practice experience, overall student experience, and job placements.</p>	<p>The external advisory committee is an independent entity, ruled by a set of by laws. It sets its own program and work plan together with PHP (See attachment F1.1)</p>	
<p>Regularly reviews findings from constituent feedback</p>		<p>The first concern relates to the fact that the program has not established a regular method of constituent input beyond the annual alumni surveys. The External Advisory Committee had been recently formed at the time of the site visit and had only had one meeting. The committee was too new to demonstrate that it provides regular feedback on any program areas or that methods are in place to provide useful feedback to the program.</p> <p>The second concern pertains to the absence of employer feedback on the ability of graduates to apply competencies in a workplace setting. The new position, the career and promotion services coordinator, will present her plans to obtain comments and recommendations from employers to the External Advisory Committee at its next scheduled meeting in 2019.</p> <p>Community partners who met with site visitors could not identify formal methods for communicating feedback to the program. They relied on informal communication with</p>	<p>PHP has agreed upon a working plan together with the External Advisory Committee. This plan includes meetings every trimester, and annually, to evaluate and discuss curriculum develop a plan of action of the different specialties, evaluate student outcomes, discussion of job placements, and growth of new academic offerings, develop the PHP strategic plan for 2019, and other topics.</p> <p>The External Advisory Committee has formal methods to communicate their recommendations and feedback: (1) <u>Action Plan</u> is a table where the recommendation is documented, how it will be achieved, the date where it will be taking place, estimated date of completion, and people involved is noted (See attachment F1.2 (2) <u>In person meetings</u> where agreements and recommendations are gathered. These are documented in the External Advisory Committee Minute Form (See attachment F1.3).</p>	

		<p>faculty whom they have worked with before. There was only one member of the External Advisory Committee present during the site visit, and he had been appointed too late to attend the initial meeting.</p>	<p>Other work documents used by the committee are: The External Advisory Committee Annual Report, and the External Advisory Committee Program Work Planning Forms (See attachment F1.4)</p> <p>The evaluation instruments and data used by PHP and presented for discussion to the External Advisory Committee include evaluation of courses, MPH and DrPH qualifying exam grades, employer surveys, alumni surveys annual reports from the research committee, perception questionnaire from students, alumni and community focus groups discussions, and the surveys to evaluate the development and professional growth of the faculty.</p> <p>Regarding the second concerns related to the lack of information of employers to evaluate curricular effectivity and work area, the, PHP Career and Alumni office maintains an up-to-date data bank that includes information on where our MPH and DrPH alumni are working and what positions they hold. The coordinator of the office of Career and Alumni is responsible for administering the Employer Survey (See attachment F1.5). This survey will be administered to our alumni employers once a year during the month of February. In this survey we will explore and evaluate Competencies,</p>	
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			<p>skills, and knowledge and how they are applied to the work environment; as well as information regarding the work market and the need to be fluent in a second language.</p> <p>Some of the questions included are:</p> <ul style="list-style-type: none"> • How well is the Public Health Program of Ponce Health Sciences University (PHSU) is doing in ensuring that MPH/DrPH possess the full set of skills and knowledge that they will need for entry-level positions? • Describe your practice/facility/organization • Do you consider that MPH/DrPH students need to have proficiency in a language other than Spanish? • Does Public Health Program of PHSU address employers' needs? • Are you satisfied with the quality of work of MPH/DrPH graduates? • What could recent MPH/DrPH graduates do to be better prepared for a job search? • In your opinion, is a public health degree worth more or less in today's job market than it was five years ago? • How important is a recent college graduate's major to your organization when you hire? <ul style="list-style-type: none"> • Which of the following are effective methods to promote graduate employability? 	
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			<ul style="list-style-type: none"> • How well is the Public Health Program of PHSU doing in ensuring that MPH/DrPH possess the full set of skills and knowledge that they will need for advancement/promotion in the workplace? • How well is the Public Health Program of Ponce Health Sciences University (PHSU) doing in ensuring that MPH/DrPH possess the full set of skills and knowledge that they will need for entry-level positions? <p>The data obtained in this survey will be used by the following committees; Curriculum, Workforce Development, and External Advisory Committee.</p> <p>In answer to the comment by the accreditation team regarding the lack of a formal communication between the program and the communities, PHP has implemented a focus group method. In this way, the Program and the communities will establish a yearly work plan. The program will explore in a qualitative way how the program's curriculum responds to the needs of the community. This focus group activity will be taking place once a year, at the annual PHP meeting. The attendees of this meeting are community leaders, program faculty, and the Associate Dean (See attachment F1.6)</p>	
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F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Makes community & professional service opportunities available to all students		<p>The program has a Public Health Student Society that engages in extracurricular educational public health activities in the community. The board of the Public Health Student Society meets on a monthly basis, and membership is open to all students. Organized activities include health promotion and disease prevention, health education, and research and service to benefit the community. Students who met with site visitors provided examples of activities conducted since the organization was reactivated in March 2018. These activities include organizing a local health fair for the community and volunteering at other health fairs in Puerto Rico, organizing Public Health Week on campus, and partnering with an autism association.</p>	<p>Click here to enter text.</p>	<p>Click here to enter text.</p>
<p>Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field</p>				

