DePaul University

COLLEGE OF LIBERAL ARTS AND SOCIAL SCIENCES

Master of Public Health Program

Final Accreditation Self-Study

Submitted to the

Council on Education for Public Health

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List of Acronyms

AAPHP	Association of Accredited Public Health Programs
AFC	AIDS Foundations of Chicago
APHA	American Public Health Association
BS-MPH	Bachelor of Science - Master of Public Health
CAA	Centers for Access and Attainment
CCCP	College Committee on Curriculum and Planning
CCP	Committee on Curriculum and Planning
CCHE	Center for Community Health Equity
CEPH	Council on Education for Public Health
CHES	Certified Health Education Specialist
CHP	Community Health Practice
CPH	Certified in Public Health
CSH	College of Science and Health
CV	Curriculum Vitae
D2L	Desire to Learn
EMM	Enrollment Management and Marketing
FQHC	Federally Qualified Health Center
FSRG	Faculty Summer Research Grant
FTE	Full Time Equivalent
GA	Graduate Assistant/ship
GPA	Grade Point Average
GRE	Graduate Record Examination
GSRF	Graduate Student Research Fund
HC	Head Count
HDSJ	Health Disparities and Social Justice
HLC-NCA	Higher Learning Commission of the North Central Association of Colleges and Schools
IBHE	Illinois Board of Higher Education
IELTS	International English Language Testing System
IOM	Institute of Medicine
LAS	College of Liberal Arts and Social Sciences
LASAC	College of Liberal Arts and Social Sciences Academic Council
LGBTQ	Lesbian, Gay, Bisexual, Transgendered, and Queer/Questioning
MA	Master of Arts
MBA-MPH	Master of Business Administration - Master of Public Health
MD	Doctor of Medicine
MPC	MPH Program Committee
MPH	Master of Public Health
MS	Master of Science
MSPH	Master of Science in Public Health
MSW	Master of Social Work
NBPHE	National Board of Public Health Examiners
NCHEC	National Commission for Health Education Credentialing
OIDE	Office of Institutional Diversity and Equity

PhD	Doctor of Philosophy
PHSO	Public Health Student Organization
PI	Principal Investigator
PSC	Public Service Council
PsyD	Doctor of Psychology
QIC	Quality of Instruction Council
SFR	Student to Faculty Ratio
SPSS	Statistical Package for the Social Sciences
SRAC	Strategic Resource Allocation Committee
SSRC	Social Science Research Center
TOEFL	Test of English as a Foreign Language
TPC	Tuition Pricing Committee
URAP	Undergraduate Research Assistant Program
URC	University Research Council
VEF	Vincentian Endowment Fund

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Introduction

The DePaul University Master of Public Health program enrolled it first cohort of students in the autumn of 2008. During its formative years, the program enrolled one cohort of MPH students each academic year. Since the last accreditation process and site visit in 2013, the MPH program has undergone growth and diversification.

First, representatives from DePaul's office of Corporate Education Partnerships engaged decision makers from Ann & Robert H. Lurie Children's Hospital to provide an on-site MPH program to Lurie Children's Hospital employees. A cohort of students (the "Lurie cohort") began their MPH program in the autumn of 2014 and graduated in June 2017. During their three-year program, the Lurie cohort completed all the same courses as traditional DePaul MPH students and had to engage in a practicum and culminating experience for which the expectations mirrored those of traditional DePaul MPH students. All of the support services that DePaul University provides for its campus-based student populations were available to the Lurie cohort. The Lurie cohort received technical advising through the MPH Program Manager and were encouraged to seek out professional/career advisor(s) among MPH faculty. A Lurie cohort student served as a Student Representative on the MPH Program Committee, there was a Lurie cohort representative as part of the Public Health Student Organization, and Lurie students were fully included in all MPH program events and communications. To date, there has only been one cohort of Lurie students to complete the on-site MPH program with DePaul University. When the hospital is interested in offering the on-site Lurie MPH to another group of employees, the DePaul MPH program will be ready to execute.

Additionally, the MPH program began offering a Global Health Certificate in the autumn of 2015, enrolled its first group of BS-MPH students in the autumn of 2016, and started accepting applications for its joint MBA-MPH program in the spring of 2017. The Global Health Certificate, the BS-MPH program, and MBA-MPH joint degree are discussed in greater detail in the self-study document.

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.

1.1.a	A clear and concise mission statement for the program as a whole.

The mission of the Master of Public Health (MPH) 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.

1.1.b	A statement of values that guides the program.

The DePaul MPH program will embody and instill in its students the following values:
- Social Justice
- Cultural Humility
- Ethical Public Health Practice
- Evidence-based Instruction Grounded in Science
- Service to the Community and the Profession

1.1.c	One or more goal statements for each major function through which the program intends to attain its mission, including at a minimum, instruction, research, and service.

Instruction Goal
The instruction goal of the MPH program is to prepare high performing students through personalized, high quality instruction and hands-on practical public health experience.

Research Goal
The research goal of the MPH program is to promote faculty and student inquiry through research projects in collaboration with community partners and to disseminate findings to professional and practice-oriented audiences.

Service Goal
The service goal of the MPH program is to increase the capacity of the public health profession by offering expertise to external professional or community organizations, participating in workforce development, and engaging students in such activities.

1.1.d   A set of measurable objectives with quantifiable indicators related to each goal statement as provided in Criterion 1.1.c. In some cases, qualitative indicators may be used as appropriate.

Instruction
Aligned with the Council on Education for Public Health (CEPH) guidelines for professional degree programs, DePaul's MPH program prepares students for a broad mastery of public health subject matter and methods necessary for practice. It also requires students to develop the capacity to organize, analyze, interpret, and communicate knowledge in the applied area of Community Health Practice. The five areas of knowledge central to the public health core, as defined by CEPH, are explored throughout the DePaul MPH curriculum. These five areas of knowledge include: 1) epidemiology, 2) biostatistics, 3) environmental health science, 4) social and behavioral sciences, and 5) health services administration.

The DePaul MPH program also follows the Institute of Medicine (IOM) suggestions for achieving community-led initiatives aimed at improving health and eliminating health disparities. The program has been designed to achieve the IOM objectives through its concentration on Community Health Practice and special emphasis on learning objectives that are most closely identified with public health needs at the community level.

The domains and objectives defined below are set with the intent to measure the DePaul MPH program's ability to meet the instruction goal. As demonstrated in Table 1.1.d.1 below, this instruction goal is monitored at three levels: 1) student performance; 2) quality of instruction; and 3) practical and culminating experience.

Table 1.1.d.1. Instruction Domains and Objectives

Domain	Objectives
1. Student Performance	1.1 Graduating class cumulative GPA will be 3.50 (on a 4.0 scale) 1.2 50% of graduating students will graduate with 3.75 GPA or above 1.3 25% of graduating students will produce a capstone thesis "with distinction" 1.4 Graduation rates for each class will be ≥ 90%
2. Quality of Instruction	2.1 Total student to faculty ratio (SFR) will be < 10 2.2 80% of faculty's teaching effectiveness rating will be 3.0 (above average) out of 5.0 2.3 Students will report an average increase of 1.0 point on 90% of indicators on competency self-assessment (4-point scale) 2.4 50% of required courses involve direct engagement with external community partners
3. Practical and Culminating Experience	3.1 At least 10 community stakeholders will attend annual Stakeholder Meeting to provide program and/or student performance feedback 3.2 80% of site supervisors will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by students 3.3 80% of students will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by site supervisors 3.4 80% of site supervisors will indicate interest in continuing to serve as a site supervisor

Research

All DePaul MPH faculty are encouraged to participate in research resulting in publications and presentations at professional meetings. The domains and objectives defined in Table 1.1.d.2 below are set with the intent to measure the program's ability to meet the research goal. This goal is monitored at five levels: 1) number of research grants submitted; 2) participation in research projects; 3) collaboration with external community partners on research; 4) student involvement in research; and 5) dissemination of research findings.

Table 1.1.d.2. Research Domains and Objectives

Domain	Objectives
1. Number of research grants submitted	1.1 75% of MPH full-time faculty will submit ≥ 1 research grant per academic year
2. Participation in research projects	2.1 65% of MPH full-time faculty will participate in ≥ 1 research project per academic year
3. Collaboration with external community partners on research	3.1 Of faculty members who participate in research, 75% will collaborate with external community partners on that research
4. Student involvement in research	4.1 Of faculty members who participate in research, 75% will involve students in that research 4.2 15% of MPH students will participate in research with full-time faculty per academic year
5. Dissemination of research finding	5.1 Five publication in peer-reviewed journals will occur among MPH full-time faculty each academic year 5.2 Five non-peer reviewed publications will occur among MPH full-time faculty each academic year 5.3 Fifteen presentation at professional meetings will occur among MPH full-time faculty each academic year

Service

All DePaul MPH faculty are encouraged to participate in service activities. The domains and objectives defined in Table 1.1.d.3 below are set with the intent to measure the program's ability to meet the service goal. This goal is monitored at four levels: 1) conducting peer reviews; 2) professional or community service; 3) workforce development initiatives; and 4) engagement of students in service activities.

Table 1.1.d.3. Service Domains and Objectives

Domain	Objectives
1. Conducting peer reviews	1.1 75% of MPH full-time faculty will perform ≥ 1 peer review(s) per academic year (manuscript review, abstract review, grant review)
2. Professional or community service	2.1 75% of MPH full-time faculty will participate in external professional or community organizations
3. Workforce development initiatives	3.1 75% of MPH full-time faculty will be involved in workforce development initiatives
4. Engagement of students in service activities	4.1 The Public Health Student Organization will provide ≥ 3 opportunities for the MPH student body to engage in service activities per academic year

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1.1.e   Description of the manner through which the mission, values, goals, and objectives were developed, including a description of how various specific stakeholder groups were involved in their development.

At the inception of the DePaul MPH program, this mission, goals, and objectives were developed in collaboration with key program stakeholders. These stakeholders included: 1) University and College personnel—the Provost, the Dean of the College of Liberal Arts and Social Sciences, and the University Strategic Planning Committee; 2) MPH and University faculty; 3) community practitioner instructors; 4) practicum site supervisors; 5) program alumni; and 6) invited public health curricular experts from selected CEPH-accredited programs. The program developed a responsive, formative assessment system to gather feedback from these key stakeholders, align this feedback with accreditation criteria, and produce a comprehensive, mission-driven, and accreditation-aligned MPH Program.

After initial accreditation and the onboarding of a new Program Director in 2013, the DePaul MPH program revisited it existing mission, goals, and objectives. After internal discussion among the members of the MPH Administrative Team and the MPH Program Committee, the program held a strategic planning meeting with MPH faculty and staff, practicum site supervisors, alumni, and additional community partners in July 2014. A day-long visioning meeting was held with internal and external stakeholders. Following the day-long meeting with stakeholders, MPH faculty and staff attended a three-day retreat in which ideas from the larger meeting were distilled, and a new mission, values, goals, and objectives were developed. The mission, values, goals, and objectives were then sent back to the external stakeholders for final review before adoption and dissemination to the DePaul MPH community.

> **1.1.f** **Description of how the mission, values, goals, and objectives are made available to the program's constituent groups, including the general public, and how they are routinely reviewed and revised to ensure relevance.**

The mission of the DePaul MPH program is made available to its constituent groups and the general public via the program website: http://las.depaul.edu/academics/public-health/Pages/default.aspx. Additionally, this information can be found on the public-facing University Catalog: http://www.depaul.edu/university-catalog/colleges-and-schools/class/departments/public-health/pages/about-the-department-of-public-health.aspx. The program values, goals, and objectives are shared with stakeholders at the program's annual Stakeholder Meeting each autumn. Goals and objectives of the program can also be found by the general public in the publicly available self-study on the DePaul MPH website: http://las.depaul.edu/academics/public-health/about/Pages/accreditation.aspx.
The review process for the program's mission, values, goals, and objectives takes place twice per year. In the autumn, the program hosts an annual Stakeholder Meeting for practicum site supervisors, alumni, and community partners. The mission, values, goals, and objectives are shared and reviewed at the Stakeholder Meeting. MPH faculty and staff determine if any of the feedback provided at the meeting warrants a revision of any of these aspects. Each summer, the program hosts an annual retreat for faculty and staff. At the beginning of the retreat, the mission, values, goals, and objectives are discussed to ensure alignment with current practices and future directions of the program.

> **1.1.g** **Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met**.

Strengths
The program is diligent about integrating its mission and values into its instruction, research, and service goals. Furthermore, the program regularly seeks out and incorporates the feedback regarding its mission, values, goals, and objectives from its constituent groups.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

1.2 **Evaluation. 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 defined in this document.**

1.2.a **Description of the evaluation processes used to monitor progress against the objectives defined in Criterion 1.1.d, including identification of the data systems and responsible parties associated with each objective and the evaluation process as a whole. If these are common across all objectives, they need to be described only once. If systems and responsible parties vary by objective or topic area, sufficient information must be provided to identify the systems and responsible party for each.**

The evaluation and assessment process encompasses a range of program evidence delivered by diverse constituencies (the Administrative Team, the Program Committee, faculty, students, and practicum site supervisors). The program has developed numerous data collection tools and data systems to monitor efforts towards achieving instruction, research, and service goals and objectives. Efforts towards achieving goals and objectives are monitored by the Administrative Team. Tables 1.2.a.1, 1.2.a.2, and 1.2.a.3 below outline the data system, responsible party, and frequency of monitoring for each of the objectives for instruction, research, and service, respectively. These tables outline relevant data systems, responsible parties, and frequency of monitoring.

Table 1.2.a.1. Evaluation Procedures for Instruction Objectives

Objective	Data System	Responsible Party	Frequency of Monitoring
Student Performance			
Each graduating class will have an average cumulative GPA of 3.50	University Registrar	Program Manager	Quarterly/ Annually
50% of graduating students will graduate with a 3.75 GPA	University Registrar	Program Manager	Annually
25% of students will produce a capstone thesis of high enough quality to receive "distinction"	Capstone Status Reports	Program Manager	Annually
Graduation rates for each class will be ≥ 90%	University Registrar	Program Manager	Annually
Quality of Instruction			
Total student to faculty ratio (SFR) will be < 10	University Registrar	Program Director	Annually
80% of faculty's overall teaching effectiveness rating from student evaluations will be 3.0 (above average) out of 5.0 or above per academic year	University Online Evaluation Reports	Program Director	Quarterly
Students will report an average increase of 1.0 point on 90% of indicators on competency self-assessment (4-point scale)	Self-Assessment Survey	Program Manager	Annually
50% of required courses involve some direct engagement with external community partners	Syllabi Review	Program Director	Annually
Practical and Culminating Experience			
At least 10 community stakeholders attend the MPH program's annual Stakeholder Meeting to provide program and/or student performance feedback	Stakeholder Meeting Attendance	Director of Community Partnerships	Annually
80% of site supervisors will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by students	Practicum Evaluation Survey (Students)	Director of Community Partnerships	Annually
80% of students will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by site supervisors	Practicum Evaluation Survey (Site Supervisors)	Director of Community Partnerships	Annually
80% of site supervisors will indicate interest in continuing to serve as a site supervisor	Communication with Director of Community Partnerships	Director of Community Partnerships	Annually

Table 1.2.a.2. Evaluation Procedures for Research Objectives

Objective	Data System	Responsible Party	Frequency of Monitoring
Number of Research Grants Submitted			
75% of MPH full-time faculty will submit ≥ 1 research grant per academic year	Faculty Survey[1]	Program Manager	Annually
Participation in Grant Funded Research Projects			
65% of MPH full-time faculty will participate in ≥ 1 research project per academic year	Faculty Survey[1]	Program Manager	Annually
Collaboration with External Community Partners on Research			
Of the faculty members who participated in research, 75% will collaborate with external community partners on that research	Faculty Survey	Program Manager	Annually
Student Involvement in Research			
Of the faculty members who participate in research, 75% will involve students in that research	Faculty Survey	Program Manager	Annually
15% of MPH students will participate in research per academic year with full-time MPH faculty	Faculty Survey	Program Manager	Annually
Dissemination of Research Findings			
Five (5) publications in peer-reviewed journals will occur among MPH full-time faculty	Faculty Survey	Program Manager	Annually
Five (5) publications in non-peer reviewed publications will occur among MPH full-time faculty	Faculty Survey	Program Manager	Annually
Fifteen (15) presentations at professional meetings will occur among MPH full-time faculty	Faculty Survey	Program Manager	Annually

1. DePaul University also has an Office of Research Services (ORS). The ORS promotes, facilitates, and supports the research, scholarship, teaching, and creative activities that are conducted by members of the DePaul community. During the accreditation review period discussed in this document, the ORS did not track the grants in individual departments. It tracked and reported on grants submitted and received at the college level. Due to the number and responsiveness of faculty in the MPH program, the program tracked its own research outcomes.

Table 1.2.a.3. Evaluation Procedures for Service Objectives

Objective	Data System	Responsible Party	Frequency of Monitoring
Conducting Peer Reviews			
75% of MPH full-time faculty will perform ≥ 1 peer review(s) per academic year (manuscript review, abstract review, or grant review)	Faculty Survey	Program Manager	Annually
Professional or Community Service			
75% of MPH full-time faculty will participate in external professional or community organizations	Faculty Survey	Program Manager	Annually
Workforce Development Initiatives			
75% of MPH full-time faculty will be involved in workforce development initiatives	Faculty Survey	Program Manager	Annually
Engagement of Students in Service Activities			
The Public Health Student Organization will provide ≥ 3 opportunities for the MPH student body to engage in service activities per academic year	PHSO Communications	Program Manager	Annually

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1.2.b   Description of how the results of the evaluation processes described in Criterion 1.2.a are monitored, analyzed, communicated, and regularly used by managers responsible for enhancing the quality of programs and activities.

The MPH program monitors, analyzes, communicates, and uses the results of the evaluation processes described in criterion 1.2.a in a regular, systematic way.

Monitoring and Analysis
Instruction, research, and service objectives are monitored according to a determined schedule. Data for two instruction objectives is collected quarterly; otherwise data for the remaining instruction objectives and all research and services objectives is collected annually. Three program staff members are responsible for collecting data as it relates to the instruction objectives. The Program Manager collects data for the student performance objectives quarterly as needed and at the end of each academic year. The Program Director collects data for the quality of instruction objectives quarterly as needed and at the end of the academic year. The Director of Community Partnerships collects practical and culminating experience data at the end of the academic year. The Program Manager collects data related to all research and three out of four service objectives at the end of each academic year via the faculty survey. The Program Manager also collects data about student engagement through communication with the Public Health Student Organization (PHSO).

Once all staff members collect the data for which they are responsible, they send it to the Program Manager to compile. The Program Manager compiles all the data into an easy-to-read format, and the Program Director, Program Manager, and Director of Community Partnerships discuss the results during an Administrative Team Meeting.

Communication and Use
As stated above, once the Program Manager compiles all provided data, the Administrative Team meets to discuss the results after the end of the academic year. The Administrative Team looks to see how the results of the most recent academic year are similar to or different from prior years. The Administrative Team then outlines priorities to bring to the larger MPH Program Committee, if necessary. Priorities are then discussed with members of the Program Committee during the program's annual summer retreat. The Program Committee determines action items to be taken, and work teams and timelines are created. Over the course of the following academic year, the Administrative Team oversees the implementation of improvement initiatives and report on progress at monthly Program Committee meetings. Data is collected again at the end of the following academic year to determine whether or not a positive impact was made by the changes implemented.

Minor programmatic tweaks are generally shared with faculty, staff, and students. Larger-scale program changes are also shared with external constituents. For example, the Program Manager provides an overview of the program at the beginning of the annual Health Disparities and Social Justice conference. Relevant program changes, such as the enrollment of an off-site cohort or the start of a certificate program, are shared as a part of the program overview. Additionally, the Director of Community Partnerships discusses programmatic changes with and solicits feedback from alumni, practicum site supervisors, and additional community partners during the annual Stakeholder Meeting. All relevant changes are also posted to the program's website as well as the University Catalog.

One recent example of the way in which the MPH program used its evaluation results was the modification of the capstone process based on student feedback. In the spring of 2015, the MPH program initiated an assessment project to examine the extent to which students felt prepared to design, implement, and evaluate public health initiatives designed to bring about improved health (competency three). To assess this competency, data were collected from 21 students. This data included a sample of student work, in the form of capstone theses, and a brief survey of students regarding the three-course capstone sequence (MPH 602, MPH 603, and MPH 604). The results from the survey suggested that modifications to the three-course sequence were needed in order to better meet the needs of students. In response, MPH faculty and the Director of Community Partnerships reviewed the capstone sequence. In the end, MPH 602, MPH 603, and MPH 604 were split into two sections. This allowed for smaller class sizes and more individual attention from instructors. The capstone rubric was also modified to use the same language as the assignments on which the capstone thesis was based. Overall, there was more communication among faculty and improved transparency and information sharing with students.

1.2.c **Data regarding the program's performance on each measurable objective described in Criterion 1.1.d must be provided for each of the last three years. To the extent that these data duplicate those required under other criteria (e.g., 1.6, 2.7, 3.1, 3.2, 3.3, 4.1, 4.3, or 4.4), the program should parenthetically identify the criteria where the data also appear. See CEPH Outcome Measures Template.**

Please see the following tables below. Table 1.2.c.1 outlines the outcome measures for instruction. Table 1.2.c.2 shows the outcome measures for research. Table 1.2.c.3 delineates the outcome measures for service.

Table 1.2.c.1. Outcome Measures for Instruction

Domain	Objective	2014-2015	2015-2016	2016-2017
Instruction Goal: The instruction goal of the MPH program is to prepare high performing students through personalized, high quality instruction and hands-on practical public health experience.				
Student Performance	Each graduating class will have an average cumulative GPA of 3.50	3.88	3.83	3.88
	50% of graduating students will graduate with a 3.75 GPA	90%	65%	85%
	25% of students will produce a capstone thesis of high enough quality to receive "distinction"	33%	26%	27%
	Graduation rates for each class will be ≥ 90%	89%	100%	93%
Quality of Instruction	Total student to faculty ratio (SFR) will be < 10 *(Data duplicated in criterion 1.7.)*	6.76	7.14	5.74
	80% of faculty's overall teaching effectiveness rating from student evaluations will be 3.0 (above average) out of 5.0 or above per academic year	86%	94%	93%
	Students will report an average increase of 1.0 point on 90% of indicators on competency self-assessment (4-point scale)	N/A[1]	98%	99%
	50% of required courses involve some direct engagement with external community partners	50%	57%	57%
Practical and Culminating Experience	At least 10 community stakeholders attend the MPH program's annual Stakeholder Meeting to provide program and/or student performance feedback	7	10	6
	80% of site supervisors will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by students	100%	91%	79%[2]
	80% of students will receive an average score of 3.0 (very good) out of 4.0 on practicum evaluations completed by site supervisors	100%	94%	96%
	80% of site supervisors will indicate interest in continuing to serve as a site supervisor	N/A[3]	82%	96%

1. Due to staff turnover and capacity, data was not collected for students graduating in AY 2014-2015.
2. During AY 2016-2017, there were 21 new practicum placements; many of the supervisors had not previously supervised DePaul MPH students.
3. Due to staff turnover/capacity, relevant data was not collected for AY 2014-2015.

Table 1.2.c.2. Outcome Measures for Research

Research Goal: The research goal of the MPH program is to promote faculty and student inquiry through research projects in collaboration with community partners and to disseminate findings to professional and practice-oriented audiences. *(The below data are duplicated in criterion 3.1.)*				
Domain	**Objective**	**2014-2015**	**2015-2016**	**2016-2017**
Number of Research Grants Submitted	75% of MPH full-time faculty will submit ≥ 1 research grant per academic year	6/8 75%	7/9 78%	6/9 67%
Participation in Research Projects	65% of MPH full-time faculty will participate in ≥ 1 research project per academic year	5/8 63%	7/9 78%	6/9 67%
Collaboration with External Community Partners on Research	Of the faculty members who participated in research, 75% will collaborate with external community partners on that research	5/5 100%	6/7 86%	3/6 50%[1]
Student Involvement in Research	Of the faculty members who participate in research, 75% will involve students in that research	5/5 100%	6/7 86%	4/6 67%[2]
	15% of MPH students will participate in research per academic year with MPH full-time faculty	8/65 12%	15/71 21%	9/65 14%
Dissemination of Research Findings[3]	Five (5) publications in peer-reviewed journals will occur among MPH full-time faculty	19	14	9
	Five (5) publications in non-peer reviewed publications will occur among MPH full-time faculty	6	9	6
	Fifteen (15) presentations at professional meetings will occur among MPH full-time faculty	31	23	22

1. For AY 2016-2017, fewer community partners were involved in MPH faculty research projects due to the nature of the funding source and the project scope. For example, projects focused on internal processes, scholarship of teaching, and some utilized secondary data analysis.
2. For AY 2016-2017, the nature of the funding source did not support student participation.
3. Although faculty are currently exceeding targets for dissemination of research, the MPH Program Committee did not feel comfortable increasing targets.

Table 1.2.c.3. Outcome Measures for Service

Domain	Objective	2014-2015	2015-2016	2016-2017
Service Goal: The service goal of the MPH program is to increase the capacity of the public health profession by offering expertise to external professional or community organizations, participating in workforce development, and engaging students in such activities. *(The below data are duplicated in criterion 3.2.)*				
Conducting Peer Reviews	75% of MPH full-time faculty will perform ≥ 1 peer review(s) per academic year (manuscript review, abstract review, or grant review)	6/8 75%	6/9 67%	7/9 78%
Professional/ Community Service	75% of MPH full-time faculty will participate in external professional or community organizations	7/8 88%	8/9 89%	8/9 89%
Workforce Development Initiatives	75% of MPH full-time faculty will be involved in workforce development initiatives	6/8 75%	7/9 78%	7/9 78%
Engagement of Students in Service Activities	The Public Health Student Organization will provide ≥ 3 opportunities for the MPH student body to engage in service activities per academic year	N/A[1]	2 Events	7 Events

1. The MPH program was unable to gather PHSO service data for AY 2014-2015.

1.2.d Description of the manner in which the self-study document was developed, including effective opportunities for input by important program constituents, including institutional officers, administrative staff, faculty, students, alumni, and representatives of the public health community.

The 2017-2018 DePaul MPH program's self-study document was developed using a method that combined the single, dedicated individual approach with the workgroup/committee approach. The Program Manager was tasked with leading the writing of the self-study as all accreditation-related tasks fall under the purview of the Program Manager's job description. The Program Manager began to develop the self-study writing timeline at the end of the 2015-2016 academic year. This timeline was discussed by the Administrative Team and shared with faculty at a Program Committee meeting. Expectations for faculty participation were also outlined. The program, as a whole, began working on the self-study at the 2016 MPH retreat. One of the retreat outcomes was an Accreditation Project Plan that outlined key tasks, due dates, and responsible parties for the writing of the self-study.

At the beginning of the 2016-2017 academic year, the MPH program hired a Student Program Assistant to specifically support the Program Manager in accreditation-related efforts. The

Program Manager and Student Program Assistant worked together to gather necessary information and complete sections of the self-study document. The Student Program Assistant took the lead in compiling the electronic Resource File. Self-study progress was discussed at monthly Program Committee meetings, and necessary feedback was gathered.

Community stakeholders were involved in self-study development during the Stakeholder Meeting in the autumn of 2016. Specifically, those who attended the Stakeholder Meeting assessed the program competencies on a Likert scale of perceived importance to public health practice. Through a robust discussion, it was determined that MPH program competencies are aligned with practice.

After a first draft of the self-study was complete, the MPH program hosted a consultation visit with a CEPH representative in January 2017. The Program Director and Program Manager went through the self-study study in its entirety with the CEPH representative to determine areas of improvement. The Program Manager and Administrative Team reviewed the draft and made necessary edits based on the feedback from the consultation visit. The Program Director reviewed and approved the draft with the feedback provided by CEPH. The Program Director then submitted the self-study to the Dean of the College of Liberal Arts and Social Sciences (LAS) as well as the university Provost on June 1, 2017. Comments and edits from the LAS Dean and university Provost were incorporated before the preliminary self-study was submitted to CEPH on September 1, 2017.

1.2.e   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has an explicit process for monitoring its efforts towards achieving its instruction, research, and service goals. The program regularly collects data, uses results to improve processes, and keeps relevant stakeholders informed and engaged. Finally, the DePaul MPH program dedicates a great deal of time, effort, and resources towards conducting an analytical self-study in order to continuously improve the manner in which the program meets the needs of its constituencies.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

> **1.3   Institutional Environment. The program shall be an integral part of an accredited institution of higher education.**

> **1.3.a   A brief description of the institution in which the program is located, and the names of the accrediting bodies (other than CEPH) to which the institution responds.**

DePaul University is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools (HLC-NCA). Every ten years, DePaul undertakes self-examination in preparation for an accreditation visit by the HLC-NCA. The most recent HLC-NCA site visit occurred May 15-17, 2017.

DePaul is the nation's largest Catholic University with a primary mission of teaching and service. There are two DePaul campuses in the Chicago area – Lincoln Park and the Loop – and two additional locations in the suburbs – Naperville and O'Hare. The University is comprised of ten colleges and schools as listed below:
- Driehaus College of Business
- College of Communication
- College of Computing and Digital Media (CDM)
- College of Education (COE)
- College of Law (LAW)
- College of Liberal Arts and Social Sciences (LAS)
- College of Science and Health (CSH)
- School of Music
- School for New Learning (SNL)
- The Theatre School

Enrollment at DePaul for the 2016-2017 academic year was 23,539 students, which included 15,961 undergraduates and 7,578 graduate students. In 2015, DePaul admitted 727 law students. DePaul University offered nearly 300 undergraduate and graduate programs of study as of 2016 and had a student-to-faculty ratio of 16:1. Class sizes are small—35.3 percent of classes have fewer than 20 students. In 2015, DePaul had an 89 percent job placement rate for those with masters or professional degrees. Ninety-eight percent of DePaul's classes are taught by professors rather than teaching assistants.

