

REVIEW FOR ACCREDITATION
OF THE
PUBLIC HEALTH PROGRAM
AT
DEPAUL UNIVERSITY

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

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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 DePaul 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 February 2018 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.

DePaul University, the nation's largest Catholic university, was founded in 1898 as St. Vincent's College. In 1907, the school was renamed DePaul University after the seventeenth century father of the Vincentian order, St. Vincent DePaul. By 1967, the school diversified its curriculum and had added master's and doctoral programs to its baccalaureate offerings. DePaul University has a history of contributing to the country and Chicago area with examples including providing facilities that were turned into army barracks in 1918 and providing free instruction to men and women seeking war industry jobs. Starting in 1998, DePaul University developed the annual tradition of Vincentian Service Day where students, staff, faculty and alumni participate in a day of service with community partners in the Chicago area and in cities nationwide. Currently, the university has two campuses in the Chicago area – Lincoln Park and the Loop – and one campus located in the Chicago suburbs – O'Hare. The university is comprised of ten colleges and schools: Driehaus College of Business, College of Communication, College of Computing and Digital Media, College of Education, College of Law, College of Liberal Arts and Social Sciences, College of Science and Health, School of Music, School for New Learning and the Theatre School. Enrollment for the 2016-2017 academic year was above 23,000 students. The university offers nearly 300 undergraduate and graduate programs and had a student-to-faculty ratio of 16:1 in 2017.

The DePaul University Master of Public Health enrolled its first cohort of students in the fall of 2008. The program enrolled one cohort per academic year. Since its inception, the program has grown and diversified. An on-site MPH program was offered to Lurie Children's Hospital employees in 2014. In 2016, the program enrolled its first BS-MPH students, and in 2017, the program began accepting applications for its MBA-MPH program.

The program has been accredited since 2013. The initial accreditation in 2013 resulted in an accreditation term of five years. The program submitted interim reports in 2014 and 2016 and two substantive change notices.

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 DePaul University. DePaul University is accredited by the appropriate regional accrediting body, and the program and its faculty, staff and students have the same rights and prerogatives as those associated with other professional preparation programs at DePaul University. The program's faculty have partnered with faculty in other departments and centers to provide students with a multidisciplinary education. Faculty and staff also collaborate with local institutions to provide research and service opportunities for students.

The program is aligned with the mission, vision, goals and values of public health. The program has appropriate resources to provide the instructional programs and to support an environment with active programs of public health research and service. The program also has a developed system for planning and evaluation to ensure the program's continued relevance and applicability.

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 with commentary. The mission statement was initially developed in collaboration with key program stakeholders including university leaders, MPH faculty, community practitioner instructors, practicum site supervisors, alumni and public health curriculum experts. The program used a formative assessment system to gather feedback from stakeholders and align the feedback with accreditation criteria to develop the program's mission. The mission, values, goals and objectives were re-evaluated in 2013 with input from the MPH faculty and staff, community partners, practicum site supervisors and alumni. The revised statements were approved by external stakeholders and adopted by the MPH program in 2014. The mission statement is as follows:

The mission of the Master of Public Health program is to prepare dynamic public health leaders to work collaboratively with diverse communities to prevent disease and ill-health, prioritize and investigate health concerns, achieve lasting social change and foster health equity to promote the health and well-being of all people. The program's goals and objectives are designed to instill students with values that emphasize social justice, cultural humility, ethical public health practice, evidence-based instruction grounded in science and service to the community and profession.

The mission, values, goals and objectives are reviewed in two forums each year. They are shared at the program's annual meeting for stakeholders and at the annual retreat for MPH faculty and staff. In each of these forums, participants reviewed the statements to assure alignment with current practices and future directions. The guiding statements are also available for review online.

The program intends to attain its mission through three goals that emphasize instruction, research and service and defines measurable objectives with quantifiable indicators for each of the three goals. Objectives related to instruction focus on student performance, quality of instruction and practical and culminating experiences. Objectives related to research focus on research grants submitted, faculty participation in research projects, collaboration with community partners, student involvement in research and dissemination of research findings. Objectives related to service focus on faculty engagement in peer reviews, professional or community service and workforce development and student engagement in service through the Public Health Student Organization.

The commentary relates to the alignment between 1) the MPH vision statement and the mission statement and 2) the university goals and the program goals. The MPH vision statement focuses on preparing public health leaders for a changing urban landscape. The mission statement refers only to diverse communities and does not include an urban emphasis. University goal two targets a deeper connection to the city of

Chicago. This commitment to the city was reinforced when site visitors met with the provost. Site visitors also learned from current students that the MPH program is known for its emphasis on issues in the urban environment, particularly Chicago. However, the mission statement only reflects working with diverse communities, and neither it nor the program goals reflect an urban focus or the city of Chicago.

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. The program has defined data systems, timetables and responsible parties for evaluating its objectives. All instructional objectives are monitored annually; objectives related to the average cumulative GPA for the graduating class and faculty teaching effectiveness based on student evaluations are monitored quarterly. Instructional objectives related to student performance are based on data from the university registrar or capstone status reports and monitored by the program manager. Objectives related to quality of instruction are monitored by the program director or program manager and are based on data from the university registrar, university online evaluation reports, student self-assessment surveys and syllabi. Objectives related to the practical and culminating experiences are monitored by the director of community partnerships. These objectives are based on stakeholder meeting attendance records, student practicum evaluation surveys, site visitor practicum evaluation surveys and communications with the director of community partnerships.

Research objectives are monitored annually by the program manager and based on data from the annual faculty survey. Site visitors noted that the University's Office of Research Services is responsible for tracking grant activity and reports data to the college. Given the limitations to self-reported annual survey data, more accurate information on MPH grant activity would be assured by using the data provided by the University Office of Research Services.

All service objectives are monitored annually by the program manager. Objectives related to peer review, service and workforce development initiatives are based on the annual faculty survey. Data on the engagement of students in service activities is obtained from the Public Health Student Organization through direct contact with the organization.

Evaluation data are reviewed annually by the MPH administrative team. Issues of concern and changing priorities are discussed with the MPH Program Committee during the annual retreat, during which faculty and staff create work teams and timelines to address action items. The MPH Administrative Team oversees

the implementation of improvement initiatives and reports on progress during the monthly Program Committee meetings.

Programmatic changes based on evaluation data, such as changes in the capstone sequence and course rubrics, are shared with the appropriate faculty, staff and students, alumni and practicum supervisors. Major changes are also shared with external constituents at the annual Health Disparities and Social Justice Conference and the annual Stakeholders Meeting and are posted on the MPH website and the university catalog. Site visitors learned that the program welcomes feedback to enhance the program from external constituents, practicum site supervisors, alumni and students at these annual meetings and informally throughout the year.

The self-study process was led by the program manager; the timeline for the report was approved by the Administrative Team and shared with the faculty at a Program Committee meeting. During the annual retreat, faculty and staff developed an accreditation project plan that identified key tasks, responsible parties and due dates for writing the self-study. Progress on the self-study was discussed at the monthly Program Committee meetings. Community constituents who attended the annual Stakeholders Meeting reviewed the program's competencies and validated that they aligned with practice. Site visitors learned that students were involved in preparing the self-study and that draft documents were available for review during the process. Drafts incorporated feedback from CEPH staff, the dean of the College of Liberal Arts and Social Sciences and the university provost.

1.3 Institutional Environment.

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

This criterion is met. DePaul University is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools. The most recent accreditation review in 2017 resulted in an accreditation term that continues through 2027. DePaul is also accountable to the following accrediting bodies: the American Bar Association, the American Psychological Association, the Association to Advance Collegiate Schools of Business International, Commission on Collegiate Nursing Education, Council of Social Work Education, the National Association of Schools of Music and the National Association of Schools of Public Affairs and Administration.

The university has two campuses in the Chicago area – Lincoln Park and the Loop – and two campuses located in the suburbs – Naperville and O'Hare. The university is comprised of ten colleges and schools including Driehaus College of Business, College of Law and the Theater School. Enrollment for the 2016-2017 academic year was above 23,000 students; the university offered nearly 300 undergraduate and graduate programs and had a student-to-faculty ratio of 16:1.