		<p>team also heard from both students and community partners about the course-based service activities in the community of La Playa in Ponce. Students engage in water testing for the community at the request of community leaders.</p> <p>During the site visit, students were very positive about the opportunities for community service and proud of their role in helping the community recover from Hurricane Maria. The students also said that faculty afforded them ample opportunities to engage with area public health colleagues in conducting meaningful research and service projects.</p>		
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F3. ASSESSMENT OF THE COMMUNITY’S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Defines a professional community or communities of interest & the rationale for this choice		The program defines its professional community of interest as the university scientific community, physicians and residents in the university residency program, La Playa community, not-for-profit organizations, community-based institutions, and the Puerto Rico Department of Education. The rationale ranges based on the needs of the group identified. Mostly it appeared to the site visit team that these groups are defined as the professional	PH has three communities of interest: (1) PHSU community and the Residency Program for the Hospitals in the consortium. This community includes public health practitioners such as health service administrators, health educators, nurses, psychologists, counselors, environmentalists, nutritionists, pharmacists, opticians, physicians, medical residents, alumni, and students. (2) Community Residents,	The Council reviewed the program’s response and changed the finding for this criterion from partially met to met. The program provided documentation of implementation of a plan to assess professional development needs of professional communities. The plan includes
Periodically assesses the professional development needs of individuals in priority community or communities				

		<p>community because in the past they have requested professional services from the program.</p> <p>The program states that it assesses the continuing education needs of the community through data collected from the program graduation exit interview, the alumni survey, and informal conversations with community representatives.</p> <p>The concern is that the program is engaged in a variety of professional development activities, but there is no evidence that the program routinely assesses needs of its defined professional community. Based on conversations with faculty and external stakeholders, the various professional communities approach the program on an ad hoc basis to assist with a workforce need. The program does not actively seek data beyond what is collected from new graduates and alumni. To the program's credit, the community partners who met with the site visit team expressed how helpful the program is in offering different trainings.</p>	<p>which includes the following professionals in fields related to health: social workers, community leaders, health educators, nurses, caregivers for the elderly, and administrators.</p> <p>(3) Federal and local government agencies and. This community of interest includes physicians, veterinarians, environmental health inspectors, epidemiologists, and laboratory technicians.</p> <p>The data collected by PHP to establish the professional development needs are quantitative and qualitative: pre-existing data, the PHP Continued Education and Professional Growth Needs Assessment, alumni survey, community focus groups, alumni focus groups, and employee survey (See attachment F3.1))</p> <p><u>Pre-existing data.</u> This data originates from the PHSU annual research report and the Accreditation Council for Graduate Medical Education (ACGME) report on the residency programs. PHP can identify areas of need in research methodology, epidemiology statistics, data analysis, diversity, and ethics.</p> <p>(a) <u>PHSU research annual report:</u> offers data related to the number of proposals submitted, numbers of successful proposals, number of</p>	<p>surveys, focus groups, and other assessments.</p>
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			<p>researchers, and number of papers published.</p> <p>(b) <u>ACGME report on the residency programs</u> will give data relates to the number of workshops on research methodology, biostatistics, and data analysis</p> <p><u>PHP Continued Education and Professional Growth Needs Assessment</u> is a questionnaire administered to public health practitioners. It includes public health professionals in hospitals and medical office who are alumni of our program. Education needs are identified. This will be administered yearly by the Career and Alumni Coordinator.</p> <p><u>Community focus group:</u> Qualitative data that point PHP in the right direction regarding needs on workshops, courses, training that the community of interest has. This will be administered by the Associate Dean.</p> <p><u>Alumni focus group</u> Qualitative data that point PHP in the right direction regarding needs on workshops, courses, training, that the community of interest has. For example, updating competencies, skills, and knowledge related to public health areas. It will be administered annually by the Career and Alumni Coordinator.</p>	
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			<p><u>Employer Survey</u>: PHP will be able to identify skills, competencies, and knowledge that should be reinforced, as well as new skills needed one our students enter the workforce. This will be administered annually by the Career and Alumni Coordinator.</p>	
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F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		<p>Each year since 2015, the program has sponsored a scientific meeting to address identified needs of the university scientific community. The proceedings of the scientific meetings support the university's scientific community by improving research skills of faculty, researchers, and students.</p> <p>The program provided a number of professional development activities from 2014 through 2017. Sixteen different activities were provided with average attendance of 22 persons; however, the team was not able to validate the composition of the attendees.</p> <p>The concern is the lack of a connection between the needs identified in Criterion F3 and the services delivered. The</p>	<p>PHP has designed and developed a specific plan to provide continued education and professional growth activities for the previously identified communities of interest (See criteria F3). In the case of the PHP Workforce Development plan the data obtained from the previously mentioned sources has been analyzed. As a starting point, the data from the following sources has been analyzed and discussed"</p> <p><u>Alumni Survey</u></p> <p>Administered in June 2018. Through this questionnaire we identified the areas for improvement to reinforce alumni competencies. As part of the topics being considered for the 2019 calendar, and as identified by the alumni who completed the alumni survey</p>	<p>The Council reviewed the program's response and changed the finding for this criterion from partially met to met. The program provided documentation that there is a method for developing and delivering professional development for defined professional communities. The method is connected to the assessment, so that professional development addresses the needs identified by the professional communities.</p>

