

University of New Hampshire

Master of Public Health

Self–Study Report for Accreditation

Submitted to:

Council on Education for Public Health

Submitted by:

Master of Public Health Program

University of New Hampshire

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List of Acronyms

AAUP	American Association of University Professors
APHA	American Public Health Association
APTR	Association for Prevention Teaching and Research
ATOD	Alcohol, Tobacco and Other Drugs
BC/BS	Blue Cross/Blue Shield
BLC	Boston Library Consortium
BSC	Business Services Center
CEPH	Council on Education for Public Health
CHHS	College of Health and Human Services
CIS	Computer Information Service
CGPS	The University of New Hampshire's Center for Graduate and Professional Studies
CFO	Chief Financial Officer
CLAPHPP	Council on Linkages between Academia and Public Health Practice
EC	Executive Committee
ERF	Electronic Resource File
FTE	Full-time Equivalent
GMC	Graduate, McNair and Career
HC	Health Care
HCFA	Health Care Financing Administration
HMP	Department of Health Management and Policy
HRSA	Health Resources and Services Administration
IHPP	Institute of Health Policy and Practice (Previously NHIHPP)

List of Acronyms (Cont'd.)

IOD	Institute on Disability
MAT	Master of Arts in Teaching
MBA	Master of Business Administration
MEd	Master of Education Degree
MSW	Master of Social Work
NASA	National Aeronautics and Space Administration
NCI	National Cancer Institute
NEASC	New England Schools and Colleges
NH DHHS	New Hampshire Department of Health and Human Services
NHIHPP	New Hampshire Institute of Health Policy and Practice (Currently IHPP)
NHPHA	New Hampshire Public Health Association
PHC	Public Health Certificate
PHP	Public Health Practice
PI	Principal Investigator
RCM	Responsibility Centered Management
UNH	The University of New Hampshire
UNHD	The University of New Hampshire, Durham Campus
UNHM	The University of New Hampshire, Manchester Campus
USNH	The University System of New Hampshire

Executive Summary

The Master of Public Health (MPH) Program at the University of New Hampshire (UNH) was approved by the UNH Board of Trustees in 2001 and is designed to provide quality graduate education in public health. Given its setting within the state's flagship university, the Program is structured to be economically feasible for prospective students residing in New Hampshire, but the Program's mission and influence extend into Northern New England and beyond. The Program received its initial accreditation from the Council on Education for Public Health (CEPH) in June 2005.

The MPH Program is one of 101 master degree programs offered by UNH and is administratively based within the Department of Health Management and Policy within the UNH College of Health and Human Services in Durham, New Hampshire. The Department also offers a baccalaureate degree in Health Management and Policy with two options (Health Management and Public Health) and two academic minors in the same areas. There are seven full-time faculty and two additional faculty who work primarily outside of the department. These faculty are responsible for teaching in both the undergraduate and graduate programs.

The MPH courses are offered primarily in a face-to-face classroom delivery model, designed to accommodate the schedule of working professionals, who comprise the principal market for the curriculum. Courses are taught in the evening on the University of New Hampshire Manchester (UNHM) campus. To provide a greater opportunity for working professionals to have access to the MPH program, courses are taught on Tuesday and Thursday evenings at the University of New Hampshire campus in Manchester, New Hampshire. In addition to the MPH degree, the Program also sponsors a 12-credit Public Health Certificate and

various elective courses, providing continuing education opportunities for those not wishing to pursue a graduate degree.

Program faculty are drawn from the full-time UNH faculty, as well as from the field of public health practice. Students can complete the program over two years with continuous enrollment; however, students may take up to six years to complete the MPH degree requirements per the policies of UNH Graduate School. Graduating classes have ranged in size from 5 – 17 students. We strive to provide an enhanced personal education experience, with small class sizes and encouraging access to faculty both in and out of the classroom.

The UNH MPH program experienced a fair amount of transition since the last accreditation. The program saw a decline in enrollment starting in 2012, with a large drop in 2013. To date we continue to see low enrollments each year. At that point, the program had a new Program Director, Barbara Arrington, who enlisted the support of a facilitator to conduct a series of strategic planning meetings for the program. These meetings were to address the declining enrollment, and to better prepare for this reaccreditation period. The College of Health and Human Services (CHHS) and the Department of Health Management and Policy (HMP) were undertaking a similar process, so support to complete this initiative was found college-wide. The strategic planning group consisted faculty from the MPH and HMP programs, full time and adjunct, and a few key stakeholders from within the University. The strategic planning group met three times during the 2014 – 2015 academic year. During that time span the group reevaluated the mission, values and goals of the program, as well as where the future might evolve to determine where the program should head.

Dr. Arrington became suddenly sick during the summer of 2015 and died unexpectedly at the end of the summer. The 2015 – 2016 school year was used to fill a faculty/Director of the

MPH position. During this year, the coordinator Ann-Marie Matteucci filled in as much as possible, given her other tasks. The department also contributed as they could, but the strategic planning was put on hold.

During the 2015-2016 academic year, there were several initiatives taken to move forward with promoting and supporting the program. Most notably, the hiring of a new Director (start date 8/23/16), the overhaul of the website and changes in marketing which increased enrollment between spring 2016 – fall 2016, however work on the mission, values and goals were still hold.

Over the course of the 2016-2017 academic year the Dean of CHHS and the Chair of HMP, in cooperation with the MPH program, enlisted a Work Group charged to study and evaluate the MPH program. This work group ran simultaneously with the self-study period for the reaccreditation. Given the transition issues with the leadership of the program, the overlapping of these two initiatives was unfortunate but necessary. The findings of the MPH work group are shared in this report.

Mission of the MPH:

“Through instruction, research and service, the mission of the Master of Public Health (MPH) Program at the University of New Hampshire (UNH) provides a pathway to develop public health officials, establish a collaborative public health workforce, while focusing on societal health needs to foster health equity.”

Criterion 1.0 The Public Health Program

1.1 Mission. The program shall have a clearly formulated and publicly stated mission with supporting goals and objectives.

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

Mission Statement:

Through instruction, research and service, the mission of the Master of Public Health (MPH) Program at the University of New Hampshire (UNH) provides a pathway to develop public health officials, establish a collaborative public health workforce, while focusing on societal health needs to foster health equity.

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

Values Statement:

The values of the MPH Program at UNH are guided by the overall values of the College of Health and Human Services:

Cooperation in the planning, management, and work of the College.

Curiosity as a core strategic concept.

Excellence both in our individual and collective actions.

Integrity to have ethical behavior in our working relationships, practices and decisions.

Leadership for improving the health of individuals, families, and communities.

Openness in communications and decision-making.

Respect for individuals' roles, diversity, contributions, and viewpoints.

Service to UNH, the public, and others to improve health and health care.

Sustainability of our College as an educational leader.

In addition, the MPH program promotes the development of our students into forward-thinking public health professionals by including curriculum and experience in:

Advocacy: Promoting the health of populations

Evidence based practicing: Valuing best practices and maximizing faculty expertise through research, shared learning, and practical learning experiences

Integration: Encouraging collaborative and critical thinking of strategies to better incorporate Public Health with health and health care systems.

Social Justice: Health equity, and integrity

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

The Program has an overarching goal to address and improve community-based health disparities through the

1. Instruction: To prepare public health professionals with the knowledge, skills, and values to understand of social determinants of health and population health for multiple roles in public health organizations and policy development.
2. Research: To contribute to the field of public health through the development of new knowledge through applied research to practically address relevant urban and rural health and health care issues.
3. Service: To participate in community partnerships by providing technical assistance and professional service to public health settings in both the private and public sectors.
4. Organizational: To address the growth and development of the MPH Program.

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

Goal: To prepare public health professionals with the knowledge, skills, and values to understand of social determinants of health and population health for multiple roles in public health organizations and policy development.

- Students will benefit from faculty expertise and customized learning through the application and completion of research and/or independent learning experience. (Criterion 3.1)
- Faculty will employ active learning (e.g. student projects, case studies) within the curriculum.
- Students will demonstrate the value of public health data by using, manipulating and explaining data as a core component of their coursework
- Students will be exposed to career counseling and networking opportunities with key partnerships to increase students' post-graduation employment rates. (Criterion 4.4)

Goal: To contribute to the field of public health through the development of new knowledge through applied research to practically address relevant urban and rural health and health care issues.

- Students will benefit from exposure to current research, including faculty research, in and outside of the classroom (Criterion 3.1)

Goal: To participate in community partnerships by providing technical assistance and professional service to public health settings in both the private and public sectors.