The MPH program is positioned within the College of Liberal Arts and Social Sciences (LAS) which also houses programs including social work, international studies and comparative world literature. LAS is the largest and most diverse college within the university and is mainly housed on the Lincoln Park campus. The college offers degrees through 14 departments and has a strong social justice orientation. LAS was reorganized after submitting the self-study. On site, the LAS dean provided site visitors with an updated organizational chart. The MPH program is positioned within the graduate program “sandbox” in LAS. On site, the dean of LAS and the provost explained that the sandbox structure allows for greater interdisciplinary work between the MPH program and other programs, such as sustainable urban development.

The director of the MPH program reports to the associate dean of graduate programs with a dotted line to the dean of LAS. The associate dean reports to the dean of LAS, who reports to the provost, who reports to the president. The president reports to the Board of Trustees, who report to Members of the Corporation.

DePaul offers a bachelor’s program in health sciences with a concentration in public health, housed in the College of Science and Health (CSH)’s Health Sciences Department. This degree is not included in the unit of accreditation, though some faculty members have responsibilities in both programs of study.

The program director is responsible for developing budget requests with the program manager and submits requests to the associate dean of graduate programs and the LAS dean. The dean prioritizes the requests and submits them to the university for additional review. Once the university makes its decision, the MPH program receives its budget, and the program director and program manager develop an internal budget.

For faculty recruitment, the program director and associate dean of graduate programs submit requests to the LAS dean, who proposes requests to the provost. Once a request is approved, a search committee conducts an extensive review. The personnel committee members cast votes to determine the candidate of choice and the program director makes the recommendation to the dean. The dean makes decisions for full-time faculty, while the program director makes decisions for adjunct faculty. The tenure and promotion process include multiple reviews and reports. The program director conducts performance reviews annually with primary faculty and staff. For tenure or promotion, the Personnel Committee and program director review documentation and write separate reports, which proceed to the dean and university levels.

All academic standards and policy decisions are made by the Program Committee with LAS and university oversight.

New graduate curricula and course modifications proceed through review processes by the College Committee on Curriculum Planning in LAS, the university’s Committee on Curriculum Planning and the

university Faculty Council. The provost gives the final approval before implementation. The Program Committee sets program admissions standards, which are implemented by the Admissions Committee.

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 MPH program director, who reports to the Dean of the College of Liberal Arts and Social Sciences, oversees the program and develops the strategic direction in collaboration with university leadership. The MPH program manager reports to the program director, and both oversee the operating budget, admissions, and accreditation and are supported by graduate student assistants. The director of community partnerships oversees activities related to the required practicum, including recruitment and evaluation of sites and support to students in preparation for and during the practicum experience. These three individuals also serve as primary faculty, along with three other primary faculty.

Five secondary faculty teaching in the program work within other branches of DePaul, including the College of Science and Health and the College of Business or are affiliated with other institutions. These faculty support the MPH program through service on the MPH Program Committee and participation in undergraduate and graduate student recruitment, in addition to contributing interdisciplinary perspectives to student teaching. Other important collaborations described during the site visit include connections with the GIS certificate program, business programs, the women and gender studies program and the Health Sciences Department. In addition, a university-wide "Health Group" serves as a consortium of all health-related programs at DePaul and is an important forum for cross-promotion of academic, research and employment opportunities. Several faculty discussed the benefits of courses with students from different disciplines leading to richer discussions of cases and preparing students for employment in large organizations where the public health perspective is one of many.

The program is closely connected to the university's Center for Community Health Equity (CCHE). CCHE is physically housed within the MPH program suite, and its co-director is a program faculty member. This structure provides opportunities for students to participate in community-based research projects and service projects designed to eliminate health disparities. In addition, the program's participation in DePaul's Consortium for Health Initiatives provides additional opportunities for interdisciplinary research and projects.

During the site visit, the dean of LAS shared a new organizational chart developed following a retreat in which faculty expressed a desire to better integrate college resources and allow for more collaborative teaching. One of several resulting structures within LAS, the Division of Urban Studies, allows for resource

sharing among programs with high affinity. For instance, the creation of a new criminology program within the Division of Urban Studies allows MPH and criminology faculty to collaborate on the topic of substance use. Other programs within the Division of Urban Studies include Public Service and Social Work, which also provide opportunities for interdisciplinary project-based learning in preparation for the type of work MPH graduates are likely to seek upon graduation.

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. There are multiple committees and groups that participate in the program's governance. All program faculty participate on the committees and are actively engaged. A student representative participates on two of the eight committees. The Program Committee is made up of primary faculty, affiliated faculty from other academic units, staff and a student representative. The student representative is elected by his or her cohort members. This committee is responsible for overseeing any issues related to accreditation, admissions, governance and policy, workforce development, curriculum, capstone, practicum, assessment and student concerns.

The Administrative Team consists of the program director and all professional staff and oversees the day-to-day administrative activities of the program including college and university administrative tasks, student issues and budget management. The team meets a minimum of twice per month and makes decisions via email when necessary.

The Assessment Committee coordinates the annual assessment project required by LAS. This committee also consists of the program director and professional staff and determines an assessment topic with input from the Program Committee, collects information, conducts analyses and prepares and submits the report. This committee meets quarterly.

The Capstone Committee, consisting of the program director, the director of community partnerships, and three faculty members, oversees the integrated capstone and practicum portion of the curriculum. Members review the curriculum and make recommendations for improvement. This committee meets quarterly.

The Capstone Review Committee, consisting of at least three faculty members, reviews student capstones. The director of community partnerships is responsible for coordinating the meeting, during which committee members review capstones, vote and issue decision letters to students. This committee meets twice during the spring quarter of each academic year.

The Admissions Committee, consisting of the program director and professional staff, is responsible for admissions, reviewing applications and assisting the Administrative Team with admissions-related events. This committee meets twice during the admissions cycle of each year.

The Workforce Development Committee coordinates all workforce development activities. The program director, professional staff, faculty members and a student representative make up this committee.

The Personnel Committee oversees all hiring, promotion and tenure. Only tenure-line faculty can participate on this committee. If there are not enough members, tenure-line faculty from other departments and programs can participate with the LAS dean's approval.

The program also has a group of Advisory Members composed of faculty members from other academic units, adjunct faculty, community partners and alumni. This group fulfills program functions including serving as judges at the annual poster forum, strategic planning and completing the stakeholder survey.

In terms of governance, the Administrative Team conducts policy development with input from the Program Committee. The program director and program manager attend LAS meetings to stay up to date with all programmatic and policy-related updates at the college level. All program policy updates made are shared at the next Program Committee meeting.

Program planning is conducted by the Program Committee, the Administrative Committee and the Capstone Committee, while program evaluation is conducted by the Program Committee and the Assessment Committee. Each year, the program commits to a few large-scale planning and evaluation projects during its summer retreat and conducts an assessment for LAS.

The Program Committee serves an advisory role to the program director regarding budget.

The Administrative Team works with LAS representatives from the Office of Enrollment Management and Marketing to develop a student recruitment strategy for upcoming admissions cycles. The Admissions Committee reviews and evaluates all applications and provide scores to the program director and program manager.

The program works with the university registrar for the awarding of degrees. The registrar confers with the program manager to determine whether or not all degree requirements were met and which students should graduate with distinction.

Program Committee members participate in full-time faculty recruitments, while the Personnel Committee (tenure-line faculty only) determine the candidates to interview and vote on hiring decisions. The Personnel Committee and program director review candidate documentation and write reports that the LAS dean uses to make tenure and promotion decisions.

Program faculty participate in developing academic policy changes at the program level. The Administrative Team identifies proposed policy changes and brings them to the Program Committee. The program director initiates the policy change process.

Research and service expectations and policies are outlined in the program's Criteria for Tenure and Promotion and in the university Faculty Handbook for full-time tenure-line faculty. For non-tenure-line faculty, research and service expectations are articulated in individual contracts, the Contingent Faculty Document and the university Faculty Handbook.

