Council on Education for Public Health Adopted on June 16, 2018

**REVIEW FOR ACCREDITATION** 

OF THE

PUBLIC HEALTH PROGRAM

AT

MCPHS UNIVERSITY

#### COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES: December 11-12, 2017

SITE VISIT TEAM: Amy F. Lee, MD, MPH, MBA, CPH—Chair David H. Trump, MD, MPH, MPA, FACPM

SITE VISIT COORDINATOR: Mollie Mulvanity, MPH

OBSERVER: Ali DiOrio, MPH

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#### Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the Public Health Program at MCPHS University. The report assesses the program's compliance with the *Accreditation Criteria for Public Health Programs, amended June 2011*. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in December 2017 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

MCPHS is a private, healthcare-focused university and grew from the nation's second oldest pharmacy school, founded in 1823. The university has offered a full range of health sciences degrees since 1979 and now offers over 100 undergraduate, graduate and doctoral degree programs in both residential and online formats. MCPHS enrolls more than 7,000 students across four campuses in Massachusetts and New Hampshire. Degree programs reside in the School of Arts and Sciences, Forsyth School of Dental Hygiene, School of Medical Imaging and Therapeutics, School of Nursing, School of Physician Assistant Studies, School of Pharmacy, New England School of Acupuncture, School of Optometry, School of Rehabilitative Sciences and the Center for Online Learning and Academic Innovation. Programs range from dental hygiene to clinical research to radiation therapy to health policy.

The MPH program is positioned within the Center for Online Learning and Academic Innovation (COLAI), also known as MCPHS Online, and also has an academic home in the School of Arts and Sciences (SAS)' Department of Humanities, Behavioral and Social Sciences (HBSS). The MPH is offered in fully on-campus and fully online formats. Many students enroll in a mix of campus-based and online courses.

The program enrolled its first students in 2012 and graduated its first students in 2014. The program currently enrolls over 100 MPH students, and approximately 40% of students are enrolled in combined degree programs, pursuing the MPH alongside MCPHS' degree programs in pharmacy, optometry, dental hygiene or undergraduate public health. The program's application for CEPH accreditation was accepted in 2014, and this is the initial review.

#### Characteristics of a Public Health Program

To be considered eligible for accreditation review by CEPH, a public health program shall demonstrate the following characteristics:

- a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education or its equivalent in other countries.
- b. The program and its faculty and students shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.
- c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem solving and fosters the development of professional public health values.
- d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.
- e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. At a minimum, the program shall offer the Master of Public Health (MPH) degree, or an equivalent professional degree.
- f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the public health program at MCPHS University. The program is located in a regionally-accredited university, and faculty and students have the same rights, privileges and status as those associated with other MCPHS programs. The faculty complement includes individuals with training in other health sciences fields, as well as faculty with training in multiple public health disciplines. The curriculum is designed to build skills in interdisciplinary communication, and the program maintains strong connections with the public health practice community, particularly with local boards of health in Massachusetts.

The program has adequate resources to offer the curriculum in both on-campus and online formats and to support students. The program has implemented a number of practices to collect and analyze data that allow the program to improve and to ensure ongoing connections to the world of public health practice.

#### 1.0 THE PUBLIC HEALTH PROGRAM.

#### 1.1 Mission.

### The program shall have a clearly formulated and publicly stated mission with supporting goals, objectives and values.

This criterion is met. The program's mission is "to cultivate, mentor, and inspire public health professionals that are able to address complex health issues using the skills they acquire through academic and experiential learning, research, and collaboration." The program seeks to fulfill its mission by achieving ten goals in four areas: instruction (three goals); research (three goals); service and outreach (two goals); and sustainability (two goals). Each goal area has between one and 12 objectives.

The MPH program is guided by MCPHS' core values, which focus on the following: learner-centered teaching and student engagement; honesty, integrity, professionalism, and personal responsibility; diversity; adaptability and flexibility; excellence and innovation in education, scholarship and research, and service; scholarship; and education that fosters development of the whole person.

In 2011, the university developed a MPH Advisory Committee comprised of faculty, staff and representatives from the public health workforce to provide input and guidance on the development and implementation of the MPH program. With feedback from the MPH Advisory Committee, meetings with other program directors, networking with members of the Council on Graduate Programs in Public Health and meetings with core faculty at the university, the MPH program director developed an initial mission and list of values, goals and objectives. These were discussed and modified during several MPH Advisory Committee meetings before seeking input from a broader audience of students, faculty, staff and workforce representatives from local public health agencies, public health consulting firms, the Centers for Disease Control and Prevention and community-based organizations.

This feedback, along with insights of faculty who attended the CEPH Accreditation Orientation Workshop in 2015, led to additional changes, which were brought to the MPH Advisory Committee and the program's Accreditation Committee for discussion and approval. During the 2015-2016 academic year, the values, goals and objectives were updated further based on feedback from a wide range of practitioners, academicians and students. Throughout the process, the MPH program sought to align the values, goals, and objectives with the university's strategic plan. The MPH program plans to review the mission, values, goals and objectives every two years using the MPH Advisory Committee and seeking further review from students, alumni, public health practitioners and all MPH faculty.

The MPH program's mission, values, goals and objectives are communicated to applicants, students, faculty and stakeholders through the program manual, which is provided to students, and is available on the program's website.

#### 1.2 Evaluation and Planning.

The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria.

This criterion is met with commentary. The program uses several systems to collect data for purposes of monitoring and evaluation. The data used for most outcome measures are collected within the program by the program director, faculty and staff and stored in the MPH program database, a protected spreadsheet. Admissions data and some demographic information are in the Office of Admission's OnBase System and are transferred to the MPH program database. OnCall, an enrollment management tool linked to the course registration system WebAdvisor, provides student schedules, student transcripts and enrollment reports and is a critical tool to guide decision-making for course schedules, student advising sessions and faculty assignments. Faculty annual activities reports (AARs) provide data on faculty teaching, scholarship and service.

MCPHS uses CoursEval to collect anonymous course evaluations during the final weeks of each semester. Results are available for review by faculty for their individual courses and by the program director for all courses. While the primary questions remain the same for all courses, faculty have the opportunity to add additional program-specific questions. Course evaluations are not required, and the average MPH program response rate is 10-50% in any given semester. During the site visit, the program director noted that she uses a number of methods to encourage students to complete evaluations. Some faculty members also reported using short, mid-course assessments to solicit student feedback on their courses. Program leaders also reported on an initiative led by the Faculty Senate to incentivize students to complete evaluations and improve the response rate.

The MPH program has collaborated with the Office of Institutional Research and Assessment to develop a graduation exit survey. This survey examines the students' perceptions of meeting the competencies, whether the program is relevant to their job and what their employment prospects are following graduation. The exit survey is distributed annually to all students graduating during that academic year; a similar follow-up survey is distributed at one year and four years after graduation. The one-year survey has been helpful in determining alumni success in job placement and whether MPH coursework is relevant to graduates' jobs.

The MPH program director is responsible for overall coordination and analysis of all data used in program evaluation. Once collected, the MPH program director presents or distributes findings to faculty members, the MPH Advisory Committee, the associate provost for online education and the dean of SAS as needed. If actions are needed to change the program in order to better meet objectives, the program

director works with the individuals and groups noted above and with the primary faculty to implement changes.

Each semester, the MPH program director reviews all course evaluations for information that may be used to improve MPH courses and communicates as needed to the appropriate faculty member. In addition, the MPH Curriculum Committee is charged with reviewing one course per semester to evaluate academic rigor, alignment with current evidence-based practice and pedagogy/teaching strategies. The Curriculum Committee recommends changes when needed.

Each year, the MPH program director works with the Office of Institutional Research and Assessment to review data from the exit surveys. The data are aggregated, summarized and disseminated to the MPH core faculty and the MPH Advisory Committee for discussion. The associate provost for online education reviews faculty AARs annually to note progress on objectives and review goals for the upcoming academic year. The MPH program director also reviews AARs with respect to MPH program requirements. The associate provost for online education works with the faculty if changes are needed in order to meet program objectives.

The self-study was prepared primarily by the program's core faculty. Multiple MCPHS offices and staff provided input or wrote various sections, including the following: associate provost for academic innovation and online education, associate provost for undergraduate education, president of the Public Health Society, staff from the Office of Admission, Title IX coordinator, assistant dean for diversity and inclusion, Office of the Registrar and Office of Institutional Research and Assessment. The draft self-study document was sent to approximately 140 people, including students, alumni, faculty, staff, workforce representatives from the Massachusetts Department of Public Health and local boards of health and members of the MPH Advisory Committee. The program director reviewed and incorporated comments and edits. The final draft was sent to relevant university leaders for their review and feedback.