- Student field study/integrating seminar (capstone) projects will benefit rural and urban health needs in NH and beyond. (Criterion 3.2)
- The UNH MPH faculty, students and alumni will assist in the development of the Public Health workforce. (Criterion 3.2 and 3.3)

Goal: To address the growth and development of the MPH Program

- The MPH program will be evaluated for both delivery and curriculum to ensure that the program continues to meet the workforce needs.
- A concentrated marketing plan will be developed and implemented. (Criterion 4.3)
- Assessment of program viability using quarterly budget meetings to assess the Dean's support of the program (Criterion 1.6)

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

During the 2014-2015 academic year, strategic planning meetings for the MPH were convened by then Director, Barbara Arrington. Extensive work on the mission, values, goals and objectives were developed by the group that included the Program's Director, Coordinator and HMP Chair., as well as HMP faculty. Barbara Arrington passed away unexpectedly at the beginning of the fall 2015 semester. The strategic planning was not completed as the attention turned to ensuring the current students received what they needed to be successful given the decrease in staff, and to filling the Director, and then the Coordinator positions.

In the fall of 2016 the Department, with the support of the College (CHHS), reinstituted a committee to review the MPH. The faculty determined that the program needed a full evaluation given the continued decline in admissions, and the new leadership. The Dean of CHHS and the Chair of HMP charged an "MPH Work Group" to determine the strengths and challenges of the program and to determine what changes should be made to the program to ensure its growth and position in educating the Public Health workforce. Key stakeholders around the state of New Hampshire and University faculty and staff were invited to join the group and they met for four 3-hour meetings over the course of the 2017 spring semester. In between the meetings, surveys were sent to students, alumni and stakeholders (employers). Key informant meetings and focus groups were also held. Materials from the Work Group can be found in Electronic Resource File-ERF, 1.5 Governance. The roster is in the membership list folder and agendas, minutes and the draft final report are in Committee Membership.

The members of the work group were selected by the UNH HMP Faculty during departmental meetings and other meetings designated to discuss the MPH program. These meetings were facilitated by John Bunker, Director of External Relations for CHHS, and the Dean of CHHS was often in attendance. Work group members were selected based on their relationship to the MPH program (instructor, preceptor) and/or by their status in the field in NH (stakeholders, employers, etc.) HMP faculty were invited to participate and three members of the faculty (Caron, Matteucci, and Aytur) were members, as was the new MPH coordinator (Thomas)

During the Work Group meetings, members reviewed documentation on the future of public health, discussed the strengths and challenges of the program, and reviewed the data collected surveys, interviews, and other meetings, as outlined earlier. The labors of the Work Group concluded in June 2017 with a written report submitted to the Dean of the College of Health and Human Services (ERF 1.5 Governance). These findings will be discussed by the HMP faculty in the fall of 2017 and will assist with the development and growth of the UNH MPH program.

Beyond this process, the Program Director/Coordinator makes formal presentations on the MPH program to the HMP faculty at the faculty retreat each May and to the HMP Advisory board each fall. Updates are regularly given to HMP faculty at Departmental meetings, and the Chair of HMP reports to the Dean and the Executive Council. Copies of the presentations and minutes can be found in the ERF 1.5 Governance.

The HMP faculty revisited and revised the mission, values and goals from the work that had been started in the 2014 academic year. All discussions and materials created by the work group were shared with the HMP faculty. The HMP faculty voted to the new mission, goals and objectives. Some of these were a direct result of the work group (mission, values), and some (goals, objectives) were determined overtime by MPH faculty and the other strategic planning meetings mentioned. The faculty voted unanimously to adopt the mission, values and goals.

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.

UNH makes the MPH's mission, goals, and objectives available to the public through the Program website and MPH student handbook. The mission, goals and objectives are also made available during open houses, information sessions, and to any interested prospective student. Dissemination also takes place through representation at the New Hampshire Public Health Fall Forum and at on-site information sessions (e.g., local hospitals, NH Department of Health and Human Services, etc.)

As noted, two advisory boards, the HMP Advisory Committee and the MPH Work Group (who have been invited to continue as the MPH advisory group), both receive information on the mission, values and goals annually at their respective meetings.

The URL for the MPH Program is: <http://chhs.unh.edu/hmp/master-public-health-program>

As described in criterion 1.1.e., the mission, goals, values and measurable outcomes were addressed in the Strategic Planning sessions that met in the 2014-2015 academic year, and then resumed by both an external Work Group in the spring of 2017 and through the work of the MPH Program committee, and the HMP faculty.

In May 2017, a vote by the HMP faculty at a special session called by the Chair discussed and approved the mission, values and goals of the MPH program.

During the annual faculty retreat the MPH program is discussed with a review of goals for the next year. Any modifications in goals are discussed during this meeting and additional meetings, if needed are convened during the summer with key stakeholders. Changes are implemented for the start of the fall semester.

Following the goal review/setting process, over the summer, the goals are translated into rules and guidelines, as appropriate, by the Program Director. These guidelines are included in the Program Handbook which is distributed to all students each fall.

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.

Strengths:

- The MPH Program has a clearly articulated mission with values and goals that reflect excellence in teaching, research that improves the body of knowledge related to public health, and service to students, the college community, and the public health community of New Hampshire.
- The mission of the Program is publicly stated and noted on the UNH Graduate website, the MPH Program site, the MPH and PHC Student Handbook and other promotional materials.
- The emphasis of the Program is to train working professionals to become leaders in the public health arena. The MPH curriculum reflects thoughtful attention to the core values of public health and incorporating the core competencies associated with public health practice into the Program by having them serve as the underlying structure of the courses and expectations of student learning.
- Since the MPH Program focuses primarily on the development of working professionals, the Program has been located specifically in the most densely populated urban area of the state, and holds classes during evening hours to reduce any barriers to education that a working professional might have.

Challenges:

- The program experienced substantial transition in leadership while experiencing a decline in enrollment. There was a delay in first recognizing, and then adjusting to, the changing demand for the MPH program at UNH.
- A comprehensive review was delayed due to the unexpected death of the Program Director, Barbara Arrington; the UNH HMP and MPH faculty, along with support from the Dean and colleagues from the CHHS has committed many resources to ensuring that the program functions with clear direction from a strong mission, values and goals.

Plans:

- The program now has the leadership and clarity of mission that lapsed during the period of transition.
- Plans moving forward are to strengthen the program with better marketing, a more flexible learning platform, and a revised curriculum that addresses both the skills needed for today's Public Health professional.
- Future meetings with the Dean of CHHS and the faculty of HMP will determine how the recommendations from the work group are selected and implemented.

This criterion is met.

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 objectives defined in Criterion 1.1.d., including identification of the data systems and responsible parties associated with each objective and with 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.

Overall Evaluation of MPH Program (across objectives)

The umbrella goals of the MPH program include staying current with the field of Public Health and providing a high quality educational program that best serves our students, alumni and key stakeholders. To do this the following data are collected and monitored:

Student Feedback: Due to the small nature of the student body, and their busy schedules, student input is generally gathered in-person, addressing all students, rather than convening a student committee. The Program Director visits classes a few times per semester and to make announcements and gathers information. Students are also encouraged to schedule meetings with the Program Director and/or Coordinator to express any concerns or suggestions for the MPH program. Further, students were surveyed in the spring of 2015 and the spring of 2017 (ERF, 2.7 Assessment Procedures).

Alumni Feedback: There is a strong alumni network, resulting from the continual communication with MPH alumni throughout the year, both via email and in person at public health events. The alumni provide feedback on the Program and their experience with its value and impact on career their development, and its impact on the public health infrastructure. Alumni were surveyed and were invited to participate in a focus group during the spring of 2017 (ERF, 2.7 Assessment Procedures.)

Stakeholder Surveys: Stakeholders (and employers) were surveyed in the spring of 2017 to assess their knowledge of the MPH program and how they view the UNH MPH students/alums are prepared for the workforce (ERF, 2.7 Assessment Procedures.)

Objective Specific Evaluation of MPH Program:

Goal for Instruction: To prepare public health professionals with the knowledge, skills, and values to understand of social determinants of health and population health for multiple roles in public health organizations and policy development.

Objective	Data System	Responsible Parties
Student Involvement in faculty research	Faculty Activity Reports	Faculty
Student engagement in independent learning experiences	Student Transcripts (independent studies) and faculty reports	Faculty, Students, Advisors
Active Learning within curriculum	Course Syllabi, Student Projects, Case Studies	Faculty
Value of using and understanding Public Health Data	Course Work, Transcripts, Field Study Project,	Faculty, Advisors
Exposure to career counseling	Program and College records	Director, MPH, Program Coordinator, MPH Director, Career Services,
Quality, Effectiveness, Rigor of Teaching	Syllabi Review, Course Evaluation and Written Feedback,	HMP Department Chair, Director MPH, Faculty/Instructors

Goal: To contribute to the field of public health through the development of new knowledge through applied research to practically address relevant urban and rural health and health care issues.