In 2015, DePaul University was listed among the nation's Most Innovative Schools by U.S. News & World Report. In 2014, the Princeton Review's The Best 379 Colleges ranked DePaul #3 in the Best College Cities in the U.S. The Princeton Review also ranked DePaul students among the happiest in the U.S. in 2014. Additional awards include Higher Education Excellence in Diversity, INSIGHT into Diversity Magazine (2014), and Best Places for Women and Diverse Managers to work (#20 in U.S.), Diversity MBA Magazine (2015).

The College of Liberal Arts and Social Sciences (LAS) houses the Master of Public Health Program. The College is committed to providing all of its students with a liberal education that balances in-depth study in specific areas with a breadth of experience in the various disciplines that form the core of human knowledge. Primarily housed on the Lincoln Park campus in Chicago, LAS is the largest and most diverse college at DePaul University. The College offers post-baccalaureate study through fourteen departments (see Figure 2 below). LAS values and nurtures the urban and Vincentian mission of DePaul University and has a strong social justice orientation. DePaul's Vincentian mission supports a learning experience that is holistic, integrated, creative, flexible, person-oriented, collaborative, and focused in the educational process. Significant portions of the curriculum at DePaul speak to questions of social responsibility, ethical standards for behavior, and an active engagement with the people and the challenges of the Chicago community. DePaul University is home to more than 45 centers and institutes focused on social justice, and its faculty is committed to integrating service opportunities into the curriculum.

Other than CEPH, DePaul University is accountable to the following accrediting bodies, in alphabetical order:
- The American Bar Association
- The American Chemical Society
- The American Psychological Association
- The Association to Advance Collegiate Schools of Business International
- Commission on Collegiate Nursing Education
- Council of Social Work Education
- The Higher Learning Commission
- The National Association of Schools of Music
- The National Association of Schools of Public Affairs and Administration

Additional information about each of the accrediting bodies listed above can be found in the Resource File (RF: 1.3).

1.3.b   One or more organizational charts of the university indicating the program's relationship to the other components of the institution, including reporting lines and clearly depicting how the program reports to or is supervised by other components of the institution.

The below charts depict the program's relationship to the university. Figure 1.3.b.1 below shows the organizational structure of the university. The MPH program is housed in LAS, as described above. LAS Dean Guillermo Vásquez de Velasco reports directly to Academic Affairs Provost Marten denBoer. Figure 1.3.b.2 below depicts the organizational structure for LAS. MPH Program Director John Mazzeo reports directly to LAS Dean Vazquez de Velasco.

Figure 1.3.b.1. DePaul University Organizational Chart

All organizational charts are available for review in the Resource File (RF: 1.3).

Figure 1.3.b.2. College of Liberal Arts and Social Sciences Organizational Chart

All organizational charts are available for review in the Resource File (RF: 1.3).

> **1.3.c** **Description of the program's involvement and role in the following: 1) budgeting and resource allocation, including budget negotiations, indirect cost recoveries, distribution of tuition, and fees and support for fund-raising; 2) personnel recruitment, selection, and advancement, including faculty and staff; and 3) academic standards and policies, including establishment and oversight of curricula.**

Budget

Resource Allocation and Budget Negotiations

The budget planning process for the following fiscal year begins in the fall of the current fiscal year. Each fall, the MPH Program Director and Program Manager submit a list of budget requests to the LAS Dean. The Dean then prioritizes college-level requests and submits them to the university for further review and approval. After university-level decisions are made, the MPH program learns of its budget in the late spring/early summer. After the MPH program receives its budget, the Program Director and Program Manager develop an internal budget allocation plan based on expenditures from previous years as well as any upcoming projects/initiatives.

Indirect Cost Recovery

According to the *Disposition of Residual Balances: Guidelines and Procedures* developed by DePaul's Office of Research Services, residual balances are transferred to a specially established discretionary account in the Principal Investigator's college or school. The PI can then use the funds for up to three years. Additional information can be found in the *Residual Balances: Guidelines and Procedures* in the Resource File (RF: 1.3).

Distribution of Tuition and Fees

All collected tuition and fees are sent to the university system, which then distributes them to each college/school through the university-level budget planning process based on the course-college consumption patterns of the student body.

Support for Fundraising

University fundraising is done through the Office of Development within the Department of Advancement. The Office of Development strives to secure funding from alumni, friends, and external donors. According to the *Gift Acceptance and Processing Policy*, all gifts made to the university, including individual programs and departments, must be sent to the Department of Advancement for processing within one business day. The Department of Advancement then makes funds available to departmental accounts based on the donor wishes and relevant state law. Programs and departments are able to set up a fundraising page through the Department of Advancement website; the MPH program has set up such a page, and a donation link is up on the MPH program website.

Personnel

Recruitment and Selection
To recruit or replace faculty, the MPH Program Director submits a new initiative request that the LAS Dean proposes in a college wide request to the Provost for approval. Once the new initiative request is approved, the program selects a search committee and conducts an extensive search. Only tenure-line faculty are permitted to serve on the search committee, however, non-tenure-line faculty, staff and students can provide input to the committee when candidates interview. The personnel committee members cast a vote to determine the candidate of choice. With this vote and the feedback, the Program Director makes his recommendation to the Dean. The position rank is decided, and an offer is made to the selected applicant.

Faculty and Staff Advancement
The MPH program aligns its tenure and promotion criteria with the University Faculty Handbook. Full-time faculty are eligible for promotion and annual merit increases to base salary. The most recent MPH governance documents that outline tenure and/or promotion for full-time faculty were voted on and passed by the Program Committee on March 10, 2016 and can be found in the Resource File (RF: 1.3). The Program Director conducts MPH performance appraisals annually with primary faculty and staff. Faculty appraisals are based on their contract. For tenure-line faculty this includes teaching, research, and service. For non-tenure line faculty this includes teaching primarily, but may include administration. During the staff performance appraisal process, staff members reflect on accomplishments of the past year and set goals for the upcoming appraisal cycle.

Academic Standards and Policies

Standards and Policies
The MPH program aligns its academic standards and policies with LAS and the university. In some cases, MPH program standards exceed the standards of the college and/or university. All academic standards and policy decisions are made by the Program Committee.

Program admissions standards are set by the Program Committee in conjunction with Enrollment Management and Marketing and implemented annually by the Admissions Committee. Capstone standards are set by the Program Committee and implemented by the Capstone Committee during the annual review cycle.

Faculty members must maintain the academic standards set by the program for all courses taught. Academic standards for courses include core competency alignment, and alignment with university policies regarding grading, academic integrity, and attendance. Information regarding academic standards and expectations is outlined in the *Faculty and Staff Handbook* as well as the *Student Handbook*. Both documents are available for review in the Resource File (RF: 1.3).

Establishment and Oversight of Curricula

The MPH program is primarily responsible for its curriculum, and such decisions are made by the Program Committee. Major curricular modifications are also vetted through external stakeholders including alumni, practicum site supervisors, and external community partners. This level of decision-making is appropriate given the professional nature of the MPH degree and its alignment with rigorous accreditation standards.

A certain degree of LAS and university oversight exists. The MPH program must share its learning outcomes with the Office of Teaching, Learning, and Assessment. Each year the MPH program must conduct an assessment project which evaluates the program's success in student achievement of learning outcomes. This project culminates in the writing of a program assessment report submitted to the LAS Assessment Committee by October 1.

New graduate curricula and course modifications are developed by faculty and approved by the MPH Program Committee. Subsequently, curriculum proposals are reviewed by the College Committee on Curriculum and Planning (CCCP). After clearing CCCP in LAS, the proposal moves on to the Committee on Curriculum and Planning (CCP) at the university level. The CCP reviews and votes to approve proposals. The university Faculty Council then reviews the CCP decisions and votes on the proposals. Those proposals approved by Faculty Council are then sent to the Provost's office for final approval. After review at these various levels, new curricula and curriculum changes can be implemented.

1.3.d	If a collaborative program, descriptions of all participating institutions and delineation of their relationships to the program.

Criterion 1.3.d. is not applicable; the DePaul MPH program is not collaborative.

1.3.e	If a collaborative program, a copy of the formal written agreement that establishes the rights and obligations of the participating universities in regard to the program's operation.

Criterion 1.3.e. is not applicable; the DePaul MPH program is not collaborative.

1.3.f	Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

<u>Strengths</u>
The program is thoroughly integrated into an accredited university with a very clear organizational structure. It is recognized by both the college and the university as an autonomous unit. The MPH program is part of university governance and has clearly delineated policies regarding budgeting, personnel, and academic standards and policies in place.

<u>Weaknesses</u>
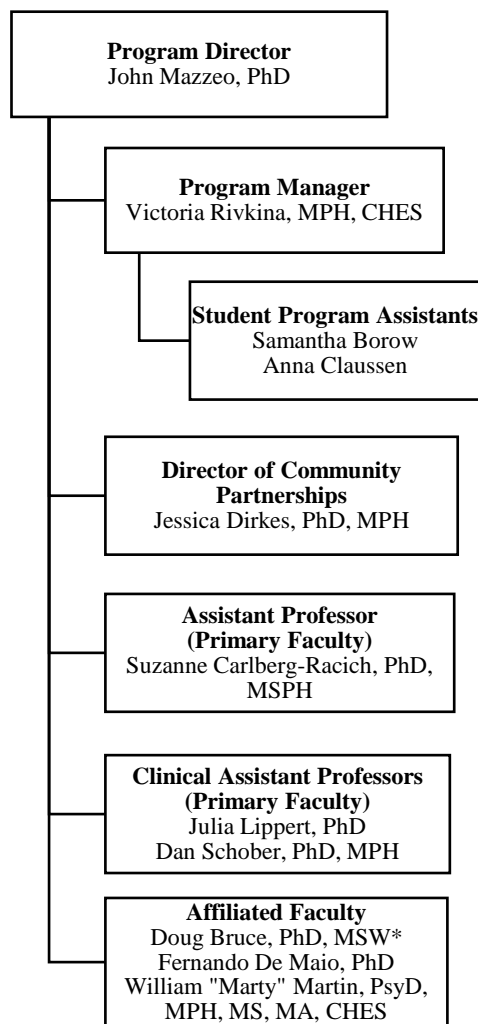No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

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.**

1.4.a **One or more organizational charts delineating the administrative organization of the program, indicating relationships among its internal components.**

Figure 1.4.a. Master of Public Health Program Organizational Chart

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                    ┌─────────────────────────┐
                    │    Program Director      │
                    │    John Mazzeo, PhD      │
                    └─────────────────────────┘
                              │
                    ┌─────────────────────────┐
                    │    Program Manager       │
                    │ Victoria Rivkina, MPH, CHES │
                    └─────────────────────────┘
                              │
                    ┌─────────────────────────┐
                    │ Student Program Assistants │
                    │    Samantha Borow        │
                    │    Anna Claussen         │
                    └─────────────────────────┘

                    ┌─────────────────────────┐
                    │  Director of Community   │
                    │      Partnerships        │
                    │  Jessica Dirkes, PhD, MPH │
                    └─────────────────────────┘

                    ┌─────────────────────────┐
                    │   Assistant Professor    │
                    │    (Primary Faculty)     │
                    │ Suzanne Carlberg-Racich, PhD, │
                    │          MSPH            │
                    └─────────────────────────┘

                    ┌─────────────────────────┐
                    │ Clinical Assistant Professors │
                    │    (Primary Faculty)     │
                    │    Julia Lippert, PhD    │
                    │  Dan Schober, PhD, MPH   │
                    └─────────────────────────┘

                    ┌─────────────────────────┐
                    │    Affiliated Faculty    │
                    │  Doug Bruce, PhD, MSW*   │
                    │  Fernando De Maio, PhD   │
                    │ William "Marty" Martin, PsyD, │
                    │   MPH, MS, MA, CHES      │
                    └─────────────────────────┘
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* Joint Appointment. Primary appointment is in the College of Science & Health; MPH is a secondary appointment. The letter of agreement can be found in the Resource File (RF 1.4).

Program staff are critical to the operations of the MPH program. The Program Director oversees the entire MPH program. This position is charged with all strategic initiatives to maintain, grow, and innovate the program. The Program Director is the unit's representative at all high-level strategic meetings at the college and university level. The Program Director is responsible for all performance appraisals within the MPH program. The Program Manager oversees the daily operations of the MPH program. This position oversees the program's operating budget, admissions, accreditation, and serves as the direct supervisor of the Student Program Assistants. The Director of Community Partnerships is responsible for all matters related to practicum. This position recruits new community partners to serve as practicum supervisors, maintains relationships with and provides support to existing community partners, and oversees the students' practicum application process and the practicum experience itself. Student Program Assistants support the administrative needs of the MPH program. These student workers manage the program's website and social media, assist with special events, and help the Program Manager and Director of Community Partnerships with on-going projects as well as ad hoc tasks, as assigned.

1.4.b   Description of the manner in which interdisciplinary coordination, cooperation, and collaboration occur and support public health learning, research, and service.

The Center for Community Health Equity
The Center for Community Health Equity (CCHE) was established in 2015 as a collaboration between DePaul University and Rush University. At DePaul, the center is housed under LAS and is co-directed by Fernando De Maio, PhD, a sociologist specializing the social determinants of health. The goal of CCHE is to improve community health outcomes and contribute to the elimination of health inequities in Chicago. The center has physical office space within the MPH program suite, including an office for co-director De Maio and a research lab for student graduate and research assistants. CCHE provides opportunities for MPH program students to get involved with Chicago-based research projects and hosts numerous lectures and workshops which MPH students are encourage to attend.

Consortium for Health Initiatives at DePaul University
The Consortium for Health Initiatives (CHID) at DePaul University views health inclusively and collaborates across the spectrum of health professions to deliver education for health in the 21st century. CHID promotes patient-centered healthcare with respect for all persons, commitment to integrity, ethical practice, excellence, advocacy, and justice. CHID supports and encourages interdisciplinary and inter-professional research, teaching, programs, and projects. CHID fosters cooperation within DePaul University and partnerships across the Chicagoland community to achieve this mission. The MPH program has contributed to CHID through participation in its Conference on Interprofessional Health Education, the development of a "DePaul Health" marketing strategy, and in curricular developments with strategic partners including Rush University. The MPH program benefits from CHID as a network to promote its events, and to make MPH students aware of relevant events held by other health academic units.

Affiliated Faculty Contributions and Collaboration
The DePaul MPH program takes advantage of the wealth of faculty knowledge across the
university. In addition to its primary faculty, DePaul MPH has three affiliated faculty members
who contribute instruction and service to the program. Professor Doug Bruce, PhD, MSW has
his primary faculty appointment in the Health Sciences department within the College of Science
and Health (CSH). Although Dr. Bruce's appointment and salary rest in CSH, he has the
designation of core faculty in the MPH program. Dr. Bruce teaches one course for the MPH
program, serves on the MPH Program Committee, and is highly involved with the BS-MPH
program in regard to recruitment in the undergraduate Health Sciences department. The MPH
Program Director contributes to Dr. Bruce's promotion and tenure evaluation, and both colleges
acknowledge his teaching, service, research, and personal engagement in promoting public
health as a specialty for both undergraduate and graduate students at DePaul University.

Professor Fernando De Maio, PhD has his primary faculty appointment in Sociology within
LAS. Dr. De Maio is affiliated faculty for the MPH program. He teaches one course for the
MPH program, serves on the MPH Program Committee, and co-directs the Center for
Community Health Equity. Dr. De Maio brings his sociology and global health perspective to
his collaboration with the MPH program.

Professor William "Marty" Martin, PsyD, MPH, MS, MA, CHES has his primary faculty
appointment in the Kellstadt Graduate School of Business within the Driehaus College of
Business. Dr. Martin is affiliated faculty for the MPH program. He teaches one course for the
MPH program, serves on the MPH Program Committee, and was instrumental in developing the
MBA-MPH joint degree program. Dr. Martin brings his business acumen and experience to his
contributions to the MPH program.

**1.4.c   Assessment of the extent to which this criterion is met and an analysis of the
program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met**.

Strengths
The program has clear internal organizational structure. Additionally, the MPH program
collaborates with and takes advantage of the numerous instruction, research, and service
opportunities available across the university. Furthermore, the program has collaborative faculty
relationships within LAS as well as other colleges.

Weaknesses
No weaknesses have been identified.

Plans to Improve

LAS is developing a Division of Urban Studies within the college. The MPH program is going to be an active part of that Division. There will be more opportunities for collaboration among faculty, more elective options for students, more opportunities for co-teaching, and potential for multidisciplinary engagement with community partners. In order to align with 2016 CEPH criteria, students in MPH 541: Biostatistics will be doing an interprofessional project with a class from the School of Public Service. The School of Public Service is also going to be a part of the Division of Urban Studies in LAS.

MPH Program Committee

For the purposes of administration, the MPH Program Committee includes the following: 1) MPH faculty (including tenure-line and full-time non-tenure-line full time whose appointment is within the MPH program); 2) affiliated faculty whose appointment is in another academic unit (these are full-time tenure-line or full-time non-tenure-line faculty), 3) professional staff in the MPH program (Program Manager and Director of Community Partnerships), and 4) a student representative.

The primary responsibilities of the MPH Program Committee are to oversee issues of: accreditation, admissions, governance and policy, workforce development, curriculum, capstone, practicum, assessment, and student concerns. Only faculty members have voting rights. Full-time non-tenure-line faculty cannot participate in matters of hiring, retention, and promotion. Only tenured faculty may participate in promotion and tenure for tenure-line faculty.

Administrative Team

The Administrative Team consists of the Program Director and all professional staff. Their responsibilities are to oversee the day-to-day administrative activities of the program, including college and university administrative tasks, operating within the accreditation requirements per CEPH, student issues, and budget management. This team meets regularly, a minimum of twice monthly, in a face-to-face meeting and will make decisions over email when needed.

Assessment Committee

This committee coordinates the annual assessment project required by LAS. Members of this committee determine an assessment topic with the input of the MPH Program Committee, collect information, conduct the analysis, prepare the report, and submit the report to LAS. The Program Manager serves as the chair of the assessment committee. This committee meets quarterly.

Capstone Committee

This committee oversees the integrated capstone/practicum portion of the curriculum. The committee evaluates and make recommendations on how best to improve this critical part of the program. Their work involves an examination of the curriculum, its relationship to the practicum, and best practices for improvement. The Director of Community Partnerships serves as the chair of the capstone committee. This committee meets quarterly.

Capstone Review Committee

This committee consists of at least three faculty members at DePaul who have training and/or experience in public health. The Director of Community Partnerships may invite outside faculty members to serve on this committee if needed. This service is significant because of the heavy workload in reading, reviewing, and discussing capstone projects. This committee meets after the final versions of the capstone theses have been submitted in MPH 604 but before the end of finals week of the Spring Quarter. The Director of Community Partnerships serves the chair of this committee. The Program Manager participates in the review meeting in an advisory role but is a non-voting member. The Director of Community Partnerships coordinates the review meeting, participates in the vote, and issues decision letters to students. The instructor(s) of MPH 604 works with students requiring remediation and bring these remediated theses to the Director of Community Partnerships and review committee for a decision. This committee meets twice during Spring Quarter of each academic year as part of the capstone review process.

Admissions Committee

This committee oversees the admissions, including evaluating and recommending improvements to the admissions process, reviewing applicants, and assist the Administrative Team in admissions-related events. The Program Director serves as the chair of this committee. This committee meets twice during the program's admissions cycle, once after the application deadline and once after all application materials have been reviewed.

Workforce Development Committee

This committee coordinates all activities relevant to workforce development. It has included the Health Disparities and Social Justice Conference, colloquia, and public health boot camp. The Program Manager serves as the chair of this Committee. This committee meets monthly in the period leading up to the Health Disparities and Social Justice Conference; all other business is completed via email.

Personnel Committee

The personnel committee oversees all matters of hiring and promotion and/or tenure. Only tenure-line faculty can serve on this committee. If needed, tenure-line faculty outside of the MPH program may participate with the approval of the LAS Dean. Only tenured faculty will participate in cases regarding promotion and tenure of tenure-line faculty.

Table 1.5.a.1 below shows internal MPH committee membership by faculty. Only MPH full-time faculty, staff, and student representatives (where applicable) are included in the table below. Adjunct faculty are not included here.

Table 1.5.a.1. MPH Program Committee Membership

	John Mazzeo	Victoria Rivkina	Jessica Dirkes	Suzanne Carlberg-Racich	Julia Lippert	Daniel Schober	Doug Bruce	Fernando De Maio	William "Marty" Martin	Student Reps
MPH Program Committee	X	X	X	X	X	X	X	X	X	X
Administrative Team	X	X	X							
Assessment Committee	X	X	X							
Capstone Committee	X		X	X	X	X				
Capstone Review Committee	X		X	X	X	X				
Admissions Committee	X	X	X		X	X				
Workforce Development Committee	X	X	X				X	X		X
Personnel Committee	X			X			X	X	X	

Advisory Members
Advisory Members fill specific service needs for the MPH program. The program's mission is rooted in a collaborative, applied approach to education that draws from the program's interdisciplinary development. Participation as an advisory member is open to faculty from other academic units at DePaul, adjuncts, community partners, and alumni. All advisory members will have public health training or experience and will provide service. This service is restricted to non-personnel matters only. Examples of service include serving as judges at the annual poster forum, attending strategic planning retreats, completing the annual stakeholder survey, and participating in feedback and information sessions. Advisory members make contributions to the Program on an individual basis—they are not required to meet or make decisions as a group. The program values the input of its advisory members and will keep its advisory members up-to-date about program developments, changes, and new initiatives. Table 1.5.a.2 below shows MPH Advisory Board membership for the last three academic years.

Table 1.5.a.2. MPH Advisory Board Membership by Academic Year

Academic Year	Name	Organization
2016-2017	Elizabeth Berkeley	McCormick Association YMCA
	Sheila Biggs	Access Community Health Network
	Andrea Palmer	Illinois Department of Public Health
	Allison Precht	CORE Center
	Kelly Rice	Howard Brown Health Center
	Siga Vasaitis	Access Community Health Network
2015-2016	Marita Bobba	Chicago Department of Public Health
	Megan Erskine	Chicago Public Schools
	Lilah Handler	EverThrive Illinois
	Erin Hantke	Heartland Health Outreach
	Janine Hill	EverThrive Illinois
	Suraj Madoori	AIDS Foundation of Chicago
	Andreanna Restrepo	Erie Family Health Center
	Frankie Shipman	Chicago Department of Public Health
	Elizabeth Strain	Consortium to Lower Obesity in Chicago's Children (Lurie Children's Hospital)
	Darnell Thomas	Chicago Department of Public Health
2014-2015	Juana Ballesteros	Illinois Department of Public Health
	Johnathon Briggs	Public Communications Broadcast
	Massimo Pacilli	Chicago Department of Public Health
	Stephanie Pelligra	Lurie Children's Hospital
	Nik Prachand	Chicago Department of Public Health
	Berenice Tow	Chicago Department of Public Health
	Yashika Watkins	Chicago State University

Student Representatives
One Student Representative from each cohort will be elected by MPH students from their number. The representative must be a full-time MPH student in good academic standing, with a minimum of four completed MPH courses at DePaul. Each year, students elect their student representative and must provide the MPH Program Committee with a description of the process and outcomes of the vote. Student Representatives are not involved in issues regarding individual student academic standing or program personnel issues. Table 1.5.a.3 below lists the student representatives for the last three academic years, by cohort.

Table 1.5.a.3. Student Representatives by Academic Year and Cohort

Academic Year	Name	Cohort
2016-2017	Emily Tamblyn	Loop
	Rachel Magoon	Lurie
2015-2016	Olatanye Aluko	Loop
	Tami Bartell	Lurie
2014-2015	Jacqueline Pence	Loop
	N/A	Lurie

1.5.b **Identification of how the following functions are addressed within the program's committees and organizational structure: 1) general program policy development; 2) planning and evaluation; 3) budget and resource allocation; 4) student recruitment, admission, and award of degrees; 5) faculty recruitment, retention, promotion, and tenure; 6) academic standards and policies, including curriculum development; and 7) research and service expectations and policies.**

General Program Policy Development
The Administrative Team comprised of the Program Director, Program Manager, and Director of Community Partnerships conduct general program policy development with input from the MPH Program Committee. All policies must be consistent with the administrative practices of LAS. To this end, the Program Director attends monthly Liberals Arts and Social Sciences Academic Council (LASAC) meetings as well as monthly meetings for LAS Graduate Programs Directors and Chairs, while the Program Manager attends monthly LAS staff meetings to stay abreast of programmatic and policy-related updates at the college level. All college-level initiatives are adapted to be appropriate for the MPH program, and any program policy updates made are shared with faculty and student representatives as the subsequent MPH Program Committee meeting, both verbally and in the meeting minutes.

Planning and Evaluation
Program planning occurs under the purview of the MPH Program Committee, the Administrative Team, and the Capstone Committee. Program evaluation occurs internally by the MPH Program Committee and by the Assessment Committee. Ongoing planning and evaluation initiatives occur during weekly Administrative Team meeting and monthly MPH Program Committee

meetings. The Capstone Committee meets as needed to discuss and capstone-related aspects of the program and implement changes as needed.

Annually, the MPH program undertakes a few large-scale planning and evaluation projects during its summer retreat. Prior to the retreat, the Administrative Team sets an agenda which is shared with the rest of the program at an MPH Program Committee meeting. All MPH Program Committee members, minus the student representatives, are invited to attend the retreat. Faculty attending the retreat are provided with preparatory materials in advance to ensure full engagement and participation. At the end of the retreat, detailed project plans with timelines and responsible parties are developed. The Administrative Team reviews project plan alignment with faculty during monthly MPH Program Committee meetings. For example, during the 2016 summer retreat, the MPH program worked on the following projects: 1) adding a Social Epidemiology concentration; 2) revising certain aspects of the capstone and student communication regarding the process; and 3) revising core competencies and indicators to ensure alignment with two concentrations.

The MPH program also conducts an annual assessment project for LAS. Each year, the MPH Assessment Committee conducts an assessment project which evaluates the program's success in student achievement of learning outcomes. This project culminates in the writing of a program assessment report submitted to the LAS Assessment Committee by October 1 of each year.

Budget and Resource Allocation
Once the MPH program receives its budget from the university and college in the spring of each year, the Program Director and Program Manager develop an internal budget allocation plan based on expenditures from previous years as well as any upcoming projects/initiatives. The MPH Program Committee serves an advisory role to the Program Director in regards to the budget. The Program Director provides a summary of non-salary expenditures to assist in budget planning.

Student Recruitment, Admission, and Award of Degrees
The Administrative Team oversees student recruitment. The Administrative Team works with LAS representatives from DePaul's Office of Enrollment Management and Marketing in the fall of each academic year to develop a recruitment strategy for the upcoming admissions cycle. The Program Director, Program Manager, Director of Community Partnerships, student program assistants, and additional student volunteers attend several recruitment events throughout the fall and winter prior to the March 1 application deadline. Recruitment events include open houses, in-person information session, virtual information sessions, and career fairs

The Admissions Committee oversees student admissions. The DePaul MPH program only admits students once per year to start in the fall. The application deadline for fall quarter admissions is March 1 of the same calendar year. Members of the Admissions Committee review and evaluate all completed applications and provide their scores to the Program Director and Program Manager. The Program Director and Program Manager finalize admissions

decisions and enter them into the admissions management system to be processed by the university.

The MPH program works with Office of the University Registrar to award degrees to students who meet all course and culminating experience requirements. The Capstone Review Committee reviews all submitted capstones and determines whether students receive a score of "Accepted with Distinction," "Accepted," or "Needs Remediation." If a student has a cumulative GPA of 3.75 or above and receives a capstone score of "Accepted with Distinction," he/she will graduate "with distinction" from the MPH program. Students apply for degree conferral in their final academic quarter. The University Registrar confirms with the MPH program that all degree requirements were met and finds out which students should graduate with distinction. Degrees are conferred by the University Registrar within a few weeks of the conclusion of the academic quarter during which students graduate. Students are notified of their degree conferral via email; official diplomas are then mailed to students.

Faculty Recruitment, Retention, Promotion, and Tenure
College- and university-level recruitment processes were described in criterion 1.3.c. At the program level, MPH Program Committee members participate actively in full time faculty recruitment. Program Committee members are asked to weigh in on full time position descriptions and to participate in the interview process. Members of the personnel committee, tenure-line faculty only, decide on the candidate short list for preliminary interviews (e.g., Skype), select candidates from this list for a campus visit interview, and vote on a hiring decision.

Program- and college-level documents specify the retention, tenure, and promotion criteria for tenure-track faculty. Additional information can be found in the Resource File (RF: 1.5). Full-time non-tenure-line faculty contracts may be renewed based on program need. These requests are made by the Program Director to the Dean of LAS. Full-time non-tenure-line faculty can be offered single year or multiyear contracts. There is no pathway that directly leads from full-time non-tenure-line to tenure-line status. However, there is promotion pathway within both of those lines. In the event that the program receives a tenure-line position, anyone who is eligible is encouraged to apply.

Academic Standards, Policies, and Curriculum Development
MPH program faculty members actively participate in changes to academic policy at the program level. Proposed changes in policy are first identified by the Administrative Team and then brought to the MPH Program Committee for discussion. Changes to academic policy are generally initiated by the Program Director. All changes must align with college and university standards and policies. In certain instances, specifically around curriculum development and modification, the university process discussed in criterion 1.3.c must be followed.