The commentary relates to the need for better documentation of the program's processes for using evaluation results in ongoing planning and decision making. Site visitors reviewed the available agendas and minutes from all of the program's committee and other meetings. There is no specific documentation in agendas or meeting notes that indicates that the MPH Advisory Committee has recently reviewed the program's goals, objectives and metrics or any specific data. The self-study states that "many changes to courses have been made following feedback from course evaluations to include adjustments to assignments, clarifying expectations, and increasing student engagement," but minutes or notes of the MPH Curriculum Committee also do not document the linkage between course evaluations and any resulting changes. During the site visit, program leaders indicated that meetings of the core faculty were the primary setting for discussing the program's status regarding goals, objectives and metrics; any

changes needed to better achieve the program's objectives; and the need to change objectives or metrics over time, but site visitors were not able to verify this through documentation. The program recognizes the need to have more explicit processes and documentation for program evaluation and planning. The program director reported that the MPH program is actively engaged with and will be guided by efforts of the university's Institutional Assessment Committee, which is working to establish a "culture of assessment" throughout MCPHS.

#### **1.3 Institutional Environment.**

#### The program shall be an integral part of an accredited institution of higher education.

This criterion is met. MCPHS University has been accredited by the New England Association of Schools and Colleges, Inc. (NEASC) through its Commission on Institutions of Higher Education since 1974. The last site visit was in 2017, and the university was made aware in January 2018 that they have been reaccredited for ten years. Additionally, the university holds specialized accreditation in fields such as dentistry, pharmacy, nursing and radiologic technology.

The university has campuses in Boston, Worcester and Newton, Massachusetts and in Manchester, New Hampshire. It offers over 100 undergraduate, graduate and doctoral degree programs in both residential and online formats and enrolls more than 7,000 students across the four campuses. Programs reside in the School of Arts and Sciences, Forsyth School of Dental Hygiene, School of Medical Imaging and Therapeutics, School of Nursing, School of Physician Assistant Studies, School of Pharmacy, New England School of Acupuncture, School of Optometry, School of Rehabilitative Sciences and the Center for Online Learning and Academic Innovation. Programs range from dental hygiene to clinical research to radiation therapy to health policy.

The MPH program is positioned within the Center for Online Learning and Academic Innovation (COLAI), also known as MCPHS Online, as well as the School of Arts and Sciences (SAS), which also houses degrees including chemistry and medical and molecular biology. Within SAS, the program is housed in the Department of Humanities, Behavioral and Social Sciences (HBSS). HBSS also includes degree programs in health sciences and health psychology, as well as an undergraduate degree in public health, which is not included in the unit of accreditation.

MCPHS Online is responsible for programmatic and budgetary decisions, while SAS is responsible for academic oversight. SAS is led by a dean, who reports to the provost. The SAS dean also holds the title of associate provost for undergraduate education. MCPHS Online is headed by the associate provost for academic innovation and online education (referred to throughout this report as the associate provost), who reports to the provost.

The provost reports to the president and supervises all Boston campus deans. The provost also supervises a chief academic officer, who supervises the deans of the Worcester and Manchester campuses. The provost approves all faculty appointments, re-appointments, dismissals, promotions, other employment actions and all school and department budget and academic expenses. The provost also coordinates, defines and communicates plans for development in all academic areas supporting the academic mission. The Board of Trustees, who collaborate with the president and provost, make all final binding decisions related to management of the university.

The provost is advised by the Faculty Senate and the Academic Council.

The program director develops the annual program budget, in consultation with MCPHS Online staff and administrators. The program director also works with faculty, the MPH Advisory Committee, the associate provost and the dean to make program and hiring decisions. The program director is typically the hiring manager for staff and adjunct faculty but must get budget approval for new hires from levels up to the university president. The associate provost is typically the hiring manager for full-time faculty and must establish a search committee.

MPH core faculty have a formal reporting relationship with the associate provost. The associate provost conducts annual reviews and determines work priorities.

MPH core faculty also have a reporting relationship with the HBSS chair. The HBSS chair supports faculty with their teaching, learning, service and research activities. The chair also provides feedback to the dean regarding the need for additional faculty support. For promotions, core faculty apply based on recommendations from the HBSS chair, the dean and the associate provost. A university-wide committee makes promotion decisions based on the recommendations.

For major curricular changes, faculty proposals proceed through the MPH Curriculum Committee, the university Graduate Council Curriculum Committee, the full Graduate Council, the Graduate Faculty, the School of Arts and Sciences and the Academic Council.

#### 1.4 Organization and Administration.

The program shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the program's public health mission. The organizational structure shall effectively support the work of the program's constituents.

This criterion is met. The program's internal organization is simple and conducive to public health instruction, research and service. The program director supervises the adjunct faculty and works with the two other primary faculty members.

The program has been actively engaged with interprofessional educational (IPE) activities, in particular. The program director and an MPH student completed a funded project to assess the university's IPE efforts as a whole, focusing on clinical prevention and population health education. Public health faculty have also collaborated with pharmacy faculty on a pilot project to address opioid use, including developing a training program for pharmacy students on naloxone use. The project is planned as a pilot for training all MCPHS students in naloxone administration and educating them about harm reduction.

In addition to the scholarly and service components associated with these initiatives, program faculty work with dental hygiene faculty in a community coalition for oral health. The program director serves on the board of directors for the initiative, and two MPH students have completed associated practicum experiences.

#### 1.5 Governance.

The program administration and faculty shall have clearly defined rights and responsibilities concerning program governance and academic policies. Students shall, where appropriate, have participatory roles in the conduct of program evaluation procedures, policy setting and decision making.

This criterion is met. The program has three committees with assigned responsibilities for components of program planning, operations and evaluation, but the program director, along with the two other primary faculty and key personnel from the SAS and MPH Online, handles much of the daily decision making.

The program director, primary faculty, dean and associate provost handle most program planning and evaluation, with regular input from the Advisory Committee. The program director works with the associate provost and primary faculty to develop and make decisions about the program's discretionary budget. The program director works with the university-wide Office of Admission to coordinate student recruitment and admissions. As discussed in Criterion 4.3, the program director plays a role in the admissions process, and the full faculty has the opportunity to provide input on program-specific requirements, though the university-level office makes routine admissions decisions and sets student recruitment strategies.

Personnel recruitment and promotion, as well as definition of faculty research and service expectations, occur through structures that exist within MCPHS Online, SAS and the university. The program director is involved in appropriate roles, such as serving on all search committees for program faculty.

Although many programs use the term "advisory committee" to refer to a body of practitioners and community-based stakeholders, the Advisory Committee, in this context, is a group whose majority are MCPHS faculty and staff. The committee includes the three primary faculty members; three to five adjunct faculty members, some of whom also work full-time in public health jobs; at least one practitioner who is

not also an adjunct faculty member; two student representatives; and a number of other MCPHS personnel, such as faculty affiliated with the combined degree programs, and faculty and staff from other components of SAS and MCPHS online.

The Advisory Committee serves as the primary source of feedback on the program, curriculum and new course proposals. The other two program committees, Curriculum Review Committee and Accreditation Committee, are sub-committees of the Advisory Committee. The committee meets quarterly in person and regularly conducts virtual business, sharing and reviewing documents. Site visitors reviewed meeting minutes that demonstrated regular meetings and substantive engagement around program operations and input on program initiatives including accreditation. Site visitors met with many Advisory Committee members, and they described the committee's significant role in problem-solving and planning.

The Curriculum Review Committee, a sub-group of the Advisory Committee, meets once per semester and includes the three primary faculty as well as other members from the Advisory Committee. They review at least one course every semester, on a rolling basis, to evaluate academic rigor, teaching strategies and other components. This committee is responsible for initial review of any proposed changes to learning objectives, assessment mechanisms or other aspects of required courses.

Beyond the program level, the SAS' Graduate Council functions as the policy making body. This group and its subcommittees define policies and procedures that shape program practices and provide the structure for stages of review beyond the program level in areas such as faculty appointments and curriculum revisions.

The program's primary faculty members serve on a variety of committees in SAS and the university, including participating in the Graduate Council.

Students serve on the Advisory Committee and the Accreditation Committee. Faculty indicated that student members are active participants who engage in discussions and share feedback to and from the broader student body. Students who met with site visitors noted that the primary faculty create a welcoming environment that fosters students' provision of candid input.

Students also participate in the MCPHS University Public Health Society (PBHS). This group fosters community among MPH students and promotes public health. They have organized educational events and service projects, including two alumni panel discussions, and they are planning events in conjunction with National Public Health Week for 2018. They also maintain active social media presences. Students who met with site visitors described several specific service projects, as discussed in Criterion 3.2. They indicated that student leaders have used online surveys to gauge interests and priorities.

#### 1.6 Fiscal Resources.

### The program shall have financial resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met. The program's fiscal resources have demonstrated an increasing trend over the last five years and continue to support its mission, goals and objectives. Table 1 presents the program's budget for the last five years.

