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January 7, 2020

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Dear Dr. L'Engle:

On behalf of the Council on Education for Public Health, I am pleased to advise you that the CEPH Board of Councilors acted at its December 15-16, 2019 meeting to accredit the MPH Program at the University of San Francisco for a seven-year term, with an interim report to be submitted in fall 2020.

The accreditation term extends until December 31, 2026, pending the program's continued documentation of compliance through the interim report, annual reporting, and any other reporting required by the Council.

The interim report will be due on October 6, 2020 and must address the criteria for which there was a "partially met" assessment. Specifically, the interim report should provide evidence that the program has:

- a) developed and implemented an appropriate assessment for competency 21 for all MPH students. The report must include the information in the format of Template D2-2 for both delivery formats and must include relevant syllabi and attachments (e.g., more detailed assignment instructions) to allow for full validation. (Criterion D2)
- a) Developed and implemented an appropriate assessment for competency 5 in health policy and leadership. The report must include the information in the format of Template D4-1 and must include relevant syllabi and attachments (e.g., more detailed assignment instructions) to allow for full validation. (Criterion D4)

Please be aware that failure to come into compliance with all accreditation criteria must trigger specific actions on CEPH's part. These actions, mandated in federal regulations governing accrediting agencies that are recognized by the US Department of Education, include initiating adverse action or, if good cause is demonstrated, extending by one year the period during which the program or school may come into compliance with the remaining criteria, after which CEPH must take adverse action. CEPH is required to deny or revoke accreditation when a school or program fails to demonstrate that it has come into compliance. Thus, interim reports have serious consequences. Additional information about preparing interim reports is available on the [CEPH website](http://www.ceph.org).

We are enclosing a copy of the Council's final accreditation report. The report is also being transmitted to the chief executive officer of your university as the Council's official report. This differs from the team's report that you received prior to our meeting in the following areas:

- The Council changed the finding for Criterion B1 (Guiding Statements) from met with commentary to met and added language explaining its rationale.
- The Council added language to Criteria B5 (Defining Evaluation Practices) and E3 (Faculty Instructional Effectiveness) to acknowledge the program's response to the site visit team's report.

- The Council added language to Criteria D2 (Foundational Competencies) and D4 (Concentration Competencies) acknowledging the program's response and updating and clarifying the Council's concerns.

I would like to call your attention to the disclosure provisions in our adopted procedures. The program is expected to make its official accreditation report available to the public on request 60 days following the accreditation decision. ***The program may make the report and final self-study available in full on its website, or it must clearly indicate on the website how to request a copy of either document.*** See Section 7 of the [Accreditation Procedures](#) for additional information.

You may append a written response whenever you distribute the report. The official report also will be available on request from CEPH after 60 days, but it is our intent to refer all initial requests to you. If you provide this office with a copy of a written response by February 24, 2020, we will be pleased to append it whenever we respond to a request for the report. Please note that this response is optional.

We would also like to remind you that whenever an accredited school or program undergoes a substantive change, it is obligated to provide written notification to CEPH of the intended change. Substantive changes are defined in the procedures manual, but generally include offering a new degree, adding or discontinuing an area of specialization, offering a degree program in a different format or at a distant site and making major revisions to the curricular requirements. Additional information about substantive changes is available on our [website](#).

We appreciated the many courtesies and helpfulness extended to the site visit team.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Stephanie Miles-Richardson', with a long horizontal flourish extending to the right.

Stephanie Miles-Richardson, DVM, PhD
President

cc: CEPH Councilors

**Council on Education for Public Health
Adopted on December 16, 2019**

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT THE
UNIVERSITY OF SAN FRANCISCO

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:

June 10-11, 2019

SITE VISIT TEAM:

Diane Marie St. George, PhD — Chair
Amanda Cash, DrPH, MPH

SITE VISIT COORDINATOR:

Zeinab Bazzi, MPH

SITE VISIT OBSERVER:

Laura Rasar King, EdD, MPH, MCHES

CRITERIA:

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

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INTRODUCTION

The University of San Francisco (USF) was founded in 1855 and is one of the 28 Jesuit Catholic colleges and universities in the United States. USF is made up of four schools and one college, which include law, education, management, nursing, and health professions. USF offers programs on seven campuses (Main Campus, Downtown, Orange County, Pleasanton, Sacramento, San Jose, and Santa Rosa) in addition to online education.

The university offers 44 bachelor's degrees, 57 master's degrees, 12 doctoral degrees, and 24 joint degrees. The student body includes about 6,700 undergraduate students and more than 4,000 graduate students. The university employs more than 2,000 faculty and staff, including 500 full-time faculty and 940 full-time staff. USF is regionally accredited by the Western Association of Schools and Colleges Senior College and University Commission, and the university responds to specialized accreditors in such areas as law, education, business, nursing, public administration, and psychology.

In 2010, faculty began curriculum development for the MPH program, and the program enrolled its first students in 2011. In 2015, the program began offering its generalist concentration in a fully distance-based format, in addition to the existing campus-based program (Main Campus and Orange County), and in 2018, the program initiated a campus-based offering of the health policy and leadership concentration at the university's Sacramento campus, which is approximately 90 miles from the main campus. The MPH program is currently housed within the School of Nursing and Health Professions in the Health Professions Department. The Health Professions Department also houses the MSBH, MSHI, and PsyD programs. As of fall 2018, the program enrolled 175 MPH students: 141 in the community and public health practice concentration (formerly generalist) and 34 in the health policy leadership concentration. A third concentration in behavioral health will launch in fall 2019.

The MPH program obtained initial CEPH accreditation in 2014. The program was asked to complete an interim report related to the following areas: graduation rates, post-graduation outcomes, and faculty support. The Council accepted the program's submission in 2018 as evidence of compliance in all areas.

Instructional Matrix - Degrees and Concentrations					
			Campus based	Executive	Distance based
Master's Degrees		Academic	Professional		
Community and Public Health Practice			MPH	MPH	MPH
Health Policy Leadership			MPH	MPH	
Behavioral Health			MPH	MPH	
Joint Degrees (Dual, Combined, Concurrent, Accelerated Degrees)		Academic	Professional		
2nd Degree Area	Public Health Concentration				
BS in Nursing	Community and Public Health Practice		BSN-MPH	BSN-MPH	

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Designates appropriate committees or individuals for decision making, implementation		The MPH Program is organized and administered in a manner that allows it to fulfill its mission and goals. The program has one director for the overall program and another director for the Sacramento regional campus.	Click here to enter text.	
Faculty have opportunities for input in all of the following: <ul style="list-style-type: none"> • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities 		The program has a clear and straightforward structure for program governance. The full-time faculty meet monthly to set program policies and procedures. In the monthly meetings, the faculty consider policy proposals from the committee, individual faculty, and program leaders. Proposals related to degree requirements, curriculum design, student assessment and admissions policies are all vetted in those meetings. Program decisions require a majority vote for approval. Part-time faculty, program staff, the associate dean for health professions, and the student representative may not vote but are invited to attend the monthly faculty meetings to provide their input into program governance.		
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program		There are two program committees and two task forces that are set up to propose and implement policy in various areas. The program has a standing Admission Committee comprising two to three faculty members and the school admissions coordinator. This committee reviews all admissions applications and is responsible for making recommendations regarding admissions policies and procedures for full faculty approval. In early 2019, the program seated a standing Evaluation Committee of two		

		<p>faculty (at least one of whom must be a member of the school's Evaluation Committee), two staff, and one student. The charge of this committee is to develop and implement the program's comprehensive evaluation plan. In addition, in 2018, the program assembled a task force to coordinate the development of the self-study. Also, in 2018, another task force, comprising four faculty members and one student, was charged with development of the Applied Practice (APEX) and Integrated Learning Experiences (ILEX).</p> <p>The program also has clear guidelines for other major functions. Recruitment of faculty begins with a request by the program director which must be approved, in turn, by the dean and provost. If the position is approved, the dean will appoint a search committee chair who is a senior program faculty member. Committee members consist of program faculty, program staff and possibly other school faculty. Faculty promotion is governed by the guidelines specified in the university faculty association's collective bargaining agreement. The SONHP's peer review committee, the current chair of which is a member of the MPH faculty, evaluate MPH program faculty who are seeking promotion and tenure.</p> <p>During the annual faculty evaluation process, faculty members work with the dean to establish goals for research and service that align with their interests as well as school and program goals.</p> <p>The MPH program faculty are active contributors to school- and university-wide governance. Three of the faculty are on school committees, two are on university committees, and four are on both. Some of the school-</p>		
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		<p>level committees that include MPH representation are the Academic Standards Committee; the Program Evaluation Committee; the Diversity, Equity, and Inclusion Committee; and the Curriculum Committee. University structures with MPH faculty representation include, but are not limited to, the Center for Teaching Excellence Advisory Board, the Educational Technology Advisory Board, and the Strategic Enrollment Committee. The MPH faculty hold such leadership positions as chair of the school's Digital Learning and Teaching Committee and the school's Peer Review Committee.</p> <p>There are two main mechanisms for regular and meaningful faculty engagement in the program: compulsory monthly program meetings and committee/task force meetings. It is clear to the site visit team that the compulsory monthly program meetings and committee/task force meetings provide a major opportunity for regular full-time faculty engagement. More recently, however, the program has developed strategies for comparable engagement of the part-time faculty. Beginning in 2018, the part-time faculty have also been invited to attend the monthly program meetings, and a Zoom connection is made available. The program had concerns that the bargaining agreement may have limited the part-time faculty engagement in committee work. However, they recently learned that the part-time faculty may serve as members, albeit non-voting, on program committees. One of the part-time faculty with whom the site visitors met, had already agreed to serve on a committee and will be joining in the upcoming fall term. While a review of meeting minutes suggests that the attendance of the part-time faculty is limited, and they have not yet served on governance committees, the team</p>		
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		met with members of the part-time faculty and noted that they were enthusiastically engaged and felt integral to the operation of the program.		
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A2. MULTI-PARTNER SCHOOLS & PROGRAMS

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

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Students have formal methods to participate in policy making & decision making		MPH students are represented in program governance. One student attends the monthly program meetings, and there is a student member on the Program Evaluation Committee and on the APEX/ILEX Task Force. However, those additions have only been made within the past year.	Click here to enter text.	
Students engaged as members on decision-making bodies, where appropriate		In contrast, MPH students have had longer involvement in school-level governance since, over the past three academic years, the Department of Health Professions' student representative on the school curriculum committee has been an MPH student. The Department of Health Professions has an official student organization. Originally founded as the MPH Student Association, the group expanded in 2017 to include students from other programs within the Department of Health and changed its name to the Population Health Sciences Student Association (PHSSA).		