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. Table 1 presents the program's budget. The annual budget and fund allocation process at DePaul is a university-wide undertaking that begins in the fall and is overseen by a nine-member Strategic Resource Allocation Committee (SRAC) appointed by the president that reviews requests from the university's three executive branches. The MPH budget is negotiated under the executive branch responsible for the academic units within academic affairs that report to the provost. Developing the executive branch budget is a multi-stage process facilitated by PeopleSoft Financials. The budget office in LAS solicits requests from the MPH program. The budget office reviews requests in light of prior years' spending, cost share requests and the university's strategic plan. The dean prioritizes all college-level requests and submits them to the provost. The SRAC recommends a draft budget for consideration to the president. The budget proposal supported by the president is submitted to the university Finance Committee for review and endorsement and then presented to the Board of Trustees for review and decision. Endorsed budgets are finalized in the early spring. The university's fiscal year runs from July 1st through June 30th. After the MPH program receives its budget, the program director, in consultation with the MPH program manager and faculty, determines an internal budget allocation plan for the upcoming year.

Indirect cost recovery is based on university policies, and indirect costs are retained at the university level. Residual balances from grants and contracts are handled based on university policies and are transferred to discretionary accounts assigned to principal investigators and available for three years. Gifts and donations follow the university's gift acceptance and processing policy.

The MPH program budget is limited to operating expenses; the university budget includes line items for tuition revenue, salary and benefits for the MPH program. Operating expenses have doubled over the past five years. All MPH faculty who present at conferences or have major roles in conferences and request funding for travel have been fully funded. The program requested five administrative positions to support the MPH: program director, program manager, director of community partnerships and two student assistants, and all were approved and are funded. All planned community partner engagement events and workforce development initiatives have been funded, including the Health Disparities and Social Justice Conference, the annual stakeholders meeting, the Public Health Boot Camp and an APHA reception. Operating expenses are adequate to maintain the program at its current size but do not currently accommodate growth.

	FY 13	FY 14	FY 15	FY 16	FY 17
Source of Funds					
<i>University Funds</i>	\$24,705	\$40,114	\$47,940	\$46,225	\$51,273
Expenditures					
<i>Operating Expenses¹</i>	\$7,455	\$12,455	\$9,386	\$7,796	\$15,049
<i>Conference Travel</i>	\$11,753	\$19,459	\$18,528	\$18,126	\$17,607
<i>Program Dues/Fees</i>	\$630	\$1,304	\$1,000	\$4,121	\$6,463
<i>Events/Entertainment</i>	\$4,150	\$5,232	\$13,178	\$9,045	\$11,937
<i>Other</i>	\$389	\$1,682	\$5,971	\$6,583	\$212
Total	\$24,377	\$40,131	\$48,062	\$45,671	\$51,268
Net	\$328	\$(17)	\$(122)	\$554	\$5

¹Operating expenses include supply orders, telephone charges, mail charges, copy machine charges, business cards and stationary, etc.

Site visitors learned that the university is embarking on a new strategic plan, and this may shift budgetary priorities. When meeting with the dean and provost, visitors learned that the university's strategic planning process is prioritizing serving the people of the city of Chicago. The plan considers health programs, including the MPH, as a major avenue to achieving this end, and prioritizes continued support and appropriate growth. Visitors also learned that the university is working to increase multidisciplinary programs, such as the MPH, and wants to support and increase these programs. The faculty of LAS held a retreat last October that resulted in the restructuring of the college to increase multidisciplinary opportunities, enhance problem-based learning in the Chicago community, share faculty across programs and increase administrative efficiencies. Site visitors learned from the provost that enrollment in these multidisciplinary programs and courses, including MPH offerings, are expected to increase and that additional faculty will be needed to support this growth.

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. The MPH program has six primary faculty, three affiliated faculty and two adjunct faculty engaged in the program. The student faculty ratio by primary faculty FTE is 7.74 and has been under ten for the last three years. The student faculty ratio for total faculty FTE is 5.74 and has not exceeded 7.14 in the past three years.

The MPH program has two primary faculty who dedicate 50% of their time to the program's administration. The program manager/instructor is involved in accreditation, workforce development, budget monitoring and administration. The director of community partnerships/instructor is responsible for community partner engagement and public events and serves as a member of the MPH Administrative Team.

The MPH program is located in DePaul's Loop campus. It is housed in a dedicated secure suite that is accessible by identification swipe access. It includes private offices for faculty and staff, an office for the student program assistants, an office for graduate assistants, a conference room, a common space and storage. Site visitors noted that it is a welcoming environment that facilitates collegial engagement among faculty, students, preceptors, alumni and other visitors. The MPH program does not have dedicated classrooms; space is allocated through the campus classroom reservation system. All Loop campus classrooms utilize state-of-the-art technology. Laboratory space is not needed for the program.

All full-time faculty and staff have up-to-date computers that are refreshed every three to four years. Computers are available to students across the campus; over 1000 PCs and Macs are accessible in numerous computer labs, lounges and lobbies. The Loop campus includes six computer labs, and the Lincoln Park campus includes seven computer labs. All university computers are equipped with appropriate software including SPSS. Over 400 technology-enabled classrooms are outfitted with resources that include desktop computers, LCD projectors, an audience response system and connections for laptops and integrated sound systems. Specialty rooms exist across the campus and are available for classes with additional technology needs.

The college includes the Social Science Research Center (SSRC), located on the Lincoln Park campus, which is easily accessible to faculty, staff and students involved in behavioral and social science research. SSRC provides access to data repositories, software, data archiving tools and software/data management tools. It offers technical assistance for research development and implementation and support for obtaining external funding. The SSRC also provides customized capacity-building training, workshops and seminars in conference rooms and computer laboratories that are reserved for these purposes. Site visitors learned from faculty that the SSRC has been instrumental in facilitating research projects at all levels and stages.

One of the program's primary faculty members highlighted how the staff supported her development of a novel Photovoice qualitative study focusing on harm reduction.

The DePaul University Libraries provide online full-text access to over 47,000 journals, 1,500 of which relate directly to the health sciences. Its collection of over 800,000 volumes includes a robust monograph collection in public health and related fields. Most of the public health collection resides in the John T. Richardson Library on the Lincoln Park campus. The DePaul Loop Library is across the street from the MPH program office. Students, faculty and staff have library borrowing privileges through the I-Share network of the Consortium of Academic and Research Libraries in Illinois and the ILLIAD Inter-Library Loan system. Librarians provide services and guidance 24/7, and a dedicated MPH program subject liaison is also available. The liaison maintains an updated public health research guide and lectures to all incoming MPH students in *MPH 600 Preparation for Public Health Practice* on the library system and how to navigate databases commonly used in the MPH program. Students nearing the end of their studies shared examples with the site visitors of how the liaison's careful instruction improved their research skills. They explained that this instruction has facilitated their success in the practicum and capstone courses.

Students and faculty have access to additional electronic resources including Campus Connect and Desire to Learn (D2L). Campus Connect provides access to the course catalog, registration services, advising and financial services. D2L provides instructors with an online platform to create course websites; post syllabi, assignments, readings, quizzes and grades; to collect material in an electronic dropbox; and to facilitate discussion.

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 met with commentary. As a university, DePaul has highlighted its commitment to both serve and reflect the greater Chicago community. Diversity is a central component of the university's vision statement, and conversations about the benefits of diversity were initiated by students, faculty and leaders throughout the site visit. DePaul's strategic plan includes specific goals to foster diversity and inclusion throughout the university, including goals to recruit and retain a more diverse faculty, staff and student body. A commitment to diversity is further reflected in the MPH program's mission statement, which establishes a goal of preparing public health leaders to work collaboratively with diverse communities and to foster health equity, and in its values statement, which reflects social justice and cultural humility. This emphasis on diversity is highlighted in informational materials about the program developed for prospective students. The program used data to identify groups with poor health outcomes and as a result has identified racial/ethnic minorities and LGBTQ persons as underrepresented populations to be supported through its diversity initiatives.