Research and Service Expectations and Policies

Research and service expectations for tenure-line faculty are outlined in the program's *Criteria for Tenure and Promotion* and the university Faculty Handbook. For full-time non-tenure-line faculty, expectations are articulated in their contracts and align with the *Contingent Faculty* document and the university Faculty Handbook. Full-time non-tenure-line faculty are not expected to contribute research. Full-time non-tenure-line faculty in MPH are expected to provide service and this is articulated in their contract. The MPH Program Director, in consultation with the LAS Dean, may elect to allocate a full-time non-tenure-line faculty member's instructional units and substitute for program administration. Affiliated faculty are not held to research expectations by the MPH program, those expectations and policies are set by their home academic units. However, any research they conduct that aligns with the MPH program is counted by the program as research contributions. Affiliated faculty provide service to the program by attending MPH Program Committee meetings and serving on committees.

1.5.c   A copy of the bylaws or other policy document that determines the rights and obligations of administrators, faculty, and students in governance of the program, if applicable.

The current version of the *MPH Program Bylaws* was voted on and approved on April 27, 2016. A copy of the bylaws can be found in the Resource File (RF: 1.5).

1.5.d   Identification of program faculty who hold membership on university committees, through which faculty contribute to the activities of the university.

Doug Bruce, PhD, MSW
- LGBTQ Studies Program Advisory Board (2014-2015, 2015-2016, and 2016-2017)
- Committee on Conflict of Interest in Sponsored Programs (2015-2016 and 2016-2017)

Fernando De Maio, PhD
- Committee of Research Policy (2014-2015)
- College of Science and Health Statistics Task Force (2014-2015)
- Health Sciences Council (2014-2015)
- Department of Health Sciences, Formal Review Committee (2015-2016)

William "Marty" Martin, PsyD, MPH, MS, MA, CHES
- Fair Business Practices Council (2014-2015)
- President's Diversity Council (2014-2015)
- Public Services Council (2014-2015 and 2015-2016)
- Vincentian Education Foundation Board (2014-2015 and 2015-2016)

- Coleman Entrepreneurship Center Advisory Committee (2016-2017)

John Mazzeo, PhD
- Department of Health Sciences, Health Science Council Member (2014-2015)
- Dean Search Committee Member for LAS (2015-2016)
- Department of Health Sciences, Personnel Committee (2016-2017)

1.5.e   Description of student roles in governance, including any formal student organizations.

Public Health Student Organization
The Public Health Student Organization (PHSO) was developed by students during the MPH program's inaugural year. The mission of PHSO is to develop students in public health practice. DePaul's PHSO aims to act as a liaison between students, faculty, and staff, to promote community involvement, and to facilitate education and advocacy in the profession of public health. The *PHSO Constitution* is available for review in the Resource File (RF: 1.5).

Each spring, the graduating PHSO officers hold elections to nominate PHSO officers for the following academic year. PHSO is comprised of the following officers: President, Vice President, Secretary, Treasurer, Communications Director, two MPH Student Representatives, one Undergraduate Student Representative, and one American Public Health Association (APHA) Campus Liaison. Membership is open to all MPH students as well as interested undergraduate students. PHSO holds regular meetings to discuss ongoing and future projects. Officers are in regular communication with MPH staff, and one MPH faculty member serves as PHSO Faculty Liaison on an annual, rotating basis. Student representatives attend MPH Program Committee meetings during the academic year; they report pertinent updates back to PHSO for distribution to the student body.

PHSO plays a key role in public health promotion at DePaul and across Chicago. The APHA Campus Liaison helps to create/conduct on-campus events for graduate and undergraduate students once per quarter. Additionally, PHSO hosts three service/volunteer opportunities for students each year—one event per quarter. Examples of these activities include volunteering in Chicago Public Schools to provide health centered lessons to youth, organizing events for National Public Health Week, and creating free on-campus events such as yoga classes. Students in PHSO also attend professional meetings, such as the American Public Health Association Annual Meeting and the MPH program's annual Health Disparities and Social Justice Conference. These professional meetings provide exceptional opportunities to bring expanded forms of experiential learning back into the classroom and to their cohort.

1.5.f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has a well-defined governance structure that is shared with faculty, staff, students, and external stakeholders, and the program includes stakeholders and students in its governance processes. All program faculty and staff are involved in multiple aspects of program governance. Given the fact that the DePaul MPH program is relatively small, all faculty and staff are engaged at various levels of program administration. The MPH program has a robust advisory board, and the Public Health Student Organization is actively involved in the community, both within the university and across the city of Chicago.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

> **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.**

> **1.6.a   Description of the budgetary and allocation processes, including all sources of funding supportive of the instruction, research, and service activities. This description should include, as appropriate, discussion about legislative appropriations, formula for funds distribution, tuition generation and retention, gifts, grants and contracts, indirect cost recovery, taxes or levies imposed by the university or other entity within the university, and other policies that impact the fiscal resources available to the program.**

University-Level Process

Each fall, DePaul University undertakes the process of planning its next fiscal year budget. Beginning in early September, each of three executive branches coordinates a local process, in conjunction with the respective deans, vice presidents, and their respective financial managers, to solicit budgetary requests to inform the university-wide planning and review process. The university-wide process is overseen by the Strategic Resource Allocation Committee (SRAC).

In anticipation of the university-wide process, the President appoints a nine-member SRAC committee with membership comprised of the Executive Vice President, the Provost, the Vice President for Finance, two deans—generally selected on a rotating basis—the Faculty Council President, plus one supporting faculty member selected by the Faculty Council, the Staff Council President, and the Student Government Association President. The Executive Vice President chairs the SRAC committee, which is the central body ultimately charged with aggregating all budgetary requests from the three major executive branches:

- Presidential units
- Operational units, those within the Executive Vice President's structure and
- Academic units, comprised within Academic Affairs which report directly to the Provost

The SRAC committee oversees presentations from financial liaisons within each executive branch who advocates on behalf of each local reporting unit. SRAC then assembles a tentative budget after all presentations are made and deliberates in order to recommend a draft budget to the President. The draft budget is compiled in such a manner that financial parameters, conveyed to administration annually from the Finance Committee of the Board, are upheld.   The Office of Budgets and Operational Reporting is the supporting unit which compiles the draft budget for the President's consideration. Upon presidential endorsement, the draft budget is submitted for additional review and consideration to the Finance Committee. When the Finance Committee endorses the proposed budget it is then presented to the full Board of Trustees, for another review and potential vote to accept/reject. Assuming a vote to adopt or accept the draft budget is obtained, generally in early spring, the budget is then official and is instantiated in the university's financial system, effective July 1 through June 30.

The budgetary process encompasses all resource types (i.e. unrestricted and restricted), including a capital budget to drive the institution. Financial parameters, from the Finance Committee of the Board, guide the annual budgetary process and generally find footing in the university's overall financial plan which underwrites the governing strategic plan document of the proposed year that is being planned.

Executive Branch-Level Process
In response to the university-wide budget process, each executive area solicits college/school or divisional budgetary plans through a web-based application housed within the university's enterprise resource system, PeopleSoft Financials. The web-based plan serves as a unifying medium for all planned amounts in a prospective budget preparation cycle. Planning instructions are assembled and disseminated from the respective executive branches to college and divisional leadership and their respective financial managers, in support of the planning deadlines and other deliverables anticipated for SRAC consideration. College and divisional leadership then work within their structures to solicit, review, refine and prioritize the individual unit or department-specific requests. It is not uncommon for the unit or department-specific requests to be reviewed and alterations made, generally discussed and negotiated between the governing executive and the respective dean or vice president of an area, prior to the presentation to SRAC. Often, changes or alterations in unit or departmental level request are informed by information obtained in a tandem process, administered by the Tuition Pricing Committee (TPC). TPC outcomes feed into the SRAC process, and provide details concerning proposed tuition pricing, financial aid allocations and enrollment/credit hour projections relevant to the prospective year being planned. Other changes can occur as a result of the SRAC deliberations, particularly if financial parameters are unable to be satisfied after each of the three executive branches provides their proposals. Then, each executive area is asked to work through their respective units to trim plans, in consideration of meeting the desired financial parameters, and this can mean a previously advanced departmental request may be changed. These alterations become apparent, at the SRAC level, as the committee strives to balance university-wide objectives and priorities.

College- or Divisional-Level Process
Within each college/school or division local budgetary process practices vary. Some areas centralize their planning efforts, often at the leadership level of the dean or vice president's office, while others disburse the initial effort and refine it centrally after solicitation and return. The College of Liberal Arts and Social Sciences, the college in which the Master of Public Health program resides, utilizes a centralized college-approach to its annual planning efforts.

Each fall, the Budget Office arm of the LAS Dean's Office plans each unit's budget for the following fiscal year. Units under the College's umbrella, such as MPH, are solicited to provide specific line-item budget requests to the Budget Office. These line-item requests are submitted by the Budget Office on behalf of individual units. In addition, the Budget Office reviews prior year spending and cost share requests, which include additional support that the unit has asked from the Budget Office throughout the previous fiscal year, to determine the budget request for the following fiscal year. The LAS Budget Office attempts to build all routine, recurring

operating costs into the unit's base budget on an annual basis. Where new funds are required for initiatives that are planned for the first time, the college follows the standard university process for requesting new funds as units' efforts align with the university's strategic plan.

Program-Level Process
The MPH program receives its operating budget from the LAS Budget Office based on the university-level and college-level processes described above. There is no direct correlation between the tuition income of the program and its operating budget. Once the MPH program receives its budget each year, the Program Director and Program Manager develop an internal spending plan based on expenditures from previous years as well as any upcoming projects/initiatives. The MPH Program Committee serves an advisory role to the Program Director in regards to the budget. The Program Director provides a summary of non-salary expenditures to assist in budget planning.

The MPH program must follow the policies of the university as it relates to indirect cost recovery. According to the *Disposition of Residual Balances: Guidelines and Procedures* developed by DePaul's Office of Research Services, residual balances are transferred to a specially established discretionary account in the Principal Investigator's college or school. The PI can then use the funds for up to three years. Additional information can be found in the *Residual Balances: Guidelines and Procedures* in the Resource File (RF: 1.6).

Regarding gifts and donations, the MPH program must follow the university's *Gift Acceptance and Processing* policy. Additional information and a full copy of the policy can be found in the Resource File (RF: 1.6). During the 2012-2013 academic year, the MPH program received a large gift earmarked specifically for the annual winner of the Grace Budrys Award for Excellence in Community Health. The MPH program works with the LAS budget office to dispense this gift annually to the winner of the student award.

1.6.b   A clearly formulated program budget statement, showing sources of all available funds and expenditures by major categories, since the last accreditation visit or for the last five years, whichever is longer. If the program does not have a separate budget, it must present an estimate of available funds and expenditures by major category and explain the basis of the estimate. This information must be presented in a table format as appropriate to the program. See CEPH Data Template 1.6.1.

The data presented in Table 1.6.b below comes directly from the program's budget statement, known internally as the Mobius. The operating budget is the sole portion of the program's overall budget over which the program has direct oversight. The budget statement developed by the university is available for review in the Resource File (RF: 1.6). The program's university-level budget statement includes lines for tuition revenue, salary, benefits, etc.

Table 1.6.b. MPH Program Operating Budget and Expenditures, by Fiscal Year

	FY 13	FY 14	FY 15	FY 16	FY 17
Source of Funds					
University Funds	24,705	40,114	47,940	46,225	51,273
Expenditures					
Operating Expenses[1]	7,455	12,455	9,386	7,796	15,049
Conference Travel	11,753	19,459	18,528	18,126	17,607
Program Dues/Fees	630	1,304	1,000	4,121	6,463
Events/Entertainment	4,150	5,232	13,178	9,045	11,937
Other	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

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

If total annual expenditures exceed the program's operating budget, the LAS budget office will complete a budget transfer. For example, in FY 2014, the MPH program exceeded its operating budget by $17.00; the LAS budget office was able to cover this discrepancy.

1.6.c   If the program is a collaborative one sponsored by two or more universities, the budget statement must make clear the financial contributions of each sponsoring university to the overall program budget. This should be accompanied by a description of how tuition and other income is shared, including indirect cost returns for research generated by public health program faculty who may have their primary appointment elsewhere

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Criterion 1.6.c. is not applicable; the DePaul MPH program is not collaborative.

1.6.d   Identification of measurable objectives by which the program assesses the adequacy of its fiscal resources, along with data regarding the program's performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

Table 1.6.d. Outcome Measures for Fiscal Resources

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
1. Travel support for program faculty conference presentation or substantive role	Qualifying faculty receive full requested funding amount allowed by the college for conference travel	5/5	6/6	6/6
2. Budget to fund program personnel	1 Program Director, 1 Director of Community Partnerships, 1 Program Manager, and 2 Student Program Assistants	5/5	5/5	5/5
3. Funding for community partner engagement events, including workforce development initiatives	Health Disparities and Social Justice Conference, Public Health Boot Camp, Forum, Stakeholder Meeting, APHA Reception	5/5	3/3	4/4

1. The College of Liberal Arts and Social Sciences (LAS) maintains a policy that conference travel is covered for faculty who present or have a substantive role in the conferences to which they wish to travel. For the last three academic years, all faculty requesting MPH program funding for conference travel were granted such funding.
2. The MPH program needs five administrative personnel to ensure operational success: a Program Director, a Director of Community Partnerships, a Program Manager, and two Student Program Assistants. For the last three academic years, the MPH program has been able to fund all five positions.
3. The MPH program utilizes fiscal resources in order to engage community partners through numerous public-facing events each academic year. For the last three academic years, the MPH has been able to secure necessary funding to host all planned events, including workforce development initiatives.

1.6.e   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program consistently receives needed funding and support from LAS and DePaul University. Additionally, mechanisms and processes are in place to engage in fiscal resources allocation and to request additional funding, if needed.

Weaknesses
No weaknesses have been identified.

Plans to Improve

There are no improvement plans needed at this time.

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.**

1.7.a **A concise statement or chart defining the number (headcount) of primary faculty employed by the program for each of the last three years, organized by concentration. See CEPH Data Template 1.7.1.**

Table 1.7.a. Headcount of Primary Faculty by Concentration

	2014-2015	**2015-2016**	**2016-2017**
Community Health Practice	5	6	6

1.7.b **A table delineating the number of faculty, students, and SFRs, organized by concentration, for each of the last three years (calendar years or academic years) prior to the site visit. Data must be presented in a table format (see CEPH Data Template 1.7.2) and include at least the following information: a) headcount of primary faculty; b) FTE conversion of faculty based on % time devoted to public health instruction, research, and service; c) headcount of other faculty involved in the program (adjunct, part-time, secondary appointments, etc.); d) FTE conversion of other faculty based on estimate of % time commitment; e) total headcount of primary faculty plus other (non-primary) faculty; f) total FTE of primary and other (non-primary) faculty; g) headcount of students by department or program area; h) FTE conversion of students, based on definition of full-time as nine or more credits per semester; i) student FTE divided by primary faculty FTE; and j) student FTE divided by total faculty FTE, including other faculty. All programs must provide data for a), b), and i) and may provide data for c), d), and j) depending on whether the program intends to include the contributions of other faculty in its FTE calculations.**

Note: CEPH does not specify the manner in which FTE faculty must be calculated, so the program should explain its method in a footnote to this table. In addition, FTE data in this table must match FTE data presented in Criteria 4.1.a. (Template 4.1.1) and 4.1.b (Template 4.2.2).

Table 1.7.b. Faculty, Students, and Student/Faculty Ratios by Concentration

	HC Primary Faculty	FTE Primary Faculty[1]	HC Other Faculty	FTE Other Faculty[1]	HC Total Faculty	FTE Total Faculty	HC Students	FTE Students[2]	SFR by Primary Faculty FTE	SFR by Total Faculty FTE
CHP 2016-2017	6.00	4.78	6.00	1.67	12.00	6.44	65.00	37.00	7.74	5.74
CHP 2015-2016	6.00	4.78	7.00	1.67	13.00	6.44	71.00	46.00	9.63	7.14
CHP 2014-2015	5.00	3.89	6.00	1.58	12.00	5.47	67.00	37.00	9.51	6.76

1. FTE Primary and FTE Other Faculty are calculated based on the percentage of time they contribute to the MPH program.
2. FTE Students is calculated in accordance with DePaul University, which uses the Illinois Board of Higher Education (IBHE) standard: 1 FTE is equal to 12 graduate credit hours per quarter.

1.7.c   A concise statement or chart concerning the headcount and FTE of non-faculty, non-student personnel (administration and staff) who support the program.

The MPH program has two staff members. The Program Manager dedicates 50% FTE to program support in the form of accreditation efforts, workforce development, and budget monitoring and administration. The Director of Community Partnerships also gives 50% FTE to program support in the form of Administrative Team participation, community partner engagement, and public-facing event execution.

1.7.d   Description of the space available to the program for various purposes (offices, classrooms, common space for student use, etc.), by location.

The MPH program office is located on the seventh floor of 14 East Jackson Boulevard on DePaul's Loop campus. The MPH program has a designated suite accessible by employee identification card swipe access only to MPH faculty and staff. The MPH suite is locked and secured outside of regular business hours.

In the suite, the designated reception area includes a student program assistant desk and a common area with seating for visitors. Nine offices are available to the MPH program faculty and staff, including a student program assistant office and a graduate assistant office. There is also a conference room in the MPH suite which is used for program meetings, information sessions, committee meetings, guest presentations, and community/stakeholder meetings. Currently, the MPH program shares two of the offices in its suite with the Center for Community Health Equity.

All MPH faculty and staff have access to a black and white printer, a color printer, and a copy machine with copying and scanning capabilities in the MPH suite itself. The copy machine can only be accessed with employee identification card swipe access. The MPH program has no dedicated computer lab in its suite; however, students, faculty, and staff have access to six computer labs on the Loop campus and seven on the Lincoln Park campus. Computers in all labs are equipped with Statistical Package for the Social Sciences (SPSS) software.

The MPH program has no dedicated classrooms. Space is allocated through the classroom reservation system on a quarterly basis as needed. Classes held at the Loop campus are in recently renovated classrooms which utilize state-of-the-art technology.

The MPH office is accessible via an elevator bank with four elevators and via stairs. The floor on which the MPH office is housed has restrooms and a water fountain.

The MPH program has storage in the form of built-in filing cabinets in every office, in the conference room, and in the common area of the suite. Additionally, large items are stored in a separate storage closet on the sixteenth floor of the same building and retrieved as necessary.

1.7.e   A concise description of the laboratory space and description of the kind, quantity, and special features or special equipment.

This criterion is not applicable. The space allocated to the DePaul MPH program does not include any laboratory space.

1.7.f   A concise statement concerning the amount, location, and types of computer facilities and resources for students, faculty, administration, and staff.

Students have access to more than 1,000 computers (both PCs and Macs) in labs, lounges, and lobbies across each campus. The Loop campus provides access to six computer labs and the Lincoln Park campus to seven labs. Additional technology is located within residence halls, granting students access to one standard lab experience PC and an Intelliprint printer for students to print to using their own computer or the one in the residence hall. All University computers are equipped with appropriate software (including SPSS) for completion of MPH coursework. To see a complete list of software packages available to students in the computer labs and classrooms, visit: https://offices.depaul.edu/information-services/services/Software/Pages/Software-for-Lab-and-Classroom-Computers.aspx.

Additionally, there are over 400 technology-enabled classrooms across the DePaul campuses. Technology resources in these rooms include desktop computers, LCD projectors, DVD/VHS combo players, i-clicker audience response systems, connections for laptops, and integrated,

amplified sound systems. Specialty rooms exist across the University for classes with specific needs, and additional technology is available upon request.

For additional assistance, students have access to the Social Science Research Center located on DePaul's Lincoln Park campus. The Social Science Research Center (SSRC) was established within LAS centralize support for faculty and students engaged in behavioral and social science research at DePaul University. The Center serves as a communications hub, a resource and data repository, and a technical assistance provider that would help put socially relevant research at DePaul into the service of "the public."

The SSRC's resources and services that are available to faculty, staff, and students include:
1. **Technical Services:** SSRC offers technical assistance with obtaining external funding and carrying out research for all faculty, staff, and students.
2. **Training, Workshops, Seminar Series:** SSRC provides customized, capacity-building training, workshops, and seminars in a variety of areas.
3. **Conference Room and Lab Space:** SSRC conference space can be reserved for workshops, meeting, and brown bag lunches, while Macro and Micro computer labs are available to conduct training, workshops, and informal session.
4. **Research Resources:** SSRC offers access to data repositories, software, data-archiving tools, and online software/data management tools.

1.7.g   A concise description of library/information resources available for program use, including a description of library capacity to provide digital (electronic) content, access mechanisms, training opportunities, and document-delivery services.

The DePaul University Libraries provide support for the curricular and research needs of the Master of Public Health program through an extensive array of resources and services. More than 400 article and indexing databases are accessible from home, office, and throughout all DePaul campus locations. Through an authenticating proxy server, students, staff, and faculty have instant access to full text database content and literature, either directly, or through a full text link resolver.

The University provides online full text access to over 47,000 journal titles, at least 1,500 of which relate directly to the health sciences. The DePaul Libraries' collection of well over 800,000 volumes includes a strong and current monograph collection in Public Health and related fields. Most of the public health collection resides in the John T. Richardson Library, located at DePaul's Lincoln Park campus. Students also have access to DePaul's Loop Library, conveniently located across the street from the MPH program office. DePaul students, staff, and faculty have library borrowing privileges at some 75 additional academic libraries through the 'I-Share' network of the Consortium of Academic and Research Libraries in Illinois (CARLI). Beyond I-Share, materials can be accessed through the ILLIAD Inter-Library Loan system. Librarians stand by ready to chat with students online about their research needs and provide

guidance almost 24/7. Additional support is provided by Christopher Parker, MLS, PhD, who acts as the MPH Program subject liaison at the library. During the summer of 2012, Dr. Parker worked to create a research guide specifically for the field of public health, which provides many useful access points for both students and faculty who wish to locate research or background information resources. The public health research guide is updated each year to ensure it is current with the field. MPH 600 students are also required to attend a one-hour seminar presented by Dr. Parker which introduces them to the DePaul library system and teaches them how to navigate databases commonly used in the MPH program.

1.7.h   A concise statement of any other resources not mentioned above, if applicable.

There are additional electronic resources available to both students and faculty. By far, the most significant and frequently used are Campus Connect and Desire to Learn. Campus Connect is a software platform that provides access to the course catalog, registration services, advising, and financial services. This site utilizes university login identification and a unique identifier. Desire to Learn (D2L) is the primary learning management system used by the University. This application provides dedicated course access. It provides instructors with an online platform to create a course website; post course syllabi, assignments, readings, quizzes, and grades; collect materials in an electronic drop box; and provide an electronic forum for discussion.

1.7.i   Identification of measurable objectives through which the program assesses the adequacy of its resources, along with data regarding the program's performance against those measures for each of the last three years. See CEPH Outcome Measures Template.

Table 1.7.i. Outcome Measures for Programmatic Resources

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
1. Office space	All full-time faculty and staff have a single office	5/5	6/6	6/6
2. Computer resources	All full-time faculty and staff have up-to-date computers	5/5	6/6	6/6
3. Meeting space	MPH program has dedicated meeting space	0/1	1/1	1/1
4. Security	MPH office suite is equipped with emergency response alarm	0/1	0/1	1/1

1. It is necessary for all full-time faculty and staff in the MPH program to have a single, dedicated office. For the last three academic years, all program faculty and staff have had such a space.

2. All full-time MPH faculty and staff must have up-to-date computers on which do their work. For the last three academic years, this outcome measure has been met. Faculty and staff desktop computers are purchased by LAS and replaced every three to four years, depending on their warranty.
3. In its previous location on the Lincoln Park campus, the MPH program did not have a dedicated meeting space. Since moving to its current Loop location at the beginning of the 2015-2016 academic year, the program now has a conference room.
4. The MPH program is located on an open campus in the Chicago Loop. To ensure safety, the program has an emergency response alarm at its reception desk. During academic years 2014-2015 and 2016-2016, the program has not had the excess operating budget to request such an alarm from Public Safety. In academic year 2016-2017, however, the MPH program was able to utilize its operating budget to purchase an emergency alarm button for the suite.

1.7.j   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has adequate faculty and staff resources to support the curriculum and program administration. Additionally, faculty, staff, and students in the program have access to numerous resources at the university level. These resources include: technology resources such as computers and software; library resources such as research guides, dedicated staff, and publication sharing services; and space resources such as a newly constructed MPH suite, wired classrooms, and numerous state-of-the-art computer labs. Access to all these resources underscores the MPH program's integration into both the College of Liberal Arts and Social Sciences as well as the university as a whole.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

> **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.**

> **1.8.a   A written plan and/or policies demonstrating systematic incorporation of diversity within the program. Required elements include the following:**

i.   Description of the program's under-represented populations, including a rationale for the designation.

The DePaul Master of Public Health program has identified racial/ethnic minorities and Lesbian, Gay, Bisexual, Transgender, and Queer/Questioning (LGBTQ) persons as its underrepresented populations. The program's rational for these designations is centered on health outcomes.

In Chicago, racial/ethnic minorities experience poorer health outcomes as compared to non-Hispanic whites. According to the *Chicago Plan for Public Health System Improvement: 2012-2016*, non-Hispanic blacks have a higher all-cause mortality rate, coronary heart disease mortality, stroke mortality rate, and cancer mortality rate than any other racial/ethnic group in the city (CDPH, 2012). Diabetes mortality rates are also higher for non-Hispanic blacks and Hispanics, when compared to non-Hispanic whites (CDPH, 2012).

It has been found that persons identifying as LGBTQ also experience poorer health outcomes as compared to those identifying as heterosexual. Bisexual and transgender persons are in worse health that their heterosexual and non-transgender counterparts, and lesbians are less likely to utilize certain preventative services than heterosexual females (MDPH, 2009). Additionally, older lesbian, gay, and bisexual adults were found to have a higher risk of disability, poor mental health, smoking, and alcohol consumption than their heterosexual counterparts (Fredriksen-Goldsen, et al, 2013). A recent study conducted by the Chicago Department of Public Health noted stark mental health disparities between LGBTQ and heterosexual Chicago residents. For example, LGBTQ youth in Chicago are three times more likely to attempt suicide than their heterosexual peers (CDPH, 2016).

Because the mission of the DePaul MPH program focuses on training public health leaders to work collaboratively with diverse communities to reduce health disparities and promote health equity, the program has designated those experiencing poor health outcomes as its underrepresented populations. Through the curriculum, policies, and practices of the program, faculty, staff, and students demonstrate a commitment to diversity and to serving its underrepresented populations.

ii. **A list of goals for achieving diversity and cultural competence within the program, and a description of how diversity-related goals are consistent with the university's mission, strategic plan, and other initiatives on diversity, as applicable.**

The DePaul MPH program aims to achieve diversity and cultural competence by:
1. Providing students with exposure to course content that captures the differences in health outcomes across diverse populations and introduces students to the concept of cultural humility in professional public health practice settings;
2. Ensuring students have the opportunity to interact with diverse populations through practicum, which supports understanding of cultural differences and diverse views; and
3. Ensuring that the composition of the student body and faculty complement are representative of the demographics of Chicago

The diversity-related goals of the program are consistent with the mission and strategic plan of DePaul University. One of the overarching goals of Vision 2018, the university's current strategic initiative, is to foster diversity and inclusion. This is accomplished by strengthening campus-wide diversity and building a vibrant university community. *Vision 2018* can be viewed in its entirety in the Resource File (RF: 1.8).

iii. **Policies that support a climate free of harassment and discrimination and that value the contributions of all forms of diversity; the program should also document its commitment to maintaining/using these policies.**

The University Catalog includes clear policies regarding harassment and discrimination and the value of diversity. The following links provide policies in particular areas:

DePaul's Anti-Discrimination and Anti-Harassment Policy:
http://policies.depaul.edu/policy/policy.aspx?pid=299
This document is password protected but a copy is located in the Resource File (1.8).

DePaul University's Non-Retaliation Policy:
http://policies.depaul.edu/policy/policy.aspx?pid=231
A copy is also provided in the Resource File (1.8).

DePaul's Equal Employment Opportunity and Affirmative Action Statement:
http://offices.depaul.edu/diversity/about/Documents/Equal%20Employment%20Opportunity%20and%20Affirmative%20Action%20Statement%20of%20Policy.pdf

The Office of Institutional Diversity and Equity oversees all hiring processes to ensure diversity in faculty and staff hires. Their policies can be found on their website:

https://offices.depaul.edu/diversity/advocacy/Documents/Faculty%20Search%20Guidelines.pdf

DePaul University's Anti-Discrimination and Anti-Harassment Policy states: "It is the policy of DePaul University that no person shall be the object of discrimination or harassment on the basis of race, color, ethnicity, religion, sex, gender, sexual orientation, national origin, age, marital status, parental status, family relationship status, physical or mental disability, military status, or other status protected by local, state, or federal law in its employment or its educational settings. DePaul University reserves the right to take actions that are consistent with it policies and procedures to deal with individuals found to have engaged in harassment, discrimination, and/or retaliation in violation of this policy."
http://policies.depaul.edu/policy/policy.aspx?pid=299

iv.   Policies that support a climate for working and learning in a diverse setting.

The MPH program's Mutual Tolerance and Respect Statement published in the MPH Student Handbook is as follows: "Public health deals with controversial issues from multiple perspectives and consideration of these issues may cause disagreements among people or may evoke strong personal feelings, depending on each person's individual experience, histories, identities, and worldviews. Therefore, in all interactions and communications, it is important that students and faculty strive to have mutual respect and tolerance for one another and for any course guests and members of the community. If a student feels they have been offended by any content or interactions, they are encouraged to discuss this with the instructor or another faculty member."

Annually, all faculty, staff, and student workers in the MPH office complete a general compliance training. This online course highlights policies and standards in the University's Code of Conduct. These policies and standards provide a framework for acceptable business conduct at the university and within the MPH program. Exercises in the course are designed to raise awareness and clarify expectations of acceptable behavior.

The program promotes a safe and inclusive climate for students by conducting program-specific assessments of on-going situations at the university, locally, and nationally. As appropriate, program staff send out communications to students that uphold the values of the field and the program.