Objective	Data System	Responsible Parties
Faculty will meet research expectations (tenure track only)	Faculty Activity Reports	Chair, HMP Department
Student will be exposed to Faculty Research	Syllabi	Director, MPH Program Faculty

Goal: To participate in community partnerships by providing technical assistance and professional service to public health settings in both the private and public sectors

Objective	Data System	Responsible Parties
Student Projects that benefit rural and urban health needs in NH and beyond.	Field Study, Capstone Project	Director, MPH Field Study and Integrating Seminar (Capstone) Faculty
Assist with Development of Public Health Workforce via service to field.	Faculty Activity Report,	Chair, HMP Director, MPH Faculty,

Goal: To address the growth and development of the MPH Program

Objective	Data System	Responsible Parties
Program review to ensure workforce needs are met	Work Group HMP and MPH Advisory Board	Chair, HMP Director, MPH Coordinator, MPH
Build a concentrated Marketing Plan	Marketing Plan and data on marketing initiatives	Communications Director, CHHS Director, MPH Director, Chair, HMP
Maintain communication with College on program viability	Meetings with Dean Quarterly Budget Meetings,	Chair HMP, Director, MPH Director BSC, Associate Dean, CHHS

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

Using the various methods of data collection discussed in Criterion 1.2.a, there are a variety of ways that goals and measurable objectives are monitored, analyzed, and communicated by the MPH Program Director and Coordinator.

Regular meetings between the Program Director, Coordinator and Department Chair are held to discuss the program. Administrative plans and issues are discussed during departmental faculty meetings. This information is then brought to the Dean of the College of Health and Human Services by the department chair for all departments and programs. Program direction decisions are then implemented by the MPH Program Director, Coordinator and administrative staff. The Program Director, with the guidance of the department Chair and the assistance of the Program Coordinator, track the progress of the goals and monitor the data tracking systems, such as faculty teaching evaluations, and computerized student records. Information on faculty research and service is maintained by the individual faculty members and shared annually with the Program Director.

The MPH Director and Coordinator update the HMP faculty at the monthly HMP departmental meetings.

The HMP Advisory Committee, a top level external board for the department, meets annually in the fall to provide input and guidance to the HMP department regarding both the undergraduate and MPH program. These Advisory Board members represent health care and public health interests in NH and the surrounding areas, and have provided feedback on the MPH program, course offerings and their views on the future directions of Public Health. Minutes provided in ERF, 1.5. Governance / Committee Membership

MPH Work Group

During the fall of 2016, the faculty voted to explore the MPH program using an external Work Group, noted earlier. Four representatives from the department of HMP served on Work Group and reported back to the full faculty. Additionally, stakeholders of other UNH departments and partners outside of UNH completed the Work Group members (ERF 1.5 Governance, Membership). Together, the Work Group, addressed issues of competencies needed in the workforce, and discussed the delivery of the MPH program. The Work Group had four three-hour meetings where they reviewed documentation on the future of public health, discussed the strengths and challenges of the program, and collected data via surveys, interviews, and other means to help assess the program. These findings will assist with the development of the UNH MPH program. Meeting minutes, presentations and findings can be found in ERF 1.5 Governance/Committee/Work Group.

It is acknowledged that some of the evaluation of the MPH had been slowed prior to the reaccreditation period. The death of our colleague put the program at a disadvantage. We were not only left with a teaching and program leadership void, further, some of our documentation was lost due to some materials being stored in Dr. Arrington's home or personal computer. Due diligence was executed by the faculty and coordinator during the 2015-2016 academic year to address the gaps as best as they could be given the limited resources. However, the result after nine months of reassessment and hiring processes allowed the MPH program to emerge stronger and more focused.

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.

Table 1.2.c. Outcome Measures for UNH				
Outcome Measure	Target	2014-15	2015-16	2016-17
Goal: To prepare public health professionals with the knowledge, skills, and values to understand of social determinants of health and population health for multiple roles in public health organizations and policy development				
Students will benefit from faculty expertise and customized learning through the application and completion of research and/or independent learning experience (Criterion 3.1)	1. 100% of students will be involved in research through field study, volunteer and/or independent learning experiences.	Met (18/18 field study, plus 3 IS)	Met (10/10 field study, plus 2 IS)	Met (5/5, plus 5 IS)
	2. 15% of students will customize an independent learning experience	Not met (9%)	Met (29%)	Met (29%)
Faculty will employ active learning (e.g. student projects, case studies) within the curriculum.	1. 75% of classes will utilize active learning as monitored through Faculty reports and course syllabi.	Met (100%)	Met (100%)	Met (100%)
Students will demonstrate the value of public health data by using, manipulating and explaining data as a core component of their coursework. (Members of Advisory committees noted a need for analytical skills, Biostatistics is used as a gauge.)	1. 100% of students will complete a culminating biostatistics project with a B or better	Met (100%)	Met (100%)	Met (100%)
	2. 80% of field study and/or capstone projects will include data analysis	Met (20/22)	Met (12/13)	Met (6/6)
Students will be exposed to career counseling and networking opportunities with key partnerships to increase students' post-graduation employment rates. (Criterion 4.4)	1. 80% of students seeking employment will find a job in PH within 6 months of graduation	Met (15/18)	Met (8/9)	Met (5/5)
	2. Students will be exposed to at least 1 career advising session (individual, group) during their program	Met (3 offered, plus individual counseling)	Met (individual counseling offered to every student)	Met (career services announced, individual counseling)
	3. Students will be encouraged to attend at least two NHPH Association events and other opportunities as they arise.	Met (2 offered per year, advertised to students)	Met (2 offered per year, advertised to students)	Met (2 offered per year, advertised to students)
	4. Students will be exposed to networking via guest speakers in at least 6 of their 11 required classes.	Met (10/11 classes)	Met (10/11 classes)	Met (10/11 classes)

Goal: To contribute to the field of public health through the development of new knowledge through applied research to practically address relevant urban and rural health and health care issues.				
Students will benefit from exposure to current research, including faculty research, in and outside of the classroom (Criterion 3.1)	1. 100% TT Faculty will publish at least one publication per year to stay current in field (may also service as PI investigator with external funding greater than \$100,000	Not Met (3/4)	Met (4/4)	Met (4/4)
	2. 40% of courses will incorporate faculty research into course curriculum.	Met (45%)	Met (45%)	Met (55%)
Goal: To participate in community partnerships by providing technical assistance and professional service to public health settings in both the private and public sectors.				
Student field study/integrated seminar projects will benefit rural and urban health needs in NH (or New England). (Criterion 3.2)	1. 100% of field study projects directly benefit community health in NH.	Met (18/18)	Met (10/10)	Met (5/5)
	2. 100% of Capstone projects will directly benefit community health in NH.	Met (4/4)	Met (3/3)	Met (1/1)
The UNH MPH faculty, students and alumni will assist in the development of the Public Health workforce. (Criterion 3.2 and 3.3)	1. 85% of TT faculty serve on a committee, board or other work group to benefit the field of Public Health and/or the workforce	Met (100%)	Met (100%)	Met (100%)
	2. 25% of students/alumni serve on a committee, board or other work group to benefit the field of Public Health and/or the workforce.	Met	Met	Met
Goal: To address the growth and development of the MPH Program				
The MPH program will be evaluated for both delivery and curriculum to ensure that the program continues to meet the workforce needs.	1. Advisory board/work group (MPH) meets annually (target) to evaluate the curriculum and delivery method.	Not met (did not meet)	Not met (did not meet)	Met (4 meetings)
	2. Strategic planning meetings are held to address the evolution and vision of the program, Target: meet twice annually.	Met (met 3 times)	Did not meet	Met (4 meetings)
	3. HMP Advisory Board meets annually (target) to discuss the MPH program and its future,	Met (fall 2014)	Met (fall 2015)	Met (fall 2016)
Increase the number of courses taught by core faculty.	1. Core faculty will teach at least 50% of required classes (6/11).	Met (6/11)	Not Met (3/11)	Met (6/11)

A concentrated marketing plan will be developed and implemented. (Criterion 4.3)	Social (Facebook, Google, Twitter) and print media (ads in journals/papers) will be used to create awareness of the MPH program,	Not met	Not Met	Met (2 print, 2-week social media)
	Tables at conferences and graduate school fairs, on campus, information sessions, and other outreach	Met (3 tables)	Met (2 tables)	Met (two tables, 1 panel)
	Website review and revision	Not met	Met	Met
	In meetings with prospective students starting in fall 2017, ask” how they learned of program?” The target is to increase numbers of students and to have more students learn of program through marketing rather than word of mouth or website search. This is a goal moving forward.	Not measured	Not measured	Not measured
Assessment program viability using quarterly budget meetings to assess Dean’s support of program. (Criterion 1.6)	Quarterly budget meetings to review enrollment status and admission status.	Met (lower revenue but balanced)	Met (lower revenue but balanced)	Met (budget shortfall, College supported)

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.