		<p>program delivers an abundance of services to the community but offers limited professional development opportunities for the workforce. The activities described to the site visit team are considered service-based activities such as loaning equipment to the EPA, educational activities in the La Playa community to strengthen student research skills, and developing timelines to assist professionals at the Ponce Research Institute. When asked on site for additional examples of professional development for the professional community, faculty continued to describe service examples and quoted the internship experience as a professional development activity, which is not an appropriate activity to count toward this criterion.</p>	<p>administered in June 2018, we have identified the following: Biostatistics, environmental health, epidemiology, leadership, professionalism, program planning, system thinking, advocacy, and cultural competence. These topics will be offered in the modalities of: in person. go-to meeting. They will also be available in the PHP alumni page as a recorded lecture.</p> <p>PHP will invite the alumni to audit the in-person courses so that they can review and update concepts, competencies, ad skills. This initiative will begin in February of 2019, at the beginning of the third academic trimester. Another initiative that will begin for academic year 2019-2020 is to strengthen the alumni section on our web page with articles, interviews, recommended books, visiting lecturer announcements, and other activities.</p> <p>This questionnaire was re-administered in the PHP alumni meeting took place in December 14. Previously obtained data will be validated with new data.</p> <p><u>Pre-existing data</u></p> <p>This data is a starting point to develop topics to cover. Data is generated annually and come from PHSU Research Report and from the ACGME report of residency programs. This represents data from the years 2015 to 2018. After</p>	
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			<p>analysis of this data, improvement areas were identified, related to skills dealing with diversity, cultural competence, biostatistics, data analysis, and research methodology.</p> <p>These areas for improvement were included in the 2019 Workforce Development Calendar. Another initiative is to create a tutoring program in research for PHSU junior faculty and medical residents. We could offer workshops in these topics as well.</p> <p>Relating to the other need evaluation instruments, PHP is in the process of collecting the data from the PHP Continued Education and Professional Growth survey administered to public health practitioners of the south of the island of Puerto Rico. The collection of data ends on February 2019. The Employer Survey will be administered in February 2019. One of the questions in the surveys relates to the day and time that professional development activities are convenient for maximum impact. Other questions refer to the best delivery method for these activities (in person, recording, or other distance learning applications), and whether continuing education credits should be offered.</p>	
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G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Defines appropriate priority population(s)		<p>The university has a Diversity Committee that is composed of the vice president of student affairs, two faculty members from the university, and one administrative member. This institutional Diversity Committee selected the university's underrepresented populations as the following: non-Hispanic, low socio-economic status, and first generation of university graduates in the family. The program follows the directive of the Diversity Committee and adopts the underrepresented populations identified by the committee.</p> <p>The first concern pertains to the weak designation of specified goals that relate to the program's priority populations. The program has four goals that relate to students, environment, and faculty. Out of four goals, only one specifically ties to one of the identified underrepresented populations: increase in at least 1% of the student representation from economically disadvantaged communities. The team was able to connect this goal directly with one of the priority populations. The other goal related to students is to increase the non-heterosexual student population by 1%, and the goal related to faculty is to increase the fully bilingual faculty population by 1%. Both of these goals are meaningful and</p>	<p>The PHSU Public Health program shares the Diversity criteria of Ponce Health Sciences University (PHSU) and defines the underrepresented populations based on:</p> <ul style="list-style-type: none"> • Non-Hispanic Students • Low socioeconomic status • First generation of university students • Non-traditional academic background. <p>Based on these elements, PHP aims to increase from 2% to 4% in the following populations:</p> <ul style="list-style-type: none"> • Non-Hispanic Students • Low socioeconomic status • First generation of university students • Non-traditional academic background. <p>Based on these criteria, PHP joins the recruiting strategies of the University's Recruitment and Marketing Office, carrying out the following initiatives:</p>	<p>The Council reviewed the program's response and documentation, and changed this finding from partially met to met.</p> <p>Regarding the first concern raised by the site visitors, the program provided documentation that there is evidence of specific goals for the program's priority populations. For example, the program has set a goal to increase enrollment from 2% to 4% the following populations: Non-Hispanic Students, Low socioeconomic status, First generation of university students and Non-traditional academic background.</p> <p>Regarding the second concern in the site visit report about the lack of defined actions tied to the program's goals, the program provided evidence of a number of strategies to increase enrollment for the</p>
Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals				
Learning environment prepares students with broad competencies regarding diversity & cultural competence				
Identifies strategies and actions that create and maintain a culturally competent environment				
Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)				
Practices support recruitment, retention, graduation of diverse students, with attention to priority population(s)				
Regularly collects & reviews quantitative & qualitative data &				