The faculty of the MPH program actively engage in research projects that tend to the needs of diverse populations, aiming to achieve health equity for underrepresented community members. The program also provides student opportunities through conference support to attend events that consider issues of diversity. In March 2017, the program sponsored seven students to attend a one-date conference focused on women in global health.

The program uses its listserv to promote university- and area-wide events that address issues of diversity and health. Because the program is located in such a diverse location, these diverse populations are students of the program, and they are continuously exposed to and supported in diverse learning environments.

All program interview scripts include questions about diversity. All faculty, staff, and student workers interviewing with the MPH program are given the following prompts: "what is your definition of diversity?" and "please describe an experience where you worked with someone different than you." From the outset, everyone planning to work for the MPH program knows that diversity considerations are an important aspect of the way the program operates.

v.   Policies and plans to develop, review, and maintain curricula and other opportunities including service learning that address and build competency in diversity and cultural considerations.

As stated in section 1.8.a.ii, the MPH program is committed to providing students with exposure to course content that captures the differences in health outcomes across diverse populations and introduces students to the concept throughout its curriculum. In *MPH 600: Preparation for Public Health Practice,* one class session is dedicated to cultural humility. A community partner working with diverse populations throughout her career conducts a two-hour cultural humility workshop with students. All students going through the program participate in this workshop. In *MPH 501: Introduction to Public Health*, students are introduced to health in the context of social determinants of health and diversity. Using Chicago as a case study, students learn how those identifying as a racial/ethnic minority or LGBTQ may have poorer health outcomes as compared to White, heterosexual residents of the city. Additionally, students also conduct a hands-on, field-based community health assessment in which they have to go out to a Chicago neighborhood to determine assets and barriers to health in diverse community. In *MPH 525: Program Evaluation*, students engage with community organizations serving diverse populations to develop an evaluation of one of their existing programs. Evaluations are developed in the context of diversity consideration and cultural appropriateness.

In accordance with the goal outlined in 1.8.a.ii, the program strives to provide students with the opportunity to interact with diverse populations through the course of their practicum placements in community organizations and public health agencies that provide services to underrepresented populations. A full list of practicum sites can be found in criterion 2.4.b. The mission, programs, or service areas of practicum sites are directly linked to ensuring that students can build competency in diversity and cultural considerations. For example, the mission of BUILD is "to engage at-risk youth in the schools and on the streets, so they can realize their educational and career potential and contribute to the stability, safety, and well-being of our communities" (BUILD, 2013). CALOR, on the other hand, first

"established itself as a key provider of specialized services for Latinos impacted by HIV/AIDS…now serves a wider community, including all people of color with HIV/AIDS and other disabilities" (CALOR, 2017). The Howard Brown Health Center "exists to eliminate the disparities in healthcare experienced by lesbian, gay, bisexual, and transgender people through research, education, and the provision of services that promote health and wellness" (Howard Brown Health, 2017). While it is not realistic to require all practicum sites to work with underrepresented populations as designated by the MPH program, the Director of Community Partnerships ensures that all sites available to students provide a hands-on learning opportunity underpinned by social determinants of health, particularly in the context of Chicago.

vi.   **Policies and plans to recruit, develop, promote, and retain a diverse faculty.**

In order to recruit a diverse faculty, the MPH program advertises its available positions broadly. With the help of DePaul's Office of Institutional Diversity and Equity (OIDE), the program is able to advertise its job postings in manner that reaches a diverse audience. Additionally, job descriptions highlight diversity, community engagement, and social justice. Prospective faculty understand the university's and the program's commitment to diversity upon application. Throughout the hiring process, the program works with the LAS Dean's Office to ensure diversity is taken into consideration from recruitment through hire. Finally, the search committee is attentive to diversity considerations in its selection of candidates. The program also makes a concerted effort to reach out to diverse, qualified faculty across the university who can contribute to the public health curriculum by serving as affiliated faculty.

Regarding development and retention of a diverse faculty, the MPH program encourages faculty to take advantage of the university-wide programs and resources for faculty of color. Faculty in the MPH program are regularly encouraged to attend conferences, seminars, and lectures that focus on or include issues of diversity.

In addition to primary instructional and affiliated faculty, the MPH program recruits and retains diverse adjunct faculty. Diversity of backgrounds and expertise is especially critical for providing an array of elective courses and courses for the Certificate in Global Health. Although adjunct faculty are not included in criterion 1.8.e below, individuals identifying as the program's under-represented populations are present among the program's adjunct faculty.

vii.   **Policies and plans to recruit, develop, promote, and retain a diverse staff.**

In order to recruit a diverse staff, the MPH program advertises its available positions broadly. With the help of OIDE, the program is able to advertise its job postings in manner

that reaches a diverse audience. Additionally, job descriptions highlight diversity, community engagement, and social justice. Prospective staff understand the university's and the program's commitment to diversity upon application. Throughout the hiring process, the program works with the LAS Dean's Office to ensure diversity is taken into consideration from recruitment through hire. Finally, the search committee is attentive to diversity considerations in its selection of candidates.

In regard to development and retention, MPH program staff are encouraged to participate in and network with diverse university groups. For example, the Program Manager is involved with the DePaul Women's Network as a member of the Operations Team. Additionally, staff in the MPH program are regularly encouraged to attend seminars and lectures that focus on or include issues of diversity.

viii. Policies and plans to recruit, admit, retain, and graduate a diverse student body.

In order to recruit a diverse student body, the MPH program recruits widely across Chicago and in the Midwest region. Due to Chicago's diverse demographic composition and the university's centralized location within the city, recruitment efforts encompass prospective students who represent racial and ethnic minority groups.

Program and college representatives advertise the program at various events that draw diverse groups of prospective students. Additionally, for prospective students doing a basic internet search, the program's website and promotional materials highlight its commitment to diversity in order for students to understand how diversity fits into the mission and values of the program. The MPH Admissions Committee takes diversity into consideration when recommending applicants for admission to the program. There is also a diversity-related question as part of the program's application.

In order to promote the retention and graduation of all students, the university developed the Center for Access and Attainment (CAA) in 2008. In addition to supporting the entire DePaul student body, the CAA administers programs for low-income and first-generation students as well as a fellowship program for students of color. The MPH program takes advantage of the initiatives and resources of the university to ensure diversity is thoughtfully considered at every stage of interaction with the student body. The Graduate Assistantship program is another promotion and retention resource utilized by the MPH program. Through a 16-credit hour course reduction and $7500 stipend, the Graduate Assistantship program offers students significant financial support while engaging them in a career-building year-long research opportunity with faculty.

ix.   Regular evaluation of the effectiveness of the above-listed measures.

Prior to the current accreditation process, the DePaul MPH program had not engaged in any formal diversity evaluation procedures to determine the effectiveness of its diversity measures. Previously, some informal procedures provided evidence that the program was successful in recruiting and retaining a diverse student body, particularly in terms of racial/ethnic composition. The Program Manager provided a summary of student demographics after the completion of each admissions cycle. This summary satisfied the program's diversity objectives regarding students. All student diversity data was previously obtained from official university records. Data from these records only captures one of the programs key diversity measures: racial/ethnic minority status. It does not capture persons identifying at LGBTQ. As of spring 2017, questions to gather the diversity data of students have been added to the competency self-assessment survey that all students complete at orientation and upon leaving the program. This allows the program to gather information about both of the program's diversity measures.

While diversity data for faculty and staff has been available, it has not formally evaluated by the program. As the number of faculty and staff is relatively small and remains relatively constant, ongoing evaluation of the diversity of these two groups had not occurred, but it is required during the hiring process to ensure effective implementation of diversity policies. Going forward, the program will implement formal evaluation of faculty and staff diversity every three years during its strategic planning process to assess and ensure the diversity of these groups. The next strategic planning session is planned for the summer of 2019. The timing of strategic planning sessions is intentional and aligns with the appointment of the MPH director, which occurs every three years.

1.8.b   Evidence that shows that the plan or policies are being implemented. Examples may include mission/goals/objectives that reference diversity or cultural competence, syllabi and other course materials, lists of student experiences demonstrating diverse settings, records and statistics on faculty, staff, and student recruitment, admission, and retention.

Syllabi and Other Course Materials
All course syllabi and standard course outlines contain the required statements regarding accessibility (see RF Syllabi). In *MPH 600: Preparation for Public Health Practice*, an entire lecture is dedicated to cultural humility. Throughout the remainder of the curriculum, although courses may not be explicitly labeled as diversity courses, classroom discussion of diversity occurs regularly. Instructors integrate discussion of health disparities, social determinants of health, and utilize the diverse and segregated Chicago as a canvas for course content. Instructors also incorporate field-based assignments and guest lecturers to encourage student engagement with diverse communities, persons, and perspectives.

In *MPH 501: Introduction to Public Health*, students are introduced to health in the context of social determinants of health and diversity. Using Chicago as a case study, students learn how those identifying as a racial/ethnic minority or LGBTQ may have poorer health outcomes as compared to White, heterosexual residents of the city. Additionally, students conduct a hands-on, field-based community health assessment in which they have to go out to a Chicago neighborhood to determine assets and barriers to health in a diverse community. In *MPH 511: Health Behavior Theory*, students learn about the ways in which various theories can be applied to diverse populations. In *MPH 512: Research Methods*, the instructor discusses human subjects research and ethical implications for diverse populations, both past and present. In *MPH 525: Program Evaluation*, students engage with community organizations serving diverse populations to develop an evaluation of one of their existing programs. Evaluations are developed in the context of diversity consideration and cultural appropriateness. In *MPH 602: Community Health Assessment*, students create a community health profile which analyzes the health issues facing either a specific geographic community or a priority population. Community health profiles regularly assess issues and implications of diversity.

Student Experiences
Students in the DePaul MPH program come from diverse racial, ethnic, socioeconomic, and employment backgrounds, which allows students to interact with diverse populations when in class. As discussed above, practicum experiences often place students in community organizations and public health agencies that serve diverse populations and are located in diverse neighborhoods.

The program provides opportunities and encourages students to participate in various diversity-promoting experiences at the university and across the city. At DePaul, students are encouraged to submit their work to the LGBTQ Creative and Scholarly Works Contest and attend a WALL OF RESPECT: A discussion on Art, Activism, and Community event. More broadly across Chicago, students receive announcements about events such as the Community Forum of Refugee Resettlement and Support and the International Women's Day Global Health Symposium. The Public Health Student Organization (PHSO) also hosts events which provide students the opportunity to engage with diverse populations, both at DePaul and throughout Chicago.

Faculty members of the MPH program often do research and/or service work that either serves diverse populations or considers issues of diversity, and students have the opportunity to receive individualized mentoring and volunteer with these faculty members. For example, a group of students from the on-site cohort at Lurie Children's Hospital recently volunteered to work with faculty member Suzanne Carlberg-Racich to complete a project started in class for the Chicago Recovery Alliance. Through this experience, students received individualized mentorship on working in a culturally appropriate manner with the stigmatized population of injection drug users.

The Center for Community Health Equity (CCHE), co-directed by affiliated faculty member Fernando De Maio, hosts a series of events and guest lectures each academic term. All lectures and events focus on health disparities and include a diverse array of perspectives of researchers and practitioners throughout Chicago. For students with a broader diversity lens, the MPH program offers the Global Health Certificate. This four-course certificate trains students in key aspects of global health using a multidisciplinary approach to analyze the underlying determinants of health, the relationship between public health and development, and public health practice.

1.8.c   Description of how the diversity plan or policies were developed, including an explanation of the constituent groups involved.

The MPH program developed its diversity plan during Administrative Team and Program Committee meetings. During Administrative Team meetings, the Program Director, Program Manager, and Director of Community Partnerships discussed how best to align the program's diversity initiatives with the populations the program aims to serve. The Administrative Team also discussed how diversity was to be woven through the curriculum and practicum experience and set initial diversity targets for faculty, staff, and students. Once a draft of diversity policies and plans was developed, the Administrative Team presented it at a Program Committee meeting to solicit feedback from faculty and student representatives. MPH program faculty and student representatives provided substantial feedback regarding the draft diversity policies and plans. After discussion and consensus building, the Program Committee created the existing diversity plan for the program.

For the current iteration of the program's diversity plan, faculty, staff, and student representatives were the only groups involved in its creation. This plan will be reevaluated in the context of 2016 CEPH criteria alignment. Current students, alumni, and community partners will be invited to participate.

To ensure consistency with the university's diversity initiatives, the MPH program aligned it diversity initiatives with the university's strategic plan. In DePaul's strategic plan, Vision 2018, Goal 4 is to Foster Diversity and Inclusion: http://offices.depaul.edu/president/strategic-directions/vision-2018/Pages/goal-4-foster-diversity-and-inclusion.aspx. This goal includes the following objectives: 1) strengthening campus-wide diversity by recruiting and retaining a diverse faculty, staff, and administration; and 2) sustaining the diversity of the student body. Vision 2018 was developed by a broad group of constituents starting in January 2011, with plan implementation in September 2012. The strategic plan was intended to be inclusive and grassroots. All colleges and schools across the university were involved. Individuals on the strategic planning task force included administrators, faculty, staff, students, alumni, and board members. Strategic plan alignment is assessed and reported to the university community annually.

1.8.d Description of how the plan or policies are monitored, how the plan is used by the program, and how often the plan is reviewed.

As stated in criterion 1.8.a.i, the diversity-related goals of the program including providing students with exposure to course content that discusses matters of diversity and cultural humility and ensuring students have the opportunity to interact with diverse populations through their practicum experience. These goals are monitored during curricular planning as well as during the selection of practicum sites. When planning and/or updating their courses, faculty ensure that issues related to diversity are covered to the extent appropriate. MPH 600 includes a workshop on cultural humility based on its importance to the program's diversity goals. Additionally, when selecting viable practicum sites, the Director of Community Partnerships works to ensure that selected organizations are in some capacity serving the underrepresented populations as determined by the program.

While the program strives to adhere to its diversity plan by monitoring its goals and measurable objectives, the plan is not regularly reviewed in its entirety in a systematic way. Much of the monitoring occurs piecemeal by various faculty and staff in the program. For example, faculty monitor their own course content, and it is also reviewed by the Program Director annual assessment. The Director of Community Partnerships monitors practicum sites for adherence to the program's goals. The Program Manager collects student and faculty/staff diversity metrics. Student diversity metrics are discussed during admissions each spring, but faculty/staff diversity is not regularly discussed.

In regard to maintaining alignment with the university's diversity initiatives, the program reviews the annual reports of Enrollment Management and Marketing and Vision 2018 when they come out each year. If additional alignment is required of the program, the MPH Program Committee determines how best to incorporate needed changes into its operations.

1.8.e Identification of measurable objectives by which the program may evaluate its success in achieving a diverse complement of faculty, staff, and students, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Data Template 1.8.1. At a minimum, the program must include four objectives, at least two of which relate to race/ethnicity. For non-US-based institutions of higher education, matters regarding the feasibility of race/ethnicity reporting will be handled on a case-by-case basis. Measurable objectives must align with the program's definition of under-represented populations in Criterion 1.8.a.

Table 1.8.e.1 below shows the diversity outcomes for the faculty, staff, and students of the MPH program for the last three academic years. The data collected to determine if the program is achieving a diverse compliment of faculty, staff, and students is aligned with the underrepresented populations are defined in criterion 1.8.a above.

Table 1.8.e.1. Diversity Outcomes Summary for Faculty, Staff, and Students

Category/Definition	Method of Collection	Data Source	Target	2014-2015	2015-2016	2016-2017
Racial/ethnic minority faculty & staff[1]	Self-report	Human Resources Hiring Form	40%	30%	45%	27%
Racial/ethnic minority students[2]	Self-report	Admissions Form	40%	39%	45%	37%
Faculty/staff identifying as LGBTQ[3]	Self-report	Faculty/Staff Research & Service Survey	5%	N/A	N/A	22%
Students identifying as LGBTQ[4]	Self-report	Competency Self-Assessment Survey	5%	N/A	N/A	11%

1. The program has a breakdown of faculty/staff by specific race/ethnicity. Information can be seen in Table 1.8.e.2 below.
2. The program does not have a breakdown of students by specific race/ethnicity.
3. LGBTQ data for faculty/staff were not collected prior to the 2016-2017 academic year.
4. LGBTQ data for students were not collected prior to the 2016-2017 academic year.

Table 1.8.e.2. Faculty and Staff Complement by Race/Ethnicity

Race/Ethnicity	2014-2015, (n=9)	2015-2016, (n=11)	2016-2017, (n=11)
African American/Black	1, 11%	2, 18%	1, 9%
Asian	0, 0.0%	1, 9%	1, 9%
Caucasian/White	5, 56%	6, 55%	7, 64%
Hispanic/Latino	1, 11%	0, 0%	0, 0%
Other	1, 11%	1, 9%	1, 9%
Unknown	1, 11%	1, 9%	1, 9%

1.8.f   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met with commentary**.

Strengths

The university environment, program mission, curriculum, practicum experience, and student organization focus on providing and supporting opportunities for students to understand matters of diversity and cultural humility as well as to interact with diverse populations. The DePaul MPH program trains its students to become practitioners who are able to work with its designated underrepresented populations in a culturally and contextually appropriate manner. At

the university and program levels, policies are in place to support a climate of working in a diverse setting. Additionally, the program successfully works to recruit and retain a diverse student body.

Weaknesses
- Prior to 2017, only diversity metrics collected by the university were being reviewed by the program. No program-specific diversity-related data collection had been conducted.
- Faculty/staff diversity data was not regularly evaluated by the program.
- The program's diversity plan was not regularly reviewed in its entirety in a systematic way.

Plans to Improve
- Diversity questions have been added to the faculty/staff research and services survey and the student competency assessment survey so all of the program's diversity-related measurable objectives can be reviewed each year.
- The program will implement formal evaluation of faculty and staff diversity every three years during its strategic planning process to assess and ensure the diversity of these groups. The next strategic planning session is planned for the summer of 2019.
- Beyond simply looking at demographics, the MPH program will identify additional ways to capture how the program serves its students of color. For example, the program will collect data to determine the extent to which students of color apply for and/or take advantage of opportunities such as graduate assistantships, independent studies, and program sponsored events.

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.

2.1.a	An instructional matrix presenting all of the program's degree programs and areas of specialization, including bachelor's, master's, and doctoral degrees, as appropriate. If multiple areas of specialization are available, these should be included. The matrix should distinguish between professional and academic degrees for all graduate degrees offered and should identify any programs that are offered in distance learning or other formats. Nondegree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.1.

The DePaul Master of Public Health program offers the professional MPH degree as a stand-alone degree, as a combined BS-MPH degree, and as a joint MBA-MPH degree, as can be seen in Table 2.1.a below.

Table 2.1.a. Instructional Matrix – Degrees and Specializations

Degree Program	Academic	Professional
Master's Degrees		
Community Health Practice		MPH
Joint Degrees		
Community Health Practice		BS-MPH
Community Health Practice		MBA-MPH

2.1.b	The bulletin, or other official publication, which describes all degree programs listed in the instructional matrix, including a list of required courses and their course descriptions. The bulletin or other official publication may be online, with appropriate links noted.

The current University Catalog can be accessed via the DePaul University website. MPH program information exists in several places within the University Catalog. The Public Health landing page under university degree requirements (http://www.depaul.edu/university-catalog/degree-requirements/graduate/class/public-health-mph/Pages/default.aspx) provides an overview of the program and links to learning outcomes, MPH degree requirements, and the student handbook. The Public Heath landing page under LAS departments

(http://www.depaul.edu/university-catalog/colleges-and-schools/class/departments/public-health/pages/about-the-department-of-public-health.aspx) provides an overview of the program and links to a list of faculty as well as a description of the Global Health Certificate.

Degree requirement information for the BS-MPH is housed under the College of Science and Health, on the Health Sciences department webpage (http://www.depaul.edu/university-catalog/degree-requirements/undergraduate/csh/health-sciences-bs/Pages/combined-bachelors-masters-program.aspx). Because the MPH requirements for the BS-MPH are the same as those for the stand-alone MPH degree, there is no distinction between the MPH and the BS-MPH on the Public Health landing pages in the LAS University Catalog.

Program information and degree requirements for the MBA-MPH joint degree are located both on the College of Business webpage as well as the College of Liberal Arts and Social Sciences webpage. The College of Business webpage (https://www.depaul.edu/university-catalog/degree-requirements/graduate/business/health-sector-management-mba-mph-in-public-health/Pages/default.aspx) includes information about the program overview, MPH requirements, and MBA core/concentration requirements. The LAS webpage (https://www.depaul.edu/university-catalog/degree-requirements/graduate/class/public-health-mph-mba-in-health-sector-managment/Pages/default.aspx) includes information about the program overview, learning outcomes, MPH requirements, and MBA core/concentration requirements.

The DePaul University Catalog gets updated each October and April to stay current with relevant program changes.

2.1.c   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The MPH program offers one stand-alone MPH degree in addition to a joint BS-MPH degree and a combined MBA-MPH degree. All MPH degrees are professional and have a Community Health Practice concentration. The MPH program makes information about its offerings publicly available through the regularly monitored and updated University Catalog.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

> **2.2   Program Length. An MPH degree program or equivalent professional master's degree must be at least 42 semester-credit units in length.**

> **2.2.a   Definition of a credit with regard to classroom/contact hours.**

DePaul University operates on the quarter system. All courses offered by the MPH program are 4 credit hours. Each 4-credit hour course at the university requires 30 classroom/contact hours over the duration of the 10-week DePaul quarter, not including finals week.

> **2.2.b   Information about the minimum degree requirements for all professional public health master's degree curricula shown in the instructional matrix. If the program or university uses a unit of academic credit or an academic term different from the standard semester or quarter, this difference should be explained and an equivalency presented in a table or narrative**

The DePaul MPH program requires 56 quarter hours for stand-alone MPH degree completion. Additionally, MPH students must complete a culminating experience as discussed in criteria 2.4 and 2.5 below.

The BS-MPH program also requires 56 quarter hours of MPH coursework in order to complete the MPH portion of the joint degree. There are five MPH classes that count towards the BS degree, but no BS classes count towards the MPH degree. Additionally, BS-MPH students must complete the traditional MPH culminating experience as discussed in criteria 2.4 and 2.5 below.

The MBA-MPH joint degree requires 36 quarter hours of MPH coursework in order to complete the MPH portion of the degree. There are five MBA classes that count towards the MPH degree, but no MPH classes count towards the MBA degree. Additionally, MBA-MPH students must complete the traditional MPH culminating experience as discussed in criteria 2.4 and 2.5 below.

> **2.2.c   Information about the number of professional public health master's degrees awarded for fewer than 42 semester credit units, or equivalent, over each of the last three years. A summary of the reasons should be included.**

Criterion 2.2.c is not applicable to the DePaul MPH program. No students have been awarded a degree for fewer than 56 quarter credit hours in the last three years.

2.2.d   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

<u>Strengths</u>
The program has clearly delineated degree requirements that are in alignment with CEPH minimum requirements. The MPH program openly and publicly advertises its degree requirements and supports students in ensuring degree completion. DePaul's MPH program is ideal for professionals with traditional work schedules wanting to pursue such a degree. The MPH program has not awarded any degrees to students who have not successfully completed the minimum degree requirements.

<u>Weaknesses</u>
No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

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. The areas of knowledge basic to public health include the following: 1) Biostatistics – collection, storage, retrieval, analysis, and interpretation of health data; design and analysis of health-related surveys and experiments; and concepts and practice of statistical data analysis; 2) Epidemiology – distributions and determinants of disease, disabilities, and death in human populations; the characteristics and dynamics of human populations; and the natural history of disease and the biologic basis of health; 3) Environmental Health Sciences – environmental factors including biological, physical, and chemical factors that affect the health of a community; 4) Health services administration – planning, organization, administration, management, evaluation, and policy of health and public health problems; and 5) Social and Behavioral Sciences – concepts and methods of social and behavioral sciences relevant to the identification and solution of public health problems.

2.3.a **Identification of the means by which the program assures that all graduate professional public health degree students have fundamental competence in the areas of knowledge basic to public health. If this means is common across the program, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each. See CEPH Data Template 2.3.1.**

Table 2.3.a. Required Courses Addressing Public Health Core Knowledge Areas for MPH Degree

Core Knowledge Area	Course Number & Title	Credits
Biostatistics	MPH 541: Biostatistics[1]	4
Epidemiology	MPH 502: Introduction to Epidemiology	4
Environmental Health Sciences	MPH 503: Introduction to Environmental Health	4
Social & Behavioral Sciences	MPH 511: Health Behavior Theory	4
Health Services Administration	MPH 513: Public Health Administration	4

1. MBA-MPH students do not take MPH 541. Instead, they take GSB 420: Applied Quantitative Analysis as part of their business school coursework. The syllabus for GSB 420 can be found in the Resource File (RF: 2.11).

The DePaul MPH program has developed a curriculum that culminates in a professional degree which prepares students to work as public health practitioners in community health. The program assures that all graduating students have fundamental competence in the areas of knowledge basic to public health through five required courses. As shown in Table 2.3.a, each of the five courses specifically focuses on one of the core knowledge areas. No waivers or transfer credits are permitted for the above-mentioned core knowledge area courses, or for any DePaul MPH courses.

The core public health knowledge acquired in these courses is then applied during a nine-month practical experience, to be discussed in section 2.4 below, as well as the culminating capstone thesis, project, and presentation, to be discussed in section 2.5 below.

2.3.b   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses and plans relating to this criterion.

This criterion is **met**.

<u>Strengths</u>
The program has clearly defined courses for each of the five public health core knowledge areas, and all students are required to successfully complete those courses in order to earn their degree. Additionally, students have ample opportunity to demonstrate mastery of the knowledge gained in those courses through a community-based practical experience as well as an academic culminating experience. Students graduating from the DePaul MPH program attain the required breadth and depth of knowledge in the five core areas of public health.

<u>Weaknesses</u>
No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

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.

2.4.a   Description of the program's policies and procedures regarding practice placements, including the following: 1) selection of sites; 2) methods for approving preceptors; 3) opportunities for orientation and support for preceptors; 4) approaches for faculty supervision of students; 5) means of evaluating student performance; 6) means of evaluating practice placement sites and preceptor qualifications; and 7) criteria for waiving, altering, or reducing the experience, if applicable.

Overview
The practicum experience constitutes nine months of professional community health-focused practice that is expected to engage public health graduate students in public health activities. The practicum generally begins on the first day of DePaul's Autumn Quarter and officially ends on the last day of Spring Quarter. The purpose of the practicum is to provide students a structured, comprehensive, and integrated application of their MPH coursework to enhance and further develop their professional competencies in a public health practice setting. The complete *Practicum Manual* can be found in the Resource File (RF: 2.4). The practicum is required by the MPH program for degree completion.

Practicum Prerequisites
The following are prerequisites for placement in the practicum:
1. Students must be entering their final year of the program.
2. Students must take and pass the year-long MPH 600: Preparation for Public Health Practice in the academic year immediately preceding their placement in order to be placed in practicum.
3. Students considering practicum placement are matched at qualified placement sites through a competitive application process in the spring prior to beginning their placements in the fall. Students who do not complete this application process are not eligible for practicum placement. Students must be in good academic standing in order to participate in the practicum application process.

Practicum Project
The practicum project is a tailored, highly-individualized item developed in conjunction with and under the direction of the practicum site supervisor that is intended to fulfill an articulated agency need for further or current use. Students work on the project during their practicum hours.

Examples of previously completed projects include: a decision support tool to assist school staff in linking student survivors of sexual assault to resources and services; a nutrition and physical activity health education program for Latino adolescents; an evaluation of a diabetes care training program for school staff; a data analysis plan for an injection drug use surveillance

program; and an academic manuscript draft based on the results of an adolescent food allergy risk taking study.

Practicum Hours
At DePaul University, the practicum begins on the first day of the Autumn Quarter and ends on the last day of Spring Quarter. Students are required to meet with their site supervisors during the first week of class to discuss practicum logistics, the Learning Agreement, and potential capstone projects. Students are required to submit their hours monthly to the Director of Community Partnerships for review and approval through the MPH 699 Desire to Learn (D2L) site.

Students are required to commit 8-10 hours per week to their practicum site, for a minimum of 250 hours over the course of the nine-month placement. Students are required to be physically onsite at the agency for the majority of these hours; any offsite hours must be noted on the monthly log. Hours will be audited quarterly to assess progress toward meeting the total requirement. Students whose hours are deficient or who do not turn in required paperwork in a timely fashion may meet with substantial academic penalties, up to and including dismissal from the practicum.

MPH 699: Community Public Health Practice
While in practicum, students are required to enroll in MPH 699, a zero-credit, Pass/Fail course. MPH 699 is a year-long course with no physical class time. Rather, the course D2L site serves as the centralized location for practicum paperwork, hour counts, and the coordination of practicum-related administrative matters. Students are required to successfully complete MPH 699 to be eligible for degree conferral.

Selection of Sites
Sites are selected based on a number of criteria, including the population served, area of health focus, type of public health focus, the number of students entering practicum for that academic year, and the site's ability to house, adequately supervise, and provide well-rounded field-based public health experiences to graduate practicum students. Additionally, sites must demonstrate a strong agency commitment to community health and service to vulnerable populations.

The Director of Community Partnerships personally visits each site annually to perform a physical review of the site environment, setting, and public health activities. The Director of Community Partnerships also visits each new, potential practicum site to assess the site and potential site supervisor's eligibility to serve as a practicum site. Please see the Resource File (RF: 2.4) for the site eligibility screening form.

Methods for Approving Preceptors
Site supervisors are required to hold an advanced degree in a public health or health-related field (e.g., MPH, MSW, MSPH, MS in Health Psychology, PhD, MD, etc.), have significant experience working in a public health setting, and hold a position equivalent to "manager" or "supervisor" in their agency. Alternatively, site supervisors without advanced degrees must demonstrate significant public health training and experience in the field and hold a position equivalent to "manager" or "supervisor" in their agency. In this context, "significant," in regards

to site supervisors without advanced degrees, means a minimum of five years clinical or field experience.