		<p>Site visitors learned that, over the past three academic years, the vast majority of the association officers have been MPH students, and student leaders with whom the team met commented that they have had difficulty in involving non-MPH students. In on-site meetings, the team learned that the PHSSA functions primarily as a mechanism for student service and career development, with less of an emphasis on participation with program governance. The officers meet at least monthly for program planning. MPH full-time faculty serve as the association’s advisors and attend the monthly meetings when their schedule allows.</p> <p>The commentary relates to the lack of a formal, systematic mechanism for the engagement of the larger student body. Notably, the program has identified this as an area in need of improvement and has recently added student non-voting member slots to the committees. In addition, on site, the team learned of current discussions aimed at devising a feasible and meaningful formal process for communication to and from the larger student body.</p>		
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A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

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

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a vision, mission statement, goals, statement of values		The program cites a vision of "a world with new possibilities for more equitable and enriched population health and well-being."	Click here to enter text.	The Council reviewed the self-study and team's report and concluded that program adequately defines a vision, mission, goals, and values according to this criterion's language. Therefore, the Council acted to change the team's finding of met with commentary to a finding of met.
Taken as a whole, guiding statements address instruction, scholarship, service		The program's mission is "to improve the health of local and global populations, particularly the underserved and vulnerable, through innovative and inspired research, service, and teaching that is grounded in education..."		
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success		The program espouses the following three values: "Care" (for self and others), "Learn" (lifelong learning) and "Act" (empowering self and others to effect change).		
Guiding statements reflect aspirations & respond to needs of intended service area(s)		The program has two education goals: provide student-centered education of health professionals using advising and effective and/or innovative pedagogy; and enable students and alumni to apply public health skills and knowledge to improve the health and well-being of diverse and vulnerable populations. The service goal is to promote public health and health equity through community		
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes				

		<p>service. The research goal is to generate knowledge and evidence to advance public health</p> <p>The commentary relates to the fact that, while the vision, mission, values and goals are appropriate for a public health program, they do not appear to be targeted enough to allow USF to clearly delineate its focus and scope, define itself to external constituents, or guide resource allocation and program evaluation. However, while on site, the team clearly understood that the program has a strong sense of who it is and whom it wishes to serve. Attention to social justice and the needs of the most vulnerable, especially in the Bay Area, was a clear thread that was woven throughout.</p>		
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B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		The program presents graduation rates for all students who have enrolled since 2011. The maximum time to graduate for MPH students is five years. Graduation rates have exceeded this criterion's threshold, ranging between 81-91% for each academic year.	Click here to enter text.	
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees				

B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The program achieves high rates of positive post-graduation outcomes. In the last three years, 100%, 97% and, 100% of graduates reported being employed or continuing their education within a year of graduation.	Click here to enter text.	
Chooses methods explicitly designed to minimize number of students with unknown outcomes		The program collects post-graduation outcome data using an alumni survey that is administered electronically one year after graduation. The program also used social media resources (LinkedIn and Facebook) and communication with faculty to fill the data gap from alumni who do not respond to the survey.		
Achieves rates of at least 80% employment or enrollment in further education for each public health degree		<p>In 2015-16, the program had 21 known and seven unknown outcomes; in 2016-17, there were 40 known and 13 unknown outcomes; and in 2017-18, the program had 35 known and 14 unknown outcomes.</p> <p>During the site visit, the program discussed improved efforts to increase response rate and minimize the number of unknowns. The MPH Program Evaluation Committee has revised and improved all surveys and is actively working on increasing survey response rates through the use of multiple reminders, text notifications, and offering incentives for participation. A new alumni survey will be implemented in fall 2019. The program will also continue to utilize various platforms to collect data. One example is</p>		

		<p>to hold more alumni events and invite alumni to current events to survey them in person.</p> <p>Alumni shared with the site visit team that they are grateful for the program’s ongoing mentorship even after graduation – specifically in securing employment. The alumni also shared that the dean was committed to helping students find jobs that allowed them to showcase their skills in an area they were passionate about.</p>		
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B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		<p>The program uses both quantitative and qualitative approaches to maximize responses and the usefulness of data. The program uses the Alumni Survey to capture quantitative data on alumni perspectives of curricular effectiveness. The survey is administered close to one year after graduation and has been administered twice thus far (June 2018 and September 2018). The survey includes questions asking alumni to rate their attainment of each CEPH competency category, using a 5-point Likert scale.</p> <p>Qualitative data were collected during focus groups and one-on-one interviews; the same interview guide was used during both sessions. The program conducted one focus group for a 90-minute duration with three MPH alumni and three one-on-one interviews via Zoom. The focus groups and interviews address two measures: graduate and alumni success in securing employment or</p>	Click here to enter text.	
Documents & regularly examines its methodology & outcomes to ensure useful data				
Data address alumni perceptions of success in achieving competencies				
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements				

		<p>continuing education and alumni perception of achievement of competencies.</p> <p>Most respondents felt very or moderately competent on all skills – students felt especially competent when applying principles of leadership (90%), communicating audience-appropriate public health content (86%), and performing effectively on interprofessional teams (90%). Results from qualitative data mirror the results from the quantitative survey in that respondents felt that communication and interprofessional skills attained in the program were useful in the workplace. During the group interview, one alumnus felt that the epidemiology course was the most practical and applicable. Another alumnus “felt prepared to address cultural differences when interacting with patients.”</p> <p>Alumni who met with site visitors said that the program prepared them well for the workforce and frequently asks for their feedback about practice needs to improve the curriculum going forward. One alumnus shared that the skills learned during the program were easily applicable at his job and they allowed him to communicate better with the patients he interacted with. Another alumna shared with the site visit team that the skills she was able to develop during the program helped her stand out among other applicants during job interviews. She added that she felt confident answering scenario-based questions during job interviews because they were similar to scenarios discussed in the classroom.</p> <p>The commentary relates to the low response rates for the alumni survey. The survey yielded a response rate of 29% in 2018. However, the site visit team was able to identify a</p>		
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		concrete plan put forward by the program to address this issue. In addition to the measures identified in B3, the program has plans to hold focus groups during the APHA annual meeting and the annual Health Professions Day, since alumni are already attending these events, in order to obtain their perceptions on various areas including competency attainment and application in their post-graduation placements. The program has also begun scheduling one-on-one interviews with alumni via Zoom in an effort to reach alumni who cannot come to campus or are unable to attend said events. The program also shared with the site visit team a newly created LinkedIn group for alumni to create a space for ongoing feedback and collaborations with the alumni population.		
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B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success		The program has articulated an evaluation plan with 15 measures across four goals. The measures have been designed to focus on the advancement of the field of public health and promotion of student success. The monitoring data derive from the following sources: alumni surveys, alumni focus groups, workforce/employer surveys, graduating student surveys, graduating student focus groups, faculty activity surveys, course evaluation surveys, student transcripts, student academic improvement forms, and forms that capture student performance in the APEX and ILEX. For each of the measures, it is clear that the appropriate parties are involved in review and planning based on the data collected. The program director (in some cases, jointly	In response to the first commentary, while it is true that the Faculty Activity Survey (FAS) has not yet been administered, we have used alternative methods to collect some of these data in the past. In our Self Study we listed the multiple data sources that we had used in different sections of the report. In addition, in the ERF B5-3, we included an Implementation Progress Summary (see Attachment USFCA-1) that describes in detail the data sources used in lieu of the FAS,	The Council acknowledges and appreciates the program's response to the site visit team's report.
Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined				

<p>responsible parties & cycles for review</p>		<p>with the associate dean) reviews all findings and brings them to the monthly program meetings or the annual faculty retreat for discussion and decision-making.</p> <p>Progress toward instructional goal one (provide student-centered education of health professionals using advising and effective and/or innovative pedagogy) is assessed using six measures that cover a wide range of salient components of the goal. For instance, one of the measures monitors the participation of faculty in professional development to improve teaching. In addition, four measures track students' perceptions of teaching effectiveness; program effectiveness; faculty advising; and climate, diversity, and inclusion. The sixth measure is an objective assessment of student learning through reviewing grades and individual performance improvement plans for students experiencing academic challenges. The second instructional goal (enable students and alumni to apply public health skills and knowledge to improve the health and well-being of diverse and vulnerable populations) is tracked using four measures. Two measures are objective: student competency demonstration in the APEX and ILEX and job placement rates. The other two measures are subjective: alumni perceptions of competency attainment and employers' perceptions of alumni.</p> <p>Progress toward the service goal is defined as engagement in activities in community and professional settings. This is tracked using two measures--one for students and one for faculty. While this system is not yet in place, the program will be rolling out the faculty activity survey in fall 2019. During the site visit, the team learned that that the survey will collect data from full-time faculty members on their</p>	<p>and a Table of Contents document (see Attachment USFCA-2) that also listed all documents in the ERF B5-3. Two sources in particular (among others) for the extracted data were 1) updated faculty CVs, and 2) the Faculty Activity Sheet (a Google sheet where faculty uploaded information). Both of these sources contained most recent service, research, and teaching effectiveness activities including attendance at pedagogical and continuing education workshops.</p>	
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		<p>own service and student involvement in their service activities. While the program recognizes that that the measure will only capture some of the student service engagement, it plans to use this as a starting point for collecting useful data.</p> <p>Progress toward the scholarship goal is monitored using three measures. The program monitors the extent to which faculty are generating knowledge to advance public health, disseminating such knowledge, and engaging students in their research activities.</p> <p>The first commentary reflects the fact that many components of the plan are new and/or in flux. For instance, of the 15 outcome measures, six rely on the faculty activity survey, which has not yet been administered. The survey will be completed annually by all full-time faculty. Similarly, the workforce and employer survey is a revision of the previous preceptor survey. In the future, it will be sent to graduates' employers and other relevant public health agencies, in addition to preceptors.</p> <p>The second commentary pertains to the data sources that have been selected for the evaluation plan. Some of the data sources may not provide the scope and depth of information needed to inform program improvement. Unfortunately, since many of the processes have not yet been fully implemented, the program cannot determine whether the data they need will actually be available. One example is tracking of employers' perceptions of alumni. The data come from a single open-ended question on the preceptor survey: "What unique values, approaches, or competencies have USF students brought to their work with your organization?" That survey was disseminated</p>		
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		only once (in November 2018). At that time, 14 persons responded to that question and provided answers that ranged from very specific to quite generic. Without any other data, it may indeed be difficult to assess program progress and guide program improvement decision-making. Another example is the use of responses to the faculty activity survey to determine program success in assuring student engagement in service. Capturing those data from other sources may provide a more accurate assessment.		
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B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		The central focus of the evaluation system is the review of evaluation findings in monthly program meetings. Attendance at those meetings is required of all full-time faculty, so they are able to provide input into interpretation and action planning based on the findings.	Click here to enter text.	
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)		The program provided the team with two examples of program decisions and actions based on evaluation findings. One example allowed the site visit team to learn of a large undertaking to revise the APEX and ILEX based on data arising from course evaluations, student assessments, and time to completion. Together, the data suggested that the requirements were unclear; the ILEX academic standards were not being uniformly achieved; students were having difficulty identifying APEX placement sites, which caused delays in beginning the process; and time to completion was sometimes longer		

