**B1.  Guiding Statements (SPH and PHP)**

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

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

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

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

**Together, the school or program's guiding statements must address instruction, scholarship and service and**

- **must define the ways in which the school or program plans to (1) advance the field of public health and (2) promote student success.**
- **may derive from the purposes of the parent institution but also reflect the school or program's own aspirations and respond to the needs of the school or program's intended service area(s).**
- **are sufficiently specific to allow the school or program to rationally allocate resources and to guide evaluation of outcomes.**

**Required documentation:**

**1) A one-to-three page document that, at a minimum, presents the school or program's vision, mission, goals and values.  The document may take the form of the executive summary of a strategic plan, or it may take other forms that are appropriate to support the school or program's ongoing efforts to advance public health and student success. (self-study document)**

The guiding statements for the Graduate Programs in Public Health address instruction, research/scholarship and service.  The Program mission statement and program values statements have not significantly changed since 2014 and have been confirmed through recent program strategic planning and the accreditation workgroup's self-study process. The Program's vision statement was added in 2018, which aligns with the Department's vision and University aspirations (Roadmap to 2025) and the program goals have been expanded to include innovation, with revised evaluation metrics from strategic program planning in 2019-2020.

**Mission**
The mission of the Graduate Programs in Public Health is to develop leaders who can generate and translate knowledge into policy and practice to promote health and prevent disease in human populations.

**Vision**
A world with healthy people living in healthy communities.

**Values**
The values of the Graduate Programs in Public Health support our mission and guide our collective daily activities. They include:

**Physical and Mental Health and Well-Being**:  A fundamental right of every human being

**Health Equity**:  A commitment to ensure the health of all populations, including the most vulnerable and underserved

**The Freedom of Inquiry**:  To think, to question and to challenge form the basis of all our educational, scholarship and service activities

**Diversity, Inclusion and Mutual Respect**:  Promote and celebrate individual and collective distinctions among our students, faculty, staff and community partners

**Personal and Professional Integrity**:  Ethical behavior guides the activities of our students, faculty, staff and community partnerships

**Community and Organizational Partnerships**:  Participatory collaboration with diverse and fully engaged stakeholders to promote health and social change

## Goals
### Instruction
1. To provide engaging educational opportunities preparing leaders to maximize the health and well-being of individuals, communities, and populations.
2. To mobilize a diverse student body to address complex public health issues, including issues affecting vulnerable and underserved populations.
3. To nurture an inclusive environment in which students are supported as they attain the knowledge, competencies, and values of public health.
4. To promote instructional innovation and faculty advancement in teaching.

### Scholarship
5. To foster an environment in which students and faculty engage and collaborate on rigorous scientific investigations addressing public health issues, with an emphasis on vulnerable and underserved populations.
### Service
6. To engage with communities, professionals, leaders and others as partners in improving the health of populations, including the most vulnerable and underserved.

### Innovation
7. To develop and maintain infrastructure, resources and technologies that are adequate to support faculty, staff and students as they work to accomplish the mission of the public health program.

As indicated in the table below and described in additional detail in Criterion B5, the Graduate Programs goals seek to advance the field of public health and promote student success.

| Program Goal Statement | Advance the Field of Public Health | Promote Student Success |
|---|---|---|
| 1. To provide engaging educational opportunities preparing leaders to maximize the health and well-being of individuals, communities and populations | X | X |
| 2. To mobilize a diverse student body to address complex public health issues, including issues affecting vulnerable and underserved populations | | X |
| 3. To nurture an inclusive environment in which students are supported as they attain the knowledge, competencies and values of public health | | X |
| 4. To promote instructional innovation and faculty advancement in teaching | X | X |

| | | | |
|---|---|---|---|
| 5. | To foster an environment in which students and faculty engage and collaborate on rigorous scientific investigations addressing public health issues, with an emphasis on vulnerable and underserved populations | X | X |
| 6. | To engage with communities, professionals, leaders and others as partners in improving the health of populations, including the most vulnerable and underserved | X | X |
| 7. | To develop and maintain infrastructure, resources and technologies that are adequate to support faculty, staff and students as they work to accomplish the mission of the public health program | X | X |

**2) If applicable, a school- or program-specific strategic plan or other comparable document. (electronic resource file)**

Strategic plans are included in ERF B1.2.
- Strategic planning and evaluation materials for the Graduate Programs in Public Health (2017, 2019 and 2020)
- The University of Miami RoadMap to Our New Century Strategic Plan, 2018 – 2025

**3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)**

Strengths:  The Graduate Programs has clear statements of mission, vision, values, and goals that reflect a commitment to student success and advancing the field of public health.  During the self-study process, program faculty, staff, students, and other critical stakeholders updated and reaffirmed the program's mission statement, vision, and values. The program goals and measurable objectives were reaffirmed and updated in 2019-2020 as part of strategic program planning.

Weaknesses:  No significant weaknesses are noted.

Plans for Improvement:  Continue to review and revise the program's mission, vision, goals, and values as needed and communicate changes and updates to all involved stakeholders.

**B2. Graduation Rates (SPH and PHP)**

**The school or program collects and analyzes graduation rate data for each public health degree offered (i.e., BS, MPH, MS, PhD, DrPH).**

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

**Required documentation:**

**1)  Graduation rate data for each public health degree.  See Template B2-1. (self-study document)**

Template B2-1.

| Students in the MPH Degree (Generalist and Public Health Physician Concentrations), by Cohorts Entering Between 2014 - 15 and 2019 – 20 | | | | | | | |
|---|---|---|---|---|---|---|---|
| Maximum Time to Graduate (MTTG) = 6 years | | | | | | | |
| | Cohort of Students | 2014-15 | 2015-16 | 2016-17 | 2017-18 | 2018-19 | 2019-20 |
| **2014-15** | # Students entered | 112 | | | | | |
| | # Students withdrew, dropped, etc. | 2 | | | | | |
| | # Students graduated | 8 | | | | | |
| | Cumulative graduation rate | 7% | | | | | |
| **2015-16** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 102 | 107 | | | | |
| | # Students withdrew, dropped, etc. | 0 | 1 | | | | |
| | # Students graduated | 27 | 5 | | | | |
| | Cumulative graduation rate | 31% | 5% | | | | |
| **2016-17** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 75 | 101 | 94 | | | |
| | # Students withdrew, dropped, etc. | 1 | 2 | 0 | | | |
| | # Students graduated | 16 | 26 | 4 | | | |
| | Cumulative graduation rate | 46% | 29% | 4% | | | |
| **2017-18** | # Students continuing at beginning of this school year (or | 58 | 73 | 90 | 96 | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | # entering for newest cohort) | | | | | |
| | # Students withdrew, dropped, etc. | 0 | 2 | 3 | 0 | |
| | # Students graduated | 47 | 13 | 25 | 5 | |
| | Cumulative graduation rate | 88% | 41% | 31% | 5% | |
| **2018-19** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 11 | 58 | 62 | 91 | 95 |
| | # Students withdrew, dropped, etc. | 0 | 0 | 1 | 0 | 0 |
| | # Students graduated | 6 | 46 | 6 | 26 | 9 |
| | Cumulative graduation rate | 93% | 84% | 37% | 32% | 10% |
| **2019-20** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 5 | 12 | 55 | 65 | 86 |
| | # Students withdrew, dropped, etc. | 3 | 1 | 1 | 1 | 2 |
| | # Students graduated | 2 | 8 | 45 | 6 | 14 |
| | Cumulative graduation rate | 95% | 92% | 85% | 39% | 24% |

*Note: the 2019-20 rows include an additional (6th) data column with values 94, 1, 4, 4% respectively.*

| **Students in the MS Degrees (Biostatistics, Prevention Science and Community Health and Public Health), by Cohorts Entering Between 2014 - 15 and 2019 - 20** | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Maximum Time to Graduate (MTTG) = 6 years** | | | | | | | |
| | **Cohort of Students** | **2014-15** | **2015-16** | **2016-17** | **2017-18** | **2018-19** | **2019-20** |
| **2014-15** | # Students entered | 22 | | | | | |
| | # Students withdrew, dropped, etc. | 0 | | | | | |
| | # Students graduated | 1 | | | | | |
| | Cumulative graduation rate | 5% | | | | | |
| **2015-16** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 21 | 17 | | | | |
| | # Students withdrew, dropped, etc. | 0 | 0 | | | | |

| Year | Metric | | | | | | |
|---|---|---|---|---|---|---|---|
| | # Students graduated | 15 | 1 | | | | |
| | Cumulative graduation rate | 73% | 6% | | | | |
| **2016-17** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 6 | 16 | 16 | | | |
| | # Students withdrew, dropped, etc. | 0 | 0 | 0 | | | |
| | # Students graduated | 2 | 10 | 3 | | | |
| | Cumulative graduation rate | 82% | 65% | 19% | | | |
| **2017-18** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 4 | 6 | 13 | 21 | | |
| | # Students withdrew, dropped, etc. | 0 | 0 | 0 | 0 | | |
| | # Students graduated | 1 | 4 | 7 | 12 | | |
| | Cumulative graduation rate | 86% | 88% | 63% | 57% | | |
| **2018-19** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 3 | 2 | 6 | 9 | 18 | |
| | # Students withdrew, dropped, etc. | 0 | 0 | 0 | 0 | 0 | |
| | # Students graduated | 1 | 0 | 2 | 6 | 4 | |
| | Cumulative graduation rate | 91% | 88% | 75% | 86% | 22% | |
| **2019-20** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 2 | 2 | 4 | 3 | 14 | 19 |
| | # Students withdrew, dropped, etc. | 1 | 1 | 1 | 0 | 0 | 0 |
| | # Students graduated | 1 | 0 | 1 | 1 | 10 | 8 |
| | Cumulative graduation rate | 95% | 88% | 81% | 91% | 77% | 42% |

**Students in the PhD Degree (Biostatistics, Epidemiology and Prevention Science and Community Health), by Cohorts Entering Between 2012-13 and 2019-20**

**Maximum Time to Graduate (MTTG) = 8 years**

|  | Cohort of Students | 2012-13 | 2013-14 | 2014-15 | 2015-16 | 2016-17 | 2017-18 | 2018-19 | 2019-20 |
|---|---|---|---|---|---|---|---|---|---|
| **2012-13** | # Students entered | 12 | | | | | | | |
|  | # Students withdrew, dropped, etc. | 0 | | | | | | | |
|  | # Students graduated | 0 | | | | | | | |
|  | Cumulative graduation rate | 0% | | | | | | | |
| **2013-14** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 12 | 8 | | | | | | |
|  | # Students withdrew, dropped, etc. | 2 | 0 | | | | | | |
|  | # Students graduated | 0 | 0 | | | | | | |
|  | Cumulative graduation rate | 0% | 0% | | | | | | |
| **2014-15** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 10 | 8 | 4 | | | | | |
|  | # Students withdrew, dropped, etc. | 0 | 0 | 1 | | | | | |
|  | # Students graduated | 0 | 0 | 0 | | | | | |
|  | Cumulative graduation rate | 0% | 0% | 0% | | | | | |
| **2015-16** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 10 | 8 | 3 | 11 | | | | |
|  | # Students withdrew, dropped, etc. | 0 | 0 | 0 | 0 | | | | |
|  | # Students graduated | 0 | 0 | 0 | 0 | | | | |
|  | Cumulative graduation rate | 0% | 0% | 0% | 0% | | | | |
| **2016-17** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 10 | 8 | 3 | 11 | 9 | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | # Students withdrew, dropped, etc. | 2 | 0 | 0 | 0 | 1 | | | |
| | # Students graduated | 7 | 1 | 0 | 0 | 0 | | | |
| | Cumulative graduation rate | 58% | 13% | 0% | 0% | 0% | | | |
| **2017-18** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 1 | 7 | 3 | 11 | 8 | 10 | | |
| | # Students withdrew, dropped, etc. | 0 | 1 | 0 | 0 | 0 | 0 | | |
| | # Students graduated | 1 | 3 | 0 | 1 | 0 | 0 | | |
| | Cumulative graduation rate | 66% | 50% | 0% | 9% | 0% | 0% | | |
| **2018-19** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 0 | 3 | 3 | 10 | 8 | 10 | 11 | |
| | # Students withdrew, dropped, etc. | --- | 0 | 0 | 0 | 0 | 0 | 0 | |
| | # Students graduated | --- | 2 | 1 | 2 | 1 | 0 | 0 | |
| | Cumulative graduation rate | 66% | 75% | 25% | 27% | 11% | 0% | 0% | |
| **2019-20** | # Students continuing at beginning of this school year (or # entering for newest cohort) | 0 | 1 | 2 | 8 | 7 | 10 | 11 | 11 |
| | # Students withdrew, dropped, etc. | --- | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| | # Students graduated | --- | 1 | 1 | 5 | 4 | 0 | 0 | 0 |
| | Cumulative graduation rate | 66% | 88% | 50% | 73% | 56% | 0% | 0% | 0% |