The Director of Community Partnerships personally meets with each supervisor annually to mutually review student performance, orient one another regarding current agency and University practices, and foster ongoing campus-community partnerships. Site supervisors also provide a current resume/CV and contact information sheet annually to the MPH program.

Opportunities for Orientation and Support for Preceptors
Site supervisors have the opportunity to meet with the Director of Community Partnerships annually. Additionally, the Director of Community Partnerships sends numerous communications via email about the practicum process to all site supervisors throughout the academic year. Site supervisors also have access to the Director of Community Partnerships via email and phone as needed.

Once per academic year, the MPH program hosts a Stakeholder Meeting during which practicum site supervisors can provide feedback to the program and obtain support from other site supervisors. In future years, the MPH program will also host a site supervisor panel at its annual Health Disparities & Social Justice (HDSJ) Conference. As the conference is held in August, site supervisors can discuss issues, get questions answered, and share best practice before the start of the academic year in September. This began in August of 2017.

Approaches for Faculty Supervision of Students
Students completing practicum are simultaneously enrolled in a three-course capstone sequence which is taught by primary instructional faculty in the MPH program. Students receive regular supervision from their instructor through the classroom setting, as well as individual meetings as necessary. The Director of Community Partnerships also serves as the students Practicum Advisor and is available to support students and troubleshoot any issues that may arise.

Means of Evaluating Student Performance in Practicum
Practicum site supervisors are required to complete quarterly evaluations of the MPH student(s) under their supervision. Autumn Quarter and Winter Quarter evaluations are linked directly to the Learning Agreement and serve as progress evaluations. The Spring Quarter evaluation, on the other hand, is comprehensive and examines the degree to which the student has met the MPH program's practicum placement learning objectives and assesses overall participation in the practicum. At the discretion of the site supervisor, evaluations can be shared with students to encourage continuous improvement and professional development.

Means of Evaluating Practice Placement Sites
Students participating in practicum are required to submit quarterly evaluations of the site and practicum site supervisor. Student evaluations of their practicum experience are confidential and are not share with site supervisors. The Director of Community Partnerships reviews each of these evaluations and conducts an annual in-person site visit to perform a physical review of the site environment, setting, and public health activities.

Means of Evaluating Preceptor Qualifications
The Director of Community Partnerships meets with each site supervisor annually to ensure proper preceptor qualifications, as described above, are met by the site. Site supervisors also provide a current resume/CV and contact information sheet to the MPH program at the beginning of each academic year.

Criteria for Waiving, Reducing, or Altering the Practicum Experience
Due to the integrated nature of the practicum and capstone learning experiences, the DePaul MPH program does not permit students to waive, reduce, or alter the practicum experience.

2.4.b   Identification of agencies and preceptors used for practice experiences for students, by specialty area, for the last two academic years.

Table 2.4.b. MPH Student Practicum Placements by Academic Year

Student Name	Agency Name	Preceptor Name	Preceptor Title
AY 2017-2018			
Ayegoro, Olumide	Access Community Health	Siga Vasaitis, MHA	Project Manager, Clinical Operations
Badalamenti, Kaitlyn	Lurie Children's Hospital – Hematology	Alexandra Batts, MPH	Project Coordinator
Borow, Samantha	Presence Health	Sue Ellen Schumacher, MA	Program Manager
Bowers, Shannon	Chicago Department of Public Health – Project CHAT	Thomas Clyde	NHBS HIV Testing Coordinator
Cain, Tarae	Illinois Perinatal Quality Collaborative	Patricia Lee King, PhD, MSW	State Project Director
Camacho, Alfonso	Action for Healthy Kids	Heidi Milby, MPH	School Program Manager
Castro, Myles	CORE Center	Allison Precht, MA, LPC, CADC	Project Director
Council, Regina	Illinois Chapter of the American Academy of Pediatrics	Elise Groenewegen	Coordinator, Early Childhood Development
Eluobaju, Debra	Heartland Health Outreach – Refugee Health Program	Erin Hantke, MPH	Associate Director, Refugee and Community Health Programs
Fegan, Jacqueline	Illinois Chapter of the American Academy of Pediatrics	Tom Bradach	Coordinator, Early Childhood Development
Jaeger, Emilie	Howard Brown	Kelly Rice, MPH	Case Management Program Manager

Joblin, Amelia	Action for Healthy Kids	Heidi Milby, MPH	School Program Manager
Johnson, Lacey	Chicago Department of Public Health – Condom Availability and Distribution and CHAT*	Sarah Parchem, MPH	NHBS HIV Testing Coordinator
Kendall, LeChaun	Illinois Department of Public Health – Office of Women's Health and Family Services	Andrea Palmer, MPA, MBA, CHSM	Chief, Division of Maternal, Child and Family Health Services
McClay, Demetrius	Rush School Based Health Center at Crane High School	Katie Dato, MSN, RN, CNL	RN Program Coordinator
Mendoza, Kathryna	Gardeneers	May Tsupros	Co-Executive Director
Miller, Amber	Illinois Department of Public Health – Office of Women's Health and Family Services	Andrea Palmer, MPA, MBA, CHSM	Chief, Division of Maternal, Child and Family Health Services
Reynolds, Rachel	Consortium to Lower Obesity in Chicago's Children – Evaluation	Sarah Welch, MPH	Early Childhood Programs Manager
Rickman, Alyssa	Erie Neighborhood House	Micaella Verro, MPH	LHL Program Manager
Shtym, Nataliya	Heartland Health Outreach – Uptown Clinic (FQHC)*	Erin Hantke, MPH	Associate Director, Refugee and Community Health Programs
Streb, Ashley	CORE Center	Allison Precht, MA, LPC, CADC	Project Director
Wilson, Elizabeth	Health Connect One	Sadie Wych, MPH	Program Manager
Wozniak, Sarah	Consortium to Lower Obesity in Chicago's Children – Health Education	Liz Strain, MPH, CHES	Health Educator
AY 2016-2017 – Loop Cohort			
Ali, Javeria	Chicago Department of Public Health – Performance Management	Kirsti Bocskay, PhD	Epidemiologist IV
Boike, Connor	Chicago Department of Public Health – Epidemiology	Kingsley Weaver, PhD	Epidemiologist IV

Craig, Derek	Illinois Chapter of the American Academy of Pediatrics	Elise Groenewegen	Coordinator, Early Childhood Development
DeMarco, Camille	CORE Center	Allison Precht, MA, LPC, CADC	Project Director
Desmond, Michael	DePaul Interfaith Veterans Program	Sonya Roy-Singh, MA	Coordinator
Ebeling, Lauren	Chicago Department of Public Health – STI/HIV/AIDS	Thomas Clyde	Public Health Administrator 2
Egab, Iman	Cambodian Association of Illinois	Kaoru Watanabe	Associate Director
Eluobaju, Debra	Consortium to Lower Obesity in Chicago's Children – Early Childhood	Katelyn Kanwischer, MS	Early Childhood Program Manager
Evans, Michelle	CORE Center	Allison Precht, MA, LPC, CADC	Project Director
Hunter, Taylor	Presence Health	Noah Franklin, MPA	Program Manager
Hussein, Hayder	Lurie Children's Hospital – Telemedicine	Stephanie Pelligra, MPH	Project Manager
Ibrahim Puri, Jessica	EverThrive Illinois – Cooking Matters	Lilah Handler, MSW	Program Coordinator
Johnson, Iesha	Action for Healthy Kids	Heidi Milby, MPH	Senior Field Manager
Kabashekye, Flora	United African Organization	Nancy Asirifi-Otchere	Program Coordinator
Keating, Erin	Lurie Children's Hospital – Hematology	Alexandra Batts, MPH	Project Coordinator
King, Brianna	Lurie Children's Hospital – Strengthening Chicago's Youth	Becky Levin, MPH	Director
Lemon, Briana	BUILD	Jim Bell, MSW	Manager, Health & Wellness Services
Magri, Molly	Lurie Children's Hospital – Sustainability	Stephanie Pelligra, MPH	Project Manager
Martin, Savana	DePaul – Sexual & Relationship Violence Prevention	Hannah Retzkin, MEd	Relationship & Sexual Violence Prevention Specialist
Mirza, Imilya	United African Organization	Nancy Asirifi-Otchere	Program Coordinator

Niemet, Claire	Howard Brown Health Center	Kelly Rice, MPH	Case Management Program Manager
Robertson, De'Andra	Rush – TAP Study	Frances Aranda, PhD, MPH, MA	Project Director
Shah, Ami	Northwestern Medicine – Alberto Culver Health Learning Center	Nora St. Peter, MSIS	Manager, Patient & Consumer Health Education
Stadnicki, Jeanette	Consortium to Lower Obesity in Chicago's Children – Early Childhood	Katelyn Kanwischer, MS	Early Childhood Program Manager
Szumlas, Sally	Illinois Department of Public Health – Women's Health	Juana Ballesteros, MPH	Manager, Community Public Health Outreach
Tamblyn, Emily	Chicago Recovery Alliance	Dan Bigg	Director
Termar, Michael	Access Community Health	Siga Vasaitis, MHA	Project Manager, Clinical Operations
Walker, Precious	Rush School Based Health Centers – Simpson Academy	Sally Lemke, DNP, WHNP-BC	Director, Community Based Practices
Zepeda, Michelle	Erie Family Health Center	Bridget Magner, MPH	LHL Program Manager
AY 2016-2017 – Lurie Cohort			
Bartell, Tami	Illinois Coalition for Immigrant and Refugee Rights	Luvia Quinones, MPA	Health Policy Director
Brink, Jori	Near North Health Services	Berneice Mills-Thomas, RN, MSM, MPH, MBA	Chief Executive Officer
Day, Kelli	Gardeneers	May Tsupros	Co-Executive Director
DeAsis, Francis	Chicago Department of Public Health – STI/HIV/AIDS	Thomas Clyde	Public Health Administrator 2
Dodsworth, Charlotte	Pilot Light	Alexandra DeSorbo-Quinn, MPH, EdD	Executive Director
Ford, Lisa Jasmin	HealthConnect One	Sadie Wych, MPH	Program Manager
Harris, Chelsea	Rush School Based Health Centers – Orr Academy	Sally Lemke, DNP, WHNP-BC	Director, Community Based Practices
Jedraszko, Aneta	Cambodian Association of Illinois	Kaoru Watanabe	Associate Director

Lai, Steve	MATTER	Maryam Saleh, PhD	Vice President, Programs
Magoon, Rachel	DePaul – Alcohol & Substance Abuse Prevention	Kate Lower, LCPC, BC-DMT	Alcohol & Substance Abuse Prevention Specialist
Perez, Dimas	Coalition for Limited English Speaking Elderly	Marta Pereyra	Executive Director
Rabor, Antonette	YMCA – McCormick Tribute	Elizabeth Berkeley, MPH	Health & Wellness Manager
Rusie, Allison	Illinois Chapter of the American Academy of Pediatrics	Elise Groenewegen	Coordinator, Early Childhood Development
Russo, Laura	CALOR	Omar Lopez	Director
Rutherford, Charles	Chicago Department of Public Health – Emergency Preparedness	Frankie Shipman-Amuwo, MPH	Director of Planning, Research, and Development

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2.4.c Data on the number of students receiving a waiver of the practice experience for each of the last three years.

Criterion 2.4.c is not applicable because the DePaul MPH program has not given any students a waiver of the practicum experience for the last three academic years.

2.4.d Data on the number of preventive medicine, occupational medicine, aerospace medicine and general preventive medicine and public health residents completing the academic program for each of the last three years, along with information on their practicum rotations.

Criterion 2.4.d is not applicable because the DePaul MPH program does not have any medical students or residents who complete practicum rotations.

2.4.e Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has a well-developed and successfully proven process to ensure a beneficial practicum experience for students and community partners. Policies and procedures regarding

all aspects of the practicum are clearly outlined, and information is disseminated to students and site supervisors. The practicum process is managed by a dedicated member of the DePaul MPH program, the Director of Community Partnerships. Students and site supervisors receive support from the MPH program throughout the practicum experience, and ample opportunity for feedback exists. All students graduating from the MPH program have successfully completed practicum; no waivers for the experience exist.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

The culminating experience required for DePaul MPH degree conferral is comprised of a three-course capstone sequence that is concurrent with the practicum experience and culminates in the completion of the following elements:

1. Capstone Thesis: a scholarly work that systematically examines the development of the practicum project through the academic lens of public health research and program development.
2. Capstone Presentation: a formal poster presentation of the capstone thesis to our MPH community partners, DePaul colleagues, and the general public at the MPH Graduate Public Health Forum.

Three-Course Capstone Sequence
During their final year of the program, DePaul MPH students enroll in a three-course capstone sequence (MPH 602, MPH 603, and MPH 604). These courses are taken concurrently with the practicum experience. Course descriptions are provided below.

MPH 602: Community Health Assessment
This course is the first of a three-course sequence. Students are expected to use multiple methods to obtain and synthesize data pertaining to their practicum organization and the communities served. They will apply these skills to community health practice in their practicum agency, and to the development of preliminary chapters in the academic capstone.

MPH 603: Community Health Project Design
This is the second course of the three-course sequence. Students are expected to assess and incorporate findings from their community health profile and organizational assessment to design a public health project plan that meets the needs of the community served by their practicum agency, and to further develop the academic capstone. MPH 602 is a prerequisite for this course.

MPH 604: Capstone Seminar in Community Public Health
This is the third course of the three-course sequence. Students are expected to describe and distill outcomes from their practicum project, and synthesize the meaning of these outcomes within a broader public health context. They will produce the final chapters of the academic capstone, submit the finalized capstone for review, and create a professional poster presentation.

Capstone Thesis
The capstone thesis is a highly-individualized scholarly work that systematically examines the development of the practicum project through the academic lens of public health research and program development.

In the three-course capstone sequence described above, MPH students develop an independent, comprehensive, academically sound, and practice-based capstone that demonstrates their mastery of essential public health skills in both academic and community settings. Each capstone thesis is reviewed by at least two members of the Capstone Review Committee, which includes the Program Director, Director of Community Partnerships, and faculty members. The Program Manager serves as a non-voting member of the committee.

Students who receive an overall passing score based on the capstone rubric will be approved for graduation, upon completion of all other program requirements. Students may also receive a notice of "distinction" on their capstone if they meet the rubric criteria for distinction. Students who do not receive a passing grade work with the Director of Community Partnerships and their MPH 604 instructor to develop and complete a remediation plan. Failure to successfully complete the remediation process can delay degree conferral and/or result in dismissal from the program.

The *Capstone Guidelines* and grading rubric are available for review in the Resource File (RF: 2.5).

Capstone Presentation
Students prepare a professional poster of their capstone theses for presentation at the MPH Graduate Public Health Forum. The Forum is held at the end of the Spring Quarter each academic year and is open to faculty, staff, students and their guests, and preceptors. Students' posters are assessed in competition for the prestigious Grace Budrys Award for Excellence in Community Health by a panel of at least three judges. Forum judges are trained public health professionals outside the MPH program; at least one judge is a practitioner outside of academia.

The *Capstone Guidelines* available in the Resource File (RF: 2.5) provide additional information about the capstone presentation.

2.5.b   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The three-part culminating experience is rigorous and well-aligned with the program's mission of training public health practitioners to work in the field of community health. Through the completion of the thesis, project, and presentation, students are able to demonstrate the practical application of the content knowledge and skills acquired throughout the program. Additionally,

the integration of the culminating experience with the practicum allows students to have a robust and meaningful understanding of public health practice through critical reflection and hands-on involvement.

<u>Weaknesses</u>
No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

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 programs at all levels (bachelor's, master's, and doctoral).

2.6.a	Identification of a set of competencies that all graduate professional public health degree students and baccalaureate public health degree students, regardless of concentration, major, or specialty area, must attain. There should be one set for each graduate professional public health degree and baccalaureate public health degree offered by the program (e.g., one set each for BSPH, MPH, and DrPH).

The DePaul MPH program has established the following competencies for its students:

1. Utilize data to understand public health problems
2. Apply public health methods and concepts to describe the occurrence and distribution of health outcomes
3. Design, implement, and evaluate public health initiatives designed to bring about improved health
4. Analyze multiple determinants of health outcomes
5. Apply scientific tools and methods to the practice of public health
6. Apply ethical approaches to public health practice
7. Understand the organizational context of public health service delivery
8. Work in a culturally and contextually responsive manner with diverse populations
9. Identify strategies to develop sustainable partnerships
10. Translate public health findings into policy and advocacy recommendations

2.6.b	Identification of a set of competencies for each concentration, major, or specialization (depending on the terminology used by the program) identified in the instructional matrix, including professional and academic graduate degree curricula and baccalaureate public health degree curricula.

Refer to 2.6.a. The DePaul MPH program only has one concentration; there is one set of competencies for all students.

2.6.c **A matrix that identifies the learning experiences (e.g., specific course or activity within a course, practicum, culminating experience, or other degree requirement) by which the competencies defined in Criteria 2.6.a and 2.6.b are met. If these are common across the program, a single matrix for each degree will suffice. If they vary, sufficient information must be provided to assess compliance by each degree or specialty area. See CEPH Data Template 2.6.1.**

Table 2.6.c. Core Competency Learning Matrix

Competency	MPH 501[1]	MPH 502	MPH 503	MPH 511	MPH 512	MPH 513	MPH 522	MPH 525	MPH 541	MPH 600	MPH 602	MPH 603	MPH 604	MPH 699
1. Utilize data to understand public health problems	I								I		R			
2. Apply public health methods and concepts to describe the occurrence and distribution of health outcomes	I	I			I			R			R			
3. Design, implement, and evaluate public health initiatives designed to bring about improved health	I			I			R	R				R		
4. Analyze multiple determinants of health outcomes	I		I	I				R				R		
5. Apply scientific tools and methods to the practice of public health	I		I		I			R	I		R	R	R	
6. Apply ethical approaches to public health practice	I	I		I	I			R				R	R	R
7. Understand the organizational context of public health service delivery	I					R	R							
8. Work in a culturally and contextually responsive manner with diverse populations	I		I	I		R		R		I	R		R	R
9. Identify strategies to develop sustainable partnerships					I				I		R	R	R	R
10. Translate public health findings into policy and advocacy recommendations	I		I			R								

Note: I = Introduced; R = Reinforced

1. Due to formatting restrictions, course names do not fit in Table 2.6.c. Course names for the course numbers in this table can be found below.

MPH Courses Numbers and Names
- MPH 501: Introduction to Public Health
- MPH 502: Introduction to Epidemiology
- MPH 503: Introduction to Environmental Health
- MPH 511: Health Behavior Theory
- MPH 512: Research Methods
- MPH 513: Public Health Administration
- MPH 522: Program Planning and Grant Writing
- MPH 525: Program Evaluation
- MPH 541: Biostatistics
- 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
- MPH 699: Community Health Practicum

2.6.d   Analysis of the completed matrix included in Criterion 2.6.c. If changes have been made in the curricula as a result of the observations and analysis, such changes should be described.

All competencies listed in criterion 2.6.a above are covered across the curriculum, as can be seen in Table 2.6.c. Because the DePaul MPH program only has one concentration in Community Health Practice, the competencies are applicable to all students.

Each of the ten core competencies is introduced (I) and reinforced (R) at least once across the curriculum. Some competencies are covered more often throughout the course of the program than others. For example, competencies one, seven, and ten are each only covered in three courses. On the other hand, competencies five and six show up in eight courses, whereas competency eight is covered in nine courses. Repetition of competencies is to provide emphasis in what are perceived by MPH program committee as competencies with high value to students in community health practice.

Most courses cover three to five of the ten core competencies of the program. MPH 600 only covers one core competency, and MPH 502 and MPH 541 each only cover two competencies. The design of a course to include few competencies indicates a relatively high level of complexity of the competency and the decision by faculty to dedicate significant time to developing the competency in students. Conversely, MPH 501 introduces nine of the ten competencies. Many competencies are introduced in this course and then reinforced later in the curriculum.

2.6.e   Description of the manner in which competencies are developed, used, and made available to students.

Core competencies are developed and revised by the MPH program committee. The program has ten core competencies as listed in criterion 2.6.a. Each core competency is further broken out into several learning objectives. Learning objectives are listed on course syllabi and are linked to assessment activities such as exams, projects, written assignments, etc. A full list of learning objectives and their corresponding courses can be found in the Resource File (RF: 2.6). The DePaul MPH program uses its core competencies and corresponding learning objectives to evaluate the extent to which students obtain the necessary knowledge and skills from their courses, practicum, and culminating learning experience.

Prospective students are exposed to competencies as early as admissions events. Admitted students are first exposed to competencies and learning objectives during orientation. Competencies are introduced and incoming students complete a self-assessment to see how confident they are with the skills presented as learning objectives. Students then complete the same self-assessment in the Spring Quarter of the first year of coursework (MPH 512) and in their Spring Quarter of the last year of the program (MPH 604). The self-assessments are completed anonymously on a computer utilizing the Qualtrics survey platform. The Program Manager then exports the data and analyzes the perceived gains students make toward attainment of knowledge and skills. The student self-assessment survey instrument and summary results are available in the Resource File (RF: 2.6).

Additionally, applicable learning objectives, which are tied to core competencies, are reviewed in each course during the discussion of the syllabus, and they are also included in practicum materials to ensure that students' hands-on experience is relevant to and an extension of what is being learned in the classroom.

2.6.f   Description of the manner in which the program periodically assesses changing practice or research needs and uses this information to establish the competencies for its educational programs.

The original core competencies of the DePaul MPH program were developed at the program's inception in 2008. Competencies were reviewed again after the first cohort graduated in 2010. The competencies finalized in 2010 were the competencies on which the program received its initial accreditation in 2013. After the initial accreditation process was complete, competencies were reviewed when MPH program faculty and staff held a strategic planning retreat in the summer of 2013. No changes were made at that time. Competencies were most recently reviewed at the program's annual retreat in the summer of 2016.

Prior to the 2016 retreat, faculty reviewed competencies to ensure alignment with course learning objectives and alignment with the field of public health. Faculty proposed minor changes to the wording of core competencies as well as learning objectives. The proposed changes were discussed at the retreat and finalized prior to the start of the academic year in September.

Faculty then reviewed and modified syllabi as needed to ensure alignment with updated competencies and learning objectives.

After competencies are reviewed and vetted internally, the program then engages its stakeholders to ensure competency relevance. During the fall 2016 stakeholder meeting, all attendees were asked to rate the program's updated competencies according to their importance to public health practice. All competencies were rated as either "very important" or "moderately important."

To date, the MPH program has reviewed is competencies every two to three years. Going forward, the program has aligned itself with foundational knowledge and foundational competencies established by the CEPH 2016 criteria. Additionally, the program has developed its own concentration-specific competencies that will continue to be reviewed every two to three years. MPH program staff will continue to engage its stakeholders in the review of its concentration specific competencies.

2.6.g   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has a robust set of competencies with corresponding indicators that are mapped to courses across the curriculum. In addition, program competencies are routinely shared with and made available to students, and students engage in competency/indicator self-assessment as they progress through the program. Furthermore, program competencies are reviewed by faculty and community stakeholders to ensure internal and external buy-in. Because the DePaul MPH program only has one concentration in Community Health Practice, all competencies are applicable to all students.

Weaknesses
No weaknesses have been identified.

Plans to Improve
At this time, the DePaul MPH program is working to align its curriculum with the foundational knowledge and foundational competencies outlined in the CEPH 2016 criteria. The MPH program will be submitting Option A to CEPH in January 2018. Option A will include the required matrices outlining which aspects of foundational knowledge will be covered by which courses as well as which foundational competencies will be covered in which courses and assessed by which assignments. The program has also developed its own competencies for the Community Health Practice concentration. All corresponding course syllabi will also be submitted as part of Option A.

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

2.7.a   Description of the procedures used for monitoring and evaluating student progress in achieving the expected competencies, including procedures for identifying competency attainment in practice and culminating experiences.

Assessment of student progress toward achieving competencies occurs in the following ways:

1. **Coursework Performance** – Academic performance across the curriculum is the primary way in which competency assessment is evaluated. Each course assesses specific learning objectives. Each learning objective is linked to one of the program's core competencies. At the beginning of each course, faculty present students with a syllabus that includes learning objectives and specific assessment tools, such as exams, group projects, presentations, written papers, etc. At the conclusion of each course, grades for each assessment tool and overall course grades are assigned based on the criteria outlined in the syllabus. Students must earn an overall course grade of B- or better.
2. **Grade Point Average** – The program requires that an overall grade point average (GPA) of 3.0 on a 4.0 scale is maintained by all students. Student term GPA and cumulative GPA is reviewed quarterly by the students' advisors as well as the Program Director and Program Manager to determine if intervention is required.
3. **Practicum Performance** – At the beginning of practicum, students and site supervisors complete a learning agreement that includes a list of core public health competencies to be attained through the experience. Students write critical reflections of their experience to assess competency attainment. Additionally, site supervisors complete quarterly and final student evaluations to assess student progress toward competency attainment.
4. **Culminating Experience Performance** – Students apply knowledge and skills acquired through coursework and the practicum experience to complete a capstone thesis, a capstone project, and a capstone poster presentation. The capstone review committee grades each student's final capstone thesis according to a standardized rubric. A panel of at least three judges scores each student's poster presentation according to a rubric at the annual Graduate Forum. Forum judges are trained public health professionals outside the MPH program; at least one judge is a practitioner outside of academia.
5. **Competency/Indicator Self-Assessment** – Students take a competency/indicator self-assessment survey three times throughout their career as an MPH student. Improvement in self-assessment scores demonstrates an increased level of competency attainment. Additional information about the self-assessment is provided in criterion 2.6.e above. The student self-assessment survey instrument and summary results are available in the Resource File (RF: 2.6).

2.7.b Identification of outcomes that serve as measures by which the program will evaluate student achievement in each program, and presentation of data assessing the program's performance against those measures for each of the last three years. Outcome measures must include degree completion and job placement rates for all degrees included in the unit of accreditation (including bachelor's, master's, and doctoral degrees) for each of the last three years. See CEPH Data Templates 2.7.1 and 2.7.2. If degree completion rates in the maximum time period allowed for degree completion are less than the thresholds defined in this criterion's interpretive language, an explanation must be provided. If job placement (including pursuit of additional education), within 12 months following award of the degree, includes fewer than 80% of graduates at any level who can be located, an explanation must be provided. See CEPH Outcome Measures Template.

Table 2.7.b.1. Degree Completion Data by Academic Year

	Cohort of Students	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
2013-2014	# Students entered	21				
	# Students withdrew, dropped, etc.	1				
	# Students graduated	0				
	Cumulative graduation rate	0.0%				
2014-2015	# Students continuing at beginning of this school year	20	42			
	# Students withdrew, dropped, etc.	0	6			
	# Students graduated	16	0			
	Cumulative graduation rate	76.2%	0.0%			
2015-2016	# Students continuing at beginning of this school year	4	36	31		
	# Students withdrew, dropped, etc.	0	0	1		
	# Students graduated	4	19	0		
	Cumulative graduation rate	95.2%	45.2%	0.0%		
2016-2017	# Students continuing at beginning of this school year	N/A	17	30	22	
	# Students withdrew, dropped, etc.	N/A	0	0	1	
	# Students graduated	N/A	16	26	0	
	Cumulative graduation rate	N/A	83.3%	83.9%	0.0%	
2017-2018	# Students continuing at beginning of this school year	N/A	1	4	21	20
	# Students withdrew, dropped, etc.	N/A	0	0	0	
	# Students graduated	N/A				
	Cumulative graduation rate	N/A				

Table 2.7.b.2. Graduate Employment Information

MPH in Community Health Practice	2014	2015	2016
Employed	43 (54%)	69 (58%)	60 (43%)
Continuing education/training (not employed)	0 (0%)	0 (0%)	1 (0.5%)
Actively seeking employment	1 (1%)	0 (0%)	1 (0.5%)
Not seeking employment (not employed and not continuing education/training, by choice)	0 (0%)	1 (1%)	0 (0%)
Unknown	35 (45%)	48 (41%)	79 (55%)
Total	**79 (100%)**	**118 (100%)**	**141 (100%)**

The DePaul MPH program evaluates student achievement according to graduation rates and rates of employment post-graduation.

Table 2.7.b.1 above shows the cumulative graduation rates for the last four years, the maximum number of years for program completion. The program consistently demonstrates a strong graduation rate, with most students completing their degrees in less than four years.

Graduate employment information for the last three years is presented in Table 2.7.b.2 above. Of alumni completing the alumni survey, at least 96% were employed across all three years. Students completing the DePaul MPH program are very successful in finding employment after graduation.

> **2.7.c** **An explanation of the methods used to collect job placement data and of graduates' response rates to these data collection efforts. The program must list the number of graduates from each degree program and the number of respondents to the graduate survey or other means of collecting employment data.**

Job placement information is collected via the Alumni Survey. The DePaul MPH Alumni Survey goes out to all alumni at the beginning of each December. This allows students who graduated most recently six months to find employment before they are surveyed. The survey is anonymous because it asks about program satisfaction in addition to employment status. The Alumni Survey is administered via the Qualtrics electronic survey platform by the Program Manager. Response rates for the last three years are presented in Table 2.7.c below.

Table 2.7.c. Alumni Survey Response Rates

MPH in Community Health Practice	2014	2015	2016
Number of Alumni	79	118	141
Number of Alumni Survey Responses	44	70	62
Response Rate	55.7%	59.3%	44.0%

Because the Alumni Survey has been yielding a response rate between 44% and 60%, the MPH program has determined that additional forms of data collection may be needed. In future years, the MPH program will also look for its alumni on LinkedIn to determine employment status. Furthermore, in order to better understand the trends in response rate over time, future MPH Alumni Surveys will also ask respondents to provide their year of graduation.

