Upstate Medical University Master of Public Health Program 2018 SELF-STUDY

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Introduction

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

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

State University of New York (SUNY) Upstate Medical University is a public Academic Medical Center located in Syracuse, New York. SUNY Upstate was established in 1834 as the Medical Institution at Geneva College and is the second oldest surviving medical school in New York State.

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

SUNY Upstate Medical University is made up of four colleges: 1) The College of Nursing; 2) The College of Medicine; 3) The College of Graduate Studies; and 4) The College of Health Professions. Table I-1 shows the number of degrees offered by each college at Upstate Medical University.

College	Degrees Offered
The College of Nursing	Bachelor of Science in Nursing
	Master of Science in Nursing
	Post Master's Advanced Certificate Program
	Doctor of Nursing Practice
The College of Medicine	Masters of Public Health (MPH)
	Certificate of Advanced Study in Public Health
	Doctor of Medicine (MD)
	 Doctor of Medicine/Doctor of Philosophy (MD/PhD)
	 Doctor of Medicine/Master of Public Health (MD/MPH)
The College of Graduate Studies	Biochemistry and Molecular Biology: PhD/MS
	Cell and Developmental Biology: PhD/MS
	Microbiology and Immunology: PhD/MS
	Neuroscience: PhD/MS
	Pharmacology: PhD/MS
	Physiology: PhD/MS
The College of Health Professionals	Behavior Analysis Studies: MS
	Clinical Perfusion: MS
	Medical Biotechnology: BS
	 Medical Imaging Sciences (Medical Radiography): BS, BPS
	Medical Technology: BS,MS
	Physical Therapy: DPT
	Physician Assistant: MS
	Radiation Therapy: BS, BPS
	Respiratory Therapy: BS
	Ultrasound: BS, BPS

c. number of university faculty, staff and students

As of 2018, SUNY Upstate Medical University has 1,525 students enrolled in its four colleges. SUNY Upstate also has 2,424 faculty members (615 full-time, 261 part-time, 1,548 volunteer) and 9,849 total employees (November 2017).

d. brief statement of distinguishing university facts and characteristics

Upstate Medical University (Upstate) traces its roots to 1834 when the nation's 25th medical school was established in Geneva, NY: the Medical Institution of Geneva College. The first woman to graduate from a medical school in the United States graduated from the Geneva Medical School. In 1971 the school became part of Syracuse University and then became part of the State University of New York in 1950. Over the past 60 years, the medical school added a university hospital and the Colleges of Graduate Studies, Health Professions and Nursing, to become a robust academic medical center. The current organization consists of 25 buildings on 30 acres of land. It is home to 40 student organizations and has 8 intramural sports with both men's, women's and co-ed teams. Upstate is the only academic medical university serving the 17 counties in central New York. This means that the university is able to offer quality education and health care to the 1.8 million individuals living in Central New York and beyond. In addition to providing state of the art healthcare and education, Upstate is advancing health research through the over 600 research projects that are currently taking place at the university.

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

In addition to CEPH, SUNY Upstate Medical University responds to several other accrediting bodies. The table below shows a complete list of the names of the accrediting bodies that SUNY Upstate responds to.

Table I-1 Accrediting Bodies that SUNY Upstate Responds To

Accrediting Body				
Accreditation Council for Graduate Medical Education (ACGME)				
DNV (Det Norske Veritas) GL Healthcare				
Accreditation Council for Continuing Medical Education (ACCME)				
Commission on Accreditation of Physical Therapy Education				
Accreditation Review Commission on Education for the Physician Assistant				
Commission of Accreditation for Respiratory Care (CoARC)				
Commission on Accreditation of Allied Health Education Programs (CAAHEP)				
Commission on Collegiate Nursing Education (CCNE)				
Joint Review Committee on Education in Radiologic Technology (JRCERT)				
Liaison Committee on Medical Education (LCME)				
National Accrediting Agency for the Clinical Laboratory Sciences (NAACLS)				
Middle States Commission on Higher Education (regional accreditor)				
Commission on Education for the Physicians Assistant, Inc.				
New York State Department of Education				
American Association of Colleges of Nursing Commission on Collegiate Nursing Education				

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

The Upstate Medical University MPH Program was formed as a joint program with Syracuse University and enrolled its first students in the fall of 2009. The Department of Public Health and Preventive Medicine, which houses the Upstate Medical University MPH Program, also offered a 15 credit Certificate of Advanced Study (CAS) in Public Health and a joint MD/MPH degree. When the Upstate Medical University MPH Program was established, the program had one focus, Public Health Practice and Policy, which was selected based on the strengths of the two institutions involved with the program.

As of August 2018, the two universities established a memorandum of understanding to separate sponsorship into single sponsorship by Upstate Medical University alone. As part of the Memorandum of Understanding dissolving the joint Master's Program in Public Health between Syracuse University and SUNY Upstate Medical University, Syracuse University agreed on the following terms (A copy of the

Memorandum of Understanding can be found in the Introduction- 1f section the ERF):

- Any student who matriculated for fall semester 2017 or earlier and who has completed at least one course at SU that fulfills a requirement for the MPH program remains eligible to obtain a joint diploma.
- The option of receiving a joint diploma will remain open until May 31, 2022.
- MPH students may continue to take SU courses at the previously agreed upon tuition rate until July 30, 2019.
- Between July 31, 2019 and May 31, 2022, MPH students who wish to take an SU course (as a non-matriculated student through University College) may pay the Upstate tuition rate for nonresident part-time graduate students.
- After May 31, 2022, Upstate students may take courses at the then-prevailing SU University College graduate tuition rate.

Prior to the official separation, starting in October 2017, students were informed via emails and through discussions with program leadership (Faculty and Staff) about Syracuse University's intent to disengage from the program. Upstate Medical University is restructuring the Upstate Medical University MPH Program and reevaluating its mission, values, community of interest, and strategic plan. During the strategic planning process that began prior the program's official separation from Syracuse University, the Upstate Medical University MPH Program has begun the process of phasing out the Public Health Practice and Policy focus and created two new concentrations: 1) Data and Analytics; and 2) Population Health for Clinicians. In the fall of 2018, the first group of students were accepted into the new concentrations.

As of the 2019 Spring semester, 32 MPH or MD/MPH students who matriculated prior to fall 2018 in the Public Health Practice and Policy focus. Six of these students matriculated prior to Fall 2017. Of the 32 students enrolled in the Public Health Practice and Policy focus, 29 are MPH students and 3 are MD/MPH students. The chart below outlines the anticipated graduation dates for all students who matriculated prior to fall 2018.

Number of students graduating under the phased out concentration

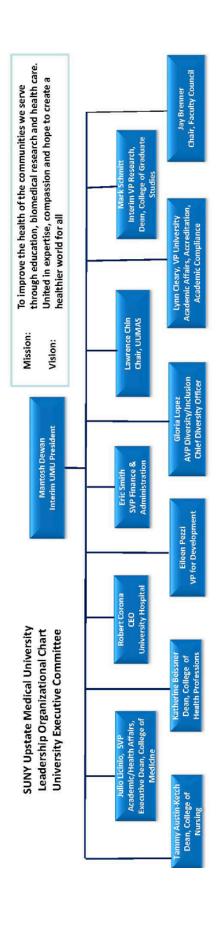
Anticipated Graduation Date	Number of Students					
	MPH	MD/MPH				
May 2019	21	1				
December 2019	3	1				
May 2020	1	1				
May 2021	4	0				

Students who matriculated prior to 2017 have the option of completing a capstone project or taking a comprehensive examination. Five MPH students and one MD/MPH student have opted to complete a capstone project. All of the 32 students who matriculated prior to fall 2018 and complete the program will be awarded the MPH from both SUNY Upstate Medical University and Syracuse University because they have all taken at least one Syracuse University course.

All students have been informed that the Public Health Practice and Policy focus will be phased out by the end of May 2022. The Program Coordinator will continue to reach out to students in the Public Health Practice and Policy focus as the May 2022 deadline approaches to remind them that the focus is being phased out. We do not anticipate having any student remaining in the Public Health Practice and Policy focus who has not graduated by the end of May 2022, as all students in the focus area are expected to graduate by May 2021.

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

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



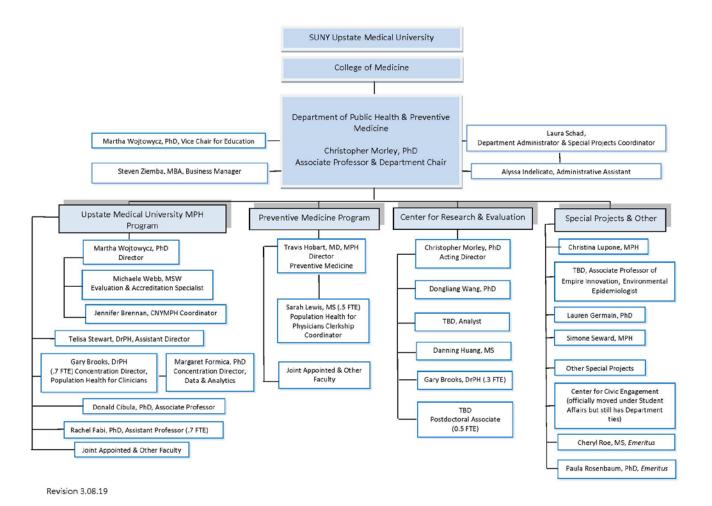
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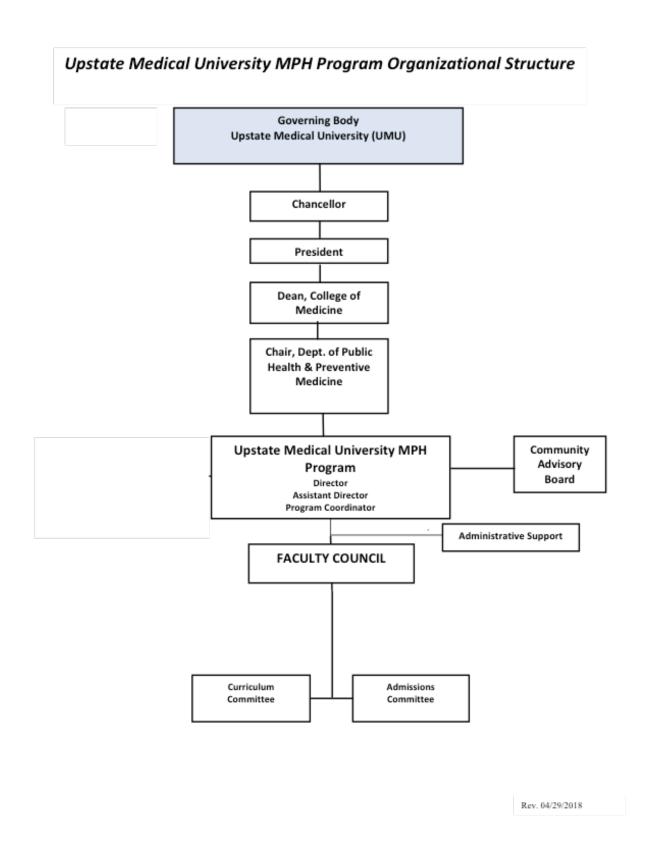
	Dean, College of Campus Graduse Studies at Binghamton R. Schmitt R. Dave	,												UPSTATE addition lines and
	Dean, Student Affairs J. White												10	ģ
	for Associate Dean for Education T. Schwartz													
	Associate Dean for Graduate Medical Education D. Katz													
e Dean	Assistant Dean for Rural Medicine C. Rosemelia													
, MD, PhD Affairs & Executive of Medicine	Chairs	Ophthalmology R. Fechtner	Orthopedic Surgery S. Albanese	Otolaryngology and Comm Sciences S. Tatum (Interim)	Pathology M. Nasr (Interim)	Pediatrics G. Conners	Pharmacology R. Wojciklewicz	Physical Medicine and Rehabilitation R. Weber	Psythlatry T. Schwartz (Interim)	Public Health and Preventive Medicine C. Morley	Radiation Oncology J. Bogart	Radiology D. Feiglin	Surgery R. Cooney	Urology G. Bratslavsky
Julio Licinio, MD, PhD Sr. VP for Academic Heath Affairs & Executive Dean Dean, College of Medicine	Department Chairs	Anesthesiology P. Sebastian Thomas	Blochemistry and Molecular Biology P. Kane	Bioethics and Humanities K. Faber-Langendoen	Cell and Developmental Biology J. Sanger	Emergency Medicine G. Johnson	Family Medicine C. Satterly (Interim)	Gerlatrics S. Brangman	Medicine S. Narsipur (interim)	Microbiology and immunology T. Endv	Neurology L Mejico	Neuroscience and Physiology F. Pignoni (Interim.)	Neurosurgery L. Chin	Obstetrics and Gynecology R. Silverman
Sr. VP f	Sr. Associate Dean for Faculty Affairs and Faculty Development A. Botash				0									
	Associate Dean for Diversity Z. Tovan-Spinota													
	Associate Dean for Clinical Quality A. Tucker (interim)													
	Associate Dean for Clinical Affairs A. Tucker													
	Assistant Dean for UME and GME Research D. Bourboulia													
	Chief of Staff G. VanNortwick													
	Sr. Associate Dean for Finance E. Smith	4												

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



A PDF of this chart can be found in Introduction-2a section of the ERF.

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



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

Not applicable.

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

Table I-3 Instructional Matrix - Degrees and Concentrations

Instructional Matrix - Degrees and Concentrations							
			Categorized as public health*	Campus based	Executive	Distanc e based	
Master's Degrees		Academic	Professional				
Data and Analytics Co	ncentration		MPH	Х	MPH		
Population Health for Concentration	Clinicians		MPH	Х	МРН		
Public Health Practice and Policy (For students who matriculated 2017 or earlier.)			МРН	Х	МРН		
Joint Degrees (Dual, G	Combined,						
Concurrent, Accelera	ted Degrees)	Academic	Professional				
	Public Health						
2nd Degree Area	Concentration						
Medicine	Population Health for Clinicians		МD/МРН	X	MD/MPH		
	Public Health Practice and Policy (For students who matriculated 2017 or		МD/МРН		MD/MPH		
Medicine	earlier.)			X			

The program currently offers one degree, the Master of Public Health, with two concentrations: one in Data and Analytics and the other in Population Health for Clinicians. The MPH is the primary professional degree, which strives to prepare students as public health practitioners to plan, implement, advocate, and evaluate population-based programs and policies that improve the health and well-being of communities. To accomplish this mission, the Upstate Medical University MPH Program has developed and implemented a competency-based curriculum, preparing students for career opportunities that involve public health interventions at the practice and policy levels.

The program also offers an MD/MPH concomitant degree which enables MD students to earn an MPH in their desired concentration while pursuing their medical degree.

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

Table I-4 Enrollment Data for all of the Program's Degree Programs

Degree		Current Enrollment		
Master's				
	MPH (Total)	50		
	Data and Analytics Concentration			
Population Health for Clinicians Concentration		2		
Public Health Practice and Policy (For students who				
	matriculated 2017 or earlier.)	33		

A1. Organization and Administrative Processes

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

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

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

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

The following committees have been established to support governance:

- Community Advisory Board (CAB)
- Faculty Council
- Admissions Committee
- Curriculum Committee

Community Advisory Board (CAB)

The charge of the Advisory Board is to assist in gathering and leveraging community partners to support the Upstate Medical University MPH Program and to offer guidance in program design, planning, and evaluation. Specifically, the Advisory Board provides guidance for

- Identifying and collaborating with community organizations willing and able to provide practical experiences for the MPH students,
- Developing linkages with academic programs at both institutions to enrich the experience of students studying public health and medical services issues,
- Developing linkages with academic programs and community agencies that may be a source of recruitment of MPH students, and
- Assessing the content of the curriculum and other experiences available to the MPH students to ensure that their training is relevant and applicable to the needs of the community and to the regional public health workforce.

Composition and current membership: In the past, the CAB consisted of 13 members and met twice a year. In addition to the director and the associate director, membership consisted of the dean of the College of Medicine, public health professionals currently practicing in the region, an MPH faculty member, and a student representative. New members were selected by the director and associate director with input from current members and other standing committees within the program. Recently, the CAB has not been active because the program was going through restructuring and program leaders did not want to involve community partners before we had a clearer picture of what the program would look like moving forward. Now that our separation from Syracuse University has been finalized, we have begun the process of re-establishing the CAB. In October 2018, the Program Director and the Chair of the Department of Public Health and Preventive Medicine began drafting a list of potential CAB members. This list was finalized in early spring 2019 and the first meeting of the CAB will occur in late spring 2019.

As of May 2019, the following individuals have agreed to serve on the CAB:

Current Members	
Eric Faisst	Local health department representative (rural)
Indu Gupta	Local health department representative (urban)
Mary Carney	HealthEConnections
Sharon Owens	Deputy Mayor; Community Representative
Nicole Cifra	Alumni
Jeannette Zoeckler	Upstate-Occupational Health/Alumni/PhD
Emilija Postolovska	Transforming Communities Initiative
Ranette Releford	Administrator of the Citizen Board to the Advisory Board
Mustafa Awayda	Alumni; Physician; VA hospital; Director of Free Clinic
Carrie Roseamelia	Upstate-Rural Medical Scholars Program
Martha Ryan	Health care advocate; state public health association representative
Marnie Annese	Health Foundation for Western and Central New York
Jessica Soule	Alumni
Heather Dacus	Cancer Prevention Program, NYS DOH
Maria MacPherson	State health department regional office representative.
Parul Rahbari	CDC, Rochester Rep
Robert Dracker	Upstate- Pediatrician, Major Program Supporter
Ian Grant	Alumni
Kara Williams	Foundation/Funder Representative
Brian Thompson	Upstate Assistant Dean of Diversity

Faculty Council

The Faculty Council is the governing body responsible for the academic administration of the Upstate Medical University MPH Program. This committee approves policies governing faculty, staff, and students; approves policies that govern the program; and approves faculty appointments and re-appointments. Also, the Council provides a platform for the faculty to discuss key issues impacting the program.

Composition and current membership: The Faculty Council consists of all core faculty members in the Upstate Medical University MPH Program. All primary faculty are members of the council and have voting privileges.

Current Members	
Gary Brooks	Associate Professor, Population Health for Clinicians Concentration Director
Daniel Olevia	
Donald Cibula,	Associate Professor
Rachel Fabi, PhD	Assistant Professor
Margaret Formica, PhD	Associate Professor, Data and Analytics
,	Concentration Director
Travis Hobart, MD, MPH	Assistant Professor
Christina Lupone, MPH	Instructor
Christopher Morley, PhD	Associate Professor, Chair, Department of Public
,	Health and Preventive Medicine
Telisa Stewart, DrPH	Associate Professor, MPH Program Assistant Director
Dongliang Wang, PhD	Associate Professor
Martha Wojtowycz, PhD	Associate Professor, MPH Program Director

Admissions Committee

The Admissions Committee oversees the admissions process and has decision-making authority regarding admission decisions. Specifically, the Committee:

- Recommends changes to admission standards and reviews completed applications,
- Approves candidates for admission, and
- Executes strategies to attract and recruit a diverse student population.

Composition and current membership: The Admissions Committee consists of four to six members. In addition to the chair of the Department of Public Health and Preventive Medicine, membership includes several MPH faculty members, MPH staff members, and one staff person from Upstate's Office of Student Admissions. New members are appointed to this committee as needed by the department chair.

Current Members	
Christopher Morley, PhD	Chair, Department of Public Health and
	Preventive Medicine
Martha Wojtowycz, PhD	Director, MPH Program
Donald Cibula, PhD	MPH Faculty
Dongliang Wang, PhD	MPH Faculty
Laura Schad	MPH Staff
Barbara-Ann Mitchell	Upstate Medical University's Office of
	Student Admissions
Jennifer Brennan	MPH Staff

Curriculum Committee

The Curriculum Committee ensures that the curriculum meets and exceeds the current standards of public health education. This committee makes recommendations and presents curricular matters to the larger Upstate Medical University MPH Faculty Council. Specifically, the Committee

- Reviews and approves all proposed curricular changes or revisions affecting the program, including changes in course sequencing and elective course offerings.
- Reviews and approves course syllabi to ensure compliance with MPH educational program goals and public health competencies. This includes approval of new course offerings in the program.
- Analyzes data and information gathered from various assessments (student course evaluations, faculty course evaluations, etc.) to improve the quality and effectiveness of the curriculum. Starting in the 2019-2020 Academic Year, these responsibilities will be taken over by the Evaluation Committee, which will be reestablished in the fall of 2019.

Minor course changes do not go beyond the program's Curriculum Committee. Major curricular changes, e.g., new course approvals, change in required courses for the MPH degree, must be approved by Faculty Council. Once approved by the Council they need to be reviewed and approved by the Upstate's College of Medicine Curriculum Committee. A change in the number of credits required for the MPH degree or a change, removal, and addition of a concentration would also have to be reviewed and approved by the New York State Department of Education.

Composition and current membership:

The Curriculum Committee consists of seven members. Membership includes the Associate Director of the MPH Program, both of the concentration thread directors, and additional faculty members in the Upstate Medical University MPH Program. The committee meets regularly as determined by the committee chair.

Current Members	
Margaret Formica, PhD	Committee Co-Chair, MPH Faculty, Data
	and Analytics Concentration Director
Telisa Stewart, DrPH	Committee Co-Chair, Assistant Director,
	MPH Program
Donald Cibula, PhD	MPH Faculty
Gary Brooks, DrPH	MPH Faculty, Population Health for
	Clinicians Concentration Director
Michaele E. Webb, MSW	MPH Staff
Rachel Fabi, PhD	MPH Faculty
Jennifer Brennan	MPH Staff

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

a. degree requirements

The degree requirements for the Upstate Medical University MPH program are set by the faculty of the program as a whole. Working groups may be set up as needed to review and set degree requirements before bringing them up to the program director and the rest of the department during a meeting of the Faculty Council. Following a discussion, all revisions and additions to the program's degree requirements must be voted on by all Upstate Medical University MPH faculty members with voting privileges.

b. curriculum design

The Curriculum Committee is the organization that is primarily responsible for any curriculum changes within the Upstate Medical University MPH Program. The Curriculum Committee reviews the curriculum and discusses any potential changes that need to be made. If the committee decides that elements of the curriculum need to be redesigned they will bring up the changes for discussion and a vote during one of the Faculty Council meetings.

Changes to the curriculum can also be introduced at Faculty Council meetings. If that occurs, they can either be voted on immediately or brought to the Curriculum Committee for review and then voted on later at another Faculty Council meeting.

Finally, The Public Health Interest Group (PHIG), which is a student-run organization also makes suggestions regarding curricular changes and brings their suggestions to the Faculty Council for discussion.

c. student assessment policies and processes

The general guidelines for assessing academic performance in the program were set by the Curriculum Committee and approved by the faculty council at the inception of the program. There are two methods for making additional changes to the Upstate Medical University MPH Student Assessment Policies: 1) Changes are discussed during the Faculty Council meetings and then brought to a vote by the Faculty Council before being put into place; 2) Changes are discussed during the Curriculum Committee meetings and then brought before the Faculty Council for discussion and to a vote prior to being put into place.

Additionally, a faculty member and the department's Evaluation and Accreditation Specialist serve on the University's Student Learning Outcome Committee (SLOC). This committee periodically reviews the program's methods for evaluating student learning in order to make sure that the program methods are measuring what they are supposed to and that they align with the goals and objectives Upstate Medical University as a whole. The most recent SLOC review of the Upstate Medical University MPH Program occurred in the fall of 2018.

d. admissions policies and/or decisions

The Admissions Committee reviews completed applications and makes admissions decisions.

Additionally, the Admissions Committee makes decisions regarding any changes to the admissions policy. If these changes are affect the program as a whole, they will also need to be approved by the faculty council.

e. faculty recruitment and promotion

To recruit new faculty for the Upstate Medical University MPH Program (outside of existing faculty at Upstate Medical University), the chair of the Department of Public Health and Preventive Medicine negotiates with the Dean, College of Medicine, for a dedicated line. Upon approval of the line, a search is conducted, led by the chair, alongside a search committee, the Upstate Medical University MPH Faculty Council, chairs or faculty from collaborating departments, the institutional Human Resources Department, and the Office of Diversity and Inclusion (ODI).

Promotions and tenure decisions are made at the university level through Upstate Medical University's promotion and tenure process. More information regarding the university's promotion and tenure process can be found online through the following link: http://www.upstate.edu/facultydev/fac_affairs/promotion.php.

The Upstate Medical University MPH Program adheres to the hiring practices of Upstate Medical University, and does not discriminate on the basis of race, sex, sexual orientation, color, religion, age, national origin, disability, marital status, or status as a disabled veteran or veteran of the Vietnam Era, W are committed to the recruitment and employment of a diverse group of faculty, staff, and students.

f. research and service activities

Research and service expectations and policies for individual faculty are established and monitored by Upstate Medical University as part of the promotion and tenure process in the College of Medicine. During the initial period of the approval process for faculty joining the Upstate Medical University MPH Program (primary or affiliated), the Upstate Medical University MPH director and the associate director review each faculty member's research and service portfolio. For all primary Upstate Medical University MPH faculty members, the chair of the Department of Public Health and Preventive Medicine outlines the expectations for teaching, research, and service in their annual agreement of academic expectations. The chair of the Department of Public Health and Preventive Medicine works with primary faculty members to set appropriate and specific research and service goals for each faculty member and then evaluates faculty progress toward the fulfillment of those goals on an annual basis as well as more frequently in formative ways. Research and service goals are set in consideration of the needs of the department and program, the interests, expertise and skills of the faculty member, and the requirements for promotion and tenure, where applicable.

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

The Upstate Medical University MPH Program adheres to the policies, governance structure, and roles and responsibilities set by Upstate Medical University. Program-specific policies and procedures that govern the program and guide faculty and students are identified in the Upstate Medical University MPH faculty and student handbooks, which are widely available in hard copy and online. These policies are congruent with the policies and practices of the university.

The Upstate Medical University MPH Program handbooks are available in sections A1-3a (Student Handbook) and A1-3b (Faculty Handbook) of the ERF.

In addition, the Upstate Medical University MPH Program follows the governance practices of Upstate Medical University regarding the rights and responsibilities of administrators, faculty, and students as outlined in the documents in the table below.

Table A1-3 University Policy Links

Institution	Policy Documents			
Upstate Medical	Faculty Organization Bylaws: http://www.upstate.edu/facgov/fac_org/bylaws.php			
University	Medical College Assembly Bylaws:			
	http://www.upstate.edu/facgov/pdf/mca_bylaws_2017_v2.pdf			
	Faculty Orientation/Faculty Handbook:			
	http://upstate.edu/facultydev/faculty_orientation/			
	Annual Academic Expectations: http://upstate.edu/facultydev/intra/expectations.php			
	Promotion and Tenure:			
	http://upstate.edu/facultydev/intra/promo_tenure.php			
	Emeritus and Joint Appointment:			
	http://upstate.edu/facultydev/intra/emeritus.php			
	Upstate Student Government:			
	http://www.upstate.edu/campus-activities/student-orgs/so_usg.php			
	Student Handbook:			
	http://www.upstate.edu/currentstudents/docman/index.php?cid=123			

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

The Upstate Medical University MPH Program's faculty are very involved in the decision making activities of Upstate as a whole. They work with other members of the university community to help design curriculum, draft new university policies, and make admissions decisions. The chair of the Department of Public Health and Preventive Medicine currently serves as a member of both the Admissions Committee and the Curriculum Committee for the MD Program in the College of Medicine. He also serves as the chair of the College Affairs Committee for the Medical College Assembly and is a member of the Operations Committee for the Upstate Faculty Council. He is also a member of the Institutional Review Board. Finally, the department chair is a member of the Liaison Committee on Medical Education (LCME) Steering Committee for the College of Medicine and Co-Chaired the Phase 1 Evaluation Work-Group from August 2017 until May 2018. The Upstate Medical University MPH Program Director has also served on many committees within the university including the College of Medicine Curriculum Committee and the Phase I Committee, the Upstate Medical University Faculty Council, and Working Groups 8 and 9 for the LCME.

Additionally, other Upstate Medical University MPH faculty members are involved in institution wide committees such as the Student Learning Outcome Committee (SLOC), the Middle States Accreditation Working Group #5, the Violence Education Prevention Outreach Program Advisory Board, and the Faculty Council DACA Taskforce.

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

Full-time and part-time faculty in the Upstate Medical University MPH program regularly interact with each other in several different ways. The department has monthly department and faculty meetings where faculty have the opportunity to share the work that they are doing and discuss program policies and procedures and other important events that are taking place within the department. Copies of faculty meeting meetings and attendance lists can be found in section A1-5 of the ERF.

The department also hosts regular Grand Rounds presentations where faculty can listen to and interact with guest speakers who are brought into the department to share information regarding current issues in the field of Public Health. These visits are often multi-day affairs, which afford faculty to interact with one another and the visiting scholar beyond the Grand Rounds presentation.

Additionally, most program faculty are located proximal to one another, and interact with one another on a daily basis as a regular course of business. Faculty within the Upstate Medical University MPH program collaborate with each other to work on research, presentations, and grants. Finally, faculty members also collaborate in the classroom by taking part in team teaching and giving lectures and helping out with activities in each other's classes.

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

<u>Strengths</u>: One of the major strengths of the Upstate Medical University MPH Program is that our faculty members take on very active roles in organizational and policy making decisions at both the program and university level. Upstate Medical University MPH students are also very involved in program decision making and volunteer to serve as student members of department level committees.

<u>Weaknesses</u>: The faculty of the program form a tightly-knit group, who communicate with each other internally on a regular basis. However, as the program transitions to a single-institution entity, with new concentrations, our relationship with external voices is also undergoing transition. As mentioned above, our community advisory board has been reconstituted. Previously, we focused on local health department officials, regional hospital personnel, etc. As we transition to a program that has embraced a wider global audience, and upon research and data analysis, we will need to engage new voices from our redefined communities of interest, in order to properly inform our program.

<u>Plans for Improvement</u>: In the upcoming year the Upstate Medical University MPH program is increasing community input with the reestablishment of the Community Advisory Board. In October and November of 2018, the Upstate Medical University MPH Program began drafting a list of potential members of the Community Advisory Board. Program leaders contacted these individuals and are arranging the first meeting of the Community Advisory Board in the spring of 2019. Additionally, in November of 2018, the department took part in a group concept mapping (GCM) exercise (This exercise will be explained in more detail later on in this report.) to identify out communities of interest. Key stakeholders in the local community were also invited to take part in this exercise.

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

Not applicable.

A3. Student Engagement

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

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

Students enrolled in the Upstate Medical University MPH Program are heavily involved in policy making and decision making within the program. Each year, several students serve with faculty and staff on committees such as the Admissions Committee and the Curriculum Committee. The table below shows the most resent list of students who have served on committees within the Upstate Medical University MPH Program. This table contains all of the committees that were in place and had student reps since September 2013.

Table A3-1 Student Membership on Committees

Committee	2013-2014	2014-2015	2015-2016	2016-2017
Admissions	Joshua Anbar,	Joshua Anbar	Michael loerger,	Michael loerger,
Committee	Nicole Cifra		Kia Stroughton	Kia Stroughton
Advisory Board	Marnie Annese	Marnie Annese	Desirree Pizarro, Adeokunbo Shobaloju	Desirree Pizarro
Curriculum Committee	Moustafa Awayda, Philip Skummer	Moustafa Awayda, Philip Skummer	Moustafa Awayda, Nicole Cifra	
Evaluation Committee*	Emilie Covert	Maritza Alvarado	Maritza Alvarado	
Executive Committee**	Anamaria Ross	Anamaria Ross		
Upstate's Pathway to Wellness Committee				Kirstin Lyons

^{*} No longer in existence. The Upstate Medical University MPH Program plans on reestablishing this committee at the beginning of the 2019-2020 academic year.