**2) Data on public health doctoral student progression in the format of Template B2-2. (self-study document)**

Template B2-2.

| Doctoral Student Data for Year 2020 - 2021 | Biostatistics Program | Epidemiology Program | Prevention Science and Community Health Program |
|---|---|---|---|
| # newly admitted students in 2020-21 | 2 | 2 | 4 |
| # currently enrolled (total) in 2020-21 | 15 | 12 | 19 |
| # completed coursework during 2019-20 | 6 | 7 | 9 |
| # in candidacy status (cumulative) during 2019-20 | 9 | 5 | 10 |
| # graduated in 2019-20 | 3 | 2 | 4 |

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

MPH
The maximum time to graduation for a master's degree, per University policy, is six years. MPH Generalist degree students can be granted an extension of time to complete (beyond 6 years) for exceptional circumstances. The maximum time to graduate for the MD/MPH Public Health Physician degree is four years (a lock-step joint degree program). MD/MPH students who experience a formal leave of absence or required repetition of a medical school year will be delayed in their MPH studies and are permitted to complete the program in one additional year.

MS
Enrollment numbers are small across the biostatistics, prevention science and community health and public health MS programs. Most students complete the MS degree in 1-3 years (MS BST is a one-year curriculum, MS PREV and MS Public Health are two-year curriculums). The MS Climate and Health degree began in 2020-21 and its first graduates are expected in 2022.

PhD
Extension of time to complete beyond the MTTG (8 years) is only granted under exceptional circumstances. Graduation rates for cohorts not yet complete are expected to reach the target rate before MTTG.

**4) If applicable, assess the strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)**

Strengths: The Graduate Programs has formal policies and procedures to carefully monitor student progress. The vast majority of students complete their degrees consistent with the program's expectations.

Weaknesses: Small admission cohorts (e.g., PhD) that experience any student withdrawal or dismissal impacts the final graduation rate, which may not reach the target.

Plans for Improvement: Continue to monitor all enrolled students.

**B3.  Post-Graduation Outcomes**

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

**The school or program chooses methods that are explicitly designed to minimize the number of students with unknown outcomes.  This expectation includes collecting data that accurately presents outcomes for graduates within approximately one year of graduation, since collecting data shortly before or at the exact time of graduation will result in underreporting of employment outcomes for individuals who begin their career search at graduation.  In many cases, these methods will require multiple data points.  The school or program need not rely solely on self-report or survey data and should use all possible methods for collecting outcome data.**

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

**Required documentation:**

1)  **Data on post-graduation outcomes (employment or enrollment in further education) for each public health degree.  See Template B3-1. (self-study document)**

Template B3-1.

| Post-Graduation Outcomes (MPH) | 2016 - 2017 Number and percentage | 2017- 2018 Number and percentage | 2018 - 2019 Number and percentage | 2019 - 2020 Number and percentage |
|---|---|---|---|---|
| Employed | 32 (34%) | 34 (34%) | 25 (27%) | 19 (24%) |
| Continuing education/training (not employed) | 58 (61%) | 62 (62%) | 64 (69%) | 58 (75%) |
| Not seeking employment or not seeking additional education by choice | 1 (1%) | 0 | 2 (2%) | 0 |
| Actively seeking employment or enrollment in further education | 2 (2%) | 1 (1%) | 0 | 0 |
| Unknown | 2 (2%) | 3 (3%) | 2 (2%) | 1 (1%) |
| Total graduates (known and unknown) | 95 (100%) | 100 (100%) | 93 (100%) | 78 (100%) |

| Post-Graduation Outcomes (MSPH) | 2016 - 2017 Number and percentage | 2017 - 2018 Number and percentage | 2018 - 2019 Number and percentage | 2019 - 2020 Number and percentage |
|---|---|---|---|---|
| Employed | 11 (84%) | 10 (83%) | 5 (42%) | 7 (64%) |
| Continuing education/training (not employed) | 1 (8%) | 2 (17%) | 5 (42%) | 2 (18%) |
| Not seeking employment or not seeking additional education by choice | 1 (8%) | 0 | 0 | 1 (9%) |
| Actively seeking employment or enrollment in further education | 0 | 0 | 0 | 0 |
| Unknown | 0 | 0 | 2 (16%) | 1 (9%) |
| Total graduates (known and unknown) | 13 (100%) | 12 (100%) | 12 (100%) | 11 (100%) |

| Post-Graduation Outcomes (MS) | 2016 - 2017 Number and percentage | 2017 - 2018 Number and percentage | 2018 - 2019 Number and percentage | 2019 - 2020 Number and percentage |
|---|---|---|---|---|
| Employed | 2 (67%) | 10 (83%) | 2 (75%) | 5 (46%) |
| Continuing education/training (not employed) | 1 (33%) | 2 (17%) | 1 (25%) | 2 (18%) |
| Not seeking employment or not seeking additional education by choice | 0 | 0 | 0 | 1 (9%) |
| Actively seeking employment or enrollment in further education | 0 | 0 | 0 | 0 |
| Unknown | 0 | 0 | 0 | 3 (27%) |
| Total graduates (known and unknown) | 3 (100%) | 12 (100%) | 3 (100%) | 11 (100%) |

| Post-Graduation Outcomes (PhD) | 2016 - 2017 Number and percentage | 2017 - 2018 Number and percentage | 2018 - 2019 Number and percentage | 2019 - 2020 Number and percentage |
|---|---|---|---|---|
| Employed | 8 (100%) | 7 (100%) | 7 (78%) | 9 (100%) |
| Continuing education/training (not employed) | 0 | 0 | 2 (22%) | 0 |
| Not seeking employment or not seeking additional education by choice | 0 | 0 | 0 | 0 |
| Actively seeking employment or enrollment in further education | 0 | 0 | 0 | 0 |
| Unknown | 0 | 0 | 0 | 0 |
| Total graduates (known and unknown) | 8 (100%) | 7 (100%) | 9 (100%) | 9 (100%) |

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

The Graduate Programs has an excellent record of post-graduate outcomes. Graduate outcome data is collected by the Director of Career and Professional Development within one year of graduation through various methods, including online surveys, email communication, program outreach, and online sources (e.g., LinkedIn, Facebook, Google). Data are solicited from the recent graduate, as well as employers, faculty, staff, and online sources to minimize the number of unknown outcomes.

Each degree program achieves a rate of 80% or greater employment or enrollment in further education/training, except the MS programs for 2019 - 2020 (64%). Graduates who enter a fellowship, internship or residency program are recorded as continuing education/continuing training.

The MPH table includes both stand-alone MPH students and dual degree MPH students (4-year MD/MPH and other dual degrees with MPH). The MD/MPH program accounts for the high representation of graduates pursuing further education. The MS table includes data for the biostatistics degree (2016 – 2020) and the prevention science and community health degree (2019 - 2020 only). The MS in Climate and Health degree matriculated its first cohort in Fall 2020 and has not produced any graduates. The PhD table includes data for each of our doctoral programs in biostatistics, epidemiology and prevention science and community health.

**3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.  (self-study document)**

Strengths:  Post-graduate tracking at or within one year of graduation indicates a high percentage of graduates are employed or seeking an advanced degree or training program.

Weaknesses:  Long-term tracking of students is challenging.

Plans for Improvement:  Continue to maintain an active post-graduation relationship with alumni through alumni survey efforts and Cane2Cane.

**B4.  Alumni Perceptions of Curricular Effectiveness (SPH and PHP)**

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

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

**The school or program documents and regularly examines its methodology as well as its substantive outcomes to ensure useful data.**

**Required documentation:**

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

Alumni surveys form an important part of monitoring student perceptions of the programs and of the public health competencies they have gained.  In Fall 2020 and Spring 2021, the Graduate Programs conducted an alumni survey of graduates from 2016 – 2020.  Three surveys were distributed for (1) epidemiology and prevention science masters and doctoral graduates, (2) biostatistics masters and doctoral graduates and (3) public health masters graduates.  On each survey, participants were asked to: provide detailed information on their current employment or continuing education status, self-assess their level of competency attained at the time of graduation, and rate their ability to apply program competencies in a professional capacity.  Additional qualitative questions on these surveys allowed alumni to provide open-ended commentary, including recommendations for strengthening the academic programs and input on the perceived value of their degree in the job market (e.g., additional skills that should be included in their program training and recommended changes to the program).  These survey results are monitored carefully, and findings are used to inform current courses and career and professional development initiatives. Alumni surveys will be distributed every two years, the next distribution scheduled for Fall 2022, to capture alumni 12-24 months post-graduation each survey cycle.

| Alumni Survey Response Rates | | | | |
|---|---|---|---|---|
|  | **2016 - 2017 Number and percentage** | **2017 - 2018 Number and percentage** | **2018 - 2019 Number and percentage** | **2019 - 2020 Number and percentage** |
| Public Health (MPH, MSPH and joint MPH) | n = 29 | n = 35 | n = 47 | n = 34 |
| Epidemiology (PhD) and Prevention Science and Community Health (MS and PhD) | n = 1 | n = 2 | n = 7 | n = 7 |
| Biostatistics (MS and PhD) | n = 3 | n = 3 | n = 3 | n = 3 |
| Response rate across programs for the graduating year | 27% | 28% | 47% | 41% |

| Alumni Perception of Competency | | | | | |
|---|---|---|---|---|---|
| **Survey Question** | **Application Level** | | | | |
| *Question: How well are you able to apply your degree competencies and skills, when needed, in a professional capacity (employment or continuing education)?* | **Extremely Well** | **Very Well** | **Moderately Well** | **Slightly** | **Not at All** |
| Public Health (MPH, MSPH and joint MPH) | 27% | 42% | 27% | 4% | 0% |
| Epidemiology (PhD) and Prevention Science and Community Health (MS and PhD) | 63% | 31% | 0% | 6% | 0% |
| Biostatistics (MS and PhD) | 40% | 30% | 30% | 0% | 0% |