This self-study report has been developed by a team of individuals, including: Ann-Marie Matteucci, Director of the MPH Program; Pamela Thomas, Departmental Coordinator, and Rosemary Caron, Chairperson for HMP (and former MPH Director.) The HMP faculty were updated along the way with particular assistance from Semra Aytur (also member of the Work Group) and James Lewis, former Director of the MPH program.

The process and timeline for writing the report were developed under the direction of Ann-Marie Matteucci. Dr. Matteucci attended the CEPH accreditation training in July 2016 in Washington, DC.

The writing of the self-study has taken place throughout 2016 and 2017 and has included:

- Weekly meetings between the Program Director, Departmental Coordinator, and the Department Chair with additional work meetings scheduled as needed.
- Updates at HMP faculty meetings with special HMP faculty meetings as needed.
- Surveying the faculty about research, service, educational activities, publications, public health trends and the educational needs of the students;
- Interviewing key institutional officers. These included:
 - From the Graduate School, Interim Dean (Cari Moorhead), Assistant Dean (Dovev Levine) and the Educational Coordinator (Candice Morey).
 - The Dean (Michael Ferrara) and the Associate Dean (Anne Broussard) of the College of Health and Human Services (where the department is housed.)
 - John Bunker, Director of External Programs, consultant for the MPH Work Group
 - Andrew Smith from the UNH Survey Center who administered the alumni, student and key stakeholder surveys.
- Surveying alumni and students about the MPH Program, training, public health trends and educational needs of the students;
- Surveying and completing structured interviews with key stakeholders (employers and other leaders involved in the Public Health workforce in NH)
- Interviewing internal stakeholders to discuss MPH strengths and challenges as well as to explore possible joint ventures.
- Reviewing committee activities, course materials, Program activities, and student records; and
- Holding discussions with the previous authors of the self-study report and with current and past leadership about the strengths, challenges, and future directions of the Program.
- Former Dean of the College of Health and Human Services, Dean McCarthy, was hired to serve as a consultant to co-chair the Work Group. He provided historical context as well as a consultant historical knowledge and expertise.

Faculty and staff reviewed drafts of the document and made recommendations for revisions. Frequent meetings were held throughout 2016-2017 to review the information collected, discuss the feedback obtained, and monitor the progress of the report.

The final draft of the self-study was made available to key stakeholders in the summer of 2017 including: members of the HMP faculty, HMP Advisory Committee; MPH Advisory Committee (Work Group); MPH Alumni; and current MPH students.

The final version of the self-study was posted to the website for public comment.

Comments were directed to the CEPH's offices in Washington, DC.

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 the criterion.

Strengths

- Despite a slow start, a tremendous amount of work was put into a comprehensive assessment of this program and the final result shows promise to help the program grow.
 - An MPH Work Group was established to assist in the assessment and planning for the program. This Work Group consists of both internal and external stakeholders. They represent faculty, alumni, and employers as well as other Public Health leaders from the state of NH. A final draft report to the Dean can be found in ERF 1.5 Governance/committees/MPH Work Group.
 - A marketing plan has been completed by the University's department of Communications and Public Affairs (CPA). A modified campaign was launched during the spring of 2017 with a larger campaign scheduled for the 2017-2018 academic year once the Work Group findings are processed.
 - There are now two people who share the primary responsibility of managing and growing the MPH program. Ann-Marie Matteucci was hired as Program Director in August 2016, and after a restructuring of the department, Pamela Thomas was hired to be the departmental Coordinator,
 - There is a commitment from the Graduate School and UNH Manchester to help programs succeed. This has included administrative support for sponsored grand rounds, and other outreach opportunities.
 - Finally, the Dean of CHHS has committed that he will support the program while it transitions and grows.

Challenges

- While the new leadership and efforts to evaluate the program have been beneficial, it is noted that much of the responsibility for the self-assessment was shared by few people and there was minimal engagement from the rest of the department.
- Despite the work done to study the program, the program still struggles with how to make improvements in a timely manner to increase student applications (discussed later)

Future Plans

- With the full support from the Dean of CHHS and commitment from many key stakeholders, the program plans to grow and adapt to the needs of the New Hampshire and New England public health workforce.
- While it was unfortunate that this process wasn't completed earlier when Dr. Arrington first initiated it, we feel that the activities pursued this year have provided us with valuable information moving forward.
- From this point forward we will continue to meet with key stakeholders, faculty and students on a regular basis.

This criterion is met.

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 accrediting bodies (other than CEPH) to which the institution responds.

UNH is a land-grant, sea-grant, and space-grant research extensive university with three campuses. The main campus in Durham has approximately 13,000 undergraduates. The non-residential campus in Manchester 1,000 undergraduates. There is also a law school in Concord. Between the three campuses there are 2,000 graduate students and 600 faculty members. UNH is the flagship university within the University System of New Hampshire (UNH, Plymouth State University, Keene State College, and the Granite State College).

The MPH Program at UNH is located within the College of Health and Human Services (CHHS). The College is one of seven colleges/schools in the University (College of Life Sciences and Agriculture, College of Liberal Arts, College of Engineering and Physical Sciences, College of Health and Human Services, The Peter T. Paul College, The Law School, and the University of New Hampshire, Manchester). The Program is administratively located in the Department of Health Management and Policy (HMP) in the CHHS.

The College is composed of eight academic units (Communication Sciences Disorders, Human Development and Family Studies, Health Management and Policy, Kinesiology, Nursing, Occupational Therapy, Recreation Management and Policy, and Social Work). Each of these instructional departments has both undergraduate and graduate programs. In addition, CHHS has two institutes engaged in research and service, the Institute for Health Policy and Practice (IHPP), and the Institute on Disability (IOD).

While there are no formal linkages between the College and the Institutes, Program faculty collaborate and participate in Institute projects that reflect their interests and technical expertise. Specifically, collaboration has occurred on project work, grant applications, and in the realm of teaching with several institute members serving as faculty for the MPH Program. Informally, faculty collaborate with others in areas that are reflective of their interests.

The Department of Health Management and Policy (HMP) offers an undergraduate program with two tracks, Health Services Management and Public Health, as well as two minors in Health Management and Policy and Public Health. In graduate education, the Department offers the MPH Program, as well as a Public Health Certificate. Figure IV outlines the structure of the MPH Program, as does information in Criterion 1.4.a, Organization and Administration. The physical location of the Program is on the UNH Manchester campus. This location was selected due to its geographical accessibility to major population and health care centers of the state. UNH Manchester is located within one hour's drive for 50% of the state's population, and one-half hour from the state's capital in Concord. UNH Manchester is approximately 45 minutes from the Durham campus.

The Graduate School maintains a staff at the UNH Manchester campus to support a core of professional graduate programs, including Business Administration, Counseling, Education, Engineering, Public Administration, and Social Work, in addition to Public Health.

The Graduate School assists with Program marketing, as well as providing administrative support to students and faculty.

Other Accrediting Bodies

The University of New Hampshire holds 31 accreditations, in addition to CEPH.

1. Accreditation Board for Engineering and Technology (ABET), www.abet.org/
2. Accreditation Commission for Programs in Hospitality Administration (ACPHA), www.acphacahm.org/
3. Accreditation Council for Education in Nutrition and Dietetics (ACEND) www.eatrightacend.org/
4. Accreditation Council for Occupational Therapy Education (ACOTE) www.aota.org/Educate/Accredit.aspx
5. American Chemical Society (ACS), www.acs.org/ (internal review)
6. American Culinary Federation (ACF) www.acfchefs.org
7. American Veterinary Medical Association (AVMA), www.avma.org/
8. Association for Experiential Education (AEE), www.aee.org/
9. Association of Critical Care Nurses (AACN), www.aacn.org/
10. Association of University Programs in Health Administration (AUPHA),
11. www.aupha.org/
12. Association to Advance Collegiate Schools of Business International (AACSB), www.aacsb.edu
13. Commission on Accreditation for Marriage & Family Therapy Education (COAMFTE),
14. www.aamft.org/
15. Commission on Accreditation of Athletic Training Education (CAATE).
16. www.caate.net/
17. Commission on Collegiate Nursing Education (CCNE), www.aacn.nche.edu/accreditation/
18. Council on Academic Accreditation in Audiology and Speech Language Pathology (ASHA),
19. www.asha.org/academic/
20. Council on Social Work Education (CSWE). [/www.cswe.org/](http://www.cswe.org/)
21. Joint Review Committee on Educational Programs in Athletic Training (JRCAT), www.jrc-at.org/
22. National Association of Schools of Music (NASM), www.nasm.artsaccredit.org/
23. National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), www.naacls.org/
24. National Association for Education of Young Children (NAEYC), www.naeyc.org/
25. National Recreation & Parks Association (NRPA)
26. American Association for Leisure & Recreation Council on Accreditation (AALR) www.nrpa.org/

27. New England Association of Schools and Colleges (NEASC) www.neasc.org/
28. NH State Dept. of Education, www.education.nh.gov/
29. Recreation Council on Accreditation www.nrpa.org/COA/
30. Society of American Foresters (SAF), [www.safnet.org/State of NH CHHS:
Kinesiology/Pedagogy](http://www.safnet.org/State%20of%20NH%20CHHS/Kinesiology/Pedagogy))
31. Teacher Education Accreditation Council, Inc. (TEAC), www.teac.org

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.