		<p>than the expected one semester. Through a series of discussions among the program director, associate dean, and faculty, an action plan was developed.</p> <p>Those discussions resulted in three major outcomes: the hiring of a part-time fieldwork coordinator, the creation of a faculty and student task force to propose changes and, the revision of the way in which APEX and ILEX mentoring is counted in faculty workload.</p> <p>A second example of action taken as a result of evaluation findings pertained to the need for improvement in student advising. Data from graduating student surveys and alumni focus groups/interviews demonstrated low student satisfaction with advising. Faculty also observed that students were registering for incorrect courses. As per the evaluation plan, those data were reviewed in the monthly program meetings by faculty, staff, the program director and, the associate dean. In those meetings, participants redesigned the advising system as follows: students are assigned to advisors upon initial enrollment; multiple full-time and part-time faculty serve as advisors, rather than relying primarily on the program director for advising; the student portal was revised to ensure complete and clear information; and new processes and resources were developed for the advisors.</p>		
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C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		Data provided in the self-study document indicate that the program seems to be financially stable and secure. Additionally, the school has hired a senior associate dean and a full-time development officer to secure additional scholarship and funding opportunities, and to conduct a “building capital campaign.”	Click here to enter text.	
Financial support appears sufficiently stable at time of site visit		<p>Any requests for additional faculty are submitted to the dean and then to the provost. The program has more than doubled its faculty since 2013—five FTE to 11 FTE. The school and university have a centralized approach to budgeting at the dean and provost levels. Budget flexibility and management at the provost and dean levels has encouraged a collaborative and interdisciplinary approach to teaching and program management. An example of this is looking at how to share faculty across multiple disciplines and programs, where feasible and appropriate.</p> <p>The MPH Program uses two processes to develop its annual budget, one for faculty salaries and one for non-salary expenses. Faculty are not expected to supplement their salaries with research funding, and their salaries are paid by school funds. Full-time faculty are paid for a nine-month period, and adjunct faculty are paid per credit. Operational costs include most expenses other than salary. The school (not individuals) may make requests for more operational costs to the provost before the new fiscal year.</p>		

		<p>Students were eligible for a total of \$98K in scholarships in 2018-19, but the program has more than doubled the available scholarship funds for 2019-2020, although some of those funds are restricted. Students can also apply for \$300 per year for professional development support, such as attending a conference.</p> <p>The SONHP receives an annual allocation for faculty development funds of \$200K per year for full-time faculty and \$30K for adjunct faculty, and both of these caps are set by the Bargaining Unit Agreement. Funds are available to all faculty to advance their teaching effectiveness, research, or scholarship. Faculty may make individual requests for funds to attend conferences or support research projects, up to three times per year. Faculty from the whole school apply to this fund, not just the MPH program. There is a committee that makes the determination for full-time faculty requests, and the dean approves or denies the adjunct faculty requests.</p> <p>The program receives a share rather than the full amount of tuition. The program's budget is based on tuition but also on program needs. The provost allows for an annual request of additional resources in the form of "operational costs" prior to the start of every new fiscal year through the centralized approach to budgeting. In speaking with both the dean and the provost, they demonstrated their knowledge of the budget for both the SONHP and the MPH program.</p> <p>The school and the principal investigator receive 10% of the indirect costs recovered on grants, but if the full indirect rate is not charged, then nothing comes back to the school or the PI.</p>		
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		External funding was not emphasized as a priority because the school characterizes itself as a practice-based and teaching school. Even though faculty do research, they often receive support from entities including the university's Jesuit Foundation or organizations focused on particular programs or interventions.		
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C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
School employs at least 21 PIF; or program employs at least 3 PIF		The program has sufficient faculty resources to fulfill its stated mission and goals. The program has 11 primary instructional faculty (PIF), with five contributing to the community and public health practice concentration, three contributing to the health policy and leadership concentration, and three contributing to the behavioral health concentration (plus an additional 14 non-PIF). All but one PIF are full-time faculty who dedicate at least 80% of their time to the MPH program. One PIF dedicates 50% of his efforts to the MPH program and the remaining 50% in the School of Management at USF. Full-time appointment is defined as covering a nine-month academic year, during which the faculty is responsible for 15 units of efforts each semester. For full-time appointment, a faculty member devotes nine to 12 units per semester for teaching (60-80%), zero to three units per semester to scholarship (0-20%), and three units per semester (20%) to service. Faculty listed as 0.8 FTE teach	Click here to enter text.	
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable				
Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable	N/A			
Ratios for general advising & career counseling are appropriate for degree level & type				
Ratios for MPH ILE are appropriate for degree level & nature of assignment				

Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable	N/A	one to four units in another program within the university, with the remaining units in the MPH program.		
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable	N/A	The majority of full-time MPH faculty teach at least one core MPH course – thus, teaching students across all three concentrations.		
Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)		The self-study provides data related to faculty and staff advising of students. The program averages 24 students per faculty advisor. Among PIF, the minimum number of students is 20 each year, and the maximum number of students is 36. Among non-PIF, the minimum number of students each year is 24, and the maximum number of students is 25. Non-PIF teach most of the ILEX courses and therefore are solely responsible for the ILEX student advising. The program averages 6.5 students per non-PIF for ILEX advising, with a minimum of one student each year and a maximum of 10 students.		
Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities)		Data represented in the self-study show high student satisfaction with class size and the availability of faculty. Among graduating students, 92% agreed that class size was conducive to learning. During a focus group, alumni reported that small class sizes allowed them to foster relationships among their peers and created more discussions that allowed for students to share their perspectives. Also, among graduating students, 91% agreed that faculty were available to meet when needed. During the alumni focus group, students reported no sense of limited faculty. Students completing online classes noted that they were satisfied with communication via email with faculty, and if there were pressing matters, they were able to schedule a meeting within two weeks.		

		<p>Students who met with site visitors said that the faculty are actively engaged with them and provide flexible means for communication. Students also voiced their satisfaction with small class sizes and believed it provided them with the “opportunity to thrive.”</p> <p>During the site visit, students in the online program shared their positive experiences with advising and interaction among peers and faculty. Online students said faculty were always willing and able to meet with them via Zoom.</p> <p>Although the site visit team noted a heavy advising load per faculty member, on-site discussions with faculty, students, and alumni indicated that the advising load has not hindered the quality of advising nor has it been burdensome on faculty. Faculty members did not feel overwhelmed with the number of student advisees. Students were very enthusiastic about the level of support from faculty members. Many students shared that they have been able to develop strong relationships with faculty members over time and that most advising is done informally, but they are aware of the availability of the formal advising mechanism.</p>		
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C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Staff & other personnel are currently adequate to fulfill the stated mission & goals		The program has a total of 10.75 FTE classified as staff and other personnel, of which only four are shared with other units (program assistant, program administrators in Sacramento and Orange County, and student workers).	Click here to enter text.	
Staff & other personnel resources appear sufficiently stable		<p>The program stated that staff and other personnel are adequate, but noted that the shared FTEs can be stretched at busy times, and that sometimes needs are not met or are not met in a timely manner. During the site visit, the dean noted that she has addressed the issues of shared FTEs by doing an assessment of the portfolios where staff were needed, including those focused on the ILEX and APEX experiences. As a result of the assessment, the dean reallocated the Sacramento-based staff member to the main campus; now two people work as committed placement coordinators to coordinate the clinical placement programs and the ILEX and APEX programs.</p> <p>Faculty, staff, and students all agreed that their department supervisor (supervises student services, graduate admissions, and course registration) is instrumental to the program and its ability to function. They also agreed that the staff changes have been incredibly helpful for ensuring that students and faculty have the support they need. Of particular note was the support (both staff and funding) dedicated to instructional design and training for online and hybrid courses.</p>		

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		All faculty have office space, and, during the site visit, the dean announced approval to expand the program's physical space on the main campus.	Click here to enter text.	
Physical resources appear sufficiently stable		<p>On the (main) San Francisco campus, the current classrooms have smart technology, and they have an active learning classroom in the library that may be replicated in the future with student-centric design for project-based and collaborative learning. The Sacramento campus does not have the same resources in classrooms; however, Sacramento students noted that they have adequate resources for meeting and have particularly good library resources.</p> <p>The site visit team noted that the program's current space is adequate. In the self-study and during on site discussions, the program shared that with growing rate of admission to the program, it may not have sufficient space to accommodate students. The recently-approved expanded space for faculty and students on the main campus should address this concern. Additionally, to address the concern, the program has hired a development officer to begin a capital campaign to potentially construct a new wing on an existing hall. The city of San Francisco put a cap on the number of students on the main campus; therefore, the program has made the decision to focus expansion in other counties.</p>		

		Faculty, staff, and students all agreed that while space could raise concerns, they did not note particular issues with the space on any of the campus locations.		
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C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources, including personnel, for students & faculty		The library resources available to students are sufficient. On various occasions during the site visit, students and alumni enthusiastically praised the library staff. Students on multiple campuses voiced the same opinion with library resources.	Click here to enter text.	
Adequate IT resources, including tech assistance for students & faculty		Students and faculty did not report any issues with access to hardware or software and noted that technical assistance was always available. During on-site discussions, students noted that they always had access to technical assistance when needed, day or night, which was extremely helpful.		
Library & IT resources appear sufficiently stable		For some software, students can access steeply reduced prices, but not for all software that might be of interest to program students. The team discussed this with school and university leaders, and they noted that they handle access to hardware and software on a case-by-case basis. Financial support for hardware and software can be incorporated into a student's financial aid package; the leaders stated that the program prioritizes students with financial hardships for such packages.		

		Students and faculty noted that they are frequent users of the Zoom technology and are grateful for it. They all said they had no issues with access to IT resources.		
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D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		<p>The program ensures that MPH students are grounded in public health knowledge by mapping the learning objectives to multiple required courses and three online modules.</p> <p>The syllabi, including the course objectives, assignments, course projects, and final exams, specifically align with foundational knowledge areas.</p> <p>Reviewers also validated the online modules' alignment with designated learning objectives.</p>	<p>Click here to enter text.</p>	

D1 Worksheet

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

D2. MPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		<p>The program assesses the 22 foundational competencies in six courses that are required by all MPH students, plus an additional course on leadership that varies based on concentration.</p> <p>The concern relates to competencies 3 and 21, for which the site visit team was not able to validate didactic and/or assessments. For competency 3, the site visit team was able to validate didactic preparation and adequate assessment for the quantitative component of the competency. However, the team was not able to validate didactic preparation for the qualitative component. The syllabus for the MPH 636: Program Planning and Evaluation course lists the qualitative assessment as optional; faculty assured the team that students do and will need to conduct at least one qualitative analysis, so the assessment portion must be clarified, as well, in order to satisfy this criterion.</p> <p>For the competency 21 assessment, students read a case study based on an HIV research study led by an interprofessional team and answer discussion questions on a Canvas discussion board. The site visit team noted that there is no interprofessional interaction among students since only MPH students register for this course.</p> <p>During the site visit, faculty members were very receptive to questions and concerns from the site visit team regarding competency didactic and assessment</p>	<p>After consideration of CEPH's comments on the qualitative analysis section of Foundational Competency #3, we have decided that this is best addressed in courses other than MPH 636. Therefore, to fully meet this competency, the didactic and required assessment opportunity are similar for all students but taught in a different course depending on concentration.</p> <ul style="list-style-type: none"> • For MPH-Community and Public Health Practice Students, the competency is met in the concentration course <u>MPH 663 Research Methods in Public Health</u>. • For MPH-Behavioral Health Students, the competency is met in the concentration course <u>BH 603 Applied Research Methods Behavioral Health</u>. • For MPH-Health Policy Leadership Students, the competency is met in the concentration course <u>MPH 638</u> 	<p>The Council reviewed documentation in the program's response to the site visit team's report that demonstrates updated information on assessment. Based on the information provided, the Council found that the program has adequately addressed the concern identified relating to foundational competency 3.</p> <p>The Council found that the program has not addressed the concern related to competency 21. The program has not yet provided evidence that it effectively places students in settings that require interprofessional work and assesses this work.</p>