In addition to serving on committees within the program, students also take part in the Public Health Interest Group (PHIG). This is a student-run organization for Public Health Students that promotes volunteerism and community involvement. All students in the MPH Program are automatically members of the PHIG. The officers for the 2018-2019 academic year are as follows:

Position	Student
President:	Kirsten Donato
Vice President:	Richard Burke
Treasurer:	Gabriella Nisenbaum
Club Liaison:	Danielle Carlone
Secretary:	Molly Pappert

^{**} No longer in existence.

Additionally, PHIG gives the opportunity to participate in academic activities that enrich their learning experience outside of the classroom environment. Each year, the PHIG conducts a Survey of all of the students in the Upstate Medical University MPH program. After they collect and analyze the results, the PHIG presents their findings and suggestions regarding changes that should be made within the program. In the past, these presentations have led to curricular changes. For example, the students were unhappy with the way that one of the courses within the department was structured. This led to a review and restructuring of the course, based on the input from the students.

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

<u>Strengths</u>: Upstate Medical University MPH students are very active in the policy making and decision making of the Upstate Medical University MPH program. They provide fresh ideas and information that helps to inform how the program should be run. Rather than just participating, our students also take on an active leadership role in program governance through the administration of the yearly student survey.

<u>Weaknesses</u>: Although Upstate Medical University MPH students are very active in program policy and decision making and community activities, they are not as involved with organizations or committees that serve the university as a whole. Additionally, in recent years, there has been a decrease in student involvement in committees within the program.

<u>Plans for Improvement</u>: In the upcoming year, the Upstate Medical University MPH Program would like to get students more involved with Upstate Medical University activities by introducing students to committees that our faculty are involved in and the ways that they can get involved in these committees.

The Upstate Medical University MPH Program leadership would also like to promote more student involvement in the program's committees. In order to do this, the program will reach out to students via the student listserve and will ask faculty and other students involved in the committees to talk about the committees and how to get involved during classes and other program events.

A4. Autonomy for Schools of Public Health

Not applicable.

A5. Degree Offerings in Schools of Public Health

Not applicable.

B1. Guiding Statements

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

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

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

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

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

The program is in the process of reviewing our current vision, mission, goals, and values as part of our initial strategic planning process.

The **vision statement** of the Upstate Medical University MPH Program states, "We prepare public health professionals who are committed to improving health outcomes for communities."

With that vision in mind, **the Mission** of the Upstate Medical University MPH Program is "To create new knowledge about public health through research and to strengthen the workforce by preparing a diverse group of professionals to plan, implement, evaluate and advocate for population-based health policies and programs."

The Upstate Medical University MPH Program will achieve its mission through coordinated efforts directed toward three overarching **Program Goals** focusing on:

- 1) **EDUCATION**: To educate a diverse group of professionals with the values, commitment, knowledge, and technical skills necessary to improve population health.
- 2) **RESEARCH**: To advance public health knowledge by developing an active program of population-based health research and program evaluation.
- 3) **SERVICE AND OUTREACH**: To develop active community partnerships and collaborative endeavors that contribute to sound public health policies and practices at the local, state, and global levels.

Finally, based on the Upstate Medical University MPH Program's core principles, beliefs, and priorities, we uphold the following **Statement of Values**:

Open Learning Environment:

The Upstate Medical University MPH program strives to nurture an open learning environment, where a diverse body of students is allowed the academic freedom to pursue new ideas and develop a sense of lifelong learning through the spirit of inquiry, innovation, and creative problem solving.

Service:

The Upstate Medical University MPH faculty, staff, and students will strive to model and embody the spirit of community service, engagement, and collaboration.

Advocacy:

The Upstate Medical University MPH program will seek to improve the health of its community, its region, and the human population as a whole by striving for social justice, advocating for vulnerable populations, and working collaboratively to reduce health disparities.

Professionalism:

The Upstate Medical University MPH faculty and staff will envelop all of these values in an overarching sense of passion, integrity, and ethical practice.

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

Information documenting the Upstate Medical University MPH Program's strategic planning process can be found in section B1-2 of the ERF. These documents include faculty meeting minutes, faculty retreat minutes, and initial drafts of our strategic plan and mission, vision, and goal statements. Additionally, notes from a meeting to discuss our courses' alignment with the 2016 CEPH Competencies is also included.

The Upstate Medical University MPH Program's most recent strategic plan was jointly developed between Syracuse University and Upstate Medical University. Upstate has developed a new University Strategic Plan using the Balanced Scorecard Institute method. The University Strategic Plan (Tier 1) was developed in 2017-2018, and the college plans were developed in 2018. Individual department and program plans are now beginning to evolve. We are working toward creating a new strategic plan in alignment with the new Upstate Medical University strategic plan, in the following phases:

Phase 1:	Identification of our Professional Communities and Communities of Interest through a formal, rigorous Group Concept Mapping project.	November 2018 (Complete)
Phase 2:	Identification, recruitment, and reconstitution of a new Community Advisory Board	January 2019 – March 2019 (Complete)
Phase 3:	Drafting of a new Strategic Plan, with input from representatives of our communities of interest, our Community Advisory Board, Upstate Medical University leadership, and our faculty, students and professional staff.	May 2019- July 2019
Phase 4:	Adaptation of the new Strategic Plan	July 2019 - Forward

In the interim, a number of other processes have guided the direction of the program. In the summer of 2017, department faculty met during a faculty retreat to discuss the program's future and the possibility that Syracuse University would no longer be involved with the Upstate Medical University MPH Program. At that time, the faculty drafted a very plan regarding what the program's next steps might be. Program leaders also continued to conduct informal conversations with key stakeholders within the community to discuss the workforce needs in the communities surrounding Upstate Medical University. Additionally, the program faculty worked together to form two new potential program concentrations to replace the concentration that was in place at that time. The faculty felt that these two new concentrations would help the students who graduated from the program leave with the skills that they needed to be successful in the field of public health.

Moving forward, in addition to the adaptation of a formal strategic plan (in the phases described above), the program faculty will be review the program's mission and vision to ensure that they align with the new direction of the program and align with the vision and mission of Upstate Medical University as a whole. We will also ask key stakeholders in the community for their opinion regarding the program's mission and vision. Upstate Medical University MPH Program leaders will be in close communication with the Upstate Medical University leadership team to make sure that the program's strategic plan aligns with the university's strategic plan. The program has already begun to do this by reaching out to Upstate Medical University's Director of

Evaluation, Assessment, and Research and asking her to review the program's evaluation measures to insure that they align with the university's strategic plan and evaluation measures.

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

<u>Strengths</u>: The Upstate Medical University MPH Program has strong program goals that align with the mission and vision statement of the program. The program's values are also clearly defined and available to the public on the program's website.

<u>Weakness</u>: Currently, the Upstate Medical University MPH Program is developing a new strategic plan using the groundwork that has been laid by the previous strategic plan and the program and curriculum planning meetings that have been held within the department. We are also relating our plan back to the University and College of Medicine's new strategic plans. The program recognizes this as a gap and, as documented in our program's plan for improvement, has begun taking steps to improve in this area.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program is currently in the process of restructuring as a program sponsored by a single institution. While the overall goals and values of the program currently remain stable, as the program grows and develops, the Upstate Medical University MPH program will continue to revise our vision, mission, goals and values statement to reflect the growth and strategic direction of the program.

B2. Graduation Rates

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

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

1) Graduation rate data for each degree in unit of accreditation.

Table B2-1 Students in MPH Degree, by Cohorts Entering Between 2014-2015 and 2018-19

Students in MPH Degree, by Cohorts Entering Between 2014-2015 and 2016-19						
*Maximum Time to						
Graduate: 5 Years						
	Cohort of	2014-15	2015-16	2016-17	2017-18	2018-19
	Students					
2014-2015	# Students	13				
	continuing at					
	beginning of this					
	school year (or #					
	entering for newest cohort)					
	newest conort)					
	# Students	0				
	withdrew,					
	dropped, etc.					
	# Students	0				
	graduated					
	Cumulative	0				
	graduation rate					
2015-16	# Students	13	22			
	continuing at					
	beginning of this					
	school year (or #					
	entering for					
	newest cohort)					
	# Students	0	1			
	withdrew,					
	dropped, etc.					
	# Students	7	1			
	graduated					
	Cumulative	54%	5%			
	graduation rate					

2016-2017	# Students continuing at beginning of this school year (or # entering for newest cohort)	6	19	19		
	# Students withdrew, dropped, etc.	0	1	0		
	# Students graduated	4	15	1		
	Cumulative graduation rate	85%	73%	5%		
2017-2018	# Students continuing at beginning of this school year (or # entering for newest cohort)	2	4	18	28	
	# Students withdrew, dropped, etc.	1	0	2	0	
	# Students graduated	1	3	12	0	
	Cumulative graduation rate	92%	86%	68%	0	
2018-2019	# Students continuing at beginning of this school year (or # entering for newest cohort)	0	1	4	28	17
	# Students withdrew, dropped, etc.	0	0	0	1	0
	# Students graduated	0	0	0	0	0
	Cumulative graduation rate	92%	86%	68%	0	0

Data on doctoral student progression in the format of Template B2-2.
 Not applicable.

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

The table presented above includes all students who enrolled in the Upstate Medical University MPH Program from the fall of 2014 until the fall of 2018. The Upstate Medical University MPH Program did not have concentrations until the fall of 2018, so all students followed a similar path towards graduation. In the fall of 2018, although there were two new concentrations created: Data and Analytics and Population Health for Clinicians. The Upstate Medical University MPH Program traditionally has a high graduation rate and this is reflected in the graduation rates shown for the two cohorts where a final cumulative graduation rate is listed.

Although the graduation rate for students entering the Upstate Medical University MPH Program in the fall of 2016 seems low (68%), this lower number reflects the fact that there are still students enrolled in the program who are part of that cohort, so graduation rates for that year should rise after they have completed their degrees. There is one student who is part of the 2016-2017 cohort who is listed as not active. At Upstate Medical University, students are listed as Not Active (NA) if they are not currently enrolled in classes, but they have not formally withdrawn or submitted a Leave of Absence form.

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

<u>Strengths</u>: The Upstate Medical University MPH Program has high graduation rates and the majority of students who enter the program are completing their degrees within the Maximum Time to Graduate of five years, which has been set by our program.

<u>Weaknesses</u>: The current system that we have for tracking graduation rates does not separate graduates by concentration. In the past, this has not been a problem because the Upstate Medical University MPH Program only had one concentration.

<u>Plans For Improvement</u>: Moving forward, the program will have to work with the Registrar to develop a plan to track each concentration separately so that we are able to tell whether or not there are differences in the graduation rates of the two concentrations that our program has. The Upstate Medical University MPH Program will also modify our own student database to include a field for noting which concentration each student was in.

B3. Post-Graduation Outcomes

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

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

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

Table B3-1 Post Graduate Outcomes

Post-Graduation Outcomes	2015 Number and percentage	2016 Number and percentage	20 N
Employed	54% (14)	63% (10)	4:
Continuing education/training (not employed)	42% (11)	31% (5)	52
Not seeking employment or not seeking additional education by choice	0% (0)	0% (0)	09
Actively seeking employment or enrollment in further education	4% (1)	6% (1)	79
Unknown	0% (0)	0% (0)	09
Total graduates (known + unknown)	26	16	

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.

The Upstate Medical University MPH Program has a very high percentage of students who, after graduation are either employed or are continuing on to higher education. Of the 69 students who graduated from the Upstate Medical University MPH between 2015 and 2017, 96% (66) are currently employed or pursuing higher education. This percentage well exceeds the program achievement rate criteria of 80% or greater employment or enrollment in further education within a year of graduating from the MPH program.

These high employment rates and percentage of students being accepted into higher education programs shows the great need for individuals with public health training in our community and shows the desirability of the graduates of our program both in the workforce and among other institutions for higher education.

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

<u>Strengths</u>: The Upstate Medical University MPH Program is producing highly qualified graduates who are very marketable in the workforce. Our program's students are also very desirable to institutes of higher education. This is demonstrated by our program's high employment rate and rate of students continuing on to higher education after graduation.

<u>Weaknesses</u>: Although the Upstate Medical University MPH Program does reach out to our alumni via survey and periodic email correspondence, we have struggled to keep close contact with graduates long term. This means that we do not have a complete list of whether students ended up completing another degree after they graduated or how long they remained employed for at their initial job.

<u>Plans for Improvement</u>: In the future, the Upstate Medical University MPH Program would like improve the ways in which we track our graduates and try to maintain communication with them as they move along in their careers. While this may be a challenge because it is sometimes difficult to be sure that we have up-to-date email addresses, our program could use other

methods of communication, such as telephone and US Postal Services. The program could also use other electronic measures, such as LinkedIn, which we have already begun to use informally.

The program also plans on continuing to strengthen our connections with organizations in our community. We believe that these connections will help us to connect our graduates with potential employers, which could make our employment rates even higher. Also, by building connections with potential employers, such as including them in our advisory board, our program will become even more aware of the qualities that employers are looking for in potential candidates, so that we are able to help our graduates develop these skills.

B4. Alumni Perceptions of Curricular Effectiveness

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

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

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

In the Fall of 2018, Upstate Medical University MPH Alumni from 2016, 2017, and 2018 were asked to complete a survey regarding the competencies that they had gained while enrolled in the program and their ability to apply these competencies after graduation. The majority of respondents reported that they had gained the competencies that the Upstate Medical University MPH Program had targeted and that they were able to apply the skills that they had gained to their current jobs. One participant reported, "The statement, "can...build coalition and partnerships for influencing public health outcomes...has been applied in the clinical setting to best serve patients needing social support and medical continuity of care after discharge from the hospital." Another participant stated, "I apply cultural awareness in my work with people with disability."

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

The 2018 Upstate Medical University MPH Alumni self-assessment survey was comprised of both 5-point Likert scale questions where participants were asked to rate their agreement with statements related to their acquisition of CEPH competencies and open-ended questions that asked participants to report on how they had applied the competencies to their work after graduation. A full overview of the findings from this survey can be found in section B4-2 of the ERF.

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

<u>Strengths</u>: The results from the alumni survey indicate that, in general, the Upstate Medical University MPH Program alumni are satisfied with the education that they received during their time in the program. They have gained valuable competencies and are able to apply these competencies to the jobs that they have taken after graduation.

<u>Weaknesses</u>: While the Upstate Medical University MPH Program does track our alumni we have not administered annual surveys. When we do survey the alumni, the response rates that we have are often very low.

<u>Plans for Improvement</u>: Moving forward, the Upstate Medical University MPH Program plans to conduct yearly surveys of our alumni so that we are regularly following up with them and making sure that we continue to receive their input about changes that should be made to the program. Additionally, we are exploring different methods for contacting alumni. During our last alumni survey, we found that a lot of the email addresses that we had on file were no longer valid. In the future, we plan to use other methods, such as US Postal Service and telephone, to contact alumni.

B5. Defining Evaluation Practices

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

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

Table B5-1 Program Evaluation Measures

Evaluation measures	Identify data source(s) and describe how raw data are analyzed and presented for decision making*	Responsibility for review
Goal Statement #1: EDUCATION	GOAL – Enable a diverse group of students develop the sk	ills necessary to be employed in the field of public health.
Percent of students who enroll in the MPH Program from diverse backgrounds. *Note: The Upstate Medical University MPH Program uses the definition of diversity used by Upstate Medical University as a whole. This definition of diversity includes the following "elements of diversity": race, ethnicity, gender, and socioeconomic status. **Currently our program tracks race and ethnicity, but moving forward starting in the 2019-2020 academic year, we plan on	This information is found in Banner, which is an institution-wide administrative data system used for educational purposes. The data are presented in Dean's Reports that are created every year.	1) Admissions Office; 2) Admissions Committee; 3) Evaluation and Accreditation Specialist
tracking gender and economic status of all of our students.		
Number of Medical Scholars admitted into the MPH Program	Upstate Medical University's Office of Admissions collects this information. Program within the Medical School, such as the MPH Program have the ability to	1) Upstate Medical University's Office of Admissions
*Note: The Medical Scholar Program is a program intended to provide students from historically disadvantaged and underrepresented groups with	request reports that outline the number of Medical Scholars that they have enrolled.	

the opportunity to gain the skills		
and experiences that they need		
in order to be successful in		
Medical School.		
Graduation rates for students	1) The Registrar's Office tracks student graduation rates	1) Registrar's Office; 2) Program Coordinator; 3) Program
from diverse backgrounds.	and gives this information to the program on a yearly	Director; 4) Department Chair
,	basis.; 2) The Program Coordinator and Director of the	, , ,
	MPH Program also track the graduation rates of all of	
	our students.	
Student perceptions of the	Each year, Upstate Medical University MPH Students	1) MPH Students; 2) Evaluation and Accreditation Specialist; 3)
program and it's educational	administer a student survey that asks students to	Program Faculty
offerings	evaluate the MPH Program. After the survey	
	questionnaire has been administered, students present	
	the data at a meeting of the faculty council.	
	Additionally, the program runs course evaluations every	
	semester. These evaluations ask students to evaluate	
	the courses that they have taken and their instructors.	
	The research and evaluation specialist monitors these	
	evaluations and reports back to faculty.	
Upstate Medical University MPH	The Upstate Medical University MPH Program tracks	1) Program Director; 2) Program Coordinator; 3) Evaluation and
Program Employment Rate	where its graduates go after graduation through two	Accreditation Specialist
	different measures: 1) All MPH students are also asked	
	to participate in an exit survey which asks them to	
	report their post-graduate plans; 2) During the alumni	
	survey, alumni are asked to report if they are currently	
	employed. If they are employed, alumni are then asked	
	to report whether or not they are working in a public	
	health related field. This information is reported to	
	accrediting bodies such as Middle States Commission on	
	Higher Education and CEPH and can be found on the	
	university's website.	

<u>Goal Statement #2</u>: RESEARCH GOAL – To advance public health knowledge by developing an active program of population-based health research and program evaluation.

Student participation in	The Upstate Medical University Program keeps a list of	1) Program Faculty; 2) Department Chair; 3) Research and
population-based health	program publications on file. This list contains both	Evaluation Specialist
research projects.	faculty publications and publications that students have	
	worked on as well.	
Faculty participation in public	The Upstate Medical University Program keeps a list of	1) Program Faculty; 2) Department Chair; 3) Research and
health-related research projects	program publications on file. This list contains both	Evaluation Specialist
	faculty publications and publications that students have	
	worked on as well. Faculty research projects are	
	highlighted in the department newsletter and	
	occasionally faculty will also present their research at	
	either the monthly department or program meetings.	
Student participation in public	The Upstate Medical University Program faculty track	1) Program Faculty
health-related program	student involvement in program evaluations and keep	
evaluations	documentation of their evolvement on file.	
Faculty participation in public	The Upstate Medical University Program faculty track	1) Program Faculty
health-related program	their involvement in program evaluations and keep	, ,
evaluations	documentation of these evaluations. Occasionally,	
	faculty will discuss these evaluations in the courses that	
	they teach and make presentations in the community.	
Amount of funding obtained for	The Department of Sponsored Programs at Upstate	1) Department of Sponsored Programs ; 2) Evaluation and
research and evaluation	Medical University tracks the amount of money that the	Accreditation Specialist
projects	MPH Program faculty brings in and will provide reports	
	to the program upon request.	
Goal Statement #3: SERVICE AND	OUTREACH GOAL - Develop community partnerships and	collaborative endeavors that contribute to public health
policies and practices.		
Establishment of a Community	Evidence of the establishment of the Community	1) Program Director; 2) Evaluation and Accreditation Specialist;
Advisory Board (CAB) that	Advisory Board (CAB) is documented through the	3) Program Coordinator
contains alumni, students, and	current list of CAB members. CAB meeting minutes will	
local public health practitioners.	also be collected and a record will be kept on file in the	
	department.	

Student participation in	The program collects attendance lists from each of the	1) Program Director; 2) Program Faculty; 3) PHIG Leadership; 4)
community service projects.	service projects that our students are involved in.	The Center for Civic Engagement
	Students are also encouraged to become involved with	
	service through the greater Upstate Medical University	
	community. MPH students can become involved in	
	community service projects that are taking place at	
	Upstate Medical University through the Center for Civic	
	Engagement and through the annual Upstate Day of	
	Service. The Center for Civic Engagement tracks the	
	students who participate in community service projects.	

^{*}Note: A final version of these measures must be approved by the Faculty Council.

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

The evaluation methods and measures described in the table above can be used to track the Upstate Medical University MPH Program's progress in advancing the field of public health (including instruction, scholarship and service) and promoting student success in several ways:

- 1) <u>Instruction</u>: Data collected to assess the progress towards achieving the program's educational goal (Goal #1) can help the program to determine if we are reaching our desired student population. If the program finds that we are not reaching our desired student population or that the students are not gaining the knowledge that we would like them to gain or becoming employed in the field of public health, then collecting data using the methods described above will allow the program to make changes to increase the program's effectiveness.
- 2) <u>Scholarship</u>: The evaluation methods and measures described in the table above promote scholarship by encouraging both students and faculty to engage in research and evaluation projects that advance the field of public health. Specifically, the measures listed under Goal Statement #2 track both student and faculty participation in research and evaluation activities. Through their participation in research and evaluation, students provide valuable insights for the public health community, and gain knowledge from the professors with whom they collaborate and learn about the research process. By tracking student and faculty projects, the Upstate Medical University MPH program can show what its students and faculty are contributing to the public health community as a whole.
- 3) Service: The advancement of the field of public health through service is promoted by the evaluation methods and measures described in the table above through the documentation of student participation in community service projects. Every semester, the Public Health Interest Group (PHIG) Participates in walks which raise money for important causes in the community. PHIG students also volunteer in the community by doing things like conducting public health training at a local community center.
- 4) Promoting Student Success: Student Success is promoted in the Upstate Medical University MPH Program through these measures because by tracking the number of students from diverse backgrounds who enroll in the program and their graduation rate. Through these measures, program leadership is able to identify barriers that might prevent students from being successful. Then the program can work with students to try to remove these barriers so that all students are able to complete their degree. The measures outlined in the table above also track student and faculty collaborative research projects which can be used to help students gain the skills that they may need to be successful later on in their careers. Finally, by tracking student employment, the Upstate Medical University Program is able to: 1) Show that our students are having success finding jobs in the field of public health after they graduate; and 2) Make adjustments to our program, if needed, so that more students who graduate from our program are able to be successful at finding jobs in the field of public health after they graduate.
- 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.

Evidence of implementation of the plan described in Template B5-1 can be found in section B5-3 of the ERF. This evidence includes:

- Student Research- A list of student publications.
- Student Research Examples-Two examples of projects that students have worked on.

- Evaluation Projects-Notes and a report from an evaluation that both faculty and students were involved in.
- Course Evaluations- Example Course Evaluation Data
- Student-Run Survey- Sample of the student-led student survey.
- Student Service Record- Documentation of the Upstate Medical University MPH Program students' service.
- Student Demographics- A table that shows the racial breakdown of our students from 2016 through 2018 and the Number of Med Scholars that we have enrolled from 2016 until 2018.
- Faculty Research- A list of faculty publications.
- Student/Faculty Involvement in Program Evaluation- Meeting notes and Final Grant Proposal from an evaluation project that students and faculty were involved with.
- Community Advisory Board Member List
- 4) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

<u>Strengths</u>: The evaluation plan that we have created aligns with the overall goals of the Upstate Medical University MPH Program. They are very straightforward and it is clear who is responsible for collecting the information needed to measure the program's progress.

<u>Weaknesses</u>: Currently, the program is reviewing its evaluation measures to make sure that they align with the program's mission and vision moving forward.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program has a history of conducting through evaluations within our department. We have selected measures that we believe accurately measure the program and our students' success. Moving forward, we will continue to use the evaluation measures outlined in the table above and will adopt new measures, if needed, based on CAB input and our strategic planning process.

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

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

 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.

2)

 Evaluation Data Source (Shown in Table B5-1): Upstate Medical University MPH Students Survey

Challenge identified: The data collected as part of the student survey indicated that the students were having difficulty applying the new skills and knowledge that they were learning in the Environmental Health course, MPHP 603.

Analysis: The faculty met to review the course. It was determined that the way that the course was being taught was not effective and not producing the desired student learning outcomes. The course was revised and a new faculty member was assigned to teach this course.

Groups or Individuals Responsible for Determining the Planned Change: 1) Curriculum Committee; 2) Faculty Council; 3) Course Instructor

Intervention/Solution: The course was restructured to better serve the needs of the students in the Upstate Medical University MPH Program. Also a new course director was assigned to the course.

A new syllabus was created and assignments were revised to align with the new 2016 CEPH competencies. These assignments will be used to measure student learning in the course

• Evaluation Data Source (Shown in Table B5-1): 1) Upstate Medical University MPH Students Survey; and 2) Course Evaluations

Challenge identified: Student feedback obtained via course evaluations and several years of data collected during the annual student run survey indicated that students were not getting the amount of face-to-face contact with peers during the Applied Practice Experience that they wanted. Additionally, they found it challenging to obtain their own Applied Practice Experience sites and were overwhelmed by the amount of paperwork that they had to complete for the field placement. Students were also having difficulty completing the course assignments and it was unclear if these assignments were actually measuring the students' competencies and their ability to use the skills that they had gained in class at their Applied Practice Experience site.

Analysis: The faculty met to review the structure of the Applied Practice Experience course. During this meeting, the faculty determined that the assessments were not assessing the students' use of CEPH competencies at their Applied Practice Experience sites

Intervention/Solution: After reviewing the course, the course syllabus was revised and measures were put in place to insure that students were getting more face-to face interactions and that they were getting more assistance obtaining a Applied Practice Experience site.

The faculty determined that the assessments were not assessing the students' use of course competencies at their Applied Practice Experience sites. New assignments were developed to better measure student learning outcomes.

The new course structure will be reviewed after it has been implemented in the 2017-2018 academic year. During this evaluation, the Upstate Medical University MPH Program will gather feedback from students and Applied Practice Experience sites. A review of the course syllabus will also be conducted.

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

<u>Strengths</u>: The Upstate Medical University MPH Program does an excellent job of listening to student feedback and using that feedback to make changes within the program.

<u>Weaknesses</u>: Currently, the Upstate Medical University MPH Program relies heavily on one evaluation measure: Student survey questionnaires and course evaluations. While it is important to gather information from the students, gathering data from multiple sources would help to make our findings more robust.

<u>Plans for Improvement</u>: Members of the Upstate Medical University MPH Program faculty and staff have begun working with the university's Student Learning Outcome Committee (SLOC) to create more effective measures to assess student learning and document the program's use of these measures. By working with SLOC the Upstate Medical University MPH Program hopes to create evaluation methods that accurately measure student learning and align with the measures that are currently being used by the rest of the university.

C1. Fiscal Resources

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

- 1) Describe the program's budget processes, including all sources of funding. This description addresses the following, as applicable:
 - a) Briefly describe how the program pays for faculty salaries. If this varies by individual or appointment type, indicate this and provide examples. If faculty salaries are paid by an entity other than the program (such as a department or college), explain.

All faculty salaries are currently paid for by Upstate Medical University, as an allocation from the Dean of the College of Medicine. Any base salary adjustments are made through union contract negotiations. Additionally, the department chair has individual discretion to supplement individual faculty or staff salaries from departmental reserves, based upon extended roles or duties.

Departmental reserves could also be utilized to hire adjunct or term faculty. At present, however, this is not necessary, other than the employment via departmental funds of a (non-faculty) teaching post-doctoral associate, who assists with biostatistics grading and recitation, as well as research tasks within the department.

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

As the program is situated within the Department of Public Health & Preventive Medicine, which itself is a department within the College of Medicine at Upstate Medical University, the primary pathway to request new staff occurs as a request from the Department Chair to the Dean of the College of Medicine, with a justification for the request.

Additionally, the Department holds roughly \$500,400 of cash reserves and \$40,700 in annual financial support, for non-personnel expenses. Staffing needs for temporary positions, student assistants, or post-doctoral associates are occasionally supported directly from departmental funds.

In addition to paid positions, the Department and the Upstate Medical University MPH program will offer voluntary or joint faculty appointments to individuals working with Upstate's public health faculty or students. These appointments occur largely at the discretion of the Department Chair, with sign-off by the Dean of the College of Medicine.

At present, we presently have an opening for an Environmental Epidemiologist who is focused on building a research program. This is a direct response to a large scale SUNY "Empire Innovation Program" grant to build a Center for Environmental Health & Medicine. Similar endeavors are underway to expand into new areas, such as a joint recruitment with the Cancer Center at Upstate. In short, new faculty will be requested and obtained in direct response to large scale and/or joint research endeavors, typically connected to the existence or expectation of extramural funding.

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

We define our operational costs as follows:

Salary and Personnel: As described previously, most faculty and staff salaries are funded by SUNY, as public state lines. The exception is a single post-doctoral associate. The post-doctoral associate is funded through the Department Development Fund (DDF)>

Physical Structure and utilities: Similar to faculty and staff salaries, our physical structure is provided by the university.

Memberships and professional fees: The most costly membership for the program is ASPPH, followed by CEPH accreditation fees, and then departmental or individual professional memberships. The following memberships and fees are paid:

- ASPPH Paid annually. This is included in OTPS funding from the College of Medicine.
- CEPH Paid annually. This is included in OTPS funding from the College of Medicine.
- APTR Departmental membership paid from department reserves, annually
- Individual memberships paid by department or by individual faculty members, based upon available funds, needs, and negotiation.

Office Supplies, software, computers, etc.: Basic office productivity (i.e. Microsoft Office, Adobe) software is purchased with computers. SUNY has access to student licenses for SPSS. Other software is purchased by the department.

Computers, office supplies, software, etc. are typically paid for from one of the following sources:

Annual state allocation for OTPS costs: \$40,700

• Annual Research Foundation allocation: \$10,000

- DDF and FDF reserves
- Upstate or Medical Alumni Foundations

We fund these operational costs via state-funded faculty salary support and an non-personnel allocations through the College of Medicine. Any costs that go above the allocated salary and non-personnel support are funded from departmental reserves. This money is generated from faculty working on projects outside of the department.

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

At this time, the department does not offer any scholarships, although discussions are underway to develop scholarship opportunities in the future. Student support for conference travel, research support, and other student activities comes from departmental reserves or foundation funds. These funds are described further in the next subsection.

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

Faculty development expenses are supported through several sources:

- the Department Development Fund, or DDF. This source of funding is allocated to the department based upon faculty sale of service on grants and contracts. These funds may be used for travel, hiring research assistants, supplies or software, etc.
- Faculty Development Funds, or FDF. Each faculty member who participates in extramurally-funded grant or contract activity receives a portion of their sale-ofservice funds into an account for their use. These funds are similar to the DDF, but are managed by the individual faculty member.
- The Public Health & Preventive Medicine Fund and the Dracker Fund for Public Health Education, composed of donor-supplied funds housed at the Upstate Foundation. These funds are fairly flexible, with the Dracker Fund specified for projects that benefit students.
- State Other-than-personnel-services (OTPS) or Research Foundation funds, allocated on an annual basis to the department.
- Individual sponsored program grants or contracts, as applicable.

If there is a project or service opportunity that requires funds, and the individual faculty member has neither enough FDF or appropriate sponsored program funding to support the project, then the faculty member asks the Department Chair for funding if they would like to receive money from one of the other sources.

Additionally, the program supports faculty extramural service by providing travel funding so that they are able to participate in conferences and activities associated with their membership in Public Health organizations and societies.

Examples of faculty projects that are completed outside of the department that contribute to the Department Development Fund (DDF) are listed below.