Table 1. Sources of Funds and Expenditures by Major Category, 2012 to 2017					
	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
Source of Funds		•			
Tuition & Fees	\$215,900	\$431,800	\$665,970	\$1,050,960	\$1,333,800
Total	\$215,900	\$431,800	\$665,970	\$1,050,960	\$1,333,800
Expenditures					
Student Support Services	\$25,500	\$54,000	\$76,500	\$105,000	\$135,000
Faculty Salaries &	\$108,333	\$212,973	\$227,951	\$320,901	\$338,971
Benefits					
Staff Salaries & Benefits	\$26,000	\$26,000	\$26,000	\$26,000	\$26,000
Adjunct Faculty	\$26,500	\$49,500	\$40,000	\$81,600	\$99,400
Curriculum Development	\$25,000	\$15,000	\$15,000	\$15,000	\$15,000
& Instructional Support					
Operations	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
Travel	\$2,000	\$3,000	\$4,500	\$6,000	\$6,000
Accreditation	\$0	\$2,000	\$5,700	\$5,700	\$3,047
Subtotal	223,330	\$372,473	\$405,651	\$568,701	\$633,418
Administrative Overhead	\$33,500	\$55,871	\$60,848	\$85,305	\$95,013
Total	\$256,830	\$428,344	\$466,499	\$654,006	\$728,431

Funding for MCPHS comes from tuition and fees; programs are expected to be self-sustaining. The program does not receive state funds. Excess funds are re-invested. Most of the funds support faculty, adjunct faculty and staff salaries and benefits. Additional funding is available for student support, curriculum development/instructional support, operations, travel and accreditation costs. Indirect costs were not included in the budget because no extramural funding was obtained.

Total revenue has risen steadily from \$215,000 to \$1.3 million in the last five years; in all but the first year, revenues exceeded expenditures.

The program uses one outcome measure to track the adequacy of fiscal resources: at least \$5000 in grant funding per year to support student and faculty research collaborations. Although the self-study notes that no funding was obtained in the past three years, site visitors learned that the program director obtained a grant in the month immediately preceding the site visit. The program director obtained \$4500 in intramural funding to support a community-based research project involving two students.

Since the program is growing, program leaders plan to request funding for an additional faculty position and a staff coordinator position. The interim provost stated that she would be comfortable to advocate for these additional positions, given the program's enrollment and outcomes, and is optimistic that these positions would be funded.

#### 1.7 Faculty and Other Resources.

### The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met with commentary. The program's human resources and facilities support the MPH degree.

At the time of the site visit, the program employed a total of three primary faculty and 16 other faculty. The primary faculty members all dedicate their full effort to the MPH program. The student-faculty ratio (SFR), based on total faculty FTE, is 9.8:1; the SFR based on only primary faculty is 23.3:1. Students reported that class sizes were mostly small and allowed for high degrees of interaction with fellow students and faculty. Faculty also praised the small class size for most sections, indicating that it allowed them to get to know students well, become familiar with their work and provide individualized feedback. Most classes enroll around 14 students, and most full-time faculty typically teach three such classes during each regular semester.

Five staff positions support the program, but all positions are shared with other programs and estimated at 0.2 FTE. The staff positions include an administrative coordinator and administrative assistant, who both also support provosts. The other staff include the senior director of operations and instructional support, who provides registration assistance and instructional design for online courses. The director of online student services and program management assists with student support, including orientation and retention. A librarian is designated to provide specialized support to program students and faculty.

The program has access to space for online and traditional face-to-face classes. On-campus students have access to common space in the student atrium, dining facilities and student areas. No laboratory space is needed for the program. Faculty have office or cubicle space to meet with students. Faculty assigned to cubicles report having access to private space to meet with students when needed.

Students have access to computer, software and technology assistance. SAS, Stata and SPSS are available for student use. Virtual Desktop allows access from any location, using a student username and password. The Office of Information Services offers 24/7 assistance. The library provides access to 161 databases, around 36,000 electronic journals and over 390,000 electronic books. Students on and off-campus have access to library resources; interlibrary loan services are also available.

Additional resources include the Center for Academic Success and Enrichment, which assists in areas including writing and math. Disability Support Services offers assistance to students with physical, psychological or learning disabilities.

The commentary is that multiple data points indicate a sharp increase in student enrollment in the most recent two years, and both faculty and students noted that the growth has placed stress on existing program resources. The SFR by primary faculty was 23.3:1 for the most recent year of available data, and this represents a 60% increase from the previous year. The three primary faculty advise all online and campus-based students. Students, faculty and community representatives remarked that they believe more faculty and staff support would be beneficial and would better reflect the program's current position and scope of work. The program plans to request funding for an additional primary faculty member and a staff coordinator for practice placements.

#### 1.8 Diversity.

### The program shall demonstrate a commitment to diversity and shall evidence an ongoing practice of cultural competence in learning, research and service practices.

This criterion is partially met. One of the core values of MCPHS and the MPH program is "embracing diversity and emphasizing the importance of social justice and health equity." The university is committed to maintaining a safe and positive learning, working and living environment for its entire community. The university does not discriminate on the basis of race, color, national origin, sex, pregnancy, age, disability, creed, religion, sexual orientation, gender identify, gender expression, ancestry, genetic information, military service or veteran status in admission and access to, and treatment and employment in, its educational programs and activities. The university does not tolerate discrimination, harassment and retaliation and has policies including the following: Protection from Harassment Policy (Title IX); Nondiscrimination and Sexual Harassment Policy; and Student Code of Conduct and Student Discipline System. The MPH program shares these commitments and implements and enforces these policies to foster a safe and positive environment.

Beginning in academic year 2014-2015, the university's Title IX Committee has conducted an annual climate survey. Findings from this survey demonstrated the need for increased awareness and education related to culture and diversity. In June 2015, MCPHS established a university-wide Culture and Diversity Task Force to enhance cultural awareness and inclusion. The following programs were conducted on behalf of the task force in fall 2015: cultural diversity panels; a program on bridging cultural differences to achieve health equity; and a program on exploring global health. The MCPHS-wide January 2016 faculty retreat included sessions on the following: understanding the changing landscape of higher education; meeting the needs of diverse student populations; and engaging students in cross-cultural experiences. In fall 2017 panels were held on all campuses on providing patient-centered LGBTQ+ healthcare. The

university also hosts Schwartz Rounds, which bring together caregivers from diverse disciplines to discuss emotionally and psychologically challenging cases. Examples of Schwartz Rounds that have focused on diversity include the following: LGBTQ+ health, end-of-life care, veterans' centered care, and social determinants of health. In March 2017, the university appointed an assistant dean for diversity and inclusion in the Division of Academic Affairs to lead the expansion of the university's work in the areas of diversity and inclusion. During the site visit, university leaders expressed the university-wide commitment to improving diversity and cultural competency. Recently, the university expanded the President's Commitment to Diversity Award, which only had been available for the nursing program, so that graduates in other disciplines could also be recognized.

The MPH program is committed to building a diverse and activist public health workforce that is trained in the complex issues associated with disparate health status and healthcare access, systemic racism and systems of oppression. Within the program, health inequalities, diversity, and social justice and equity are addressed specifically in four of the MPH core courses (PBH701, PBH705, PBH710, PBH715) and the four concentration courses that address community and behavioral health (PBH750, PBH755, PBH710, and PBH765). The core competencies for the MPH program address health inequalities, diversity, health equity and social justice. The self-study asserts that promotion of mutual respect and enhancement of understanding of diversity and social justice are ingrained into the program. The self-study reports that students completing the program's exit survey have commented that concepts of diversity and cultural competency are woven throughout their course work.

Six of the program's 12 instructional objectives and associated metrics focus on achieving a diverse complement of faculty, staff and students. Over the past three academic years, the program has seen a steady increase in the percentage of students in racial and ethnic minority groups that reflect diversity in Massachusetts per the 2015 U.S. census: enrollment by students from racial and ethnic minority groups increased from 22% to 35% and exceeded the program's target of 26.5%. During the site visit, program leaders stated that this metric was a broad starting point to measure diversity within the program. The included racial and ethnic minority groups are Asian, Black/African American and Hispanic/Latino. For students in academic year 2016-2017, the distribution was Asian 22%, Black/African American 11%, Hispanic/Latino 3%, Caucasian 59% and other 5%. The increase in student diversity from 2014-2015 to 2016-2017 was attributed primarily to an increase in Asian students from 10% to 22%. The program acknowledged that it has been challenging to achieve growth in the proportion of students who are Black/African American or Hispanic/Latino.

The percentage of students who are foreign born increased from 7% to 16%, achieving the target of 15%. The percentage of faculty and staff in racial and ethnic minority groups increased from 10% to 21% but has not yet achieved the target of 26.5%. The percentage of students residing in HRSA medically

underserved areas (based on the address listed in their application) remained around the target of 20%. The program also includes the percentage of students enrolled in dual degree programs and the percentage of students from the public health workforce as measurable objectives for maintaining diversity in the classroom that benefits student learning: the targets were exceeded in both of these areas for the past three years. A seventh objective has a goal that 100% of courses will provide students with one or more opportunities to synthesize concepts of cultural competence and creative problem solving through assignments. Currently, three courses (16%) have not achieved that objective: DRA807, Statistics of Clinical Research; DRA809, Health Epidemiology; and DRA811, Health Policy and Development Analysis.