		<p>preparation and acknowledged the gaps in the curriculum that will be addressed.</p>	<p><u>Strategic Planning and Implementation.</u></p> <p>The revised content and assignments are being implemented now, starting with students in Fall 2019. In each of these courses, students have assigned readings and lecture on qualitative methods and analysis. All students are required to analyze transcripts of qualitative data using software to document main themes and sub-themes from the transcripts. The specific assessment opportunity for each of the three courses is briefly described in the updated CEPH Table D2 (Attachment USFCA-3), and the detailed assigned readings, presentation, and assignment for each course are described in Attachment USFCA-4. The full syllabi for the three courses are also provided (Attachments USFCA-5, USFCA-6, and USFCA-7)</p> <p>For Competency 21, all students are required to complete didactic and graded experiential learning activities on interprofessionalism included in the APEX Preparation course (MPH 680) and the APEX I course (MPH 681). The APEX I course includes a classroom-based</p>	
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			<p>component (in person or online) in addition to the supervised fieldwork. The content and associated activities for meeting this competency are scaffolded to help students move through stages of comprehension, analysis, reflection and application. The assignments are all graded by a faculty member. Students must a) complete an online didactic module on professionalism (including roles and expectations of interprofessional teamwork) and a quiz; b) read an interprofessional case study and write a case analysis; c) watch a video on cultural competency and write a personal reflection and plan to manage bias; and d) in groups, perform a role play of an interprofessional meeting (with each student taking a different professional role) to apply concepts learned. See Attachment USFCA-8 for detailed required assignments, and Attachments USFCA-9 and USFCA-10 for syllabi for MPH 680 and MPH 681.</p>	
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D2 Worksheet

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

D3. DRPH FOUNDATIONAL COMPETENCIES

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

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		The program has three MPH concentrations, each with a set of competencies that define the advanced skills and knowledge that students are expected to attain, as shown in in the D4 worksheet. The program lists five competencies for the community and public health practice concentration, five competencies for the health policy leadership concentration, and six competencies for the behavioral health concentration.	Regarding the CPHP concentration competencies, we have modified the description and the competencies for the CPHP Concentration to highlight the focus on the goal of social justice and addressing the social determinants of health in communities through the application of management skills in a variety of settings including public health research and practice. See Attachment USFCA-11 for the revised description and modified competencies. We also have revised the syllabus for MPH 633 Community-based Participatory Research and Practice (attachment USFCA-12) to make available the full description of the assessment opportunity for Competency #2.	The Council reviewed documentation in the program's response to the site visit team's report that demonstrates updated competencies and assessments. Based on the information provided, the Council found that the program has adequately addressed the concern identified relating to the community and public health practice concentration.
Assesses all students at least once on their ability to demonstrate each concentration competency		Students in the behavioral health concentration are prepared to take the Certified Health Education Specialist (CHES) exam. Reviewers were able to validate coverage and assessment of the Seven Areas of Responsibility and Competencies for Health Education Specialists throughout the curriculum.		
If applicable, covers & assesses defined competencies for a specific credential (eg, CHES, MCHES)		The first concern relates to the competencies listed for the community and public health practice concentration. While the current set of competencies is appropriately distinguished from the foundational competencies, the site visit team found that the competencies, as written, do		The Council found that the program has also addressed site visitors' concern related to the formulation of competencies in the health policy leadership concentration. However, the Council found that the program has not identified an appropriate assessment activity for HPL competency 5. The assessment does

		<p>not adequately convey the goals heard during on-site discussions. The program might consider addressing the competencies in a more systematic way to describe or communicate the concentration's unique focus on social justice, program management, project management, and training students to be able to work in a variety of public health settings. Additionally, reviewers could not identify appropriate assessment opportunities for competency 2.</p> <p>The second concern relates to the definition of competencies for the health policy leadership concentration. The health policy leadership concentration has some competencies that overlap with foundational competencies. Competency 3 overlaps with foundational competency 15, and competency 5 overlaps with foundational competencies 9 and 15. Additionally, the program may want to consider a more systematic approach to integrating health economics, health policy, and leadership through the competencies to improve curricular cohesion.</p>	<p>Regarding the HPL Concentration competencies, we have revised and integrated the competencies to focus more on the skills needed to lead organizations and stakeholders toward more effective policy change. We have changed competency #3 to focus more on policy implementation (to distinguish from the foundational competency #15, 'evaluating policy impact'). We also changed competency #5 to focus on applying knowledge of scientific criteria and regulatory systems to enhance accountability in the policy process (to distinguish from foundational competence #9 on 'designing policy,' and competency #15, 'evaluating policy impact'). The integrated competencies focus on the skills that a health policy leader will need to apply in their professional careers across various content areas. See Attachment USFCA-13 for the revised HPL concentration description and competencies.</p>	<p>not appear to match the competency or assess all aspects of this advanced competency statement.</p>
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D4 Worksheet

Community and Public Health Practice Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply qualitative methods to assess community assets for addressing public health and environmental issues	Yes	Yes
2. Analyze how issues of power, race and ethnicity, sex and gender identity and socioeconomic factors affect the development, implementation, and evaluation of community-based projects	Yes	Yes
3. Develop a research project proposal using mixed methods to address a public health problem	Yes	Yes
4. Apply participatory project management strategies to improve the quality of programs and services in public health settings	Yes	Yes
5. Identify environmental health risks in vulnerable communities and examine strategies to reduce exposures	Yes	Yes

Healthy Policy Leadership Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Predict how health policies may impact risks and drivers of health outcomes at the health system and public health sector level	Yes	Yes
2. Synthesize evidence from literature review and databases to write a policy options paper for a specific audience, identifying a problem and proposing alternative approaches to meet health needs in underserved communities	Yes	Yes
3. Design a leadership plan and strategies to manage stakeholders and related political processes, addressing conflict, resistance, and cooperation in the implementation process	Yes	Yes
4. Communicate recommendations to improve organizational strategies and capacity to implement health policy	Yes	Yes
5. Apply scientifically-based criteria and regulatory knowledge to enhance accountability in the creation and implementation of public health policies	Yes	CNV

Behavioral Health Concentration Competencies * Only 5 appropriately defined and mapped competencies are required	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Plan a health education training, curriculum, or workshop including stakeholder identification, resource planning and timeline, volunteer recruitment and marketing strategy selection, and monitoring process	Yes	Yes
2. Effectively deliver evidence-based health education and behavior change intervention skills such as a motivational interviewing, health coaching, peer education, mindfulness, or social media messages to individuals or groups	Yes	Yes
3. Analyze the impact of chronic conditions and propose strategies to address the prevention and management across all levels of the socioecological model	Yes	Yes
4. Formulate strategies for mental health and substance abuse prevention and treatment in community settings	Yes	Yes
5. Develop a data collection and analysis plan including measures and methods for research on behavioral health	Yes	Yes
6. Create a professional development plan that outlines goals and strategies for becoming a highly skilled health education specialist and leader in health promotion	No	CNV

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
All MPH students produce at least 2 work products that are meaningful to an organization in appropriate applied practice settings		MPH students are required to enroll in their APEX courses during fall 2 and spring 2 semesters. Students are required to do field work with a preceptor at a public health agency. At the beginning stages, students work with the fieldwork coordinator to discuss their goals for their field work and capstone and their professional goals after they finish the program. Students are required to develop a detailed work plan and provide at least two products of different types as a result of their APEX courses. As part of their work plan, students must identify five competencies (three must be foundational) to be addressed in their APEX project. Students work very closely with assigned advisors and other faculty to determine the right experience and to select the appropriate competencies for that experience. At the completion of the experience and upon submitting their products, students must describe the competencies they selected and how they are met through the products. Also, throughout the experiences, students must complete a journal that is submitted to faculty to track progress, challenges, personal growth as a public health practitioner, and/or to adjust competencies.	Click here to enter text.	
Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies				
All students demonstrate at least 5 competencies, at least 3 of which are foundational		Starting in fall 2019, the students will begin to complete a self-directed module to help facilitate the field work experience and prepare for it in advance. The program has also created a new database for students that will list all available placement sites and potential preceptors. The purpose of this database is to guide students in selecting a		

		<p>site from an already established list of sites where other students have completed their work previously.</p> <p>Some of the sites listed in the database include AARP, Alliance of Nurses for a Healthy Environment, California Department of Health Immunization, California Hepatitis C Task Force, and Eat San Francisco, among others.</p> <p>During the site visit, preceptors shared that they provide students with feedback throughout the process of creating their products. Preceptors noted that the meetings that were held with the preceptor, student, and the faculty advisor were sometimes the most helpful in terms of expectation-setting, feedback, and ensuring a positive experience for both the preceptor and the student. Preceptors noted that these meetings were scheduled inconsistently, and noted they would like to see this be a more regular part of the process for each experience.</p> <p>Faculty expressed that they are very engaged with ensuring and assessing high quality work products. Students also confirmed on the site visit that they received in-depth assistance through the journal process on their products throughout their experiences. Preceptors also noted that they value the feedback students receive on products from faculty, as well as their continued relationships with faculty.</p>		
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D6. DRPH APPLIED PRACTICE EXPERIENCE

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

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students complete project explicitly designed to demonstrate synthesis of foundational & concentration competencies		<p>The program presented a plan for the newly-revised ILEX course, which will officially begin with the entering fall 2019 cohort. However, in discussions with the faculty, the site visitors learned that one of the ILEX faculty pilot-tested the new process with the spring 2019 students. The team was able to review an example of student work that demonstrated synthesis of foundational and concentration competencies.</p> <p>All students are required to complete MPH 683: Integrated Learning Experience in their final term. The site visit team was able to review the ILEX syllabus, templates and rubrics, which clearly provide the necessary guidance and expectations for the students. The ILEX must demonstrate synthesis of a minimum of five competencies: one will be CEPH foundational competency 19 (communicate audience-appropriate public health content, both in writing and through oral presentation), at least one will be selected from the concentration area, and the other three will be a combination of other foundational and/or concentration competencies. Students work with a faculty</p>	<p>Click here to enter text.</p>	
Project occurs at or near end of program of study				
Students produce a high-quality written product				
Faculty reviews student project & validates demonstration & synthesis of specific competencies				

		<p>member to select competencies that are relevant to their goals and interests.</p> <p>The ILEX comprises two components: a high-quality written paper and an oral or poster presentation delivered at the annual school Health Professions Day held in August. The topic for the written report and presentation must be approved by the ILEX faculty. Students may choose, but are not required, to base the ILEX on the work done in the APEX. To that end, site visitors learned of plans in place to match students to faculty, so that students would ideally be assigned to an ILEX faculty who has also served as their APEX faculty, ensuring continuity for the students. The ILEX will contain an in-depth review of the literature about a given public health problem and evidence-based interventions to address it. The nature of the ILEX varies but may include primary data collection and analysis; application of social, behavioral or, organizational change theories; and/or policy analysis.</p>		
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D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

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

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

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

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

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

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

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

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

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

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

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

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		<p>All MPH students complete at least 42 credits of coursework to earn the degree.</p> <p>One unit of credit in lecture, seminar, and discussion work equates to one hour of direct faculty instruction and a minimum of two hours of out-of-class student work per week through the 15-week semester.</p>	Click here to enter text.	