The department chair, Dr. Morley, currently has 10% of his effort supported on extramurally-funded grants, including a cancer screening & prevention project on which Dr. Morley is the PI, and funded by the New York State Department of Health, out of re-granted funds that originate with the CDC; and another CDC-funded project that supports a Disabilities Research and Dissemination Center, with a subaward to Upstate Medical University, on which Dr. Morley is an investigator. Other examples include the HRSA-funded Healthy Start grant received by the Onondaga County Health Department, on which Dr. Wojtowycz serves as the evaluation director. Dr. Wang also has roughly 15%-20% of his effort supported on various projects funded to other departments. In each case (and others), the salary support flows back to the department DDF. Additionally, state-funded staff that contribute effort on grants also have their effort reimbursed from grants to the DDF. In March, 2019, the DDF realized an income of \$11,625.25; this is fairly representative of the cash flow into the DDF on any given month.

d) In general terms, describe how the program requests and/or obtains additional funds for operational costs, student support and faculty development expenses. Internally, the Department Chair is the direct liaison with the Dean of the College of Medicine, and requests for additional funding flow from the chair to the dean. At present, the Department has enough funds to cover its regular expenses,

In addition to College of Medicine (state or other) funding or in-kind requests, the Upstate Foundation holds several funds which benefit the Department and/or program. In this case, the Department Chair will negotiate directly with the Executive Director of the Upstate Foundation for access to new funds. This was done, for example, in 2016, when the incoming

chair sought to improve the Public Health Grand Rounds series. The Executive Director and Department Chair negotiated the use of a new source of support (The Van Duyn Fund), which has supported all grand round costs since the 2017-18 academic year. Another way funds were made available was through a reorganization of the Department of Public Health & Preventive Medicine fund, which was previously restricted to purposes directly related to student benefit (at the request of the fund's largest donor). This fund was split, so that the donor-advised (Dracker) fund now continues to benefit students directly, and the Department fund is now restricted only to its use "to the benefit of the Department," While not new funding, this re-organization effectively makes more of the funds that exist, available for more purposes.

Finally, grant revenue may directly fund projects. In addition to direct project costs, the sale of faculty and staff time to grant effort is channeled back to the department, in the for of "Income Fund Reimbursable" (IFR) mechanism. The IFR mechanism allows the department to effectively transfer state-allocated effort onto sponsored programs, and to be reimbursed for that transfer of effort. While the reimbursable funds often are used to backstop the loss of faculty effort (such as the hiring of research assistants), this nevertheless adds funds to the Departmental Development Fund.

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

All of the tuition and fees paid by students are returned to Upstate Medical University. Tuition and fees are then bundled into the overall University budget, which is reflected in the support received by the department as described above. Every year, the program is granted an allocation of funds from the University. Departments in the College of Medicine, including PHPM, operate on a primarily fixed budget, in the form of stable, state-funded positions, and stable funds for non-personnel costs. The program's funding is not directly related to annual collection of tuition and fees.

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

Indirect costs are typically retained by the Dean of the College of Medicine. However, grant and contract revenue is returned to the department via the "Income Fund Reimbursable (IFR)" mechanism. The IFR mechanism is a sale-of-service mechanism, whereby the department allocates effort to a grant, and the effort is reimbursed to the College of Medicine, the Department, and the faculty member. Specifically, when faculty expend effort on grants and contracts, fourteen percent of the money that is received goes to the Dean's office, eighty percent of the funds go into the Department Development Fund, and six percent will be placed into the Faculty Development Fund.

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

Not Applicable.

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

Table C1-2 Sources of Funds and Expenditures by Major Category, 2013-2018

Sources of Funds and Expenditures by Major Category, 2013 to 2018						
	2013 - 2014	2014 - 2015	2015 - 2016	2016 - 2017	2017 - 2018	
Source of Funds				-		
Tuition & Fees	351,596.00	375,941.00	420,784.00	351,963.40	500,085.30	
State Appropriation	246,201.93	378,357.00	394,696.38	395,486.99	444,902.21	
University Funds	407,065.34	408,583.00	395,402.29	427,843.51	294,814.88	
Grants/Contracts	64,385.00	39,213.00	39,213.00	35,713.00	25,000.00	
Other: Endowment - Lerner Center	70,683.00	61,401.00	66,364.00	41,777.00	49,934.64	
Other: Student Support Upstate Medical Unversity	14,355.09	4,218.00	4,390.44	2,974.50	13,554.58	
Total	1,154,286.36	1,267,713.00	1,320,850.11	1,255,758.40	1,328,291.61	
Expenditures						
Faculty Salaries & Benefits	883,737.96	1,032,241.00	1,071,390.65	1,034,853.51	1,106,644.81	
Staff Salaries & Benefits	128,250.83	88,534.00	102,923.95	109,251.10	89,160.63	
Operations	1,002.74	2,838.00	541.87	1,983.84	664.71	
Travel	7,393.20	9,573.00	8,533.48	10,926.10	7,257.02	
Student Support	9,046.70	65,637.00	72,586.95	47,506.44	6,775.80	
Other: Accreditation	18,826.46	7,350.00	4,900.00	5,250.00	5,625.00	
Other: Memberships	2,855.00	4,500.00	1,390.00	0.00	0.00	
Other: Equipment and Software	4,750.28	2,321.00	2,111.21	3,023.41	5,244.00	
Other: Contribution to Overhead	98,423.19	54,719.00	56,472.00	42,964.00	106,919.64	
Total	1,154,286.36	1,267,713.00	1,320,850.11	1,255,758.40	1,328,291.61	

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

Not Applicable.

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

Strengths: The Upstate Medical University MPH Program has a strong financial backing and is supported by several different funding sources, such as University Funds, Grants, Student Tuition, state funding through SUNY, and money through the Upstate foundation philanthropy.

<u>Weaknesses</u>: At this time, we have not identified new ways for our program to obtain additional funds for operational costs, student support and faculty development expenses.

<u>Plans for Improvement</u>: At this time, the Upstate Medical MPH Program is fully supported. Our program's primary goal is to increase enrollment both for financial reasons as well as to strengthen the program and its diversity.

C2. Faculty Resources

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

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

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

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

Table C2-1

Table C2-1				
	FIR	RST DEGREE LE	VEL	
CONCENTRATION	PIF 1*	PIF 2*	FACULTY 3^	ADDITIONAL FACULTY
Data and Analytics MPH	Margaret Formica, PhD 1.0 FTE	Telisa Stewart, DrPH 1.0 FTE	Donald Cibula, PhD 1.0 FTE	PIF: 4 Non-PIF: 0
Population Health for Clinicians MPH	Gary Brooks, DrPH 1.0 FTE	Christopher Morley, PhD 0.75 FTE	Martha Wojtowycz, PhD 0.75 FTE	PIF: 2 Non-PIF: 0

TOTALS:	T	O.	T	4	LS	:
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Named PIF	6
Total PIF	10
Non-PIF	0

^{*}The Upstate Medical University MPH Program lists 10 total PIF because Dr. Gary Brooks and Dr. Telisa Stewart are counted twice.

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

When calculating the FTE for faculty in the table above, the program looked at the percent effort that each faculty member gave to teaching, research, and service related to the MPH program. We also looked at the amount of time that each faculty member devoted to program related tasks and whether they a joint appointment in another department within the university. For example, Dr. Morley and Dr. Wojtowycz are listed as 0.75 FTE because Dr. Morley also holds an appointment in the Department of Family Medicine and in the Department of Psychiatry & Behavioral Sciences, and Dr. Wojtowycz has an appointment in the Department of Obstetrics and Gynecology.

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

In addition to the methods that we used when calculating FTE that are described in the section above, the Upstate Medical University MPH program also considers faculty members' areas of expertise when deciding what concentration they should be a part of. For example, Dr. Brooks is a Physical Therapist by training, so he was a natural fit for the Population Health for Clinicians concentration, while Dr. Cibula is a statistician and fit well with the Data and Analytics concentration.

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

Table C2-4. Faculty regularly involved in advising, mentoring and the integrative experience

G	General advising & career counseling							
Degree level	Average	Min	Max					
Master's	6	1	10					

	Advising in MPH integrative experience					
Average		Min	Max			
	4	1	6			

- 5) Quantitative data on student perceptions of the following for the most recent year:
 - a. Class size and its relation to quality of learning (eg, The class size was conducive to my learning)

In the Fall of 2018, current students in the Upstate Medical University MPH program were asked to rate their agreement with the following statement, "class sizes helped me to learn more effectively", on a 4-point Likert scale with 4 being Strongly Agree and 1 being Strongly Disagree. The students' ratings are presented in the table below.

Table C2-5a Student Perceptions of Class Size and Student Learning

	Strongly Agree	Agree	Disagree	Strongly Disagree	TOTAL RESPONDENTS-
Class	33.33%	57.14%	9.52%	0	21
sizes	(7)	(12)	(2)		
helped me					
to learn					
more					
effectively.					

Average Rating: 3.23

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

During the Fall 2018 semester, students were also asked to rate their satisfaction with faculty availability on a 4-point likert scale with 4 being Very Satisfied and 1 being Very Dissatisfied. The students' ratings are presented in the table below.

Table C2-5b Student Perceptions of Faculty Availability

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	TOTAL RESPONDENTS-
Faculty Availability	42.86% (9)	52.38% (11)	9.52% (1)	0	21

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

When asked about the strengths Upstate Medical University MPH Program, our students report that one of our major strengths is our faculty and staff. In our most recent student survey, students reported that faculty were very supportive and knowledgeable about the topics that they taught. Students found that faculty were readily available and equipped with the knowledge and skill set to answer any questions that students might have. The faculty were also very flexible when it came time to schedule meetings with students, which was particularly important to students who were working in addition to going to school full-time.

The students in the Upstate Medical University MPH Program also listed class size as one of the program's strengths. The small class sizes in our program allowed students to develop relationships with faculty members. They also felt more supported and as though they had more one-on-one attention because of the small number of students in the classes in which they were enrolled.

Raw data for the open ended questions regarding the strengths and weaknesses of the Upstate Medical University MPH Program from both the 2018 student-led student survey and the 2018 student survey conducted by the Upstate Medical University MPH Program faculty can be found in C2-6 of the ERF.

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

<u>Strengths</u>: The faculty of the Upstate Medical University MPH Program have a wide range of knowledge and background experiences, from working as practitioners in the field of Public Health to conducting Public Health research, which enables them to pass on a wide scope of knowledge to the students in our program. The Upstate Medical University MPH Program is relatively small, which allows faculty to give individualized support and attention to the students in the program. Overall, the students in the Upstate Medical University MPH Program appear to be happy with the availability of the faculty and their class sizes and believe that it is beneficial to their learning.

<u>Weaknesses</u>: At this time, the Upstate Medical University MPH program has just begun to ask students their perceptions of staff availability and class size on the annual student survey questionnaire, so the program only has one year's worth of data to base to draw any conclusions from.

<u>Plans for Improvement</u>: In the future, the Upstate Medical University MPH Program would like to continue to collect data from our students every year so that we have a more robust data set to draw conclusions regarding the status of our program on. Using these data should help us to create a stronger program that has the goals and needs of our students in mind.

C3. Staff and Other Personnel Resources

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

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

Table C3-1 Upstate Medical University MPH Program Staff

Role/function	FTE
MPH Program Coordinator	1.00
Evaluation and Accreditation Specialist*	1.00
Department Administrator/Special Projects Coordinator*	1.00
Administrative Assistant primarily dedicated to the Upstate Medical	
University MPH Program*	1.00
Departmental Financial Administrator*	1.00

^{*}Works within the entire Department of Public Health and Preventive Medicine.

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

In addition to the staff support listed in section C3-1, the Upstate Medical University MPH Program has work study students who the department hires each year to help out with office work in the department. A Post-Doctoral Associate is also on staff to assist with teaching and research tasks.

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

The Upstate Medical University MPH Program currently has sufficient staff to support its mission and ensure that day-to-day tasks are running smoothly. We are a small program, so fewer individuals are necessary to make sure that all program tasks are being completed.

Earlier in the year, it was noted that there was a need for someone to be on staff who could focus on evaluation and accreditation activities within the program. After seeing this need, the department decided to hire a full-time Evaluation and Accreditation Specialist. The Upstate Medical University MPH Program recently hired a new MPH Program Coordinator to fill the vacancy left by the old coordinator who moved on to a new role within the university.

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

<u>Strengths</u>: We have a strong group of individuals on staff who have the skill sets needed to ensure that the program and the department continue to run smoothly.

<u>Weaknesses</u>: Many of the support staff are very new to the program. The Evaluation and Accreditation Specialist has worked for the program for six months and is still learning all of the program logistics. The MPH Program Coordinator has also just been hired and is in the process of learning about her duties. While these staff members are new, they are being supported by many faculty who have been with the program for many years and have been providing the new staff members with the tools and information to successfully perform their duties.

<u>Plans for Improvement</u>: Current program staff is working together to make sure that the new Program Coordinator has the information that she needs to perform her job responsibilities effectively. Moving forward, the program will conduct periodic program evaluations to determine if the program is still running effectively or if additional staffing is needed to full any staffing gaps that arise.

C4. Physical Resources

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

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

The program has two main suites for faculty offices, which are located in Weiskotten Hall. The suites are in close proximity to the Upstate Medical University MPH communal break room and a conference room. The conference room is equipped with computer, internet access, projector, and phone conferencing.

Staff office space

The program's two main office suites in Weiskotten Hall include administrative space and both faculty and student offices. These spaces are equipped with computers and have access to printers which can be used for printing, faxing, copying, and scanning.

Classrooms

Classrooms, auditoriums, and conference rooms are available for program use in the New Academic Building (NAB), Weiskotten Hall, and the Setnor Academic Building. In the Setnor Academic Building, students have access to state-of-the-art computers, internet access, TV/DVD players, multi-media projectors, and video conferencing (SKYPE). Weiskotten Hall has classrooms equipped with projectors, computers, and internet access. Both buildings have SMART classrooms. The New Academic Building (NAB) contains a large classroom on the fourth floor that can either be used as one classroom and hold 349 students, or divided into one medium sized classroom, with a maximum capacity of 200 students and two smaller classroom. Other classroom space is also available on the lower floors of the New Academic Building (NAB). These classrooms can hold up to 40 students each. All of the classrooms contain teaching stations that hold computers (Mac and PC in the classroom on the fourth floor and only a PC in the classrooms on the lower floors.), document cameras, and a video conferencing unit. The classrooms on the lower floors also contain 4 small group collaboration monitors.

Shared student space

Students have access to several student lounges located in both Weiskotten Hall and Setnor Academic Building. Additionally, students are able to use the Upstate Medical University MPH communal break room and a conference room, which are both located on the 2nd floor of Weiskotten Hall.

• Laboratories, if applicable to public health degree program offerings

Currently, the Upstate Medical University MPH Program does not have or require laboratory space.

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

When the Upstate Medical University MPH program started, there was no allocated program space specifically for students and faculty. The faculty were located in three different buildings;

students had no program-related meeting or workspace. The program director secured newly renovated space for the program within the Upstate Medical University complex.

Today, the program has two office suits that contain sufficient office space for all of our faculty. These suites also have administrative space for the MPH Program Coordinator, Department Administrator/Special Projects Coordinator, and our Administrative Assistant. There is also office space available for the Departmental Financial Administrator, Evaluation and Accreditation Specialist, and the Post-Doc Researcher.

Upstate Medical University MPH students are able to use the communal break room and conference room, in addition to the study space available in the Upstate Medical University Library. Overall, students report that they are satisfied with the learning space that they have available to them.

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

<u>Strengths</u>: The University has ample resources to support student and faculty needs. The program has dedicated space for both students, faculty, and staff to work, learn, and engage with one another.

<u>Weaknesses</u>: The Upstate Medical University MPH Program currently has all of the physical resources that it needs.

<u>Plans for Improvement</u>: No improvements need to be made at this time. In the future, if more space is needed, the program has the ability to request access to additional space on the Upstate Medical University campus.

C5. Information and Technology Resources

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

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

Students, faculty, and staff have access to library facilities at Upstate Medical University. During orientation, the university's libraries provide training on the use of library facilities to all MPH students.

Upstate Medical University Health Sciences Library

The library at Upstate Medical University supports teaching and research activities. The library also serves the health information needs of both the general public and health care professionals throughout Central New York. The staff is available for training on the use of a variety of search sites and software programs upon request.

The Upstate Medical University library has jointly created a pathfinder for local public health resources with the SU Bird Library. In addition, the library currently subscribes to 66% of the journals on the core journal list of the MLA Public Health/Health Administrations Core Public Health Journal List and owns 62% of the essential purchase titles from Doody's Core Title List of Books on the subject areas pertinent to public health. The library's collection numbers over 216,000 print volumes and 2,200 rare books. The library subscribes to over 70 databases and 2,600 full-text electronic journals and textbooks.

The library provides web access to many specialized online databases, full-text journals, and e-books without charge. The available database selection is extensive and broad-based to permit searches for information on a wide variety of subject requests.

Hours of Service: The library hours of operations include Monday through Thursday from 8am–1 am, Friday from 8am–9 pm, Saturday from 10am–9 pm, and Sunday from 11 am–1 am. Students and faculty can connect to the library from off-campus sites and use the online resources for free.

Additional Services

Reference librarians provide assistance to our Upstate Medical University MPH faculty, staff, and students.

- Research consultations are available for assistance with research projects.
- **Library classes and trainings** are available to faculty and students. Faculty can create a customized library training session or class to meet their needs. Students, for example, are often encouraged to seek training on how to use RefWorks—an online research management, writing, and collaboration tool—among other resources.
- Library tours are provided to orient faculty and staff.
- House calls are available for the department. The librarian comes directly to the department to
 provide assistance.
- Library liaison is assigned to the department as a direct line to customized library services.
- Literature searches of the biomedical and public health literature are normally ready within 24
 hours of a faculty request. Students requesting a search will also receive training on how to search
 for their desired topic.

Citation Tools and Writing Guides

The library also provides a plethora of tools and guides for creating citations and bibliographies, formatting papers, and writing. Refworks, American Psychological Association (APA) style, and the Modern Language Association (MLA) are supported at the library and at the department level.

Document Delivery

The library's Document Delivery Department will order materials (articles, books, videos, and more) from other libraries through the Interlibrary Loan (ILLiad) system.

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

All MPH Students in the Upstate Medical University MPH Program are required to own their own computer.

At this time, the following software resources are available to the students in our program:

- SPSS
- 2) MS Office (MS Word, MS PowerPoint, and MS Excel)
- 3) ArcGIS

Students also have access to the following Computer lab Resources:

Health Science Library

General Floor: At Upstate Medical University, computers (PC and MAC) are available during all library hours of operation in both the main library, a computer lab, and three computer classrooms. On the first floor of the library in the Reference Area, ten computers are intended primarily for research in health, public health, and medicine. On the second floor of the library, a total of 77 computers are available throughout the learning center. Six of the computers are equipped with scanners to enable the patrons to create PDF documents. In addition, three computer classrooms are available to the MPH Program.

Dr. John Bernard Henry Microcomputer Center: The computing center, located on the second floor in the Health Sciences Library, consists of one open work area and two computer classrooms. The open computing area contains 26 Windows PCs and 8 iMacs.

Room 220 is a 15-seat computer classroom with a projector and a teaching station, and Room 222C is a 24-seat computer classroom with a projector and a teaching station. Printing is available in both rooms on a pay-for-print system. All computers have SPSS. Both black-and-white and color printers are available on the pay-for-print system. These workstations contain six flatbed scanners and one slide scanner. Computers with scanners have Adobe Acrobat Professional and Photoshop installed. Access to this area is available during library hours via swipe card.

I-Lab

The lab contains 32 Windows PCs for regular use and 1 Windows PC as a presentation station. Printing is available on the pay-for-print system, with paper provided. Access to this lab is available 24/7 via swipe card.

The Campus Activity Building (CAB):

The Campus Activity Building (CAB) has a computer lab located in the upper basement of the CAB. This lab consists of five Windows PCs.

Additionally, Upstate Medical University students are eligible to take advantage of substantial savings on popular software titles, such as Microsoft, Adobe, SPSS, Quark, and Parallels, and on computer hardware products, such as Dell and HP.

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

At this time, the following hardware and software resources are available to the faculty in our department:

- 1) SPSS
- 2) Microsoft Windows and/or Mac Computers
- 3) MS Office (MS Word, MS PowerPoint, and MS Excel)
- 4) SAS
- 5) NVIVO
- 6) Adobe Acrobat
- 7) ArcGIS

Faculty can also request to have new hardware and software purchased for them as needed. Upstate Medical University faculty and staff are also eligible to take advantage of substantial savings on popular software titles, such as Microsoft, Adobe, SPSS, Quark, and Parallels, and on computer hardware products, such as Dell and HP.

· technical assistance available for students and faculty

Academic Computing provided through the Office of Information Management and Technology (IMT) at Upstate Medical University supports students, faculty, and staff in the use of computer resources on campus. Access and assistance are provided for a range of student needs including installation of campus antivirus software and help with connection to the campus wireless network. IMT runs a helpdesk for students, faculty, and staff for all computer related services at Upstate Medical University. Faculty, staff, and Teaching Assistants (TAs) are also available to help students with technology issues that they might encounter while working on their coursework.

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

Our program believes that the information and technology resources that we have available to our faculty, staff, and students are sufficient. Students in the Upstate Medical University MPH Program have access a wide variety of information and technology resources and support to enable them to be successful in the program and in the research that they would be interested in conducting. Faculty and staff also have access to technology resources that help them both in the classroom and while conducting their research.

The Office of Information Management and Technology (IMT) at Upstate Medical University is very responsive to fulfilling the computing needs of faculty, staff, and students in the MPH program. Students, faculty, and staff are able to contact the helpdesk and can expect a quick and thorough response.

Additionally, while they are on campus, faculty, staff, and students can use the computers and computer programs in one of the computer labs or library so that they can use software that they might not have on their personal computer.

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

<u>Strengths</u>: Upstate Medical University has a wide variety of information and technology resources that are available to faculty, staff, and students. IMT is also a very strong support for students, faculty, and staff to go to with any questions that they might have.

<u>Weaknesses</u>: At this time, the program is satisfied with the information and technology resources that are available at Upstate Medical University and cannot identify any weaknesses.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program leadership will periodically survey faculty, staff, and students to determine whether any new technology resources or programs are needed to help facilitate research and student learning. New technology resources and programs will be purchased by the department based on the needs that have been identified.

D1. MPH & DrPH Foundational Public Health Knowledge

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

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

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

Table D1-1 Content Coverage for MPH

Content Coverage for MPH (SPH and PHP)	
Content	Course number(s) & name(s) or other educational requirements
Explain public health history, philosophy and values	MPHP 606: Public Health Policy; MPHP 607: Public Health Administration; MPHP 689: Advanced Qualitative Methods
2. Identify the core functions of public health and the 10 Essential Services*	MPHP 607: Public Health Administration
3. Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health	MPHP 657: Public Health Research Methods; MPHP 689: Advanced Qualitative Methods; MPHP 660: Program Planning and Evaluation
4. List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program	MPHP 601: Principles of Epidemiology
5. Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.	MPHP 601: Principles of Epidemiology; MPHP 660: Program Planning and Evaluation
Explain the critical importance of evidence in advancing public health knowledge	MPHP 601: Principles of Epidemiology; MPHP 660: Program Planning and Evaluation; MPHP 603: Principles of Environmental Health; MPHP 606: Public Health Policy
7. Explain effects of environmental factors on a population's health	MPHP 603: Principles of Environmental Health
8. Explain biological and genetic factors that affect a population's health	MPHP 601: Principles of Epidemiology; MPHP 603: Principles of Environmental Health
Explain behavioral and psychological factors that affect a population's health	MPHP 604: Social and Behavioral Dimensions of Health; MPHP 603: Principles of Environmental Health; MPHP 660: Program Planning and Evaluation
10. Explain the social, political and economic determinants of health and how they contribute to population health and health inequities	MPHP 606: Public Health Policy; MPHP 604: Social and Behavioral Dimensions of Health; MPHP 603: Principles of Environmental Health; MPHP 660: Program Planning and Evaluation
11. Explain how globalization affects global burdens of disease	MPHP 603: Principles of Environmental Health
12. Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health)	MPHP 603: Principles of Environmental Health

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

Documentation for each course can be found in section D1-2 of the ERF and is separated by course.

Upstate Medical University MPH Program admissions requirements can be found at the following link:

http://www.upstate.edu/cnymph/academic/mph_degree/admissions.php

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

<u>Strengths</u>: As noted in the table above, the Upstate Medical University MPH Program covers all of the core foundational knowledge areas in the courses that are offered.

<u>Weaknesses</u>: In general, each content area is only covered by one or two courses. The Upstate Medical University MPH Program is working to create a more integrated curriculum where content areas are addressed in multiple classes throughout the course of the program.

<u>Plans for Improvement</u>: As the Upstate Medical University MPH Program shifts from being a dual-partner program to a standalone program, it will continue to evaluate its courses and make the changes necessary to promote student learning. One way to do this is by making sure that core content is presented in multiple courses offered by the program.

D2. MPH Foundational Competencies

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

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

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

Table D2-1a Requirements for MPH degree, Data and Analytics Concentration

	MPH degree, Data and Analytics Concentration	
Course number	Course name*	Credits (if applicable)
MPHP 601	Principles of Epidemiology	3.0
MPHP 602	Principles of Biostatistics	3.0
MPHP 603	Principles of Environmental Health	3.0
MPHP 604	Social and Behavioral Dimensions of Health	3.0
MPHP 606	Public Health Policy	3.0
MPHP 607	Public Health Administration	3.0
MPHP 657	Public Health Research Methods	3.0
MPHP 660	Program Planning and Evaluation	3.0
MPHP 661	Advanced Biostatistics	2.5
MPHP 655	Advanced Epidemiology	2.5
MPHP 689	Advanced Qualitative Methods	2.5
MPHP 690	Advanced Quantitative Methods	2.5
MPHP 691	Advanced Statistical Software	2.0
MPHP XXX	Elective credits	3.0
MPHP 698	Applied Practice Experience	3.0
	Integrated Learning Experience (comprehensive examination)	
	Total Credits	42.0

Table D2-1b Requirements for MPH degree, Population Health for Clinicians

Requirements for MPH degree, Population Health for Clinicians Concentration (this is the coursework for the combined MD/MPH program)

Course number	Course name*	Credits (if applicable)
MPHP 601	Principles of Epidemiology	3.0
MPHP 602	Principles of Biostatistics	3.0
MPHP 603	Principles of Environmental Health	3.0
MPHP 604	Social and Behavioral Dimensions of Health	3.0
MPHP 606	Public Health Policy	3.0
MPHP 607	Public Health Administration	3.0
MPHP 657	Public Health Research Methods	3.0
MPHP 660	Program Planning and Evaluation	3.0
MPHP 661 or MPHP 655	Advanced Biostatistics or Advanced Epidemiology	2.5
MPHP 649	Public Health and Biopsychosocial Primary Care	3.0
MPTP 101	Patients to Populations (from MD program)	2.5
MPPH 203	Foundations of Reasoning in Medicine (EBM component from MD program)	2.5
CBHX 2400	Clinical Bioethics (from MD program)	1.0
PRVM 6400	Population Health for Physicians (from MD program)	0.5
MPHP XXX	Elective credits	3.0
MPHP 698	Applied Practice Experience	3.0
	Integrated Learning Experience (comprehensive examination)	
	Total Credits	42.0

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

Assessment of Competencies for MPH (all concentrations) **For additional information please view the documents located in D2 of the ERF**						
Competency	Course number(s) and name(s)* Describe specific assessment opportunity ⁿ					
Evidence-based Approaches to Public Health						
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	MPHP 601 – Principles of Epidemiology MPHP 602 – Principles of Biostatistics	Exams (MPHP 601): The format for the final exams (Mid-term and Final) will include objective questions in the form of true/false, multiple choice, and short answer questions. The final exam will be comprehensive. Practice Homework (MPHP 601)- Six practice homework assignments will be distributed over the course of the semester. They will consist of short answer/multiple choice questions and are designed to prepare students for the exams. Quizzes (MPHP 601)- Two quizzes will be given in this course. The format for the quizzes will include objective questions in the form of true/false, multiple choice, and short answer questions. The quizzes are designed to prepare students for the exams. Critique (MPHP 601)- The purpose of the critique is to learn how to critically evaluate epidemiologic research to advance knowledge and skills in the field, as well as determine the best use of the findings on the basis of the strengths and limitations of the research. Individually, students will critically evaluate an epidemiologic study (to be determined) and write a 3-4 page, double-spaced critique of the research including a statement of purpose, study design, strengths and weaknesses of the study, and recommendations for improvement of the study. Research Project (MPHP 601)- The objective of this project is to begin to learn how to prepare a research proposal from an epidemiologic perspective, including a literature review and design of your own epidemiologic study. In groups, students will investigate the association between an exposure and disease (or public health problem) of their choice. The project will consist of 2 parts: a literature review and study design and will be organized in 2 formal presentations. Homework Assignment 3A (MPHP 602): Students are asked to interpret confidence				
		intervals for influenza vaccination rates published by the CDC.				

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

MPHP 601 – Principles of Epidemiology MPHP 657 – Public Health Research Methods MPHP 689- Advanced Qualitative Methods

Exams (MPHP 601)- The format for the final exams (Mid-term and Final) will include objective questions in the form of true/false, multiple choice, and short answer questions. The final exam will be comprehensive.

Practice Homework (MPHP 601)- Six practice homework assignments will be distributed over the course of the semester. They will consist of short answer/multiple choice questions and are designed to prepare students for the exams.

Quizzes (MPHP 601)- Two quizzes will be given in this course. The format for the quizzes will include objective questions in the form of true/false, multiple choice, and short answer questions. The quizzes are designed to prepare students for the exams.

Critique (MPHP 601)- The purpose of the critique is to learn how to critically evaluate epidemiologic research to advance knowledge and skills in the field, as well as determine the best use of the findings on the basis of the strengths and limitations of the research. Individually, students will critically evaluate an epidemiologic study (to be determined) and write a 3-4 page, double-spaced critique of the research including a statement of purpose, study design, strengths and weaknesses of the study, and recommendations for improvement of the study.

Research Project (MPHP 601)- The objective of this project is to begin to learn how to prepare a research proposal from an epidemiologic perspective, including a literature review and design of your own epidemiologic study. In groups, students will investigate the association between an exposure and disease (or public health problem) of their choice. The project will consist of 2 parts: a literature review and study design and will be organized in 2 formal presentations.

Survey Homework 1 (MPHP 657)— Written survey addressing a topic of the student's choice.

Semester Research Project 1 – Data and variable selection, analysis plan (MPHP 657)-For this first assignment, students will identify a research topic that is of interest to them, review a research study on that topic and formulate an answerable research question. Students will also identify and describe variables in an NHANES data set and suggest an analytic plan that enable them to answer their research question. The analysis plan will include both descriptive and bivariate analyses.

Survey Homework 2 (MPHP 657)— List of variables with categorization as dependent-independent-covariables, electronic data base (empty) and code book.

	Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "mini-study" from a research question to a final product. More details are available in Section D2 of the ERF. Skill application #1(MPHP 689)- Interviewing and transcribing. Students will participate in data collection techniques and apply qualitative analysis using NVivo. Students will also be presented with existing qualitative data and will be required to develop themes, subthemes, and results presented in tabular, narrative, and graphic form. Students will be required to upload their skill-based assignment to Blackboard.

3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and
programming and software, as appropriate

MPHP 601 – Principles of Epidemiology MPHP 689- Advanced Qualitative Methods MPHP 657 – Public Health Research Methods MPHP 602 – Principles of Biostatistics MPHP 661 – Advanced Biostatistics MPHP 691- Advanced Statistical Software **Exams (MPHP 601)**- The format for the final exams (Mid-term and Final) will include objective questions in the form of true/false, multiple choice, and short answer questions. The final exam will be comprehensive.