Epidemiology (PhD) and Prevention Science and Community Health (MS and PhD)

| Level of Competence Achieved | | | | |
|---|---|---|---|---|
| **Competency** | **Achievement Level** | | | |
| *Question: What level of competence do you feel that you achieved, at the time of graduation, in these skill areas?* | **Foundational** | **Intermediate** | **Advanced** | **Expert** |
| Thinking critically | 0% | 6% | 44% | 50% |
| Preparing a literature review | 0% | 25% | 38% | 37% |
| Writing a proposal | 6% | 38% | 44% | 12% |
| Writing a paper for publication | 13% | 0% | 53% | 34% |
| Giving an oral presentation | 6% | 0% | 44% | 50% |
| Designing a study or intervention or using research methods appropriate to your field | 6% | 13% | 56% | 25% |
| Preparing a budget | 50% | 31% | 19% | 0% |
| Managing a project or research study | 12% | 25% | 38% | 25% |
| Addressing ethical issues in research | 6% | 31% | 44% | 19% |

| Ability to Apply Program Competencies | | | | | |
|---|---|---|---|---|---|
| **Competency** | **Application Level** | | | | |
| *Question: I have the ability to apply the following competencies post-graduation in a past/current professional capacity (employment or continuing education)* | **Completely Agree** | **Agree** | **Not Sure** | **Disagree** | **Completely Disagree** |
| Provide consultation to health professionals in conducting research and work collaboratively with scientists and practitioners in the field | 69% | 19% | 12% | 0% | 0% |
| Apply statistical methods and manage/manipulate datasets in statistical software (e.g., SAS, R, M*plus*) | 44% | 37% | 19% | 0% | 0% |
| Design studies applying sound methodology and assess the validity of results | 69% | 19% | 12% | 0% | 0% |
| Critically evaluate scientific literature and synthesize the outcomes across studies, balancing limitations and contributions of each study | 63% | 31% | 6% | 0% | 0% |
| Articulate research questions that advance scientific knowledge and develop a proposal for extramural research funding | 63% | 31% | 6% | 0% | 0% |

| | | | | | |
|---|---|---|---|---|---|
| Apply principles of ethical conduct to public health practice | 56% | 31% | 13% | 0% | 0% |
| Communicate effectively (written and oral) to diverse audiences | 69% | 25% | 6% | 0% | 0% |

Public Health (MPH, MSPH and Joint MPH)

| Level of Competence Achieved | | | | |
|---|---|---|---|---|
| Competency | Achievement Level | | | |
| *Question: What level of competence do you feel that you achieved, at the time of graduation, in these skill areas?* | **Foundational** | **Intermediate** | **Advanced** | **Expert** |
| Public health sciences | 13% | 33% | 45% | 9% |
| Analytical/assessment skills | 19% | 39% | 37% | 5% |
| Policy development and evaluation | 34% | 43% | 20% | 3% |
| Program planning and evaluation | 28% | 41% | 24% | 7% |
| Organizational management | 31% | 34% | 31% | 4% |
| Budget and financial management | 62% | 29% | 6% | 3% |
| Oral communication | 8% | 27% | 47% | 18% |
| Written communication | 6% | 31% | 47% | 16% |
| Cultural competence | 12% | 23% | 48% | 17% |
| Community practice | 14% | 29% | 41% | 16% |
| Research methodology | 14% | 39% | 36% | 11% |
| Leadership | 13% | 30% | 42% | 15% |
| Systems thinking | 15% | 28% | 46% | 11% |
| Advocacy | 19% | 23% | 44% | 14% |
| Ethics | 16% | 30% | 39% | 15% |
| Professionalism | 5% | 20% | 48% | 27% |

| Ability to Apply Program Competencies | | | | | |
|---|---|---|---|---|---|
| Competency | Application Level | | | | |
| *Question: I have the ability to apply the following competencies post-graduation in a past/current professional capacity (employment or continuing education)* | **Completely Agree** | **Agree** | **Not Sure** | **Disagree** | **Completely Disagree** |
| Apply epidemiological methods to the breadth of settings in public health practice | 28% | 55% | 10% | 6% | 1% |
| Analyze quantitative and qualitative data, using biostatistics, informatics, computer-based programming and software | 20% | 49% | 16% | 13% | 2% |
| Interpret results of data analysis for public health research, policy or practice | 34% | 60% | 2% | 4% | 0% |
| Assess population needs, assets, and capacities that affect communities' health | 34% | 55% | 9% | 2% | 0% |
| Design a population-based policy, program, project or intervention | 23% | 46% | 16% | 13% | 2% |
| Apply mixed methodological approaches that combine qualitative and quantitative research methods | 21% | 48% | 18% | 12% | 1% |
| Generate a research/evaluation question and the appropriate analysis plan | 31% | 56% | 10% | 3% | 0% |
| Assess the strengths and limitations of various research designs in collecting, analyzing and | 33% | 57% | 6% | 4% | 0% |

| | | | | |
|---|---|---|---|---|
| interpreting information from public health studies | | | | |
| Apply principles of ethical conduct to public health practice and research | 37% | 52% | 9% | 2% | 0% |
| Advocate for political, social or economic policies and programs that will improve health in diverse populations | 28% | 49% | 15% | 8% | 0% |
| Communicate effectively (written and oral) to diverse audiences | 50% | 44% | 4% | 2% | 0% |
| Perform effectively on interprofessional teams | 60% | 38% | 1% | 1% | 0% |

Biostatistics (MS and PhD)

| Level of Competence Achieved | | | | |
|---|---|---|---|---|
| **Competency** | **Achievement Level** | | | |
| *Question:  What level of competence do you feel that you achieved, at the time of graduation, in these skill areas?* | **Foundational** | **Intermediate** | **Advanced** | **Expert** |
| Thinking critically | 10% | 20% | 40% | 30% |
| Preparing a literature review | 30% | 40% | 10% | 20% |
| Writing a proposal | 60% | 20% | 10% | 10% |
| Writing a paper for publication | 30% | 30% | 30% | 10% |
| Giving an oral presentation | 10% | 50% | 20% | 20% |
| Perform a variety of basic and advanced statistical analyses | 0% | 30% | 20% | 50% |
| Statistical programming/software use (SAS, R) | 0% | 20% | 40% | 40% |
| Manage a project or research study | 30% | 40% | 20% | 10% |
| Addressing ethical issues in research | 30% | 20% | 20% | 30% |

| Ability to Apply Program Competencies | | | | | |
|---|---|---|---|---|---|
| **Survey Question** | **Application Level** | | | | |
| *Question:  I have the ability to apply the following competencies post-graduation in a past/current professional capacity (employment or continuing education)* | **Completely Agree** | **Agree** | **Not Sure** | **Disagree** | **Completely Disagree** |
| Interact with different public health, health care and medical professionals to address statistical aspects of their research studies as part of statistical consultation | 40% | 50% | 10% | 0% | 0% |
| Apply statistical methods and manage/manipulate datasets in statistical software (e.g., SAS, R) | 90% | 10% | 0% | 0% | 0% |
| Develop sample size and power calculations for different study designs including those from clinical trials and observational studies | 30% | 40% | 30% | 0% | 0% |
| Interpret results from explanatory and descriptive data analysis and advanced statistical analyses to draw relevant conclusions from data | 40% | 60% | 0% | 0% | 0% |
| Conduct original research on the theory and/or methodology of biostatistics | 30% | 30% | 40% | 0% | 0% |
| Apply innovative theory and/or methods to scientific problems | 30% | 20% | 40% | 10% | 0% |

| Apply principles of ethical conduct to public health practice | 30% | 60% | 10% | 0% | 0% |
|---|---|---|---|---|---|
| Communicate effectively (written and oral) to diverse audiences | 50% | 40% | 10% | 0% | 0% |

For each survey, alumni were invited to respond to three open-ended questions, allowing for commentary and recommendations:

1. What additional skills do you think would have made your masters/doctoral training stronger and prepared you better for a career in public health?

2. What changes would you recommend to strengthen the academic program you completed and overall education experience for future students?

3. Based on your career interests and goals, how valuable is/was your masters/doctoral degree in the job market?

Example comments and quotes for each of the open-ended questions:

1. **What additional skills do you think would have made your masters/doctoral training stronger and prepared you better for a career in public health?**

   *"Data analytics and visualization for other statistical software other than SAS. Learning methods of data cleaning. Learning preparation of IRB materials" (MPH)*

   *"More exposure to grant preparation and writing" (MSPH)*

   *"I think more connection to public health physicians working in different capacities (public health, academics, private practice) who all use their training in different ways (research, advocacy, etc.) to get a better idea about how others balance career interests in medicine and public health simultaneously" (MD/MPH)*

   *"More discussion on literature review and writing proposals. Maybe more basics on how to structure a research project start to finish." (MS Biostatistics)*

   *"Stronger statistical computational coursework" (MS in Prevention Science and Community Health)*

   *"Some course content or a course on the use and analysis of survey data would be a great addition to the curriculum." (PhD in Epidemiology)*

   *"More practical things like grant-writing and how to navigate the job market" (PhD in Prevention Science and Community Health)*

2. **What changes would you recommend to strengthen the academic program you completed and overall education experience for future students?**

   *"Try to include statistical analysis in more classes. For example, any literature that gets discussed in class should try to point out the specific statistical test used. Since MPH students only have to take 1 biostatistics course, this will help them to better understand the application and understanding of statistics in public health research." (MPH, 2017 alumni)*

*"It would be helpful to have more research opportunities for students. Even among the GA-ships that were offered through DPHS, I think many students would serve to benefit from actual experience." (MSPH)*

*"Protect more time for MPH work, either by cutting preclinical fluff from MD side (relevance now unclear with new curriculum) or shift to a 5-year track. The 4-year program's unique benefit comes from early introduction to MPH coursework and a peer cohort community integrating the two worlds from the beginning, but it is no question that the compression threatens the quality of both degrees, with most of my classmates favoring their MD coursework understandably, but at the cost of an MPH caliber of public health expertise." (MD/MPH)*

*"I would recommend extending the program to 2 years instead of 1 year. 1 year training might be too intensive for some students who do have not a strong mathematical background" (MS Biostatistics)*

*"Although the prevention program has amazing professors, much of their work and therefore their coursework is concentrated on "micro prevention." Students will benefit from work that involves national to global prevention strategies. Much of their work is hard to apply outside of the academic setting" (MS in Prevention Science)*

*"Bring in faculty that are working on diverse research. Personally, it was often a challenge to connect with faculty that were not doing HIV or cancer research. Or find ways to connect students with faculty outside of the department that meet their research interests." (PhD in Prevention Science and Community Health)*

*"Analytic methods for complex sample data; Increased involvement in community PH initiatives / Interventions" (PhD in Epidemiology)*

3. **Based on your career interests and goals, how valuable is/was your masters/doctoral degree in the job market?**

   *"Very! I will be a pediatric health psychologist. My MPH was foundational not only for my acceptance into my PhD program but applies to almost all of my current courses." (MPH)*

   *"It was very valuable. I was able to secure a job at a local health department and am now completing my PhD." (MSPH)*

   *"It's valuable as a healthcare professional but did not specifically impact my competitiveness when I applied for jobs after residency. It affects how I think as a clinician and the projects I choose to work on." (MD/MPH)*

   *"I have not encountered a "glass ceiling" with just a masters so therefore a PhD is not currently a goal." (MS in Prevention Science)*

   *"Very valuable since I am in academia." (PhD in Prevention Science and Community Health)*

   *"My PhD in Epidemiology is very valuable and useful in my career path. I am easily able to apply epidemiologic techniques to a variety of research questions. I am able to determine the most appropriate study design for particular research questions." (PhD in Epidemiology)*

2) **Provide full documentation of the methodology and findings from alumni data collection. (electronic resource file)**

Alumni surveys are administered through the Graduate Programs staff using an electronic survey instrument tool (Qualtrics), sent to alumni via personal email and University email.  Graduates from the 2016-17, 2017-18, and 2018-19 academic years were surveyed during Fall 2020 and graduates from the

2019-20 academic year were surveyed during Spring 2021.  Surveys were open for approximately six weeks, with weekly reminders sent via email and text message to all participants.  Each survey consists of 12-15 quantitative questions and 3 open-ended qualitative questions and can be completed in approximately 10-15 minutes on a computer, tablet, or smartphone.  As an incentive to complete the survey and to increase our response rate, the Graduate Programs offered the opportunity to win a $100 gift card for participating.

A copy of each survey and the full data collection reports are provided in ERF B4.2.