2.7.d   In fields for which there is certification of professional competence and data are available from the certifying agency, data on the performance of the program's graduates on these national examinations for each of the last three years.

The DePaul MPH program does not require the completion of a national examination for degree completion. Nevertheless, some graduates obtained Certified Health Education Specialist (CHES) certification from the National Commission for Health Education Credentialing (NCHEC). CHES data was provided by NCHEC and can be seen in Table 2.7.d below.

Table 2.7.d. CHES Exam Completion Rates

Year	2014	2015	2016
# of Students Testing	2	3	1
# of Students Passing	2	2	1
Passing Rate (%)	100%	67%	100%

No DePaul MPH students attempted the Certified in Public Health (CPH) exam administered by the National Board of Public Health Examiners (NBPHE) in the last three years.

2.7.e   Data and analysis regarding the ability of the program's graduates to perform competencies in an employment setting, including information from periodic assessments of alumni, employers, and other relevant stakeholders. Methods for such assessment may include key informant interviews, surveys, focus groups, and documented discussions.

Recent employment data was collected via the December 2016 Alumni Survey, which was distributed to all 141 alumni who have completed the DePaul MPH program. The employment rate of responding alumni was 97%, and 90% of the employed respondents indicated that they are currently working in public health or a health-related field. Furthermore, 83% of employed respondents found their first post-MPH job within six months of graduation. Most employed respondents are currently working in the following sectors: nonprofit organization (27%), university or research facility (27%), and hospital or healthcare delivery facility (23%). These strong employment data indicate that graduates of the DePaul MPH program are able to secure and maintain jobs in public health, demonstrating their competence in the field.

The 2016 Alumni Survey also asked graduates about the extent to which the DePaul MPH program prepared them for a career in public health. Many graduates believed that they were "quite a bit prepared" (50%); some felt "somewhat prepared" (19%), and others answered that they felt "very much prepared" (15%). The positive self-reported career preparation is another indication of the way in which the DePaul MPH program ensures its graduates are competent in the knowledge and skills needed for successful public health practice.

Prior to the 2016-2017 academic year, the DePaul MPH program had not made a recent effort to survey employers regarding their perception of alumni and/or their ability to perform core public health competencies in the field. During the 2016-2017 academic year, the Administrative Team, with the assistance of the Program Committee, developed a strategy to gather this data. Faculty and staff of the MPH program determined that the least invasive and most confidential way to gather information from employers of alumni was through an anonymous survey. The Administrative Team and Student Program Assistant developed a survey via Qualtrics, DePaul's preferred online survey platform. The survey assessed employer perception of alumni ability to perform the program's core competencies as well as their proficiency with specific professional skills.

All program alumni received an email with a link to the employer survey and a request to forward the link to their supervisors. The survey instrument and email to alumni is available in the Resource File (RF: 2.7) for review.

Seventeen current employers of DePaul MPH alumni completed the survey, for a response rate of 12.1%. On average, alumni had been working at their respective organizations for three years. Of the 17 responses, 88% of employers were very satisfied with their employees' job performance, 6% were satisfied, and 6% were neutral. Tables 2.7.e.1 and 2.7.e.2 below show employer perceptions of alumni mastery of public health competencies and professional skills.

Table 2.7.e.1. Employer Perceptions of Alumni Mastery of Competencies, % (n)

Public Health Competency	Entry	Novice	Skilled	Proficient
Utilize data to understand public health problems	0% (0)	6% (1)	41% (7)	53% (9)
Apply public health methods and concepts to describe to occurrence and distribution of health outcomes	0% (0)	12% (2)	53% (9)	35% (6)
Design, implement, and evaluate public health initiatives designed to bring about improved health	0% (0)	6% (1)	59% (10)	35% (6)
Analyze multiple determinants of health outcomes	0% (0)	6% (1)	53% (9)	41% (7)
Apply scientific tools and methods to the practice of public health	0% (0)	6% (1)	53% (9)	41% (7)
Apply ethical approaches to public health practice	0% (0)	6% (1)	76% (13)	18% (3)
Understand the organizational context of public health service delivery	0% (0)	12% (2)	65% (11)	23% (4)
Work in a culturally and contextually responsive manner with diverse populations	6% (1)	0% (0)	76% (13)	18% (3)
Identify strategies to develop sustainable partnerships	0% (0)	6% (1)	71% (12)	23% (4)
Translate public health findings into policy and advocacy recommendations	0% (0)	6% (1)	41% (7)	53% (9)

Table 2.7.e.2. Employer Perceptions of Alumni Mastery of Professional Skills, % (n)

Assessment of Skills	Entry	Novice	Skilled	Proficient
Critical thinking/problem solving	6% (1)	0% (0)	82% (14)	12% (2)
Project management	0% (0)	12% (2)	65% (11)	23% (4)
Data analysis/data interpretation	0% (0)	23% (4)	48% (8)	29% (5)
Communication: written	6% (1)	0% (0)	65% (11)	29% (5)
Communication: verbal	0% (0)	6% (1)	71% (12)	23% (4)
Writing: professional	0% (0)	6% (1)	76% (13)	18% (3)
Writing: technical	0% (0)	18% (3)	59% (10)	23% (4)
Professionalism	0% (0)	0% (0)	82% (14)	18% (3)
Teamwork/team player	0% (0)	0% (0)	94% (16)	6% (1)
Enthusiasm and willingness to learn	0% (0)	0% (0)	100% (17)	0% (0)

> **2.7.f   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met with commentary**.

Strengths
The program has a strong set of competency assessment methods that are used to evaluate all students. Furthermore, the program maintains excellent graduation rates and employment rates. Alumni remain linked to the program and are responsive to the Alumni Survey. Some DePaul MPH graduates have successfully completed both the CHES exam and the CPH exam, even though exam completion is not required for degree conferral. In addition to high employment rates, graduates are primarily employed in public health, it takes them less than 6 months to find a job in the field, and most alumni believe the MPH program has prepared them for a public health career

Weaknesses
- The alumni survey has yielded a response rate between 44% and 60% over the previous three academic years.
- According to the alumni survey, only 15% of students reported feeling "very much prepared" for a career in public health.
- The MPH program did not regularly survey employers regarding their perception of alumni and/or their ability to perform core public health competencies in the field conduct before the 2016-2017 academic year.

Plans to Improve
- In order to gain a better understanding of the employment status of its alumni, the MPH program will also begin looking for its alumni on LinkedIn.
- The MPH program will engage in continuous curricular improvement through review of syllabi, peer teaching evaluations, annual curriculum review at the MPH retreat, and the annual stakeholder meeting.
- Going forward, the MPH program will survey employers every two years about their perception of alumni performing competencies in the field via the employer survey as described above.

2.8   Bachelor's Degrees in Public Health

Criterion 2.8 is not applicable because the DePaul MPH program does not offer a free-standing bachelor's degree in public health.

2.9   Academic Degrees

Criterion 2.9 is not applicable because the DePaul MPH program does not offer any academic degrees in public health.

2.10   Doctoral Degrees

Criterion 2.10 is not applicable because the DePaul MPH program does not offer any doctoral degrees in public health.

The DePaul MPH program offers two joint degree programs, as indicated in Table 2.1.a, the instructional matrix from criterion 2.1.a above. The two joint degree programs include:

1. BS-MPH in Community Health Practice
2. MBA-MPH in Community Health Practice

Table 2.11.a. Number of Students per Joint Degree Type

Joint Degree Type	AY 2014-2015	AY 2015-2016	AY 2016-2017
BS-MPH	0	0	3
MBA-MPH	0	0	0

Additional information about each joint degree program is provided in criterion 2.11.b below.

BS-MPH in Community Health Practice
The BS-MPH joint degree allows high performing undergraduate students in the College of Science and Health, Health Sciences department, to apply for a pathway program which culminates in the completion of Bachelor of Science degree in Health Sciences and a Master of Public Health degree in Community Health Practice in five years, as opposed to the six years it would require to complete each degree separately.

Admissions Requirements
Interested students apply to the BS-MPH joint degree program in their third year at DePaul. All application materials are due March 1 of any given academic year. Students who apply need to be Public Health Studies majors in the department of Health Sciences. They must complete an MPH application, answer a series of prompts in lieu of a personal statement, and submit a current resume/CV. Students who apply to the joint degree must have a GPA of 3.5 out of 4.0 at the time of application, and they must maintain that GPA throughout their third year. The MPH program processes BS-MPH applications concurrently with MPH applications, and applicants learn of their status late April to early May.

<u>BS-MPH Joint Degree Curriculum</u>
BS-MPH students complete all required courses in the same manner as students admitted into the standard MPH program. BS-MPH students meet the same practicum and experiential learning requirements as traditional MPH students to be eligible for degree conferral.
Five MPH courses that count toward the BS degree for BS-MPH students:
1. MPH 501: Introduction to Public Health
2. MPH 502: Introduction to Epidemiology
3. MPH 511: Health Behavior Theory
4. MPH 515: Public Health Ethics and Policy (BS requirement and MPH elective)
5. MPH 541: Biostatistics

Once accepted, during their fourth year, BS-MPH students take undergraduate courses toward the BS, graduate courses toward the MPH, and graduate courses that count toward both degrees. Students in the joint degree program get awarded their BS at the end of their fourth year and complete their MPH in their fifth year. BS-MPH students must work closely with their undergraduate Health Sciences advisor to ensure all BS requirements are met. The MPH Program Manager serves as the technical advisor to BS-MPH students admitted to the program. A sample course schedule can be seen in Table 2.11.b.1 below.

Table 2.11.b.1. BS-MPH Course Schedule

Academic Term	Course	Credits
Year 1		
Autumn Quarter	MPH 501: Introduction to Public Health	4 credits
	MPH 541: Biostatistics	4 credits
	2 undergraduate courses (or as needed)	
December Intersession	MPH 515: Public Health Ethics & Policy	4 credits
Winter Quarter	MPH 502: Introduction to Epidemiology	4 credits
	MPH 511: Health Behavior Theory	4 credits
	2 undergraduate courses (or as needed)	
Spring Quarter	MPH 512: Research Methods	4 credits
	MPH 522: Program Planning & Grant Writing	4 credits
	Undergraduate courses as needed	
Year-long Course	MPH 600: Preparation for Public Health Practice*	0 credits
Summer Session	MPH Elective (opportunity 1)	4 credits
Year 2		
Autumn Quarter	MPH 525: Program Evaluation	4 credits
	MPH 602: Community Health Assessment	4 credits
December Intersession	MPH 503: Environmental Health	4 credits
Winter Quarter	MPH 513: Public Health Administration	4 credits
	MPH 603: Community Health Project Design	4 credits
Spring Quarter	MPH Elective (opportunity 2)	4 credits
	MPH 604: Capstone Seminar in Community Health	4 credits
Year-long Course	MPH 699: Community Health Practicum**	0 credits

*MPH 600 only meets 4 times over the course of the academic year
**MPH 699 has no in-person meetings; course serves as an online portal for submitting practicum paperwork

A substantive change notice regarding the BS-MPH joint degree program was submitted to CEPH on May 3, 2016 and approved by CEPH on June 30, 2016. The full joint degree proposal and substantive change acceptance letter can be found in the Resource File (RF: 2.11).

MBA-MPH in Community Health Practice
The Master of Business Administration/Master of Public Health (MBA/MPH) joint degree develops students' managerial acumen and their expertise as public health professionals. Offered jointly by the Kellstadt Graduate School of Business and the College of Liberal Arts and Social Sciences, this unique 88-credit MBA/MPH provides students with the opportunity to earn advanced degrees in two highly complementary fields—business and public health. Focusing on Healthcare Sector Management and Community Health Practice, respectively, the MBA/MPH program allows students to obtain both degrees in as little as three years of full-time course work. This rigorous program is designed for highly motivated students who work or plan to work in management, executive, or consulting positions in community/population health. Acceptance into the joint degree program requires applicants to meet the admissions requirements of both the MBA and MPH program.

Admissions Requirements
There are three points of entry into the joint degree program:
1. New Students: If a new DePaul student wants to apply to the joint degree program, applicants must meet the separate admissions requirements in full by both the Driehaus College of Business and the Master of Public Health Program respectively.
2. Current MBA Students: If a current MBA student wants to apply to the joint degree program, they are automatically accepted into the MPH program. Admission criteria for the MBA program meet and exceed those of the MPH program.
3. Current MPH Students: If a current MPH student wants to pursue the joint degree, they must apply and be accepted into the MBA program.

MBA-MPH Joint Degree Curriculum
Other than the course substitutions as outlined below, there will be no curricular or culminating experience changes. MBA-MPH students will be expected to complete all aspects of practicum and capstone similar to traditional MPH students.

The joint degree program will consist of 27 total courses for 88 credit hours. Sixteen (16) courses, or 52 credit hours, are from the Master of Business Administration program in the Driehaus College of Business. Eleven (11) courses, or 36 credit hours, are from Master of Public Health Program in the College of Liberal Arts and Social Sciences. There are no new courses associated with this joint degree program. It will take students 3 years to complete the joint degree program assuming they enroll in 28 credit hours each year.

Five (5) courses from the MBA program will count toward the MPH degree. Three MBA courses serve as substitutions for required MPH courses, and two MBA courses serve as substitutions for MPH electives. These courses are aligned with the MPH program's ten learning objectives and are outlined below. When determining the feasibility of course substitutions, the MPH program ensured that none of the courses being removed from its curriculum were solely

responsible for introducing/reinforcing the competencies. This can be seen in Table 2.6.c as part of criterion 2.6.c above. Additionally, the MPH and MBA programs hosted a site visitor from Council on Education for Public Health in February of 2014 to provide feedback on the proposed joint degree. The CEPH consultation visit supported the model proposed.

Three MBA courses serve as MPH courses substitutions:
1. ECO 555: Economics for Decision Making substitutes MPH 525: Program Evaluation. These two courses both focus on quantitative decision making, the efficient use of resources, and modeling.
2. GSB 420: Applied Quantitative Analysis substitutes MPH 541: Biostatistics. These two courses both focus on statistical reasoning, problem solving, and reaching conclusions.
3. MGT 559: Health Sector Management substitutes MPH 513: Public Health Administration. These two courses both focus on the design, organization, planning, control, and monitoring of organizations aimed at improving health and healthcare.

Two MBA courses serve as MPH electives:
1. MGT 566: Health Insurance & Benefits. This course focuses on the public financing of preventive and restorative health services and workplace provided benefits ranging from health insurance to worksite wellness 65 programs.
2. MBA Elective – students can choose two courses from the following four options. One course will count as an MPH elective, and one course will count towards the MBA concentration requirements.
   - MGT 508: Quality Management Systems
   - MGT 510: Technology, Quality, & Health Informatics
   - MGT 545: Managing Service Operations
   - MGT 564: Streets of Chicago, Healthcare Management

A sample MBA-MPH course schedule is outlined in Table 2.11.b.2 below. This sample schedule assumes that incoming students start their MBA and MPH at the same time. However, students are also able to start the MBA program in their first year of study and wait to begin the MPH in their second year of study.

Table 2.11.b.2. Sample MBA-MPH Course Schedule

	Autumn Quarter	December Intersession	Winter Quarter	Spring Quarter	Summer Session
Year 1					
MBA	GSB 420		MGT 566	ACC 500	MKT 555
MPH	MPH 501	MPH 503	MPH 511	MPH 512	N/A
Year 2					
MBA	ECO 555 & MGT 559	MBA Elective[1]	FIN 555 or ECO 502	ACC 554 MGT 504	MBA Elective[1]
MPH	MPH 600*		MPH 502 & MPH 600*	MPH 522 & MPH 600*	
Year 3					
MBA	MGT 500 MGT 554	MBA Elective[1]	ECO 502 or FIN 555	MGT 798 GSB 599	
MPH	MPH 602, MPH 699**, & Practicum		MPH 603, MPH 699**, & Practicum	MPH 604, MPH 699**, & Practicum	

[1]MBA electives only have to be taken twice; students have the option to take the MBA electives in any of the terms listed above

*MPH 600 only meets 4 times over the course of the academic year

**MPH 699 has no in-person meetings; course serves as a D2L portal for submitting practicum paperwork

Students in the joint MBA-MPH program will receive advising from a representative of the Driehaus College of Business as well as a member of the MPH program. The MPH Program Manager will serve as the technical advisor to MBA-MPH students in the program. Student record keeping will take place in the Driehaus College of Business with support from the MPH program.

A substantive change notice regarding the MBA-MPH joint degree program was submitted to CEPH on August 30, 2016 and approved by CEPH on October 28, 2016. The full joint degree proposal and substantive change acceptance letter can be found in the Resource File (RF: 2.11).

2.11.c Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has developed and implemented two additional pathways for entry into the MPH program. Due to the program's collaboration across colleges, the internal visibility of the MPH program has also been increased across the university through the creation of two joint degrees.

The MPH program went through all official channels to obtain buy-in and approval from internal stakeholders at the university level as well as external stakeholders at the community and accreditation levels. The DePaul MPH program will continue to market its BS-MPH and MBA-MPH joint degrees in order to draw upon the most motivated and high performing students at both the undergraduate and graduate levels.

Weaknesses
No weaknesses have been identified.

Plans to Improve
In addition to the joint degree programs described above, the MPH program is also working on a proposal for a Universal Pathway program. This program would allow any undergraduate DePaul student to apply to the MPH program in his/her junior year.   If accepted, the student would take three MPH classes during his/her senior year. Those three classes would double count towards the bachelor's degree as well as the MPH. The student would then complete his/her MPH degree over the next two academic years after completing the undergraduate requirements. Universal Pathway students would complete all the same coursework, practicum, and capstone requirements as traditional MPH students. The Universal Pathway students would be benefit from the program by being able to double count three classes, or twelve credit hours, and then getting a 25% Double Demon discount for the remaining courses required to complete the MPH.

2.12   Distance Education or Executive Degree Programs

Criterion 2.12 is not applicable because the DePaul MPH program does not offer distance education or executive degree programs.

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.

3.1.a	**Description of the program's research activities, including policies, procedures, and practices that support research and scholarly activities.**

Research is an integral part of the educational academic experience at DePaul University. Faculty produce scholarly work reflecting their respective interests. Tenure-line faculty are encouraged to engage in research that involves students, which is not the case at many large universities. Many of these projects receive external funding from major private and public agencies.

Internal funding and support is also available for faculty and the majority of sources support tenure-line faculty only. Faculty research at the university is supported in the following ways:

- **Community-Based Research Faculty Fellowship** – The Steans Center seeks to support community-based research projects that involve the community, benefit the community, draw on the faculty member's expertise, and advance the faculty member's scholarship. Past fellowship recipients may apply for a senior fellowship. All full-time faculty are eligible.
- **Spirit of Inquiry Awards –** In support of DePaul's belief that the quest for knowledge is the foundation upon which the idea of a university rests, and the purpose that unites both teacher and student, the University Research Council (URC) makes annual DePaul University Spirit of Inquiry Awards. The Awards honor specific research, scholarly, or creative achievements that exhibit commitment to that spirit of creative inquiry, which DePaul endeavors to inspire in its students. All full-time faculty are eligible.
- **Competitive Research Grants Program –** Competitive Research Grants provide up to $3,500 to defray expenses associated with research projects or creative endeavors likely to result in some form of scholarly publication or artistic presentation, lead to external funding, or directly foster further inquiry. The program exists to encourage faculty and staff members to engage in scholarly and creative activities that enhance their professional growth in their fields. DePaul supports this program, and the others of the University Research Council (URC), in the belief that the vitality of the faculty is essential to its success in serving students and the community. This is only available to tenure-line faculty.
- **Research Conference Program –** Through the Research Conference Program, the University Research Council (URC) helps to support research related conferences hosted by DePaul. Events may center on any academic discipline, professional field, or research topic of interest to DePaul faculty. Multidisciplinary conferences sponsored by a number of units, especially units in different colleges or schools, are welcome. Also acceptable

are proposals for scholarly events that directly explore facets of the University's Vincentian mission. This is only available to tenure-line faculty.

- **Paid Leave Program** – Paid leaves of absence are intended to support extended academic projects that would be difficult or impossible to undertake without suspension of other contractual responsibilities. A leave of absence is a suspension of all contractual responsibilities (unless otherwise negotiated in advance) for one or more complete academic terms. Paid leaves are granted for one quarter or one semester at full pay, for two quarters at up to 75% of contract salary for the period, or for a full academic year (three quarters) at up to half of the contract salary. A faculty member who accepts a leave of absence at less than full pay is understood to be amending his/her annual contract. This is only available to tenure-line faculty.

- **Faculty Summer Research Program** – The Faculty Summer Research Grant (FSRG) provides salary stipends and funding for additional expenses to tenure-track and tenured full-time faculty for projects undertaken in the summer. This is only available to tenure-line faculty in LAS.

- **The Irwin W. Steans Center** – DePaul University's Steans Center supports community-based service learning and community service studies. The mission of the Steans Center is to develop mutually beneficial relationships with community organizations to engage DePaul students in educational opportunities grounded in Vincentian values of respect for human dignity and the quest for social justice. The mission is accomplished by engaging students in meaningful community partnerships. DePaul MPH students can engage with the center by applying for service learning internships, applying for scholarships, and attending various events. During the 2013-2014 academic year, MPH student Nyahne Bergeron was awarded the Adult Student Programs Scholarship by the Steans Center. MPH faculty can also apply for grants through the Steans Center. During the 2015-2016 academic year, MPH professor Julia Lippert, PhD received a Community-Based Research Fellowship to explore stressors associated with restaurant work. The Steans Center is a critical university resource for the MPH program based on mission alignment and opportunities provided.

- **Vincentian Endowment Fund Grant** – The Vincentian Endowment Fund was established in 1992 through a gift from the Vincentian Brothers and Fathers. The endowment seeks to assist the university in developing its understanding of how to be an inclusive, diverse, and welcoming institution. This assistance is achieved through funding grant projects that directly enhance the identity of DePaul University as a Catholic, Vincentian, and urban university. MPH faculty are encouraged to apply for the Vincentian Endowment Fund Grant. During the 2016-2017 academic year, MPH professor Julia Lippert applied for a grant to host a Lead Health Fair.

- **University Research Council** – The University Research Council (URC) supports the faculty's research, scholarship, and creative activities through competitive grants and leaves. In addition to helping faculty maintain their intellectual vitality, the grants and leaves are intended as a stepping stone for securing external funding. The annual Spirit of Inquiry Awards honor specific research, scholarly, or creative achievements that exhibit commitment to that spirit of creative inquiry, which the university endeavors to inspire in its students. John Mazzeo and Suzanne Carlberg-Racich each received a URC grant in 2015; Fernando De Maio received a URC grant in 2016.

Graduate students in LAS are supported through the Graduate Student Research Fund (GSRF), which provides funds to help defray the costs of conducting research and creative work and for presenting papers at academic conferences. DePaul MPH graduate students are encouraged to apply for this grant.

3.1.b   Description of current research activities undertaken in collaboration with local, state, national, or international health agencies and community-based organizations. Formal research agreements with such agencies should be identified.

As of June 2017, there are four on-going research projects that are either being done in partnership with a health agency or are community-based.
1. Doug Bruce is conducting a community-based study entitled, "Patient and Primary Care Provider Perspectives on Recreational and Therapeutic Cannabis Use within a Changing Sociocultural and Political Context."
2. Suzanne Carlberg-Racich is working on a community-based project called, "Exploring Partnership and Agency in Community-based Photovoice with Persons Who Inject Drugs."
3. Fernando De Maio is doing a community-based project entitled, "Development and Validation of the Index of Concentration at the Extremes (ICE) for Chicago Communities and Census Tracts."
4. Julia Lippert is hosting a community health fair to test residential soil and water, educate the community on lead exposure, and collect data on lead exposure to map patterns and trends.

Over the course of the last three academic years, 24 research projects were undertaken by the faculty of the DePaul MPH program. Nearly half of those research initiatives (11) were community-based. A full list of research projects can be seen in Table 3.1.c below.

3.1.c A list of current research activity of all primary and secondary faculty identified in Criteria 4.1.a and 4.1.b, including amount and source of funds, for each of the last three years. These data must be presented in table format and include at least the following: a) principal investigator and faculty member's role (if not PI); b) project name; c) period of funding; d) source of funding; e) amount of total award; f) amount of current year's award; g) whether research is community based; and h) whether research provides for student involvement. Distinguish projects attributed to primary faculty from those attributed to other faculty by using bold text, color or shading. Only research funding should be reported here; extramural funding for service or training grants should be reported in Template 3.2.2 (funded service) and Template 3.3.1 (funded training/workforce development). See CEPH Data Template 3.1.1.

Table 3.1.c. Faculty Research Activities, 2014-Current

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
Motives for Heavy Cannabis Use among Young MSM Living with HIV/AIDS	*Doug Bruce, Community Health Practice*	*National Institute on Drug Abuse*	*2016-2018*	*$313,201*			*$168,845*	*N*	*Y: Not MPH*
Patient and Primary Care Provider Perspectives on Recreational and Therapeutic Cannabis Use within a Changing Sociocultural and Political Context	*Doug Bruce, Community Health Practice*	*DePaul University Provost's Collaborative Research Fellowship*	*2015-2017*	*$21,146*		*$10,573*	*$10,573*	*Y*	*Y: Not MPH*
Cannabis Motives among Young Gay/Bisexual Males Living with HIV/AIDS	*Doug Bruce, Community Health Practice*	*DePaul University Faculty Summer Research Grant*	*2015*	*$5,400*		*$5,400*		*N*	*N*

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
Epidemiologic Research Assistantship	*Doug Bruce*	*DePaul University Undergraduate Research Assistant Program*	*2014-2015*	*$2,600*	*$2,600*			*N*	*Y: Not MPH*
Mixed Methods Research Training	*Doug Bruce*	*DePaul University Undergraduate Research Assistant Program*	*2014*	*$1,300*	*$1,300*			*N*	*Y: Not MPH*
Exploring Partnership and Agency in Community-based Photovoice with Persons Who Inject Drugs	Suzanne Carlberg-Racich	Fordham University HIV & Drug Abuse Prevention Research Ethics Training Institute	2016-2017	$20,000			$20,000	Y	Y: Not MPH
Community-Based Syringe Exchange Program Development	Suzanne Carlberg-Racich	University Research Council, DePaul University	2015-2016	$5,000		$5,000		Y	Y: MPH
A Visual Phenomenology of Stigma and Support among Injection Drug…	Suzanne Carlberg-Racich	DePaul University College of Liberal Arts and Social Science…	2015-2016	$4,200		$4,200		Y	Y: Not MPH

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
…Users in Chicago: Using photovoice to create community level concept maps		…Faculty Summer Research Grant							
A Voice for Change: Using photovoice and shared narrative to illustrate the value of harm reduction	Suzanne Carlberg-Racich	DePaul University Steans Center	2014-2015	$5,000	$5,000			Y	Y: Not MPH
Development and Validation of the Index of Concentration at the Extremes (ICE) for Chicago Communities and Census Tracts	*Fernando De Maio*	*Faculty Summer Research Grant, College of Arts and Social Sciences, DePaul University*	*2017*	*$4,700*			*$4,700*	*Y*	*Y: Not MPH*
Community Health Needs Assessment: Establishing a Qualitative Longitudinal Study in Chicago	*Fernando De Maio*	*Collaborative Research Grant, University Research Council, DePaul University*	*2015-2016*	*$3,500*		*$3,500*		*N*	*Y: MPH*
Health Inequities in Chicago: Analysis of the Healthy Chicago Survey and the US...	*Fernando De Maio*	*Competitive Research Grant, University Research...*	*2014-2015*	*$3,500*	*$3,500*			*N*	*Y: MPH (2)*

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
... Behavioral Risk Factor Surveillance System"		*... Council, DePaul University*							
The Dynamics of the Tobacco Epidemic in Argentina: Secondary Analysis of the 2012 Global Adult Tobacco Survey	*Fernando De Maio*	*Competitive Research Grant, University Research Council, DePaul University*	*2014-2015*	*$3,000*	*$3,000*			*N*	*N*
A community health fair to test residential soil and water, educate the community on lead exposure, and collect data on lead exposure to map patterns and trends	Julia Lippert	DePaul University Vincentian Endowment Fund	2016	$5,000			$5,000	N	Y: MPH
Community based participatory research fellowship to perform qualitative research in partnership with a community based organization to benefit the residents of a Chicago community	Julia Lippert	DePaul University Community-based Research Faculty Fellowship	2015-2016	$3,000	$3,000			Y	Y: MPH

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
Grant Writing Team	*Marty Martin*	*Sprague Institute for Inter-professional Health Ed.*	*2014*	*$25,000*	*$25,000*			*N*	*N*
Curriculum Assessment and Accreditation	John Mazzeo	DePaul University Quality of Instruction Council	2016	$5,000		$5,000		N	N
Educational and Professional Outcomes through Medical Student Service-Learning Experiences	John Mazzeo	University Research Council, DePaul University	2015	$3,500		$3,500		N	Y: MPH
Exploring the Global Impact of the HIV/AIDS Pandemic on Diverse Populations	Leah Neubauer	Global Learning Exchange (GLE)/DePaul Inter-nationalization Committee	2014-2015	$2,000	$2,000			Y	N
Abstinence and Behavior Change HIV Prevention Program for Youth in Kenya	Leah Neubauer	USAID/PEPFAR /HRSA (through a sub-award to American International Health Alliance)	2012-2014	$803,061				Y	Y: MPH

Project Name	Principal Investigator/ Role	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014-2015	Amount 2015-2016	Amount 2016-2017	Community-Based (Y/N)	Student Participation (Y/N)
The Future of MPH: Aligning Program Growth with Vision 2018 and Emerging Trends in Public Health	Leah Neubauer	Quality of Instruction Council – QIC	2014-2015	$5,000	$5,000			N	Y: MPH (2)
Establishing a UM SPH Undergraduate Program	Leah Neubauer	University of Michigan-Ann Arbor School of Public Health (Lead Curriculum Development Consultant)	2015	$10,000	$10,000			N	N
21st Century Community Learning Centers Program: EDC & the Illinois State Board of Education (ISBE)	Leah Neubauer	Education Development Center (EDC), Inc.	2014-2015	$25,416	$25,416			N	N

Note: Rows in italics indicate affiliated faculty; shaded rows indicate faculty who are no longer with the DePaul MPH program.