Practice Homework (MPHP 601)- Six practice homework assignments will be distributed over the course of the semester. They will consist of short answer/multiple choice questions and are designed to prepare students for the exams.

Quizzes (MPHP 601)- Two quizzes will be given in this course. The format for the quizzes will include objective questions in the form of true/false, multiple choice, and short answer questions. The quizzes are designed to prepare students for the exams.

Critique (MPHP 601)- The purpose of the critique is to learn how to critically evaluate epidemiologic research to advance knowledge and skills in the field, as well as determine the best use of the findings on the basis of the strengths and limitations of the research. Individually, students will critically evaluate an epidemiologic study (to be determined) and write a 3-4 page, double-spaced critique of the research including a statement of purpose, study design, strengths and weaknesses of the study, and recommendations for improvement of the study.

Research Project (MPHP 601)- The objective of this project is to begin to learn how to prepare a research proposal from an epidemiologic perspective, including a literature review and design of your own epidemiologic study. In groups, students will investigate the association between an exposure and disease (or public health problem) of their choice. The project will consist of 2 parts: a literature review and study design and will be organized in 2 formal presentations.

Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "mini-study" from a research question to a final product. More details are available in Section D2 of the ERF.

Skill application #4 (MPHP 689)- Developing a codebook and Coding. Students will participate in data collection techniques and apply qualitative analysis using NVivo. Students will also be presented with existing qualitative data and will be required to develop themes, sub-themes, and results presented in tabular, narrative, and graphic form. Students will be required to upload their skill-based assignment to Blackboard.

Analysis Homework (MPHP 657)- Students will complete a Legionella data set analysis.

Semester Research Project Assignment # 2 (MPHP 657): This assignment asks the students to summarize and interpret their results in narrative form with supporting tables, graphs or figures. The narrative should describe the results of the descriptive analysis and the bivariate analysis, and should reference tables that reflect these analyses. Tables, graphs or figures may appear after the narrative, or they may be imbedded in the text.

Homework 4A (MPHP 602)- Students will use SPSS to compare blood pressure in children with mothers who have prenatal diabetes and those who don't and correctly interpret and report results.

Research Project Presentation (MPHP 661): Students will select a research topic, conduct an initial literature review to further specify the topic, locate, evaluate and select a publicly available (or other) public health dataset related to that topic, develop and refine research hypotheses and an analytic plan in conjunction with a literature review related to their hypotheses, explore and analyze the data using appropriate statistical methods, interpret the findings and limitations in the context of related published articles, prepare a PowerPoint presentation with supporting figures and tables, and present their project to their peers.

Homework assignments (MPHP 661): Four homework assignments will be given during the semester. Each requires statistical computing and interpretation and reporting of results, as well as addressing specific questions (See course syllabus for an example question.)

Lab Assignments (MPHP 691): There will be four (4) lab assignments, which will require students to utilize syntax-based programming or qualitative analysis software to create, manipulate, and analyze data. Assignments will cover creating or downloading data, merging or concatenating datasets, restructuring datasets, creating variable labels and formats, working with software procedures, displaying data, working with dates, producing descriptive statistics, and working with arrays. One qualitative lab will cover the creation of a hierarchical codebook, application of coding, creation of coding matrices, and visualization of qualitative data.

Final Exam (MPHP 691):The cumulative final exam will be in a take-home format. The exam will require students to demonstrate the syntax-based programming skills covered in the course using provided dataset(s). Students will be required to submit the statistical software syntax and output, with a written explanation of the interpretation of the output.

4. Interpret results of
data analysis for
public health
research, policy or
practice

MPHP 601 – Principles of Epidemiology MPHP 657 – Public Health Research Methods MPHP 661 – Advanced Biostatistics MPHP 691- Advanced Statistical Software MPHP 689- Advanced Qualitative Methods MPHP 602 – Principles of Biostatistics **Exams (MPHP 601)-** The format for the final exams (Mid-term and Final) will include objective questions in the form of true/false, multiple choice, and short answer questions. The final exam will be comprehensive.

Practice Homework (MPHP 601)- Six practice homework assignments will be distributed over the course of the semester. They will consist of short answer/multiple choice questions and are designed to prepare students for the exams.

Quizzes (MPHP 601)- Two quizzes will be given in this course. The format for the quizzes will include objective questions in the form of true/false, multiple choice, and short answer questions. The quizzes are designed to prepare students for the exams.

Critique (MPHP 601)- The purpose of the critique is to learn how to critically evaluate epidemiologic research to advance knowledge and skills in the field, as well as determine the best use of the findings on the basis of the strengths and limitations of the research. Individually, students will critically evaluate an epidemiologic study (to be determined) and write a 3-4 page, double-spaced critique of the research including a statement of purpose, study design, strengths and weaknesses of the study, and recommendations for improvement of the study.

Research Project (MPHP 601)- The objective of this project is to begin to learn how to prepare a research proposal from an epidemiologic perspective, including a literature review and design of your own epidemiologic study. In groups, students will investigate the association between an exposure and disease (or public health problem) of their choice. The project will consist of 2 parts: a literature review and study design and will be organized in 2 formal presentations.

Homework 4A (MPHP 602)- Students will use SPSS and manual calculations to assess and interpret the effect of calcium supplementation on blood pressure in normotensive men.

Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "mini-study" from a research question to a final product. More details are available in Section D2 of the ERF.

Journal Club Presentation (MPHP 689)- Students will be randomly assigned to a journal club group. The journal clubs will participate as a group on-line and present their findings to the class the following week. Journal club groups will compile a Powerpoint presentation on peer reviewed qualitative studies - summarizing and applying critical

thinking skills to the content.

Research Project Presentation (MPHP 661): Students will select a research topic, conduct an initial literature review to further specify the topic, locate, evaluate and select a publicly available (or other) public health dataset related to that topic, develop and refine research hypotheses and an analytic plan in conjunction with a literature review related to their hypotheses, explore and analyze the data using appropriate statistical methods, interpret the findings and limitations in the context of related published articles, prepare a PowerPoint presentation with supporting figures and tables, and present their project to their peers.

Homework assignments (MPHP 661): Four homework assignments will be given during the semester. Each requires statistical computing and interpretation and reporting of results, as well as addressing specific questions (See course syllabus for an example question.)

Lab Assignments (MPHP 691): There will be four (4) lab assignments, which will require students to utilize syntax-based programming or qualitative analysis software to create, manipulate, and analyze data. Assignments will cover creating or downloading data, merging or concatenating datasets, restructuring datasets, creating variable labels and formats, working with software procedures, displaying data, working with dates, producing descriptive statistics, and working with arrays. One qualitative lab will cover the creation of a hierarchical codebook, application of coding, creation of coding matrices, and visualization of qualitative data.

Final Exam (MPHP 691): The cumulative final exam will be in a take-home format. The exam will require students to demonstrate the syntax-based programming skills covered in the course using provided dataset(s). Students will be required to submit the statistical software syntax and output, with a written explanation of the interpretation of the output.

Analysis Homework (MPHP 657)- Students will complete a Legionella data set analysis.

Semester Research Project Assignment # 2 (MPHP 657)- This assignment asks the students to summarize and interpret their results in narrative form with supporting tables, graphs or figures. The narrative should describe the results of the descriptive analysis and the bivariate analysis, and should reference tables that reflect these analyses. Tables, graphs or figures may appear after the narrative, or they may be imbedded in the text.

Public Health & Health Care Systems				
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings	MPHP 606 – Public Health Policy MPHP 607 – Public Health Administration	Bardach Assignment 2- Assemble Some Evidence (Scope) (MPHP 606): This second assignment in the ongoing Bardach Policy Analysis project involves assembling the evidence about the problem that the students are working on. Their goal is to help the reader (a NYS legislator) understand the particular features of the problem the students are examining and to describe policies that have addressed similar problems elsewhere. The component parts of this assignment are: 1. Describe the nature and extent of the problem to provide context for the policy analysis in later steps. This section should draw from both peer-reviewed and grey literature (if feasible). 2. Describe 1-2 policies that have addressed similar problems in other contexts. These can include policies at any level of government. 3. Additionally, students may find it helpful to describe evidence that is not available but which they feel it would be important to collect. This competency is also covered in class discussions in MPHP 607.		

6. Discuss the means
by which structural
bias, social inequities
and racism
undermine health and
create challenges to
achieving health
equity at
organizational,
community and
societal levels

MPHP 604 – Social and Behavioral Dimensions of Health MPHP 660 – Program Planning and Evaluation MPHP 603 – Principles of Environmental Health **Video Assignment and Written Report (MPHP 660)**- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references)

Group Assignment- Cultural and Linguistic Competencies (MPHP 660): Students will be asked to work together in small groups to apply what they have learned during the course to assigned populations. The students will also be asked to discuss how race and ethnicity can affect the work that they do.

Group Assignment 6: Organizational Resources (MPHP 660)- Students will be asked to create a resource map and an assets map and then think about the barriers in the community that they are discussing.

Individual Assignment 3 (MPHP 660)-Students will discuss program Materials, plan for program adoption and recruitment, create a five year plan for implementation, and talk about measures that they will take to increase the likelihood that the program will besustained after the intervention.

In-Class Mid-term (MPHP 660)- The format for the mid-term may include questions in the form of true/false, fill in the blank, multiple choice, and/or short answer questions.

Technical Assistant Group (TAG) 1: Outdoor Air Pollution and Social Justice (MPHP 603)- A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

Environmental Social Justice Individual Essay (MPHP 603)- Students will be asked to critique the environmental health event "Love Canal" using an ecological framework. Students have a choice in reading; students are asked to pick one book – Either "Love Canal: and the Birth of the Environmental Health Movement" or "The Road to Love Canal: Managing Industrial Waste before EPA". Students will critically assess the impact of the environmental health event from the intrapersonal, interpersonal, organizational, community, and political viewpoints.

Virtual B – Contaminated Drinking Water (MPHP 603)- Each group will will develop short essays for each question. The statements are based on the group's impressions,

	thoughts, and interpretation of the reading. The statements do not reflect a single view but a synthesis of thoughts or ideas from the group.
	New Assignments (MPHP 604): New assignments will be developed for this course and will be implemented in the spring of 2020.

Planning	&	Manag	ement t	οР	romote	Health
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7. Assess population needs, assets and capacities that affect communities' health

MPHP 607 – Public Health Administration MPHP 660 – Program Planning and Evaluation MPHP 603 – Principles of Environmental Health MPHP 604 – Social and Behavioral Dimensions of Health Community Health Improvement Plan (CHIP) Final Report (MPHP 607): Based on the Community Health Assessment for their assigned county, students will be asked to identify a priority area and choose one intervention to address this priority area. The students must prepare a report describing their evaluation of the three interventions they considered. This report should include the following: components:

- A detailed description of the final three interventions considered.
- An evaluation of each intervention using the criteria the student identified in their outline.
- The selection of an intervention and justification of the student's choice based on the evaluation results.

Community Health Assessment (CHA) Assignment (MPHP 607): Students will be divided into teams. Each team will be assigned a published Community Health Assessment (CHA) for a county in New York State. Each team will analyze the CHA based on the information provided in lecture, in-class small group activities, and online resources.

Virtual-Discussion A: Energy – Wind Turbine (MPHP 603)- Each group will develop one paragraph response for each separate question (a-d). Questions explore the impact of wind turbines on a community. More information can be found in D2 of the ERF. Each paragraph should be no more than a half a page. When applicable, cite references. The statements are based on the group's impressions, thoughts, and interpretation of the reading.

Technical Assistant Group (TAG) 1, 2, and 4 (MPHP 603)- A copy of these assignments is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

Group Assignment (GA) 1- Logic Model (MPHP 660)- Students will be asked to complete a logic model based on a short case study essay.

Independent Assignment- Logic Model (MPHP 660)- Students must create a logic model and write a rationale (literature review) for the proposed logic model. The rationale will walk the reader through the problem (supported by literature), the proposed intervention (supported by literature) and justification that the proposed intervention will be successful.

Video Assignment and Written Report (MPHP 660)- Students will be required to record

	a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references) In-Class Mid-term (MPHP 660)- The format for the mid-term may include questions in the form of true/false, fill in the blank, multiple choice, and/or short answer questions. New Assignments (MPHP 604): New assignment will be developed for this course and will be implemented in the spring of 2020

MPHP 604 – Social and Behavioral Dimensions of Health MPHP 660 – Program Planning and Evaluation **Group Assignment- Cultural and Linguistic Competencies (MPHP 660)**: Students will be asked to work together in small groups to apply what they have learned during the course to assigned populations. The students will also be asked to discuss how race and ethnicity can affect the work that they do.

Group Assignment 5 (MPHP 660)- Students will be asked to complete an assignment that askes them questions regarding Qualitative Methods.

Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references)

In-Class Mid-term (MPHP 660)- The format for the mid-term may include questions in the form of true/false, fill in the blank, multiple choice, and/or short answer questions.

Individual Assignment- Logic Model (MPHP 660): Students must create a logic model and write a rationale (literature review) for the proposed logic model. The rationale will walk the reader through the problem (supported by literature), the proposed intervention (supported by literature) and justification that the proposed intervention will be successful. Individual Assignment 3 (MPHP 660)-Students will discuss program Materials, plan for program adoption and recruitment, create a five year plan for implementation, and talk about measures that they will take to increase the likelihood that the program will besustained after the intervention.

Individual Assignment 4 (MPHP 660)- Students will submit an assignment that applies the following concepts: Evaluation design (visual and written), gantt chart, Dissemination, Feedback, Budget and Budget Justification

New Assignments (MPHP 604): A new assignment will be developed for this course and will be implemented in the spring of 2020

9. Design a population-based policy, program, project or intervention	MPHP 660 – Program Planning and Evaluation	In-Class Mid-term (MPHP 660)- The format for the mid-term may include questions in the form of true/false, fill in the blank, multiple choice, and/or short answer questions.
		Video Assignment and Written Report- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references)
		Group Assignment (GA) 1- Logic Model: Students will be asked to complete a logic model based on a short case study essay.
		Individual Assignment- Logic Model: Students must create a logic model and write a rationale (literature review) for the proposed logic model. The rationale will walk the reader through the problem (supported by literature), the proposed intervention (supported by literature) and justification that the proposed intervention will be successful.
		Independent Assignment- Theory, Program Components, and Materials: This portion of the assignment will contain the following parts: a) Messages/Learning: Students must identify and describe the evidence based messages they will use in their behavior intervention. If they need to alter the message(s), they must
		justify why. b) Identify Materials: Students will be asked to review their Logic Model and identify the strategies they will use to
		disseminate information and/or the behavioral intervention. They will also be asked to describe how the
		materials will be used and the intended target audience for the materials. (e.g. teachers may have different materials then students) c) Health Literacy: In this section, students must discuss their health literacy strategies for
		their program components and materials. (e.g. reading level).

10. Explain basic
principles and tools of
budget and resource
management

MPHP 607 – Public Health Administration MPHP 660 – Program Planning and Evaluation **Budget Exercise (MPHP 607)**: Students will be provided with a case study addressing a health issue identified by the local health agency. The case study will include the relevant background materials needed to refine an existing evidence-based program to match the realities of their county. Using information provided to them, students will develop a budget for the program tailored to their county. Their budgets will then need to be integrated into the sample local health department's budget to assess the impact on the department's budget.

In-Class Budgeting Assignment (MPHP 607): Students will be broken up into teams and receive a brief case study. Each team will prepare a one-year budget for their agency.

Local Health Funding Exercise (MPHP 607): In this exercise, students are asked to review a county annual report and budget. Based on these documents, they will identify key stakeholders, funding sources, and options if funding was taken away. They will also be asked to come up with a plan if their budget was reduced by 5% and complete another section of the exercise where they must describe what they would do with any unspent funds that they have at the end of the year.

Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references)

Group Assignment 6: Organizational Resources (MPHP 660)- Students will be asked to create a resource map and an assets map and then think about the barriers in the community that they are discussing.

Individual Assignment 3 (MPHP 660)-Students will discuss program Materials, plan for program adoption and recruitment, create a five year plan for implementation, and talk about measures that they will take to increase the likelihood that the program will besustained after the intervention.

11. Select methods to evaluate public health programs	MPHP 660 – Program Planning and Evaluation MPHP 604 – Social and Behavioral Dimensions of Health	Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references). Individual Assignment (IA) 2 (MPHP 660)- Students will complete an assignment related to program rationale, mission, goals, objectives, and Change Objectives. Individual Assignment (IA) 4 (MPHP 660)-Students will complete an assignment that covers evaluation design (visual and written), gantt chart, dissemination, feedback, budget and budget justification. Group Assignment 4 (MPHP 660)- This assignment will provide students with an introduction to evaluation. Group Assignment 2 (MPHP 660)- Students will be asked to complete an assignment that askes them questions regarding Qualitative Methods. New Assignments (MPHP 604): New assignments will be developed for this course and
		will be implemented in the spring of 2020. A draft syllabus can be found in section D2 of the ERF.
Policy in Public Healt	h	THE ETA .
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence	MPHP 606 – Public Health Policy	Bardach Policy Analysis Project (Parts 1-4): This is the major assignment for the course, which consists of a step-wise creation of a Bardach-style policy analysis memo on a policy topic, chosen from a provided list of current public health issues, focused on the state of New York. This is an ongoing assignment throughout the semester. Major elements of this assignment include: 1) Define the Problem; 2) Assemble Some Evidence; 3) Construct the Alternatives; 4) Select the Criteria; 5) 5. Project the Outcomes, Confront the Tradeoffs, and Decide; and 5) A Written and Oral Presentation of the Policy Testimony.

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

MPHP 603 – Principles of Environmental Health MPHP 606 – Public Health Policy In Class Activity: Public Hearing to Address an Occupational Health Concern (MPHP 603)- Students will be required to prepare for and participate in a mock exercise simulating a public hearing to consider if a rule should be proposed to regulate occupational exposure to diacetyl and other related chemical flavorings. Students will assume an assigned role (page 15) and form a team with other students in the "group" in order to develop a strategic position on the matter being considered. The groups are 1. Workers 2. Medical Establishment 3. Government and 4. Industry. The group will prepare short presentations for their part in the hearing agenda.

The hearing will simulate hearings which take place at the Department of Labor in Washington, D.C. and students will "appear" before the agency staff, elected officials, and the public-at-large regarding this important occupational health issue. Students will be prepared to make recommendations about their opinion regarding the proper response to the public health threat. Short statements will be made by each group and then Department of Labor "staff" and the "elected officials" will pose questions to the groups. Students will be expected to uncover the stakeholder or interested party's viewpoint and develop recommendations, demonstrating this mastery through active participation in the event.

Bardach Policy Analysis Project (Parts 3-4) (MPHP 606)- This is the major assignment for the course, which consists of a step-wise creation of a Bardach-style policy analysis memo on a policy topic, chosen from a provided list of current public health issues, focused on the state of New York. This is an ongoing assignment throughout the semester. Major elements of this assignment include: 1) Define the Problem; 2) Assemble Some Evidence; 3) Construct the Alternatives; 4) Select the Criteria; 5) 5. Project the Outcomes, Confront the Tradeoffs, and Decide; and 5) A Written and Oral Presentation of the Policy Testimony.

Technical Assistant Group (TAG) 5 (MPHP 603)- A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

Course Assignment (MPHP 603)- Popcorn Lung Case: Public Health Hearing

MPHP 606 – Public Health Policy MPHP 603 – Principles of Environmental Health MPHP 604 – Social and Behavioral Dimensions of Health Bardach Policy Analysis Project- Assignment Tell Your Story (MPHP 606)- For the final piece of the Bardach Analysis Project, students will present their written testimony orally in class and answer questions from a mock legislative committee. In addition to the written testimony, students must prepare a list of anticipated questions and be prepared to answer them, as well as other questions that they may not have anticipated.

New Assignments (MPHP 604): New assignments will be developed for this course and will be implemented in the spring of 2020. A draft syllabus can be found in section D2 of the ERF.

Technical Assistant Group (TAG) 5 (MPHP 603)- A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

Course Assignment (MPHP 603)- Popcorn Lung Case: Public Health Hearing.

In Class Activity: Public Hearing to Address an Occupational Health Concern (MPHP 603)- Students will be required to prepare for and participate in a mock exercise simulating a public hearing to consider if a rule should be proposed to regulate occupational exposure to diacetyl and other related chemical flavorings. Students will assume an assigned role (page 15) and form a team with other students in the "group" in order to develop a strategic position on the matter being considered. The groups are 1. Workers 2. Medical Establishment 3. Government and 4. Industry. The group will prepare short presentations for their part in the hearing agenda.

The hearing will simulate hearings which take place at the Department of Labor in Washington, D.C. and students will "appear" before the agency staff, elected officials, and the public-at-large regarding this important occupational health issue. Students will be prepared to make recommendations about their opinion regarding the proper response to the public health threat. Short statements will be made by each group and then Department of Labor "staff" and the "elected officials" will pose questions to the groups. Students will be expected to uncover the stakeholder or interested party's viewpoint and develop recommendations, demonstrating this mastery through active participation in the event.

15. Evaluate policies for their impact on public health and health equity	MPHP 606 – Public Health Policy	Bardach Policy Analysis Project (Parts 3 and 4): This is the major assignment for the course, which consists of a step-wise creation of a Bardach-style policy analysis memo on a policy topic, chosen from a provided list of current public health issues, focused on the state of New York. This is an ongoing assignment throughout the semester. Major elements of this assignment include: 1) Define the Problem; 2) Assemble Some Evidence; 3) Construct the Alternatives; 4) Select the Criteria; 5) 5. Project the Outcomes, Confront the Tradeoffs, and Decide; and 5) A Written and Oral Presentation of the Policy Testimony. Policy in the Headlines: Over the course of the semester, students will be required to identify one health policy related media story from a common source (e.g. Syracuse Post-Standard, Washington Post, NY Times, CNN, Fox News, US News and World Report, NPR, etc.). You may not use an academic journal. Students will describe the article and the policy in class, explain the implications of the policy, and justify why they choose the article.
Leadership		
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	MPHP 607 – Public Health Administration	In-Class Leadership Activity- Students are assigned to small groups of 4-6 members each. Each small group represents a public health agency. Within each group, students are assigned to role-play a staff member (e.g., front line staff, program coordinator or director, senior staff). During the debrief students reflect on their experiences in the small groups, on the collaborative process, how they achieved consensus, whether they felt empowered or whether they empowered other group members.
17. Apply negotiation and mediation skills to address organizational or community challenges	MPHP 603 – Principles of Environmental Health	Technical Assistant Group (TAG) 6 (MPHP 603) - A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

Communication		
18. Select	MPHP 660 – Program Planning	CHIP Oral Presentation (MPHP 607)- Students will be asked to prepare a 20-minute
communication	and Evaluation	Powerpoint presentation on their Community Health Improvement Plan.
strategies for different	MPHP 607 – Public Health	
audiences and	Administration	Video Assignment and Written Report (MPHP 660)- Students will be required to record
sectors	MPHP 604 – Social and	a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students
	Behavioral Dimensions of Health	are required to submit their recording to VoiceThread. Students will be required to submit
		a final program planning and evaluation report (Maximum of 4 pages of written text - not
		including appendix: logic model, change objectives, Gantt chart, dissemination and
		feedback loop, evaluation design (visual), budget, references).
		New Assignments (MPHP 604): New assignments will be developed for this course and
		will be implemented in the spring of 2020. A draft syllabus can be found in section D2 of
		the ERF.

MPHP 606 – Public Health Policy MPHP- 657 Public Health Research Methods MPHP 604 – Social and Behavioral Dimensions of Health MPHP 660 – Program Planning and Evaluation MPHP 601 – Principles of Epidemiology MPHP 657 – Public Health Research Methods MPHP 689- Advanced Qualitative Methods MPHP 603 – Principles of Environmental Health

Bardach Policy Analysis Project (MPHP 606) (Parts 1, 2, 3, and 4): This is the major assignment for the course, which consists of a step-wise creation of a Bardach-style policy analysis memo on a policy topic, chosen from a provided list of current public health issues, focused on the state of New York. This is an ongoing assignment throughout the semester. Major elements of this assignment include: 1) Define the Problem; 2) Assemble Some Evidence; 3) Construct the Alternatives; 4) Select the Criteria; 5) 5. Project the Outcomes, Confront the Tradeoffs, and Decide; and 5) A Written and Oral Presentation of the Policy Testimony.

Policy in the Headlines(MPHP 606): Over the course of the semester, students will be required to identify one health policy related media story from a common source (e.g. Syracuse Post-Standard, Washington Post, NY Times, CNN, Fox News, US News and World Report, NPR, etc.). You may not use an academic journal. Students will describe the article and the policy in class, explain the implications of the policy, and justify why they choose the article.

Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "mini-study" from a research question to a final product. More details are available in Section D2 of the ERF.

Survey Homework 1 (MPHP 657)— Written survey addressing a topic of the student's choice. Students must also provide respondents with directions on how to complete the survey.

Final Research Project- (Abstract) (MPHP 657): Students will write a ~350-375 word abstract in a structured format. The sections in the abstract should include: background, methods (data set used – year, key variables, stats procedures), results (descriptive and key bivariate findings), and conclusions (take home message).

Final Presentation (MPHP 657):Each student will give an oral presentation on his/her research project. The presentation must include the background and purpose, methods, findings, conclusion and a public health policy recommendation. The presentation will be assessed by peers and by the instructor using the same rubric.

Homework 4a (MPHP 602)- Students will be asked to describe results of statistical analyses of effects of calcium supplementation on blood pressure in normotensive men.

Critique (MPHP 601)- The purpose of the critique is to learn how to critically evaluate epidemiologic research to advance knowledge and skills in the field, as well as determine

the best use of the findings on the basis of the strengths and limitations of the research. Individually, students will critically evaluate an epidemiologic study (to be determined) and write a 3-4 page, double-spaced critique of the research including a statement of purpose, study design, strengths and weaknesses of the study, and recommendations for improvement of the study.

Research Project (MPHP 601)- The objective of this project is to begin to learn how to prepare a research proposal from an epidemiologic perspective, including a literature review and design of your own epidemiologic study. In groups, students will investigate the association between an exposure and disease (or public health problem) of their choice. The project will consist of 2 parts: a literature review and study design and will be organized in 2 formal presentations.

In-Class Mid-term (MPHP 660)- The format for the mid-term may include questions in the form of true/false, fill in the blank, multiple choice, and/or short answer questions.

Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references).

Individual Assignment (IA) 4 (MPHP 660)-Students will complete an assignment that covers evaluation design (visual and written), gantt chart, dissemination, feedback, budget and budget justification.

Group Assignment 4 (MPHP 660)- This assignment will provide students with an introduction to evaluation.

Technical Assistant Group (TAG) 3 (MPHP 603)- A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

New Assignments (MPHP 604): New assignments will be developed for this course and will be implemented in the spring of 2020. A draft syllabus can be found in section D2 of the ERF.

20. Describe the importance of cultural competence in communicating public health content	MPHP 604- Social and Behavioral Dimensions of Health MPHP 660- Program Planning and Evaluation MPHP 603- Principles of Environmental Health	Technical Assistant Group (TAG) 2 and 3 (MPHP 603)- A copy of these assignments is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site. Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Students are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not
		including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references). New Assignments (MPHP 604): New assignments will be developed for this course and will be implemented in the spring of 2020.
Interprofessional Prac	ctice	
21. Perform effectively on interprofessional^teams	MPHP 607- Public Health Administration	Interprofessional Activity: Public health students will participate in a four hour emergency preparedness tabletop exercise together with third- and fourth-year medical students. They will be assigned into small groups reflecting key stakeholders during a public health emergency. Prior to the exercise, students will complete online FEMA training and will be certified for emergency preparedness. They will also be introduced to the tools and skills needed when working with interprofessional teams during class lectures. After the exercise, they will submit a reflective essay on their interprofessional experience. They will also participate in a debriefing exercise with the rest of the students who participated in the activity right after the exercise has finished.

Systems Thinking		
22. Apply systems thinking tools to a public health issue	MPHP 607- Public Health Administration MPHP 604- Social and Behavioral Dimensions of Health MPHP 660- Program Planning and Evaluation	Quality Improvement Exercise- Part #1: Proposal (MPHP 607): Students will develop and implement an individual QI project using information from class lectures, readings an online resources. One of the main elements of this assignment is to create a process may that clearly outlines the process from beginning to end. Students must be able to select and use the appropriate mapping tools.
MPHP 603- Principles of Environmental Health MPHP 606- Public Health Police		Video Assignment and Written Report (MPHP 660)- Students will be required to record a 5-minute video (no slides OR visuals) about their program and evaluation plan. Student are required to submit their recording to VoiceThread. Students will be required to submit a final program planning and evaluation report (Maximum of 4 pages of written text - not including appendix: logic model, change objectives, Gantt chart, dissemination and feedback loop, evaluation design (visual), budget, references).
		Group Assignment (GA) 1- Logic Model (MPHP 660)- Students will be asked to complete a logic model based on a short case study essay.
		Individual Assignment- Logic Model (MPHP 660)- Students must create a logic model and write a rationale (literature review) for the proposed logic model. The rationale will walk the reader through the problem (supported by literature), the proposed intervention (supported by literature) and justification that the proposed intervention will be successful
		Group Assignment 6: Organizational Resources (MPHP 660) - Students will be asked to create a resource map and an assets map and then think about the barriers in the community that they are discussing.
		Individual Assignment (IA) 4 (MPHP 660)-Students will complete an assignment that covers evaluation design (visual and written), gantt chart, dissemination, feedback, budge and budget justification.
		Group Assignment 4 (MPHP 660) - This assignment will provide students with an introduction to evaluation.
		Virtual – Discussion C (V-Discussion) (MPHP 603)- Three discussion group assignments will be required throughout the course. Each V-Discussion group assignmen will be worth 5 points and will explore environmental health domains in more detail, reenforce content delivered in class, and/or perspectives in environmental health. This V-Discussion will focus on Food Production and Security.

Technical Assistant Group (TAG) 3 (MPHP 603)- A copy of this assignment is available in D2 of the ERF. TAG assignments will explore environmental health domains in more detail, re-enforce content delivered in class, and/or perspectives in environmental health. At the end of class, each TAG assignment will be uploaded to the blackboard site.

New Assignments (MPHP 604): New assignments will be developed for this course and will be implemented in the spring of 2020. A draft syllabus can be found in section D2 of the ERF.

Bardach Policy Analysis Project (MPHP 606) (Parts 1, 2, 3, and 4): This is the major assignment for the course, which consists of a step-wise creation of a Bardach-style policy analysis memo on a policy topic, chosen from a provided list of current public health issues, focused on the state of New York. This is an ongoing assignment throughout the semester. Major elements of this assignment include: 1) Define the Problem; 2) Assemble Some Evidence; 3) Construct the Alternatives; 4) Select the Criteria; 5) 5. Project the Outcomes, Confront the Tradeoffs, and Decide; and 5) A Written and Oral Presentation of the Policy Testimony.

Policy in the Headlines(MPHP 606): Over the course of the semester, students will be required to identify one health policy related media story from a common source (e.g. Syracuse Post-Standard, Washington Post, NY Times, CNN, Fox News, US News and World Report, NPR, etc.). You may not use an academic journal. Students will describe the article and the policy in class, explain the implications of the policy, and justify why they choose the article.

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

Documentation for each course can be found in section D2 of the ERF.

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

<u>Strengths</u>: Members of the Upstate Medical University MPH Program faculty and staff have spent countless hours developing the evaluation and assessment measures outlined in the table above. This table has been reviewed several times by the university's Student Learning Outcome Committee (SLOC) and changes have been made based on their review. Also, the program has made sure that the learning objectives of the program align with the learning objectives of Upstate Medical University as a whole.