D15. DRPH PROGRAM LENGTH

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

D16. BACHELOR'S DEGREE PROGRAM LENGTH

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

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

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

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

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

D19. ALL REMAINING DEGREES

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

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Instructional methods support regular & substantive interaction between & among students & the instructor		The MPH concentration in community and public health practice (CPHP) is offered in an online format. As the program explains in the self-study, due to the shortage of public health professionals, the distance-based option appeals to a broader geographic and professional demographic of individuals who are unable to pursue a campus-based full-time degree. Enrollment in the online	Click here to enter text.	
Curriculum is guided by clearly articulated learning outcomes that are rigorously evaluated				

Curriculum is subject to the same quality control processes as other degree programs in the university		format is restricted to students in the following states: Arizona, California, Florida, Hawaii, Nevada, Oregon, Texas, and Washington.		
Curriculum includes planned & evaluated learning experiences that are responsive to the needs of online learners		The program uses an asynchronous format to deliver course materials and offers synchronous office hours and student meetings, as needed. The online CPHP concentration shares identical content and requires satisfaction of the same requirements as the campus-based CPHP concentration. USF faculty support the online students in completing their APEX in their home communities. Each MPH online student is assigned a faculty advisor who is available throughout their progress in the program and can be reached via Zoom videoconferencing, phone and, email. Services that are available at the USF campus are made available remotely, such as library resources, writing consultants, and tutors. Students also have access to the Handshake database for job searches and can live chat with career planning staff. Students have 24/7 phone access to Counseling and Psychological Services (CAPS). Canvas and technical support are also available to students 24/7.		
Provides necessary administrative, information technology & student/faculty support services				
Ongoing effort to evaluate academic effectiveness & make program improvements				
Processes in place to confirm student identity & to notify students of privacy rights and of any projected charges associated with identity verification		The same faculty teach on-campus and distance-based classes, using the same syllabi and the same course-level and programmatic outcome tracking and evaluation measures. The program has security processes with login and password requirements designed to validate and verify student identity. The program also has steps that require multiple authentication methods, such as requiring an access code before taking each quiz. Available data, as well as on-site conversations, indicate that students are grateful for the ability to complete the		

		<p>program or parts of the program at a distance. Students utilizing the hybrid format appreciate the flexibility to complete courses both online and on -campus.</p> <p>The program shared its dedication to online students with the site visit team. The program realizes that online students lose the opportunity to be in a classroom; therefore, they take extra measures to ensure that students feel engaged in the online modality by working with online course designers to make as many resources as needed available to students. Some faculty also record videos and post them to the online platform so that students are able to build and maintain an effective and interactive learning environment.</p>		
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E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		The program has a well-qualified complement of 11 full-time faculty. All faculty members hold doctoral degrees. In almost all cases, these doctoral degrees are directly related to the area of teaching focus. For example, in the health policy leadership track, six of the eight faculty have degrees related to policy. The faculty includes three professors, four associate professors and four assistant professors. Six of the faculty are tenured (two full and four associate), two are tenure-track and, three are term appointees.	Click here to enter text.	
Faculty education & experience is appropriate for the degree level (eg, bachelor's, master's) & nature of program (eg, research, practice)		In addition, the program retains 14 non-PIF who may be asked to teach courses and advise MPH students as		

		needed. The non-PIF faculty represent a wide array of educational backgrounds and/or practice experience that qualify them to serve in the capacity of instructors and advisors. Of the non-PIF faculty, seven hold MPH degrees and 11 hold doctorates. Additionally, two of the non-PIF are alumni of the USF MPH program. The site visit team determined that the program has recruited faculty that align well with the concentrations offered. For instance, among the non-PIF assigned to the behavioral health concentration, one is the director of the university's health promotion services and two are staff psychologists at the San Francisco VA Medical Center.		
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E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		The program's faculty have a variety of public health practice experiences ranging from providing substance abuse treatment to people in prison to working in STD prevention and control at the San Francisco Department of Public Health. The program has used adjunct faculty to supplement its experience in public health practice, where necessary. These instructors have brought real-life examples from the International Labor Organization, the World Health Organization, the San Francisco Department of Public Health, and the San Francisco County Jail Health Services, among others, to their course lectures.	Click here to enter text.	
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels				
Regularly involves practitioners in instruction through variety of methods & types of affiliation				

		<p>expand on these experiences. The site visit team also heard, in-depth, from students about their experiences being mentored and connected to opportunities for practice.</p> <p>One example of practice integration that was brought to the classroom was in the area of informatics. During on-site discussions, faculty shared that there is a prominent presence for the digital health and technology industry in the area. Guest speakers include representatives from Google and Castlight Health, who discuss their jobs with students, what the transition into that career looked like for them, and different ways to think about public health and technology.</p> <p>The program's ongoing relationships with guest speakers and other public health practitioners has also allowed the program to build an extensive inventory of contacts for preceptors to cater to various interests of their students.</p> <p>The site visit team noted that the program is encouraging of faculty to maintain links to state and local public health agencies, particularly on the Sacramento campus. Faculty have connections to county public health departments and active partnerships with state agencies in Sacramento and partners that are agency-specific. The program also has long-standing relationships with state and local public health departments.</p>		
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E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Systems in place to document that all faculty are current in areas of instructional responsibility		<p>The program highly values teaching. The majority of effort for the PIF faculty is devoted to teaching (60% for tenure-track/tenured faculty and 80% for term faculty). In determining promotion, faculty are judged based on teaching, research and, service (tenured/tenure-track) or teaching and service (term). Faculty must be deemed to be at least "adequate" in teaching to be promoted, with adequacy being defined with specific objective criteria. Non-PIF faculty must also demonstrate teaching effectiveness in order to be promoted, i.e., to advance to the Preferred Hiring Pool.</p> <p>Faculty currency in areas of instructional responsibility and pedagogical methods are currently assessed primarily through the annual faculty evaluation process. Faculty complete an academic career prospectus, which reviews progress over the previous academic year and sets goals for the upcoming year. Upon review of the prospectus form, site visitors noted that it contains a series of open-ended questions. While faculty may use that form to document their currency in those two areas, the form is not designed specifically to capture that information and may not necessarily serve that function.</p> <p>Beginning in fall 2019, the program plans to require an annual Faculty Activity Survey, which will provide more detailed information about faculty teaching, research, service and, professional development. The survey will be</p>	<p>Please refer to response in 'B5 Defining Evaluating Practices' regarding our previous data collection methods for faculty activity.</p>	<p>The Council acknowledges and appreciates the program's response to the site visit team's report.</p>
Systems in place to document that all faculty are current in pedagogical methods				
Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction				
Tracks indicators that provide meaningful information related to instructional quality				
Supports professional development & advancement in instructional effectiveness for all faculty				

		<p>used as part of the program’s comprehensive evaluation, providing data to track progress toward several outcome measures. The results will be presented in summary form at the monthly program meetings and can then be used in program decision-making.</p> <p>Faculty instructional effectiveness is measured through three mechanisms. The primary mechanism is the end-of-term course evaluation process. Faculty may also opt to administer mid-term assessments that allow for earlier feedback that can be used to improve the course in real time. The third mechanism involves peer coaching from non-MPH faculty—a service provided by the university’s center for teaching excellence.</p> <p>MPH faculty are able to access resources to support professional development in teaching. Sabbatical leave is available to full-time faculty every seven years. Faculty on sabbatical may use that time to enhance their instructional skills. The USF Center for Teaching Excellence offers services such as, peer classroom observation and coaching, workshops and, learning communities surrounding pedagogy. The USF Educational Technology Services unit promotes the use of technology to improve teaching by offering group trainings, individual consultations and access to software.</p> <p>In addition, the school faculty development committee offers funding for research support, travel, training and, other professional development needs. Over the past three academic years, the committee has granted 35 funding requests across seven faculty members. Most of the requests were for travel to conferences (n=22), and eight were for support for research assistants. During the</p>		
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		<p>site visit, the team learned that MPH faculty are heavy users of the university's training opportunities.</p> <p>The program has identified four indicators of instructional quality to monitor. In the area of faculty currency, the program conducts annual reviews of faculty productivity. All full-time faculty complete the process in which they meet with the dean to assess past year accomplishments and set short- and long-term goals in the areas of teaching, research and service. In the area of faculty instructional technique, the program has chosen student satisfaction with instructional quality with end of term course evaluations as the indicator. The program reports that faculty generally score >5.0 on the 6-point scale. In the area of program-level outcomes, the program has identified two indicators: courses that integrate technology in innovative ways to enhance learning and courses that employ active learning techniques. The program provided the site visitors with examples of the use of technology in classes, such as the Canvas learning management system for all classes, Zoom for faculty-student and student-student interaction at a distance and, Poll Everywhere to capture real-time assessments of students' mastery of course concepts. Examples of efforts to incorporate active learning in MPH courses include the use of USF "Active Learning Classrooms" and faculty participation in "Active Learning" learning communities. These indicators do not appear to be particularly aspirational for the program. Identifying measures that would help guide the program toward areas in need of improvement may be more useful for program assessment.</p>		
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		The commentary relates to the fact that the systems to document faculty currency in areas of instructional responsibility and pedagogy are not yet fully developed. However, the program has plans in place to have a robust system in the upcoming academic year (fall 2019).		
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E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		<p>General expectations for scholarship are governed by the collective bargaining agreement. The PIF faculty are expected to devote 20% of their effort to scholarly activity. There are no scholarship requirements for term full-time faculty (who are only required to contribute in teaching and service) or part-time faculty (who contribute in teaching and advising). In determining promotion, tenure-track and tenured faculty are judged based on teaching, research and, service. Those faculty must be deemed to be at least "adequate" in research in order to be promoted, with peer-reviewed publication being a primary indicator. MPH faculty scholarship is expected to elevate the reputation of the institution, promote public health and, inform and enhance classroom teaching. During the annual faculty evaluation process, faculty work with the dean to review past accomplishments and develop goals. For PIF faculty, scholarly productivity is a key element of the evaluation discussion.</p> <p>MPH faculty have access to resources that facilitate their engagement in scholarly activity. The USF Center for Research and Artistic Excellence offers skills development</p>	Click here to enter text.	
Faculty are involved in research & scholarly activity, whether funded or unfunded				
Type & extent of faculty research aligns with mission & types of degrees offered				
Faculty integrate their own experiences with scholarly activities into instructional activities				
Students have opportunities for involvement in faculty research & scholarly activities				
Tracks measures that are meaningful and demonstrate success in research and scholarly activities				