3)  **If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.  (self-study document)**

Strengths:  Alumni self-assessment of their success in achieving program competencies and skills at the time of graduation, as well as their ability to apply competencies post-graduation, shows that a high percentage of respondents are confident that they achieved these skills.  Comments have also informed strategies to enhance student experiences in key areas.  For example, responses to survey questions suggested that certain alumni desired additional opportunities to strengthen their statistical computation and analytic skills.  As a result, Graduate Programs has proactively advertised and promoted data analysis workshops that supplement competencies gained in core and elective biostatistics courses.  An example of such includes the data workshop series by the University of Miami Libraries in qualitative, quantitative and data visualization software and analyses (view https://sp.library.miami.edu/subjects/guide.php?subject=courses-and-workshops#tab-1 ).

Weaknesses:  Long-term tracking of students is challenging.  For the public health programs (MPH and joint MPH), the current survey results span a timeframe where the program curriculum and program competencies changed (2016 to 2019) and survey results may not fully reflect the current program.  Response rates for alumni are low and vary across the programs.  The Graduate Programs is exploring how to increase the number of responses with future survey efforts.  However, response rates for these surveys were higher for recently graduated cohorts compared to earlier cohorts, for example, 27% for 2016 yet 47% for 2018.  Deploying these surveys every two years will enhance the capacity of Graduate Programs to capture alumni perceptions and address any gaps should these arise.

Plans for Improvement:  To improve the response rate, future data collection iterations of the alumni survey will be completed every two years.  Graduate Programs plans to continue to maintain an active post-graduation relationship with all program alumni, including but not limited to these surveys.  As mentioned above, Graduate Programs will promote opportunities to improve data analysis skills through workshops available throughout the university.

**B5.  Defining Evaluation Practices (SPH and PHP)**

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

**Required documentation:**

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

The evaluation plan presented below incorporates data collection from numerous sources, such as student surveys, faculty records, financial records, program and department meeting minutes, stakeholder and community surveys, and other quantitative and qualitative information.

The evaluation data review and sequence for decision-making/approval can vary, depending on the evaluation measure or content area.  The column labeled "responsibility for review" highlights the individual and/or committee responsible for data review and ensuring continuous improvement through a feedback loop of data sharing. An evaluation measure/data/policy may originate from a specific tasked committee (e.g., Curriculum Committee, Office of Admissions/Admissions Committees), a program director, or the Graduate Administration and Operations Committee (GAOC).  Most evaluation measures/evaluation data and policy pass through the Graduate Administration and Operations Committee (GAOC), with an additional review at the Executive Committee for initiatives/actions involving strategic planning and financial support. Measures/initiatives are then moved to faculty notification for discussion and feedback (e.g., monthly faculty meetings, faculty retreats, or email discussion) if necessary, and then reviewed for final decision/approval with the Graduate Executive Policy Committee (GEPC). The Director of Graduate Programs and program administration are ultimately responsible for ensuring the evaluation plan is a continuous process.

The review and approval process for Department level measures (e.g., faculty productivity on grants and publications) is managed through a department process that includes Division Directors and the Executive Committee, with oversight and responsibility for final decisions/approvals with the Department Chair.  Departmental processes including faculty evaluation and formal promotion and tenure review are not evaluated through Graduate Programs committees.

Template B5-1.  Evaluation Measures

| Evaluation Measures | Identify data source(s) and describe how raw data are analyzed and presented for decision-making | Responsibility for review |
|---|---|---|
| **Instruction**<br>**Goal 1:  To provide engaging educational opportunities preparing leaders to maximize the health and well-being of individuals, communities, and populations.** | | |
| 1A:  Increase and diversify course offerings and frequency and method of delivery. | | |
| Number of course titles | Director, Academic Affairs maintains the list of approved courses for the fiscal year and assigns numbers to new courses<br><br>Senior Manager, Enrollment Services, produces a summary | Curriculum Committee<br><br>Executive Committee<br><br>Graduate Executive Policy Committee |

| | report of course lists and course calendars per academic year<br><br>Curriculum Committee Student Interests Survey | |
|---|---|---|
| Number of courses with multiple section/offerings per year | Senior Manager, Enrollment Services, produces a summary report of course lists and course calendars per academic year<br><br>Curriculum Committee Student Interests Survey | Curriculum Committee<br><br>Executive Committee<br><br>Graduate Executive Policy Committee |
| Number of courses taught with non-traditional formats (ex. timing, course location/modality, non-lecture format) | Senior Manager, Enrollment Services, produces a summary report of course lists and course calendars per academic year<br><br>Curriculum Committee Student Interests Survey | Curriculum Committee<br><br>Graduate Administration and Operating Committee<br><br>Graduate Executive Policy Committee |
| Each year, the Curriculum Committee will identify and address at least two recommendations from the Student Course Interest Survey to strengthen and diversify course offerings. | Curriculum Committee conducts the student survey of all masters and doctoral students each fall semester and compiles results with a presentation to the Committee for review<br><br>Curriculum Committee Course Interest Survey | Curriculum Committee<br><br>Executive Committee<br><br>Graduate Executive Policy Committee |
| 1B: Offer a variety of public health opportunities to students through applied learning that will prepare them for roles in the public health workforce. | | |
| Number of applied/active learning opportunities and assignments offered in the core course curriculum (masters) | Curriculum Committee Chair; course syllabi (data source); *Maintenance of Instructor Competency Checklist* (faculty evaluation) | Curriculum Committee |
| 80% of students rate excellent to good (satisfaction survey); *preparation to achieve your next career steps* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 80% of students rate excellent to good (satisfaction survey); *quality of professional development and career services* | Executive Director, Masters Programs of Academic Affairs prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 100% of Applied Practice (field) Experience preceptors will rate student performance as "strongly agree (1.0) or agree (2.0) on the skills statement" *Demonstrated their preparation to practice in the field of public health"*<br><br>(MPH Preceptor Evaluation) | Associate Director, Career and Professional Development provides a summary report from Blackboard<br><br>Senior Director of Accreditation provides a summary report for SACSCOC annual reporting | Graduate Administration and Operations Committee<br><br>Graduate Executive Policy Committee |

| | | |
|---|---|---|
| 100% of Applied Practice (field) Experience preceptors will rate student performance as "strongly agree (1.0) or agree (2.0) on the skills statement" *Demonstrated professional skills needed to enter the public health profession"*<br><br>(MPH Preceptor Evaluation) | Director, Career and Professional Development, provides a summary report from Blackboard<br><br>Senior Director of Accreditation provides a summary report for SACSCOC annual reporting | Graduate Administration and Operations Committee<br><br>Graduate Executive Policy Committee |
| Number of career services/professional development events offered per year | Director, Career and Professional Development, provides a summary report of annual events offered | Graduate Administration and Operations Committee |
| Number of masters students supported financially each year for Public Health Travel Awards and Public Health Conference Awards | Executive Director, Masters Programs, provides a summary report; DPHS Finance (data source) | Graduate Administration and Operations Committee<br><br>Graduate Executive Policy Committee |
| Number of student-led forums | Director, Career and Professional Development, provides a summary report of annual events offered | Graduate Administration and Operations Committee |
| 1C: Strategically increase the number of partnerships aimed at creating meaningful capstone field experiences available to students both domestically and internationally. | | |
| Each year, the Graduate Programs will engage with a minimum of two new domestic community partners/partnerships | Director, Career and Professional Development; Capstone Databases (data source) | Graduate Administration and Operations Committee |
| Each year, the Graduate Programs will engage with a minimum of two new international community partners/partnerships | Director, Career and Professional Development; Capstone Databases (data source) | Graduate Administration and Operations Committee |
| 1D: Offer increased number of student forums to provide opportunity for discussion of courses, overall curriculum and teaching. | | |
| Chairs Hours held | Executive Director, Masters Programs; calendar/schedule | Graduate Administration and Operations Committee |
| Town Hall meetings held | Executive Director, Masters Programs; calendar/schedule | Graduate Administration and Operations Committee |
| Focus groups held | Executive Director, Masters Programs; calendar/schedule | Graduate Administration and Operations Committee |

| | | |
|---|---|---|
| **Goal 2: To mobilize a diverse student body to address complex public health issues, including issues affecting vulnerable and underserved populations.** | | |
| 2A: Increase active recruitment and admission of a diverse and qualified student body. | | |
| Percentage of matriculating students with undergrad GPA above benchmark (3.0), average MCAT (MD/MPH) and average GRE (PhD) | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| Number of countries represented in matriculating student body | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| Increase the % of matriculating students who are first generation college graduates | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |

| | | |
|---|---|---|
| Increase the % of matriculating students from priority underrepresented minority groups | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| Number of targeted, tailored recruitment campaigns | Director of Admissions prepares a summary report, EMP (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| Number of targeted recruitment events | Director of Admissions prepares a summary report, EMP (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| **2B: Increase master's level scholarship funding to increase reach.** | | |
| Number of financial scholarships awarded | Director of Admissions prepares a summary report, DPHS Finance (data source) | Graduate Administration and Operations Committee<br><br>Executive Committee |
| Dollars ($) awarded per academic year | Director of Admissions prepares a summary report, DPHS Finance (data source) | Graduate Administration and Operations Committee<br><br>Executive Committee |
| **2C: Increase the diversity of academic backgrounds of public health students.** | | |
| Number of undergraduate degrees in the biomedical/physical sciences, STEM | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| Number of undergraduate degrees in the arts and humanities | Director of Admissions prepares a summary report, SOPHAS (data source) | Office of Admissions<br><br>Graduate Administration and Operations Committee |
| **2D: Expand interdisciplinary learning opportunities for current students.** | | |
| Number of interdisciplinary (team-taught) course offerings (EPH/BST) | Curriculum Committee Chair; course syllabi (data source) | Curriculum Committee |

| | | |
|---|---|---|
| **Goal 3: To nurture an inclusive environment in which students are supported as they attain the knowledge, competencies, and values of public health** | | |
| 3A: Increase activities that promote cultural awareness and sensitivities. | | |
| Number of activities that promote cultural awareness and sensitivities | Director of Academic Affairs prepares a summary report; event calendar (data source) | Graduate Administration and Operations Committee |
| 80% of students rate excellent to good (satisfaction survey); *class size in relation to the quality of learning* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 80% of students rate excellent to good (satisfaction survey); *supportive environment for inclusion of diverse communities and perspectives* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |

| 3B: Increase and promote student academic support services. | | |
|---|---|---|
| Number of student support services offered and promoted | Director of Academic Affairs prepares a summary report; event calendar (data source) | Graduate Administration and Operations Committee |
| Increase the number of faculty advisors servicing public health students | Director, Career Services and Professional Development, prepares a summary report and directs faculty assignments | Graduate Administration and Operations Committee

Executive Committee |
| 80% of students rate strongly agree or agree (satisfaction survey); *academic advising for my degree was clearly provided* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 80% of students rate strongly agree or agree (satisfaction survey); *faculty advisor was readily available* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 80% of students rate strongly agree or agree (satisfaction survey); *faculty advisor understood my career and academic goals* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |
| 80% of students rate strongly agree or agree (faculty advisor survey; *Overall evaluation of your advisor is positive* | Director, Career Services and Professional Development, prepares a summary report | Graduate Administration and Operations Committee |

| **Goal 4: To promote instructional innovation and faculty advancement in teaching.** | | |
|---|---|---|
| 4A: Increase and promote the number of instructional focused events for faculty. | | |
| Number of educational teaching retreats offered by Graduate Programs to enhance teaching competencies | Director of Academic Affairs prepares a summary report; Blackboard Faculty Teaching Page (data source) | Director of Public Health Education

Curriculum Committee |
| Percentage of faculty participating in existing educational opportunities to enhance teaching competencies | Director of Academic Affairs prepares a summary report; Blackboard Faculty Teaching Page (data source) | Director of Public Health Education

Curriculum Committee |
| Promote the Graduate Programs Blackboard page for faculty teaching development as a resource and repository | Director of Academic Affairs prepares a summary report; Blackboard Faculty Teaching Page (data source) | Director of Public Health Education