On a university level, policies on employment and conduct prohibit harassment and discrimination and promote equal opportunity. These policies are reinforced within the MPH program throughout the student handbook and in required annual training for all program faculty and staff. MPH course syllabi demonstrate that diversity is introduced immediately in the Introduction to Public Health course, and that concepts of equity, inclusion and cultural humility are interwoven throughout the curriculum. Practicum sites are selected to ensure that students have the opportunity to work with underrepresented populations. Research conducted by program faculty provides numerous opportunities for students to participate in projects serving underrepresented populations. The program also takes advantage of its relationship with the CCHE to sponsor events and guest lectures that expose students to diverse perspectives from those engaged in community health projects outside of the university's walls.

The program coordinates advertising for its staff and faculty positions with the university's Office of Institutional Diversity and Equity, which distributes job postings to venues likely to reach underrepresented populations. During the screening and selection process, applicants are evaluated with respect to how they complement and balance existing faculty and staff. Throughout each level of the selection process, a diverse group of students and faculty participate in interviews and provide input, to ensure that the list of final candidates presented to the provost reflects the diversity of the initial applicant pool.

Although this process has resulted in some success in ensuring diversity with respect to minority and LGBTQ representation, program staff and faculty are small in number, and diversity targets have not been consistently met. For 2016-17, racial/ethnic minorities comprised 27% of program faculty/staff, with a target of 40%. Twenty-two percent of faculty/staff identified as LGBTQ, exceeding the target of 5%. To assist with identifying strategies to increase diversity within its faculty and staff, the program has enhanced its collection of data through incorporating diversity questions into its annual surveys. In addition, increasing staff and faculty diversity will be a focus of a strategic planning session scheduled for 2019.

The university draws most of its student applicants from the highly diverse greater Chicago area and endeavors to enroll a student body that mirrors the racial and ethnic composition of the city. However, student data reflects that targets for racial/ethnic minorities were met in only one of the past three years. In the most recent year reported, minority students comprised 37% of the student body, short of the 40% target. Students identifying as LGBTQ comprised 11% of the student population, exceeding the target of 5%. The university has a Center for Access and Attainment that administers programs to support low-income, first generation and students of color; however, these services are targeted primarily to undergraduates. The program does offer a "Double Demon discount" to make the program more affordable to students who completed undergraduate work at DePaul and also awards two graduate research assistantships to students in need of financial support. There is no other internal financial aid available to

assist low-income students with the cost of attendance. The program will be evaluating how changes to its recruitment and admissions strategies can increase diversity within the student body.

The commentary pertains to the need for additional progress in recruiting and retaining priority groups in faculty and staff positions and in the student body to meet the program's own aspirations.

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. Information about the program, degrees, degree requirements and faculty are located in the DePaul University Catalog, which is updated twice a year. Information for the standalone MPH and BS-MPH can be found on the public health landing page under LAS departments. BS-MPH degree requirement information is also available on the website under the Health Science Department's website. Program information and degree requirements for the MBA-MPH joint degree are located on the College of Business and the LAS webpages.

Table 2. Degree offerings		
Degree Program	Academic	Professional
<i>Master's Degrees</i>		
Community Health Practice		MPH
<i>Joint Degrees</i>		
DePaul Bachelor's Degree		BS/MPH
Business		MBA/MPH

Beyond the five core knowledge areas (biostatistics, epidemiology, environmental health sciences, social and behavioral sciences and health service administration) and the practice and capstone requirements, students are required to take the following classes for the community health practice concentration:

- MPH 512: Research Methods
- MPH 522: Program Planning and Grant Writing
- MPH 525: Program Evaluation
- MPH 600 Preparation for Public Health Practice
- MPH 602: Community Health Assessment
- MPH 603: Community Health Project Design
- MPH 604: Capstone Seminar in Community Public Health

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 DePaul MPH program requires students to complete 56 quarter credit hours. All courses offered in the MPH program are four credit hours. Each four-credit course requires 30 classroom/contact hours over the 10-week quarter, excluding finals week.

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. The five public health core areas are addressed through five separate courses consisting of four credit hours each for a total of 20 credit hours. Those five courses are listed in Table 3.

Biostatistics	MPH 541: Biostatistics
Epidemiology	MPH 502: Introduction to Epidemiology
Environmental Health Sciences	MPH 503: Introduction to Environmental Health
Social & Behavioral Sciences	MPH 511: Health Behavior Theory
Health Services Administration	MPH 513: Public Health Administration

Syllabi for required coursework show that these courses are structured to ensure that students will achieve fundamental competence in public health core knowledge areas. Site visitors reviewed the syllabi for the core courses and determined that the courses appropriately address the five core areas. Syllabi for elective courses show reinforcement of core knowledge throughout the curriculum.

The program does not permit waivers or transfer credits as substitutes for these core courses. However, students in the MBA-MPH program do take an alternative course to satisfy the biostatistics requirement, GSB 420: Applied Quantitative Analysis. A review of the learning objectives and competencies for these two courses demonstrates that both courses will provide public health professionals with the analytical skills needed to practice public health.

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. All students are required to complete a nine-month practicum (a minimum of 250 hours) in their final year of study. The purpose of the practicum is to provide students with an opportunity to develop their professional competencies in a community practice setting. The practicum requirement is not waived or altered.

Strong structures are in place to support the success of the practicum experience. The program's director of community partnerships works with students in December of the year prior to their placements to identify interests and potential agency placements; conducts annual site visits to each practicum site to ensure adequate space, resources and supervision; orients and evaluates preceptors; and provides ongoing support to students and practicum site staff as needed. A comprehensive Practicum Manual defines the schedule, structure, policies, prerequisites and work product requirements of the practicum; it also includes the required learning agreement and student and preceptor evaluation forms. Students are required to complete a year-long course entitled Preparation for Public Health Practice before being placed in a practicum.

In addition to quarterly evaluations of student performance and practicum sites, the program has expanded opportunities for stakeholders to receive support and provide feedback about the practicum experience. The program hosts an annual stakeholder meeting to solicit feedback from practicum sites and will be instituting a site supervisor panel at the annual Health Disparities and Social Justice Conference.

Formal processes, including the use of a site eligibility screening form, are in place to ensure that a diversity of sites are available to students. A review of student placements from the past two years shows a mix of structures (community non-profit, local government, state government, academic, hospital), skill sets (community outreach, epidemiology, health education, and program evaluation) and topic areas (school health, reproductive health, substance use prevention, obesity, violence prevention) are available to match to student areas of interest. In addition, many of the community placements involve work with disadvantaged populations, such as refugees, LGBTQ individuals, persons of color and low-income residents.

Preceptors provide feedback to the program about the development of a student's skills and level of professionalism during the practicum experience. Students' attainment of core competencies through the practicum is evaluated during the capstone process. A review of preceptor evaluations of students demonstrates that, overall, practicum sites find DePaul students to be well-prepared to contribute to their agencies' work.

Student evaluations of the practicum sites demonstrate that, overall, students find their placements to be valuable experience in preparation for their entry into professional public health practice.

Students and preceptors both cite the nine-month length of the practicum as being beneficial in a number of respects. The length of the commitment allows students to observe the breadth of work undertaken in a community agency. It also allows students to undertake work of increasing responsibility and complexity in concert with advances in their coursework during the year. Preceptors find the eight to ten-hour work week

to be more manageable than a shorter term, higher intensity experience. Students believe the competitive nature of the practicum matching process prepares them for the employment search when they graduate. Several students stated that the director of community partnerships actively solicited new practicum sites to address a particular interest and to keep opportunities fresh.

Meetings with alumni, students currently in the practicum and preceptors demonstrated that the quality of the practicum experience, with its formal yet flexible structure and dedicated staff resources, is one of the major strengths of the DePaul MPH program. Participants talked about the benefits of face-to-face meetings as critical to ensuring that student and preceptor expectations for the experience were in alignment. Some preceptors expressed the desire that students would enter prepared with basic skills in commonly used programs such as Excel, which is not currently part of the academic experience. Some preceptors also expressed the need to have more communication about the academic course sequence so they could help identify appropriate projects in alignment with skills completed during a student's coursework. A number of students and preceptors were able to cite instances where a student was hired by the practicum site upon completion of the program.

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 met. All students complete a three-course capstone sequence that is concurrent with the practicum experience, takes place during the final three quarters of the program, is taught by primary faculty and culminates in a capstone thesis that is a requirement for graduation. The capstone guidelines and grading rubric are discussed with students during open houses, at orientation, in prerequisite classes and are available online in the student handbook. Students are welcome to meet with the director of community partnerships to answer any questions they may have about the capstone throughout the program.