		<p>seminars, writing retreats, and statistics consultations and convenes faculty learning communities in interdisciplinary areas that attract interprofessional collaborations across campus. One member of the MPH faculty is on this center's advisory board, which allows her to communicate public health training needs to the center. The USF Office of Contracts and Grants provides centralized comprehensive research support.</p> <p>Faculty research is integrated into class instruction. For instance, in MPH 633: Community-based Participatory Research and Practice (CBPR), the professor uses her CBPR project with formerly incarcerated persons to exemplify key concepts in the classroom. In another course (MPH 622: Communication for Healthy Behavior and Social Change), the professor shares her research on development and evaluation of mobile phone interventions as case studies.</p> <p>The faculty provide opportunities for students to engage in research by mentoring them through the Directed Study Experience and recruiting them to serve as research assistants on their projects. Some of these activities have resulted in conference presentations and manuscripts on which the students serve as co-authors. During the site visit, students noted that they do not have a system in place for learning about and accessing research opportunities. They mentioned that they routinely learn of external opportunities for research and service via email. However, some students observed that internal opportunities with the MPH faculty are not necessarily advertised widely and students have to either seek out faculty individually or are in some cases sought out by their faculty advisors.</p>		
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		<p>The program has selected three outcome measures for faculty scholarly activity. The program aims to have at least 80% of PIF participating in research activities. Over the past three years, the program has seen improvement with 70% in AY 2016-17, increasing to 80% in AY 2017-18 and AY 2018-19. A second target is to have 70% of the PIF advising students for research activities. In 2016-17, 60% of PIF were advising students; that proportion rose to 80% in AY 2017-18 and dropped back down to 70% in AY 2018-19. A third target is that 70% of PIF faculty would present at professional meetings. In 2016-17, the program achieved 80%. That dropped to 60% in 2017-18 and then increased to 70% in 2018-19. For all three measures, the program has come close to or met its targets across the prior three-year period.</p>		
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E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		<p>All faculty are expected to dedicate 20% of their time per year to service. Examples of service are wide-ranging, including lectures, panel discussions, membership on advisory boards, community involvement, etc. Site visitors noted that faculty demonstrated a rich experience with service through multiple opportunities, partnerships, and relationships within their respective communities (Sacramento, San Francisco, and the Bay Area). Faculty</p>	<p>Click here to enter text.</p>	
Faculty are actively engaged with the community through communication, consultation, provision of technical assistance & other means				

<p>Tracks indicators that provide meaningful information related to extramural service</p>		<p>and students gave multiple examples of service experiences. Additionally, community partners who were present on site discussed the experiences they had to encourage publications, partnerships, and even program development through service engagements and experiences.</p> <p>The Jesuit Foundation, established by a gift from the USF Jesuit Community, is an opportunity to facilitate or provide funding for extramural service activity, if it is to further the Catholic Identity. Many of the faculty shared that they have received support from the Foundation. The site visit demonstrated an opportunity for a more systematic approach to discussing funding opportunities for service. Faculty also discussed other opportunities that have been funded by other organizations, but there is no expectation for faculty to be funded for their service.</p> <p>Some examples of extramural activities include one faculty member who provides leadership coaching to several non-profit organizations; these colleagues are invited to the classroom as guest lecturers. Another faculty member is a board member of the African Mothers Health Initiative in Malawi. In addition to tying examples of her work to the course materials, this organization has become an APEX option for students who choose to complete a portion of their fieldwork in Malawi.</p> <p>Students have various opportunities to be involved in faculty extramural service. For example, some MPH students participated in response efforts with the Sonoma County Health Department's rapid post-fire community needs assessment. Another student volunteered to go to the San Rafael Alcohol & Drug Coalition meeting with a</p>		
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		<p>faculty member to understand community coalitions and also completed her APEX experience with that organization. The site visit provided the opportunity to hear how the faculty have improved their approach to service with students.</p> <p>The program tracks three indicators related to service:</p> <ol style="list-style-type: none"> 1. percent of total faculty participating in extramural service activities 2. number of community-based service projects that address underserved and vulnerable populations 3. faculty promoted on the basis of service <p>The Faculty Survey will ask faculty about the number of service activities and partners. Faculty will additionally be asked to write a short narrative describing one experience and to then use community engagement metrics and indicators to measure the quality of service. The program also noted that the weight of service in the promotion process encourages the faculty's desire to have a vast amount of service endeavors.</p> <p>The site visit team determined that although the program is highly dedicated to service, there may not be a consistent approach to ensure high quality of service opportunities for the faculty. The program is working closely with the school's new director of partnerships and development staff, in order to strengthen and expand academic-community partnerships and approaches.</p>		
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F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		The program engages preceptors, local practitioners, and alumni in program evaluation and assessment. The Preceptor Survey asks participants to prioritize public health issues in local communities as well as future trends and workforce needs. The program also shares syllabi with practitioner colleagues and contacts to solicit their feedback. Adjunct faculty also attend program meetings and provide direct input to curricula regarding current practices and issues in the public health field. Some faculty also conduct community based participatory research, which allows the program to identify priority needs from community members. MPH practicum preceptors provide input on the curriculum and students' abilities to perform competencies through two surveys: the Preceptor Survey and the Preceptor Evaluation of Student. The surveys include questions about preceptors' perceptions of academic preparation of students and perceptions of curricular relevance to public health practice. Preceptors also evaluate students' interpersonal skills such as communication, professionalism, and attention to detail. The program shared the preliminary self-study document with preceptors and select community members along with a link to a survey to provide feedback. For example, the program received comments to provide better support for students finding fieldwork placements and	Click here to enter text.	
Ensures that constituents provide regular feedback on all of these: <ul style="list-style-type: none"> • student outcomes • curriculum • overall planning processes • self-study process 				
Defines methods designed to provide useful information & regularly examines methods				
Regularly reviews findings from constituent feedback				

		<p>increasing financial resources to support grantsmanship and faculty research.</p> <p>The site visit team was able to verify the use of focus groups for various program evaluation and assessments. For example, both preceptors and community members discussed having the opportunity to provide their input for the ILEX and APEX via focus groups and surveys. Another focus group was convened during the planning process of the behavioral health concentration, during which various stakeholders discussed the vision, curriculum and other key components of the concentration.</p> <p>During the site visit, the preceptors shared very positive experiences that they have had working with students and confirmed that the students showcased many skills from data collection to program planning. The preceptors also shared some feedback for the program in preparing students for their practice experience. One comment was that the program should work with students to set realistic expectations for their practice experience by discussing possible limiting factors such as the constricted number of hours and resources for potential projects and interventions. Another example of feedback from the preceptors was for the program to have stronger communication throughout the process in terms of informing preceptors about the expectations from students. This feedback was given in reference to one student who was given a very heavy workload from the preceptor, which the student was unable to manage with other coursework; the student was not sure how to communicate this concern with the preceptor and turned to her advisor for support. The advisor set up a meeting</p>		
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		<p>with the preceptor and student to figure out a solution. Preceptors also shared the need for students to have more training and support in creating products for the ILEX that are written an appropriate graduate level.</p> <p>During the site visit, the program shared the confirmed roster for the newly formed Advisory Board. In the initial phases of establishing the Advisory Board, faculty members recommended candidates with a focus on varying areas of interest, gender, race, geographic location, and governmental and non-governmental affiliations. The advisory board includes representatives from the Public Health Institute, Health Care Services Agency, Zuckerberg San Francisco General Hospital, YMCA, and the CDC, among others. Starting in fall 2019, the Advisory Board will meet twice a year, and their feedback will be solicited on different occasions in between meetings. Some of the first topics that will be addressed in the upcoming meeting will be the findings from the final site visit report and potential areas of improvement that can be addressed. The board will also discuss strategies and provide their perspectives on plans for workforce development opportunities for the program’s community of interest.</p>		
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F2. STUDENT INVOLVEMENT IN COMMUNITY & PROFESSIONAL SERVICE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Makes community & professional service opportunities available to all students		The program ensures that all students are introduced to service and community engagement primarily through the Population Health Sciences Student Association	Click here to enter text.	

<p>Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field</p>		<p>(PHSSA). The PHSSA and faculty share all community service opportunities on the MPH student portal and via email. Faculty members also share opportunities during class sessions. Students have the opportunity to request support of up to \$300 for trainings and workshops through the PHSSA. In addition, students receive support to attend the APHA meeting and staff the MPH program booth.</p> <p>The self-study lists several events that the PHSSA organized and sponsored during the 2016-2018 academic years such as the following:</p> <ul style="list-style-type: none"> • Ella Hutch Community Day (in collaboration with McCarthy Center for Public Service, students staffed booths and implemented health promotion activities) • World Aids Day (bingo night for HIV/AIDS to support Project Open Hand) • Health insurance information and enrollment support (educating students individually on insurance options) • Back On My Feet (volunteer support to group providing services to homeless individuals) <p>During the 2018-2019 academic year, students volunteered with the Sonoma County Health Department's rapid post-fire community needs assessment. Students also volunteered as members of the "Sacramento 13" community emergency response team. As part of the MPH 622 course, students participated in the Big Sugar competition on campus to raise awareness on the impact of sugar consumption among minority populations with diabetes. In the summer of 2017, a student volunteered in Malawi piloting a mobile survey</p>		
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		<p>application designed to collect data using iPhones and Android devices without the need for internet connection.</p> <p>During on-site discussions with students, site visitors were able to confirm the abundance of service opportunities available to all students. In addition to the events listed in this section, students shared that they receive frequent emails about job, research and, volunteer opportunities. One particular event that students and alumni were pleased with is the “Day in the Life of a Population Health Leader.” Students said that this event helped them prepare for and understand the transition from being a graduate student to life after graduate school. Students who attended this event while they were applying for the MPH program said that this event reassured them that public health was the right career path for them.</p>		
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F3. ASSESSMENT OF THE COMMUNITY’S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a professional community or communities of interest & the rationale for this choice		<p>The program defines individuals working in the agencies who provide internships to their students as the professional community of interest. These professionals work in a wide range of smaller agencies, mostly serving vulnerable populations, including Adventist Health White Memorial, Lao Lu Mien Culture Association, Midtown Nurse Midwives, and larger organizations such as departments of public health, UCSF’s Center for Vulnerable Populations, and Zuckerberg San Francisco General Hospital.</p>	<p>Click here to enter text.</p>	
Periodically assesses the professional development needs of individuals in priority community or communities				

		<p>The program aims to recruit staff from these organizations to enroll in the MPH program for their professional career advancement and aims to facilitate their workforce needs through non-degree offerings, as well. The program envisions a symbiotic relationship with the organizations serving the needs of the students and the program serving the professional development needs of the organizations' workforce.</p> <p>During the site visit, the program explained the rationale behind the choice of community of interest more thoroughly. First, the program believes that the community of interest is a convenience sample because they already have an established connection with these individuals. Second, the community of interest represents a wide range of small and large organizations, local and governmental institutions, as well as health care centers and larger hospitals. Most importantly, the program selected this community because they will be the future employers of their students, thus, there is an added value of addressing the needs of that workforce.</p> <p>The program primarily assesses the professional development needs of the respective communities using the Preceptor Survey. The survey was administered once in November 2018, and participants were asked for their input on the importance of workforce skills based on CEPH competencies and to assess the degree to which these skills are lacking in their agencies and the agencies they work with. Participants are also asked to identify the strategies that would be most effective to promote professional development at their workplace.</p>		
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		<p>During the site visit, the program discussed the Workforce and Employer Survey that will replace the Preceptor Survey, effective at the next administration in January 2020. Changes to the survey were prompted by the need to close the feedback loop and to make processes more logical and explicit in order to measure the right elements and identify the gaps in the workforce. By expanding the survey to include community members who are not necessarily preceptors, the program will be able to identify key stakeholders in the surrounding communities.</p> <p>Results from the survey indicate that respondents think the professional knowledge and skills in demand for their workforce are related to developing and analyzing public health policies and planning public health programs. The same questions were asked referencing professionals in other community organizations that the preceptors collaborated with. Results indicated that skills regarding structural bias, social inequities and, racism in public health were most lacking. The majority of respondents identified community-based partnerships and on-site workshops or seminars as the most effective methods for promoting professional development at their organizations.</p> <p>The program also analyzes current literature, including the national Public Health Workforce Interests and Needs Survey (WINS), to identify gaps in training needs among different employees. The top two gaps identified were systems and strategic thinking and budget and financial management.</p>		
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F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team’s Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		<p>After completing the needs analysis, program leaders and faculty discuss and select topics and strategies for workforce development opportunities based on the data and faculty expertise. The program aims to develop these ideas in collaboration with the new Advisory Board in order to establish a solid strategic plan that will meet the needs of the workforce. After implementation of the trainings and activities, the program evaluates trainings and keeps track of attendees and participant feedback for continuous improvement.</p> <p>Site visitors learned about a number of professional development opportunities for those in the public health workforce. Examples of workshops and training activities offered by the program in response to workforce identified needs include training on the following. The number in parentheses following each opportunity indicates the number of participants.</p> <ul style="list-style-type: none"> • Series of trainings on climate mitigation and response, offered in collaboration with community organizations at different locations (120) • Workshop for health professionals on public health risks associated with current agricultural policies and practices (20) • Training program for health policy leaders in the state government on development of practical leadership 	Click here to enter text.	