Curriculum Committee |
| 4B: Increase the use of technology as instructional innovation in the classroom. | | |
| Percentage of primary instructional faculty integrating technology in innovative ways to enhance learning | Senior Director of Accreditation prepares a summary report; *Maintenance of Instructor Competency Checklist* and Blackboard Teaching Page (data sources) | Director of Public Health Education

Curriculum Committee |

| 4C: Improve teaching evaluation methods. | | |
|---|---|---|
| Development of new peer evaluation form | Curriculum Committee | Curriculum Committee<br><br>Graduate Executive Policy Committee |
| Number of peer evaluations conducted | Curriculum Committee | Curriculum Committee |
| Number of mid-semester course evaluations conducted | Senior Manager, Enrollment Services, produces a summary report of course evaluation scores per semester | Graduate Programs Director |
| 4D: Maintain summary course evaluation scores that will ensure that high quality courses meet or exceed the expectations of students. | | |
| Summary mean course evaluation scores (all courses, 5-point scale) | Senior Manager, Enrollment Services, prepares a summary report; Testing and Evaluation Services Office/CourseEval (data source) | Graduate Administration and Operations Committee |
| Percentage of teaching faculty attaining a score of 4.0 or higher for summary course evaluation, end of the semester | Senior Manager, Enrollment Services, prepares a summary report; Testing and Evaluation Services Office/CourseEval (data source) | Graduate Administration and Operations Committee |
| Percentage of teaching faculty attaining a score of 4.0 or higher for "*stated course objectives have been met*", end of semester | Senior Manager, Enrollment Services, prepares a summary report; Testing and Evaluation Services Office/CourseEval (data source) | Graduate Administration and Operations Committee |
| 80% of students rate excellent to good (satisfaction survey); *quality of teaching* | Executive Director, Masters Programs, prepares a summary report from the Student Satisfaction Survey (data source) | Graduate Administration and Operations Committee |

| **Scholarship**<br>**Goal 5: To foster an environment in which students and faculty engage and collaborate on rigorous scientific investigations addressing public health issues, with an emphasis on vulnerable and underserved populations.** | | |
|---|---|---|
| 5A: Increase the number of manuscripts accepted for publication in peer-reviewed journals by faculty and students. | | |
| Total number and average publications per primary faculty per year | Assistant Director, Business Operations provides a summary report; PubMed and faculty curriculum vitae/annual faculty review (data source) | Department APT process<br><br>Division Directors<br><br>Department Chair |
| Total number and average publications per department faculty per year | Assistant Director, Business Operations, provides a summary report; PubMed and faculty curriculum vitae/annual faculty review (data source) | Department APT process<br><br>Division Directors<br><br>Department Chair |
| Total number of collaborative publications with program faculty and PhD student authors | Assistant Director, Business Operations, provides a summary report; PubMed, faculty curriculum vitae/annual faculty review | Department APT process<br><br>Division Directors<br><br>Department Chair |

| | Senior Director, Accreditation and Doctoral Administration, prepares a summary report; PhD student annual CV review (data sources) | Senior Director, Accreditation (students) |
|---|---|---|
| 5B: Increase the number of grants and grant funding by our faculty. | | |
| Number of grants awarded per year | Director, Research Support, prepares a summary report (UMMSOM research reporting system and department rosters)(data source) | Executive Committee<br><br>Division Directors<br><br>Department Chair |
| Number of dollars ($) awarded | Director, Research Support, prepares a summary report (UMMSOM research reporting system and department rosters) (data source) | Executive Committee<br><br>Division Directors<br><br>Department Chair |
| 5C: Increase the number of presentations at scientific meetings each year by students. | | |
| Number of students supported ($) for professional development (masters and doctorate) conference awards | Executive Director, Masters Programs, and Director of Accreditation and Doctoral Administration, provides a summary report; Director of Finance (data source) | Graduate Administration and Operations Committee<br><br>Executive Committee |
| Number of conference/meeting presentations by PhD students | Senior Director of Accreditation and Doctoral Administration provides a summary report | Doctoral Program Directors |
| Number of presentations by master's students (APHA and ESRF annual) | Executive Director, Masters Programs, provides a summary report | Masters Program Directors |
| 5D: Increase the number of masters level students who are engaged in a research experience. | | |
| Number of students engaged in the MS-research thesis | Senior Manager, Enrollment Services, provides a summary enrollment report; CaneLink (data source) | Masters Program Directors<br><br>Graduate Administration and Operations Committee |
| 5E: Maintain the number of doctoral student grant submissions. | | |
| Number of grant submissions (e.g., F30/F31, fellowship, NIH diversity supplements) by doctoral students | Director, Research Support, prepares a summary report (UMMSOM research and reporting system and department rosters) (data source) | Doctoral Program Directors |
| 5F: Increase the number of research projects currently active in vulnerable and underserved communities. | | |
| Number of research projects currently active in vulnerable and underserved communities with program faculty as PI | Director, Research Support, prepares a summary report (UMMSOM research and reporting system and department rosters) (data source) | Division Directors<br><br>Executive Committee |

| Service |
|---|
| **Goal 6:  To engage with communities, professionals, leaders and others as partners in improving the health of populations, including the most vulnerable and underserved.** |

| 6A:  Increase the frequency with which local communities engage in disease prevention/health promotion programs with our faculty and students. | | |
|---|---|---|
| Faculty engaged in the joint development of health promotion/disease prevention interventions | Faculty self-report, curriculum vitae (data source) | Division Directors<br><br>Department Chair |
| Primary faculty participating in community service | Faculty self-report, curriculum vitae (data source) | Division Directors<br><br>Department Chair |
| Increase the number of faculty presenting to local communities who participated in their research | Faculty self-report, curriculum vitae (data source) | Division Directors<br><br>Department Chair |
| Number of PHSA service events in the community | Director of Academic Affairs prepares a summary report; PHSA event calendar (data source) | Graduate Administration and Operations Committee |
| 6B:  Increase community-based educational program opportunities per year that aim to educate the community about public health issues. | | |
| Develop our community focused training and workforce development path | Programs Directors ongoing effort with Community Academic Advisory Committee (CAAC) | Division Directors<br><br>Department Chair |
| Department Grand Rounds presentations | DPHS Executive Committee | Division Directors<br><br>Department Chair |
| Increase BEAM certificate enrollment/completion | BEAM Program Administration prepares a summary report of enrollment | BEAM Program Administration<br><br>Department Chair |

| Innovation |
|---|
| **Goal 7:  To develop and maintain infrastructure, resources and technologies that are adequate to support faculty, staff and students, as they work to accomplish the mission of the public health program.** |

| 7A:  Invest in new technologies to support faculty and staff in the management of Graduate Programs. | | |
|---|---|---|
| Number of technologies adapted for Graduate Programs (e.g., EMP, Cane2Cane, Filemaker, H5P, iClicker, Pallet, Remind) | Director, Public Health Education, prepares a summary report; Blackboard Faculty Teaching Page and *Maintenance of Instructor Competency Checklist* (data sources) | Graduate Programs Directors |
| Number of trainings provided to faculty, staff and students in academic processes (Blackboard, online teaching, FileMaker, SOPHAS, IT) | Director, Public Health Education, prepares a summary report; Blackboard Faculty Teaching Page and *Maintenance of Instructor Competency Checklist* (data sources) | Graduate Programs Directors |
| 7B:  Identify areas of standardization and process improvement and effectiveness. | | |
| Areas of standardization—SOP creation, review and revision | Executive Director, Masters Programs, maintains SOP inventory | Graduate Administration and Operations Committee<br><br>Graduate Executive Policy Committee |

| Areas of process improvement— SOP creation, review and revision | Executive Director, Masters Programs, maintains SOP inventory | Graduate Administration and Operations Committee |
|---|---|---|
| | | Graduate Executive Policy Committee |

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

The evaluation methods and measures identified in Template B5-1 were selected to support the mission, vision and values of the Graduate Programs and to enable the program to track progress, adjust efforts and make strategic investments necessary to achieve goals.

Instruction

Program goals 1-4 are explicitly designed to measure/track and promote student success. They measure student's ability to acquire knowledge and skills from the core curriculum and diverse course offerings by providing engaging educational opportunities, community partnerships and student forums; ensuring a diverse student body; providing a nurturing and supportive student environment; and promoting instructional innovation. The instructional goals seek to advance the field of public health by ensuring the Graduate Programs is preparing the next generation of public health leaders. Skilled instructors train student in foundational public health skills that are transferable to all public health careers, and students are prepared and confident for a future career in public health.

Scholarship/Research

The scholarship/research program goal includes metrics designated as both promoting student success and advancing the field of public health. Increasing the number of faculty-student published manuscripts (doctoral students), presentations by students at scientific meetings (masters and doctoral student conference awards ($) and master's student research presentations at ESRF and APHA), and doctoral grant submissions are tracked measures of promoting student success. Increasing the number of grants and grant funding by the faculty and the number of research projects in vulnerable and underserved populations advances the field of public health by ensuring faculty research is widely shared and impacting the community.

Service

The service program goal promotes student success through organized service to the local, national and international community, including the most vulnerable and underserved. All students in the Graduate Programs have the opportunity to become members of the Public Health Student Association (PHSA). To maintain active membership, students are required to participate in a minimum of two service events per academic year and one social event per academic year. PHSA, and other student organization service events, are open to all students to participate, regardless of membership status. The service goal seeks to advance the field of public health through faculty community service, faculty engagement with the vulnerable and underserved communities they research, and the workforce training provided.

Innovation

The innovation program goal promotes success for students, faculty and staff. The investment and training in new technologies enhances the student learning experience and the management of the Graduate Programs. The use of new technologies in instruction and scholarship, and the investment in program infrastructure, helps ensure our program is current with the field, and effective in our education delivery and training to accomplish the mission of our public health program.

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

A summary of the data collected for the evaluation plan are presented in the evaluation data table below. Each measure was collected in the manner presented in Template B5-1. The ERF B5.3 contains sample documents cited above and meetings at which the evaluation measures were discussed in a variety of formal and informal forums including graduate programs meetings (e.g., GEPC, Curriculum Committee, GAOC), faculty meetings and town halls.

| Evaluation Measures | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| **Instruction** | | | |
| **Goal 1: To provide engaging educational opportunities preparing leaders to maximize the health and well-being of individuals, communities, and populations.** | | | |
| 1A: Increase and diversify course offerings and frequency and method of delivery. | | | |
| Number of course titles | 81 | 79 | 83 |
| Number of courses with multiple section/offerings per year | 12 | 11 | 11 |
| Number of courses taught with non-traditional formats (ex. timing, course location/modality, non-lecture format) | 12 | 21 | 82^ |
| Each year, the Curriculum Committee will identify and address at least two recommendations from the Student Course Interest Survey to strengthen and diversify course offerings. | 1. Added *EPH 671 Maternal and Child Health* to the 2018-19 course offerings<br><br>2. Added *EPH 616 Global Health and Global Justice* to the 2018-19 course offerings<br><br>3. Continued to offer a wide variety of global health courses (*EPH 612 Global Health; EPH 613 Emerging Challenges in Global Health Systems and EPH 614 Global Outbreak Investigations)* | 1. Added *EPH 624 Applied Epidemiology for Public Health Practice and Community Work* to the 2019-20 course offerings<br><br>2. Added *EPH 644 Fundamentals of Program Evaluation* to the course schedule as the first fully asynchronous online offering (Summer 2019) | 1. Added *EPH 722 Infectious Disease Epidemiology* to the 2020-21 course offerings<br><br>2. Added *EPH 618 Violence as a Public Health Issue* to the 2020-21 course offerings<br><br>3. Updated the course title and course scope *EPH 625 Research Ethics* to a broader "Public Health Ethics" |
| 1B: Offer a variety of public health opportunities to students through applied learning that will prepare them for roles in the public health workforce. | | | |
| Number of applied/active learning opportunities and assignments | 58 assignments (25 classes) | 62 assignments (25 classes) | 69 assignments (26 classes) |