Figure I displays the organizational chart of the **University System of New Hampshire (USNH)** system. USNH is headed by an appointed Board of Trustees. The administrator of USNH is the Chancellor, Dr. Edward MacKay. USNH is composed of four institutions: 1) University of New Hampshire; 2) Plymouth State University; 3) Keene State College; and 4) the Granite State College.

Figure II shows the MPH program in relation to the College and the University.

Figure III indicates the location of the College of Health and Human Services in the context of the University, while **Figure IV** outlines the composition of the College of Health and Human Services (CHHS).

Figure I
University System of New Hampshire

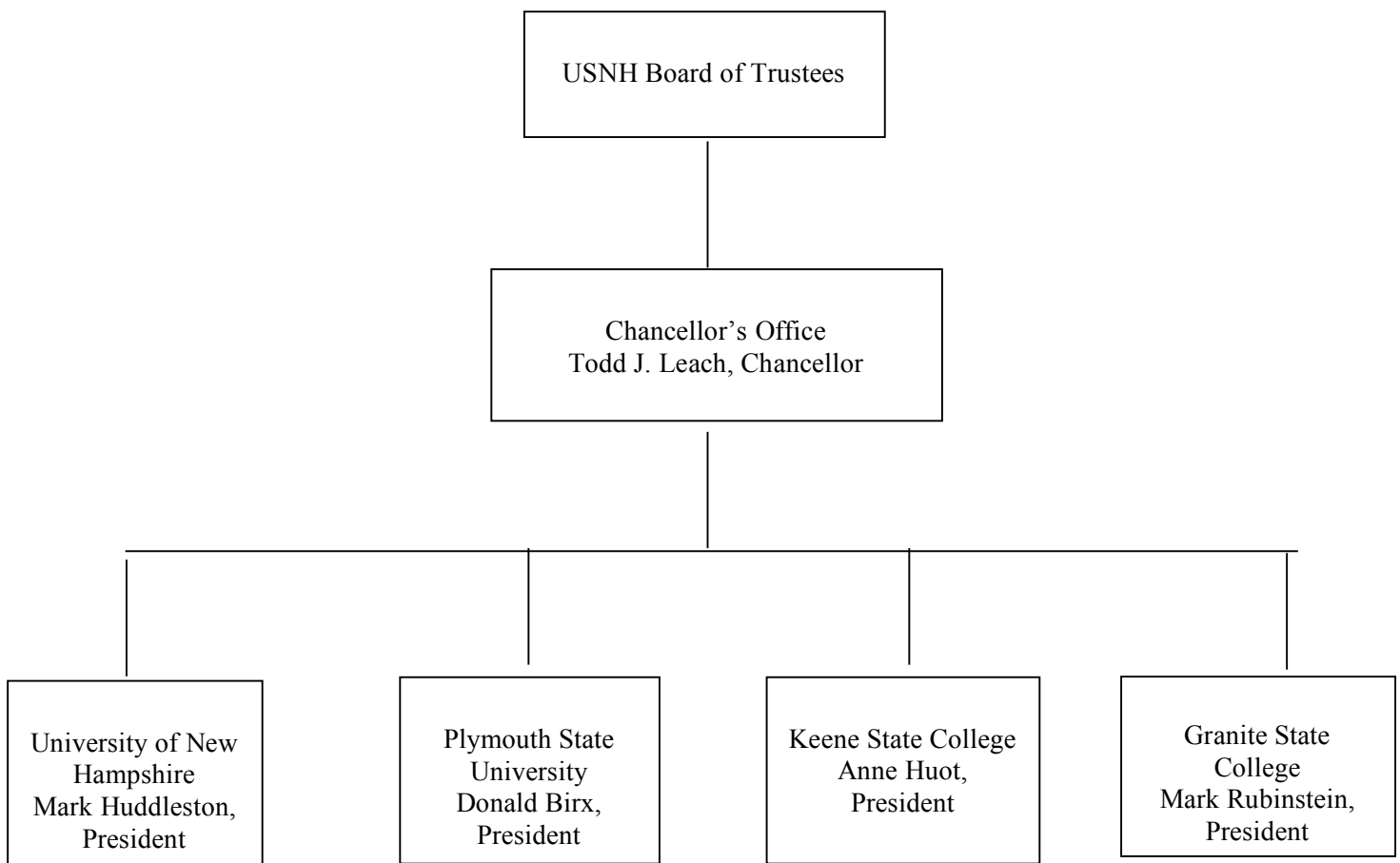


Figure II

MPH Program Relationships within the College and University

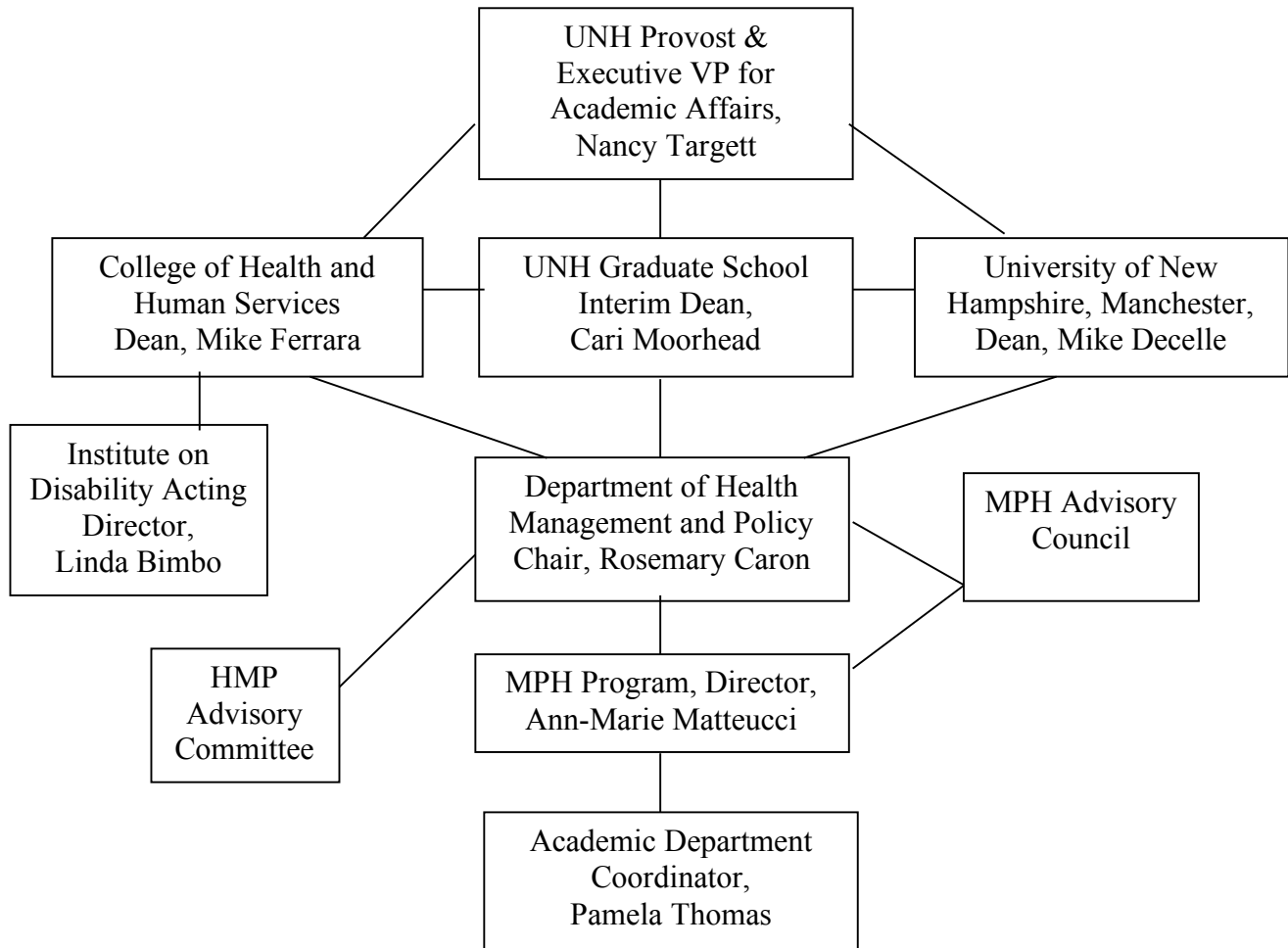