The concern relates to the program's self-identified lack of program-specific plans to recruit, develop, promote and retain a diverse faculty and staff and to recruit, admit, retain and graduate a diverse student body. The MPH program is collaborating with staff from admissions and human resources to develop better plans to recruit minority students and faculty and is considering a scholarship program for low socioeconomic status and/or minority candidates. The program plans to work collaboratively with the assistant dean for diversity and inclusion to enhance diversity efforts over the 2017-2018 academic year and develop a formal diversity plan for the program. The program also plans to add a question to the course evaluation regarding the coverage of health equity, diversity and inclusion principles.

#### 2.0 INSTRUCTIONAL PROGRAMS.

#### 2.1 Degree Offerings.

The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's degree. The program may offer a generalist MPH degree and/or an MPH with areas of specialization. The program, depending on how it defines the unit of accreditation, may offer other degrees, if consistent with its mission and resources.

This criterion is met. Table 2 presents the program's degree offerings. The program offers an MPH in community health education and combined degree programs in four areas.

Table 2. Degrees Offered		
	Academic	Professional
Master's Degrees		
Community Health		MPH*
Joint Degrees		
Bachelor's in Public Health		BS/MPH
Pharmacy—Boston		PharmD/MPH
Pharmacy—Worcester		PharmD/MPH
Optometry		OD/MPH
Dental Hygiene		MSDH/MPH

\* Degree is offered in both on-campus and online formats.

In addition to courses addressing the five core areas of public health knowledge, the program requires an introductory survey to public health and 12 credit hours of concentration-specific coursework, including courses in health education, program design and evaluation and community health assessment. Students also complete six elective credits, choosing from a program-defined list; a practice experience; a preparatory seminar for the culminating experience; and a culminating experience.

#### 2.2 Program Length.

### An MPH degree program or equivalent professional public health master's degree must be at least 42 semester-credit units in length.

This criterion is met. The program requires 42 semester-credit units for completion. The university defines a credit as equivalent to one 50-minute class period per week for a 15-week semester.

#### 2.3 Public Health Core Knowledge.

### All graduate professional public health degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

This criterion is met with commentary. All MPH students are required to successfully complete courses in the five core disciplines of public health with a grade of B- or better and a 3.0 overall GPA. Table 3 presents the required core courses for MPH students. All students also are required to complete a public health survey course in their first semester. This 3-semester hour course provides a brief overview of each of the core areas in addition to introducing students to broad issues in the history and current practice of public health.

Table 3. Required Courses Addressing Core Knowledge Areas			
Core Area	Required Course	Credits	
Biostatistics	DRA807, Statistics of Clinical Research	3	
	OR		
	DHY714, Research Methodology and Statistics		
	(joint dental hygiene students only)		
Environmental Health	PBH705, Introduction to Environmental Health Sciences	3	
Epidemiology	DRA809, Health Epidemiology	3	
	OR		
	PSB424, Research Methods in Pharmacoepidemiology		
	(joint PharmD—Boston students only)		
Health Policy & Management	PBH710, Introduction to Health Policy and Management	3	
	OR		
	DHY722, Health Policy and Finance		
	AND		
	DHY827, Health Administration and Management		
	(joint dental hygiene students only)		
Social & Behavioral Sciences	PBH715, Introduction to Social and Behavioral Sciences	3	
	Or		
	DHY706, Health Promotion and Education		
	(joint dental hygiene students only)		

The program does not waive the required core knowledge courses, but will waive the survey course if the student completed an undergraduate program in public health. The program does accept transfer credits for core courses if comparable coursework was completed successfully at another CEPH-accredited graduate program.

Two of the core courses, DRA807, Statistics of Clinical Research, and DRA809, Health Epidemiology, are taught by faculty from the Drug Regulatory Affairs (DRA) program in the pharmacy school. Despite the titles, site visitors' review of the syllabi for both courses documented course goals and objectives that clearly include content and applications relevant to public health. For the PharmD/MPH Boston combined degree program, students take PSB424, Research Methods in Pharmacoepidemiology instead of DRA809. Faculty have mapped this course to the program's defined competencies and verified that it addresses all competencies. Site visitors reviewed the syllabus and noted that, aside from the course title and two class sessions at the end of the course focused on pharmacoeconomics, the syllabus appears to provide students with preparation in methods, terminology and tools that is similar to the course completed by standalone MPH students.

As indicated in Table 3, students enrolled in the joint degree with dental hygiene (MSDH/MPH) take dental hygiene versions of the required courses in three of the five core public health knowledge areas. The MS in dental hygiene offers a public health track, and the self-study notes that the public health concentration in the MSDH was designed around the 10 Essential Public Health Services, and its learning outcomes were based on the Council on Linkages Between Academia and Public Health Practice competencies. The DHY-prefix classes use textbooks and readings that are commonly used in the corresponding courses in CEPH-accredited units. Although the classes incorporate oral health examples, the syllabi would be essentially impossible to distinguish from those typically offered in this area by accredited programs and schools. Faculty members from the dental hygiene public health track also participate in MPH faculty meetings and have active research and collaborations with MPH primary faculty. The faculty teaching in the dental hygiene public health track have public health training and experience, including graduate coursework and degrees and/or a record of recent publications or presentations in public health-related journals and conferences.

The commentary relates to the current biostatistics and epidemiology core courses taught by the DRA faculty. The program has ensured that the courses address MPH core and concentration competencies and a review of the syllabi confirmed public health relevant learning objectives and content. During the site visit, however, students expressed an interest in biostatistics and epidemiology coursework that has more community-based public health content and relevance and better aligns with the program's other coursework. The program has self-identified the need to develop a MPH-specific research methods

course to replace the current biostatistics and epidemiology core courses and is developing a foursemester hour course with a laboratory component to be offered initially in fall 2018.

#### 2.4 Practical Skills.

## All graduate professional public health degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students' areas of specialization.

This criterion is met. Students are required to successfully complete a minimum of 120 hours in a practice experience in which the student demonstrates competencies and integrates public health knowledge from both their core and concentration classes. The goals of the practice experience are to reinforce MPH core and concentration competencies; apply classroom theory, knowledge, skills and techniques to a professional work setting; enhance and develop new skills needed to function as a professional in a public health setting; work on a specifically defined public health problem or issue project that is salient to the host site; participate in a setting that allows the student to explore future career options; engage in professional self-assessment and personal reflection; build a personal network of professional leaders in public health; and connect with local and state public health agencies and other community-based organizations to create support for the public health community. The two-semester hour, required course PBH890, Public Health Practice Experience, provides a structure for identifying a practice experience location, defining learning objectives for the experience, planning a project, completing the internship and presenting results from the practice experience.

The selection of practice experience sites is done by the student in close collaboration with their faculty advisors and the program director. If students select their existing worksites for the practice experience, the plan must include different responsibilities and a more specific and advanced public health scope than their usual workplace responsibilities. The host sites are chosen with the intent to meet the program's goals for the practice experience. Students must submit a proposal for the practice experience that include the agency name, description of site, proposed project outcomes, and an abstract summarizing the intended project. Project proposals are evaluated based on adherence to the core and concentration competencies, academic rigor, and ability of the mentor and agency to provide a supportive learning environment. The program also considers the students' interests and career goals when reviewing project proposals. All sites go through the same approval process to ensure they meet the program's standards for practice experience host sites.

Preceptors are approved during the site selection process by the student's faculty advisor and the PBH890 instructor. Preceptors are evaluated based on their experience in public health, not necessarily their credentials. All preceptors receive the preceptor guide, which covers their roles and responsibilities. The preceptor guide identifies the 12 core and 10 concentration competencies that students are expected to draw from as a guide. Preceptors provide written feedback for the student and the program by

completing evaluation forms midway through practice experience (after 60 hours are completed) and upon completion of the practice experience. The final preceptor evaluation includes a rating of how well the student met the defined competencies, which are grouped in six broad categories. Faculty supervision of students during the practice experience is done through the instructor in the PBH890 Public Health Practice Experience and the close collaboration that students have with their faculty advisors throughout the practice experience.

Students are evaluated through assignments completed as part of the PBH890 course, including the following: a learning contract; project proposal; literature review; discussion board/journal entries; poster presentation; and mid-point and final evaluations by the student and the preceptor. Projects typically include one or more elements of health promotion and education, program planning, program evaluation, community health assessments, grant writing and/or other topic areas that relate to the core or concentration competencies. The student self-evaluations assess whether the student applied specific core and concentration competencies during the practice experience.