uses data to inform & adjust strategies		truly represent the program's commitment to diversity and inclusion; however, they are for populations not officially defined as priority populations in the self-study document.	<u>1.Non-Hispanic Students</u>	populations defined as underrepresented.
Perceptions of climate regarding diversity & cultural competence are positive		<p>The second concern pertains to the lack of defined actions and strategies tied to the program's goals. Notwithstanding the fact that the program's goals are loosely related to the defined underrepresented populations, the actions and strategies provide little guidance on how the program is to achieve its goals. To recruit students from non-heterosexual populations, the program is coordinating with the CEO of the Puerto Rico Civil Rights Commission to incorporate current program students into the Sexuality and Gender Division of the Civil Rights Commission with the intent to design strategies of impact for the non-heterosexual population. While this may provide a unique opportunity for students to engage in practice experiences, the team did not find this action and strategy as a direct strategy to influence the goal. Strategies related to maintaining a culturally competent environment are basic actions that should be happening in every program, such as incorporating cultural competency themes in the program syllabi and documenting yearly submissions of diversity surveys.</p> <p>Students in the program are exposed to various cultural competence elements throughout the curriculum. One required course, MPH 5520: Bioethics and Public Health covers components such as respect for individual interests, health disparities analyses, types of discrimination, and</p>	<p>As part of the recruitment strategies, PHSU participates in events in the United States in order to impact a diverse community, which includes the participation of students of different nationalities.</p> <p>During the recruitment period 2018-2019 (AY 2019-2020) the PHSU Recruiting Office has participated in the following events:</p> <p>APHA-San Diego, CA-Annual meeting of the American Association of Public Health</p> <p>SACNAS-Dallas, TX- Event that gathers students interested in various areas of investigation related to health, including public health.</p> <p>These events bring together students and health professionals from the United States and other countries that have an interest in the areas of public health. For this reason, PHP identified it as a center to recruit non-Hispanic students.</p> <p>These initiatives will continue to be implemented in subsequent academic periods. In these events the following strategies are carried out:</p> <ul style="list-style-type: none"> • Promotional Booth - at the events an informative table is placed where literature of PHSU's academic 	