<u>Weaknesses</u>: At this time, some of the assignments are still in development so the program has not been able to test whether or not they will be effective measures of student learning outcomes.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program will continue to work with the SLOC to review and improve our evaluation measures. We will also finish creating the new assignments and assessments listed in the table above and implement them during the 2019-2020 academic year. In April 2019 our faculty met and decided to redesign may of our syllabi. Now all of the syllabi for the MPH Program show a clear link to the CEPH Competencies and how these competencies are covered and assessed.

D3. DrPH Foundational Competencies

Not applicable.

D4. MPH & DrPH Concentration Competencies

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

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

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

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

Table D4-1a Assessment of Competencies for MPH in Data and Analytics Concentration

Assessment of Competencies for MPH in Data and Analytics Concentration **For additional information please view the documents located in D4 of the ERF**			
Competency	Course number(s) and name(s)	Describe specific assessment opportunity ⁿ	
Evaluate the validity and reliability of data	MPHP 655 – Advanced Epidemiology MPHP 690 – Advanced Quantitative Methods MPHP 689 - Advanced Qualitative	Problem Sets (#1-4) (MPHP 655)- There will be four (4) problem sets, which will require students to practice epidemiologic methods. Problem sets will require students to apply epidemiologic concepts, such as causal modeling, sampling methodologies, analytic methodologies, techniques to improve validity, etc.	
	Methods	Study Design Project (MPHP 655)- The study design project will require students to work individually or in pairs (dependent on course enrollment) to design an epidemiologic study around a clinical issue. The project will require students to synthesize the literature around their chosen issue and apply concepts discussed in class including study design, sampling and recruitment, threats to validity and how they will be minimized or addressed, measurement, and causal inference.	
		Exams (MPHP 655) -Two examinations will be given in this course; each exam will be worth 10 points. The first exam will be given at approximately mid-point of the semester and the second exam will be given at the end of the semester. The exams will assess the students understanding of the concepts discussed in class and will be in the format of short answer questions.	
		Project Multivariable Analysis Report (MPHP 690) - Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the previous project proposal with some modifications including a refinement of the Methods (multivariate analyses) and a Results section with relevant tables. Include unweighted and weighted analyses.	
		Project Stratified Analysis Report (MPHP 690) - Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the previous project proposal with some modifications including a refinement of the Methods (stratified analyses) and a Results section with relevant tables. Include unweighted and weighted analyses.	
		Online Survey (MPHP 690)-Students will use REDCap to design an online survey. The survey will be comprised of 8 to 12 questions in various formats, including yes/no, multiple choice, multiple answer, numeric, open comment. Students must use branching logic for at least one item. A link to the survey will be sent to the instructor for assessment purposes.	

		Mini-Study Project (MPHP 689) - This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "mini-study" from a research question to a final product. More details are available in Section D4 of the ERF.
		Journal Club Presentation (MPHP 689) - Students will be randomly assigned to a journal club group. The journal clubs will participate as a group on-line and present their findings to the class the following week. Journal club groups will compile a Powerpoint presentation on peer reviewed qualitative studies - summarizing and applying critical thinking skills to the content.
2. Utilize appropriate statistical software for visualization and modeling of multidimensional study data	MPHP 661 – Advanced Biostatistics MPHP 691- Advanced Statistical Software MPHP 655 – Advanced Epidemiology	Research Project Presentation (MPHP 661): Students will select a research topic, conduct an initial literature review to further specify the topic, locate, evaluate and select a publicly available (or other) public health dataset related to that topic, develop and refine research hypotheses and an analytic plan in conjunction with a literature review related to their hypotheses, explore and analyze the data using appropriate statistical methods, interpret the findings and limitations in the context of related published articles, prepare a PowerPoint presentation with supporting figures and tables, and present their project to their peers.
		Homework assignments (MPHP 661) : Four homework assignments will be given during the semester. Each requires statistical computing and interpretation and reporting of results, as well as addressing specific questions (See course syllabus for an example question.)
		Lab Assignments (MPHP 691): There will be four (4) lab assignments, which will require students to utilize syntax-based programming or qualitative analysis software to create, manipulate, and analyze data. Assignments will cover creating or downloading data, merging or concatenating datasets, restructuring datasets, creating variable labels and formats, working with software procedures, displaying data, working with dates, producing descriptive statistics, and working with arrays. One qualitative lab will cover the creation of a hierarchical codebook, application of coding, creation of coding matrices, and visualization of qualitative data.
		Final Exam (MPHP 691) : The cumulative final exam will be in a take-home format. The exam will require students to demonstrate the syntax-based programming skills covered in the course using provided dataset(s). Students will be required to submit the statistical software syntax and output, with a written explanation of the interpretation of the output.
		Problem Set #2 (MPHP 655) -This assignment will require students to practice epidemiologic methods. The problem set will individually assess students ability to apply epidemiologic concepts. The focus of this problem set will be Validity (Issues and How to Address).

3. Synthesize evidence from print and electronic sources to support public health decision making	MPHP 655 – Advanced Epidemiology	Problem Set #4 (MPHP 655)- This assignment will require students to practice epidemiologic methods. The problem set will individually assess students ability to apply the epidemiologic concept of causal inference. Study Design Project (MPHP 655)- The study design project will require students to work individually or in pairs (dependent on course enrollment) to design an epidemiologic study around a public health issue. The project will require students to synthesize the literature around their chosen issue and apply concepts discussed in class including study design, sampling and recruitment, threats to validity and how they will be minimized or addressed, measurement, and causal inference.
4. Create a qualitative, quantitative, or mixed methods study to address a public health issue	MPHP 655 – Advanced Epidemiology MPHP 689 - Advanced Qualitative Methods MPHP 690 - Advanced Quantitative Methods	Problem Set #3 (MPHP 655)-This assignment will require students to practice epidemiologic methods. The problem set will individually assess students ability to apply the epidemiologic concepts of Sampling Techniques, Subject Recruitment, and Quality Assurance. Study Design Project (MPHP 655)- The study design project will require students to work individually or in pairs (dependent on course enrollment) to design an epidemiologic study around a clinical issue. The project will require students to synthesize the literature around their chosen issue and apply concepts discussed in class including study design, sampling and recruitment, threats to validity and how they will be minimized or addressed, measurement, and causal inference. Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "ministudy" from a research question to a final product. More details are available in Section D4 of the ERF. Research Project Proposal (MPHP 690)- Using MEPS data, students will submit a brief project proposal (limited to 3 double spaced pages not including references) consisting of four sections: Background and Significance, Purpose, Methods (to include stratified and multivariate analyses) and References. The proposal will be based on data from a single year of the Medical Expenditure Panel Survey, and should identify an issue involving healthcare utilization according to a relevant public health factor-of-interest such as race/ethnicity, sex, insurance status, etc. Abstract (MPHP 690)- Students will write an abstract summarizing the oral presentation. The abstract should include the following sections: Background and Purpose, Methods, Results, Conclusion(s) and Policy Final Presentation (MPHP 690)- Each student will give an oral will be given on his/her research project. The presentation must include the background and purpose, methods, findings, conclusion and a public health policy recomme

		Project Multivariable Analysis Report (MPHP 690)- Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the previous project proposal with some modifications including a refinement of the Methods (multivariate analyses) and a Results section with relevant tables. Include unweighted and weighted analyses.
		Project Stratified Analysis Report (MPHP 690) - Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the previous project proposal with some modifications including a refinement of the Methods (stratified analyses) and a Results section with relevant tables. Include unweighted and weighted analyses.
		Online Survey (MPHP 690)- Students will use REDCap to design an online survey. The survey will be comprised of 8 to 12 questions in various formats, including yes/no, multiple choice, multiple answer, numeric, open comment. Students must use branching logic for at least one item. A link to the survey will be sent to the instructor for assessment purposes.
5. Disseminate complex analytic findings to professionals and the public using a variety of approaches	MPHP 689 -Advanced Qualitative Methods MPHP 690- Advanced Quantitative Methods	Mini-Study Project (MPHP 689)- This is an ongoing project that students will complete in stages over the course of the semester. The overall goal of this project is to build a qualitative "ministudy" from a research question to a final product. More details are available in Section D4 of the ERF.
арргодопес		Journal Club Presentation (MPHP 689)- Students will be randomly assigned to a journal club group. The journal clubs will participate as a group on-line and present their findings to the class the following week. Journal club groups will compile a Powerpoint presentation on peer reviewed qualitative studies - summarizing and applying critical thinking skills to the content.
		Abstract (MPHP 690)-Students will write an abstract summarizing the oral presentation. The abstract should include the following sections: Background and Purpose, Methods, Results, Conclusion(s) and Policy
		Final Presentation (MPHP 690) - Each student will give an oral will be given on his/her research project. The presentation must include the background and purpose, methods, findings, conclusion and a public health policy recommendation.
		Project Multivariable Analysis Report (MPHP 690)- Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the previous project proposal with some modifications including a refinement of the Methods (multivariate analyses) and a Results section with relevant tables. Include unweighted and weighted analyses.

Project Stratified Analysis Report (MPHP 690)- Students will report on the results of the stratified analysis from their projects. This report will consist of an expansion of the prevent project proposal with some modifications including a refinement of the Methods (stratified analyses) and a Results section with relevant tables. Include unweighted analyses.	rious d

Table D4-1b Assessment of Competencies for MPH in Population Health for Clinicians Concentration

	MPH in Population Health for Clinicians view the documents located in D4 of	
Competency	Course number(s) and name(s)	Describe specific assessment opportunity ⁿ
1. Advocate for the use of evidence in decision making that affects the health of a community (e.g., helping policy makers understand community health needs, demonstrating the impact of programs)	MPTP 101 – Patients to Populations	Advocacy Project Proposal Presentations- Students will be assigned to teams of 5 and asked to choose ONE health indicator from their Community Health Assessment that most sparks the team's passion for advocacy. Each team will then be asked to develop a proposal for a community-based or policy intervention to improve health in Syracuse regarding this indicator. Teams will have 10 minutes (plus 5 minutes for questions) to convince their peers (one-third of the class) that the proposal can and should succeed.
Synthesize population health evidence from print and electronic sources to support clinical decision making	MPHP 655 - Advanced Epidemiology MPPH 203 – Foundations of Reasoning in Medicine (EBM)	Problem Set #4 (MPHP 655): Article Critique (MPHP 655)- This assignment will require students to practice epidemiologic methods. The problem set will individually assess students ability to apply the epidemiologic concept of causal inference.
		Study Design Project (MPHP 655): The study design project will require students to work individually or in pairs (dependent on course enrollment) to design an epidemiologic study around a clinical issue. The project will require students to synthesize the literature around their chosen issue and apply concepts discussed in class including study design, sampling and recruitment, threats to validity and how they will be minimized or addressed, measurement, and causal inference.
		Case Study (MPPH 203)- Students will participate in 17 case based learning assignments during the course. Students will discuss the cases during class and be evaluated on their assessment of the cases and their contribution to the small in-class group discussions.

3. Incorporate ethical standards of practice (e.g., Public Health Code of Ethics) into all interactions with individuals, organizations, and communities	CBHX 2400 Clinical Bioethics	Speaking Up Paper- Students are expected to write up their experiences speaking up about an ethical problem they encounter on a clinical service.
4. Interact with the larger inter- related system of organizations that influence the health of populations at local, national, and global levels	PRVM 6400 Population Health for Physicians	Public Health Agency Reflective Essay- Students will write a reflective essay about their public health site visit.
5. Evaluate and interpret the multitude and overlap of factors that impact the health of a community and health disparities	MPHP 649 Public Health and Biopsychosocial Primary Care	Reflection Assignments - Students will complete a 1 page response, including a reflective narrative, after each of 7 web video presentations.

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

This does not apply to the Upstate Medical University MPH Program.

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

The most recent syllabus for each course can be found in section D4-3 of the ERF and is separated by concentration.

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

The same strengths, weaknesses, and plans for improvement noted for the MPH Foundational Competencies apply to the MPH Concentration Competencies listed above. They are:

<u>Strengths</u>: Members of the Upstate Medical University MPH Program faculty and staff have spent countless hours developing the evaluation and assessment measures outlined in the table above. This table has been reviewed several times by the university's Student Learning Outcome Committee (SLOC) and changes have been made based on their review. Also, the program has made sure that the learning objectives of the program align with the learning objectives of Upstate Medical University as a whole.

Weaknesses: No Weaknesses to report at this time

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program will continue to work with the SLOC to review and improve our evaluation measures. In April 2019 our faculty met and decided to redesign may of our syllabi. Now all of the syllabi for the MPH Program show a clear link to the CEPH Competencies and how these competencies are covered and assessed.

D5. MPH Applied Practice Experiences

MPH students demonstrate competency attainment through applied practice experiences.

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

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

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

The applied practice experience is a major component of the MPH curriculum that requires students to spend a minimum of 200 hours immersed in various aspects of public health practice at a public health agency. The placement provides the opportunity to evaluate the degree to which students are able to integrate the knowledge and skills from their academic program into public health practice. Agency preceptors provide informal feedback regarding student performance through either in-person or email communication with the course instructor

The Applied Practice Experience is reviewed annually. The Upstate Medical University MPH Program faculty have reviewed the program's Applied Practice Experience during faculty meetings, Curriculum Committee Meetings, and faculty retreats. This process is still underway and the course syllabus is still being revised.

At this time, the Upstate Medical University MPH Program has identified the following five competencies as competencies that students should attain upon completion of their Applied Practice Experience:

Competency 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.

Competency 11. Select methods to evaluate public health programs.

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

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

Competency 22. Apply systems thinking tools to a public health issue.

Students are required to submit two work place product deliverables. The products need to be a useful product for the students' APE agencies. Each product is worth 5 points. Products can include but not limited to: brochures, PowerPoint presentations, and reports.

Competencies are assessed using several methods throughout the duration of the Applied Practice Experience and the course that goes along with it. These assessment measures are listed below and list the competencies that they have been mapped to.

- 1. Class Participation: Class participation plays a key role in the course. This includes individual participation and group participation; attending class is not enough to earn class participation. Students must read all assigned material prior to attending class and be prepared to participate in the classroom discussions and in-class activities. Class participation will be granted to students who actively participate (Competencies 6, 11, 20, and 22).
- 2. Mapping and Discussion Assignments: There is also a series of four discussion assignments that all students must complete throughout the course. The main goal of these assignments is for the students to show that they have achieved the course learning objectives and attained the competencies listed above. These assignments include:
 - 1. **Mapping from Silo to System**: Students must create a Conceptual Framework for the Public Health System that they are working in and summarize the map in text form (Competency 22).
 - 2. **Mapping the Program:** Students must create a logic model for the program they are working in, identify methods to evaluate the program, and summarize the map in text form (Competency 11).
 - 3. Culture and Client: Students must describe the importance of culture in communicating public health content to their clients (Competency 20).
 - 4. **Undermining Health**: Students must discuss structural bias, social inequity and/or racism that could undermine the health of their clients. Students must also answer the following questions: How might these issues affect health? How might you address these issues from an organization, community and/or societal level? (Competency 6)
 - Student Perspective: Students must identify a time at their field placement
 when they needed to negotiate and/or use mediation skills to address an issue.
 Students need to describe the issue and the applied negotiation and mediation
 skills used to overcome the problem (Competency 17).
- 3. **Social Determinants Essay**: All students are required to read the book *Can Anyone Hear Us?*: *Voices of the Poor* and write a reflection paper based on their reaction to the Public Health issues that the book addresses (Competencies 6, 20, and 22).
- 2) Provide documentation, including syllabi and handbooks, of the official requirements through which students complete the applied practice experience.

<u>General Process</u>: Each semester, the APE course instructor reaches out to former APE sites to determine if they are willing to take a student via survey monkey. While completing this survey questionnaire, preceptors will provide the program with a brief description of the job and responsibilities that students will have if they complete their APE at the preceptor's agency. This survey questionnaire also asks agencies to report who will be in contact with the students and the degree level of each of the individuals who will oversee the students. Students must be overseen by a preceptor who holds a Master's Degree or higher. There are certain exceptions where a student may be overseen by an individual who does not have a Master's Degree or higher if the preceptor has relevant practical experience.

After the sites have completed the survey questionnaire, the information regarding each APE is added to a spreadsheet that lists students APE options. Students participant in a mandatory seminar that gives them an overview of APE. After that seminar, students are given access to the APE database and can either: 1) Select an APE from the database; or 2) Find another APE, which must then be approved by the course instructor. If the students decide to select one of the APE options from the database that the Upstate Medical University Program provides, they will contact the site. Typically, sites will either select the first student who contacts them or interview

all of the students who contact them and then make a selection based on the interviews. After the students have found an APE site, they will inform the course instructor and officially sign up for the APE course.

<u>New Preceptors</u>: If a former APE site has a new preceptor, then the site must list the new preceptor and their qualifications. The APE course instructor will then review the preceptor's qualifications prior to approving the site's APE for that semester.

<u>New Sites</u>: When approving a new APE site, the course instructors will review the project that the site proposes. If the APE site is at a local agency, then the course instructors will visit the site in order to access the environment and make sure that the student will have adequate workspace. This is not always possible because students often select placements in other areas of the United States and in other countries. The course instructors will also review the new site's preceptors before a final decision is made.

Policies related to international Applied Practice Experiences:

Our Institute for Global Health application to participate in Ecuador or Kenya process includes:

- 1. 1-2 page statement of career goals and interest
- 2. Applicant CV, including level of Spanish proficiency if applying to Ecuador
- 3. Two academic references

All applications are due by Dec 15, emailed to GlobalHealth@Upstate.edu.

Once accepted into the program, students are placed with an Upstate faculty mentor and together we come up with a suitable project/applied practice experience based on past experience of the student, ongoing projects, and needs in-country.

Two weeks prior to travel students will have to turn in all required University forms and policy materials to the Global Health Portal on Blackboard. All students are required to complete Part 1 and Part 2 of the Practitioners Guide to Global Health online training materials through EdX, and complete part 3 (reflection) upon their return. https://www.edx.org/course/the-practitioners-guide-to-global-health

In addition to the online training we meet monthly with the students in the Spring semester to discuss projects, any questions they may have, logistics, etc.

If a student is going on a different international placement not through Upstate, then it is the APE Course Director's responsibility to review the opportunity and preceptor using the same guidelines listed above for reviewing new APE sites.

Additional documentation for the Applied Practice Experience can be found in section D5-2 of the ERF.

3) Provide samples of practice-related materials for individual students from each concentration or generalist degree. The samples must also include materials from students completing combined degree programs, if applicable. The program must provide samples of complete sets of materials (ie, Template D5-1 and the work products/documents that demonstrate at least five competencies) from at least five students in the last three years for each concentration or generalist degree. If the program has not produced five students for which complete samples are available, note this and provide all available samples.

Student deliverables for the Applied Practice Experience can be found in section D5-3 of the ERF. These deliverables are separated by which syllabus was being used (2018-2019 Syllabus-Students who took the Applied Practice Experience course in the fall 2018 or Spring 2019 and

Old Syllabus- Students who took the Applied Practice Experience course prior to the fall of 2018.). There are five student examples from the old syllabus, but only two from students who used the 2018-2019 syllabus because only one student took the Applied Practice Experience course in the fall of 2018 and one student who took the course in the spring of 2019.

There are no work examples using the new syllabus because it will be implemented for the first time in the summer of 2019.

In addition to revamping the course syllabus, course faculty began the process of linking the course deliverables to the 2016 CEPH revised competencies. The Upstate Medical University MPH Program is currently in the process of refining the course assignments, but a preliminary table showing the link between the competencies and the course assignments is shown in Table D5-3 below.

Table D5-3 Practice-based products that demonstrate MPH competency achievement

Practice-based products that demonstrate MPH competency achievement (All Concentrations)	
Specific products in portfolio that demonstrate application or practice^	Competency as defined in Criteria D2 and D4*
Mapping and Discussion Assignments (Five Total Deliverables)	1. Competency 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.
	2. Competency 11. Select methods to evaluate public health programs.
	3. Competency 17. Apply negotiation and mediation skills to address organizational or community challenges.
	4. Competency 20. Describe the importance of cultural competence in communicating public health content.
	5. Competency 22. Apply systems thinking tools to a public health issue.
Social Determinants Essay	1. Competency 6. Discuss the means by which structural bias, social inequities and racism undermine health and create
	2. Competency 20. Describe the importance of cultural competence in communicating public health content.
	3. Competency 22. Apply systems thinking tools to a public health issue.

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

<u>Strengths</u>: This course has been redesigned several times by the course director, Dr. Telisa Stewart, based on suggestions made by students and outside Applied Practice Experience sites. The Upstate Medical University MPH Program believes that the current version of the course provides students with the opportunity to gain the skills and competencies needed to be successful Public Health Professionals after they graduate from the Upstate Medical University MPH Program.

<u>Weaknesses</u>: The Upstate Medical University MPH Program's APE course director reviewed the syllabus after running the course in the fall and spring semester of the 2018-2019 academic year and concluded that a clearer link needed to be made between the course assignments and the CEPH Competencies.

<u>Plans for Improvement</u>: After the course has ran for the first time, the syllabus was reviewed and changes were made to the course assignments in order to make sure that the assignments for the course were clearly linked to the 2016 CEPH Competencies. The course will run for the first time using the revised syllabus in the summer of 2019. Upon completion of the spring 2019 semester, the syllabus will be reviewed and changes will be made as needed.

D6. DrPH Applied Practice Experience

Not applicable.

D7. MPH Integrative Learning Experience

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

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

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

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

Table D7-1 MPH Integrative Learning Experience

Table D7-1 MPH Integrative Learning Experience	
MPH Integrative Learning Experience	
Integrative learning experience (list all options)	How competencies are synthesized
Comprehensive Exam (For students who matriculated in Fall 2017 or later.)	How Competency Synthesis is Shown: The exam is comprised of four sections (Systems Thinking, Program Planning and Evaluation, Data and Analytics, and Health Policy and Administration) based on the 2016 CEPH Foundational Competencies. Each section will be weighted equally (22 points), with an additional 12 points based on quality of writing. Students are asked to synthesize the knowledge and competencies that they have gained throughout the program to respond to a real-life public health issue. The spring 2019 version of the Comprehensive exam synthesizes the following program competencies: P.1. Analyze data utilizing appropriate statistical methods and interpret results to address a public health issues or problem. P.7. Identify and assess social, cultural, economic and behavioral determinants of health outcomes and disparities. P.13. Apply principles of program planning, including design, implementation, budgeting and evaluation. P.14. Assess and recommend policies for improving the health status of populations using appropriate local, state and federal policy processes. P.15. Critically appraise the literature and apply appropriate analytical skills to public health practice. P.19. Apply core public health principles and

	scientific knowledge base to research, critical evaluation, and/or decision-making in public health.
Capstone (For students who matriculated prior to Fall 2017.)	How Competency Synthesis is Shown: Students who submitted a capstone project showed their ability to apply the competencies that they had gained while in the Upstate Medical University MPH Program by completing a public health related integrated project, writing a report, and then conducting an oral presentation of their work in front of an audience. This project reflects the highest level of skill integration and includes the synthesis of the following Competencies: Demonstrate the ability to communicate and disseminate information to an audience using a variety of information management technology and communication tools, Collaborate with key stakeholders in the planning, implementation, and evaluation of public health programs, policies, and interventions, Demonstrate how to appropriately address cultural competencies for a population, and Apply core public health principles and scientific knowledge base to research, critical evaluation, or decision making in public health.

The Capstone project is currently being phased out and students in the Upstate Medical University who matriculated in the Fall of 2017 or later will be required to take the Comprehensive Exam, which evaluates them on the 2016 CEPH criteria.

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

Comprehensive Exam (For students who matriculated in fall 2017 or later.)

<u>Process</u>: The Comprehensive Exam is offered to students in the Upstate Medical University MPH Program every semester. Students who plan on taking the exam will have access to review materials on the program's Blackboard Site at least two months prior to the exam. The final product for the Comprehensive exam will be a paper, which will be submitted via Blackboard. This exam was administered for the first time with the December 2018 Upstate Medical University MPH Graduates.

Expectations: All students in the Upstate Medical University MPH Program who matriculated in the fall 2017 or later are required to take the program's Comprehensive Exam. In general, students will take the Comprehensive Exam during the semester that they plan on graduating from the program. The students' final product is a written paper and must be written using the following guidelines:

- 1) 0.5" margins:
- 2) The report should be no more than 20 double-spaced pages in length;
- 3) Times New Roman 12 point font;
- 4) AMA format;
- 5) Contain page numbers;

- 6) Tables are not counted towards the page-limit and should be included at the end of the exam after the references:
- 7) Have a running header that includes the student's full name;
- 8) Written in the 3rd person.

<u>Assessment</u>: After the students have submitted their final exam it will be reviewed based on the Comprehensive Exam rubric. The faculty will use a double reviewer method which will involve two faculty members reviewing each final exam separately and then discussing each exam after they have completed their reviews to come up with a final grade for each students' Comprehensive Exam. A more detailed description of this process can be found in D7-4 of the ERF.

Capstone (For students who matriculated prior to Fall 2017.)

<u>Process</u>: The culminating experience (CE) is a requirement for graduation for all students who enrolled in the Upstate Medical University MPH Program prior to Fall 2017. The CE includes completion of 1) a capstone project, 2) a written product, and 3) an oral presentation and is designed to synthesize and integrate all of the public health theory, knowledge, and skills gained throughout the Upstate Medical University MPH Program curriculum. This course, completed in the final semester of the program, requires MPH students to take an organized, scholarly approach to a topic and to produce a publishable, quality final product relating to the outcomes of the project

Expectations: Table D7-2 outlines the expectations for the culminating experience capstone project.

Table D7-2 Expectations for the Culminating Experience Capstone Project

Narrative Guidelines	Expectations
Cover Sheet	Required
Abstract: Write a brief overview of your Capstone Project and the purpose of the project	250 Words: Summarize the capstone project. Use headings: Introduction, Hypothesis/Theory, Methods, Results, Discussion
Introduction	About 2-3 pages describing: Public Health issue, Population(s), Background and significance (literature review), Literature review clearly summarizes previous methodologies/strategies/interventions used and results/findings and implications for your project.
Hypotheses that guided the development of this project.	The student states a hypothesis. Such as: Unintended pregnancy increases the risk of perinatal depression; The uninsured are less likely to utilize preventive services; H0= Program participants did not see a significant change in outcome X; H1= Program participants saw significant change in outcome X.
Theory or model that guided the development of this project.	The student identifies a theory or model. Such as: Health Belief Model, Stages of Change, Ecological Model, etc.

Stakeholders: Who are the stakeholders and how will this project impact them?	Identify the different stakeholder(s) and/or the target audience
Methods: Describe the analytic method(s) you used.	Identify data sources and/or data sets, variables and analytic procedures.
Results: Report the results of the analysis. Use narrative with tables, charts, and figures to report the findings.	The student will describe their study population. For Quantitative projects, students will report bivariate and multivariate results. For Qualitative projects, students will report identified themes with corresponding examples. *Use peer reviewed journal articles as a template for presenting your results.

Assessment:

During the semester(s) while enrolled in the course, the student works with his or her faculty and community preceptor to complete his or her project. It is expected that both the faculty and community preceptors will work with the student in developing and implementing the project plan according to approved proposal.

Students are required to complete and submit a Midpoint Progress Report outlining the progress they have made on their capstone project. If students encounter any barriers to successfully completing the project, they can draw on the assistance of the capstone advisor, preceptor, other committee members, or the program coordinator to assist in facilitating a successful resolution.

Students are required to submit a draft of their completed written product to the capstone advisor at least two weeks before the oral presentation. The capstone advisor reviews the written product and provides recommendations for changes or improvements. Students may also choose to send a draft to other committee members for feedback prior to their oral presentation. Students must incorporate feedback into a final written product and submit it to the Capstone Committee one week after the completion of the oral presentation. Students are encouraged to submit their project papers for publication or presentation at regional or national conferences.

Students are also required to deliver an oral presentation at the completion of their project. This 20-minute presentation includes a 10-minute overview of the project and a 10-minute discussion of the impact of the project and related competencies. The presentation concludes with a 10-minute question and answer period.

Audience members are given an evaluation form to provide feedback about the presentation for each student presenter. These forms are collected by the program coordinator who then provides a summary report to the student and his or her capstone advisor within one week of the presentation.

Capstone Committee coordinates the assessment of the student's work. The capstone advisor, in consultation with the committee members, evaluates the student's proposal, written product, and oral presentation based on the established criteria for each capstone product and assigns a letter grade.

- 3) Provide documentation, including syllabi and/or handbooks that communicates integrative learning experience policies and procedures to students.
 - Documentation can be found in section D7-3 of the ERF and is separated by integrated learning experience (Capstone or Comprehensive Exam).
- 4) Provide documentation, including rubrics or guidelines that explains the methods through which faculty and/or other qualified individuals assess the integrative learning experience with regard to students' demonstration of the selected competencies.
 - Documentation can be found in section D7-4 of the ERF and is separated by integrated learning experience (Capstone or Comprehensive Exam).
- 5) Include completed, graded samples of deliverables associated with each integrative learning experience option from different concentrations, if applicable. The program must provide at least 10% of the number produced in the last three years or five examples, whichever is greater.
 - Student samples for the capstone project and Comprehensive Exam can be found in section D7-5 of the ERF. The Comprehensive Exam is graded on a pass/fail basis. Students may also receive honors. All students included in the ERF passed the Comprehensive Exam
- 6) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

<u>Strengths/Weaknesses</u>: At this time, it is still too early to tell what the strengths and weaknesses of the Comprehensive Exam will be because it is new in the 2018-2019 academic year and we have not had the opportunity to collect much outcome data. The faculty of the Upstate Medical University MPH Program have worked hard to create a Comprehensive Exam that will assess student learning and the students' abilities to apply the competencies that they have gained in the program.

<u>Plans for Improvement</u>: After the new Comprehensive Exam has been given to students in the Upstate Medical University MPH Program during the 2018-2019 academic year, the Upstate Medical University MPH Program faculty will meet to discuss the successes and challenges that they met while conducting the new exam. Based on their review, the program's faculty will determine if any changes need to be made to improve the Comprehensive Exam.

D8. DrPH Integrative Learning Experience

D9. Public Health Bachelor's Degree General Curriculum

Not applicable.

D10. Public Health Bachelor's Degree Foundational Domains

Not applicable.

D11. Public Health Bachelor's Degree Foundational Competencies

Not applicable.

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

Not applicable.

D13. Public Health Bachelor's Degree Cross-Cutting Concepts and Experiences Not applicable.

D14. MPH Program Length

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

Programs use university definitions for credit hours.

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

Upstate uses standard semester-defined academic credit units. The following table shows the minimum credit-hour requirements for both the Data and Analytics and the Population Health for Clinicians Concentrations of the MPH Program.

Table D14-1 Minimum Credit-Hour Requirements

Course Category	Total Credit Hours Required
Foundational Courses	24 Credits
Concentration Specific Courses	12 Credits
Electives	3 Credits
Applied Practice Experience	3 Credits
Total Credits:	42

Students in the joint MD/MPH program are required to fulfill the 42 credit requirement outlined above, in addition to completing the required coursework for their MD Degree.

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

As part of the State University of New York (SUNY) System, Upstate Medical University has adopted the Carnegie Unit as a measure of academic credit. One credit hour is defined as "an amount of work represented in intended learning outcomes and verified by evidence of student achievement." (http://ifap.ed.gov/dpcletters/attachments/GEN1106.pdf). Upstate offers a wide range of courses, from standard lecture format classes to field placements and practicums. While each college within the University reviews and approves their own curriculum, all of the colleges follow the same format that a standard credit hour is equal to fifteen 50-minute sessions of classroom time, with the expectation that students will spend approximately two hours per week on assignments outside of class.