Over the past two years, students completed their practice experiences with over 30 different organizations, including academic medical centers and other medical facilities; state and local public health agencies; non-profit community health and health promotion organizations; and pharmaceutical businesses. The program did not identify any internship placements outside of the United States but has placed a student with the International Rescue Committee. During the site visit, the program director described a new university-level collaboration with Child Family Health International, which will facilitate students being able to have an international practice experience.

The program does not permit waivers of the practice experience.

Site visitors reviewed sample documents from the practice experience and found that they documented appropriate settings and projects.

#### 2.5 Culminating Experience.

### All graduate professional degree programs identified in the instructional matrix shall assure that each student demonstrates skills and integration of knowledge through a culminating experience.

This criterion is partially met. The culminating experience consists of completion of a professional data analysis paper and presentation. Students complete a preparatory seminar before beginning the project— the preparatory course reviews data collection and analysis and allows students to refine their planned projects. Completion of these components, along with completion of the internship, are intended to assess and ensure students' ability to integrate, synthesize and apply acquired skills and competencies.

Students must complete the six required core courses (core knowledge areas plus introduction to public health), prior to taking the mandatory course, PBH895 Preparatory Seminar. Students are eligible to take PBH898 Culminating Experience after completing 30 semester hours of courses, including the core courses, four additional concentration and/or elective courses and the preparatory course.

Students must submit a project proposal/approval form. All students complete a data analysis and interpretation project. Course faculty work with each student to develop the study, from defining the question to choosing methods to interpretation and conclusions. Students share a PowerPoint presentation of their findings either in person for the campus-based course of through Blackboard with narrated audio for the online course at the end of the semester and produce a publishable paper. Students are expected to fulfill three prescribed competencies, all of which relate to data analysis and communicating results of data analysis. During the site visit, faculty acknowledged that not all projects may fulfill all components of the third competency identified: "Develop a structured approach to identify data sources, access data, evaluate data quality and utility and highlight any gaps in data to address a public health issue."

Faculty assess the proposal, outline, literature review, methods, results, discussion and narrated presentation on criteria established prior to course enrollment. The criteria outline expectations for required content, completeness, accuracy, depth and breadth and writing style.

The concern relates to the structure of the current culminating experience, which does not require students to truly integrate knowledge, skills and abilities from across the curriculum. As structured, the program only ensures that students address three competencies—two of the twelve core competencies and one of the ten concentration competencies, and all are clustered within the same scope. The grading rubric on the paper does not specifically include an assessment on competencies, nor does the planning process prompt students to identify competencies. Some student projects do appear to address other competencies, but this is incidental rather than part of the design of the experience.

#### 2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The program must identify competencies for graduate professional, academic and baccalaureate public health degree programs. Additionally, the program must identify competencies for specializations within the degree program at all levels (bachelor's, master's and doctoral).

This criterion is met. The program defines 12 competencies that address core public health knowledge areas and 10 additional competencies that reflect the program's emphasis on community health education. The competencies are written at a level appropriate for graduate study, asking students to "integrate," "apply" and "plan," for example. The self-study presents a matrix that clearly indexes each of

the competencies to the program's required courses. The program chooses to map all program courses to all competencies, though most of the core competencies map to the courses that address the five core public health knowledge areas. The matrices document appropriate coverage, with courses providing both primary and reinforcing coverage for each of the 22 competencies.

Prior to 2015, the program used the full set of competencies from the Association of Schools and Programs in Public Health. The primary faculty began the process of revising and refining the competency set in summer 2015. Faculty circulated their initial draft of revised competencies to a group of faculty and public health practitioners and received 101 responses to the survey. Faculty used survey data to update the competency set and finalized the competencies through an iterative process.

The program discusses competencies at the orientation for new students and publishes competencies on syllabi. Most of the syllabi reviewed by site visitors listed the relevant competencies, and all syllabi for required courses listed appropriate learning objectives that map to competencies. Students self-assess their competency attainment in the program's exit survey.

The program has a schedule that ensures Curriculum Committee review of every course at least every five years. This serves as one mechanism for maintaining current competencies. Because of the program's relatively recent implementation and program leaders' awareness of the need to move toward implementing curricular expectations that align with revised accreditation criteria, the program has not yet had the opportunity to work through a full cycle of review.

Students who met with site visitors were familiar with the concept of competencies. Those who had completed their practice experiences could not describe the competencies that they had attained or the process of planning experiences to align with the competencies, but they were aware of competencies from their placement on syllabi and recalled completing self-assessments.

#### 2.7 Assessment Procedures.

## There shall be procedures for assessing and documenting the extent to which each student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.

This criterion is partially met. The program assesses students' competency attainment through tracking grades in required courses, which map to all competencies. Students must complete all courses with a grade of B- or better. The program also asks all students to self-assess competency attainment at the program's conclusion.

The first area of concern relates to the need for specific competency assessment in the practice and culminating experiences. Both experiences require students to identify clear learning objectives, and the

practice experience asks students to self-identify the competencies they addressed during the final survey, but neither experience explicitly requires identification of competencies during the planning or faculty assessment stages. Faculty indicated that they do ensure that students design and complete experiences that address the program's competencies, but they acknowledged that there is not a method of documenting and tracking assessment of specific competencies.

The program calculates graduation rates at five years after a student's entrance, though in some circumstances, students may continue beyond five years. The cohort that entered in 2012 has a 75% graduation rate, and the 2013 entering class has a 65% graduation rate, with additional students still progressing toward graduation. Attrition appears somewhat higher for students who entered in 2015, with a 24% attrition rate by year two, but the program tracks all students who do not complete the program and note that attrition for most can be attributed to challenges in managing the graduate workload, financial reasons and personal/familial reasons.

The self-study reports outcome data for 64 individuals who have graduated since the program's inception. The majority of graduates for whom data are reported were employed within one year of graduation, with other students pursuing additional education or training. Fewer than 10% (one student) from the last graduating class were still seeking employment one year after graduation. The program collects data through surveys at graduation and one year after graduation and also collects data from social media connections, such as LinkedIn. Many alumni stay in touch with faculty and seek recommendations and advice after graduation.

The other area of concern relates to the program's need to collect and analyze meaningful data from alumni and employers on graduates' competence and preparation for the workforce. The program has anecdotal data from faculty members' regular interactions with alumni and several individuals who have employed graduates. The employers with whom faculty regularly speak have been positive about students' preparation. One alumna received a promotion at a local health department after completing the program. The program also draws on data from practice experience preceptors for context, and these data indicate that students' skills prepare them for workforce roles. The program has not yet developed methods to more systematically collect and analyze data to ensure that students continue to be well-prepared for their post-graduation roles.

#### 2.8 Bachelor's Degrees in Public Health.

If the program offers baccalaureate public health degrees, they shall include the following elements:

Required Coursework in Public Health Core Knowledge: students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion

2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.

Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses.

Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor's degree at the parent university. The experience may be tailored to students' expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is not applicable.

#### 2.9 Academic Degrees.

If the program also offers curricula for graduate academic degrees, students pursuing them shall obtain a broad introduction to public health, as well as an understanding about how their discipline-based specialization contributes to achieving the goals of public health.

This criterion is not applicable.

#### 2.10 Doctoral Degrees.

#### The program may offer doctoral degree programs, if consistent with its mission and resources.

This criterion is not applicable.

#### 2.11 Joint Degrees.

### If the program offers joint degree programs, the required curriculum for the professional public health degree shall be equivalent to that required for a separate public health degree.

This criterion is met. The program offers programs of study that combine the MPH with degrees in pharmacy (PharmD), optometry (OD) and dental hygiene (MSDH). The program also offers a program that allows qualified BS students to earn the MPH in an expedited manner by counting MPH credits toward the requirements for the bachelor's degree. During fall 2017, there were four students in the pharmacy combined degree, 20 in the optometry combined degree and eight in the dental hygiene

combined degree. Program faculty noted that, broadly speaking, combined degree students typically make up around 40% of the total MPH student population.

The combined degree in pharmacy differs based on the site in which the student enrolls in the MCPHS pharmacy program (Boston or Worcester). Students in the Boston pharmacy degree program take MPH coursework during the summer and finish the MPH degree two semesters after receiving the PharmD (total of seven years to earn both degrees). Students complete the pharmacy school's course in pharmacoepidemiology in lieu of the program's core epidemiology course, as described in Criterion 2.3. Students may also double-count elective credits with approval from a public health faculty member, who approves credit sharing based on competencies. The program maintains a list of courses from each degree program that can count toward the other program. Public health faculty and pharmacy faculty meet at least annually to review and update the list. Students share up to nine credits between the programs.