The ten MPH program competencies provide the foundation for the capstone, which is designed to demonstrate student's mastery of essential public health knowledge and skills acquired throughout the program and the application of knowledge and skills in academic and community settings. Site visitors learned that students work closely with their instructors to assure that they are meeting the requirements of the capstone and following the rubric. Each capstone thesis is presented to the Capstone Review Committee, which includes the program director, the director of community partnerships and faculty members, for review and approval. Students may receive a notice of "distinction" if they meet the rubric criteria for distinction—95% or higher. Site visitors learned that the very small percentage of students who do not receive a passing grade work with the director of community partnerships and their final capstone sequence course instructor to develop and complete a remediation plan, which in most cases allows them to graduate as planned.

The capstone sequence begins with *MPH 602: Community Health Assessment*, in which students obtain and synthesize data pertaining to their practicum agency and the community it serves. This work serves as the preliminary chapters of the academic capstone. *MPH 603: Community Health Project Design* follows, and students assess and incorporate findings from MPH 602 to plan a project that meets the needs of the community served by their practicum agency. This work is synthesized into additional capstone chapters. *MPH 604: Capstone Seminar in Community Public Health* is the final course in the sequence. Students assess outcomes from their practicum project in a broader public health context. This work serves as the final chapters of the academic capstone thesis document, which is reviewed for approval by a minimum of two members of the Capstone Review Committee. Site visitors reviewed examples of theses that demonstrated the rigor and competency achievement outlined in the guidelines.

In the final quarter, students also prepare a formal poster presentation for the annual MPH Graduate Public Health Forum. DePaul faculty, staff and students, community partners, preceptors, guests and the general public attend. Student posters are assessed in competition for the Award for Excellence in Community Health by a panel of at least three judges who are trained public health professionals from outside the MPH program, including one judge who is a practitioner outside of academia. Site visitors learned that this is a very meaningful end to the program and prepares the graduating class for future scholarly presentations at professional conferences such as APHA.

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 a set of 10 competencies that address the public health core and the concentration. The competencies range from lower-level (“Understand the organizational context of public health service delivery”) to more advanced skills (“Translate public health findings into policy and advocacy recommendations.”) The self-study documents the mapping of the competencies to the 14 required courses, indicating where competencies receive introductory or reinforcing coverage. The concentration competencies also range from lower-level skills (“Work in a culturally and contextually responsive manner with diverse populations”) to more advanced skills (“Design, implement, and evaluate public health initiatives designed to bring about improved health.”)

The competencies are developed and revised by the MPH Program Committee. Each of the competencies is broken out into indicators with associated course objectives. Each competency has between four and seven indicators. The course objectives are listed on the applicable course syllabi, though they are different

from the course objectives listed with the indicators. The program uses the competencies, also known as learning objectives, to evaluate whether or not students obtain necessary knowledge and skills from their courses, practicum and culminating learning experience. During the most recent summer retreat, faculty began updating the syllabi to reflect the 2016 criteria. Because of this, 2016-17 syllabi do not reflect the 2011 competencies listed in the self-study. Students who met with site visitors indicated that they knew which competencies on which they were being assessed and felt that they were attaining them throughout the program.

Prospective students are exposed to competencies during admissions events. Admitted students learn more about the competencies and learning objectives during orientation. Incoming students complete a self-assessment to see how confident they feel. Students complete the same self-assessment in the spring quarter of their first and second year coursework. The program manager analyzes the data to determine perceived gains students make towards attainment of knowledge and skills. The learning objectives are reviewed for each course during the discussion of the syllabus and during the practicum.

The original competencies were developed at the program's inception in 2008. Since then, they have been reviewed every two to three years: 2010, 2013 and 2016. Faculty review competencies for alignment to learning objectives and propose minor changes, which are discussed at retreats and finalized prior to the start of the next academic year. Once the competencies are approved internally, the program engages external stakeholders. The stakeholders are asked to rate the updated competencies based on importance to public health practice.

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 in multiple ways. Students are assessed based on coursework performance, grade point average (GPA), practicum performance, culminating experience performance and competency/indicator self-assessments. For coursework performance, students are assessed based on the learning objectives, which are tied to the competencies. Assessment tools such as exams and overall course grades are utilized to determine if learning objectives were met. For GPA, students are required to have at least a 3.0 out of 4.0 GPA. Each student's GPA is reviewed quarterly by the program director and program manager.

For practicum performance, students and site supervisors complete a learning agreement, which includes competencies to be attained through the experience. Students assess competency attainment through a critical reflection. Site supervisors assess competency attainment through quarterly and final student evaluations.

For the culminating experience performance, the Capstone Review Committee utilizes a standardized rubric to grade each student's final capstone thesis, and a panel of at least three judges scores each student's capstone poster presentation. Students who require remediation have five days to address the concerns stated in the letter and resubmit their thesis. While the rubric does not list specific competencies, faculty clarified that competency assessment occurs more explicitly through the incremental assignments during the 600 level courses, while the students are developing and writing their capstone thesis projects.

Finally, students assess their own competency attainment three times throughout their time in the MPH program.

The program also uses graduation and employment rates to evaluate student achievement. The program reports graduation rates above the 70% threshold for the last four years, which is the maximum number of years for program completion. The program reported that 95% of students graduated from the 2013-14 cohort, 83% from the 2014-15 cohort and 83% from the 2015-16 cohort.

The program collects employment information via an alumni survey. The survey is sent out electronically to alumni every December. The program reported a response rate of 55.7% for 2014, 59.3% for 2015 and 44% for 2016. Of the alumni who responded the survey in the last three years, at least 96% were employed.

The program does not require completion of national examinations for degree completion but has tracked the pass rate for students who elected to take an exam. No student took the CPH exam, but a total of six students have taken the CHES from 2014-16. Both 2014 and 2016 had a 100% pass rate, and 2015 had a 67% pass rate.

In addition to employment rates, the alumni survey also captures graduates' perception of whether or not the program prepared them for careers in public health. The program reports that 15% of the graduates who responded believed that they were "very much prepared;" 50% believed that they were "quite a bit prepared;" and 19% felt they were "somewhat prepared."

The program had not made an effort prior to the 2016-17 academic year to survey employers regarding their perceptions of alumni. During the 2016-17 academic year, the Administrative Team and the Program Committee developed an anonymous online survey to assess employer perceptions of alumni's ability to perform the program's core competencies and their proficiency with professional skills. Program alumni were sent an email with the link to the survey and instructions to forward the survey to their employer. Seventeen current employers of DePaul MPH alumni responded to the survey (12% response rate). Of the 17 employers who responded, 88% were very satisfied with their employees' job performance, 6% were satisfied and 6% were neutral.

The concern relates to a 40-50% unknown rate for the alumni survey, which means that the program's data do not accurately reflect the rates of post-graduation outcomes, including employment or enrollment in additional education. During the site visit, the program indicated that they plan to utilize LinkedIn to connect with more alumni and assemble more complete information on post-graduation outcomes. This process will start with the upcoming graduating class.

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 with commentary. The program currently offers two joint degrees: a BS/MPH and an MBA/MPH. The BS/MPH track has had three students enroll in the last three years, and the MBA/MPH has had no students enroll since its establishment in the 2016-17 academic year. On site, program staff said that the lack of enrollment was due to fewer applicants for joint degree programs in general across the university. The program plans to start marketing more heavily to MBA students and to hold events to bring attention to the joint degree offering.

The BS/MPH students meet the same curricular, practicum and experiential learning requirements as other MPH students. Interested students apply in their third year of their undergraduate career and must meet the MPH admission requirements. Accepted students start taking MPH courses in addition to their undergraduate courses in their fourth year. Five MPH courses count towards the BS: Introduction to Public Health, Introduction to Epidemiology, Health Behavior Theory, Public Health Ethics and Policy and Biostatistics. This credit sharing allows students to complete the joint degree in five years.