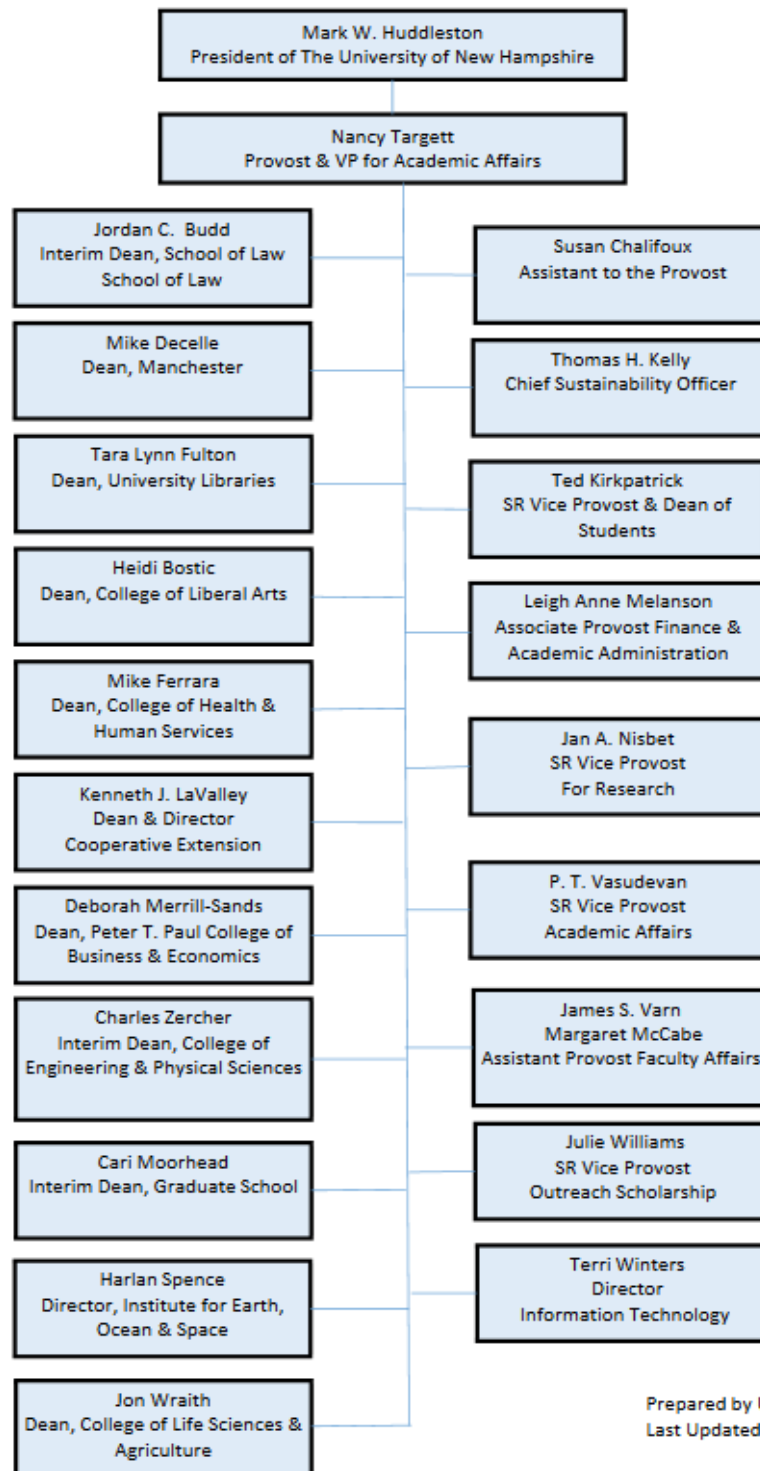


Figure III

Location of College of Health & Human Services within UNH



Organizational Chart for Office of the Provost

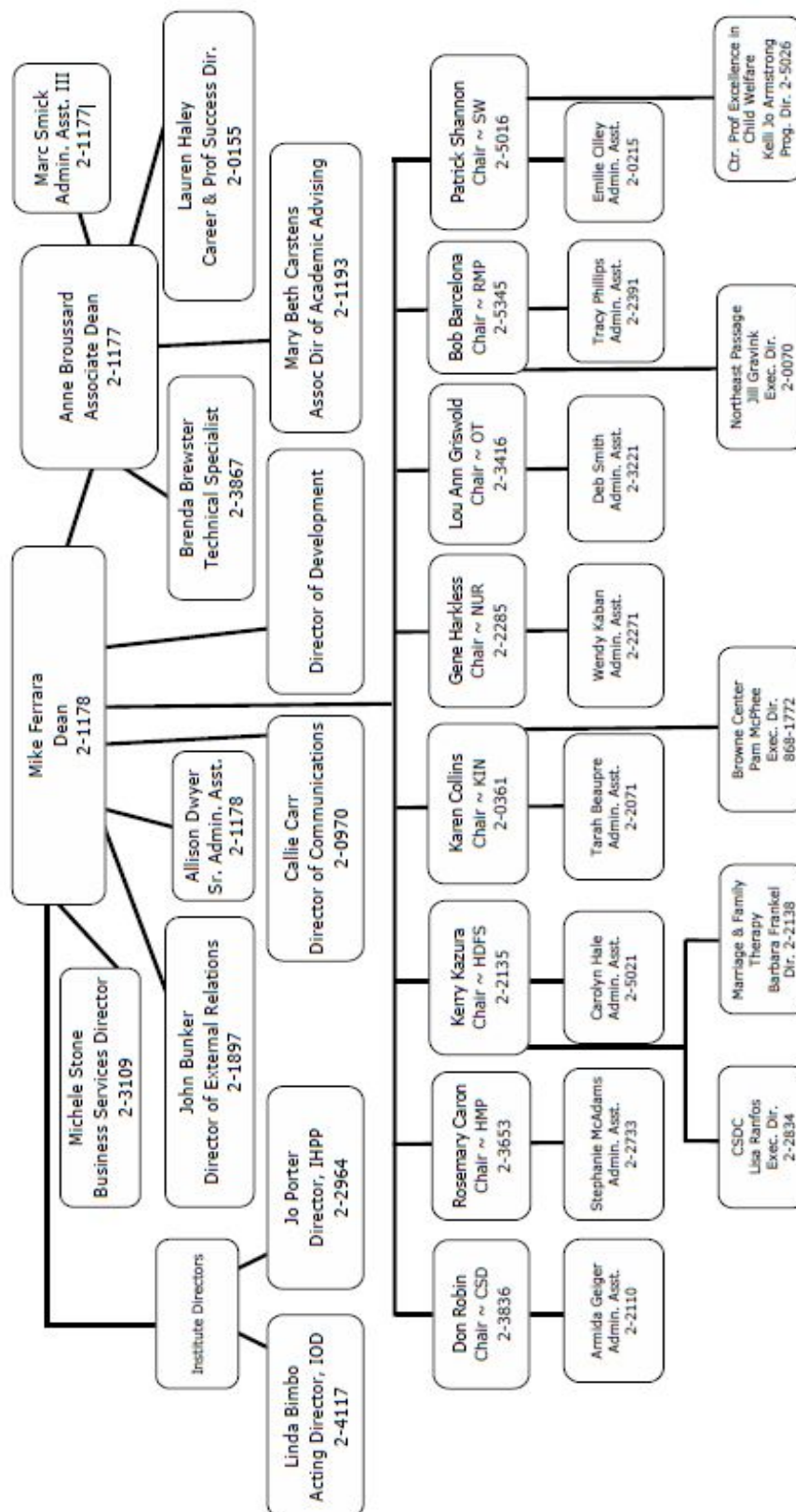


Prepared by UNH Office of the Provost
Last Updated 8/31/2016

Figure IV

Organizational Chart

University of New Hampshire College of Health and Human Services 7/5/17



UNH centralizes graduate student applications and promotion of graduate programs (discussed further in criterion 1.8 and 4.3.) Additionally, programs located at UNH Manchester are supported by the Graduate School at Manchester staff. Candice Morey, Educational Coordinator and staff provide outreach and marketing support, organize open houses and informational sessions, meet with prospective students and assist students and faculty in the day to day operations for all graduate programs located in Manchester.