		<p>how professional ethics relate to equity and accountability in diverse community settings. The university also requires all students to take IHD 919: Interprofessional Perspectives in Health Disparities. Professors in medicine, public health, basic sciences, and psychology prepare modules that introduce students to the concepts of health disparities, social determinants of health, place and social context in community adaptation of health, cultural competence in providing patient-centered care, and influencing policy using community-based participatory research. Students described a curriculum that is highly integrated with cultural competencies as well as field experiences where students learn how to work with vulnerable populations in the community.</p> <p>The program uses mostly quantitative data to evaluate the successes of its goals and strategies. The program counts the number of referrals to a grievance committee due to a violation of the university's diversity policy as a measure of its success or challenge in encouraging a learning environment that values diversity and cultural competence. At the time of the site visit, there had been no violations reported. Data related to the other goals of recruiting a diverse student body and recruiting and retaining diverse faculty are measured on an annual basis. The program's Admission Committee prepares an annual report based on the incoming class profile. The Evaluation Committee generates an annual evaluation of a diverse faculty body using information obtained from the Human Resource Office. Additionally, the program uses student</p>	<p>programs, including public health, are displayed and distributed.</p> <ul style="list-style-type: none"> • Networking activities - through professional activities held at each event, the recruiter uses the opportunity to create a network of contacts for future alliances, and / or coordination of visits to institutions or related events, where there are potential candidates for the public health program. • Faculty Members: faculty members attend the events in order to orient about the program and clarify doubts. <p><u>Follow-up:</u> To maintain and have contact with interested and potential prospects, their contact information will be collected, and a follow-up plan will be executed.</p> <p>Additionally, the website of the program is in English, in order to be accessible and reach out to a wider diverse, non-Hispanic, audience.</p> <p><u>2.Low socioeconomic level</u></p> <p>As stipulated by the United States Census Bureau in its survey of the Community of Puerto Rico, 2010-2014, most households in Puerto Rico earn a salary close to \$ 10,000 per year. In addition to this, a correlation has been demonstrated between the level of</p>	
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		<p>evaluation of courses and graduation surveys to reflect on student success in achieving cultural competence.</p> <p>Absent true qualitative data, the program was able to present site visitors with two examples of increasing the inclusivity of the program, though the examples do not relate to any of the identified priority populations. Students in the MPH class of 2013 successfully organized the Straight and Gay Alliance (SAGA). The charge of the group is to promote an alliance among people from all genders and sexual orientations in the school. A second example is that in 2016-17, the program, in partnership with university administration and the Committee for Diversity, offered a training program centered on gender identification and maintaining a welcoming environment. As a result of the training, the program now clearly identifies a gender-neutral bathroom in its facilities.</p> <p>The program administers a diversity survey to students, faculty, and staff to evaluate the perception of diversity and cultural competence. Among other types of diversity questions, the survey asks about the inclusivity of the climate of the program. Of the 71 respondents, only 54% agreed that that the program has an inclusive climate, and 36% responded that it was neither inclusive nor exclusive.</p> <p>Faculty explained to site visitors that most students do not feel the climate is inclusive because the medical and</p>	<p>education and the level of poverty that indicates that the lower the level of education of the person, the greater their level of poverty is or will be. However, according to the same report, 13.65% of people who already have a baccalaureate are below the poverty level, and 33.70% of university students who are in the process of completing their baccalaureate are below the poverty level.</p> <p>Based on this information, the recruitment efforts have been focused on the following strategies:</p> <ul style="list-style-type: none"> • Visits to Universities and Schools: According to the geographic areas identified with a high level of poverty (Lajas, Guánica, Peñuelas, Adjuntas, Lares, Maricao, Quebradillas, Ciales, Orocovi, Barranquitas, Comerío and Salinas), visits will be carried out to the educational institutions in these areas. These visits will have an impact with student organizations, specific departments related to the sciences, liberal arts and / or behavioral sciences, as well as solidify a wide network of contacts with administrative and academic staff to promote the recognition of PHSU and academic opportunities that we can offer to that student population. 	
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		<p>nursing students on campus have more resources than the public health students. It appears that public health students may have misinterpreted the question. During the site visit, current students expressed that the program has a welcoming environment and that the dean has an open-door policy. Alumni stated that the public health program creates an environment of respect, and the most recent cohort had a diverse group of students that included different races/ethnicities, sexual orientation, gender identification, and individuals who were the first to go to college in their family. Community partners told site visitors that students who have come to work with them on practice experiences are respectful of the individuals they interact with.</p>	<ul style="list-style-type: none"> • Community Efforts: Through the activities carried out in low socioeconomic communities, we expose the prospects to the academic offers and the work done by the Public Health program as well as its students. This helps to inform this population of the possibilities that exist within the field of public health and how they can contribute to their communities in the future. <p><u>3.First generation of university students</u></p> <p>The student affairs office is conducting the necessary "assessment" to more efficiently identify first generation students in the application process. At the moment, the information system does not have enough data to perform a correlation of data that allows us to identify this type of student. Efforts are being made that will allow us to convert the questions addressed to identify this population into mandatory checkboxes.</p> <p>The recruitment office is making individual efforts during the initial orientation processes of first generation of university students that will allow us to gather information to identify these students in future cohorts. Additionally, the PHSU</p>	
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			<p>marketing department is in the process of developing the new campaign for AY 2019-2020 where messages directed to this classification of students will be included.</p> <p>The current and future strategies to be implemented are:</p> <ul style="list-style-type: none"> • Campaign in traditional and non-traditional media: Through a marketing campaign it is planned to impact first generation of university students through the development of specific messages. These messages will revolve around stories of success / improvement of current students and graduates who are / were first generation. • Digital resources: First generation students tend to have difficulties when it comes to applying and admission process due to the little knowledge of the graduate university system. This can become a barrier and therefore discourage students from completing the process. For this reason, support content will be developed and placed on the website. The content will consist of tutorials and information sheets about the admissions process. • Visits to schools and universities: as in the strategies directed to low socioeconomic level prospects, it is 	
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			<p>expected to directly impact potential candidates through talks, educational fairs, and student congresses, among other related events.</p> <p>The program understands that strategies aimed at recruiting students of low socioeconomic status and those aimed at recruiting students in workplaces can also impact the recruitment of first-generation university students.</p> <p><u>4.Non-traditional academic background.</u></p> <p>These are students who after finishing high school stopped the academic rhythm and engaged in non-academic activities among which is, for example, the incorporation into the workforce.</p> <p>According to a study conducted by “Estudios Técnicos”, Inc, for SME Puerto Rico, 96% of the Puerto Rican population has a social network account; which accounts for more than two million inhabitants in Puerto Rico.</p> <p>Base on the mentioned data, the following strategies have been developed:</p> <ul style="list-style-type: none"> • Digital Marketing Campaigns: PHSU has concentrated its marketing efforts on digital strategies focused on people over 25 years of age, with a 	
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			<p>demographic profile that indicates having completed university studies at an undergraduate level. This specific campaign seeks to attract non-traditional prospects who wish to progress both academically and professionally through the continuity of their preparation with graduate studies.</p> <p>On the other hand, we work other strategies of direct marketing to reach this public:</p> <ul style="list-style-type: none"> • Visits to public and private companies: By developing greater recognition of the program and PHSU in this population, it is expected to impact a significant public. In addition to the working force in industries and government corporations, this effort is being combined with direct visits to these entities, in order to create a network of contacts and the future coordination of events in these branches. • Promotional Booth (exhibitor) at events and shopping centers: The marketing department coordinates participation in events where health professionals and other markets of interest meet to promote the academic opportunities of PHSU. Additionally, four times a year we participate in the trade fair of companies in the main 	
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			commercial centers of the country for the same purpose. Here we put information and work in order to capture "leads", meaning prospects for our programs.	
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H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment		<p>Students have access to academic advising services at both institutional and program levels. The university offers academic advising services through the Office of Student Affairs and uses professional counselors, faculty, peers, and administrators to provide various types of support in the academic development of students. Institutional academic advising includes both preventive and interventional types of advising for academic at-risk students.</p> <p>The public health program also provides advising services through the dean, faculty, track coordinators, and APE and ILE coordinators. Students are assigned faculty advisors at the beginning of their first year in the program. The dean meets with students to discuss academic performance and make appropriate recommendations,</p>	Click here to enter text.	Click here to enter text.
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study				
Qualified individuals monitor student progress & identify and support those who may experience difficulty				
Orientation, including written guidance, is provided to all entering students				