| offered in the core course curriculum (masters) | | | |
|---|---|---|---|
| 80% of students rate excellent to good (satisfaction survey); *preparation to achieve your next career steps* | 79% | 85% | 93% |
| 80% of students rate excellent to good (satisfaction survey); *quality of professional development and career services* | 74% | 85% | 96% |
| 100% of Applied Practice (field) Experience preceptors will rate student performance as "strongly agree (1.0) or agree (2.0) on the skills statement "*Demonstrated their preparation to practice in the field of public health*"<br><br>(MPH Preceptor Evaluation) | 100%<br><br>1.15 = average score | 96%<br><br>1.18 = average score | 100%<br><br>1.18 = average score |
| 100% of Applied Practice (field) Experience preceptors will rate student performance as "strongly agree (1.0) or agree (2.0) on the skills statement "*Demonstrated professional skills needed to enter the public health profession*"<br><br>(MPH Preceptor Evaluation) | 100%<br><br>1.15 = average score | 100%<br><br>1.11 = average score | 100%<br><br>1.09 = average score |
| Number of career services/professional development events offered per year | Career Services: 21<br><br>Capstone/Research Services: 22 | Career Services: 27<br><br>Capstone/Research Services: 24 | Career Services: 15<br><br>Capstone/Research Services: 7 |
| Number of masters students supported financially each year for Public Health Travel Awards and Public Health Conference Awards | 65 ($49,649) | 59 ($27,575) | 31 ($6,719) |
| Number of student-led forums | 3<br><br>• Brainstorming Sessions, Student Led Panel<br><br>• Family Immigration Crisis Panel Follow Up Discussion<br><br>• Gun Violence Prevention Panel | 4<br><br>• Bahamas Disaster Response Status Update Panel<br><br>• Brainstorming Session-Hurricane Dorian Public Health Response<br><br>• Week of Welcome | 6<br><br>• Week of Welcome Student Social<br><br>• Week of Welcome Navigating Miami<br><br>• Chinese Student Mixer<br><br>• Social Hour with Furry Friends |

| | | Networking Social | • Halloween Social |
| | | • Brainstorming Session-Call to Action Against Racism | • PHSA Service Event Healing Hands |

**1C: Strategically increase the number of partnerships aimed at creating meaningful capstone field experiences available to students both domestically and internationally.**

| Each year, the Graduate Programs will engage with a minimum of two new domestic community partners/partnerships | 1. Catalyst Miami<br>2. New York State Attorney General's Office | 1. Center for Child Counseling<br>2. Martha's Vineyard Substance Use Disorder Coalition | 1. Uniting for Action<br>2. Memory Trees<br>3. Health Council of Southeast Florida<br>4. UM Law Center for Ethics and Public Service |
|---|---|---|---|
| Each year, the Graduate Programs will engage with a minimum of two new international community partners/partnerships | • Noora Health<br>• Universidad Catholic de Santiago de Guayaquil | • HOPE Foundation for Women and Children of Bangladesh<br>• Pharos Global Consulting | • Organization of American States Inter-American Drug Control Commission (CICAD) |

**1D: Offer increased number of student forums to provide opportunity for discussion of courses, overall curriculum and teaching.**

| Chairs Hours held | 3 | 5 | 3 |
|---|---|---|---|
| Town Hall meetings held | 6 | 6 | 5 |
| Focus groups held | 2 | 1 | 1 |

| | 2018 – 2019 | 2019 – 2020 | 2020 – 2021 |
|---|---|---|---|
| **Goal 2: To mobilize a diverse student body to address complex public health issues, including issues affecting vulnerable and underserved populations.** | | | |
| **2A: Increase active recruitment and admission of a diverse and qualified student body.** | | | |
| Percentage of matriculating students with undergrad GPA above benchmark (3.0), average MCAT scores (MD/MPH) and average GRE (PhD) | GPA (3.0) or higher MPH & MSPH: 82% MS: 50% PhD: 82% | GPA (3.0) or higher MPH & MSPH: 84% MS: 71% PhD: 55% | GPA (3.0) or higher MPH & MSPH: 68% MS: 100% PhD: 50% |
| | MCAT MD/MPH: 85.4 Percentile | MCAT MD/MPH: 84.0 Percentile | MCAT MD/MPH: 85.5 Percentile |
| | GRE 154 V 161 Q 3.7 AW | GRE 152 V 154 Q 4.0 AW | GRE 151 V 156 Q 3.3 AW |
| Number of countries represented in matriculating student body | MPH & MSPH: 7 MS: 2 | MPH & MSPH: 6 MS: 3 | MPH & MSPH: 8 MS: 3 |

| | PhD: 4 | PhD: 3 | PhD: 3 |
|---|---|---|---|
| Increase the % of matriculating students who are first generation college graduates | MPH & MSPH: 13%<br>MS: 17%<br>PhD: 27%<br>MD/MPH: 2% | MPH & MSPH: 13%<br>MS: 36%<br>PhD: 36%<br>MD/MPH: 6% | MPH & MSPH: 27%<br>MS: 23%<br>PhD: 25%<br>MD/MPH: 9% |
| Increase the % of matriculating students from priority underrepresented minority groups | MPH & MSPH: 61%<br>MS: 83%<br>PhD: 81%<br>MD/MPH: 37% | MPH & MSPH: 65%<br>MS: 78%<br>PhD: 64%<br>MD/MPH: 49% | MPH & MSPH: 81%<br>MS: 61%<br>PhD: 100%<br>MD/MPH: 23% |
| Number of targeted, tailored recruitment campaigns | Sent 28,500 emails;<br>3 campaigns | Sent 47,990 emails;<br>5 campaigns | Sent 1,427,726 emails;<br>10 campaigns |
| Number of targeted recruitment events | 51 | 62 | 66 |
| 2B:  Increase master's level scholarship funding to increase reach. | | | |
| Number of financial scholarships awarded | 14 | 17 | 62 |
| Dollars ($) awarded per academic year | $160,000 | $196,533 | $299,944 |
| 2C:  Increase the diversity of academic backgrounds of public health students. | | | |
| Number of undergraduate degrees in the biomedical/physical sciences, STEM | MPH & MSPH: 87%<br>MS: 83%<br>PhD: 82% | MPH & MSPH: 84%<br>MS: 86%<br>PhD: 100% | MPH & MSPH: 77%<br>MS: 77%<br>PhD: 88% |
| Number of undergraduate degrees in the arts and humanities | MPH & MSPH: 13%<br>MS: 17%<br>PhD: 18% | MPH & MSPH: 16%<br>MS: 14%<br>PhD: 0% | MPH & MSPH: 23%<br>MS: 23%<br>PhD: 12% |
| 2D:  Expand interdisciplinary learning opportunities for current students. | | | |
| Number of interdisciplinary (team-taught) course offerings (EPH and BST) | 5 classes<br><br>• *EPH 613 Emerging Challenges in Global Health Systems*<br><br>• *EPH 652 Health Policy*<br><br>• *EPH 607 Interdisciplinary Health Communication (2 offerings)*<br><br>• *EPH 657 Toxicology: Climate and* | 6 classes<br><br>• *EPH 663 Hospital Health Care Services and Access: An Interdisciplinary Approach*<br><br>• *EPH 652 Health Policy*<br><br>• *EPH 611 Mindfulness in Public Health and Medicine*<br><br>• *EPH 607 Interdisciplinary* | 5 classes<br><br>• *EPH 613 Emerging Challenges in Global Health Systems*<br><br>• *EPH 607 Interdisciplinary Health Communication (2 offerings)*<br><br>• *EPH 611 Mindfulness in Public Health and Medicine*<br><br>• *EPH 663* |

| | | |
|---|---|---|
| *Health* | *Health Communication (2 offerings)* <br><br> • *EPH 644 Fundamentals of Program Evaluation* | *Hospital Health Care Services and Access: An Interdisciplinary Approach* |

| | **2018 - 2019** | **2019 - 2020** | **2020 - 2021** |
|---|---|---|---|
| **Goal 3: To nurture an inclusive environment in which students are supported as they attain the knowledge, competencies, and values of public health** | | | |
| 3A: Increase activities that promote cultural awareness and sensitivities. | | | |
| Number of activities that promote cultural awareness and sensitivities | 28 | 18 | 57 |
| 80% of students rate excellent to good (satisfaction survey); *class size in relation to the quality of learning* | Not collected | Not collected | 96% |
| 80% of students rate excellent to good (satisfaction survey); *supportive environment for inclusion of diverse communities and perspectives* | Not collected | Not collected | 96% |
| 3B: Increase and promote student academic support services. | | | |
| Number of student support services offered and promoted | 126 | 167 | 309 |
| Increase the number of faculty advisors servicing public health students | 32 | 34 | 37 |
| 80% of students rate strongly agree or agree (satisfaction survey); *academic advising for my degree was clearly provided* | 89% | 84% | 96% |
| 80% of students rate strongly agree or agree (satisfaction survey); *faculty advisor was readily available* | 84% | 89% | 81% |
| 80% of students rate strongly agree or agree (satisfaction survey); *faculty advisor understood my career and academic goals* | 95% | 84% | 89% |
| 80% of students will answer strongly agree or agree (faculty advisor survey); *Overall evaluation of your advisor is positive* | MPH & MD/MPH = 81% <br> MSPH = 100% | MPH & MD/MPH = 91% <br> MSPH = 100% | MPH & MD/MPH = 86% <br> MSPH = 100% |

| | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| **Goal 4: To promote instructional innovation and faculty advancement in teaching.** | | | |
| 4A: Increase and promote the number of instructional focused events for faculty. | | | |
| Number of educational teaching retreats offered by Graduate Programs to enhance teaching competencies | 1 | 2 | 3 |
| Percentage of faculty participating in existing educational opportunities to enhance teaching competencies | 35% | 49% | 65% |
| Promote the Graduate Programs Blackboard page for faculty teaching development as a resource and repository | Discussion Boards: 5<br><br>Presentations to Faculty: 3 | Discussion Boards: 2<br><br>Presentations to Faculty: 2 | Discussion Boards: 2<br><br>Presentations to Faculty: 3 |
| 4B: Increase the use of technology as instructional innovation in the classroom. | | | |
| Percentage of primary instructional faculty integrating technology in innovative ways to enhance learning | 53% | 42% | 100% |
| 4C: Improve teaching evaluation methods. | | | |
| Development of new peer evaluation form | In Summer 2018, the Curriculum Committee began a comprehensive review and revision of the peer teaching evaluation process and evaluation form, under the direction of Dr. Viviana Horigian. As a member of the ASPPH Academic Affairs Section, Dr. Horigian gathered peer teaching observation forms from 13 peer institutions with public health programs. | The new process and revised evaluation form were implemented in Fall 2019. The process and form were strengthened in several ways: (1) the process now includes pre-observation discussion between instructor and peer reviewer to obtain the syllabus and identify specific areas the instructor would like reviewed, (2) actual observation of the class and form completion, and (3) a post-session debriefing meeting between the instructor and reviewer, with opportunities to reflect on teaching. | The SOP for peer evaluations was updated in 2020 to state peer evaluations are not shared outside of the reviewer, Curriculum Committee Chair and the Director of Graduate Programs. This has helped ensure that the process focuses on a collaborative reflection on teaching with the aim of strengthening teaching, rather than for faculty member evaluation. |

| | | | |
|---|---|---|---|
| Number of peer evaluations conducted | 12 | 9 | 12 |
| Number of mid-semester evaluations conducted | 50 | 53 | 50 |
| 4D:  Maintain summary course evaluation scores that will ensure that high quality courses meet or exceed the expectations of students. | | | |
| Summary mean course evaluation scores (all courses, 5-point scale) | 4.63 | 4.51 | 4.63 |
| Percentage of teaching faculty attaining a score of 4.0 or higher for summary course evaluation, end of the semester | 97% | 94% | 94% |
| Percentage of teaching faculty attaining a score of 4.0 or higher for "*stated course objectives have been met*", end of semester | 99% | 95% | 94% |
| 80% of students rate excellent to good (satisfaction survey); *quality of teaching* | 89% | 95% | 96% |