1.3.c. Description of the program's involvement and role in the following:

Budgeting and resource allocation, including budget negotiations, indirect cost recoveries, distribution of tuition and fees and support for fund-raising

The HMP Chair, in collaboration with the Director of the MPH program, and establishes the budget for the MPH Program. The budget is presented to the Dean and quarterly budget meetings are held with the Director of Business Services, The HMP Chair, and the Associate Dean, throughout the year to monitor revenue and expenses of the MPH program. New initiatives, such as program expansion or personnel hires, need the approval of the Dean.

Fundraising support

The UNH Foundation is responsible for fundraising.

Personnel recruitment, selection and advancement, including faculty and staff

Faculty members are selected to teach in the program based upon their experience and academic background. The Program draws upon tenure and non-tenure-track faculty. Guidelines regarding many aspects of tenure-track faculty workload, responsibilities, and review are specified in the UNH Contract with the American Association of University Professors. The link to which is: <http://www.aaup.org/aaup>.

The HMP Chair and MPH Director, in conjunction with the CHHS Dean, has discretion in terms of teaching assignments for the MPH Program. Adjunct faculty members are hired by the Director of the MPH program and the Chair of HMP, with the final formal appointment approval by the Dean. The MPH Program Director is responsible for identifying suitable adjunct faculty candidates. Adjunct faculty are paid on a per course schedule. The MPH Program Director makes recommendations to the Chair in terms of teaching assignments. All faculty members are evaluated by students on their teaching performance using the standard online UNH teaching evaluation form.

Promotion and tenure decisions for tenure-track faculty follow normal UNH tenure procedures; this is a traditional tenure process. College promotion and tenure guidelines can be found in ERF 4.2 Faculty/Policies and Procedures.

The MPH Program adheres to the policies of UNH relative to personnel recruitment, selection, and advancement as well as the collective bargaining agreement, cited above. These policies may be viewed at: <http://www.aaup-unh.org/>

Academic standards and policies, including establishment and oversight of curricula

The MPH Director, with the Departmental Coordinator, is responsible for oversight of the curricula. The MPH/HMP faculty consider input from the HMP and MPH Advisory Councils, current students and alumni. The MPH Program follows the high academic standards of UNH in all aspects including candidacy for the advanced degree, contact hours, transfer credit, grading, and academic probation.

The academic standards for the MPH Program are detailed in the UNH MPH and PHC Student Handbook and may be viewed at http://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/mph_handbook_2016-2017.pdf and will be available on-site.

Students are also subject to the *Student Rights, Rules and Responsibilities*. This document is available on the web at <https://www.unh.edu/student-life/handbook>. These are the policies followed by all graduate programs in the University. *A hard copy of the handbook can be made available on-site.*

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

Not Applicable.

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.

Not Applicable.

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.

Strengths: The MPH Program is an integral part of the University of New Hampshire and the Department of Health Management and Policy. The MPH Program was approved by the USNH Board of Trustees in December of 2001 becoming the first MPH Program in Northern New England. It is sponsored by, and has the full support of, the College of Health and Human Services. A recent Dean of CHHS has referred to the Program as a "mission program," meaning it is an area in which we have a responsibility to offer educational and service programs.

Challenges: The MPH Program has gone through a difficult transition which has resulted in needed financial support from the Dean's office. While this is a challenge, it was met with 100% commitment and the program now has the leadership and support needed to grow a stronger, more relevant program.

Plan: Moving forward, the work group will become the MPH Advisory Board and will continue to assist the faculty and Program leadership to grow the program. Budgetary needs will continue to be supported by the Dean's office while this transition is being implemented.

The criterion is met.

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.

As described in Criteria 1.3.a. and 1.3.b., the MPH Program functions within the University System, the College of Health and Human Services, linked to multiple institutions, advised by a number of ad hoc committees, and conducts courses at the UNH Manchester campus.

The MPH Director and Coordinator are responsible for the day to day activities of the MPH program. The growth of the Program and other outreach activities also fall within the responsibilities of the HMP Chair and the MPH/HMP faculty

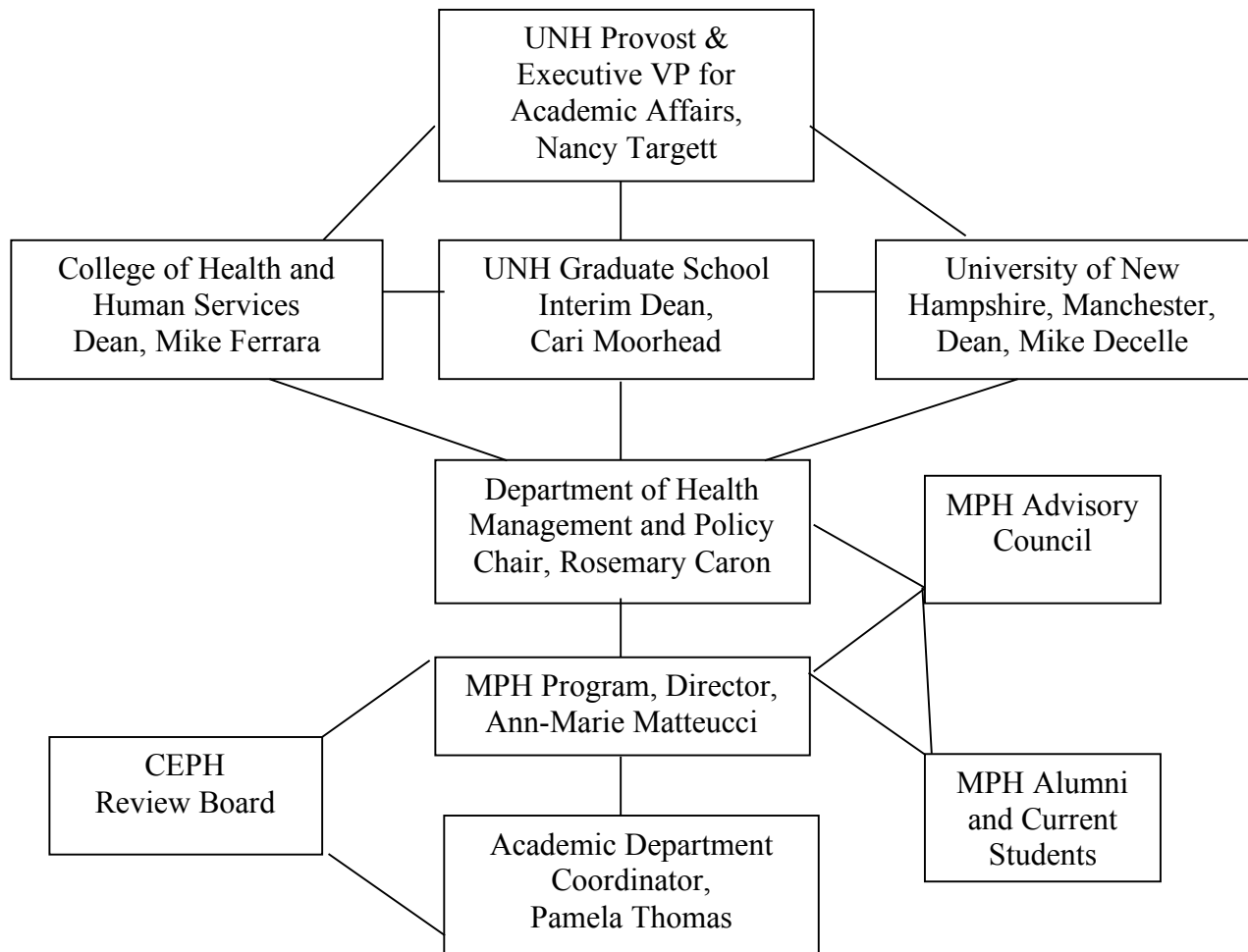
The MPH Director and Coordinator monitor and collaborate on the following:

- **Marketing, promotion and outreach**
- Responding to MPH inquiries and questions about application
- Reviewing all admission application and making recommendation on applications to the Graduate School.
- Preparing course scheduling and planning for future needs
- Training any new faculty and working with faculty on any issues
- Coordinating the MPH advisory committee
- Attend open houses and orientations
- Plan graduation and hooding events
- Advising current and incoming students
- Reviewing and assisting with academic variance petitions
- Approving transferred credits
- Monitoring the accreditation process, including annual reports
- Presenting on the MPH program as requested
- Maintain the MPH website, MPH handbook, and graduate student catalogue

Figure V depicts the organization chart for CEPH accreditation for the MPH Program.