The MBA/MPH students must meet admission requirements for both the MBA and the MPH program. These students have the same culminating experience as traditional MPH students. The dual degree is a total of 88 credit hours, with 52 credit hours from the MBA program and 36 credit hours from the MPH program. Five courses from the MBA program count toward the MPH program. Three of these courses substitute for required MPH courses, and the other two courses substitute for MPH electives:

- ECO 555: Economics for Decision Making substitutes for MPH 525: Program Evaluation
- GSB 420: Applied Quantitative Analysis substitutes for MPH 541: Biostatistics
- MGT 559: Health Sector Management substitutes for MPH 513: Public Health Administration.
- MGT 566: Health Insurance & Benefits serves as an MPH elective.
- For the second elective, students choose between MGT 508: Quality Management Systems, MGT 510: Technology, Quality, & Health Informatics, MGT 545: Managing Service Operations or MGT 564: Streets of Chicago, Healthcare Management.

The self-study states that all MBA courses that substitute the MPH courses are aligned with the 10 competencies. The program also determined that all MPH courses being removed were not solely responsible for introducing or reinforcing the competencies.

The commentary relates to the credit sharing for the MBA/MPH joint degree. Economics for decision making (ECO 555), the substitute course for the required MPH course in program evaluation (MPH 525), does not illustrate clear links to concepts of program evaluation, although it can be loosely linked to program planning. During the site visit, faculty described their mapping process for ensuring that students in the joint degree program receive an equivalent depth of public health knowledge. The required MPH 525 course, which joint degree students do not take, reinforces five program competencies and introduces one. The reinforced competencies include the following: Apply public health methods and concepts to describe the occurrence and distribution of health outcomes and apply ethical approaches to public health practice. The substituted ECO 555 course plainly does not address these competencies. Faculty from the business school were able to articulate skills and principles that are shared by program evaluation and the economics class, such as using evidence for decision making, but these are very general skills not presented in a public health context. The program contends that since the five reinforced and one introduced competency covered by MPH 525 are also covered elsewhere, students in the combined degree program are getting those competencies in other required courses---they are, however, getting a reduced number of exposures to the six competencies. When asked specifically why the economics of decision making class is equivalent to the program evaluation class, faculty stated that the decision-making aspect of the class is comparable to program evaluation, specifically about making comparisons to determine allocation of resources.

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.

Not applicable.

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. Research is integral to the mission of DePaul and a requirement for faculty advancement. It is supported by a variety of fellowships, awards, stipends and internal grant programs within the university, and resources, such as SSRC, to assist faculty in applying for external grants are readily available. Three primary faculty and three affiliated faculty are engaged in funded research. Total funding for AY 2015 was \$105,816, for AY 2016 was \$37,173 and for AY 2017 was \$204,418. Primary faculty research is supported by internal competitive grant funding programs available to all DePaul faculty. For the past three academic years, this internal funding totaled \$28,000, \$17,700 and \$25,000 respectively. Affiliated faculty received funding from a combination of internal and external sources. External grants included one federal grant funded by the National Institute on Drug Abuse, one funded by the University of Michigan and two funded by private organizations—the Educational Development Center and the Sprague Institute.

Research interests of the faculty are varied and include studies related to cannabis use among young men living with HIV/AIDS, injection drug users, community needs assessment in Chicago, cardiovascular disease risk reduction, environmental health, global tobacco use, global strategies for addressing HIV/AIDS, research methods, service learning outcomes and curriculum development. Two primary faculty are engaged in funded community-based research. One primary faculty member is studying community-based Photovoice with individuals who inject drugs and needle exchange programs and another is involved in community health fairs to test and map soil and water and educate the community on lead exposure. Two affiliated faculty are also involved in community-based research. One individual is studying patient and provider perspectives on cannabis use and another is studying the development and validation of the index of concentration at the extremes (ICE) for Chicago.

All primary faculty, whether tenure-track or not, expressed their interest in research and pursuing avenues to facilitate their agendas. Site visitors learned that the faculty readily collaborate with one another and are aware of each other's interests and support them. One faculty summed up the group's work by saying that they saw themselves as teacher-scholars and noted that the work was hard but the faculty would not trade it for anything else.

Students have opportunities to be engaged in funded research; of the 22 funded projects, seven involve MPH students and eight involve students from across the university. All of the currently funded community-based projects involve students in the research. Site visitors learned that students are also engaged in a

variety of non-funded research projects, through independent studies, graduate assistantships and other informal opportunities to work with faculty and be included on their writing teams. Several alumni noted that they continue to work on faculty projects that have resulted in publications.

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 members are expected to provide professional and community service to advance public health practice; this service is one of the three criteria that is considered in decisions of promotion and tenure. The program describes potential service activities such as reviewing manuscripts and grant proposals; assisting with program evaluation for community-based partners; providing technical assistance; and serving on executive boards of national organizations, and the program has also developed specific outcome measures to evaluate fulfillment of its service goals.

The self-study provides detail of recent service activities, demonstrating that all faculty, with the exception of the director of community partnerships, provide service to local, state or national organizations. The self-study indicates that faculty are generally meeting targets for service. Of the 42 listed service activities, over half were related to peer review of journal articles. Nine of the activities involved a partnership with a local agency, three of which were in leadership roles. One of the faculty volunteers on a weekly basis with an agency providing substance abuse prevention services. Other faculty cite service opportunities that arise sporadically, such as helping an agency develop a logic model or a survey instrument.

Students in the program are provided with opportunities for service through the Public Health Student Organization (PHSO). Students provide service to the external community through events such as food drives, coat drives and park clean up days and internally through assistance with logistics at program conferences and prospective student recruitment events. Students also have service learning opportunities, including a recent environmental health project that had students collect water and soil samples to be analyzed for lead content and provided the opportunity to discuss hazard reduction. A review of minutes from PHSO meetings confirms that service is a focus of that group, which provided seven service opportunities in the most recent year, exceeding the target of three or more service opportunities for students per year.

The first area of commentary pertains to the lack of structural supports for ensuring that faculty participate in community service activities. Such activities are encouraged, but there is no accountability structure as there is for intramural service. A review of the promotion and tenure guidelines shows that “While service to professional communities outside DePaul is respected and encouraged, review for tenure and promotion places primary emphasis on internal contributions to the university.” Such internal activities are not

considered to fulfill CEPH's requirements for this criterion. Faculty have a robust level of service participation, but university guidelines do not consistently recognize and reward these activities. Tenure guidelines demonstrate that external reviewers participate in assessing the teaching and research contributions of tenured faculty but not their service contributions. Use of external reviewers may be useful to assess the quality of faculty service contributions to local agencies.

Additional commentary pertains to the need to better track and manage information on students participating in service activities. The program is able to document that opportunities are provided, but information on how many students participate is not available. The program may also consider providing additional opportunities for student service at practice organizations in the community. Students recounted volunteer activities at community agencies that they undertake on their own, not organized by PHSO; these activities could be tracked. PHSO has recently created a new position within its leadership structure for a service liaison to identify and publicize opportunities for service; this individual could also be responsible for tracking.

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. Because the greater Chicago area is served by a regional public health training center located at another university, DePaul's program does not attempt to conduct broad assessment of continuing education needs. Instead, the program provides support designed to meet the specific needs of its community partners, as identified through an annual community partner survey and stakeholder meeting and supported by the program's Workforce Development Committee.

The program identifies two major events intended to meet the workforce development needs of its stakeholders: an annual one-day Health Disparities and Social Justice (HDSJ) conference and a week-long Public Health Bootcamp. A review of HDSJ conference programs shows that participants have the opportunity to attend skills-building workshops such as conducting needs assessments, program evaluation or using GIS in research. Participant evaluations of the conference show that attendees find it to be a well-organized, engaging and instructive event. The program also supports the workforce training programs offered by its community partners by offering use of university space. The other major activity cited is the Public Health Boot Camp, which has not been operational for two of the past three years.

The community partner survey used to assess needs is combined with the instrument that evaluates student practice experiences. Although there is one open-ended question about how the program could support agency needs, more useful information could be obtained by providing suggestions for skills workshops that could be provided by program faculty.