D15. DrPH Program Length

D16. Bachelor's Degree Program Length

D17. Academic Public Health Master's Degrees

D18. Academic Public Health Doctoral Degrees

D19. All Remaining Degrees

D20. Distance Education

E1. Faculty Alignment with Degrees Offered

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

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

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

Table E1-1 Primary Instructional Faculty Alignment with Degrees Offered

Primary Instruct	Primary Instructional Faculty Alignment with Degrees Offered					
Name*	Title/ Academic Rank	Tenure Status or Classification^	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Concentration affiliated with
Gary Brooks	Associate Professor	Tenured	DrPH	SUNY Albany Boston University	Epidemiology Physical Therapy	Data and Analytics Population Health for Clinicians
Donald Cibula	Associate Professor	Tenured	PhD	Syracuse University	Biology (biostatistics; population biology concentrations)	Data and Analytics
Rachel Fabi	Assistant Professor	Tenure –track	PhD	Johns Hopkins	Health Policy and Management	Data and Analytics
Margaret Formica	Associate professor	Tenured	PhD MSPH	Boston University University of South Carolina	Epidemiology Epidemiology	Data and Analytics
Travis Hobart	Assistant Professor	Non-tenure- track	MD MPH	Tufts Johns Hopkins	Medicine General Preventive Medicine	Population Health for Clinicians
Christina Lupone	Instructor	Non-tenure- track	MPH	SUNY Upstate Medical University and Syracuse University	Public Health Practice and Policy	Data and Analytics
Christopher Morley	Associate Professor	Tenured	PhD MA CAS	Syracuse University Syracuse University Syracuse University	Social Science Public Administration Health Services Management and Policy	Population Health for Clinicians

Primary Instructional Faculty Alignment with Degrees Offered						
Name*	Title/ Academic Rank	Tenure Status or Classification^	Graduate Degrees Earned	Institution where degrees were	Discipline in which degrees were earned	Concentration affiliated with
Telisa Stewart	Associate Professor	Tenured	DrPH	Drexel University	Community Health and Prevention	Data and Analytics
			MPH	University of Massachusetts, Amherst	Health Policy and Management	Population Health for Clinicians
Dongliang Wang	Associate Professor	Tenured	PhD	SUNY Buffalo	Biostatistics	Data and Analytics
			MA	SUNY Buffalo	Biostatistics	
Martha Wojtowycz	Associate Professor	Non-tenure- track	PhD	Syracuse University	Economics (health and medical care; public finance concentrations)	Population Health for Clinicians
			MA	Syracuse University	Economics	

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

The Upstate Medical University MPH program has no other faculty with significant involvement in the program at this time.

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

CVs for all individuals listed in the templates above can be found in section E1-3 of the ERF.

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

Not Applicable.

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

<u>Strengths</u>: Faulty affiliated with the Upstate Medical University MPH Program come to the program with a wide range of interests and expertise. Our program has a good mix of faculty with MPH degrees, PhDs, MDs, and DrPH who have expertise in both research and applied practice. This allows students in the Upstate Medical University MPH Program to gain knowledge from a wide range of fields associated with Public Health and exposes them to the many different ways that they can apply their degree.

<u>Weaknesses</u>: No weaknesses in this area have been identified at this time. The Upstate Medical University MPH Program is currently staffed with a diverse group of faculty, both in terms of

experience and knowledge, who are able to provide our students with superior, well-rounded instruction.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program will continue to recruit a diverse group of faculty that have a wide range of expertise and interests. Additionally, the Upstate Medical University MPH Program faculty will continue to invite practitioners to give lectures and conduct activities during class meetings. By inviting practitioners to come in and give lectures, student will be exposed to even more information and first-hand practical knowledge.

E2. Integration of Faculty with Practice Experience

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

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

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

The faculty members in the Upstate Medical University MPH Program have a rich mosaic of public health practice. While all of these members hold graduate degrees, their work experience is woven into course content, which allows for real world experience to illustrate concepts. Faculty within the program regularly introduce experience from their practice into the courses that they teach. The Program Director, Dr. Wojtowycz works closely with the Onondaga County Department of Health and evaluates many of their programs. She currently serves on several projects with the department including the Health Equity Focused Community Coalition which identifies health disparities that exist in the community and helps to facilitate a community-based approach to how these disparities are addressed. Dr. Wojtowycz also was involved in a quality improvement project called the Healthy Start Interconception Care Learning Community (ICC-LC). She used this project as an example for her students in MPHP 607: Public Health Administration. Also, in her former role as the Director for Research and Administration for the Center for Maternal and Child Health, Dr. Wojtowycz gained extensive experience in budgeting and resource management. She uses these experiences as examples while teaching MPHP 607.

Dr. Brooks, the director of the Population Health for Clinicians concentration also has a background in physical therapy. He uses his experience in the field of physical therapy to inform students in the Population Health for Clinicians concentration about public health practice.

Finally, Dr. Travis Hobart is a Pediatrician and uses his experiences working with children in the course that he teaches. He also helps to lead the emergency preparedness training that all MPH students are required to take part in. During this simulation activity, he uses his field experience to help students in the training to come up with solutions to solve a real-life emergency and to experience inter-professional practice.

In addition to the practice experience that students in the Upstate Medical University MPH Program are exposed to through their contact with faculty, students are also exposed to practitioners during their Applied Practice Experience and at Grand Rounds. During their field placements, students get hands on experience in the field of public health and learn from the individuals working at the agencies and organizations that they are assigned to. Additionally, every year the program brings a wide variety of individuals to speak at the Grand Rounds lectures. These individuals come from many different backgrounds and areas within the field of public health and are able to share their experiences with the students who attend these lectures. For example, Boris Lushniak, MD/MPH, Dean of the University of Maryland School of Public Health and former Acting Surgeon General of the United States, shared his experiences in preparing the Surgeon General Report on 50 years of progress on smoking cessation. He also spoke about the efforts on the Ebola outbreak in West Africa.

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

<u>Strengths</u>: The Upstate Medical University MPH Program has many faculty that have field practice experience that they are able to apply to the courses that they teach. The program also brings in other experts in the field of public health through Grand Rounds to give students additional exposure to perspectives from the field of practice.

<u>Weaknesses</u>: The Upstate Medical University MPH Program does not currently have someone on staff whose primary affiliation is with an outside organization within the field of health.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program will continue to expose its students to field practice experiences in the courses that are offered, Grand Rounds Lectures, and their Applied Practice Experience. The program will also assess whether or not we are able to recruit a public health professional within the community to teach one of the courses that we offer.

E3. Faculty Instructional Effectiveness

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

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

The program supports professional development and advancement in instructional effectiveness.

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

The program informs all faculty, both primary and non-primary, via email and at faculty meetings of public-health-related conferences, training opportunities, and other developmental resources. During faculty meetings, both primary instructional and non-primary instructional faculty are also made aware of any changes that have been made to department and university policies and procedures so that they remain up-to-date. Additionally, faculty members are encouraged to join local, state, and national public health associations and attend their meetings. Each department in which faculty reside provides funding for faculty to participate in professional development meetings and conferences. This is negotiated with the chair and is included in their appointment letter.

Upstate Medical University also offers the Build Excellent Skills for Teaching (BEST) Program. BEST Workshops are offered each academic year in fall and spring (October and May). During these one-hour long workshops faculty have the opportunity to improve their skills in the topic area covered during that workshop. Topic areas include providing effective feedback, creating a positive learning environment, actively engaging learners, and delivering an effective presentation. The workshops will involve discussion among the entire group, small group activities, and several handouts to take away for future reference.

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

At the program level, the Chair of the Department of Public Health and Preventive Medicine meets annually with faculty to review their performance.

Course Evaluations

All courses are monitored through an anonymous online student evaluation completed at the end of the semester. A personalized announcement and several reminders are sent to students both before deployment and while the evaluation is active. All courses that need to be evaluated appear as a reminder on their personal MyUpstate page. All course directors have been encouraged to do anonymous mid—course evaluations to evaluate the need to make course adjustments.

Course directors are expected to review their own course evaluations in a timely manner and use them to improve future courses. They include the evaluation information in the 360° Faculty Course Evaluation done at the completion each course. Substandard ratings are defined as scale score below 3 on a 5 point Likert scale. In addition, the MPH Director, Associate Director, and Department Chairs have access to the course evaluations and use the results on an ongoing basis to monitor course quality and faculty performance. A course director who receives substandard evaluations meets with the Department Chair and develops an action plan to address the issue(s).

In addition, students are encouraged to discuss course-related issues with the course director, program coordinator, MPH program director, MPH associate director, and student representative(s) at any time. Every effort is made to address issues in a timely manner satisfactory to all parties.

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

The Office of Faculty Affairs at Upstate Medical University provides faculty with professional development opportunities to assist them in enhancing the learning environment. The office provides services which include:

- Workshops and seminars on new pedagogies and technologies.
- A monthly Health Educators' Journal Club
- A monthly Faculty Development presentation on topics in health professions education
- Peer mentoring program named TEMPO (Trusted Experienced Mentors Promoting Others)
- EdTalks@Upstate videos providing knowledge relevant to teaching and improving educator skills

The Office of Faculty Affairs also produces a semi-annual e-newsletter called *The Faculty Commons* to share faculty achievements. Additionally, the Office of Educational Communication provides consultation to faculty about various aspects of curriculum development and instructional project management. This office provides Blackboard training to help instructors build their courses, develop web-based exams, prepare PowerPoint for web delivery, and digitize audio and video for use in PC or Mac. All of the above are available to both full-time and affiliated faculty. Also, the Academy of Upstate Educators has developed a teaching consultation service that provides peer review of teaching on an as needed basis.

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

The College of Medicine Standards Document, Process for Promotion and Tenure Considerations, approved by the dean effective August 19th, 2015, outlines the process for faculty review. All faculty affiliated with the department are reviewed according to the time line established on their appointment, which can be annually or up to every three years. The department chair and the full-time faculty member sign an Agreement of Academic Expectations (AAE) at the time of faculty hire. Subsequently, there is an annual performance review, using the AAE, between the chair and each faculty member to discuss the past year's performance and any changes in contribution the faculty member could make to the department. It also allows for discussion of skills, research, and scholarship focusing on teaching, professional development, and university and community service. The faculty member is required to provide evidence of performance (i.e., teaching evaluations, papers given or published, grants applied for or received, and new course offerings), which the chair reviews and discusses with the faculty member. This annual review allows tenured and tenure-track faculty who have not achieved all promotions to accumulate performance evidence. A similar AAE process is completed for affiliated faculty. The completed AAEs are sent to the senior associate dean for faculty affairs and kept in the departmental faculty file.

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

Faculty Currency

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

The Upstate Medical University MPH Program has a curriculum committee that annually reviews the material taught in each of the courses that we offer to our students every semester. If changes related to currency need to be made, then the curriculum committee will bring these changes to the attention of the course instructor. If a change needs to be made at the program level, rather than at the course level, then the change will be addressed at a meeting of the Faculty Council and all program faculty with voting privileges will vote on whether or not to accept the change. An example of this would be if a course director wishes to add an additional prerequisite requirement to one of the courses that they teach.

Faculty Instructional Techniques

Student satisfaction with instructional quality

Student satisfaction with instructional quality is measured every year through the student survey that is conducted by students in the Upstate Medical University MPH Program. The table below shows the students' satisfaction rating of their "Overall Classroom Experience" from 2015-2017.

Table E3-5a Student Satisfaction Ratings (2015-2017)

	Table 20 da Gladetti Galistaciioti Malingo (2010 2017)						
	POOR	FAIR	GOOD	EXCELLENT	N/A	TOTAL	
						RESPONDENTS	
2015	0.00%	6.90%	37.93%	58.62%	0.00%		
	(0)	(2)	(11)	(17)	(0)	29	
2016	0.00%	5.71%	40.00%	54.29%	0.00%		
	(0)	(2)	(14)	(19)	(0)	35	
2017	0.00%	11.11%	37.04%	51.85%	0.00%		
	(0)	(3)	(10)	(14)	(0)	27	

Students are also asked if they felt that the MPH Program would help them to meet their long-term career goals. The table below shows students responses to this question from 2015 until 2017.

Table E3-5b MPH Program Link to Students' Career Goals

Table L3-3b Wi 111 Togram Link to Students Career Goals						
	YES	NO	TOTAL			
			RESPONDENTS			
2015	96.55%	3.45%	29			
	(28)	(1)				
2016	96.7%	3.03%	33			
	(32)	(1)				
2017	96.15%	3.85%	26			
	(23)	(3)				

Overall, students appear to be satisfied with the instruction that they receive while they are in the Upstate Medical University MPH Program. In addition to the responses that they provided to the questions above students also discussed their satisfaction with instructional quality in their responses to the open-ended questions that were part of the survey questionnaire. Students reported that they felt that faulty were very accessible and had a lot of knowledge about the content that they taught and the field of public health in general.

Student satisfaction with instructional quality is also measured through course evaluations that are conducted every semester. The table below reflects average rating across all courses within the department from the course evaluations for the last three semesters. Upstate Medical University MPH

students were asked to rate their instructor's overall performance in the course, using a 5-point Likert scale were 5 was Excellent and 1 was Poor during the fall of 2017 and spring of 2018 and using a 4-point Likert scale in the spring of 2017.

Table E3-5c Student Ranking of Their Instructors' Overall Performance

	Spring 2017	Fall 2017	Spring 2018
Overall, how would you	3.35	4.135	4.06
rate your instructor's	(52*)	(123*)	(63*)
performance in this			
course?			

*Note: The Ns listed in the table above represent the total number of responses for the semester, students may have responded more than one time if they were enrolled in several courses during a semester.

Program-Level Outcomes

Implementation of grading rubrics

Since the new competency standards were put into place in 2016, our program has worked diligently to insure that the grading rubrics for the courses that we offer are measuring the new competencies. This process has involved each professor reviewing the content for the courses that they teach and making sure that the course content aligns with the new competencies. Professors have also gone through all of their assignments and created new and revised rubrics to show students what aspects of each of the assignments aligns with the competencies that the course sets out to cover and what demonstrates proficiency in each of the competency areas.

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

<u>Strengths</u>: The Upstate Medical University MPH Program has a history of striving to make sure that student input is always included it the evaluations that occur in our department and this is something that we plan on continuing in the future.

Based on student feedback, it appears that our faculty is effective and students are pleased with the instruction that they are receiving while they are in the course.

The program has created new course syllabi and grading rubrics that align with the new competency standards were put into place in 2016.

<u>Weaknesses</u>: At this time, while the program does have a method for reviewing curriculum as a group, the program does not have a system of individual peer-to-peer review of course materials and syllabi.

Plans for Improvement: The Upstate Medical University MPH Program's Evaluation and Accreditation Specialist is researching new methods for reviewing course materials and syllabi. In the spring of 2019, she met with a staff member in the College of Nursing at Upstate Medical University to discuss the evaluation methods that they use. The College of Nursing's evaluation methods are seen as the gold standard and ahead of the curve compared to other programs at Upstate Medical University. The Evaluation and Accreditation Specialist is currently in the process of determining if the methods used by the College of Nursing can be applied to the MPH Program.

E4. Faculty Scholarship

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

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

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

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

Upstate Medical University defines proficiency in research as completing research projects and publishing the results that have been collected on a regular basis. Upstate defines regular reporting of research findings as, on average, at least an annual dissemination of research findings for those individuals who have at least 20% of their time committed to research. Upstate suggests that the majority of this reporting should be done in peer-reviewed journals. For other faculty with less than 20% of their time committed to research, research proficiency can be demonstrated through publications, published abstracts, book chapters, scholarly presentations, and mentorship of trainees in their research projects.

At the program level, the Department chair works with all faculty to create an individual Annual Agreement of Academic Expectations. This statement is created with the goals and research focus of each individual faculty member and is updated yearly. Additionally, it is reviewed when faculty are going through the promotion and tenure process. With the AAE, the chair currently allocates 20% FTE to each faculty member for independently developed research or scholarship. Individual goals are assessed annually. The 20% allocation may be altered (either decreased or expanded) as the faculty member obtains external funding, takes on new roles within the department or organization, and so forth. The intention of this 20% allocation of time is for each faculty member to be able to pursue their own research agenda, developing new collaborations and completing scholarly work output.

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

Upstate Medical University prides itself with having a well developed research infrastructure, including offices of Sponsored Programs (pre- and post-award support), Technology Transfer, and Industry Relations, Research Integrity, and an active Institutional Review Board. In addition, Upstate Medical University participates in the Collaborative Institutional Training Initiative (CITI) program, a web-based training program in the conduct of human subject research; this training is mandatory for all faculty, staff, and students participating in human subject research at the institution. The CITI program also includes training in the responsible conduct of research (covering basic science research), as well as conflict-of-interest issues. Additionally, Upstate has written documentation (e.g., faculty manuals, policies) and periodic seminars or programs to describe and update faculty on research support services and important issues in the conduct of research.

MPH Program faculty also have access to research support services made available by the Office for Faculty Development at Upstate Medical University. The Office for Faculty Development at Upstate offers seminars on instructional tools for the classroom such as the Faculty Toolbox Workshop; faculty mentoring programs also are offered, which address issues such as grant writing, scientific presentations, and work-life balance. The university's mentoring program is

called TEMPO (Trusted, Experienced Mentors Promoting Others) and pairs junior faculty with senior faculty for a one year period.

The Research Development Office at Upstate Medical University provides a weekly update of funding announcements from government sources, from both local and national private foundations, and from intramural funds; staff members are available to help MPH faculty find an appropriate funding source for their ideas. Upstate Medical University is also part of the Hill Collaboration in Syracuse, which is designed to stimulate research in the area of how environmental factors contribute to major human diseases. This collaborative endeavor brings together researchers in environmental health with a focus specifically on diabetes, neuroscience, and cancer.

Research support services at Upstate Medical University also include several Research CORE Facilities for both laboratory-based research and clinical research; these include the Clinical Research Unit and the Center for Research and Evaluation (CRE), a biostatistics-epidemiology methods group housed within the Department of Public Health and Preventive Medicine, and several basic science CORE facilities (e.g., microarray, proteomics). CORE facilities foster collaborative research within Upstate Medical University and across institutions in Syracuse (e.g., with SU, SUNY ESF), across New York State, and both nationally and internationally. CORE facilities also provide in-house expertise, which enhances the institutional research environment and helps with recruitment and retention of faculty.

Domestic travel funds are available to Upstate Medical University MPH faculty with primary appointments in PHPM. Travel is generally limited to those faculty attending conferences with accepted presentations. There are certain cases when domestic travel funds can be used for travel outside of conferences. This can include travel for research collaborations at sights other than Upstate Medical University and travel to professional development seminars. Approval for the use of domestic travel funds will be on a case-to-case bases and will be at the discretion of the chair of the Department of Public Health and Preventive Medicine. However, this has not typically been a major issue. One example of support for non-conference travel is when a potential grant opportunity to do public health development work in Haiti emerged, in collaboration across a number of SUNY institutions. The chair funded travel for Dr. Telisa Stewart to travel to a planning meeting at Stony Brook University.

- 3) Describe and provide three to five examples of faculty research activities and how faculty integrate research and scholarly activities and experience into their instruction of students.
 - 1) In 2017, Dr. Stewart worked with the Center for Global Health & Translational Science (CGHTS) to help create an academic collaboration in Kenva. The Kenva-Collaboration brings together Upstate Medical University and the U.S. Army Medical Research Directorate (U.S. Military, U.S. Military Medical Research and Materials Command, Walter Reed Army Institute of Research (WRAIR), US Army Medical Research Directorate (USAMRD)). The intent of this collaboration included four major domains: 1. To support research, 2. To use program planning and evaluation to target behavioral interventions, 3. To develop bi-directional learning between Upstate Medical University and USAMRD, and 4. To provide needed services to the Kenyan population (medical and public health). The two major initiatives driven by the CGHTS include: 1) Lab-based research; and 2) Health and Demographic Surveillance System (HDSS). Lab-based research is driven by the CGHTS and western Kenyan colleagues. This research examines: 1) infectious disease dynamics between pathogens/host/population; 2) patterns of drug resistance; 3) disease emergence and burns; 4) novel diagnostics tools appropriate for rapid assessment in the field; and 5) the design and implement drug and vaccine trials. While working on this project, Dr. Stewart identified applied learning opportunities for Upstate Medical University MPH students. These experiences map directly to the CEPH competences in global health, interprofessional education (IPE), systems thinking, cultural competencies, public health and healthcare

- system, planning and management to promote health, and evidence-based approaches in public health.
- 2) Dr. Wojtowycz works closely with the Onondaga County Department of Health and uses her experiences working with the Department of Health in the courses that she teaches. In October of 2018, Dr. Wojtowycz talked about her experience with the Healthy Start Interconception Care Learning Community (ICC-LC) in her MPHP 607: Public Health Administration course. While talking about the Healthy Start Interconception Care Learning Community (ICC-LC), Dr. Wojtowycz discussed quality improvement plans and provided a real life example related to what the students were learning about in the course.
- 3) Dr. Wojtowycz also uses examples from her publications on topics such as study design, finding a data set, and disseminating findings while teaching her Public Health Research Methods course.
- 4) Dr.Fabi conducts research related to Immigrant and refugee healthcare. She previously worked at the Office of Immigrant Health at the Maryland State Health Department, where she worked for the State Refugee Health Coordinator. More recently Dr. Fabi has worked on a project titled Determining the number of Refugees to Resettle in the U.S.: An Ethical and Human Rights Analysis. While working on this project, Dr. Fabi and her co-investigators analyzed both policy and ethical questions about the criteria used to determine the number of refugees admitted to the US each year. Dr. Fabi's work on this project as well as he experiences working at the Office of Immigrant Health and her work with immigrant health in general informed class discussions in the public health policy class that she teaches.
- 4) Describe and provide three to five examples of student opportunities for involvement in faculty research and scholarly activities.
 - 1) Dr. Morley has been funded by the New York State Department of Health (via their contracting public benefit corporation, Health Research Inc.) to conduct practice facilitation activities at safety-net/underserved primary care practices in the Syracuse, Rochester, and Buffalo areas, aimed at increasing screening rates for colorectal, breast, and cervical cancer, since 2012. Since that time, several students have been integrated into the project as data managers and research assistants, including Sarah Evans (MD/MPH 2015), Aaron luppa (MD/MPH 2016), Amanda Ghanie (MPH/Medical Scholars 2017), and Anna Prince (MPH 2018).
 - 2) While working on her research project with the Center for Global Health & Translational Science (CGHTS) in Kenva. Dr. Stewart helped to created two student-driven educational opportunities that will allow the students to apply their training from research methods (qualitative and quantitative) and program planning and evaluation through the use of the live HDSS data. The first research opportunity was an independent study with a Upstate Medical University MPH student that specifically used the HDSS 'live data' to create a culturally sensitive behavioral intervention. The student developed a feedback loop with our Walter Reed Kenyan counterparts to ensure the intervention remains culturally sensitive and relevant to the Kenyan communities we seek to serve. The second research project uses funding from a SUNY Performance Improvement Fund award that will support Upstate Medical University MPH students to travel to Kenya and directly experience the HDSS data collection system. One student, from the Upstate Medical University MPH Program, and the Department Administrator for PHPM (who is also a part-time Upstate Medical University MPH student) traveled to Kenya in August 2018. The full-time student engaged in field placement work, and the Department Administrator represented the Chair in exploring learning and research opportunities, as well as engaged in the acquisition of field placement credit in her off-hours.
 - 3) Dr. Formica has a joint appointment in the Department of Urology at Upstate Medical University. Through that appointment, Dr. Formica has had the opportunity to mentor medical students in the Department of Urology and MPH students who were interested in urology related research. These mentorships have led to several publications for the students whom she mentored.

- 4) Most recently, the Curriculum Committee approved a new elective, Research & Writing for Public Health, which is designed to be a 1-on-1 experience in which the student works individually with a faculty member to produce a peer-review quality manuscript. The course was designed by Dr. Morley, and most faculty have a section assigned to them. Students may either propose a project of their design, or may integrate into an ongoing project directed by the faculty member.
- 5) Describe the role of research and scholarly activity in decisions about faculty advancement.

Upstate Medical University has policies in place for evaluating faculty annually based on teaching, research, and service activities. The purpose of the review is to ensure that faculty are meeting their short-term goals and objectives and making steady progress in achieving their overall career goals within the broader scope of the institution. At Upstate Medical University, the department chair and faculty member meet to discuss academic accomplishments of the past year and expectations and goals for the future in the areas of research, teaching, and service (including community service). The time commitment devoted to each of the three areas varies somewhat for individual faculty, based in part on tenure/non-tenure track status, academic rank, expertise, teaching load, and other responsibilities or obligations both within and outside the institution.

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

Table E4-6 Outcome Measures for Faculty Research and Scholarly Activities

Outcome Measures for Faculty Research and Scholarly Activities						
Outcome Measure	Target	2016	2017	2018		
Number of articles published in peer- reviewed journals	10 Per Year	20	14	13		
Total research funding (Direct and Indirect)	\$200000.00 Per Year	\$192,935.65	\$209,702.63	\$422,660.14		
Number of grant submissions	3 Per Year	5	3	6		
Number of IRB Applications submitted	10 Per Year	9	14	13		

A complete list of faculty publications can be found in section E4-6 of the ERF.

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

<u>Strengths</u>: The Upstate Medical University MPH Program faculty are very involved with Public Health Research. They regularly submit IRB applications and share the work that they do by presenting at conferences and submitting articles to peer-reviewed journals. Additionally, they share their knowledge and expertise regarding public health research by mentoring MPH students who are interested in conducting research through courses and inviting them to collaborate on research experiences outside of the classroom.

<u>Weaknesses</u>: The Upstate Medical University MPH Program has a strong research and scholarship program, so no weaknesses were identified in this area at this time.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program faculty will continue to conduct public health related research and scholarship and apply for grant funding for projects that support projects that promote program's mission, vision, and goals.

E5. Faculty Extramural Service

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

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

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

At Upstate Medical University, service is defined as service to the "Department, University, Region, State, Nation or World". To be considered service, an activity must involve medical, basic science, or related expertise. Faculty service is measured through documentation of the service and positive reviews from peers and supervisors. Additionally, faculty members must seek reviews from the individuals receiving the service or from colleagues with information and expertise regarding the service that was performed.

The Upstate Medical University MPH Program uses the definition and expectations laid out by Upstate Medical University for faculty service activities. While faculty are encouraged to participate in extramural service activities, the Upstate Medical University MPH program does not have a minimum requirement for extramural service at this time. However, all faculty do have 5%-10% of their effort dedicated to service of some kind, whether intramural or extramural.

Describe available university and program support for extramural service activities.

At the program level, extramural service is supported through the same several potential sources of funding that were discussed in Section C1 that support Faculty Development Expenses. These funding sources include:

- The Department Development Fund, or DDF. This source of funding is allocated to the department based upon faculty sale of service on grants and contracts. These funds may be used for travel, hiring research assistants, supplies or software, etc.
- Faculty Development Funds, or FDF. Each faculty member who participates in extramurally-funded grant or contract activity receives a portion of their sale-of-service funds into an account for their use. These funds are similar to the DDF, but are managed by the individual faculty member.
- The Public Health & Preventive Medicine Fund and the Dracker Fund for Public Health Education, composed of donor-supplied funds housed at the Upstate Foundation. These funds are fairly flexible, with the Dracker Fund specified for projects that benefit students...
- State Other-than-personnel-services (OTPS) or Research Foundation funds, allocated on an annual basis to the department.
- Individual sponsored program grants or contracts, as applicable.

If there is a project or service opportunity that requires funds, and the individual faculty member has neither enough FDF or appropriate sponsored program funding to support the project, then the faculty member is required to ask the Department Chair for funding if they would like to receive money from one of the other sources.

Additionally, the program supports faculty extramural service by providing travel funding so that they are able to participate in conferences and activities associated with their membership in Public Health organizations and societies.

- 3) Describe and provide three to five examples of faculty extramural service activities and how faculty integrate service experiences into their instruction of students.
 - 1) Dr. Formica and Dr. Morley began assessing the issue of gun violence at the local level from an epidemiologic perspective in early 2016. The following November, a national working meeting of public health educators and experts in gun violence was convened to develop an agenda for action for academic public health professionals around the issue of gun violence prevention, and Dr. Formica was sent as the Upstate Medical University institutional representative. The output of this meeting resulted in two publications from Dr. Formica, as well as an invitation to present at the Association of Schools and Programs of Public Health (ASPPH) Annual Meeting in 2017. As a follow-up to the ASPPH presentation, Dr. Formica was invited to submit a proposal to develop curricular resources around the issue of gun violence for broad use among graduate schools and programs of public health.
 - 2) Dr. Wojtowycz participates in the Healthy Families Advisory Board and is an active member of the Onondaga County Health Equity Coalition. She uses her experiences on these committees to discuss the various strategies used to involve the community in the Community Health Assessment Process.
 - 3) Dr. Formica and Dr. Stewart have also been researching the Utilization of Peer Assessment in Graduate Public Health Courses and sharing the information that they collect with other Public Health professionals. In the fall of 2016, Dr. Formica designed and implemented an innovative peer-review technique (based on evidence-based educational pedagogy) to a semester-long research project that incorporates individual assignments; these assignments are steps to a final paper and presentation. The peer-review process included student written reviews of their peers' individual assignments associated with the research project, as well verbal discussion of the reviews in a group setting. Both student and instructor evaluations of the peer-review technique were extremely positive, and led to an academic presentation at the annual meeting of the national organization, Association for Prevention, Teaching and Research (APTR) in March 2016.
 - 4) Dr. Wojtowycz chaired the Community Wide Perinatal Substance Abuse Committee for many years. She uses her experience to apply the example of the opioid crisis to core public health function and essential services, selection of community health priorities, and systems thinking.
- 4) Describe and provide three to five examples of student opportunities for involvement in faculty extramural service.
 - MPH students under the supervision of Dr. Wojtowycz analyzed local population-based data on factors associated the substance use during pregnancy and reported on these during a meeting of the Community Wide Perinatal Substance Abuse Committee.
 - 2) In 2017, Dr. Stewart served as the Principal investigator on the "Women's Health Education Navigation (WHEN) project," housed at the Center for Court Innovations, and focused on women in the criminal justice system serving a very vulnerable and disadvantaged population. The Center for Court Innovation sough support in the area of program evaluation including providing data that would enhance their applications for additional funding. The grant award focused on program evaluation designed to demonstrate the impact of patient navigation on the health of women, pregnancies, and their babies while incarcerated and/or part of the justice system (women and their children in society but regularly engaged with the justice system). This funding supported one paid MPH student project evaluator to assist in conducting the project evaluation. The student met with Dr. Stewart and with our community partners regularly for a year to complete the evaluation. The evaluation had four major deliverables: a comprehensive review of the scientific and social science literature on criminal justice-involved women and their health care outcomes, the identification of funding sources to build a business model for WHEN, creating and analyzing evaluation metrics, and the development of a sustainability plan.
 - 3) Dr. Wojtowycz supervised an MPH Student while the student researched policies on screening for substance use and abuse during pregnancy. The student then prepared a

report with recommendations for universal screening. The report was presented to the Policy Committee at the tertiary medical center which revised it and then disseminated it as a recommendation to all affiliate hospitals in the catchment area.

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

Table E5-5 Data Relating to Three Meaningful Indicators to Service for the Department

Outcome Measures for Faculty Service						
Outcome Measure	Target	2016	2017	2018		
Public/private or cross-sector partnerships for engagement and service	2 Per Year	4	4	4		
Percent of faculty participating in extramural service Activities	100%	100%	100%	100%		
Faculty appointed on a professional practice track	10 Per Year	11	14	14		

Examples of Public/Private or cross-sector partnerships for engagement and service from 2016-2018:

- 1) Onondaga County Health Start, Evaluation Lead (Dr. Wojtowycz)
- 2) WHEN Grant (Dr. Stewart)
- 3) Simone Seward's engagement with the Onondaga County Drug Task Force
- 4) Dr. Morley and Dr. Formica's engagement with Gun Violence and the Violence Education Prevention Outreach Program (VEPOP).