Students in the Worcester pharmacy degree program take MPH classes during pharmacy semesters that allow for elective credit and complete the two degrees in four years. These students complete a pharmacy course titled "US Health Care and Public Health" in lieu of the required introductory public health survey course completed by standalone MPH students. No students have enrolled in this combined degree option to date, since the Worcester pharmacy program solely enrolls experienced professionals; faculty noted that many entering Worcester PharmD students already have a master's degree, and others may be hesitant to take on additional academic requirements beyond the desired pharmacy program. MPH faculty offer a non-degree public health certificate, described in Criterion 3.3, and the public health certificate option is more popular with Worcester pharmacy degree students.

Students in the optometry program complete a course titled Optometry and Public Health, in lieu of the required introductory public health survey course completed by standalone MPH students. This course is taught by a faculty member with public health training and experience who also teaches in the MPH program. Site visitors verified the equivalence based on review of the syllabus. Students also complete the required MPH practice experience simultaneously with their optometry externship, but they complete a community health assessment at the externship site outside of clinical hours. Public health faculty supervise and assess the practice experience.

Students complete the master's degrees in dental hygiene and public health in a coordinated three-year program. As indicated in Criterion 2.3, the public health track of the MSDH program was developed by faculty members with public health training and experience and was intentionally designed to replicate coursework that would typically be housed in an MPH program. Faculty appointed to the MSDH's public health track include an individual with a DrPH degree, several individuals with MPH degrees and an

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individual with a PhD in epidemiology. Students completing the public health track in the MSDH share 23 credits between the degrees. The public health track in the MSDH requires each student to develop a relationship with a community or rural health program to plan, implement and evaluate an oral health initiative.

The core MPH epidemiology and environmental health courses count, as-is, toward the dental hygiene degree. Beyond this, the MPH program accepts courses from the MSDH program in lieu of the three remaining core public health knowledge area courses, as discussed in Criterion 2.3. Additionally, dental hygiene public health track students complete a required introduction to public health class and a program planning and evaluation class that are offered through the dental hygiene program. MPH faculty have reviewed the syllabi extensively, and site visitors validated this review.

The list of dental hygiene classes that fulfill MPH program requirements is as follows:

- DHY714, Research Methodology and Statistics
- DHY706, Health Education and Health Behavior
- DHY722, Health Policy and Finance
- DHY827, Administration and Management
- DHY701, Introduction to Public Health
- DHY703, Program Planning and Evaluation

Finally, MSDH students complete DHY835, Public Health Practicum, to fulfill the public health practice experience requirement. MPH faculty approve the proposals, which are subject to the same requirements as those for standalone MPH degree students.

#### 2.12 Distance Education or Executive Degree Programs.

If the program offers degree programs using formats or methods other than students attending regular on-site course sessions spread over a standard term, these degree programs must a) be consistent with the mission of the program and within the program's established areas of expertise; b) be guided by clearly articulated student learning outcomes that are rigorously evaluated; c) be subject to the same quality control processes that other degree programs in the university are; and d) provide planned and evaluated learning experiences that take into consideration and are responsive to the characteristics and needs of adult learners. If the program offers distance education or executive degree programs, it must provide needed support for these programs, including administrative, travel, communication and student services. The program must have an ongoing program to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. The program must have processes in place through which it establishes that the student who registers in a distance education or correspondence education course or degree is the same student who participates in and completes the course and degree and receives academic credit.

This criterion is met. The MPH program is offered as both an on-campus and online format. The online format was adopted largely in order to meet the needs for clinical practitioners trained in public health. Health professions students who are enrolled in the combined degrees can access the online courses when they are on clinical rotations, and working professionals can complete the degree without leaving

their jobs. Most courses are asynchronous, although there are a few synchronous sessions, which are recorded. All but one credit of the 42 required credits can be taken online. Students are required to be present at the one-day new student orientation and must attend a four-day concentrated experience as part of the culminating experience. Students are allowed to and frequently do take both on-campus and online courses. Due to the history of relatively limited visibility of MCPHS outside of the regional area, most of the online students live in the Northeast, though the program has enrolled students from across the US.

Online content is delivered using Blackboard as the content management system. The online courses are designed to be equivalent to the traditional class versions; learning objectives, lectures, assignments, group activities and exams are generally the same. Faculty stated and students confirmed that there are multiple opportunities to participate in class activities each week and that course faculty are highly engaged and participatory, mostly through online discussion posts. Students who met with site visitors indicated that the interactive format and requirements ensure that students get to know one each other in the online classes.

Students receive assistance and support through the senior director of operations and instructional support and the director of online student services and program management. Both faculty and students receive assistance from the instructional design support team. Channels of communication include phone calls, email or video conferencing. Additional resources are also available to online students from the Center for Academic Support and Enrichment, such as the Writing Center and TutorMe, which is an online tutoring service available through Blackboard.

Surveys show that students are satisfied with online classes and technology. Students confirmed that they receive 24/7 support on technology questions. Faculty also reported excellent support from technology staff on the use of the online course management system. In addition, faculty have meetings at the end of each semester in which they share teaching tips, including discussion of online classroom management and student engagement.

All students have a unique login and password to access Blackboard and university email. The program assures student identity through student accounts with passwords that need to be changed every 90 days. Since the program is small, the faculty get know the students and are familiar with their work. In addition, synchronous Blackboard Collaborate sessions, discussions and group projects also serve to verify student work. All online students are also required to attend PBH 895 Preparatory Seminar for the Culminating Experience in person. Students are required to complete training in academic honesty/plagiarism during orientation; they also indicate electronically that they are doing their own work when they take an exam or turn in an assignment.

Online courses are approved through the standard university process. However, the instructional design team also reviews online courses to assure that they meet a standard. On course evaluations, three additional questions assess the quality of online courses.

Students taking online courses were highly complimentary of the quality of online courses. One alum remarked that he thought the quality of the online program was better than the experiences of colleagues who were enrolled in MPH programs through nearby institutions.

#### 3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

#### 3.1 Research.

## The program shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

This criterion is met with commentary. Program faculty are engaged in research and scholarly activities, despite the institution's stated focus as a learner-centered institution. University practices and policies reflect the Boyer Model of scholarship, and promotion guidelines and other university documents emphasize student engagement in faculty scholarship, as well as applied scholarship.

MCPHS does not require faculty to acquire extramural funding, although scholarship is a component of the criteria for promotion. A maximum of 25% FTE is recommended for research. In the public health program, faculty are expected to engage in research relevant to public health; in addition, they are expected to include students. Most of the projects listed in the self-study are community-based, and most projects are unfunded.

Faculty described engaging students through discussion of their research in the classroom and gave examples of using their datasets and results in online classes. Students who met with site visitors indicated that they were very aware of their faculty members' research interests and experiences. They noted that faculty often use examples from their own work and describe their experiences when relevant to course content. Faculty also state that even though the university does not emphasize research, they individually and collectively seek out research opportunities through collaboration with colleagues from other institutions. Faculty recently applied for grant funding; the project was not funded, but faculty note that preparing the application made connections that presented future opportunities for collaboration.

The university does not have central resources for research support, since extramural funding for research is not an area of emphasis. Program faculty noted that some type of grant center would help in supporting applications for extramural funding.

Community-based research includes projects with the Better Oral Health for Massachusetts Coalition to improve medical-dental collaboration in a nearby town. Another project involves data analysis of risk factors of opioid deaths, in collaboration with the Massachusetts Department of Public Health.

The program lists eight research projects over the last three years, three of which were associated with a faculty member who left the program at the end of the 2016-2017 academic year. The other five projects are associated with the current primary faculty. In 2016-2017, all three primary faculty presented at a national conference; four articles were submitted for publication (three were accepted). The self-study indicates no funded research for 2016-2017, \$4000 for 2015-2016 and \$6500 for 2014-2015. One activity listed in the self-study indicates student participation, as a student served as a paid research assistant and co-presented at a meeting in 2016.

Students have become more involved in research in recent years. Three students in 2017-2018 are currently involved in research efforts with primary faculty, include a naloxone knowledge survey among pharmacists. Students are also exposed to research through the culminating experience and directed study courses.

As verified in on-site conversations, faculty are supportive of student involvement in research. Students interviewed on site seemed to be aware of all available opportunities.

The commentary is on the relatively low track record of student involvement in community-based research. Before the last six months, only one student had been involved in research in the last three years, and the project was non-community based. Because some of the students in the program are interested in pursuing doctoral studies, ensuring more opportunities to engage with faculty in research will strengthen the program's ability to prepare students for their intended careers. One alumnus stated that increasing research experience for students would strengthen the program.

#### 3.2 Service.

### The program shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.

This criterion is met with commentary. Faculty appointments include an expectation to provide community and professional service. Primary MPH faculty members engage in national-level service activities, including service with the Association of Prevention, Teaching, and Research (APTR), American Public Health Association (APHA) and the International Society for Environmental Epidemiology. The program director was chair of APTR's 2016 annual meeting planning committee and was elected to the APTR board of directors for a three-year term in April 2017. Another faculty member chaired the emergency preparedness and response group of the American Red Cross/CDC Joint Committee on Epidemiological Surveillance During Disasters.