In addition, the program offers a Certificate in Global Health program, which is open to non-degree-seeking students. The Certificate in Global Health has enrolled only five non-degree students over the past two years. The program may explore whether financial or other considerations are limiting access to this program. The program has considered offering other certificate programs designed to upgrade the skills of the non-degree-seeking workforce. It might also consider offering single day events with incentives such as continuing education credits.

During the site visit, community partners expressed a high degree of enthusiasm for the HDSJ conference and the skills workshops and did not identify additional unmet needs. The conference is a balanced mix of academics, governmental public health workers, health care workers and community health agency workers, which provides opportunities for networking as well as interdisciplinary sharing of experiences.

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 program has six primary faculty who devote between 50-100% of their time to the MPH; three affiliated and two adjunct faculty also support the instructional program. Three of the six primary faculty hold PhDs in public health from accredited schools of public health, two hold PhDs in disciplines related to public health, anthropology and behavioral psychology, and one holds an MPH from DePaul. All affiliated faculty hold doctorates; one holds a degree in public health from an accredited school of public health and two hold degrees related to public health, sociology and psychology. One adjunct faculty holds a degree in law and one holds a master's degree in urban planning. The program has met its outcome measures for assessing the faculty complement.

The faculty's multidisciplinary academic preparation is augmented by several members' expertise in practice settings and research. One primary faculty member worked with the Midwest AIDS Training and Education Center and another served as a health specialist for the Chicago Public Schools Office of Student Health and Wellness prior to joining the program. Primary faculty have served in leadership roles for the Consortium for Latino Access to Research Opportunities, the American Industrial Hygiene Association's Non-Ionizing Radiation Committee, the Association of Accredited Public Health Programs and the Chicago Gun Violence Research Collaborative Philanthropy. Affiliated faculty bring additional practice expertise in areas ranging from substance abuse to global health to business. Site visitors noted that regardless of whether a faculty member is on a tenure line or recently appointed to a teaching role, all expressed interest in research and are working with university programs and resources to launch their agendas.

Faculty consult and offer their expertise in research and evaluation on the national and local level on a variety of topics including family health, statewide healthy restaurant initiatives, investing in Chicago's youth, AIDS training and education and campaigns for Chicago's Public Health Institute. Faculty relationships in the community enable them to invite guest lecturers to their classes and integrate perspectives from the field into their courses.

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 university faculty handbook provides a thorough review of the responsibilities, policies, procedures and guidelines for faculty. The MPH program has its own faculty and staff handbook with policies and procedures specific to the department that is updated annually. Both handbooks are available online.

The MPH program has several categories of faculty. Faculty can be appointed to tenure-line/tenure positions; term positions, full-time teaching positions that do not lead to tenure; or hybrid positions, designated for individuals who spend significant portions of their time in administrative roles and teach. Special time-limited appointments, such as adjunct faculty, are also made on a course-by-course basis. Site visitors learned from the dean and provost that initial appointments may be changed and that faculty in term positions have applied for and been selected for tenure-track positions when they meet the appropriate criteria.

The faculty recruitment process begins with the MPH program director submitting a request to hire to the LAS dean. If approved, the dean submits the request to the provost. If the request is approved by the provost, the MPH program selects a search committee and begins to actively recruit. Only tenure-line faculty are eligible to serve on search committees, but other faculty, staff and students can provide input to the committee when candidates interview. The search committee then votes on the candidates and makes a recommendation to the dean. The dean determines the position rank and an offer is made to the selected candidate.

The MPH program follows the clearly articulated university guidelines for appointment and evaluation. The MPH program also delineates guidelines in the *MPH Faculty and Staff Handbook*, the *MPH Faculty Review Process* document and the *MPH Promotion and Tenure Guidelines*. All primary full-time faculty are evaluated annually in order to 1) provide feedback on performance, communicate expectations and develop goals for the coming year; 2) determine salary recommendations; and 3) for faculty on one-year appointments, determine if contract renewal is appropriate. The MPH program director initiates the faculty annual performance reviews in accordance with the *MPH Faculty Review Process*. Faculty are required to

provide a CV, a self-assessment, student and peer teaching evaluations and other pertinent information from which the program director prepares an assessment.

Tenured and tenure-track faculty evaluations focus on the quality of teaching, scholarship, research or other creative activities and service. For tenure-track faculty, whether appointed to the MPH program alone or jointly with another department, pre-tenure reviews include both informal and formal evaluation, according to the schedule outlined in the university guidelines and the *MPH Promotion and Tenure Guidelines* and the *MPH Faculty Review Process* document. Tenured faculty seeking promotion to full professor also follow the university guidelines and the *MPH Promotion and Tenure* document. Non-tenured faculty seeking promotion undergo formal review in accordance with the *Contingent Faculty Policy*. Their evaluations focus on quality of teaching and may include administration. The program director meets formally with non-tenure line faculty to discuss their self-assessment and supporting materials. The director prepares an assessment of the faculty and reviews it with the LAS dean to determine the faculty member's contract for the upcoming year. Part-time faculty are reviewed by the program director according to the college's adjunct review procedure.

Faculty development for teaching, research and practice is supported in numerous ways on both the university and college level; MPH faculty have received funding from several of these programs. On the university level, the Vincentian Endowment Fund provides grants that focus on enhancing DePaul University's Catholic values, and the Vincentian Heritage Tour supports study of Vincentian historical sites, in line with the strategic goals of the university. The Quality of Instruction Council provides grants and summer stipends and supports faculty leave to develop new programs, enhance curriculum and introduce pedagogical innovation; MPH faculty received this funding in 2015 and 2016. The Public Service Council is available to assist faculty in incorporating public service and service learning into their coursework.

The University Research Council provides competitive seed grants that support projects that are geared to lead to external funding; MPH faculty received this funding in 2015 and 2016. The Paid Leave Program supports faculty who carry out extended academic projects that necessitate suspending other contractual responsibilities to ensure success; one MPH faculty is receiving this support for the 2018 academic year. Humanities Center Fellows provide partial reduction in teaching responsibilities and undergraduate research assistance to develop programs that connect their work to the broader community. The Wicklander Fellows Program is available to faculty who are interested in the application of professional ethics to their field of research. The college offers a Faculty Summer Research Program for tenure-track and tenured faculty to support projects in the summer; MPH faculty received this funding in 2015 and 2016. The Undergraduate Research Assistance Program supports students who collaborate with faculty on their research throughout the year; MPH faculty received this funding in 2014 and 2015.

Site visitors recognized that the faculty are invested in each other's success and development and share resources and work collaboratively to this end and that the program director is actively engaged in fostering the development of the faculty as well as the MPH program.

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 with commentary. The program admits students once a year and begins recruitment efforts one year in advance. The LAS Office of Graduate Admissions promotes the MPH program as well as its other graduate programs during broad recruitment events. The program holds its own MPH information sessions twice per year and also conducts a special information session for DePaul undergraduates to recruit BS-MPH students. The program also participates in regional career and graduate school fairs targeted to science and social justice-oriented students. The MPH program director participates directly in recruitment efforts through communication with other regional undergraduate public health programs, as well as with community partners and other stakeholders. Marketing materials and events are supported by the university's Division of Enrollment Management and Marketing.

The program requires applicants to complete an application, submit a transcript and two letters of recommendation and provide responses to five prompts designed to elicit information about prior professional experience, interest in community health and longer-term career goals. GRE scores are required for applicants with a grade point average below 3.0, and TOEFL scores are required for applicants educated outside of the United States. Faculty on the Admissions Committee review completed applications and assign a numeric score. Final decisions about an applicant's admissions status are made by consensus of the MPH Administrative Team. Within the past few years, the program eliminated the requirement for undergraduate science courses, as they found it did not correlate with interest or success in the program and its elimination would open the program up to a more diverse student body. The program has also reduced its reliance on interviewing, as an analysis of accepted students shows that it would not have changed the composition of the student body.

The program is marketed as one focusing on urban health and attracts a student body from the greater Chicago area. Promotional sessions are offered online and in evenings to reach a working applicant. The program is considering offering some online courses to diversify its geographical reach of students. Data on students who left prior to program completion indicate that most have done so due to a job opportunity outside of Chicago or the relocation of a spouse.