3.1.d Identification of measures by which the program may evaluate the success of its research activities, along with data regarding the program's performance against those measures for each of the last three years. For example, programs may track dollar amounts of research funding, significance of findings (e.g., citation references), extent of research translation (e.g., adoption by policy or statute), dissemination (e.g., publications in peer-reviewed publications, presentations at professional meetings), and other indicators. See CEPH Outcome Measures Template.

Table 3.1.d. Outcome Measures for Research

Domain	Objective	2014-2015	2015-2016	2016-2017
Number of Research Grants Submitted	75% of MPH full-time faculty will submit ≥ 1 research grant per academic year	6/8 75%	7/9 78%	6/9 67%
Participation in Research Projects	65% of MPH full-time faculty will participate in ≥ 1 research project per academic year	5/8 63%	7/9 78%	6/9 67%
Collaboration with External Community Partners on Research	Of the faculty members who participated in research, 75% will collaborate with external community partners on that research	5/5 100%	6/7 86%	3/6 50%[1]
Student Involvement in Research	Of the faculty members who participate in research, 75% will involve students in that research	5/5 100%	6/7 86%	4/6 67%[2]
	15% of MPH students will participate in research per academic year with MPH full-time faculty	8/65 12%	15/71 21%	9/65 14%
Dissemination of Research Findings[3]	Five (5) publications in peer-reviewed journals will occur among MPH full-time faculty	19	14	9
	Five (5) publications in non-peer reviewed publications will occur among MPH full-time faculty	6	9	6
	Fifteen (15) presentations at professional meetings will occur among MPH full-time faculty	31	23	22

1. For AY 2016-2017, fewer community partners were involved in MPH faculty research projects due to the nature of the funding source and the project scope. For example, projects focused on internal processes, scholarship of teaching, and some utilized secondary data analysis.
2. For AY 2016-2017, the nature of the funding source did not support student participation.
3. Although faculty are currently exceeding targets for dissemination of research, the MPH Program Committee did not feel comfortable increasing targets.

3.1.e   Description of student involvement in research.

Students in DePaul's MPH program can engage in research in three ways as described below.

Graduate Assistantships
The MPH program offers two graduate assistantships (GA) each academic year. The GA position is designed for students to participate in research by assisting a faculty member with a research project for a full academic year. The expectation is that the student will gain valuable knowledge, experience, and skills for building a career in public health and the faculty member will benefit from research support. The GA position comes with 16 credit hours of tuition support and a stipend of $7,500.

Students must meet the below eligibility criteria in order to apply:
- Full time MPH student for the academic year enrolled in at least 14 credit hours for the academic year
- Able to dedicate 10 hours per week to a faculty research project for the academic year
- GPA of 3.75 or higher
- Demonstrates the capacity and interest for advanced public health research
- Not employed full time at DePaul University
- Not receiving other forms of tuition support from DePaul University
- Not on academic probation for any reason

Research Assistantships
MPH students may participate in research assistantships with individual faculty members as opportunities arise and funding is available. Research assistants are hired by individual faculty members to work on specific research projects, and they are paid an hourly rate. No tuition support or stipends are available for students serving as research assistants.

Independent Study
Students in the DePaul MPH program may also engage in research through the completion of an independent study. If a student finds a faculty research project that is of interest, he/she may choose to work on that project and complete an independent study in place of one of two required program electives. An independent study is student initiated, it does not come with any financial compensation, and it counts as coursework.

3.1.f   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
Both the university and the MPH program support and provide resources for faculty research. Faculty members are regularly engaged in research, and research projects are often community-

based and allow for student involvement. Additionally, the program has either met or exceeded all its research outcome measures. Finally, MPH students have a number of ways to participate in research with faculty.

<u>Weaknesses</u>
No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

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.

3.2.a   Description of the program's service activities, including policies, procedures, and practices that support service. If the program has formal contracts or agreements with external agencies, these should be noted.

The DePaul MPH program pursues service activities in alignment with its mission, as well as the Vincentian mission of DePaul University. As a private, mission driven institution, DePaul values service as a major part of the promotion and tenure process, as further described below. Through a wide range of activities, faculty members of the MPH program provide service to local, regional, and national professional and community-based organizations. These activities range from reviewing manuscripts and grant proposal to providing program evaluation support to community partners implementing a new program, from serving on local committees to serving on executive boards of national organizations. Students engage in service through the Public Health Student Organization as well as opportunities that arise across the university. All members of the MPH program community are encouraged to engage in service activities, and ample opportunities and support exist within the program's and university's structure for such undertakings.

3.2.b   Description of the emphasis given to community and professional service activities in the promotion and tenure process.

Service expectations for faculty are clearly described in university, college, and program-level promotion and tenure documents. The promotion and tenure guidelines for the MPH program can be found in the Resource File (RF: 3.2). In these guidelines, the service expectations can be found in section 5.2, on pages 7-8. Professional and community service is one of the three major criteria that must be met for promotion and tenure consideration. Faculty members who do not engage in service activities risk their promotion and tenure timeline. The program's guidelines align with those of LAS and DePaul University.

DePaul MPH faculty members have no trouble meeting service requirements. Faculty members participate in service to the program, to the college and university, to the profession of public health, and to the community. Program-level service is outlined in Table 1.5.a.1. Service to the college and university is delineated in criterion 1.5.d. Professional and community service commitments for faculty are shown in Table 3.2.c below.

3.2.c A list of the program's current service activities, including identification of the community, organization, agency, or body for which the service was provided and the nature of the activity, over the last three years. See CEPH Data Template 3.2.1. Projects presented in Criterion 3.1 should not be replicated here without distinction. Funded service activities may be reported in a separate table; see CEPH Template 3.2.2. Extramural funding for research or training/continuing education grants should be reported in Template 3.1.1 (research) or Template 3.3.1 (funded workforce development), respectively.

Table 3.2.c. Faculty Service Activities, 2014-Current

Faculty Member	Role	Organization/Journal	Activity or Project	Year(s)
Bruce, Doug	Journal Reviewer	AIDS Care		2013 – Present
	Journal Reviewer	Health Promotion and Practice		2014
	Journal Reviewer	Journal of Urban Health		2014 – Present
	Hoc Journal Reviewer	Psychology of Sexual Orientation and Gender Diversity		2014
	Journal Reviewer	Sexuality Research and Social Policy		2015 – Present
	Journal Reviewer	Substance Use and Misuse		2015 – Present
	Development Consultant	Midwest AIDS Training & Education Center		2014 – Present
	Research Oversight Committee Member	National Runaway Safeline		2013 – Present
	Reviewer	American Public Health Association Annual Meeting	HIV/AIDS Section Grant Review Panels	2010 – Present
	Reviewer	National Institute of Child Health and Human Development		2016
	Steering Committee Member	Consortium for Latino Access to Research Opportunities		2013 – 2015

Faculty Member	Role	Organization/Journal	Activity or Project	Year(s)
Carlberg-Racich, Suzanne	Editorial Board Member	Journal of HIV/AIDS & Social Services		2006 – Present
	Outreach Specialist & Volunteer Manager	Chicago Recovery Alliance		2001 – Present
	Journal Reviewer	AIDS and Behavior		2015 – Present
	Review Board	Chicago Department of Public Health		2016
De Maio, Fernando	*Advisory Board Member*	*Salud Colectiva*		*2009 – Present*
	Associate Editor	*Health Sociology Review*		*2015 – Present*
	Editorial Board Member	*International Journal of Social Science Research Methodology*		*2012 – Present*
Lippert, Julia	Chair	American Industrial Hygiene Association	Non-Ionizing Radiation Committee	2011 – Present
	Committee Chair	American Industrial Hygiene Conference & Expo		2015 – Present
	Consultant	Lyte Collective: Volunteer & Environmental Health Consultant		2015 – Present
	Journal Reviewer	Scholarly Service in Occupational Health	Environmental Health	2016
	Journal Reviewer	Scholarly Service in Occupational Health	Archives of Occupational and Environmental Health	2013 – Present
Martin, Marty	*Editorial Board Member*	*Journal of Financial Therapy*		*2013*
	Journal Reviewer	*Decision Sciences Journal of Innovative Education*		*2014*
	Journal Reviewer	*Journal of Business Ethics*		*2016*
	Journal Reviewer	*Journal of Financial Therapy*		*2014*

Faculty Member	Role	Organization/Journal	Activity or Project	Year(s)
Mazzeo, John	Editorial Board Member	Center for Community Health Equity Working Paper Series		2015 – Present
Neubauer, Leah	Executive Board Member	Association of Accredited MPH Programs (AAPHP)		2013 – 2015
	National Conference Committee Member	Society for Public Health Education		2007 – 2015
	President	Chicagoland Evaluation Association		2009 – 2015
	Secretary	American Evaluation Association		2012 – 2015
Rivkina, Victoria	Conference Abstract Reviewer	American Public Health Association		2013 – Present
	Co-Chair	Chicago Asthma Consortium	School Working Group	2016 – Present
	Secretary	Association of Accredited Public Health Programs	Executive Board	2017 – Present
Schober, Daniel	Committee Member	Chicago Gun Violence Research Collaborative	Philanthropy Work Group	2016 – Present
	Conference Abstract Reviewer	American Evaluation Association	Health Topical Interest Group Annual Meeting	2014 – Present
	Journal Reviewer	American Public Health Association Annual Meeting		2010 – Present
	Journal Reviewer	Child Welfare – Journal of Policy, Practice, & Program		2015 – Present
	Journal Reviewer	Health Promotion and Practice		2011 – Present
	Journal Reviewer	Journal of Obesity		2013 – Present
	Journal Reviewer	Journal of Public Health Management and Practice		2011 – Present

Note: Rows in italics indicate affiliated faculty; shaded rows indicate faculty who are no longer with the DePaul MPH program.

3.2.d Identification of the measures by which the program may evaluate the success of its service efforts, along with data regarding the program's performance against those measures, for each of the last three years. See CEPH Outcome Measures Template.

Table 3.2.d. Outcome Measures for Service

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Conducting Peer Reviews	75% of MPH full-time faculty will perform ≥ 1 peer review(s) per academic year (manuscript review, abstract review, or grant review)	6/8 75%	6/9 67%	7/9 78%
Professional/ Community Service	75% of MPH full-time faculty will participate in external professional or community organizations	7/8 88%	8/9 89%	8/9 89%
Workforce Development Initiatives	75% of MPH full-time faculty will be involved in workforce development initiatives	6/8 75%	7/9 78%	7/9 78%
Engagement of Students in Service Activities	The Public Health Student Organization will provide ≥ 3 opportunities for the MPH student body to engage in service activities per academic year	N/A*	2 Events	7 Events

*The MPH program was unable to gather PHSO service data for AY 2014-2015.

3.2.e Description of student involvement in service, outside of those activities associated with the required practice experience and previously described in Criterion 2.4.

DePaul MPH students engage in service primarily through the Public Health Student Organization (PHSO). PHSO leadership organizes and promotes service activities to the MPH student body. Recent service activities have included Denver parks and recreation clean-up for APHA service day and wrapping gifts at a local federally qualified health center. PHSO also set up a winter coat drive during the 2016 holiday season. In addition to PHSO-initiated events, the organization works with other student organizations across the university to coordinate and promote volunteer opportunities for student. As listed in criterion 3.2.d above, it is expected that PHSO provide at least three service opportunities to students each academic year.

MPH students also regularly participate in service activities directly benefiting the program. During the Health Disparities and Social Justice (HDSJ) Conference, students volunteer to work registration tables, count break-out session attendees, and participate in event set-up and break-down. At the Graduate Forum, student volunteers work registration tables, do timekeeping for student presentations, and interact with judges. Students also attend recruitment events such as open houses and information sessions to communicate with prospective students. Students are

very engaged in these service opportunities and are regularly willing to dedicate their time to support program operations.

> **3.2.f Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met**.

Strengths
Service is a cornerstone of the mission of the MPH program, as well as that of DePaul University. For that reason, service is supported and encouraged for all members of the MPH community. Service requirements are also included in the university's promotion and tenure guidelines. Nearly all faculty and staff participated in service related activities during the last three years. Additionally, MPH students have ample opportunity to participate in service activities, ranging from community service activities coordinated by PHSO to volunteering their time to support internal program operations.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

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.**

3.3.a   **Description of the ways in which the program periodically assesses the continuing education needs of the community or communities it intends to serve. The assessment may include primary or secondary data collection or data sources.**

The DePaul MPH program assesses the continuing education needs of the community it intends to serve in two ways. First, the program surveys its community partners annually regarding their continuing education and/or workforce development needs via the community partner survey. For example, the last question on the 2016 community partner survey was as follows: "*How could the DePaul MPH program strengthen relationships with and support community partners? What ideas do you or others in your organization have for future projects/collaborations (e.g. trainings, workshops, guest speakers, hosting small events or meetings)? If applicable, please give specific examples of topics that would be most helpful.*" Second, MPH program constituents have the opportunity to describe their needs at the annual Stakeholder Meeting. Both of these data collection efforts are undertaken by the Director of Community Partnerships with the support of the MPH Administrative Team. Once data is collected, the Director of Community Partnerships compiles and shares results with members of the MPH Program Committee. After community partner needs are shared, the Program Committee determines how to best move forward to meet the needs of its constituents.

The 2016 community partner survey was sent to a total of 46 community partners who were mentoring practicum students at that time. The program received 37 completed surveys for a response rate of 80%. The findings indicated that the majority of community partners felt there had been clear communication with the MPH program (89% strongly agreed or agreed). Of those who had mentored DePaul MPH students in previous years, 89% indicated that they were motivated to do so because the students helped in completing projects. When asked about the benefits versus the burdens of working with practicum students, 50% reported that the benefits strongly outweighed the burdens, 10% reported that the benefits somewhat outweighed the burdens and 20% reported the benefits and burdens were about equal. In terms of student performance and skill level, 70% of community partners reported strengths in program development, evaluation, and writing skills, while 30% reported weaknesses related to data and policy analysis skills. Yet, 90% also reported that enthusiasm and willingness to learn was a strength among students. The 2016 survey instrument as well as the detailed result can be found in the Resource File (RF: 3.3).

The program employs several strategies aimed at increasing the pool of community partners and other stakeholders. The program faculty and staff attend several external meetings and conferences each year in an effort to stay current with public health trends and network with potential program stakeholders. The program also maintains an active network of alumni who stay connected to the program through on-line networking resources such as LinkedIn and often refer outside colleagues to the program. The Director of Community Partnerships subscribes to several local listservs and conducts on-line research in order to identify and meet with potential

new partners. Last, the Director of Community Partnerships conducts in person site visits each year in order to support and sustain current partners, who serve as important resources in making connections to other departments within larger organizations or agencies.

Because the regional public health training center is located at another university nearby, the DePaul MPH program does not duplicate efforts by assessing the continuing education needs of the public health workforce more broadly. Instead, the DePaul MPH program provides targeted support to its stakeholders and community partners.

3.3.b   A list of the continuing education programs, other than certificate programs, offered by the program, including number of participants served, for each of the last three years. Those programs offered in a distance-learning format should be identified. Funded training/ continuing education activities may be reported in a separate table. See CEPH Data Template 3.3.1 (ie, optional template for funded workforce development activities). Only funded training/continuing education should be reported in Template 3.3.1. Extramural funding for research or service education grants should be reported in Template 3.1.1 (research) or Template 3.2.2 (funded service), respectively.

The DePaul MPH program provides workforce development to its constituents in the following two ways: 1) the Health Disparities & Social Justice Conference, and 2) the Public Health Boot Camp.

Health Disparities and Social Justice Conference
Each year, the DePaul MPH program hosts a day-long Health Disparities and Social Justice (HDSJ) Conference. The event is free and open to the public citywide, but the conference was created as a professional development venue for Chicago's community-based public health workers. Data from recent conferences indicate that approximately 20% of attendees are from city, county, and state health departments. Additional attendees include public health practitioners from community organizations, healthcare systems, regional universities, and other relevant organizations. The MPH program advertises the annual conference via email blasts to its network and through event postings and updates on its website as well as the website of the Center for Community Health Equity.

Through a day of seminars and workshops, the conference encompasses an applied approach to health disparities, targeting those most in need in Chicago. Health disparities are framed as social justice issues, paying close attention to how socioeconomic, racial, and ethnic differences impact health and access to health education and health-related services.

The program strives to meet the needs of its stakeholders by utilizing the results of the data gathered through the community partner survey and annual Stakeholder Meeting to inform conference planning. For example, during the 2016 Stakeholder Meeting, practicum supervisors stated that they wanted an opportunity to meet other supervisors and share best practices prior to the beginning of the academic year. For this reason, the Director of Community Partnerships developed a break-out session at the August 2017 HDSJ conference to specifically target

practicum supervisors. The conference includes a series of skill-building sessions that provide public health professionals with continuing education. Prior skill-building sessions have included qualitative data analysis, program evaluation, and developing a logic model.

The MPH program assesses feedback from conference participants to ensure appropriate professional development activities have taken place. Participants are surveyed about their experience at the conference and this feedback is used to craft the next conference. Between 2016 and 2017, there was an increase in attendance from folks in higher education and health departments/government agencies, and a decrease in attendance from those coming from community/nonprofit organizations. Overall, attendees are generally pleased with the variety of topics and breakout sessions and the opportunity to network. However, attendees also say that there is not enough time for presentations, that the conference would benefit from a more critical review of abstract submissions, and that more diversity was needed among presenters following the 2017 conference. Detailed evaluation reports from the last three years of the HDSJ conference can be found in the Resource File (RF: 3.3).

Public Health Boot Camp
Through academic year 2014-2015, the Public Health Boot Camp was an intensive one-week educational program funded by the AIDS Foundation of Chicago (AFC) and organized by the DePaul MPH program. The intensive training program was designed to enhance mid-level HIV/AIDS organizational leaders' professional knowledge of core public health concepts. The goal of the training program was to increase participants' knowledge and ability to apply concepts of public health science, theory, and practice, and to provide participants with the necessary tools to take what they have learned and implement it to actual HIV/AIDS programmatic issues. Following the 63 contact hours, participants receive a Level-Two Certificate from DePaul University Continuing and Professional Education Center.

Due to funding issues, the last time the DePaul MPH program held the Public Health Boot Camp was in the summer of 2015. The MPH program is actively seeking external funding to reinstate the program.

Table 3.3.b. Workforce Development Participation, by Academic Year

Program Name	2014-2015	2015-2016	2016-2017
HDSJ Conference	271	252	235
Public Health Boot Camp	14	N/A	N/A

3.3.c	Description of certificate programs or other non-degree offerings of the program, including enrollment data for each of the last three years.

The DePaul MPH program offers a Certificate in Global Health. This certificate trains students in key aspects of global health, using a multidisciplinary approach to analyze the underlying determinants of health, the relationship between public health and development, and public health practice.

Students must successfully complete four courses, three required courses and one elective course, in order to earn the certificate:

1. MPH 551: Global Health Inequities
2. MPH 554: Global Public Health Practice
3. MPH 555: Epidemiology in a Global Context
4. One of the following electives:
    - MPH 552: Maternal and Child Health
    - MPH 553: Public Health and Forced Migration
    - MPH 595: Special Topics in Public Health
    - MPH 599: Independent Study in Public Health

Applications for the Certificate in Global Health are accepted at any time, and students may begin the program at the start of any academic quarter. The program is open to both non-degree seeking students and students concurrently enrolled in a DePaul graduate degree program. All applicants must hold a bachelor's degree. To apply to the program, prospective students must submit the following materials: 1) an online application; 2) transcripts from all schools attended; and 3) a personal statement of 300-500 words describing their professional interests and goals in the certificate.

Students in the traditional MPH program may complete the Certificate in Global Health as an add-on. The epidemiology requirement for the MPH program, MPH 502, can be used as a substitute for MPH 555. To date, the majority of students enrolled in the Certificate in Global Health have been current MPH students who want to complete the certificate concurrently with the MPH degree.

Table 3.3.c below shows the number of students enrolled in the Global Health Certificate, by academic year.

Table 3.3.c. Global Health Certificate Enrollment Data, by Academic Year

Academic Year	2014-2015	2015-2016	2016-2017
Number of Students Enrolled	N/A*	6	5
MPH Students	N/A*	3	3
Non-MPH Students	N/A*	3	2

*The Certificate in Global Health did not start enrolling students until the beginning of the 2015-2016 academic year.

3.3.d   Description of the program's practices, policies, procedures, and evaluation that support continuing education and workforce development strategies.

The MPH program actively participates in providing workforce development and continuing education opportunities to its constituents. This is accomplished through the program's Workforce Development Committee. The program receives financial support from the university to engage in these activities. The MPH program uses its operating budget to pay for

catering for the HDSJ conference. Additionally, the program is able to use the DePaul Conference Center free of charge for the conference, a savings of over $2000 for a full day of conference space use. Finally, the program is able to reserve and utilize university space to host a variety of workforce development and continuing education opportunities for its community partners. For example, in the fall of 2016, the Illinois Coalition of Immigrant and Refugee Rights hosted an event on DePaul's Loop Campus. Additionally, the MPH conference room has been utilized by Common Threads and the Chicago Asthma Consortium.

The MPH program encourages faculty, staff, and students to participate in workforce development. For example, MPH faculty are expected to present at the HDSJ conference. Faculty generally present their research and/or host a skill-building session. In previous years, faculty also served as session leaders for the Public Health Boot Camp. Graduating students are strongly encouraged to present their practicum and capstone work at HDSJ. Graduate assistants are required to present the work they did to support faculty as part of their assistantship award. All students are encouraged to attend the conference to engage in networking and professional development.

In recent years, the MPH program has increased its capacity to provide workforce development and continuing education opportunities through the introduction of the Certificate in Global Health available to non-degree seeking students. Once again, college-level and university-level support was instrumental in the program's ability to offer such a certificate. MPH program faculty are involved in teaching certificate courses, and MPH students have also taken advantage of this opportunity.

Workforce development has been a critical part of the DePaul MPH program operations since its inception. The program engages faculty and staff to ensure appropriate continuing education opportunities exist for its constituents. The MPH program regularly assesses its workforce development offerings to align with the needs of the community it intends to serve.

3.3.e   A list of other educational institutions or public health practice organizations, if any, with which the program collaborates to offer continuing education.

Criterion 3.3.e is not applicable because the DePaul MPH program does not collaborate with other educational institutions or public health practice organizations to offer continuing education credit.

3.3.f   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths

The program assesses the continuing education needs of its community partners twice each year. Annually, the MPH program provides workforce development to its constituents via the Health Disparities and Social Justice Conference and the Public Health Boot Camp. Although the Public Health Boot Camp has been discontinued in recent years, interest in and attendance at the Health Disparities and Social Justice Conference has remained quite high. Additionally, the MPH program also offers a Certificate in Global Health which is open to both non-degree seeking students as well as currently enrolled MPH students as an add-on. Overall, the DePaul MPH program is committed to providing quality workforce development opportunities to its constituents.

Weaknesses

No weaknesses have been identified.

Plans to Improve

There are no improvement plans needed at this time.

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.

4.1.a   A table showing primary faculty who support the degree programs offered by the program. It should present data effective at the beginning of the academic year in which the self-study is submitted to CEPH and should be updated at the beginning of the site visit. This information must be presented in table format and include at least the following: a) name; b) title/academic rank; c) FTE or % time; d) tenure status or classification*; g) graduate degrees earned; h) discipline in which degrees were earned; i) institutions from which degrees were earned; j) current instructional areas; and k) current research interests. See CEPH Data Template 4.1.1.
*Note: classification refers to alternative appointment categories that may be used at the institution.

Table 4.1.a. Primary Instructional Faculty

Concentration	Name	Title/ Academic Rank	Tenure Status	FTE%	Graduate Degrees Earned	Institution Where Degrees Were Earned	Discipline in Which Degrees Were Earned	Teaching Area	Research Interests
Community Health Practice	John Mazzeo	Associate Professor, Program Director	Tenured	67%	MA, PhD	University of Arizona	Anthropology	Methods, Capstone, Global health	Global health; food security; health equity
Community Health Practice	Jessica Dirkes	Director of Community Partnerships, Instructor	Non-Tenure Track	50%	MPH, PhD	Tulane University, University of Illinois at Chicago	Public Health	Practicum	Sexual health; women's health
Community Health Practice	Victoria Rivkina	Program Manager, Instructor	Non-Tenure Track	50%	MPH	DePaul University	Public Health	Practicum	School health; asthma

Community Health Practice	Suzanne Carlberg-Racich	Assistant Professor	Tenure Track	56%*	MSPH, PhD	University of Illinois at Urbana-Champaign, University of Illinois at Chicago	Public Health	Community Health, Capstone	Harm reduction, drug use
Community Health Practice	Julia Lippert	Clinical Assistant Professor	Non-Tenure Track, Contract	100%	MSc, PhD	University of Illinois at Chicago	Environmental Health and Occupational Health Sciences	Methods, Environmental Health, Capstone	Occupational health and safety
Community Health Practice	Daniel Schober	Clinical Assistant Professor	Non-Tenure Track, Contract	100%	MA, MPH, PhD	University of Kansas	Behavioral Psychology	Community Health, Capstone	Evaluation, violence, nutrition, sexual health

*Although Suzanne Carlberg-Racich is dedicated to the MPH 100% FTE, she is on academic leave during the autumn and spring terms of AY 2017-2018.

4.1.b **Summary data on the qualifications of other program faculty (adjunct, part-time, secondary appointments, etc.). Data should be provided in table format and include at least the following: a) name; b) title/academic rank; c) title and current employment; d) FTE or % time allocated to the program; e) highest degree earned (optional: programs may also list all graduate degrees earned to more accurately reflect faculty expertise); f) disciplines in which listed degrees were earned; and g) contributions to the program. See CEPH Data Template 4.1.2.**

Table 4.1.b. Affiliated and Adjunct Instructional Faculty

Concentration	Name	Title/ Academic Rank	Title and Current Employer	FTE%	Graduate Degrees Earned	Institution Where Degrees Were Earned	Discipline in Which Degrees Were Earned	Teaching Areas
Community Health Practice	Doug Bruce	Associate Professor*	DePaul University, College of Science & Health	44%	MSW, PhD	University of Illinois at Chicago	Public Health	Program design
Community Health Practice	Fernando De Maio[1]	Associate Professor*, Director of the Center for Community Health Equity	DePaul University, College of Liberal Arts & Social Sciences	33%	MA, PhD	University of Essex	Sociology	Global health; social epidemiology
Community Health Practice	William Martin	Professor*	DePaul University, Driehaus College of Business	44%	MA, MS, MPH, PsyD	Catholic University, Rutgers University	Applied Psychology, Personal Financial Planning, Health Promotion, Clinical Psychology	Health administration

Community Health Practice	Alyson Lofthouse	Adjunct Instructor**	Associate Director, Global Health Program, UIC	8.5%	MUP	University of Illinois at Chicago	Urban Planning	Global health
Community Health Practice	Isidore Udoh	Adjunct Instructor**	Assistant Professor, Northeastern Illinois University	17%	MA, JCL, PhD	DePaul University, Catholic University of America, North Dakota State University	Health Communication, Human Development	Global health

[1]Fernando De Maio will be on academic leave during the spring term of AY 2017-2018, and will therefore not be teaching for the MPH program.

* FTE formula for affiliated faculty = 11.1% per course, 22.2% for research, and 11.1% for program development/service.

** FTE formula for adjunct instructors = 8.5% per course.

4.1.c   Description of the manner in which the faculty complement integrates perspectives from the field of practice, including information on appointment tracks for practitioners, if used by the program. Faculty with significant practice experience outside of that which is typically associated with an academic career should also be identified.

Faculty in the DePaul MPH program bring a diverse array of public health training, research, and practice-based experiences to the classroom. Faculty have worked in the following areas of public health throughout their careers: global health, food security, sexual health, women's health, school health, chronic disease, harm reduction, occupational health and safety, environmental health, evaluation, violence prevention, and nutrition. Suzanne Carlberg-Racich has worked as a Research & Evaluation Specialist with the Midwest AIDS Training and Education Center. Victoria Rivkina worked as a Student Health Specialist with the Chicago Public Schools Office of Student Health and Wellness. Affiliated and adjunct faculty have experience in the following public health focus areas: program design, grant writing, social epidemiology, health administration, environmental health, and global health. For example, Doug Bruce worked as Lead Trainer for the Homeless Veterans Technical Assistance Center.

Faculty integrate perspectives from their experience serving in leadership roles for professional organizations. Examples include steering committee member for the Consortium for Latino Access to Research Opportunities, chair of the American Industrial Hygiene Association's Non-Ionizing Radiation Committee, secretary of the Association of Accredited Public Health Programs' Executive Board, and committee member of the Chicago Gun Violence Research Collaborative Philanthropy Work Group.

Faculty engage in paid and unpaid consultant work with practice organizations. In recent years, program faculty have consulted on numerous projects at the local and national level. A few examples include being a consultant for the LiveWell Colorado "Healthy Restaurant Initiative," serving as an evaluation expert for the Forum for Youth Investment "Evaluation of the East Side Thrives Initiative," consulting to assist with grant writing for the Midwest AIDS Training and Education Center, serving as an evaluation consultant for the Public Health Institute of Metropolitan Chicago "POP Campaign", and serving as an expert researcher for Family Health International 360 on developing guidelines for "Economic Strengthening for Vulnerable Households."