		<p>identify student needs, and refer students to professional services, if needed. Students also receive advising from concentration coordinators, who advise specific to the concentration curriculum requirements. Doctoral students have an additional advisor through the dissertation process.</p> <p>The associate dean appoints faculty advisors. Faculty meet individually with the associate dean to discuss their roles and responsibilities. Faculty advisors have general responsibilities such as providing information on policies, rules, and academic requirements, assist in the identification and development of scholarly activities based on abilities and interests, and monitor the student educational plans and assist with selection of courses and activities. The faculty advisor may also refer students to track coordinators for specific problems or concerns related to the curriculum. Through regular meetings, faculty advisors are expected to assess areas of academic difficulties and/or personal needs. If a student is academically at risk, advisors identify factors that affect the student's performance, recommend services or resources, and refer students to counseling, if necessary.</p> <p>The program does not have a formalized mechanism to keep faculty current and knowledgeable about the curricula, however through faculty meetings and program committee meetings, advisors are informally kept up to</p>		
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		<p>date of current changes to curricula and student requirements for graduation.</p> <p>The program uses graduate exit surveys to gather information on student satisfaction with advising. An internally developed questionnaire was administered to graduates in 2017-18. The program had a 78% response rate. On the question “How effective was the advising from your major advisor,” 92% of MPH students said that they were satisfied with their advisor, and 100% of the DrPH respondents said that they were satisfied. The survey then asks the student to agree with the following statement, “I believe that my program provided me with good academic mentoring during my program.” Of MPH respondents, 96% agreed with this statement, and 100% of the doctoral students agreed.</p>		
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H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	Program Response	Council Comments
	Met with Commentary			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & can provide career placement advice		The program’s career advising services are shared by both MPH and DrPH students and alumni. As of 2017, the program created and filled a new position titled the Career & Program Promotion Services Coordinator. The coordinator works with the university’s Student and	The PHP Career Coordinator will meet with Director of Academic Affairs to discuss how the Public Health Program can integrate with the institutional services and establish a timeline.	Click here to enter text.

<p>Variety of resources & services are available to current students</p>		<p>Counseling Services Office to keep up to date on policies and events related to career services. The coordinator also facilitates specific public health career events for the program's students.</p>	<p><u>Action Plan</u></p>	
<p>Variety of resources & services are available to alumni</p>		<p>As described by the program, career advising was an informal process with faculty before the creation of the coordinator position. Previously, faculty had shared information on job announcements, and advising was mainly initiated by students who contacted individual faculty members. At the time of the site visit, the program was working to integrate faculty formally into career advising roles through faculty-led career workshops, panels, and mock interviews.</p> <p>The commentary pertains to the very few actual public health-specific career resources available to students. While the program provides ample resources related to job searching such as professional etiquette, resume building, and interview skills, there are only a few services specific to public health careers. Some of the examples of public health-specific services include job and fellowship announcements on a bulletin board, emails to students and alumni about job and/or fellowship announcements, workshops on diverse career-related topics, and the personal connections faculty and staff have with the Puerto Rican public health community.</p>	<p>The PHP Career Coordinator will prepare a plan with strategies and timeline of services specific to public health careers.</p>	

		<p>In addition to offering general career advice such as resume building workshops, job interview skills, and mock interviews, the program held its first public health career and job fair in March 2018. The program reported that 97 participants attended the job fair, which included a mix of current students and alumni. The program maintains a database of alumni contacts and sends emails to all alumni about public health-related job positions, internships, and trainings. Direct referral of alumni to potential employers has led to four MPH and one DrPH being hired.</p> <p>The graduate exit surveys inquire about students' experiences with career advising in addition to academic advising. There is only one data point, the 2017-18 survey, to which 25 MPH students responded and three DrPH students responded. From the survey results, 72% of MPH students reported being satisfied with the university's graduate education career counseling and networking, and 100% of DrPH students reported satisfaction. Seventy-six percent of the MPH student respondents agreed that their education provided professional and/or academic preparation relevant to their career plans, while 100% of DrPH students agreed. Discussions with alumni indicated that they were satisfied with the career advice received from the program before they graduated. One alumnus even described having an interview the following week because he applied to a job forwarded to him by the career coordinator.</p>		
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H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		The program uses the university's set of complaint procedures.	Click here to enter text.	Click here to enter text.
Procedures are clearly articulated & communicated to students		All students who met with site visitors stated that they knew of the complaint or grievance process. One student was able to describe the three layers of complaint resolution, which begins with working one-on-one with the professor to resolve the conflict. If that does not work, then the next step is to go to the dean, and if that does not work, the last step is to go to institutional administration for resolution.		
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel		Another student stated that as the student representative on the program's Curriculum Committee, she has the ability to talk directly with professors regarding any issues with a course that one of her fellow students may bring to her. This is another way of resolving potential complaints or issues.		
Designated administrators are charged with reviewing & resolving formal complaints				
All complaints are processed & documented		There are have been no formal complaints or grievances in the last three years.		