Faculty appointed on a professional practice track

Upstate Medical University does not employ a single "professional practice" track for its faculty. Rather, faculty are employed or appointed in a variety of ways:

- 1. NYS Tenure Track/Tenured faculty
- 2. NYS non-Tenure eligible
- 3. **Adjunct Faculty** faculty hired for a short, time and task limited period (e.g. to teach an individual class)
- 4. Affiliated Faculty- Employees with non-faculty paid positions, but additional faculty appointments
- 5. **Voluntary Faculty** non-employees who serve as partners in Applied Practice Experience Preceptors, research partners, or in other collaborative capacities

We consider professional practice track to be essentially similar as our affiliated and voluntary track faculty.

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

Excellence in community service is not usually an acceptable base for promotion or tenure at Upstate Medical University. In rare cases, service that goes above and beyond what is normally seen by faculty may be used as the basis for promotion to associate professor. In those rare cases, the faculty member should have obtained funding support for the service through contracts, grants, or significantly increased revenues. National recognition for the service that

was performed could also serve as the basis for promotion to professor, but situations where this would occur are very rare.

The Upstate Medical University MPH Program follows the same guidelines established by the College of Medicine at Upstate Medical University regarding faculty promotion and tenure.

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

<u>Strengths</u>: The Upstate Medical University MPH Program faculty are involved with many extramural service projects at the local, state, national, and global level. Not only do these projects help the communities that are being targeted, they also provide an excellent learning opportunity for students in the Upstate Medical University MPH Program.

<u>Weaknesses</u>: Currently, there is a lack of a clear definition of what is included as extramural service at Upstate Medical University. This makes it challenging to track extramural service and talk about it with other programs throughout the university because not everyone is on the same page.

<u>Plans for Improvement</u>: Moving forward, the Upstate Medical University MPH Program plans on coming up with a clear definition extramural service is. After clarifying our own definition of extramural service, the Upstate Medical University MPH Program would like to work with other programs and departments at Upstate Medical University to develop a common definition of extramural service that can be used throughout the university.

F1. Community Involvement in Program Evaluation and Assessment

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

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

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

Formal Structures for Constituent Input

In the past, the Upstate Medical University MPH Program has engaged with community stakeholders via the Community Advisory Board. This organization met regularly and included both individuals from the surrounding community and student representatives. The Community Advisory Board has not had any formal meetings in recent years, in part related to the separation of sponsorship by the two universities. During the fall 2018 semester, the Upstate Medical University MPH Program began taking steps to reestablish the Community Advisory Board based on the Upstate Medical University MPH Program's needs now that it is a stand alone program. These steps include:

- Defining the Program's Communities of Interest. These communities were identified through the use of a Group Concept Mapping exercise. The Group Concept Mapping exercise is explained in more detail in Section F3 of this report.
- 2. **Identifying Potential Members**. Upstate Medical University MPH Program leadership drafted a list of potential Community Advisory Board members.
- 3. **Finalizing the Member List and Reaching out to Potential Members**. The Upstate Medical University MPH Program refined the list of potential members that was drafted. Once the list was finalized, the program reached out to the potential members and asked them to participate in the Community Advisory Board.
- 4. **Meeting**. Once the Community Advisory Board (CAB) has been established, the Upstate Medical University MPH Program will begin to schedule meetings for the board. The Upstate Medical University MPH Program's goal is to have the board begin meeting in the spring of 2019.

Informal Structures for Constituent Input

While there have been no formal meetings of the Community Advisory Board in the past 3 years, Upstate Medical University MPH leadership and faculty members had many informal discussions with key stakeholders, such as local health service agencies, about the state of the program and about their workforce needs.

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

The Upstate Medical University MPH Program engages external constituents in regular assessment of the content and currency of public health curricula through our involvement in the university's Student Learning Outcome Committee (SLOC). This committee meets monthly and reviews the student learning outcome measures for all of the departments within the university.

The program was recently reviewed by SLOC and is in the process of making changes based on the committee's feedback.

Members of the Upstate Medical University MPH Program faculty also have regular, informal conversations with local public health professionals, such as individuals working at the county health department. These individuals provide feedback regarding the skills and information that students should gain during their time in the Upstate Medical University MPH Program.

Finally, every semester, Applied Practice Experience site preceptors provide the Upstate Medical University MPH Program with feedback regarding the skills and knowledge that our students gain in the program and areas where more skills and content knowledge needs to be gained.

- 3) Describe how the program's external partners contribute to the ongoing operations of the program. At a minimum, this discussion should include community engagement in the following:
 - a) Development of the vision, mission, values, goals and evaluation measures

In the spring of 2019, key community stakeholders were asked to complete an online survey questionnaire to evaluate the Upstate Medical University MPH Program's current vision, mission, values, and goals.

b) Development of the self-study document

During the process of developing the self-study document, the SLOC was involved in reviewing the methods that the program uses to asses student learning outcomes and program effectiveness.

Additionally, community members were encouraged through online notification to submit feedback to CEPH regarding our program.

Finally, members of the CAB who participated in the Mock Site Visit were sent a copy of the preliminary self-study document and were told that they could reach out to the Evaluation and Accreditation Specialist if they had any questions.

c) Assessment of changing practice and research needs

Upstate Medical University MPH leadership and faculty have had many informal discussions with external partners, such as the Onondaga Health Department, about the changing practice and research needs of the community surrounding Upstate Medical University. Additionally, program faculty have attended public health related conferences, such as the annual meeting of the American Public Health Association, where they attended seminars and spoke with other individuals in the field of public health about the direction that the field was going in and about new areas of public health research.

The Upstate Medical University MPH Program also regularly reaches out to alumni, local employers, and Applied Practice Experience Preceptors to get their feedback regarding the skills that are needed in the field of public health.

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

Agency preceptors who are involved in the students' Applied Practice Experience regularly assess students' ability to perform competencies in an employment setting and informally report back to the program.

Local employers are also surveyed so that the program can gain information regarding our students' abilities to perform after they have graduated from the program. While the program surveys employers of our graduates as often as possible, several issues mitigate the ability to do so on an annual basis. These issues include the lag between notification from alumni about new employment, the identification of appropriate respondents at employer firms, and similar issues. The Upstate Medical University MPH Program deploys surveys when there is a reasonably-sized cohort of contacts to deploy our survey instrument.

Alumni are also asked about the skills that they have gained while in the Upstate Medical University MPH Program as part of our Alumni Survey.

Program faculty also have informal discussions with local agencies, such as the Onondaga Department of Health, who hire our graduates. During these discussions, the agencies provide feedback regarding areas where our students are lacking the skills that they need to be successful in the workforce. In the past these informal conversations have led to the addition of new training on budgets and funding related to research and grants.

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

The following documentation of external contribution can be found in section F1-4 of the ERF:

- Example Alumni Surveys
- Examples of the Applied Practice Experience Preceptor Survey
- The Group Concept Map
- Examples of the Employer Survey
- A Letter from the Student Learning Outcome Committee (SLOC) that the Upstate Medical University MPH Program Received After SLOC's Review
- The Survey that was be Conducted Regarding the Program's Vision, Mission, and Goals
- Data collected through the survey that was Conducted Regarding the Program's Vision, Mission, and Goals
- 5) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

<u>Strengths</u>: The Upstate Medical University MPH Program is involved with Upstate Medical University's Student Learning Outcome Committee (SLOC). This involvement has benefited the program because other professionals outside of the program have been able to review our methods for assessing student learning and provided the program with feedback so that we are able to make changes to improve how we evaluate our students.

<u>Weaknesses</u>: Much of the input that we receive from key outside stakeholders comes in the form of informal communication. With the re-establishment of our CAB, the Upstate Medical University Program hopes to establish a clear pipeline for formal feedback.

<u>Plans for Improvement</u>: The Upstate Medical University MPH Program is currently in the process of developing a Community Advisory Board (CAB). We currently have members and are in the process of arranging a meeting. We plan on having a fully functioning CAB in place in the spring of 2019.

F2. Student Involvement in Community and Professional Service

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

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

Participation in service, community engagement and professional development activities is encouraged as soon as students enter the Upstate Medical University MPH program. Ways to get involved in the community are discussed during orientation and students are also encouraged to participate in the Public Health Interest Group (PHIG). Professors and faculty also discuss the importance of being part of research projects that occur outside of the classroom and promote student involvement in national Public Health organizations.

Students in the Upstate Medical University MPH program are heavily involved in community activities outside of the Upstate Medical University campus. Through the PHIG, students are given the opportunity to participate in monthly community service projects. Additionally, students have the opportunity to participate as a team in walks to raise funds and awareness in the community.

The PHIG also surveys students regarding their professional development needs and will offer professional development opportunities based on those needs.

Students are also encouraged to become involved with community service activities through the Center for Civic Engagement (CCE). The Center for Civic Engagement supports programs and initiatives that align with the following characteristics:

- Meet community-identified needs or advances the work of a non-profit or public organization;
- Is collaborative in nature with involvement from the target audience and benefits an underserved population;
- Is evidence-based, data-driven, measurable, and sustainable over time to demonstrate impact.
- 2) Provide examples of professional and community service opportunities in which public health students have participated in the last three years.

Through the Public Health Interest Group (PHIG) Upstate Medical University MPH students are currently working with the Southwest Community Center to provide bi-weekly children's health education on various Public Health topics including germs and flu prevention, stress management, nutrition, friendship and bullying, and other topics that support the physical, social, and mental wellbeing of children living in the Southside of Syracuse. Not only does this effort provide valuable health education to the local community, but it also gives students in the Upstate Medical University MPH Program the opportunity to gain first-hand job training on providing health education.

Additionally, the PHIG helps to organize a team of Upstate Medical University MPH program students to participate in one walk every semester. During the past three years, students in the MPH program have participated in walks such as Making Strides for Breast Cancer and the

American Heart Association Heart Walk. During these walks Upstate Medical University MPH students are not only able to represent SUNY Upstate but also the MPH program and the public health profession.

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

<u>Strengths</u>: Students in the Upstate Medical University MPH Program are very involved with the community surrounding Upstate Medical University and participate in volunteer projects within the community every semester. Our students are also take part in community service project that involve students throughout the university though the Center for Civic Engagement. By participating in these projects, not only do students in the Upstate Medical University MPH Program have the opportunity to give back to the local community, they can also strengthen their connections with other students throughout Upstate Medical University.

<u>Weaknesses</u>: While students in the Upstate Medical University MPH Program are involved in the local community surrounding Upstate Medical University, they are not as heavily involved in professional service at the national and international level.

<u>Plans for Improvement</u>: Many of the faculty are involved with professional service through the Public Health organizations that they are members of. They regularly give back by serving on committees and acting as reviewers for peer reviewed journals. In the future, the program will work harder to connect faculty with students so that faculty can help students to get involved in professional service through the Public Health organizations that faculty are part of.

F3. Assessment of the Community's Professional Development Needs

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

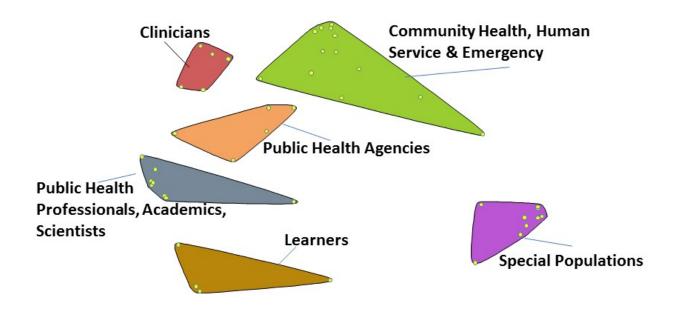
 Define the program's professional community or communities of interest and the rationale for this choice.

In the past, the Upstate Medical University MPH Program has targeted the local CNY community as our community of interest. During and since the transition from joint program sponsorship with Syracuse University to single sponsorship, we began to re-evaluate our professional community or communities of interest.

In order to redefine our communities of interest, a group concept mapping exercise was conducted in November 2018 with Upstate Medical University MPH faculty, professional staff, alumni, and current students, Group concept mapping is a multi-step, participatory mixed methods approach that integrates familiar qualitative group processes (brainstorming, categorizing ideas, and assigning value ratings) with multivariate statistical analyses (multidimensional scaling and hierarchical cluster analysis) to help a group describe its ideas on a topic of interest and represent these ideas visually through a series of related maps. Fifty faculty, professional staff, alumni, and current students were invited to participate in the process. In response to the prompt: "Please describe either a professional or non-professional community of interest for the Upstate Medical University MPH Program" over 100 ideas were submitted that were reviewed and reduced to core set of 66 statements describing professional communities and communities of interest.

Following the sorting and rating of these 66 statements, an analysis was conducted to identify categories of professional communities and communities of interest, as well as determine the relative importance of these communities to the Upstate Medical University MPH program. This analysis resulted in a 6-category framework of related professional or non-professional communities of interest, which can be seen in Figure F3-1. These groups included in order of relative importance to Upstate Medical University MPH: Public Health Agencies (ex. State Health Department, County Health Departments across NYS, Policy makers (institutional, local, state, federal) etc.); Learners (ex. Medical residents and fellows interested in population health, Undergraduate students interested in public health (especially those at SU), International students, etc.); Public Health Professionals, Academics, Scientists (ex. Epidemiologists and biostatisticians, Community health and health social scientists, Academic public health professionals, Environmental scientists, etc.); Special Populations (ex. Unhoused people, Rural communities around Central New York, Families affected by opioid use disorder, People with developmental disabilities, Indigenous people, Food-insecure populations, Veterans and their families, etc.); Clinicians (ex. Stroke education and coordination nurses, Dentists/oral health professionals, Primary care providers, College health professionals (medical and mental health) etc.); and Community Health, Human Service & Emergency (ex. Emergency first responders (EMS, fire, police), Human service agency workers (social services, social workers), Homecare agencies, Public school teachers, etc.).

CNYMPH Communities of Interest



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

The Upstate Medical University MPH Program uses three methods of periodic assessment, which include: 1) a substantive ad hoc survey on work force development; 2) annual alumni surveys; and 3) informal dialogue with public health agencies. These assessments are described in greater detail in the paragraphs below.

 In 2013, the Upstate Medical University MPH Program completed a public health workforce assessment which was conducted within the 14 counties that surround Upstate Medical University. A 22-question survey was administered through survey monkey. It was distributed initially to local health departments in the 14-county footprint, AHEC membership, field supervisors, and community partners. Original participants were asked to complete the survey and forward the survey to their peers for additional input. Respondents were given the incentive of a \$50 Visa gift card raffle for full participation in the survey.

Participants reported that their organizations' educational interests were centered around: health promotion, health policy, health disparities, rural health, disease prevention, and chronic disease.

In addition, the majority of the respondents identified their top six skills needed for further professional development as program planning and evaluation, collection management and analysis of data, social marketing strategies, grant writing and budget development, using software (e.g., mapping, data analysis), and health service management.

The survey identified respondents preferred accessing additional learning for their educational interests by: online-webinar, online-lecture with PowerPoint presentation, and inperson workshops. The respondents rated their preferred method for obtaining additional skill development as: online – webinar, online-lecture with PowerPoint presentation, and in person workshops. Their preferred length of time for the education and skill development was 60 minutes and their preferred time of day was mid-morning and early morning. One of the most striking findings from the workforce assessment survey was of the desire and need for short, remotely delivered, non-credit bearing activities.

The survey also asked what skill sets and content knowledge would be desirable for the MPH students to possess when they graduate. The survey respondents identified that students' moderate and high-level knowledge should focus around disease prevention, health disparities, chronic disease, health policy, and environmental health. The respondents identified Upstate Medical University MPH students top skills as collection, management, and analysis of data; program planning and evaluation; professionalism; cultural sensitivity; tracking disease (epidemiology); and grant writing and budget development.

Based on this assessment of workforce development need, a workforce development plan was implemented and a three-part training was delivered to members of the Onondaga County, Oswego County, and Oneida County Health Departments in the fall of 2014. Overall, participants reported a satisfaction level of either Excellent (56%) or Good (44%) (The complete survey questionnaire and PowerPoint describing the results of the survey can be found in F3-2a of the ERF.).

Based on recommendations from CEPH, an interim report was drafted in the spring of 2015. In this report, the Upstate Medical University MPH Program outlined the additional training opportunities that the program planned on implementing based on the findings of the Workforce Development Survey. These training opportunities included: 1) Providing two in person trainings or conferences per year; 2) Developing trainings consisting of voice over PowerPoint presentations that could be posted on the program's website; and 3) expanding the program's Grand Rounds capability. The full interim report and its attachments can be found in F3-2a of the ERF.

2) Every year, the Upstate Medical University MPH Program reaches out to alumni and asks them to complete a survey questionnaire regarding their ability to apply the competencies that they gained while enrolled in the MPH program in their current place of employment. Overall, participants reported that they agreed that they were able to apply the competencies that they had learned while enrolled in the program to the work that they were engaged in now. They were also able to identify specific examples of situations where they had applied these competencies while on the job. The full results of the latest Alumni Survey can be found in F3-2b of the ERF. 3) The Upstate Medical University MPH Program assesses the professional development needs of our community through informal conversations with local Public Health Agencies and students. Additionally, our faculty regularly attend Public Health related conferences where they make connections with other people in the field of public health and learn about current trends in the field of public health.

Now that the Upstate Medical University MPH Program has redefined our communities of interest, we plan on conducting a survey that will assess the professional development needs of our newly defined communities of interest.

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

<u>Strengths</u>: The Upstate Medical University MPH Program has conducted a rigorous process to redefine our communities of interest. Not only has this process included members of our faculty and staff, but we have also reached out to students, alumni, and local community members to get their opinion regarding who the program's communities of interest should be.

<u>Weaknesses</u>: Currently, the Upstate Medical University MPH Program has only used informal methods of assessing the professional development needs of our communities of interest.

<u>Plans for Improvement</u>: Now that the Upstate Medical University MPH Program has identified its communities of interest, the program plans on conducting more formal methods of assessing the professional development needs of our communities of interest on a regular schedule. This will include conducting a survey of our newly identified communities that assesses their current professional development needs.

F4. Delivery of Professional Development Opportunities for the Workforce

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

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

The Upstate Medical University MPH Program develops and implements professional development activities for the current public health workforce through three different means:

- 1) The Department of Public Health and Preventive Medicine offers several Grand Rounds lectures throughout the academic year. Everyone is invited to come to the university to listen to and interact with guest speakers who are brought to the university to share information regarding current issues in the field of Public Health.
- 2) Faculty members regularly speak with key stakeholders in the field of public health, such as the county health department, to learn more about the training needs of their workforce. Through these discussions, Upstate Medical University MPH faculty make adjustments to the courses that they teach and will even develop new trainings that can be used by the stakeholders to satisfy the training needs of their workforce.
- 3) Professionals currently working in the field of public health will also come into our program to take classes or earn an MPH so that they can learn new skills and obtain current knowledge about the field of public health.
- 2) Provide two to three examples of education/training activities offered by the program in the last three years in response to community-identified needs. For each activity, include the number of external participants served (ie, individuals who are not faculty or students at the institution that houses the program).
 - 1)The Upstate Medical University MPH Program identified that more training was needed regarding undocumented immigrants because Syracuse is home to a large number of undocumented immigrants and refugees. In the fall of 2018, a Grand Rounds was held where Dr. Rachel Fabi presented the research that she was involved in reproductive justice and healthcare for undocumented Immigrants. This lecture served approximately 9 external participants.
 - 2)Through informal discussions with the local Health Department, Dr. Wojowycz identified the need for training and technical assistance on budgeting and economic evaluation. Dr. Wojtowycz plans on working with the Commissioner of the Onondaga County Health Department to develop new trainings pertaining to economic evaluation and budgeting. This project served approximately 15 to 20 external participants.
- 3) If applicable, assess strengths and weaknesses related to this criterion and plans for improvement in this area.

<u>Strengths</u>: Faculty and staff have developed close relationships with the community surrounding Upstate Medical University. These connections have helped the program to become more aware of the training needs of the local community so that we are able to develop trainings that meet their needs.

<u>Weaknesses</u>: While our program is aware of the needs of the local community, we have only begun to work to identify the needs of our newly identified communities of interest.

<u>Plans for Improvement</u>: Moving forward, the Upstate Medical University MPH Program will identify methods for systematically seeking input from our newly identified communities of interest so that we can learn more about their training needs and develop new trainings that specifically meet those identified needs.

G1. Diversity and Cultural Competence

Aspects of diversity may include age, country of birth, disability, ethnicity, gender, gender identity, language, national origin, race, historical under-representation, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this criterion's context, refers to competencies for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite competencies include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences, especially as these differences may vary from the program's dominant culture. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the competencies for recognizing and adapting to cultural differences and being conscious of these differences in the program's scholarship and/or community engagement.

1) List the program's self-defined, priority under-represented populations; explain why these groups are of particular interest and importance to the program; and describe the process used to define the priority population(s). These populations must include both faculty and students and may include staff, if appropriate. Populations may differ among these groups.

In the past, the Upstate Medical University MPH Program defined its service area and community of interest as 14 contiguous counties in Central New York with a total population of 1.6 million persons. The urban counties of Broome, Oneida, and Onondaga have the largest percentage of the population of the 14 counties, making up about 55% of the total population. Of the 400 zip codes in these 14 counties, 79% are rural, 8.5% are suburban, and 12.5% are urban. The ethnicity of the service area is predominantly white (87.74%) with African Americans accounting for only 5.82%, and persons of Hispanic origin only 3.86%. Persons of Asian background represent slightly under 2.5% of the population. There are differences between the counties that are predominately rural and those that contain larger urban cities (Syracuse, Utica and Binghamton). In the urban counties, there are more African Americans and persons of Hispanic origin (8.6% and 4.6% respectively) compared to the rural communities in which both populations represent less than 3% of the population.

Moving forward, the Upstate Medical University MPH program will continue to align itself with the College of Medicine as a whole and has adopted the college's Diversity and Inclusion Policy. This policy outlines the specific diverse groups that the Upstate Medical University College of Medicine plans on targeting. These groups are presented in Table G1-1.

Table G1-1 Diversity Categories and Definitions

The diversity categories that guide recruitment and retention activities for medical students, faculty, and senior administrative staff:				
Medical Students	Faculty	Senior Administrative Staff		
Race (specifically, Black/African-	Race (specifically, Black/African-American)	Race (specifically, Black/African-		
American)		American)		
Race (specifically, Native American)				
Ethnicity (specifically, Hispanic/Latino)	Ethnicity (specifically, Hispanic/Latino)	Ethnicity (specifically, Hispanic/Latino)		
Gender (specifically, female)	Gender (specifically, female)	Gender (specifically, female)		
Socio-economic status (specifically,				
disadvantaged by economic status or				
education)				
Geographic location (specifically, rural or				
urban New York state)				

 List the program's specific goals for increasing the representation and supporting the persistence (if applicable) and ongoing success of the specific populations defined in documentation request
 1.

The Upstate Medical University MPH Program is located within the Department of Public Health and Preventive Medicine in the College of Medicine at Upstate Medical University. As part of its strategic plan, which was updated in September 2018, Upstate Medical University identified 15 objectives to focus on. One of these objectives is to Increase diversity, equity, access, and inclusion. This objective involves getting input from diverse stakeholders and increasing inclusion in decision making. Also, the university plans on working to recruit and retain staff and a student body that is reflective of the local community in terms of all measures of diversity, such as race, sexuality, disability, and religion with the aim of creating an environment within the university that is more welcoming and supportive of the needs of individuals from diverse backgrounds.

By working to achieve the goals listed above, Upstate Medical University hopes to:

- 1) Increase student and workforce diversity;
- 2) Increase outreach to diverse communities;
- 3) Make students and faculty/staff feel welcomed and valued;
- 4) Increase the involvement of students and faculty/staff from diverse backgrounds in university decision making.

These goals will be achieved through the following objectives:

- Recruit and retain a student body and workforce reflecting the community in terms of race/ethnicity, class, gender, sexuality, religion, disability, region, nationality and other dimensions of diversity.
- Expand recruitment to include diversity outreach on a variety of search mediums on a local, regional, and national level.
- Retention includes creating a more welcoming, supportive and stimulating environment that promotes personal growth and professional development recognizing the unique needs of a diverse workforce that also promotes cultural humility.
- Increase inclusion in decision making.
- Communicate key initiatives across the university and invite input from diverse stakeholders.
- Recognize the intersections between workforce diversity, patient satisfaction, employee satisfaction, and health disparities.
- Utilization of minority and women-owned business enterprises.

To align itself with the university's strategic plan, on September 5th, 2018 the College of Medicine set a goal of increasing the recruitment and retention of diverse students, faculty, and senior administrative staff. Over the next five years, the College of Medicine will enhance current programs and develop three new programs that promote diversity and inclusion of faculty, students, and senior administrative staff. As part of the College of Medicine, the Upstate Medical University MPH Program will work with the rest of the College of Medicine to achieve its goal.

A copy of the Upstate Medical University College of Medicine's Diversity Policy can be found in section G1-2 of the ERF.

3) List the actions and strategies identified to advance the goals defined in documentation request 2, and describe the process used to define the actions and strategies. The process may include collection and/or analysis of program-specific data; convening stakeholder discussions and documenting their results; and other appropriate tools and strategies.

The following measures have been taken to increase the representation and support the persistence of students from underrepresented backgrounds:

- 1) Department faculty members attend recruitment events that are held to specifically target students from underrepresented backgrounds, such as Indigenous students.
- 2) The Upstate Medical University MPH Program has partnered with outside organizations to conduct research internationally. Through these partnerships, not only have our students had the opportunity to travel to other countries and gain exposure to diverse populations, but we also have been able to introduce the Upstate Medical University MPH program to people living outside of the United States who might be interested in coming to the US to pursue an MPH.
- 3) Finally, the Upstate Medical University MPH Program takes part in the Medical Scholars Program through SUNY Upstate Medical University's College of Medicine. This program is intended for historically disadvantaged and underrepresented students and provides them with the opportunity to develop their academic, analytical, and clinical skills with the goal that once they have completed this program they will have the skills that they need to be successful in Medical School. These students are accepted into medical school at Upstate Medical University contingent on the successful completion of their MPH.
- 4) List the actions and strategies identified that create and maintain a culturally competent environment and describe the process used to develop them. The description addresses curricular requirements; assurance that students are exposed to faculty, staff, preceptors, guest lecturers and community agencies reflective of the diversity in their communities; and faculty and student scholarship and/or community engagement activities.

The following measures have been taken by the Upstate Medical University MPH Program and/or Upstate Medical University to create and maintain a culturally competent environment:

- 1) Upstate Medical University is committed to embracing and promoting diversity on campus. Through the Office of Diversity and Inclusion at SUNY Upstate, faculty and staff have the opportunity to join the Faculty and Staff Association for Diversity. Additionally, the Office of Diversity and Inclusion hosts regular trainings and events to promote diversity on campus and in the community surrounding SUNY Upstate Medical University.
- 2) Upstate Medical University MPH students and faculty are also involved with Inter-Professional Education (IPE). One of the courses that is offered is a two part course that deals with Refugee Health in the Community. As part of this course, students are linked with refugee families and their case managers to learn about life as a refugee in the Syracuse community. This is an important topic because in 2016 Onondaga Country, where Upstate Medical University is located, had the second highest number of refugee arrivals (1242 people) in the state of New York.
- 3) To expose students to a wide range of diverse values and cultures, the Department of Public Health and Preventive Medicine hosts Grand Rounds lectures throughout the semester. As part of these Grand Rounds lectures, speakers from the United States and abroad are brought in to discuss important issues in the field of public health. These lectures often touch on issues of diversity, such as LGBTQ issues and access to healthcare for minority groups, such as refugees.
- 4) Upstate Medical University MPH Program faculty are also engaging in many diversity related evaluations and research projects. For example, the director of the Upstate Medical University MPH Program, Dr. Wojtoowycz, is involved with the Health Equity Focused Community Coalition. This is a program through The Onondaga County Health Department which includes other representatives from Upstate Medical University. The focus of this coalition is to identify existing health disparities in the community and to facilitate a community-based approach to how these disparities are addressed. This coalition will also serve in an advisory capacity to inform the development of the 2019-2021 Community Health Assessment and Community Health Improvement Plan. The Onondaga County Health Department is also pursing the CDC's Racial and Ethnic Approaches to Community Health funding opportunity. If awarded, the Onondaga County Health Department (OCHD) would

engage this coalition to support implementation of best practices in the areas of nutrition, activity, and clinical community linkages. Dr. Stewart was also involved in the Court Innovations Project, which evaluated a program sponsored by the March of Dimes to help women currently involved in the justice system.

5) Provide quantitative and qualitative data that document the program's approaches, successes and/or challenges in increasing representation and supporting persistence and ongoing success of the priority population(s) defined in documentation request 1.

The Upstate Medical University MPH Program has a history of being racially diverse and continues to strive to admit a qualified and diverse student body. Most recently, our program has seen an increase in the number of applications that we have received from international students because of the implementation of the universal application system. The table below shows the racial breakdown for matriculated students from 2016 through 2018.

Table G1-5a Racial Breakdown for Matriculated Students from 2016 through 2018.

	American Indian/ Alaska Native	Asian/ Pacific Islander	Black/African American	Hispanic	Native Hawaiian/ Pacific Islander	White	Unknown
2016 (N=19)	0	15.79% (3)	10.53% (2)	15.79% (3)	0	47.37% (9)	10.53% (2)
2017 (N=29)	0	17.24% (5)	6.9% (2)	13.79% (4)	0	62.07% (18)	0
2018 (N=18)	0	16.67% (3)	16.67% (3)	11.11% (2)	0	55.56% (10)	0

As reported in part three of this section, the Upstate Medical University MPH Program participates in the Medical Scholar Program. This program is intended to provide students from historically disadvantaged and underrepresented groups with the opportunity to gain the skills and experiences that they need in order to be successful in Medical School. The chart below shows the number of Medical Scholars who have been admitted into the Upstate Medical University MPH Program from 2016 through the fall of 2018.

Table G1-5b Medical Scholars 2016-2018

1 000 10 10 10 10 10 10 10 10 10 10 10 1				
Measure	2016	2017	2018	
Number of Medical	3	2	1	
Scholars Entering the				
Upstate Medical University				
MPH Program				

6) Provide student and faculty (and staff, if applicable) perceptions of the program's climate regarding diversity and cultural competence.

In the fall of 2018, faculty were asked to report their perception of the program's climate regarding diversity and cultural competence as part of a diversity survey questionnaire that they completed. Through open-ended survey responses, faculty reported that they felt that the department created a culturally competent environment for faculty, staff, and students. They noted that although the department was small, efforts have been made to hire a more diverse group of faculty and staff, in terms of race, gender, and culture. The faculty surveyed also reported that the students in the

program were very diverse, coming from a wide variety of backgrounds and representing many areas of the United States and countries from around the world.

The faculty reported that they engage with diverse groups outside of the university through the research that they conduct. They felt that students in the Upstate Medical University MPH Program don't have as many opportunities to engage with diverse groups outside of the university, but are able to do so through the Applied Practice Experience that they participate in.

Faculty reported that they address the specific cultural needs of their students by making themselves more informed about students' backgrounds through discussions with the students. Faculty also noted that they create safe places within their classrooms where they believed that students felt comfortable talking about diversity related issues. If a faculty member doesn't feel that they have enough information about a specific cultural group then they will refer the student to another faculty member who may have more information. They will also reach out to diversity related resources on campus to become more informed.