		<p>skills to navigate challenges in health policy making (19)</p> <p>All of these programs were developed and delivered based on the communities' professional development needs described in Criterion F3.</p> <p>During on-site discussions, the program discussed future plans to improve and hold more trainings and workshops with community partners. The program anticipates that the new Workforce and Employer Survey, as well as the newly formed Advisory Board, will allow them to develop stronger relationships with community partners and build new partnerships.</p>		
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G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines appropriate priority population(s)		<p>The MPH program values diversity and inclusion and seeks to develop culturally competent practitioners. These ideals permeate the university and are reflected in the guiding statements for the campus and program. Structures are also in place to support the achievement of these ideals, including the campus vice provost for diversity engagement and community outreach whose role is to create an equitable, inclusive and caring campus. At the school level, there is a faculty committee charged with enhancing diversity, equity and inclusion.</p>	<p>Click here to enter text.</p>	
Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals				
Learning environment prepares students with broad competencies regarding diversity & cultural competence				
Identifies strategies and actions that create and maintain a culturally competent environment				

Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)		<p>The program strives to have its faculty, staff and, student bodies represent the diversity of the city of San Francisco, which is approximately 50% residents of color. While the university is ranked third in the US in undergraduate student diversity, African Americans are still considered an underrepresented population for the campus. Therefore, the program has identified African Americans as a priority student population. In addition, the program has also selected first-generation college students and veterans as priority populations. The program sees these as vulnerable groups that are underrepresented in the public health workforce. These groups have experienced societal disadvantages and represent the communities that public health students will serve when they graduate and their life experiences enrich the learning environment for all students. In addition, the school has a long-standing relationship with veterans, which also prompted them to select that population.</p> <p>The program lists African Americans, Asian Americans, Latinos, veterans, and immigrants as priority populations for faculty and staff recruitment. The program notes that having a diverse faculty and staff assists in recruiting and retaining an equally diverse student body. On site, the program identified compositional diversity among the faculty body as an area in which it would like to improve. As it moves forward, the program will be supported by the new university policy on diversity in faculty hiring. In addition, the program will continue to find ways to bring in diverse perspectives in other ways. One such approach is the recent efforts to revitalize the Advisory Board. In establishing the board, faculty strove to seat a diverse group, in terms of many factors, including gender and</p>		
Practices support recruitment, retention, graduation of diverse students, with attention to priority population(s)				
Regularly collects & reviews quantitative & qualitative data & uses data to inform & adjust strategies				
Perceptions of climate regarding diversity & cultural competence are positive				

		<p>race/ethnicity. They use a similar approach with recruitment of part-time faculty.</p> <p>The program's stated goals for recruitment and retention of the priority populations are to: (a) continue to recruit a diverse faculty, staff and student body, with a focus on self-identified Black, veterans, first generation college students; and (b) promote success in currently matriculated minority students. Within each goal, the program has identified specific strategies. To enhance recruitment, the program aims to highlight current student body diversity in marketing and materials, engage minority student organizations on campus, seek assistance from community partners and, use evaluation data to track successes of each of the strategies. To enhance retention, the program aims to consult with faculty who work with ESL students and staff from the student disability services.</p> <p>Developing a culturally competent public health workforce is central to the values of the program and the university. On-site discussions made it clear that infusing that content as a thread throughout the curriculum was of primary importance to the faculty. In addition, starting fall 2019, the APEX will include a module on cultural competency, humility, and sensitivity.</p> <p>Despite goals to diversify the faculty to include specified priority populations, the program's full-time faculty comprises 10 white and one Asian member. The student body is more diverse. Over the past three years, the student body has ranged from approximately 20-22% White, 9-12% Black and 26-29% Latinx. The program has not yet begun to monitor data on the other priority</p>		
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		<p>populations (i.e. veterans and first-generation college students).</p> <p>Thus far, the program has only been able to capture perceptions of climate from the 2018 graduates. Four questions addressing climate were included in the graduating student survey. Over 90% of students agreed or strongly agreed that the program has representation of people from different backgrounds, populations, and perspectives; embraces difference and fosters equitable participation regardless of background; is a comfortable place for them; and adequately address diversity and inclusion in the courses. However, those in strong agreement ranged from a low of 62% for “the program is a comfortable place for me” to a high of 82% for “the program has representation of people from different backgrounds, populations, and perspectives.”</p> <p>The commentary relates to the perceptions of climate by faculty, staff and, students. There has been only one climate survey of students (November 2018) and one of faculty/staff (May 2019). Furthermore, the staff who received the survey may not necessarily have been those who are most closely aligned with the MPH. Nevertheless, findings from the student, faculty and, staff surveys suggested that there may be areas for improvement. In contrast though, the students with whom the site visit team met were uniformly positive about the climate and felt that students were welcome and valued.</p>		
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H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have ready access to advisors from the time of enrollment		<p>The program matches faculty advisors to a cohort of students with similar interests. Students meet with the advisor several times throughout the program and the students are provided a course planning worksheet to help them decide what courses to take. Students from previous classes that did not utilize this model noted that they had suggested that something like this be implemented and were pleased with the program's response to their suggestion. Current students stated how helpful their advisors are, and both students and faculty attested to the positive results from having repeated interactions with students for academic and career advising.</p> <p>The course planning worksheet is used to measure student progress through the program, in addition to the continuous meetings between faculty and students (either in person or through Zoom). Faculty and students alike mentioned how supported they felt by both the administration and faculty (for students) through the advisor/advisee model. Students noted that even if their advisor may have changed for some reason, they still maintained relationships with their initial advisors because of the relationships they built. Faculty mentioned that they continue to build relationships with community and public health partners to ensure that they are teaching students what they need to know to be valuable assets in the work force.</p>	<p>Click here to enter text.</p>	
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study				
Qualified individuals monitor student progress & identify and support those who may experience difficulty				
Orientation, including written guidance, is provided to all entering students				

		<p>The program has an orientation day at the beginning of each fall semester and provides an opportunity for students who are unable to attend in person to participate remotely. The orientation day introduces students to the many services offered to them and gives them an opportunity to meet with their advisors at the end of the day. Additionally, orientation modules have been developed to be deployed by fall 2019 on the Canvas system.</p> <p>The Graduate Student Survey was conducted to gauge satisfaction with academic and career advising starting in 2018. The results stated that 53% of students were satisfied with academic advising and 39% were not satisfied. The faculty overhauled the advisor program in response to these data and has not yet received any feedback on the new approach, as the program has not fielded the next Graduate Student Survey. The faculty discussed deployment of this survey as their primary means for gathering information and satisfaction about academic advising. Students and alumni who met with site visitors stated their high rates of satisfaction with academic advising during on-site discussions.</p>		
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H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce		Students have access to the university's dedicated career services center for all students. Additionally, the university now has a new jobs database called Handshake.	Click here to enter text.	

& can provide career placement advice		Many students report that they have been coached by faculty and field work preceptors on how to get a job in the public health field. Students and alumni expressed no issues in terms of career advising and felt supported in both finding experiences for field work and capstones, as well as finding employment. Of note, many students are already working full-time and some even noted that they had faculty help them figure out how to make a career change based on their field work and capstone experiences.		
Variety of resources & services are available to current students				
Variety of resources & services are available to alumni		<p>Career services staff at the university level are chosen based on experience and skills and are trained at the master's level with expertise in career development and counseling, student affairs administration, and higher and post-secondary education. There is a dedicated liaison for graduate students at the university's Career Center, as of 2017.</p> <p>Within the program, faculty, staff, and preceptors are all utilized to provide public health career advising. The program faculty use their own experiences and connections to the public health field to ensure that they are providing up-to-date career advice and knowledge. The program constantly engages alumni, preceptors, and starting in fall 2019, the Advisory Board, to provide work force development needs and highlight issues that should be addressed by the faculty.</p> <p>During on-site discussions, students and alumni recounted multiple experiences of using faculty and faculty connections to ensure strong career advising. Students noted that several of them were hired onto organizations where they did either their ILEX or APEX</p>		

		<p>experiences, and they appreciated the support they received from faculty. Additionally, faculty noted that being a faculty advisor provides multiple opportunities to assess and provide career development services through the relationships they build with their advisees.</p> <p>Results from a 2018 survey of MPH graduates revealed low satisfaction with career advising (only 38% agreed they were satisfied with career advising). The qualitative feedback indicated similar dissatisfaction, and the program is currently working towards improving career advising services by auto-enrolling students into Handshake, increasing attendance at APHA, and formalizing the system of faculty advisors, as discussed in Criterion H1.</p>		
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H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		Based on the information presented in the self-study and on site discussions, the student complaint policy and procedures are clear and accessible. The processes for all complaints are outlined in the student handbook, and within the USF Dean of Students Office. The dean of students holds listening sessions throughout the year for student input. The PHSSA also communicates student concerns to the program director, associate dean, or other leaders. This was confirmed by students and faculty on the site visit.	Click here to enter text.	
Procedures are clearly articulated & communicated to students				
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel				

Designated administrators are charged with reviewing & resolving formal complaints		<p>The complaint process is transparent, and appropriate administrators are in charge of reviewing complaints of all kinds. Additionally, while on site, the site visit team had many discussions with faculty and students regarding their experiences with complaints. Both the students and the faculty confirmed that there are formal and informal mechanisms for students to express concerns. Many of the students use their faculty advisors to express concerns, and this also was confirmed at the site visit independently by faculty and students. Students noted that they felt that their concerns were heard on both campuses (Sacramento and San Francisco) and that changes were made based on the concerns they expressed.</p> <p>There have been no formal grievances to date in the program.</p>		
All complaints are processed & documented				

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		<p>Student recruitment and admission activities are done in collaboration with activities at the university level and include outreach, web materials, and informational sessions both online and in person at the university.</p> <p>The admissions policies focus on diversity, social justice, and volunteerism. The Admissions Committee reviews the admissions criteria annually. Requirements for admission are listed for both U.S. Citizens and international students:</p>	Click here to enter text.	
Implements admissions policies designed to select & enroll qualified individuals capable of taking				

<p>advantage of program of study & developing competence for public health careers</p>		<p>unofficial or official transcripts; a minimum 3.0 GPA degree from an accredited institution; a personal statement; two letters of recommendation; and a professional resume. International students must achieve a score of 90 or greater on the TOEFL and obtain a visa.</p>		
<p>Tracks at least one measures that is meaningful and demonstrates success in enrolling a qualified student body</p>		<p>Based on the self-study report and the site visit, the program is identifying the types of students they are trying to recruit as underserved and minority populations. The Jesuit mission is to serve the most vulnerable communities and populations, and the program is dedicated to ensuring they meet that mission through student recruitment and composition. For example, the program attends graduate fairs at historically Black colleges and universities and designs program brochures and flyers that are targeted to the specific high-priority populations for admissions. The program also holds monthly online question and answer sessions to address prospective student inquiries.</p> <p>While the self-study did not reflect indicators that are focused on enrolling qualified students, the site visit did elucidate the process by which they ensure qualified students are accepted into the program. The program does not require GREs, as faculty see this as a biased indicator of qualification. The program does look at grades and experience, which could include work experience or volunteering, and scores students based on those criteria. The program also examine personal statements and resumes, as well as letters of recommendation.</p>		

H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to describe educational offerings are publicly available		The program has a variety of online resources that provide information to current and prospective students.	Click here to enter text.	
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements		The University Catalog is a comprehensive listing of all available degree programs at USF, including the MPH program and all concentrations. The university's website also includes the academic calendar, admissions policies, grading policies, and the Academic Honor Code, which addresses academic integrity standards. The program's website includes degree completion requirements.		
Advertising, promotional & recruitment materials contain accurate information		Site visitors reviewed the university and program websites as well as the program's advertising and promotional materials and found them to accurately and consistently describe the program and its educational offerings.		