Locally, the MPH program faculty members have worked with Action for Boston Community Development (ABCD). The MPH program director convened a multidisciplinary group of faculty from MCPHS to plan a service learning opportunity for students. Over the course of the 2013-2014 academic year, students from MCPHS online, pharmacy, nursing, physician assistant studies and dental hygiene conducted 21 health promotion workshops with ABCD to promote healthy and active aging.

Other faculty service activities with local organizations include the following: board member of Better Oral Health of Massachusetts Coalition; co-collaborator with an opioid task force to develop a naloxone training program for health professions students, faculty, and staff; health advisor for the Residential Initiative, a homelessness project in Boston; and public health advisor for Ocean Comeback, a non-profit organization aimed at improving coastal environments.

Students participate in service through on-campus and off-campus opportunities. During the 2016-2017 academic year, a new service organization, the MCPHS Public Health Society, was created by the on-campus students in the MPH program. The Public Health Society focuses on graduate student interests in public health and has hosted a variety of events for both online and on-campus students, such as alumni panels, community service events and film screenings. During the site visit, students described their engagement with the Public Health Society and their planning for National Public Health Week. Activities are offered to online students and other students who are unable to attend in person through live streaming, conference calls, webinars and other distance technologies. The MPH program built a community site in Blackboard to share service opportunities, post jobs and offer other resources. Since the program's inception, three students have served as New England Regional Liaison/MCPHS University Campus Liaison as part of the APHA Student Assembly Campus Liaisons Committee. MPH students participate in other activities, including health fairs in the Mission Hill community.

The commentary relates to the lack of structure to regularly track student participation in service activities. While the program is aware of some students' volunteer or service activities, it does not have a system for routinely obtaining and maintaining that information.

#### 3.3 Workforce Development.

### The program shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

This criterion is met. The MPH program has worked to build relationships with local boards of health and agencies working with local boards of health, including but not limited to the Massachusetts Association

of Public Health Nurses, state-wide emergency preparedness regions, healthcare institutions, other universities and the Massachusetts Department of Public Health. In fall 2016, the program conducted a survey to determine workforce development interests of local boards of health and community public health stakeholders: responses were received from 11 local or state public health organizations. Workforce training interests included budget development, advancing health equity, addressing the opioid crisis and climate change and its impacts on public health. The results of the outreach and the survey suggested that Boston and its surrounding communities and the communities in central and western Massachusetts were saturated with workforce training opportunities from other Boston-area public health schools and programs.

Through discussions with state and local public health officials, the program decided to focus on emergency preparedness region five, which includes southeastern Massachusetts communities, encompassing Bristol, Plymouth and Barnstable Counties and the Islands (Nantucket and Martha's Vineyard), to plan the delivery of local board of health workforce development training initiatives. Local health representatives in this region often perceived a lack of training, seminars and internship opportunities and expressed frustration with commuting into Boston for trainings due to financial and time constraints. The region also has two federally recognized tribes. The program has retained a consultant experienced in local public health practice to assist in building collaborative relationships and identifying priority trainings areas and needs. The program is in the initial stages of developing an agreement for the Town of Plymouth's public health department to become an academic health department. Key priority areas for the two organizations would be supporting student practice experiences and collaborative research projects. During the site visit, the health department's director expressed enthusiasm for the collaboration and for the opportunities it opens up for students and for his community.

The program has offered a few continuing education programs over the past three academic years. Several programs focused on the opioid epidemic and on efforts to prevent, mitigate and manage opioid use and overdose. These programs included public forums for the MCPHS community, a presentation to Medical Reserve Corps volunteers and training for pharmacy students. In addition, a continuing medical education program on preventive medicine for medical and dental providers in a local community had 60 participants, and a training session on community health assessments and Community Assessment for Public Health Emergency Response (CASPER) served 25 public health practitioners.

The MPH program initiated an online Graduate Certificate in Public Health for the 2017-2018 academic year. Students must complete successfully 12 semester hours of study by taking any four of the program's six core courses. Four students are currently enrolled in the certificate program. The program also offers a certificate of public health option for PharmD students on the Worcester campus. Students must complete the public health survey course PPW340, US Health Care and Public Health, and four

other MPH core courses. Over the past two academic years, six to 11 students were enrolled in the Worcester-based certificate program each semester.

#### 4.0 FACULTY, STAFF AND STUDENTS.

#### 4.1 Faculty Qualifications.

## The program shall have a clearly defined faculty which, by virtue of its distribution, multidisciplinary nature, educational preparation, practice experience and research and instructional competence, is able to fully support the program's mission, goals and objectives.

This criterion is met. The faculty complement, as a whole, addresses the core areas of public health and provides expertise appropriate to the program's curriculum and mission. All three primary faculty have at least one graduate degree from a CEPH-accredited school or program. Two primary faculty have PhDs in relevant disciplines; the other primary faculty is a current Doctor of Health Sciences candidate with an MPH. Other program faculty include adjunct faculty from community organizations and other academic institutions and faculty from other MCPHS departments. Eleven of 18 of the non-primary faculty have an MPH degree.

To integrate practice perspectives, faculty incorporate their public health experience in lectures. Several faculty have had practical experience, including work in health departments. Backgrounds of faculty include medicine, pharmacy, biology, math, dental hygiene, healthcare administration and political science. Faculty note that incorporating interdisciplinary perspectives is easy, since faculty discuss opportunities in meetings; for example, oral health and physician assistant perspectives were incorporated into the introductory public health course.

Site visitors appreciated the dedication of the faculty to the program. Students were complimentary on faculty expertise and the opportunities that were provided from the faculty's community contacts, accessibility, teaching and support. Students, alumni and community representatives all stated that the faculty were the program's best asset. One student stated that the faculty were "inspirational, motivated and accessible," and that she appreciated how faculty applied their experiences in classes.

#### 4.2 Faculty Policies and Procedures.

## The program shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.

This criterion is met. The MCPHS University Faculty Handbook is the primary policy document for faculty. This handbook outlines policies on faculty governance; faculty titles; appointment, promotion and tenure; professional rights and responsibilities; and compensation and leave. Additional topics include organization and administration of the university; non-reappointment, termination, suspension, dismissal and resignation; and retirement, insurance and other benefits.

Using university terminology, faculty are divided into "core" and "non-core" faculty. Core faculty hold fulltime academic appointments in one or more academic units of the university and perform teaching, research and service. Core faculty ranks include instructor, assistant professor, associate professor and professor. Ranks above instructor level are expected to hold a doctoral or professional degree or equivalent. Core faculty are eligible to have graduate faculty or emeritus faculty status. Non-core faculty are classified as faculty associates, research faculty, adjunct faculty, adjunct clinical faculty, visiting faculty or clinical faculty. The university does not grant tenure.

All new faculty are appointed for a 12-month term, although some continuing core faculty may have ninemonth appointments. The standard teaching load is 18 semester hours for nine months and 22 semester hours for 12 months. Faculty are expected to serve on internal committees as necessary, join appropriate professional organizations and conduct research or scholarly activity commensurate with their rank and annual academic plan. Continuing core faculty are eligible for sabbatical leave. Renewable appointments, based on rank and years of service include provisional (usually granted with initial appointment) and continuing faculty. Continuing faculty who do not maintain satisfactory performance ratings only receive one-year appointments.

For faculty evaluation and promotion consideration, evaluators look for evidence of a faculty member's performance, consistent with the individual's annual review statement. The Promotion Review Committee considers quality of teaching, scholarship and service, although teaching is considered the primary function for the university. Community service is included in the list of evidence supporting faculty service. Examples of evidence for each category are provided. All administrative, continuing and provisional faculty are evaluated in writing at least once a year by the immediate supervisor, and evaluation is based on progress toward achieving goals established for that year in the annual activities report (AAR). The immediate supervisor holds a faculty review conference with each faculty member and generates an annual review statement, which is placed in the faculty's file in the Office of the Vice President for Academic Affairs/Provost.

The Promotion Review Committee also uses the annual evaluations during assessment for promotion. Promotions are made based on evidence of a consistently effective level of performance in teaching, service and scholarship. Generally, candidates should have completed at least four years at the rank of assistant professor before applying for promotion to the rank of associate professor and five years at the rank of associate professor before applying for promotion to professor.

MCPHS provides a number of development opportunities. New faculty and adjunct faculty orientation provides seminars to share resources for teaching strategies and scholarship; however, faculty state that these orientations have not happened in recent years. Adjunct faculty orientation topics include background on the university and mission and resources that support student success. The Faculty Mentoring Institute, Annual Faculty Scholarship Showcase and Interprofessional Education Plexus Program all provide opportunities for faculty professional development. Additionally, the Center for Teaching and Learning, MCPHS Online and the Office of Media Support all support faculty in teaching, learning and technology. The Center for Teaching and Learning supports the Education Technology Resource Group, Faculty Commons and workshops and new/adjunct faculty orientations. The faculty Development Grant Program encourages and supports scholarly activity among faculty by offering pilot project grants for up to \$4000. The MPH program director was the recipient of one of these grants in 2017-2018.