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The program recruits most of its students locally and from Puerto Rico. Admission requirements are very clear for the MPH and DrPH programs. The Admissions Committee meets once a year to review applications. Candidates who wish to enroll in the master's degree must have successfully earned a bachelor's degree from an accredited college-level institution, have a minimum GPA of 2.75, completed required courses, have taken the GRE, submit three letters of recommendation, and sit for a personal interview with members of the Admissions Committee.	Click here to enter text.	Click here to enter text.
Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers				
Tracks at least one measures that is meaningful and demonstrates success in enrolling a qualified student body		<p>Candidates who wish to enroll in the DrPH in epidemiology must also have successfully completed a bachelor's or master's degree from an accredited institution, have a minimum GPA of 3.00, completed introductory public health courses, have taken the GRE, submit three letters of recommendation, and sit for a personal interview.</p> <p>The program has chosen three significant indicators that demonstrate its success in enrolling a qualified student body. These indicators are 1) MPH GPA, 2) DrPH GPA (previous BS), and 3) DrPH GPA (previous MSc). The</p>		

		program has exceeded its target for all three indicators for the last three years. The target GPA for MPH admissions is 2.9, and from 2015 through 2017 it was 3.3, 3.29, and 3.18, respectively. The GPA for DrPH admissions is 3.1 and has been 3.25, 3.19, and 3.15 for those with a previous BS and 3.28, 3.73, and 3.88 for those with a previous MSc. By these indicators, it appears that the program is successful in enrolling a qualified student body.		
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H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	Program Response	Council Comments
	Partially Met			
Catalogs & bulletins used to describe educational offerings are publicly available		The site visit team confirmed that program catalogs and bulletins are publically available and accurately describe educational offerings.	The PHP Career Coordinator will make an appointment with the webpage Master to make arrangements to edit this information and stress the importance of keeping public health information consistent on the website and publications. <u>Action Plan</u> Visual verification on the website that there has been a name shift from School of Public Health to Public Health Program.	The Council reviewed the report and university website and changed the finding from met with commentary to partially met. This decision was based on the fact that the institutional website remains unchanged.
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements		Information pertaining to the academic calendar, admissions policies, grading polices, academic integrity standards, and degree completion requirements are made available to students. A review of the program’s English language syllabi confirmed that grading policies and academic integrity standards are published on syllabi.		
Advertising, promotional & recruitment materials contain accurate information		Additionally, students receive information about degree completion requirements and polices in their student handbook.		

		<p>The commentary pertains to the main university website. The home page of PHSU advertises a School of Public Health; however, all of the other website pages promote a program in public health. Publicly available information must be consistent for all stakeholders.</p>		
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AGENDA

PUBLIC HEALTH PROGRAM Council on Education for Public Health – Site Visit Agenda Ponce Health Sciences University Public Health Program

All sessions, unless otherwise noted, will take place in President Conference Room.

September 20-21, 2018

Thursday September 20th, 2018

- 8:30 am **Site Visit Team Request for Additional Documents**
Vivian S. Green, Ph.D., MS, LND, Associate Dean
Ada Gonzalez and Juan Gonzalez, Administrative Assistants
- 8:45 am **Site Visit Team Executive Session 2**
- 9:00 am **Break**
- 9:15 am **Program Evaluation**

Participants	Topics on which participants are prepared to answer team questions
Vivian S. Green, PhD, MS, LND – Public Health Program Associate Dean Mayra Roubert, DrPH, MS – DrPH Coordinator and Chair Curriculum Committee Brenda Soto, PhD, MPHE - ILE Coordinator	<i>Guiding statements – process of development and review?</i>
Frank Fraticelli, PhD, MPHE – Chair Assessment Committee Yashira Sánchez, PhD, MS, Lic. Chem - Member Assessment Committee Juan Carlos Orengo, PhD. MPH, MD - Public Health Program Faculty Iris Martinez, DrPH; MPH - Public Health Program Faculty Ivette Ponce, M.Ed.- Career & Program Promotion Services Coordinator	<i>Evaluation processes – how does program collect and use input/data?</i>
Vivian S. Green, PhD, MS, LND – Public Health Program Associate Dean Mayra Roubert, DrPH, MS – DrPH Coordinator and Chair Curriculum Committee Luisa Morales, DrPH – First Year Coordinator Damaris Torres, MSIT, CISSP – IT Director	<i>Resources (personnel, physical, IT) – who determines sufficiency? Acts when additional resources are needed?</i>
Vivian S. Green, PhD, MS, LND – Public Health Program Bethzaida Cruz, MBA, CPA -Vice President of Finance Eneida Castro, MBA -Director Budget Department	<i>Budget – who develops and makes decisions?</i>
Dr. Cynthia Rivera - Translator	
Total participants: 14	

- 10:15 am **Break/Document Review**
- 11:00 am **Curriculum 1**

Participants	Topics on which participants are prepared to answer team questions
Mayra Roubert, DrPH, MS - DrPH Coordinator and Chair Curriculum Committee	<i>Foundational knowledge</i>
Brenda Soto, PhD, MPHE - ILE Coordinator Rafael Bredy, MBE, MScCR, MD - APE Coordinator	<i>Foundational competencies – didactic coverage and assessment</i>
Mayra Roubert, DrPH, MS - DrPH Coordinator and Chair Curriculum Committee Luisa Morales, DrPH – First Year Coordinator Jessica Irizarry, PhD, - MPH General Track Coordinator Melissa Marzan, DrPH, MPH, CPH – Epi. T rack Coordinator Adalberto Bosque, PhD, MBA, REM, CEA, CESCO – Environmental Health Tack Coordinator	<i>Concentration competencies – development, didactic coverage, and assessment</i>
Total participants: 8	