AGENDA

Council on Education for Public Health Site Visit Agenda University of San Francisco, Public Health Program (PHP)

Monday, June 10, 2019

- 8:30 am **Introduction to USF Team/Meet with Program and Department Leadership**
Kelly L'Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead
Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead
Taryn Vian, PhD –Professor & MPH Statewide Program Director
Mona Woo –Department Supervisor
- 8:40 am **Site Visit Team Request for Additional Documents**
 Self-Study Coordinator: Mona Woo (Health Professions Department Supervisor)
- 8:55 am **Site Visit Team Executive Session**
- 9:15 am **Break**
- 9:30 am **Program Evaluation**

Participants	Topics on which participants are prepared to answer team questions
<i>Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead</i> <i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Scott Ziehm, DNP, RN –Professor & Associate Dean for Prelicensure Programs and Accreditation</i> <i>Dory Escobar, PhD – Asst. Professor & Fieldwork Coordinator & Member SONHP and MPH Program Evaluation Committee</i> <i>Richard Callahan, PhD –Professor & MPH-Health Policy and Leadership Program Co-Director</i>	<i>Guiding statements – process of development and review</i>
<i>Laura Chyu, PhD –Asst. Professor & Chair MPH Program Evaluation Committee</i> <i>Dory Escobar, PhD – Asst. Professor & Member SONHP and MPH Program Evaluation Committee</i> <i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Mona Woo –Department Supervisor</i>	<i>Evaluation processes – how does program collect and use input/data?</i>
<i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Kelvin Quan, EdD JD MPH –Director of Operations</i>	<i>Resources (personnel, physical, IT) – who determines sufficiency? Acts when additional resources are needed?</i>

<i>Kelvin Quan, EdD JD MPH –Director of Operations</i> <i>Megan O’Banion, PsyD –Assoc. Dean for Health Professions</i> <i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i>	<i>Budget – who develops and makes decisions?</i>
Total participants: 8	

10:30 am **Break**

10:45 am **Curriculum 1**

Participants	Topics on which participants are prepared to answer team questions
<i>Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead</i> <i>Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead</i> <i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Barbara Sattler, PhD –Professor</i> <i>Marie-Claude Couture, PhD –Asst. Professor</i> <i>Erin Grinshteyn, PhD –Asst. Professor</i>	<i>Foundational knowledge</i>
<i>Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead</i> <i>Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead</i> <i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Kelly McDermott, PhD –Asst. Professor</i> <i>Erin Grinshteyn, PhD –Asst. Professor</i> <i>Laura Chyu, PhD –Asst. Professor</i> <i>Kelly McDermott, PhD –Asst. Professor</i> <i>Courtney Keeler, PhD –Assoc. Professor</i> <i>Dory Escobar, PhD – Asst. Professor</i> <i>Lee-Nah Hsu, ScD, MS, JD –Part-time Faculty</i> <i>Jeanne Alongi, DrPH, MPH –Part-time Faculty</i>	<i>Foundational competencies – didactic coverage and assessment</i>
<i>Taryn Vian, PhD –Professor & MPH Statewide Program Director</i> <i>Richard Callahan, PhD –Professor & MPH-Health Policy and Leadership Program Co-Director</i> <i>Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead</i>	<i>Concentration competencies – development, didactic coverage, and assessment</i>
Total participants: 13	

12:00 pm **Break & Lunch Set-up**

12:15 pm **Students**

Participants	Topics on which participants are prepared to answer team questions
<i>Miguel Amadolazo – 1st year, SF</i> <i>Jenny Lee – 2nd year, SF</i> <i>Aunee Tarango – 2nd year, SF</i> <i>Kitty Thornton – 2nd year, SF</i> <i>Tiffany Lang – 2nd year, MPH Sacramento</i> <i>Michaela Whan – 2nd year, online</i> <i>Aika Kitilaya – 1st year, MPH-MSBH</i> <i>Colleen Horwitz – MPH-DNP</i> <i>Aveena Shenoy – MSH-MPH</i> <i>Marisa Cardarelli – 2nd year, SF</i> <i>Jenay Anolin, 2nd year, MPH-MSBH</i>	<i>Student engagement in program operations</i> <i>Curriculum</i> <i>Resources (physical, faculty/staff, IT)</i> <i>Involvement in scholarship and service</i> <i>Academic and career advising</i> <i>Diversity and cultural competence</i> <i>Complaint procedures</i>
Total participants: x (no limit)	

1:30 pm **Break**

1:45 pm **University Leaders**

Participants	Topics on which participants are prepared to answer team questions
<i>Margaret Baker - Dean and Professor, School of Nursing & Health Professions</i> <i>Rev. Paul J. Fitzgerald - President</i> <i>Don Heller - Provost and Vice President of Academic Affairs</i> <i>Shirley McGuire - Senior Vice Provost of Academic Affairs</i>	<i>Program’s position within larger institution</i>
<i>Margaret Baker - Dean and Professor, School of Nursing & Health Professions</i> <i>Don Heller - Provost and Vice President of Academic Affairs</i> <i>Kelvin Quan –Director of Operations, SONHP</i>	<i>Provision of program-level resources</i>
<i>Margaret Baker - Dean and Professor, School of Nursing & Health Professions</i> <i>Rev. Paul J. Fitzgerald - President</i> <i>Don Heller - Provost and Vice President of Academic Affairs</i>	<i>Institutional priorities</i>

<i>Shirley McGuire - Senior Vice Provost of Academic Affairs</i>	
Total participants: 5	

2:15 **Break**

2:30 **Curriculum 2**

Participants	Topics on which participants are prepared to answer team questions
<i>Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead Dory Escobar, PhD – Asst. Professor & Fieldwork Coordinator & Member SONHP and MPH Program Evaluation Committee Taryn Vian, PhD –Professor & MPH Statewide Program Director Courtney Keeler, PhD, Assoc Professor Elizabeth Marlow, PhD, MSN –Part-time Faculty Monica de la Cruz, MPH –Part-time Faculty Lisa Catanzaro, MPH –Part-time Faculty Barbara Sattler, PhD - Professor</i>	<i>Applied practice experiences</i>
<i>Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead Dory Escobar, PhD – Asst. Professor & Fieldwork Coordinator & Member SONHP and MPH Program Evaluation Committee Courtney Keeler, PhD, Assoc Professor Elizabeth Marlow, PhD, MSN –Part-time Faculty Monica de la Cruz, MPH –Part-time Faculty Lisa Catanzaro, MPH –Part-time Faculty Kelly McDermott, PhD – Asst. Professor</i>	<i>Integrative learning experiences</i>
<i>Nicole Cuadro, MA –Distance Learning Program Administrator Susan Zolezzi –Associate Director of Instructional Design Marie-Claude Couture, PhD –Asst. Professor Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead Lisa Catanzaro, MPH –Part-time Faculty Gregory Crum – Senior Instructional Technologist</i>	<i>Distance education</i>
Total participants: 12	

3:45 pm **Break**

4:30 pm **Stakeholder Feedback/Input /Meeting with Community Representatives, Preceptors, and Alumni**

Participants	Topics on which participants are prepared to answer team questions
<p><i>Community Representative:</i> <i>Bruce Livingstone</i></p> <p><i>Alumni:</i> <i>Adrienne Shatara, MPH</i> <i>Joyce Hester-Nortey, MPH, MSBH</i> <i>Jessica Stillman, MPH</i></p> <p><i>Preceptors:</i> <i>Glenda Kith, Zukerberg SF General Hospital</i> <i>Jonathan Portney, YMCA</i> <i>Sandy Singh, YMCA</i> <i>Natalie Macias, USF Health Promotion Services</i></p> <p><i>Part-time Faculty:</i> <i>Trina Gonzalez</i> <i>Raymond Chimezie</i> <i>Monica de la Cruz</i> <i>Lisa Catanzaro</i></p>	<p><i>Involvement in program evaluation & assessment</i></p>
	<p><i>Perceptions of current students & program graduates</i></p>
	<p><i>Perceptions of curricular effectiveness</i></p>
	<p><i>Applied practice experiences</i></p>
	<p><i>Integration of practice perspectives</i></p>
	<p><i>Program delivery of professional development opportunities</i></p>
<p>Total participants: x (no limit)</p>	

5:30 pm **Site Visit Team Executive Session**

6:00 pm **Adjourn**

Tuesday, June 11

8:30 am **Instructional Effectiveness**

Participants	Topics on which participants are prepared to answer team questions
<i>Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead Erin Grinshteyn, PhD –Asst. Professor Dory Escobar, PhD – Asst. Professor Nicole Cuadro, MA- Distance Learning Program Administrator</i>	<i>Currency in areas of instruction & pedagogical methods</i>
<i>Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead Erin Grinshteyn, PhD –Asst. Professor Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead Elizabeth Marlow, Part-time Faculty</i>	<i>Scholarship and integration in instruction</i>
<i>Barbara Sattler, PhD –Professor Dory Escobar, PhD – Asst. Professor Richard Callahan, PhD –Professor Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead Kelly L’Engle, PhD, MPH –Asst. Professor & CEPH Self-Study Co-Lead</i>	<i>Extramural service and integration in instruction</i>
<i>Elizabeth Marlow, PhD, MSN –Part-time Faculty Marcianna Nosek, PhD, MPH – Assoc. Professor & CEPH Self-Study Co-Lead</i>	<i>Integration of practice perspectives</i>
<i>Barbara Sattler, PhD –Professor Dory Escobar, PhD – Asst. Professor Richard Callahan, PhD –Professor Taryn Vian, PhD –Professor & MPH Statewide Program Director</i>	<i>Professional development of community</i>
Total participants: 15	

9:30 am **Break**

9:45 am **Site Visit Team Executive Session**

12:00 pm **Site Visit Team Working Lunch**

1:00 pm

Exit Briefing

2:00 pm

Team Departs