The program has set three outcome measures to ensure that it enrolls a qualified student body. Enrollment data demonstrates that the qualifications for the incoming cohort meet or exceed measures set for grade point average and overall application quality in each of the last three years. In the most recent year, the program admitted 49 of 71 applicants, and 20 of those admitted students enrolled.

Commentary pertains to the program's ability to recruit and enroll students with public health professional experience. One of the program's stated goals is to educate the public health workforce, and program recruitment materials emphasize flexibility in terms of program length and that classes are offered in the evening to accommodate working professionals. However, data shows that the program is consistently not meeting its self-defined target of enrolling professionals with an average of five or more years of experience. Although almost all students have work experience, the current average is two and a half years, and the work experience is not always in public health. The program reports that it is seeing increased interest from recent college graduates with less work experience, and this range of student experience benefits both novice and experienced students by diversifying classroom perspectives. The program may wish to develop additional recruitment strategies to ensure that its program is visible to the public health workforce and mitigate barriers to enrolling such students.

Data also demonstrate that the percentage of applicants offered admission is generally increasing, while applications and enrollment are both decreasing. The program should assess what this data says about admissions criteria, success of recruitment strategies and other factors that influence enrollment.

Although there are several other MPH programs in the area, some of which are at public universities with lower costs, many students cited the ease of DePaul's application process, its focus on social justice and urban health, its broad concentration in community health and its small size as being deciding factors in their enrollment decisions.

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. Students are matched with a faculty technical advisor upon entering the program and are encouraged to meet quarterly to plan coursework and obtain assistance needed to ensure their successful completion of the curriculum. In addition, students in the later phases of the program receive advising on selection and completion of the practicum from the director of community partnerships.

Career advising is available to students through the DePaul Career Center, which also offers skill-building services such as resume assistance and mock interviewing in addition to providing networking opportunities. During the site visit, students remarked on the value of this resource. Additionally, the MPH

program maintains a website of job opportunities and sends weekly email reminders to students and alumni about these job postings. Students are also encouraged to seek out professional advising from faculty members throughout the course of their academic careers. Students receive introduction to potential career paths and local employers through the incorporation of guest faculty and experiential learning as part of their coursework. The program has implemented satisfaction surveys with alumni and graduating students to assess satisfaction with academic advising and career counseling.

The commentary pertains to surveys showing student dissatisfaction with the program's informal career counseling structure. During the site visit, current students and alumni reported the ease of establishing relationships with multiple faculty members who could provide guidance on career paths, share job opportunities and write recommendations. They reported faculty to be accessible and knowledgeable about student interests, and recent alumni reported that these relationships are sustained after graduation. In addition, recent alumni reported establishing mentoring relationships with current students, and some have hired graduates from other DePaul cohorts. Students cited the benefits of the program being small enough to facilitate such informal relationships. However, satisfaction with career counseling among alumni and graduating students responding to the survey is relatively low in comparison to satisfaction with the more formalized academic counseling. In the most recent year, 45% of alumni and 66% of graduating students report feeling neutral or dissatisfied with career counseling. In addition, 74% of graduating students had not engaged with the Career Center at all. The program has developed strategies to make the resources of the career center more relevant and accessible by having faculty incorporate them into academic advising sessions.

Because the program has been small and has had only one concentration, the academic sequence has been fairly prescribed, and faculty have been able to use their technical advising time to offer career counseling as well. As the program grows and diversifies and requires more attention be paid to technical academic advising, this informal structure may prove to be inadequate to meet student needs for career counseling. The program may also develop strategies to identify and engage students who have not self-initiated these informal faculty relationships and need a more structured introduction to a professional advisor who can assist with career counseling.

The program director is designated to respond to student grievances with documentation and intervention when needed. In addition, the university has formal policies on grade challenges, academic integrity, student conduct, and discrimination and harassment, all of which detail procedures to address grievances. Over the past three years, one student filed a grievance regarding the program; the issue was addressed promptly and to the student's satisfaction by the program director. These policies as well as the formal academic advising structure is introduced to students through the MPH Student Handbook, and further explained during orientation for new students.

Agenda

COUNCIL ON EDUCATION FOR PUBLIC HEALTH ACCREDITATION SITE VISIT

DePaul University Master of Public Health Program

February 5-6, 2018

Monday, February 5, 2018

- 8:30 am Meeting with Program Administration
John Mazzeo, PhD (Program Director)
Jessica Dirkes, PhD, MPH (Director of Community Partnerships)
Victoria Rivkina, MPH, CHES (Program Manager)
- 8:45 am Executive Session
- 9:45 am Meet with Program Administration
John Mazzeo, PhD (Program Director)
Jessica Dirkes, PhD, MPH (Director of Community Partnerships)
Victoria Rivkina, MPH, CHES (Program Manager)
- 11:00 am Meeting with Faculty Related to Curriculum and Degree Programs
John Mazzeo, PhD (Program Director)
Jessica Dirkes, PhD, MPH (Director of Community Partnerships)
Victoria Rivkina, MPH, CHES (Program Manager)
Suzanne Carlberg-Racich, PhD, MSPH (Assistant Professor)
Julia Lippert, PhD (Clinical Assistant Professor)
Daniel Schober PhD, MPH (Clinical Assistant Professor)
Doug Bruce, PhD, MSW (Associate Professor)
Fernando De Maio, PhD (Associate Professor)
- 12:15 pm Lunch with Current MPH Students
Samantha Borow (Class of 2018)
Tarae Cain (Class of 2018)
Alfonso Camacho (Class of 2018)
Myles Castro (Class of 2018)
Lacey Johnson (Class of 2018)
Amber Miller (Class of 2018)
Alyssa Rickman (Class of 2018)
Sarah Wozniak (Class of 2018)
Matthew Bertagna (Class of 2019)
Anna Claussen (Class of 2019)
Monica Kowalczyk (Class of 2019)
Claire McGivern (Class of 2019)
Regina Midgett (Class of 2019)
Samuel Villasenor (Class of 2019)
- 1:30 pm Meeting with Faculty Related to Research, Service, Workforce Development, Faculty Issues
John Mazzeo, PhD (Program Director)
Jessica Dirkes, PhD, MPH (Director of Community Partnerships)
Victoria Rivkina, MPH, CHES (Program Manager)
Suzanne Carlberg-Racich, PhD, MSPH (Assistant Professor)
Julia Lippert, PhD (Clinical Assistant Professor)
Daniel Schober PhD, MPH (Clinical Assistant Professor)
Fernando De Maio, PhD (Associate Professor)
- 2:45 pm Meeting with Alumni and Community Partners
Kerianne Burke, MPH, Project Manager, Ruth M. Rothstein CORE Center
Briana Lemon, MPH, Project Coordinator, Chicago Fathers & Sons Study, University of Michigan
Lauren Ebeling, MPH, Research Assistant, Hektoen Institute LLC
Adenike Sosina, MPH, Early Childhood Health Education Specialist, Chicago Partnership for Health Promotion
Tonya Roberson, MPH, DTR, PhD (c), Assistant Research Director, Department of Biobehavioral Health Science, University of Illinois at Chicago

Dan Bordage, MPH, Associate Director, International Student & Scholar Services, Loyola University Chicago
Michael Termar, MPH, Program Development for the Children Services Division of the City of Chicago
Department of Family and Support Services
Kelly Rice, MPH, Case Management Program Manager, Howard Brown Health Center
Heidi Milby, MPH, School Program Manager, Action for Healthy Kids
Micaella Verro, MPH, LHL Program Manager, Erie Neighborhood House

4:00 pm Meeting with Program Administration and Faculty member of MBA Program
John Mazzeo, PhD (Program Director)
Jessica Dirkes, PhD, MPH (Director of Community Partnerships)
Victoria Rivkina, MPH, CHES (Program Manager)
Marty Martin, PhD (Professor)

4:15 pm Executive Session

5:00 pm Adjourn

Tuesday, February 6, 2018

9:00 am Meeting with University Officials (Office of the Provost)
Marten denBoer, PhD (Provost)
Guillermo Vásquez de Velasco, PhD (Dean of the College of Liberal Arts and Sciences)

10:00 am Executive Session and Report Preparation

12:30 pm Exit Briefing