Finally, the faculty reported that while they do receive online training through the university regarding issues of diversity that they could benefit from more training.

Students were also asked to report their perception of the program's climate regarding diversity and cultural competence during a student survey that took place in the fall of 2018. Through open-ended survey questionnaire responses, the students who participated reported that the student body was very diverse in terms of race and cultural background, which led to meaningful class discussions. The students also reported that although they felt that the faculty and staff were not very racially diverse, that they were very diverse in terms of background and experience. Finally, students felt supported in the program and didn't felt that they were treated differently because of their membership in a minority group, such as the LGBTQ population.

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

<u>Strengths</u>: The student body of the Upstate Medical University MPH Program is very diverse and includes students from many different cultures and backgrounds. Faculty are also diverse in terms of gender, experience, and interests. The diversity within the program creates opportunities for class discussions which add great value to the students experience in the program. Students, faculty, and staff feel safe in the program and are comfortable sharing their culture and beliefs with others in the department.

<u>Weaknesses</u>: While the faculty and staff are diverse in terms of gender, experiences and interest, they are not very diverse in terms of racial background. While the department has taken measures to recruit a more diverse group of faculty and staff, this can sometimes be difficult because of the geographic location and size of the department.

Although the University as a whole provides employees with diversity related training, the diversity training provided through the department is very limited and faculty reported that they would be interested in receiving more training on diversity related issues.

<u>Plans of Improvement</u>: In the future, the Upstate Medical University MPH Program will continue to work with the College of Medicine to achieve its goal of recruiting a more diverse group of students, faculty, and staff.

Diversity and inclusion is becoming a main focus of both the College of Medicine and Upstate Medical University as a whole. The Upstate Medical University MPH Program would like to work with both the College of Medicine and Upstate Medical University to create more opportunities for faculty, staff, and students to engage in diversity related trainings and events. The program plans on being involved with both the Faculty and Staff Association for Diversity and the President's

Diversity Council and plans on encouraging both faculty/staff and students to participate in these organizations.

H1. Academic Advising

The program provides an accessible and supportive academic advising system for students. Each student has access, from the time of enrollment, to advisors who are actively engaged and knowledgeable about the program's curricula and about specific courses and programs of study. Qualified faculty and/or staff serve as advisors in monitoring student progress and identifying and supporting those who may experience difficulty in progressing through courses or completing other degree requirements. Orientation, including written guidance, is provided to all entering students.

1) Describe the program's academic advising services. If services differ by degree and/or concentration, a description should be provided for each public health degree offering.

Advising services within the Upstate Medical University MPH Program include curricular advising and career counseling. The Upstate Medical University MPH Program provides a prescribed course schedule that allows students to complete the program in two years. The advisor assists students in developing a plan of study appropriate to students' interest and study status (full- or part-time). However, some students may choose to take a partial course load during some semesters. The advisor is responsible for helping them choose the appropriate courses and sequencing. The advisor is also responsible for monitoring progress toward the successful completion of the degree. Individual student issues result in individual guidance, and broader student issues are brought to the attention of the Faculty Council for deliberation or change. For example, course instructors are encouraged to notify the program administration regarding any Upstate Medical University MPH student in academic jeopardy. The program coordinator, in turn, will notify the student's academic advisor who will work with the student to devise a remediation plan or to refer the student for additional academic support services. Broader student issues such as student professionalism or excessive student absences are discussed during Faculty Council meetings.

As part of the advising process, students receive weekly email updates, announcements, and reminders about program policies, course availability, open registration information and timeframe, Applied Practice Experience and Culminating Experience deadlines, activities, events, and resources (conferences, fellowships, student presentations) that affect them. It is the students' responsibility to strictly adhere to established deadlines to ensure timely completion of their degree requirements. In addition, the Program Director periodically holds an open forum to provide students with programmatic updates or clarification. Students have an opportunity to ask questions and provide feedback on any issues or concerns pertinent to them.

Academic advising services do not differ by degree or concentration.

2) Explain how advisors are selected and oriented to their roles and responsibilities.

Academic advisors are selected based on the following criteria:

- Faculty members who are knowledgeable about the program's new curricular structure, specific courses, and elective options due to their roles and responsibilities as members of the Curriculum Committee.
- ii. Faculty members' involvement with the curricular restructuring of the College of Medicine to adequately advise students in the MD/MPH program.
- iii. Faculty members who taught at least one foundational or concentration course or a practice-based course (Applied Practice Experience).
- iv. Faculty members from diverse disciplines with practice-based experience or research expertise who can provide students with advice and support related to various career opportunities.
- v. The alignment of faculty members' research interests and expertise with the students whom they will be advising.

In preparation for their advising responsibilities, academic advisors are required to convene as a group with the program director annually to discuss their roles and responsibilities, perceived barriers or challenges, the plan of study, and other documentation requirements, and the resources available through Upstate Medical University for academic and professional support, including student mental health counseling, writing, and career services. Several program policies, including academic standards, transfer of credits, and course substitutions and waivers are reviewed during this meeting to ensure familiarity with these policies and accompanying procedures.

3) Provide a sample of advising materials and resources, such as student handbooks and plans of study that provide additional guidance to students.

Sample advising materials and resources can be found in section H1-3 of the ERF.

4) Provide data reflecting the level of student satisfaction with academic advising during each of the last three years. Include survey response rates, if applicable.

Students in the Upstate Medical University MPH Program were asked to rate each their advisor assignment and their initial contact with their advisor as either poor, fair, good, or excellent. The data in the table below shows students' responses to this question from the last three years (2015 until 2017).

Table H1-4 Student Rating of Their Advisor Assignment and Their Initial Contact with Their Advisor

	POOR-	FAIR-	GOOD-	EXCELLENT-	N/A-	TOTAL RESPONDENTS-
2015	3.45%	13.79%	31.03%	44.83%	6.90%	
	1	4	9	13	2	29
2016	2.78%	16.67%	36.11%	41.67%	2.78%	
	1	6	13	15	1	36
2017	0.00%	7.41%	44.44%	48.15%	0.00%	
	0	2	12	13	0	27

This table shows that the majority of students over the last three years rated their Academic Advisor Assignment as either "Good" or "Excellent". In addition to collecting quantitative data regarding the students' rating of their academic advisor assignments, students also discussed their interactions with faculty on some of the open-ended questions on the survey questionnaire. Students reported that faculty and staff members were flexible, readily available, and willing to provide students with the help that they needed.

5) Describe the orientation processes. If these differ by degree and/or concentration, provide a brief overview of each.

The New Student Orientation process is the same for all students who enroll in the Upstate Medical University MPH Program. At the time of admission, students are assigned to faculty members who will serve as their academic advisor. Advisors' names and contact information are included in the students' acceptance letters. Student receive an orientation packet with important dates for the New Student Orientation. This two-day New Student Orientation program is held one week prior to the start of the fall semester and introduces students to the Upstate Medical University MPH Program requirements, to administrators, to faculty, and to staff, as well as to campus resources at Upstate Medical University. During orientation, all incoming students are provided with a folder containing important program information, website links to the student Blackboard site, as well as links to the Upstate Medical University MPH Student Handbook and the Upstate Medical University Student Handbook. All students also participate in library, writing, and career services workshops; interact with financial aid officers and student health services. New students are also introduced to the campus student organizations and encouraged to

become active in campus organizations and activities. Students also have an opportunity to meet and interact with their academic advisors and other faculty during a faculty and student luncheon.

All new students also participate in Upstate 101. Upstate 101 is an introduction for all incoming students on teamwork and collaboration at Upstate. This program was initiated in 2017 and had one big session for incoming College of Health Professions and College of Medicine students. This year's session involved even more students, from all colleges (COM, CON, CHP, COGS), and consisted of two shorter sessions run consecutively in an afternoon. Upstate Medical University has improved the program based on last year's feedback and has developed a student advisory team (who were participants from last year's event) to help find ways to further engage and support student learning.

The session's learning objectives for students and participating faculty:

- Understand the shared attributes and professional behaviors that support patient-centric care
- Consider the qualities of highly effective teams and their importance to healthcare delivery

The informal objectives of the workshop are to provide an opportunity for students to meet with one another (outside of their own programs) and to lay a strong groundwork for growing a culture of cooperation and collaboration.

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

<u>Strengths:</u> In the Upstate Medical University MPH Program, students and faculty are able to develop strong connections and faculty are able to get to know the students' goals and academic areas of interest because of the low student to faculty ratio. This allows faculty to provide students with academic support tailored to their interests and post-graduation goals. The Upstate Medical University MPH faculty are also very aware of the program's policies and procedures and share this information with the students whom they advise. Students report that faculty are available and willing to meet with them for appropriate and informative academic advising.

<u>Weaknesses:</u> Due to the development of new or updated policies recently, students felt that they weren't were not always aware the latest version of some of the academic policies.

<u>Plans of Improvement:</u> Moving forward, the program leadership will make ensure that the academic advisors are aware of all of the program's policies. We plan on building our transparency through public postings, and emails from the Program Evaluation specialist. Any new or updated policies will be addressed highlighted and discussed during department meetings. The program will also make students aware of any policy changes via email, postings to blackboard, and during meetings with their academic advisors.

H2. Career Advising

The program provides accessible and supportive career advising services for students. Each student, including those who may be currently employed, has access to qualified faculty and/or staff who are actively engaged, knowledgeable about the workforce and sensitive to his or her professional development needs and can provide appropriate career placement advice. Career advising services may take a variety of forms, including but not limited to individualized consultations, resume workshops, mock interviews, career fairs, professional panels, networking events, employer presentations and online job databases.

The program provides such resources for both currently enrolled students and alumni. The program may accomplish this through a variety of formal or informal mechanisms including connecting graduates with professional associations, making faculty and other alumni available for networking and advice, etc.

1) Describe the program's career advising and services. If services differ by degree and/or concentration, a brief description should be provided for each. Include an explanation of efforts to tailor services to meet students' specific needs.

The small numbers of students currently enrolled in the Upstate Medical University MPH Program as well as the diverse faculty experiences allow career counseling and mentoring to be a personal affair. We make every effort to ensure that career counseling is inextricably linked to academic advising. Academic advisors and other faculty members are strongly encouraged to incorporate career counseling (especially aspects of professionalism) in all interactions with students throughout their course of study to prepare them for the real world, especially when serving as capstone advisors. Our field preceptors and alumni also play an important role in career counseling and sometimes make the best counselors as they currently hold positions our graduates are striving to obtain. Faculty and field preceptors draft letters of recommendation and make personal efforts to place graduates in jobs.

2) Explain how individuals providing career advising are selected and oriented to their roles and responsibilities.

When students enter the Upstate Medical University MPH program, they are assigned an academic advisor. These advisors also serve as the students' career advisors. Thus the selection criteria are the same criteria used for selecting academic advisors:

- Faculty members who were knowledgeable about the program's new curricular structure, specific courses, and elective options due to their roles and responsibilities as members of the Curriculum Committee.
- ii. Faculty members' involvement with the curricular restructuring of the College of Medicine to adequately advise students in the MD/MPH program.
- iii. Faculty members who taught at least one foundational or concentration course or a practice-based course (Applied Practice Experience).
- iv. Faculty members from diverse disciplines with practice-based experience or research expertise who can provide students with advice and support related to various career opportunities.
- v. The alignment of faculty members' research interests and expertise with the students who they will be advising.

Career advisors are oriented to their roles as advisors meet as a group with the program director to discuss their roles and responsibilities, barriers and challenges that they might face, and the resources available for student academic and professional support on campus, including career services that are available at the university level. Program policies are also reviewed during this meeting to ensure familiarity with these policies and accompanying procedures.

3) Provide three examples from the last three years of career advising services provided to students and one example of career advising provided to an alumnus/a. For each category, indicate the number of individuals participating.

Current Students:

- The course instructor for the Public Health Administration class asks local public health leaders to come into class and talk about the work that they do. These mini career fairs expose students to a wide variety of different occupations within the Public Health field and introduce the students to possible employers in the area. About 35-40 students participate in this event each semester.
- 2. Students also meet with their academic advisors regularly and are given career feedback during those meetings. For example, in recent years the Upstate Medical University MPH Program has had several students who were interested in a career that would involve leading a team of researchers to conduct research in the field of public health. These students met with their advisors and explored higher education opportunities that would enable them to get the skills that they needed to serve as leaders on a research team. The number of students who participate in this activity varies from semester to semester.
- 3. Throughout the year, the Department of Public Health and Preventive Medicine brings Public Health Professionals into the department to give presentations during our Grand Rounds lecture series. Upstate Medical University MPH students are encouraged to attend these events and speak with the guest lecturers. Through these lectures and discussions, students learn more about career opportunities in the field of Public Health. The number of students who attend these events varies from 10 to 20 students, depending on the lecture.

Alumni:

- Our alumni contact individual faculty members for career advising on a fairly regular basis. One example is an ongoing conversation between Dr. Morley and a 2015 graduate, who has changed positions several times since graduating, and has consulted with Dr. Morley throughout. Additionally, in one of her positions, the 2015 graduate was involved in an attempt to publish a paper with the group that had employed her, and she sought out Dr. Morley's advice regarding authorship issues.
- 2. Dr. Stewart regularly discusses career development in academia, in the non-profit, and the for-profit sectors with graduates frequently, regarding a range of career issues including professionalism, employment dynamics, and advisement on job and school interviews, work-life balance, program planning and evaluation questions, or research methods.
- 3. Dr. Wojtowycz provided an MPH graduate who went on to pursue a DrPH, about career options and pathways in maternal and child health, which is one of Dr. Wojtowycz research interests. Dr. Wojtowycz also helped another alumnus put together her CV for job applications and on her application essays to the PhD program at the School of Public Health in Albany in 2017.
- 4. Dr. Formica meets for lunch or coffee 1-2 times per year over the last few years with an alumnus. During those meetings. Dr. Formica provides the alumnus with advise regarding career options in the Syracuse area (because she has not wanted to move away), questions to ask in interviews, navigating professional issues, and guidance when she has had job offers, helping lead her to making career decisions that are best for her.
- 4) Provide data reflecting the level of student satisfaction with career advising during each of the last three years. Include survey response rates, if applicable.

From 2016 through 2018, students were asked if they believed that they were adequately informed about events that may be beneficial to your education/career. The table below shows the students' responses to this question.

Table H2-4 Students Belief Regarding Whether they were Adequately Informed About Events that May be Beneficial to Their Education/Career

Year	Yes	No	TOTAL RESPONDENTS-
2016	91.67%	8.33%	
	33	3	36
2017	92.59%	7.41%	
	25	2	27
2018	79.49%	20.51%	
	31	8	39

In the fall of 2018, students in the Upstate Medical University MPH Program were also asked to take part in a survey. As part of this survey, students were asked to rate their satisfaction with the career advising that they received while they were in the program on a four-point likert scale with 4 being Very Satisfied and 1 being Very Dissatisfied. A total of 21 students responded to this question. Of the students who responded, 3 students selected the Not Applicable response. One of the students who selected Not Applicable questioned whether or not Career Advising was offered as part of the program. The average rating given by the 18 students who rated Career Advising on the 4 point likert scale was 2.6.

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

<u>Strengths</u>: The Upstate Medical University MPH Program is very small. This allows students and faculty to develop close relationships with one another. Because of these relationships, faculty are aware of the students' career goals and are able to give them career advice with these goals in mind. The faculty are also very involved in the community surrounding Upstate Medical University and have many connections within the community which enables them to help students find jobs and get connected with local Public Health Professionals. Faculty members are also involved in national and international public health organizations and are able to connect students to other public health professionals within these organizations.

<u>Weaknesses</u>: While there are some opportunities for career advising, based on the student survey, it appears that students in the Upstate Medical University MPH program are interested in receiving more career services.

<u>Plans of Improvement</u>: In the future, the Upstate Medical University MPH program would like to make sure that students are more aware of the career services that are available on campus. The program also plans of reevaluating the career advising process now that we are a stand alone program, so that it meets the needs of our current students. Dr. Wojtowycz is also working with board members of the NYS Public Health Association to offer regular informational sessions.

H3. Student Complaint Procedures

The program enforces a set of policies and procedures that govern formal student complaints/grievances. Such procedures are clearly articulated and communicated to students. Depending on the nature and level of each complaint, students are encouraged to voice their concerns to program officials or other appropriate personnel. Designated administrators are charged with reviewing and resolving formal complaints. All complaints are processed through appropriate channels.

1) Describe the procedures by which students may communicate any formal complaints and/or grievances to program officials, and about how these procedures are publicized.

The program strongly encourages students to voice concerns or grievances arising out of their academic relationships with the program, the colleges, or the institution. Formal and informal mechanisms are in place at the university that provide students an opportunity to communicate these concerns or grievances to university officials, depending on the nature of the grievance or complaint. Allegations of discrimination, sexual harassment, or mistreatment are handled according to the university's established policies and procedures. All formal university policies and procedures for student grievances, complaints, and appeals are presented in the Upstate Medical University Student Handbooks. This document is available in the Resource File and can also be accessed on the internet.

As of April 24th, 2018 the Dean of the College of Medicine, Dr. Licinio reviewed and approved The College of Medicine's Policy and Procedure on Learning Environment & Mistreatment. This policy is inclusive of all students in the MD and MPH programs.

The policy states:

Purpose

The College of Medicine is committed to creating and maintaining a learning environment that supports and encourages a culture of respect between teacher and learner. The College ensures that the learning environment of its medical education program is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect. This policy outlines expectations for behavior that leads to an appropriate learning environment and mitigates the risk of student mistreatment. This policy also defines unprofessional behavior and student mistreatment; and it outlines reporting procedures for incidents of student mistreatment.

Policy

An appropriate student learning environment should foster professional growth, support academic achievement, and encourage the attainment of educational goals. Upstate's learning environment should model professionalism and civility and be characterized by professional behaviors. All members of the Upstate community, including faculty, staff and learners attest to the Upstate Code of Conduct and should demonstrate the values prescribed therein. Breaches in professional behavior threaten the learning environment and will not be tolerated. The Upstate Code of Conduct can be found on the website at: http://upstate.edu/student-handbook/conduct.php

Mistreatment in the Learning Environment

The College of Medicine is committed to maintaining an environment where there is mutual respect between student, teacher and between peers. Examples of inappropriate behavior are:

- 1. Public embarrassment
- 2. Threats of physical harm or actual physical punishment
- 3. Requirements to perform personal services, such as shopping
- 4. Being subjected to unwanted sexual advances
- 5. Being asked for sexual favors in exchange for grades
- 6. Being denied opportunities for training because of gender, race/ethnicity or sexual orientation

- 7. Being subjected to offensive remarks/names directed at you based on gender, race/ethnicity or sexual orientation
- 8. Receiving lower grades or evaluation based on gender, race/ethnicity or sexual orientation

Reporting Mistreatment Concerns

Students who experience possible mistreatment or observe other students experiencing possible mistreatment are encouraged to address the issue immediately. Students have the option of dealing with mistreatment informally or formally.

- a. Informal Resolution Whenever possible, it is preferred that students who believe they have been mistreated or those who have witnessed others being mistreated, discuss and attempt to resolve the matter with the alleged offender. It is well recognized that this may not always be a comfortable or viable approach.
- b. Formal Resolution: Students formally can report inappropriate behavior in a number of ways and are encouraged to use the process that is most comfortable for their particular circumstance.
 - ii. Raise concerns personally to one of the following individuals:
 - Dean, College of Medicine
 - Associate Dean, Undergraduate Medical Education
 - Dean, Student Affairs
 - Course/Clerkship Director
 - Department Chair
 - Faculty or Administrators
 - iii. Submit a named or anonymous* report via the web-based Mistreatment Report. Once submitted, these reports are received by the Associate Dean of Undergraduate Medical Education.

(http://www.upstate.edu/currentstudents/support/rights/mistreatment.php)

- * Students requesting complete anonymity should be made aware that doing so may interfere with the College of Medicine's ability to investigate the concern and their ability to receive information about the follow-up investigation.
- iv. Students may also choose to pursue claims of unlawful discrimination or harassment in compliance with the University's Anti-Harassment/Discrimination Policy. More information can be found on the Office of Diversity and Inclusion website (http://www.upstate.edu/diversityinclusion/complaint)

In general, the Upstate Medical University MPH Program has informal policies and procedures that allow students to communicate their grievances and concerns. At the Upstate Medical University MPH orientation, students are informed of our program's "open-door policy" and instructed to provide feedback and voice concerns or suggestions for improving the program to administrators, faculty, and staff at any time. To date, students have consistently used several avenues to communicate concerns or complaints to the program: 1) during academic advisement, 2) through formal and informal communication and meetings with program faculty and staff, 3) through student representatives who serve on the various program committees, 4) during an open-forum held during the academic year; and 5) through student representative feedback at committee meetings. Students are always provided the option of filing a formal written complaint through the appropriate channels. These channels are outlined in the Upstate Medical University MPH Student Handbook, which can be found in the ERF.

Types of student issues and concerns are generally defined as:

- 1) **Information and Clarification**: Student simply needs information, clarification, better understanding, explanation, and guidance.
- 2) **Concerns or Complaint**: Student is displeased but hopes that improvements will be made on a particular policy, procedure, or practice.
- 3) **Grievance**: Formal action is taken by student asking for some type of remediation.
- 4) **Appeal**: Decision has already been handed to a student by a program or university official, and he or she chooses to appeal the ruling.

For individual course-related complaints or concerns (assignments, grades, course content, and format) students are advised to communicate their concern or complaint initially to the course instructor. If

unresolved, students may contact their academic advisor or the program coordinator. If the matter still remains unresolved, students may request to meet with the director or associate director. Course-related complaints that affect the larger student body are brought directly to the director or associate director, who determines the appropriate course of action. For example, during the spring of 2012 semester, an overwhelming number of students contacted the program coordinator and voiced concerns and frustrations about the content and format of two core courses, Social Behavioral Dimensions of Public Health and Principles of Environmental Health. The student representative serving on the Curriculum Committee also informed members of the committee about students' concerns with these two courses. Both the program coordinator and the chair of the Curriculum Committee communicated the students' concerns to the director and associate director. Subsequently, the program director and associate director scheduled a meeting with each course director to discuss the students' concerns and a plan for addressing these concerns. Both course directors agreed to make modifications to improve the course for the second half of the semester.

For programmatic complaints, concerns, or grievances, students are advised to contact the director or program coordinator. After a preliminary review to determine the nature of the matter, the student may be asked to file a formal and written complaint, grievance, or appeal or advised to contact the Dean of Student Affairs at Upstate Medical University.

2) Briefly summarize the steps for how a complaint or grievance filed through official university processes progresses. Include information on all levels of review/appeal.

Formal complaints can either be filled with the Dean of the College of Medicine or the Dean of Student Affairs. In general, issues relating to academic programs and progress should be filed with the Dean of the College of Medicine, while issues related to the overall student experience can be filed with the Dean of Student Affairs. All complaints must be filed within 90 days of when the event that led to the grievance occurred. Complaints can be made in person, by telephone, or in writing, but all complaints may eventually need to be documented. Students may also be asked to discuss their complaint with a university/college representative who has knowledge or experience regarding the issue. The deans or their delegates will conduct an investigation and will respond to the complaint within 10 business days. The student may be contacted by the university if more information regarding the issue is needed. Students may also be sent to another campus official who has more knowledge regarding the issue. The final decision regarding all formal complaints is made by a person who is not directly involved with the complaint. The university maintains a record of all complaints that have been filed and the resolution or disposition for one year after the student who made the complaint has either graduated or left the university.

At the Program level, student complaints and/or grievances are made to either the student's advisor of a faculty member. Then these complaints travel up the chain of command within the department until they have been resolved.

List any formal complaints and/or student grievances submitted in the last three years. Briefly
describe the general nature or content of each complaint and the current status or progress
toward resolution.

To date, there have been no formal student grievances filed with the program or university officials. In most cases, concerns or complaints have been handled and resolved through discussions with the pertinent parties.

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

<u>Strengths</u>: Upstate Medical University has a clear process for dealing with student grievances. As part of Upstate Medical University the Upstate Medical University MPH Program uses Upstate

Medical University's student grievance process. Also, because of the size of the program, students are close with faculty and staff and feel comfortable coming to them if issues arise.

<u>Weaknesses</u>: At this time, the program cannot identify any weaknesses in the grievance process. Students appear to be comfortable in the program and if any issues arise, they are dealt with in a timely manner.

<u>Plans of Improvement</u>: Moving forward, the Upstate Medical University MPH Program will continue to use the same process that has been established for addressing student grievances. This process will be review annually and if there are any program-specific issues, they will be addressed at a meeting of the Faculty Council and changes will be made as needed.

H4. Student Recruitment and Admissions

The program implements student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program's various learning activities, which will enable each of them to develop competence for a career in public health.

1) Describe the program's recruitment activities. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

The Upstate Medical University MPH Program is committed to creating and sustaining an environment that is equitable, respectful, and free from prejudice for students, faculty, staff, and members of our community. It is the program's policy, consistent with Upstate Medical University's Policy, to promote a diverse and inclusive community by recruiting qualified students through targeted admissions initiatives. In our program, we strive to promote the values of diversity and inclusion, which adds value to our students' learning environment and enhances their commitment to addressing health disparities. The recruitment policies at Upstate reflect our efforts towards diversity and inclusion. Students are recruited through the offices of Admissions and Multicultural Affairs at Upstate Medical University.

The Upstate Medical University MPH Program coordinates recruitment efforts with the Office of Student Admissions at Upstate Medical University. These coordinated efforts are focused on recruiting, retaining, and graduating highly qualified students who represent a diverse cultural, socioeconomic, and geographical base. The Upstate Medical University MPH program has enlisted the assistance of the multicultural admissions advisor within the Office of Student Admissions at Upstate Medical University, whose primary responsibility is to actively seek and recruit a diverse student body for the university, to target recruitment efforts, and to increase underrepresented applicants to our program.

The program sponsors information sessions and participates in various recruitment events throughout the country. The program's recruitment activities include but are not limited to

- MPH "Lunch and Learn" presentations at Upstate Medical University.
- Open house programs held twice a year (spring and fall) at Upstate Medical University.
- Representation at approximately 23 graduate fairs, 20 transfer fairs, and 30 high school college fairs per year.
- Presentations at four-year colleges (approximately 10 per year).
- An annual presentation at MedQuest camp, an AHEC sponsored camp for high school students interested in health careers.
- Representation at meetings with local and regional community partners and exhibits at local and regional public health conferences.
- 2) Provide a statement of admissions policies and procedures. If these differ by degree (eg, bachelor's vs. graduate degrees), a description should be provided for each.

The program seeks to admit qualified students who demonstrate the potential to be successful at the graduate level. Members of the program's Admissions Committee make decisions on applicants based on academic performance, letters of recommendations, students' written abilities, and commitment to public health. Applicants should meet the following minimum requirements:

- A baccalaureate degree from an accredited institution with a cumulative undergraduate grade point average of a 3.0 (based on a 4.0 scale) (preferred). The applicant must submit official transcripts of all the colleges and universities attended.
- International students whose first language is not English must possess scores from the TOEFL of a minimum of 600 (written), 250 (computer-based test), and 100 (internet) to be considered for admission. Official TOEFL scores must be sent directly from the

testing agency. Students who have scored between 580/237/92-93 and 600/250/100 may be accepted into the program, but may be required to complete an English Language Assessment Exam and it may be recommended that these students take part in English Language courses while they are completing their degree. International students who have completed all or part of their education abroad are required to have a course-by-course educational credential evaluation completed by an approved agency prior to the application deadline.

- Submit a personal statement of career goals and health-related experiences. Applicants
 must also submit a public health essay in which they identify a public health issue or
 problem of interest and present at least one possible approach to addressing that issue
 or problem. This requirement allows the members of the committee to assess the
 applicant's commitment to public health and their professional development goals.
- Submit three letters of recommendation from individuals who can speak to the applicant's academic and professional capacity.

Highly Recommended:

- College level biology course
- College level statistics course

Changes to the Admissions Requirements

Starting in the fall of 2018 the GRE is no longer a requirement for admission into the Upstate Medical University MPH Program.

Admissions Procedures

Potential students apply electronically to the Upstate Medical University MPH Program through SOPHAS (a centralized CAS application system). Once this application is complete and verified, applicants are required to complete SUNY Upstate's supplemental application through the Upstate website. The program operates via rolling admission which means applications are received throughout the year until the program fills or the established deadline passes, whichever comes first. Under certain circumstances, applications can be considered for enrollment in the spring semester. Applicants are required to complete both applications and submit all above-stated requirements with the appropriate application fee (there is only a fee for SOPHAS). The Office of Student Admissions screens all electronic applications based on the above-stated criteria and either screens applicants through to committee, holds the candidate for further consideration, or rejects the applicant. In cases where the applicant needs further consideration or questions arise about their qualifications, the application will be discussed with the director or associate director of the MPH Program and re-evaluated at the conclusion of the interview process. The Admissions Committee meets either in person or virtually to render a decision by an anonymous vote. Interviews are requested at the desecration of the committee on a case by case basis, and in such cases these students will not be reviewed/voted on until after the interview is conducted.

3) Select at least one of the measures that is meaningful to the program and demonstrates its success in enrolling a qualified student body. Provide a target and data from the last three years in the format of Template H4-1. In addition to at least one from the list, the program may add measures that are significant to its own mission and context.

The following is an example of a measurable objective and accompanying outcome measure by which the program evaluates its success in enrolling a diverse and qualified student body.

Table H4-4 Success Measures Related to Enrolling a Diverse and Qualified Student Body

Outcome Measure(s)	Target	AY 2016– 2017	AY 2017– 2018	AY2018– 2019
The percent of new enrollments (matriculation) have GPAs of 3.0 and	75% of new enrollments have GPAs of 3.0 and above	95%	93%	87.5%

above	Meeting target:	MET	Met	Met	

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

<u>Strengths</u>: The Upstate Medical University MPH Program has established an efficient and successful method for recruiting and admitting a well-rounded student body. The recruitment and admission process that are currently in place have enabled our program to bring in qualified students who are able to be successful in the MPH program.

<u>Weaknesses</u>: In the past, the program did not have a specific process for recruiting students from minority groups.

<u>Plans of Improvement</u>: Moving forward, the Upstate Medical University MPH Program is developing a process that specifically targets minority groups (As defined in section G1-1 of this Self-Study Report). The program is also refining the recruitment process based on the program's new focus since the disengagement from Syracuse University and our new concentrations.

H5. Publication of Educational Offerings

Catalogs and bulletins used by the program to describe its educational offerings must be publicly available and must accurately describe its academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, must contain accurate information.

Provide direct links to information and descriptions of all degree programs and concentrations in the unit of accreditation. The information must describe all of the following: academic calendar, admissions policies, grading policies, academic integrity standards and degree completion requirements.

Table H5-1 Helpful Links

Content	Link
Upstate Medical University MPH Program Website	http://www.upstate.edu/cnymph/
Academic Calendar	http://www.upstate.edu/cnymph/pdf/7_26_18_CNYM
	PH_Calendar_2018_19.pdf
Admissions	College of Medicine:
	http://www.upstate.edu/com/admissions/
	Upstate Medical University MPH Program:
	http://www.upstate.edu/cnymph/academic/mph_degr
	ee/admissions.php
Grading Policies	http://www.upstate.edu/curriculum/pdf/policies_proce
	<pre>dures/grading_assignment_and_submission.pdf</pre>
Academic Integrity Standards	http://www.upstate.edu/student-
	handbook/medicine/md-mph-process.php (This link
	is focused on the MD/MPH but provides information
	that pertains to the entire Upstate Medical University
	MPH Program as well.)
Degree Completion Requirements	http://www.upstate.edu/cnymph/academic/mph_degr
	<u>ee/coursework/index.php</u>