Faculty state that they understand the evaluation and promotion processes that are defined in the handbook. They are positive about the support they receive from the university and program, including travel support for conferences. Adjunct faculty state that they receive good support and assistance with teaching from the program director. In addition, faculty are most appreciative of the support, advice and assistance they receive from their colleagues.

#### 4.3 Student Recruitment and Admissions.

# The program shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program's various learning activities, which will enable each of them to develop competence for a career in public health.

This criterion is met. Student recruitment and admissions are handled by the MCPHS Office of Admission with oversight from the MPH program director. Student recruitment policies and procedures are managed by the chief enrollment officer, who oversees the Office of Admission. The marketing strategy is defined at the institutional level, with minor changes for individual programs. Changes in admission policies are reviewed by the MPH program director and primary faculty in consultation with the MPH Advisory Committee.

The program promotes itself to current MCPHS students, recent graduates and other alumni; offers oncampus events, webinars and moderated chat sessions; attends professional conferences and continuing education events; and is building affiliations with select hospitals and health clinics. The MPH program manual and basic admission criteria are available on the program's website.

All candidates for the on-campus program, including those entering dual degree programs, must have a 3.0 or higher GPA. For the online program, a GPA of 3.0 or higher is preferred, but candidates with a GPA

below 3.0 are considered based on experience, interest and a program director interview. All candidates for a dual degree program must have signed support from their other program director. Official Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS) scores are required, if the applicant's native language is not English and their baccalaureate degree was not completed in the United States. Applicants also must provide a statement of goals (500 words) that demonstrates an interest in and/or passion for public health and a current resume demonstrating experience and/or education in public health or related discipline.

The Office of Admission designates one person to review all MPH applications. The MPH program director works closely with that individual to establish the criteria for evaluating applications and making admission decisions. If there is any question about the application, the program director reviews the package and can require an interview with the candidate before an admission decision is made.

For academic year 2016-2017, the MPH program had 50 applicants, of whom 48 (96%) were accepted and 45 (90%) enrolled. The number of applicants has increased over each of the past three years. During the site visit, the program director noted that most of the growth has been in enrollment to the on-campus degree programs. The Office of Admission historically has focused on and developed expertise in marketing the various on-campus and dual degree programs. The university has recently hired a digital marketing officer to improve outreach efforts using online tools and reach audiences interested in an online learning environment.

The program has outcome measures for evaluating its success in enrolling a qualified student body. For each of the past three academic years, the program has exceeded its target of an average undergraduate GPA of 3.0 or higher for newly matriculated students. Similarly, enrolled MPH degree students exceeded the target of 80% passing courses with a grade of B- or higher each year in the program.

#### 4.4 Advising and Career Counseling.

### There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met with commentary. Online and on-campus students are required to attend the inperson new student orientation session; students meet with individual advisors during this session. The MPH program manual provides information on policies, resources and frequently asked questions. Formal academic advising occurs between the student and assigned advisor. The three primary faculty members each serve as an advisor for about 40 students, according to whether the student is online vs. campus-based; online students are divided between two faculty according to last name. Some flexibility is allowed, as students may be matched to another faculty member based on shared interests. Students are expected to meet with their advisors on a regular basis. Advisors track academic progress; the Academic Standing Committee also reviews the academic status of students at the end of each semester. Students who are having difficulty develop an Academic Improvement Plan or are referred to offices such as counseling and disability support as needed.

Career advising is mostly performed by faculty advisors and program faculty. Throughout the program, students receive information on career options from faculty or practitioners associated with the field experience. Faculty also forward job opportunities to all students. The MCPHS University Center of Professional Career Development provides career advising and support for job searches, offering mock interviews and CV/resume/cover letter assistance; alumni receive free services for life.

Students in the program appreciate the support and advice from program faculty. Students who met with site visitors stated that they frequently receive communication on opportunities for experiences in the community, research and job opportunities. Students report that they receive quick responses on inquiries on academic and career advice and have benefited from connections that faculty make for them.

The commentary refers to the lack of systematic gathering and use of feedback on academic and career advising. The program has limited qualitative data that indicate overall student satisfaction, but data collection on these issues has not been specific. The general exit survey conducted by SAS includes questions on whether the students were aware of career advising resources, but data on satisfaction with career advising were missing, and responses for MPH students had to be extracted from the overall results. The program must ensure that student feedback to questions on academic and career advising is collected and reviewed on a regular basis.

The university's Academic Policies and Procedures Policy and MCPHS Student Handbook outlines grievance procedures for academic issues such as grade appeals. Non-academic issues, such as discrimination, are included in other polices and procedure documents such as the Affirmative Action Policy & Non-Discrimination Policy. No grievances or complaints have been filed against the program in the past three years.

#### Agenda

#### COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

#### MCPHS University MPH Program

#### December 11-12, 2017

#### Monday, December 11

8:30 am	<u>Site Visit Team Request for Additional Documents</u> Carly Levy, DHS(c), MPH, CPH, Instructor of Public Health/Director of MPH
8:45 am	Executive Session
9:45 am	Meeting with Program Administration Caroline Zeind, PharmD, RPh, Interim Vice President for Academic Affairs/Provost Delia Anderson, PhD, Associate Provost, Undergraduate Education & Dean, School of Arts & Sciences Barbara Macaulay, EdD, Associate Provost, Online Education & Academic Innnovation Michael Montagne, PhD, Associate VP for Academic Affairs/Associate Provost, Academic Affairs Susan Gorman, PhD, Chair, Department of Humanities, Behavioral & Social Sciences Carly Levy, DHS(c), MPH, CPH, Instructor of Public Health/Director of MPH Virginia Briggs, PhD, Assistant Professor of Public Health Lindsay Tallon, PhD, CPH, Instructor of Public Health
10:45 am	Break
11:00	Meeting with Faculty Related to Curriculum and Degree Programs Virginia Briggs, PhD, Assistant Professor of Public Health Keri Griffin, PhD, MPH, MPA, Director, Bachelor of Science in Public Health Program Maria Kostka-Rokosz, PharmD, RPh, Assistant Dean of Academic Affairs, Professor, Pharmacy Practice Carly Levy, DHS(c), MPH, CPH, Instructor & Director of Public Health Programs Lori Rainchuso, RDH, MS, DHSc, Associate Professor/Director, Graduate Dental Hygiene Program Sarah Peterson, MPH, Adjunct Faculty (Boston and Online) Shelia Seed PharmD, MPH, RPH, Professor of Pharmacy Practice Lindsay Tallon, PhD, Instructor of Public Health
12:00 pm	Break
12:15 pm	Lunch with Students Merissa Andersen (PharmD/MPH, YOG 2019) Stephanie Colucci (PharmD/MPH, YOG 2019) Kimberly Levitt, (YOG 2018) Kelly Morgese (OD/MPH YOG 2019) Melissa Syverin (YOG 2017) Mojoyinola Jimi-Shotunde (YOG 2018) Kruti Pandya (YOG 2018) Ashley Nguyen (YOG2018) Neda Hani (YOG 2018) Christina Desir (YOG 2018)
1:15 pm	Break
1:30 pm	Meeting with Faculty Related to Research, Service, Workforce Development Virginia Briggs, PhD, Assistant Professor of Public Health Carly Levy, DHS(c), MPH, CPH, Instructor of Public Health/Director of MPH Frank Melaragni, MBA, Assistant Professor, School of Pharmacy Boston Lori Rainchuso, RDH, MS, DHSc, Graduate Program Director, Forsyth School of Dental Hygiene Lindsay Tallon, PhD, CPH, Instructor of Public Health Steve Ward, MPH; Consultant, Public Health Solutions, LLC
2:30 pm	Executive Session
4:00 pm	Meeting with Alumni, Community Representatives and Preceptors Steve Ward, MPH; Consultant, Public Health Solutions, LLC

Nate Horowitz-Willis, DrPH, MPH; Health Director, Plymouth Public Health Department John Grieb, MPH; Director of Planning, Public Health Hospitals and Adjunct Faculty and Preceptor Vanak Huot, MPH; Alumni (Boston) Lisa Kaufman, ATR-BC, LADC1; Community Partner and Adjunct Faculty of Workforce Development Anthony Lacina, MPH, MEd, CHES; Alumni (Online) Rushina Pancholi, MPH; Alumni (Boston) Sarah Peterson, MPH; Adjunct Faculty and Preceptor

5:00 pm Adjourn

#### Tuesday, December 12

- 8:30 am <u>Meeting with Institutional Leaders</u> Charles Monahan, University President Caroline Zeind, PharmD, RPh, Interim Vice President for Academic Affairs/Provost Richard Lessard, Executive Vice President, COO/CFO
- 9:30 am Executive Session
- 12:30 pm Exit Briefing