Faculty rely on guest lecturers to speak and to integrate perspectives from the field of practice in their courses. Recent guest speakers have included a director from a rural public health department, a policy manager from the Respiratory Health Association, and a legal advocate from the Illinois Medical-Legal Partnership for Children. In *MPH 525: Program Evaluation*, students work with representatives of a community organization to develop an evaluation of one of their existing programs. This hands-on experience provides students with the opportunity to learn from those engaged in public health practice.

4.1.d   Identification of measurable objectives by which the program assesses the qualifications of its faculty complement, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcome Measures Template.

Table 4.1.d. Outcome Measures for Assessing Faculty Complement, by Academic Year

Outcome Measure	Target	2014-2015	2015-2016	2016-2017
Award of Tenure for Eligible Faculty	100% of faculty eligible for tenure are tenured	3/3 100%	3/3 100%	4/4 100%
Award of Full Professor for Eligible Faculty	100% of faculty eligible for promotion to full professor and apply receive promotion	0/0 N/A	0/0 N/A	1/1 100%
Degrees Held	90% of primary & affiliated MPH faculty will hold a doctoral degree, such as a PhD, EdD, or PsyD	7/8 88%	8/9 89%	8/9 89%

*Prior to 2017, no faculty associated with the MPH program were eligible for promotion to full professor. In 2017, William "Marty" Martin went up for and received promotion to full professor.

4.1.e   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met**.

Strengths
The program has a faculty complement that is multidisciplinary, has strong educational preparation, a great deal of practice experience, and possesses research and instructional competence. All program faculty are committed to the mission of the university as well as that of the public health program. The DePaul MPH program faculty have a broad array of experience, both academic and practice-based. Students in the DePaul MPH program are able to take advantage of all the knowledge and experience of the diverse and qualified faculty complement.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

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.

4.2.a   A faculty handbook or other written document that outlines faculty rules and regulations.

Both DePaul University and the Master of Public Health program have robust and well-advertised resources for faculty. The university has a faculty and staff website with an abundance of resources, including administrative resources, instructional resources, and technology support resources (http://www.depaul.edu/Pages/faculty.aspx). The link to the password-protected university faculty handbook is also found on the website. A PDF version of DePaul's *Faculty Handbook* can be found in the Resource File (RF: 4.2).

The MPH program has also developed a faculty and staff handbook with policies and procedures specific to the department. This handbook is updated prior to the beginning of each academic year. A copy of the MPH *Faculty and Staff Handbook* can be found in the Resource File (RF: 4.2).

4.2.b   Description of provisions for faculty development, including identification of support for faculty categories other than regular full-time appointments.

At both the university-level and the college-level, various forms of support exist for faculty to engage in public health-related course, research, and practice development.

University-Level

Vincentian Endowment Fund
The Vincentian Endowment Fund (VEF) was established in 1992 by a gift from the Vincentian Fathers and Brothers who sponsor DePaul. The endowment seeks to assist the university in its developing understanding of how, as an institution of higher education informed by the vision of Vincent de Paul, it is to be Catholic as it enters its second century. This assistance is achieved through funding appropriate grant projects that directly enhances the identity of DePaul University as Catholic. Julia Lippert received a VEF grant in 2016.

Quality of Instruction Council
The Quality of Instruction Council (QIC) promotes the development of new programs, curricular enhancements, and pedagogical innovations through competitive grants, summer stipends, and faculty leaves. The QIC recognizes significant achievement in teaching and commitment to the teaching mission that can serve as university models through the Excellence in Teaching

Awards. Faculty are rewarded based on their teaching performance in degree-credit programs. Doug Bruce received a QIC grant in 2015; John Mazzeo received a QIC grant in 2016.

The Public Service Council
The Public Service Council (PSC) assists faculty to incorporate meaningful public service and service learning into their course work. The PSC looks to award faculty who contribute to the social, economic, cultural, and ethical quality of life of the global community. In addition, the award looks to honor the meaningful and significant contributions of faculty during their time at DePaul to the communities in which they are involved. No MPH faculty have taken part in this over the course of the last three years.

University Research Council
The University Research Council (URC) supports the faculty's research, scholarship, and creative activities through competitive grants and leaves as a stepping stone for securing external funding. The annual Spirit of Inquiry Awards honor specific research, scholarly, or creative achievements that exhibit commitment to that spirit of creative inquiry, which the university endeavors to inspire in its students. John Mazzeo and Suzanne Carlberg-Racich each received a URC grant in 2015; Fernando De Maio received a URC grant in 2016.

Research Leave Paid Program
The Research Leave Paid Program is sponsored by the URC and QIC. Paid leave is intended for faculty who arrange to carry out extended academic projects that would be difficult or impossible to undertake without suspension of other contractual responsibilities. No MPH faculty have taken part in this over the course of the last three years, but Suzanne Carlberg-Racich will be taking leave for two-thirds of the 2017-2018 academic year.

Humanities Center Fellow
These fellowships, as determined through the DePaul Humanities Center, provide partial reductions in teaching load as well as undergraduate research assistance. Fellows engage in rich interdisciplinary conversations throughout the year and work with the Center to plan a program that connects their work to the broader community. These community events allow the fellows to move the conversation about their work beyond the walls of the university to present work or collaborate on projects with cultural institutions. No MPH faculty have taken part in this over the course of the last three years.

Wicklander Fellow
The Wicklander Fellowship is awarded to the full-time DePaul faculty members who demonstrate an interest in the application of professional ethics as these topics relate to his or particular field of research. The fellowship is awarded through DePaul's College of Commerce, Institute of Business and Professional Ethics. No MPH faculty have taken part in this over the course of the last three years.

Vincentian Heritage Tour
Vincentian Heritage Tours offers opportunities to join study tours in France, following in the footsteps of Vincent de Paul throughout Paris and other cities and sites of Vincentian historical

significance. The tours are offered through DePaul's Office of Mission and Values. No MPH faculty have taken part in this over the course of the last three years.

College-Level

Faculty Summer Research Program
The Faculty Summer Research Grant (FSRP) provides salary stipends and funding for additional expenses to tenure-track and tenured full-time faculty for projects undertaken in the summer. Doug Bruce received support through FSRP in 2015, Suzanne Carlberg-Racich received such support in 2016, and Fernando De Maio received FSRP support in 2017.

Undergraduate Research Assistant Program
The Undergraduate Research Assistant Program (URAP) grant provides funding for undergraduate students to assist and collaborate with faculty members who conduct research projects or are engaged in creative and scholarly activities during the regular academic year and/or summer. Doug Bruce received support through URAP in 2014 and 2015.

4.2.c   Description of formal procedures for evaluating faculty competence and performance.

DePaul University expects continuous evaluation of all aspects of the university's commitments. A major element in this process is the multifaceted process of faculty review. The purpose of review is to encourage a dialogue between and among faculty and administrators in order to better meet the missions and goals of the university. It is a continuous, on-going process that incorporates several types of review.

Annual Performance Review
All primary full-time faculty—tenured, tenure-line, and full-time non-tenure-line—are reviewed annually through a process comprised of a review and evaluation of performance during the past academic year based on college-specific criteria and responsibilities. It may serve one or all of the following purposes:
1. To provide an opportunity for feedback on performance during the past year, to communicate expectations, and to develop personal goals for the coming year;
2. To determine salary recommendations; and
3. For full-time non-tenure-line faculty with one-year appointments, to determine whether contract renewal for the next academic year is appropriate and desired.

In the MPH program, annual performance reviews involve a formal process initiated by the Program Director. Each faculty member provides a CV, self-assessment, teaching evaluations, and other relevant materials. See the *MPH Faculty Review Process* document in the Resource File (RF: 4.2). The Program Director reviews the materials submitted by the faculty member and prepares an assessment. For full-time-non-tenure-line faculty, the Program Director indicates the type of contract request (non-renewal, renewal single year, or renewal multi-year). The Program Director meets with faculty individually to discuss the assessment. The Program Director's

assessment along with the faculty member's CV and teaching evaluations are submitted to the personnel coordinator in the College for review by the LAS Dean. The LAS Dean meets with the Program Director to discuss the assessment.

The MPH Program Director is assessed by the LAS Dean. In the case where the Program Director's home academic unit is not MPH, the Dean will assess the Program Director's performance in the program and the Department Chair of the Program Director's home academic unit will assess his/her relevant performance.

Primary faculty will receive an annual classroom observation conducted by another faculty member. The *Faculty Evaluation Form for Classroom Observation* found in the Resource File (RF: 4.2) provides a template for reviewers.

Part time faculty will be reviewed by the Program Director according to the *Adjunct Review* document found in the Resource File (RF: 4.2).

Reviews for Tenure and Promotion for Tenure-Line Faculty
The MPH program conducts pre-tenure reviews of tenure-line, non-tenured faculty. There are two types of review, informal review and formal review. Both types of reviews are discussed in the *MPH Promotion and Tenure* document found in the Resource File (RF: 4.2).

The MPH program also conducts its own local-level tenure and promotion reviews. This process is also described in the *MPH Promotion and Tenure* document found in the Resource File (RF: 4.2).

In the case of joint appointments for tenure-line faculty, the MPH Program Director will serve on all formal pre-tenure reviews and the final promotion and tenure review for that faculty. The expected contributions of the MPH Program Director are stipulated in the joint appointment letter to the faculty upon hire. The MPH Program Director will apply the same criteria for promotion and tenure as described in the *MPH Promotion and Tenure* document in the Resource File (RF: 4.2).

Reviews Promotion for Non-Tenure-Line Faculty
The MPH program conducts a formal review of full-time non-tenure-line faculty seeking promotion. In this case promotion is in rank and does not include tenure. There are three functional titles of full-time non-tenure-line faculty – clinical instructor, clinical assistant professor, and clinical associate professor. The process and criteria for promotion are described in the *Contingent Faculty* document in the Resource File (RF: 4.2).

4.2.d Description of the processes used for student course evaluation and evaluation of instructional effectiveness.

DePaul University utilizes quarterly online course evaluations by which students can evaluate instructor effectiveness. These online course evaluation surveys consist of five university-generated questions as well as questions developed by each academic unit. The online course

evaluations provide prompt feedback to faculty. Students remain anonymous, and faculty members are only informed of the number of students that have completed the evaluation. Within two days of posting grades, faculty can access their completed evaluations.

Student evaluation of instruction occurs in every course each quarter. Evaluation results are an excellent indication of student satisfaction with course design, faculty performance, and the learning that occurred. These evaluations provide individual faculty data which can then be compared to department-level and college-level mean data. Department mean scores reveal how faculty member compare to each other. Summaries are then provided to the individual faculty member and the MPH Program Director. The Program Director reviews any issues or inconsistencies with the individual faculty member during the following quarter. These evaluations comprise a major source of data for annual merit review of faculty and are used in reappointment, promotion, and tenure decisions.

4.2.e **Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met**.

Strengths
Both the university and the MPH program have a robust set of policies and procedures to support faculty. University-level and program-level faculty handbooks are updated regularly and readily available to all faculty. There are numerous opportunities for faculty development as both the university and college levels. Evaluation of faculty performance is very clearly defined. Students have an opportunity to evaluate faculty at the conclusion of each course. Student evaluations are taken very seriously by the program, the college, and the university. Overall, faculty support procedures are clearly stated and available for all faculty to review.

Weaknesses
No weaknesses have been identified.

Plans to Improve
There are no improvement plans needed at this time.

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.

4.3.a   Description of the program's recruitment policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.

The MPH program works with DePaul's Division of Enrollment Management and Marketing (EMM) as well as the LAS Office of Graduate Admissions in order to recruit a qualified pool of applicants. The MPH program only admits students once per year, with new cohorts beginning each autumn quarter. Recruitment for a cohort begins approximately one year in advance. For example, recruitment for the cohort starting in September 2017 began in September 2016. The MPH Administrative Team meets with representatives from LAS Graduate Admissions a few times during late summer/early fall to finalize a recruitment strategy for the upcoming recruitment and admissions cycle.

The LAS Office of Graduate Admissions serves as the front line for wide-scale recruitment efforts. Office representatives maintain records of prospective students, answer initial student inquiries, and send promotional materials to those indicating program interest. Other recruitment efforts, as described below, are conducted by the MPH program in conjunction and coordination with the Office of Graduate Admissions.

Open Houses and Information Sessions
EMM coordinates several open houses and information sessions throughout the academic year. There are three university-wide open houses, one for each quarter, in October, February, and May. The LAS Office of Graduate Admissions works with the MPH program to coordinate tables and materials needed for open houses. In addition to open houses, the MPH program holds separate information sessions to provide additional information to prospective students. There are two MPH information sessions, one in November and one in January/February. MPH faculty, staff, and students attend information sessions to present information and answer prospective student questions. To recruit BS-MPH students, the Program Manager and representatives from the College of Science and Health, Department of Health Sciences hold a separate information session for Health Sciences students.

Tabling and Promotion
In addition to open houses and information sessions, the MPH program participates in career fairs, graduate school fairs, and other recruitment opportunities to which invitations are received. Internally, MPH program representatives attend events such as science-focused graduate school fairs and social justice-oriented career fairs. Externally, representatives from the LAS Office of Graduate Admissions represent all LAS graduate programs at events such as the Idealist.org graduate school fair and other regional career fairs.

Direct Outreach from MPH Director
In recent recruitment cycles, the MPH Program Director has engaged in direct recruitment efforts. The Program Director sent an email and program one-pager to the department chairs of regional undergraduate departments with public health and health-related majors. Additionally, similar emails were sent to community partners and attendees of the Health Disparities and Social Justice (HDSJ) Conference to be shared with their networks.

4.3.b   Statement of admissions policies and procedures. If these differ by degree (e.g., bachelor's vs. graduate degrees), a description should be provided for each.

As detailed on the College of Liberal Arts and Social Sciences public health admissions page (http://las.depaul.edu/academics/public-health/graduate/public-health-mph/Pages/admission-requirements.aspx), the DePaul MPH Program admits students once per year in the fall quarter. Applications must be completed online by March 1 for eligibility to enter the program in the fall.

Admissions Requirements
A bachelor's degree from a regionally accredited institution is required for admission.

All applicants are required to submit the following:
- A completed online application.
- Official transcripts from all previous college coursework. A GPA of 3.0 or above (on a 4.0 scale) is recommended, but not required, for admission.
- Official GRE scores if GPA is below 3.0. Submission of GRE scores is recommended for students with a GPA of 3.0 or above, but it is not required for admission. The Medical College Admission Test, Dental Admission Test, Pharmacy College Admission Test, or Law School Admission Test scores can be substituted for GRE scores. The DePaul Institution Code is 1165.
- Responses to the following five prompts:
  - Your previous applied public health experience (250 words).
  - Your reasons for seeking an MPH degree in community health practice (250 words).
  - Your reasons for seeking an MPH degree from DePaul University (150 words).
  - Where you see yourself professionally in five years and a description of the type of work you will be doing (250 words).
  - What is unique about you that the admission committee should know (150 words).
- Two letters of recommendation: one from a person who can speak to the applicant's academic performance and one who can speak to the applicant's ability to work with diverse communities and hold a commitment to social justice.
- Current résumé or curriculum vitae.

Additionally, applicants may be asked to provide additional supplemental materials or to interview should the admissions committee require it.

Students educated outside the United States must present proof of English proficiency. The college requires a minimum Test of English as a Foreign Language (TOEFL) score of 80 on the TOEFL iBT, 213 on the computer-based test or 550 on the paper-based test. While applicants who meet the college minimum will be reviewed, the MPH admission committee prefers TOEFL scores of at least 96 on the TOEFL iBT, 243 on the computer-based test or 590 on the paper-based test. A minimum 7.5 on the International English Language Testing System (IELTS) may be submitted for this requirement.

MPH Admissions Process
Once an online application is complete and all supplemental materials have been submitted, MPH program staff are notified of the application requiring their attention. Completed applications then are sent to faculty on the Admissions Committee for review. Each faculty member assigns a numeric score to each application. After all applications have been reviewed and scores tabulated, the MPH Administrative Team makes final decisions regarding acceptance, wait listing, and denial of admission. The MPH Program Manager enters all decisions into the online tracking system in Campus Connect, and information is transferred electronically to the LAS Office of Graduate Admissions. The Office of Graduate Admissions then notifies students of their status via a letter in the mail and an email.

4.3.c **Examples of recruitment materials and other publications and advertising that describe, at a minimum, academic calendars, grading, and the academic offerings of the program. If a program does not have a printed bulletin/catalog, it must provide a printed web page that indicates the degree requirements as the official representation of the program. In addition, references to website addresses may be included.**

The following recruitment materials can be found in the Resource File (RF: 4.3):
- Program One-Pager
- Fulfillment Letter
- Second Fulfillment Letter
- GRE Email
- MPH Information Session Slides
- BS-MPH Information Session Slides
- Association of Accredited Public Health Programs (AAPHP) APHA Promotion Slide
- Email to Undergraduate Program
- Email to HDSJ Attendees

The Public Health Degree Requirements webpage of the University Catalog serves as the official representation of what is expected for program completion (http://www.depaul.edu/university-catalog/degree-requirements/graduate/class/public-health-mph/Pages/default.aspx). A printed version of this has been included in the Resource File (RF: 4.3).

Recruitment materials are updated prior to each recruitment cycle. As described in criterion 2.1 above, the University Catalog is reviewed twice per academic year and updated as necessary.

4.3.d   Quantitative information on the number of applicants, acceptances, and enrollment, by concentration, for each degree, for each of the last three years. Data must be presented in table format. See CEPH Data Template 4.3.1.

Table 4.3.d. Number of Applicants, Acceptances, and Enrollments, 2015-2017

		2015	**2016**	**2017**
Community Health Practice	Applied	82	94	71
	Accepted	44	33	49
	Enrolled	32[1]	22	20

1.   Enrollment numbers for the cohort entering the program in the fall of 2015 were particularly high because of a lack of attrition over the summer, as has occurred in all other years.

4.3.e   Quantitative information on the number of students enrolled in each specialty area of each degree identified in the instructional matrix, including headcounts of full- and part-time students and an FTE conversion, for each of the last three years. Non-degree students, such as those enrolled in continuing education or certificate programs, should not be included. Explain any important trends or patterns, including a persistent absence of students in any degree or specialization. Data must be presented in table format. See CEPH Data Template 4.3.2.

Table 4.3.e. Student Enrollment Data, 2015-2017

	Year 1 – 2015		**Year 2 – 2016**		**Year 3 – 2017[1]**	
	HC	*FTE*	*HC*	*FTE*	*HC*	*FTE*
MPH, Community Health Practice	71	46	65	37	48	29

1.   The decrease in headcount and full-time equivalents during Year 3 is due to the graduation of the Lurie cohort in Year 2.

4.3.f **Identification of measurable objectives by which the program may evaluate its success in enrolling a qualified student body, along with data regarding the performance of the program against those measures for each of the last three years. See CEPH Outcome Measures Template.**

Table 4.3.f. Outcome Measures for Enrolling Qualified Student Body, 2015-2017

Outcome Measure	Target	2015	2016	2017
1. Grade Point Average	The average GPA for the incoming cohort will be ≥ 3.33	3.35	3.51	3.31
2. Professional Experience	The average number of years of post-baccalaureate experience is ≥ 5	1.25	2.33	2.53
3. Overall Application Score	The average overall application score for the incoming cohort will be ≥ 3 (out of 4)	3.00	3.00	3.25

1. Although admissions GPA requirements are set at 3.0, the MPH program strives to admit students who exhibit higher academic performance. Therefore, the program has set an internal target to have the average GPA of the incoming cohort be at least 3.33. The target has consistently been met.
2. The MPH program values a diversity of professional experience among its students. For this reason, the program set an internal target to admit an incoming cohort with an average of 5+ years of professional experience. Although this target has not been met, the program continues to strive to achieve it during the admissions process.
3. The Admissions Committee uses a Likert-scale scoring form (RF 4.3) to evaluate each prospective student application. The MPH program has set an internal target to have the average overall application score for each incoming cohort be at least 3 (priority) out of 4. The target has been met for the last three years.

4.3.g **Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.**

This criterion is **met**.

Strengths
The program has a robust recruitment plan which is implemented in full during each recruitment and admissions cycle. Additionally, the MPH program has the support of and collaborates closely with university and college-level colleagues in order to ensure that the admissions process is clear and simple for prospective students. The MPH program has a toolkit of recruitment materials, and it makes those materials readily available to anyone interested in learning more about the program. The program also enrolls a qualified student body during each

admissions cycle, and maintains records on all indicators used to assess its recruitment and admissions efforts.

<u>Weaknesses</u>
No weaknesses have been identified.

<u>Plans to Improve</u>
There are no improvement plans needed at this time.

> **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.**

> **4.4.a** **Description of the program's advising services for students in all degrees and concentrations, including sample materials such as student handbooks. Include an explanation of how faculty are selected for and oriented to their advising responsibilities.**

MPH students receive three levels of advising through the *Technical Advisor,* the *Practicum Advisor*, and the *Professional Advisor* as described below:

1. **Technical Advisor:** MPH students are assigned to a technical advisor upon entering the program. Technical advisors are core MPH faculty. MPH students are strongly encouraged to meet with their technical advisor each quarter. The technical advisor assists students with curriculum planning, selecting electives, navigating the University, and providing overall assistance to ensure success. Students in the standard two-year MPH program are randomly assigned a faculty advisor. Students completing the program in three or four years, BS-MPH students, MBA-MPH students, and on-site Lurie cohort students receive advising from the Program Manager.
2. **Practicum Advisor:** The practicum advisor is the Director of Community Partnerships. MPH students work with the practicum advisor to apply for and be placed in a practicum setting in the year prior to their degree conferral. In their final year, students work with the practicum advisor to complete their practicum, capstone thesis, and capstone poster.
3. **Professional Advisor:** The professional advisor is a faculty member identified by the student as being able to offer valuable advice on professional development and career planning. Students may seek professional advising from multiple faculty as they earn their degree. Although not required, students are encouraged to seek out and meet with a professional advisor.

During orientation, the advising system is explained to incoming MPH students. Additionally, all students are sent an electronic copy of the Student Handbook, where this information also resides. MPH staff update the Student Handbook prior to the beginning of each academic year and post the updated version on the program website (http://las.depaul.edu/academics/public-health/student-resources/Pages/default.aspx). The *Student Handbook* can also be found in the Resource File (RF: 4.4).

Faculty are sent their advising lists in August prior to the beginning of each academic year. The master advising list is also available on the shared drive to which all faculty have access. The Program Manager encourages faculty to reach out to their advisees as soon as possible at the beginning of Autumn quarter; reminders are also sent. The Program Director and Program Manager also communicate elective offerings and give advising responsibility reminders to faculty during Program Committee Meetings.

4.4.b   Description of the program's career counseling services for students in all degree programs. Include an explanation of efforts to tailor services to meet specific needs in the program's student population.

Students in the MPH program have access to career counseling services both internal and external to the program. Internally, students can utilize the Professional Advisor resource described above. Due to the small size and personalized nature of the program, MPH faculty and staff are willing to assist any student who seeks out their advice and expertise. Additionally, the MPH program also has a website through the external platform Wix that is updated continuously with job opportunities. The Student Program Assistants update the Wix website as faculty, staff, and external stakeholders send relevant postings. Once per week, a reminder to check the Wix website is sent to the DePaul MPH listserv, which includes students and alumni. Through student feedback, the program learned that students and alumni only wanted to receive updates once per week via email. The DePaul MPH Wix website can be accessed here: https://mph345.wixsite.com/depaulmph.

Externally, students in the MPH program have unlimited access to DePaul's Career Center (http://careercenter.depaul.edu/). The Career Center provides services such as resume and cover letter writing assistance, mock interviewing, networking opportunities, and general career advising. Students first learn about the Career Center during orientation when a representative gives a brief presentation about available services and shares his/her contact information. A Career Center representative also comes to the second to last session of MPH 600 to do a resume writing and interview skills workshop in advance of students applying for practicum. The MPH program also sends regular announcements from the Career Center to the student body.

4.4.c   Information about student satisfaction with advising and career counseling services.

Advising and career counseling satisfaction data was collected via the December 2016 Alumni Survey, which was distributed to all 141 alumni who have completed the DePaul MPH program. A total of 62 alumni completed the survey for a response rate of 44%. Table 4.4.c.1 below shows the level of alumni satisfaction with advising and career counseling.

Table 4.4.c.1: Alumni Satisfaction with Advising and Career Counseling, 2016

Question	Response, N (%)
Advising Satisfaction	
Very Satisfied	14 (23%)
Satisfied	26 (42%)
Neutral	15 (24%)
Dissatisfied	2 (3%)
Very Dissatisfied	0 (0%)
Missing	5 (8%)
Career Counseling Satisfaction	
Very Satisfied	8 (13%)
Satisfied	21 (34%)
Neutral	19 (31%)
Dissatisfied	9 (14%)
Very Dissatisfied	0 (0%)
Missing	5 (8%)

Prior to the 2016-2017 academic year, exit surveys were not administered to graduating students. In May 2017, an exit survey was distributed to all 43 students graduating in June; 38 graduating students completed the survey, for a response rate of 88%. Table 4.4.c.2 below shows the level of satisfaction with advising and career counseling among graduating students.

Table 4.4.c.2: Graduating Student Satisfaction with Advising and Career Counseling, 2017

Question	Response, N (%)
Advising Satisfaction	
Very Satisfied	11 (29%)
Satisfied	16 (42%)
Neutral	9 (24%)
Dissatisfied	2 (5%)
Very Dissatisfied	0 (0%)
Perceived Accessibility of Advising	
Very Satisfied	15 (39%)
Satisfied	14 (37%)
Neutral	6 (16%)
Dissatisfied	3 (8%)
Very Dissatisfied	0 (0%)
Career Counseling Satisfaction	
Very Satisfied	3 (8%)
Satisfied	10 (26%)
Neutral	21 (55%)
Dissatisfied	3 (8%)
Very Dissatisfied	1 (3%)
Career Center Engagement	
Zero Times	28 (74%)
One Time	7 (18%)
Two Times	3 (8%)
Three or More Times	0 (0%)

Although advising satisfaction and career counseling satisfaction data were not collected consistently in prior years, the DePaul MPH program will ensure that this information is collected from both Exit Surveys and Alumni Surveys going forward. Processes and robust data collection tools were developed during the 2016-2017 academic year; these tools will be utilized to survey future graduating cohorts and groups of alumni.

4.4.d   Description of the procedures by which students may communicate their concerns to program officials, including information about how these procedures are publicized and about the aggregate number of complaints and/or student grievances submitted for each of the last three years.

As outlined in the Student Handbook, the MPH program recognizes that students may have concerns throughout their academic career that require the intervention of the program officials and/or a university-level response.

At the program level, students can bring their grievances to the Program Director for official documentation and intervention, as necessary. The Program Director aims to swiftly address any concerns students may have.

If students are unable to settle their complaint of grievance at the program level, the university has a number of established policies and procedures for responding to particular types of concerns. Key examples are provided below:

- **Grade Challenges:** Concerns about grades are addressed through the university's Grade Challenge policy: http://www.depaul.edu/university-catalog/academic-handbooks/graduate/graduate-academic-policies/Pages/grades-challenges-to.aspx.
- **Academic Integrity:** Concerns about academic integrity are addressed through the Academic Integrity policy and process: http://offices.depaul.edu/oaa/faculty-resources/teaching/academic-integrity/for-students/Pages/default.aspx.
- **Student Conduct:** Concerns related to student conduct are addressed through the Code of Student Responsibility, and the Student Conduct Process: http://www.depaul.edu/university-catalog/academic-handbooks/code-of-student-responsibility/general-information/Pages/default.aspx.
- **Discrimination and Harassment:** Concerns about discrimination or harassment on the basis of a variety of protected characteristics are addressed by the Office of Institutional Diversity and Equity through the Anti-Discrimination and Anti-Harassment Policy and Procedures: http://offices.depaul.edu/diversity/compliance/complaints/Pages/default.aspx.

Table 4.4.d. Number of Student Grievances by Academic Year

Year	2014-2015	2015-2016	2016-2017
# of Grievances	1	0	0

During the last three academic years, only one student grievance has been filed through official program, college, and university channels. A student was distressed about an interaction with an instructor and requested a meeting with the Program Director. The Program Director met with the student, expressed support, and outlined potential channels for resolution. The grievance was resolved to the satisfaction of the student in a timely manner. Program documentation regarding the grievance, with names redacted, can be found in the Resource File (RF: 4.4).

The MPH program manages any additional student concerns/complaints internally as they arise.

4.4.e   Assessment of the extent to which this criterion is met and an analysis of the program's strengths, weaknesses, and plans relating to this criterion.

This criterion is **met with commentary**.

Strengths

The program has a clearly outlined and advertised system for student advising. Technical advisors work with students to assist with curriculum progression and course enrollment. The Director of Community Partnerships, who serves as the practicum advisor, assists all students in the program with the practicum application process and acts as the primary point of contact throughout the practicum experience. Additionally, all MPH program staff and faculty are available to advise and assist students on an as-needed basis. Career counseling for students in the MPH program is done mainly through DePaul's Career Center, at the initiation of individual students. The MPH program facilitates introductions between students and key Career Center staff. Furthermore, the MPH program has only one grievance over the course of the last three academic years.

Weaknesses

- The MPH program has not been consistent in soliciting feedback regarding academic advising and career counseling from graduating students.
- There is only a moderate level of career counseling satisfaction among alumni and recent graduates.

Plans to Improve

- At the end of the 2016-2017 academic year, the MPH program developed an exit survey to collect data about academic advising and career counseling satisfaction from graduating students. This survey will continue to be used in future years.
- The MPH program will integrate additional information about career counseling into its academic advising sessions. At the beginning of each quarter, the Program Manager will review and send a few Career Center resources for faculty to share with students during advising meetings. Additionally, Career Center announcements will also be incorporated into MPH e-newsletters as appropriate. Finally, the faculty advisor of the Public Health Student Organization will encourage PHSO to host events related to professional development.