11:45 pm **Break & Lunch Set-up**

12:00 pm **Students**

Participants	Topics on which participants are prepared to answer team questions
Paola Colón, MPH student First Year Jose Medina, MPH student - First Year Nakar Vargas, student - First Year Paola Ramos, MPH student – General Track student Jonathan Becerra, MPH Epidemiology Track student Lia López, MPH Epidemiology Track student Ivan Villafañá, MPH student - Environmental Track student Fabian Ramírez, MPH Environmental Health Track student Nicole Muñoz, DrPH student Alejandro Veintidós, DrPH student Mary Correa DrPH student Dr. Cynthia Rivera - Translator	<i>Student engagement in program operations</i> <i>Curriculum</i> <i>Resources (physical, faculty/staff, IT)</i> <i>Involvement in scholarship and service</i> <i>Academic and career advising</i> <i>Diversity and cultural competence</i> <i>Complaint procedures</i>
Total participants: 15	

1:15 pm **Break**

1:30 pm **Curriculum 2**

Participants	Topics on which participants are prepared to answer team questions
Rafael Bredy, MBE, MScCR, MD - APE Coordinator	<i>Applied practice experiences</i>
Brenda Soto, PhD, MPHE - ILE Coordinator	<i>Integrative learning experiences</i>
Mayra Roubert, DrPH, MS - DrPH Coordinator and Chair Curriculum Committee Luisa Morales, DrPH – First Year Coordinator	

Jessica Irizarry, PhD, - MPH General Track Coordinator Melissa Marzan, DrPH, MPH, CPH – Epi. Track Coordinator Adalberto Bosque, PhD, MBA, REM, CEA, CESCO – Environmental Health Track Coordinator	
Total participants: 7	

2:30 pm **Break**

2:45 pm **Instructional Effectiveness**

Participants	Topics on which participants are prepared to answer team questions
Elizabeth Rivera, Ed.D - Assistant Dean of Curriculum and Faculty Development	<i>Currency in areas of instruction & pedagogical methods</i>
Juan Carlos Orengo, Ph.D., MPH, MD, – Public Health Program Faculty Juan Alberto Santiago Cornier, Ph.D., MD - Public Health Program Faculty Vanessa Rivera, Ph.D.- Research Dean	<i>Scholarship and integration in instruction</i>
Iris Martínez DrPH, MPH - Public Health Program Faculty José Soto, Ph.D. - Public Health Program Faculty Ivette Ponce, M.Ed. - Career & Program Promotion Services Coordinator	<i>Extramural service and integration in instruction</i>
Iris Martínez DrPH, MPH - Public Health Program Faculty Jessica Irizarry, PhD, MPH, MPH General Track Coordinator	<i>Integration of practice perspectives</i>
Juan Carlos Orengo, Ph.D., MPH, MD - Public Health Program Faculty	<i>Professional development of community</i>
Dr. Cynthia Rivera – Translator	
Total participants:10	

3:45 pm **Break**

4:00 pm **Stakeholder Feedback/Input**

Participants	Topics on which participants are prepared to answer team questions
Jorge Martínez (EPA) – Preceptor and Member External Advisory Committee	<i>Involvement in program evaluation & assessment</i>
Wilmarie Muñiz, DrPHc, MPH – Graduate José Montalvo DrPH, MPH, - Graduate Robert Rodríguez DrPH; MPH - Graduate Zilkia Irizarry DrPH, MPH, MD - Graduate José Oliveras, MPH, MD- Graduate Rachel Rodríguez, MPH - Graduate Oscar Ortiz MPH - Graduate Natasha Torres, MPH – Graduate Gloribell Ortiz, DrPH, BN	<i>Perceptions of current students & program graduates</i>
Mr. Pastor Roberto Ortiz - Community of La Playa, Ponce	<i>Perceptions of curricular effectiveness</i>

Mr. Ramón Figueroa - Community of La Playa, Ponce	
Luisa Alvarado, MD, FAPP, Saint Luke's Memorial Hospital – Preceptors (Sentinel Enhance Dengue Surveillance System (SEDSS) Sites	<i>Applied practice experiences</i>
Laura Deliz, PhD – Ponce Autism Center – Community and Preceptors Wanda Lledó, RN, - Infection Control- Nurse Supervisor - Preceptors Jorge Martínez (EPA) - Preceptors	<i>Integration of practice perspectives</i>
Luisa Alvarado, MD, FAPP, Saint Luke's Memorial Hospital – Preceptors (Sentinel Enhance Dengue Surveillance System (SEDSS) Sites	<i>Program delivery of professional development opportunities</i>
Dr. Cynthia Rivera – Translator	
Total participants: 17	

5:00 pm **Site Visit Team Executive Session 3**

5:45 pm **Adjourn**

Friday September 21th, 2018

8:30 am **University Leaders**

Participants	Topics on which participants are prepared to answer team questions
David Lenihan, Ph.D., JD – President & CEO José Torres, PhD – Provost and Vice President for Academic Affairs Kenira Thompson, PhD. – Vice President of Research Gladys Pereles, Ed – Dean of Education and Health Sciences	<i>Program's position within larger institution</i>
Mr. Carlos Rojas, CPA - Chief Financial Officer (CFO)	<i>Provision of program-level resources</i>
David Lenihan, Ph.D., JD – President & CEO José Torres, PhD – Provost and Vice President for Academic Affairs	<i>Institutional priorities</i>
Total participants: 5	

9:00 am **Break**

9:15 am **Site Visit Team Executive Session 4**

1:00 pm **Exit Briefing**

2:00 pm **Team Departs**