| | 2018 – 2019 | 2019 – 2020 | 2020 – 2021 |
|---|---|---|---|
| **Scholarship** **Goal 5:  To foster an environment in which students and faculty engage and collaborate on rigorous scientific investigations addressing public health issues, with an emphasis on vulnerable and underserved populations.** | | | |
| 5A:  Increase the number of manuscripts accepted for publication in peer-reviewed journals by faculty and students. | | | |
| Total number and average publications per primary faculty per year | 201  6 | 204  6 | 215  6 |
| Total number and average publications per department faculty per year | 197  5 | 202  5 | 219  5 |
| Total number of collaborative publications with program faculty and PhD student authors | 12 | 15 | 38 |
| 5B:  Increase the number of grants and grant funding by our faculty. | | | |
| Number of grants awarded per year | 168 | 206 | 204 |
| Number of dollars ($) awarded | $12,866,468 | $12,971,803 | $14,256,200 |
| 5C:  Increase the number of presentations at scientific meetings each year by students. | | | |
| Number of students supported ($) for professional development (masters and doctorate) conference awards | Masters Total: 21 students ($10,285)  Doctoral Total: 15 students ($9,340) | Masters Total: 22 students ($10,683)  Doctoral Total: 10 students ($6,950) | Masters Total: 7 students ($4,251)  Doctoral Total: 0 students ($0)^^ |
| Number of conference/meeting presentations by PhD students | 31 | 39 | 48 |
| Number of presentations by master's students (APHA and ESRF annual) | ESRF: 40 students (MD/MPH: 27 and MPH & MSPH: 13) | ESRF: 24 students (MD/MPH: 12 and MPH & MSPH: 12) | ESRF: 33 students (MD/MPH: 21 and MPH & MSPH: 12) |

|  | APHA: 11 students (MD/MPH: 6 and MPH & MSPH: 5) | APHA: 11 students (MD/MPH: 6 and MPH & MSPH: 5) | APHA: 7 students (MD/MPH: 5 and MPH & MSPH: 2) |
|---|---|---|---|
| 5D: Increase the number of masters level students who are engaged in a research experience. | | | |
| Number of students engaged in the MS research thesis | 21 | 17 | 9 |
| 5E: Maintain the number of doctoral student grant submissions. | | | |
| Number of grant submissions (e.g., F30/F31, fellowship, NIH diversity supplements) by doctoral students | 4 | 5 | 2 |
| 5F: Increase the number of research projects currently active in vulnerable and underserved communities. | | | |
| Number of research projects currently active in vulnerable and underserved communities with program faculty as PI | 64 | 70 | 64 |

|  | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| **Service** <br> **Goal 6: To engage with communities, professionals, leaders and others as partners in improving the health of populations, including the most vulnerable and underserved.** | | | |
| 6A: Increase the frequency with which local communities engage in disease prevention/health promotion programs with our faculty and students. | | | |
| Faculty engaged in the joint development of health promotion/disease prevention interventions | 32% | 32% | 35% |
| Primary faculty participating in community service | 85% | 85% | 82% |
| Increase the number of faculty presenting to local communities who participated in their research | 22% | 41% | 38% |
| Number of PHSA service events in the community | 14 | 30 | 29 |
| 6B: Increase community-based educational program opportunities per year that aim to educate the community about public health issues. | | | |
| Develop our community focused training and workforce development path | The Building Expertise in Administration and Management (BEAM) certificate program was under development in 2018. | Pilot testing for the BEAM certificate program was completed in 2019 and the certificate program was launched in 2020. | The workforce development/needs assessment survey was administered to our community academic advisory committee (CAAC) member organizations in Fall 2020 and expanded to MPH preceptors and other domestic and |

| | | | international community partners in Summer 2021.<br><br>Additional professional development certificate programs are in planning/ development including a collaboration with the CDC and the UM School of Law (*Leveraging the Law for Public Health Impact)*, expected 2022. |
|---|---|---|---|
| Department Grand Rounds presentations | 6 | 7 | 8 |
| Increase BEAM certificate enrollment/completion | Under development, no enrollment (2018) | 64 participants (pilot testing, 2019) | 150 participants (2020)<br>177 participants (2021) |

| | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| **Innovation**<br>**Goal 7: To develop and maintain infrastructure, resources and technologies that are adequate to support faculty, staff and students, as they work to accomplish the mission of the public health program.** | | | |
| 7A: Invest in new technologies to support faculty and staff in the management of Graduate Programs. | | | |
| Number of technologies adapted for Graduate Programs (e.g., EMP, Cane2Cane, FileMaker, H5P, *i*Clicker, Pallet, Remind) | New technology: EMP and Purple Briefcase<br><br>FileMaker enhancements:<br>1. Completed SOPHAS automated upload admissions tab<br><br>2. Created student involvement and recognition tab | New technology: H5P and *i*Clicker<br><br>FileMaker enhancements:<br>1. Created financial awards tab<br><br>2. Created new MPH generalist concentration curriculum programming<br><br>3. Built interactive content on Blackboard using the H5P platform | New technology: Cane2Cane<br><br>FileMaker enhancements:<br>1. FileMaker via Citrix—online remote access<br><br>2. FileMaker updated version of software and streamlined uploads from CaneLink and SOPHAS<br><br>3. In progress Spring 2021—new program tabs for MS BST, MS PREV, MS CLIM |

| | | | and MS thesis improvement<br><br>4. In progress Spring 2021—Automated upload for community partners |
|---|---|---|---|
| Number of trainings provided to faculty, staff and students in academic processes (Blackboard, online teaching, FileMaker, SOPHAS, IT) | 10 | 19 | 14 |
| 7B: Identify areas of standardization and process improvement and effectiveness. | | | |
| Areas of standardization—SOP creation, review and revision | <ul><li>Admissions Master Roster</li><li>Admissions Offer Accepted</li><li>Admissions Dashboard Report</li><li>Admissions Email Inbox</li><li>Admissions Graduation Clearance</li><li>Admissions Audit</li><li>Admissions Google Ads</li><li>Admissions Campus Visit Requests</li><li>Admissions Recruitment Schedule Budget</li><li>Admissions Social Media</li><li>Transfer Credit Tracking</li><li>Exit Interview Email Template</li><li>Blackboard One Stop Shop Maintenance</li><li>Graduation Reception</li><li>Town Hall Meetings</li><li>Documenting Student Issues</li><li>Gantt Chart 2019</li></ul> | <ul><li>Capstone Map</li><li>Alumni Outcomes</li><li>Professional Development Attendance Tracking</li><li>Advertising Jobs of the Week</li><li>Templates for Name Badges</li><li>Purchase Requisition for Catering</li><li>Calendar Management</li><li>Teaching Assistant (TA) Training</li><li>FileMaker Updates</li><li>*Remind* Communication Tool</li><li>Certified in Public Health (CPH) Voucher Contracts</li><li>Gantt Chart 2020</li></ul> | <ul><li>Student Listserv</li><li>Certified in Public Health (CPH) Voucher Contracts</li><li>Gantt Chart 2021</li></ul> |

| Areas of process improvement— SOP creation, review and revision | • Credit Waiver SOP<br>• Independent Study<br>• Courses Outside DPHS<br>• Student Awards<br>• Master's Students Teaching Assistant (TA)<br>• Master's Admissions<br>• Master's Scholarship<br>• Teaching Faculty | • Course Auditing<br>• Master's Comprehensive Advising<br>• Master's Students Teaching Assistant (TA) (updated)<br>• PhD Students Teaching Assistant (TA) (updated)<br>• Teaching Faculty (updated) | • Teaching Faculty (updated)<br>• Master's Admissions (updated)<br>• Master's Scholarship (updated)<br>• MS Prevention Admission<br>• MS Climate Admission<br>• MS Biostatistics Admission<br>• MS Advising and Enrollment |

^=Due to COVID-19 restrictions, all structured courses moved to an online (remote learning) format for 2020-21

^^ = Due to COVID-19 restrictions, travel support for employees and students was suspended, virtual attendance only

**4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)**

Strengths:  The Graduate Programs has a strong evaluation plan and well-developed practices.  The evaluation process is ongoing, systematic and well documented.  Evaluation results are used to track the program's progress and strengthen the program.

Weaknesses:  No significant weaknesses are noted.

Plans for improvement:  Involve more stakeholders, particularly public health related employers, to improve programmatic assessments.

**B6.  Use of Evaluation Data (SPH and PHP)**

**The school or program engages in regular, substantive review of all evaluation findings, as well as strategic discussions about the implications of evaluation findings.**
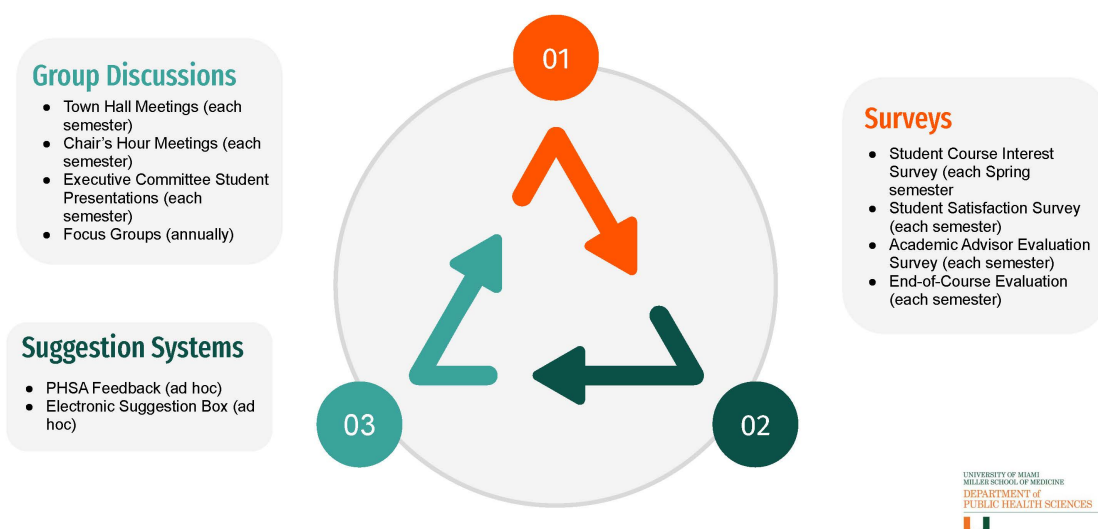
**The school or program implements an explicit process for translating evaluation findings into programmatic plans and changes and provides evidence of changes implemented based on evaluation findings.**

**Required documentation:**

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

The Graduate Programs engages in the regular, substantive, and systematic review of all evaluation findings. These are taken as opportunities for continuous program improvements and the launch of new initiatives. The evaluation plan is implemented in an iterative cycle with continual data input each semester and academic year from several sources.

## We continually use evaluation data to inform our programs



**Group Discussions**
- Town Hall Meetings (each semester)
- Chair's Hour Meetings (each semester)
- Executive Committee Student Presentations (each semester)
- Focus Groups (annually)

**Suggestion Systems**
- PHSA Feedback (ad hoc)
- Electronic Suggestion Box (ad hoc)

**Surveys**
- Student Course Interest Survey (each Spring semester
- Student Satisfaction Survey (each semester)
- Academic Advisor Evaluation Survey (each semester)
- End-of-Course Evaluation (each semester)

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Over the past three years, several initiatives constitute examples of how evaluation data has guided programmatic changes and improvement. For illustration purposes, we provide examples that are in line with our goals of instruction and innovation. Examples of initiatives are on (1) continued modification to the comprehensive academic advising system for the MPH and MSPH programs, (2) enhanced course offerings based on student interests, (3) the generalist MPH curriculum revision (concentration curriculum), and (4) student diversity.

<u>Example 1:  Comprehensive Academic Advising for the MPH and MSPH Programs</u>

As a result of student feedback (2015-16) and CEPH findings from our last accreditation cycle (2015), the Graduate Programs began the first of several changes to its approach to academic advising for MPH and MSPH students, with its decision to institute comprehensive academic advising.  The prior advising arrangement was split between program staff and select faculty, with program staff advising students on course enrollment and select faculty engaging with the students at a later point in the program for their culminating experience (applied practice experience, integrated learning experience, or research thesis).

The comprehensive academic advising program is a robust structure that provides individualized faculty advising when a student joins the program and continues through graduation.  It begins with individual faculty advisors assigned to each new student at the time of program entry and continues throughout the program.  The faculty advisors help advisees navigate the degree requirements by discussing course selection each semester prior to registration.  The faculty advisors also help students plan for professional development opportunities that align with their long-term professional goals.  These opportunities may include participation in research, grant writing, conference presentations and publications. The faculty advisor and the student meet regularly via email, video, or phone to review progress, goals, challenges, and discuss future plans. Faculty advisors also play a vital role in preparing students for public health careers by supporting opportunities to cultivate professional and technical skills.  Faculty advisors may connect an advisee to their own professional network to broaden and support career development.

Additional changes included in the comprehensive academic advising approach were phased in during 2016 - 2018, which include:

(a) *Identification of student interest area.*  Students are surveyed upon program entry on their areas of interest.  This allows for matching between student interest and the faculty advisor's area of expertise.

(b) *Regular advising meetings.*  Students are required to meet with their faculty advisor at a minimum once per semester, for the purpose of selection of courses, reviewing academic performance, and for early identification of culminating experiences (APE and ILE, or research thesis). Students may not register for courses without having met with their faculty advisor.

(c) *Identification of partners in the community for the applied practice experience.*  Faculty advisors, with the assistance of the Program Capstone Managers, guide MPH students early in their program toward selecting a community partner and applied practice experience site and drafting the applied practice experience proposal and selection of applicable program competencies.

(d) *Formulation of culminating projects.*  Faculty advisors, with the assistance of the Capstone Managers, guide MPH and MSPH students to select an integrated learning experience (MPH) or research thesis (MSPH) and drafting the necessary proposal and selection of applicable program competencies.

(e) *Advising management system*.  The comprehensive advising program has been supported by the implementation of an academic management database, FileMaker, that enables tracking of students' progress and outcomes.  The Graduate Programs staff continue to make enhancements to the database to be able to capture more student data and increase its utilization*.*

These changes were made after consideration of student feedback (quantitative and qualitative), CEPH recommendations, and annual review of evaluation data.  The evaluation data is collected from two surveys, the student satisfaction survey (completed at the conclusion of the degree program) and the academic advisor evaluation survey (completed at the conclusion of the student's culminating experience).

Student perceptions on advising varied greatly in level of satisfaction at the time of comprehensive advising implementation (2016 - 2017), with the lowest levels of satisfaction recorded in 2016.

| Student Satisfaction Survey | "Strongly Agree" or "Agree", 2016 | "Strongly Agree" or "Agree", 2017 | "Strongly Agree" or "Agree", 2018 | "Strongly Agree" or "Agree", 2019 | "Strongly Agree" or "Agree", 2020 |
|---|---|---|---|---|---|
| Academic advising for my degree was clearly provided | 59% | 80% | 89% | 84% | 96% |
| Faculty advisor was readily available | 67% | 87% | 84% | 89% | 81% |
| Faculty advisor understood my career and academic goals | 59% | 100% | 95% | 84% | 89% |

The qualitative comments listed below are representative of comments received during the implementation phase (2016 - 2017):

> "*I think more emphasis should be made from the start of the program on the importance of connecting/networking with partnering stakeholders for capstone opportunities. Also, connecting with students with similar interests to brainstorm ideas to help get your mind thinking from the first semester on potential capstone projects.*" (2016)

> "*The preparation for capstone needs a lot of improvement and good time management. The advisors should start helping students from their first or second semester, so by the time they graduate, they can finish capstone or thesis at the same time.*" (2017)

In 2018, a second survey was included as an evaluation metric, which requires MPH, MD/MPH and MSPH students to submit anonymous feedback at the conclusion of their culminating project.

| | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| Increase the number of faculty advisors servicing public health students | 32 | 34 | 37 |
| 80% of students will answer strongly agree or agree (faculty advisor survey); *Overall evaluation of your advisor is positive* | MPH & MD/MPH = 81% MSPH = 100% | MPH & MD/MPH = 91% MSPH = 100% | MPH & MD/MPH = 86% MSPH = 100% |

The data above is reported in Goal 3B of the evaluation plan.  Please see Criterion H1 for additional information on academic advising.

Example 2:  Course Offerings

As part of an iterative improvement process, the Graduate Programs offers town hall meetings with Program Directors, the Department Chair and the Graduate School Dean.  The town hall forum allows students to voice candid feedback on program operations and qualitative information on the quality of courses and overall course offerings.  During the 2016 - 17 academic year, students voiced feedback regarding the number of course offerings (electives) provided each semester and the timing and format of course offerings.  Most of our degree programs allow students to select elective coursework in their

specific area(s) of interest.  Students stated that our elective course topic areas were limited and they wanted a wider variety of courses.  In response, the Curriculum Committee took the initiative to survey students each Fall semester.  The first course interest survey was launched in 2017 - 18, and data from this survey first informed curriculum changes in 2018 - 19.

In addition to assessing different course topics, the survey also assesses preferences for course modality (in-person, hybrid, online asynchronous) and course timing (mornings, afternoons, evenings).  The student course interest survey results are reviewed and considered by the Curriculum Committee each year as part their planning process for the next academic year's course offerings.  The Curriculum Committee is tasked with identification and action on at least two student recommendations per survey year.

Please see ERF B6.1 for an example survey and summary reports of the student course interest survey.

| | 2018 - 2019 | 2019 - 2020 | 2020 - 2021 |
|---|---|---|---|
| Number of course titles | 81 | 79 | 83 |
| Number of courses with multiple sections/offerings per year | 12 | 11 | 11 |
| Number of courses taught with non-traditional formats (ex. timing, course location/modality, non-lecture format) | 12 | 21 | 82^ |
| Each year, the Curriculum Committee will identify and address at least two recommendations from the Student Course Interest Survey to strengthen and diversify course offerings. | 1.  Added *EPH 617 Maternal and Child Health* to the 2018-19 course offerings<br><br>2.  Added *EPH 616 Global Health and Global Justice* to the 2018-19 course offerings<br><br>3.  Continued to offer a wide variety of global health courses (*EPH 612 Global Health*; *EPH 613 Emerging Challenges in Global Health Systems* and *EPH 614 Global Outbreak Investigations*) | 1.  Added *EPH 624 Applied Epidemiology for Public Health Practice and Community Work* to the 2019-20 course offerings<br><br>2. Added *EPH 644 Fundamentals of Program Evaluation* to the course schedule as the first fully asynchronous online offering (Summer 2019) | 1.  Added *EPH 722 Infectious Disease Epidemiology* to the 2020-21 course offerings<br><br>2.  Added *EPH 618 Violence as a Public Health Issue* to the 2020-21 course offerings<br><br>3.  Updated the course title and course scope *EPH 625 Research Ethics* to a broader "Public Health Ethics" |

^Due to COVID-19, courses for Fall 2020, Spring 2021 and Summer 2021 were remote learning (online or hybrid), which has increased the number of courses in a non-traditional format.

The data above is reported in Goal 1A of the evaluation plan.

Example 3:  Generalist MPH Curriculum Revision

In Fall 2016, CEPH launched new accreditation criteria for schools and programs.  The Accreditation Workgroup began a guided examination of the MPH course curriculum to determine our level of compliance with program competencies within our core course offerings.  The Graduate Programs MPH is a generalist degree, which at the time included 19 credits of core coursework, 20 credits of elective coursework and a 6-credit culminating experience (applied practice and integrated learning experience).  An extensive review of core course syllabi and competency mapping exercises with core course instructional faculty identified gap content areas and gap skill sets in the current curriculum and insufficient coursework to fulfill a dedicated concentration area (generalist).  In addition to the process outlined above, the evaluation of data included student town hall discussion topics and input from the Community Academic Advisory Committee (CAAC).  Our advisory committee and potential employers asked us to consider expanding the methodological skills of our students, provided feedback on the importance of communicating to a variety of audiences, and highlighted the need for public health communication.

The Accreditation Workgroup proposed several curriculum changes to address these deficiencies during the 2017 – 2018 academic year.  As a result of the iterative process and discussions with our CAAC, in Spring 2019, the Graduate Programs grouped existing courses focused on public health skills development to create a 9-credit generalist core course requirement. The creation of this generalist core course grouping reduced the number of elective credits to 12.  The generalist core grouping requires nine credits in three public health skill areas: methodology, computational, and health communication.  Students may select one of three class titles for the methodology requirement (*EPH 656 Qualitative Research Methods*, *EPH 644 Fundamentals of Program Evaluation*, *EPH 647 Community-Based Participatory Research and Social Networking*) and one of two courses for the computational skills requirement (*BST 625 Statistical Computing*, *EPH 602 Medical Biostatistics II*).  All students complete the final skills course in health communication (E*PH 607 Interdisciplinary Health Communication*).

Example 4:  Student Diversity: Targeted Campaigns and Scholarships

The Graduate Programs consistently tracks student enrollment and student diversity for all degree programs offered.  A decline in the number of applications and enrollment in 2017- 2018 led to the systematic review of admissions data and a detailed comparison to other programs nationally.  A recommendation from the Office of Admissions and the Graduate Administration and Operations Committee included investment in Liaison's Enrollment Marketing Platform (EMP).  EMP is a marketing and Customer Relationship Software (CRM) solution designed to transform student engagement.  EMP enables interactions with prospective students to be immediate, personal, automated, and trackable.  The platform has allowed us to create and manage personalized campaigns that engage students, build lasting relationships with current students, faculty, and alumni, and has ultimately led to increased applications and enrollment as evidenced by our recent outcomes.

A salient outcome of our market comparison is that our program is significantly higher in cost than others with similar credit requirements throughout the country.  This led to the launch of a pilot scholarship program beginning in Fall 2020 that awards all eligible MPH and MSPH students with a scholarship award that reduces the cost of tuition by approximately 25%.  This aggressive scholarship program has directly led to the increase in applications and enrollment as evidenced by the Fall 2020 Student Entrance Satisfaction Survey in which 83% of survey respondents cited the scholarship as a contributing factor of enrolling at UM.

| | **2018 - 2019** | **2019 - 2020** | **2020 - 2021** |
|---|---|---|---|
| Number of targeted, tailored recruitment campaigns | Sent 28,500 emails; 3 campaigns | Sent 47,990 emails; 5 campaigns | Sent 1,427,726 emails; 10 campaigns |
| Number of targeted recruitment events | 51 | 62 | 66 |
| Number of financial scholarships awarded | 14 | 17 | 62 |
| Dollars ($) awarded per academic year | $160,000 | $196,533 | $299,944 |

The data above is reported in Goal 2A and 2B of the evaluation plan.  Please see Criterion H4 and Criterion G1 on student recruitment and admissions and student diversity for additional information.

**2) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area. (self-study document)**

Strengths:  The Graduate Programs has implemented several meaningful changes based on review of evaluation data and the many feedback opportunities we provide.  Evaluation measures are monitored for improvement to assure that the changes implemented are contributing to expected program outcomes.

Weaknesses:  Documentation of meetings and student forums is not consistent.  Involvement of all key stakeholders in the evaluation plan is challenging.

Plans for Improvement:  Program evaluation tools will be continuously enhanced to collect data that are most pertinent to program improvement.  The commitment of stakeholder time will be balanced with the need for data.