Figure V

MPH Accreditation Organizational Chart



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

The MPH program provides several opportunities for interdisciplinary learning opportunities for students that include collaboration, cooperation and support that involve faculty and community members. Students have the ongoing opportunity to be involved with faculty research, or to work with a faculty member to research a topic of their interest at any stage of the program. The research could involve an issue within a community, rural or suburban, to examine a public health issue to provide knowledge that will provide awareness or needed data to develop a public health plan to serve the community.

The 100-hour Field Experience, PHP 990, requires students to participate within a community public health organization assist or work on a specific project for improving a public health initiative. Because students want to see the project through, many of them complete additional hours because of the importance they place on serving the public health of the community.

Students complete the MPH program with the Integrating Seminar, PHP 998. This course provides the opportunity for students to work in teams, bringing both their individual and joint perspectives and expertise together to address and provide service for a specific public health problem for a New Hampshire-based community health entity, while incorporating substantive analytic, administrative and policy perspectives. Students make a formal presentation of recommendations to the host organization toward the conclusion of the course, to enhance student experience and provide service to a NH community.

In addition to the course and research opportunities, there is a mixture of faculty who teach within the MPH program, which includes both UNH faculty and community public health leaders who provide various perspectives resulting from their professional experience and their educational background to ensure the students receive a well-informed public health education.

Finally, it is important to note that many faculty members invite various public health professionals into class to speak about current population and community public health issues and methods that have been used or are in plans for being used to address them. This ensures that students are aware of community public health issues, as well as ensuring that the community that the UNH MPH program values their support, as well as opening a door to involve students in their organization in a future course to assist with providing service to the community, therefore, developing a cycle of give and take with the MPH program and the NH community.

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.

Strengths: The MPH program is appropriately housed in the College of Health and Human Services and is supported at the Graduate School, College, and Department levels. Through collegiality, cooperation, and collaboration, and the efforts of UNH faculty and staff, the MPH Program has developed an environment that encourages teaching, learning, research, and service. Because the MPH Program is housed in the College of Health and Human Services, it affords interdisciplinary research, educational opportunities, and collaborations within the institutions of

the USNH system. Faculty within the HMP Department teach in the MPH Program as do UNH faculty in other departments, along with a cadre of long-serving adjunct faculty. Tenure-track and non-tenure-track faculty are committed to research efforts. Both tenure-track and non-tenure track faculty have consistently been actively involved in service to local, regional, and national boards and committees, as well as the UNH community. Lastly, due to the small size of the Program, the students are well served with personal service by the Program faculty, staff, and administration

Challenges: Much of the coordination of the program has fallen to one person in recent years due to discussed transitions and leadership lapses. Now that the program has two designated leaders, as well as a committed chair, faculty and Dean, we feel prepared to continue to improve on the program.

Plan: The new coordinator is taking on more of the day-to-day responsibilities of the program so the Director can make a larger impact on building collaborations and growing the program.

This criterion is met.

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

1.5.a. A list of standing and important ad hoc committees, with a statement of charge, composition and current membership for each.

Committee	Meets	Statement of Charge	Composition	Current Membership
HMP Advisory Committee	Annually, in the fall	The charge is to provide the HMP Department with advice on the undergraduate and graduate programs.	Members are leading health professionals in the state.	-Rosemary Caron -James Lewis -Ann-Marie Matteucci -Semra Aytur -Marc Hiller -Mark Bonica -Linda Spang -Robert McGrath -Pamela Thomas As well as external member listed in the ERF, 1.5 Governance
MPH Admissions Committee	As needed	The charge is to review admission applications to the MPH Program.	Members are UNH MPH faculty.	-Rosemary Caron -Ann-Marie Matteucci -Pamela Thomas
MPH Program Committee	Monthly	The charge is assist in the development of the program, including curriculum and outreach.	Members are MPH faculty who are full-time employees of UNH	- Semra Aytur - Marc Hiller - Ann-Marie Matteucci - Rosemary Caron - Pamela Thomas **as the membership includes most of the current faculty, meeting often takes place at the HMP Departmental meetings.
MPH Work Group	Four Meetings in 2017, annually moving forward.	To guide the MPH program to best meet the needs of the work force and public health community.	Members are key stakeholders in the state and at UNH.	UNH Faculty and Staff Ann-Marie Matteucci, MPH Director John Bunker, Director of External Relations Michael Ferrara, Dean, CHHS Pamela Thomas, Academic Department Coordinator Robert McGrath, faculty Rosemary Caron, Chair, HMP Semra Aytur, faculty Other members, including external members can be found in ERF, 1.5 Governance

1.5.b. Identification of how the following functions are addressed within the program's committees and organizational structure:

- General program policy development
- Planning and evaluation
- Budget and resource allocation
- Student recruitment, admission, and award of degrees
- Faculty recruitment, retention, promotion, and tenure
- Academic standards and policies, including curriculum development
- Research and service expectations and policies

General program policy development

General program and policy development for the MPH Program is made by the HMP faculty under the guidance of the MPH Program Director and the HMP Chair. In the earlier part of the self-study period the MPH Program Committee was more commonly used to address the needs of the MPH program. That Program Committee is composed of representative faculty in the Program, a list of members is found in **table 1.5.a**. However, since the death of the Program Director in 2015, and given that the overall size of the faculty has decreased due to retirements and restructuring, any changes in the Program have been decided by the entire faculty. All program changes are governed by faculty with the approval of the Dean of the College of Health and Human Services and the Graduate School, where appropriate. Academic policies are governed by the UNH Graduate School. Graduate School policies can be found at:

<https://gradschool.unh.edu/fp.php#academic>.

An Advisory Committee for the Graduate Programs located in Manchester is composed of all the Program Administrators, including the MPH Program, the Dean of the Graduate School and the Dean of UNHM.

Planning and Evaluation

Planning and evaluation is the responsibility of the Program Director with the HMP Chairperson and the faculty of HMP.

The HMP faculty convened in the fall of 2016 to discuss the lowering numbers within the program and to address what, if any changes needed to be made to improve upon the program, including the termination of the program, or a hiatus while the program was being examined. With encouragement and support from the CHHS Dean's Office, and the full support of the Graduate School's Dean and staff, it was decided to continue the program while engaging in a systematic and comprehensive examination of the MPH program using internal and external stakeholders (Work Group membership noted in **table 1.5.a** and ERF, 1.5 Governance.) The Dean of CHHS charged the MPH Work Group to assess the overall quality and delivery of the MPH program. A written report provided recommendations to the Dean of the College in June 2017, and is included in the electronic resource file. The overall suggestion of the MPH Workgroup, HMP faculty, and the Dean of CHHS is to develop strategies to grow and strengthen the MPH program.

Budget and resource allocation

The HMP Chair establishes a budget for the MPH Program. The budget is presented to the Dean and quarterly budget meetings are held throughout the year to monitor revenue and expenses of the MPH program.

See Criterion 1.6 Resources for a discussion in terms of budget and resource allocation.

Student recruitment, admission, and award of degrees

The MPH Admissions Committee is composed of two faculty members and the Academic Department Coordinator who make a recommendation on admission to the MPH Program Director. The list of members is found in **table 1.5.a**. The charge to the committee is to provide the MPH Program Director with recommendations on the admission of applicants to the MPH Program. In the history of the Program, the Graduate School has never reversed an admissions recommendation of the MPH Admissions Committee.

Student recruitment is a joint responsibility of the MPH Program Director/Coordinator and Graduate School at Manchester. The MPH Program Director/Coordinator participate in outreach and recruitment activities. The Educational Coordinator for the Graduate School, located at UNH Manchester also assists in recruiting students, attending many conferences, workshops and fairs throughout the year. The staff in Manchester also hosts open houses and meets with prospective students if they reach out to the Graduate School first.

The MPH Program Director/Coordinator meets with prospective students to respond to questions via email, phone or in person. All application materials are sent to the UNH Graduate School for processing.

The MPH Program Director/Coordinator certifies completion of the degree requirements and forwards it to the Graduate School Registrar's Office for verification. The UNH Graduate School awards the MPH degree.

Please see Criterion 4.3 for a more detailed description.

Faculty recruitment, retention, promotion, and tenure

A department committee is formed for each promotion and tenure case. The committee follows the rules of the department and University. *Department, College and University Promotion and Tenure Guidelines* will be made available on site.

HMP Department faculty searches are approved by the Provost. A faculty search committee is formed, comprising typically of three faculty members. The Chair of the faculty search committee works closely with Human Resources to be sure that the position is advertised in the appropriate venues.

Academic standards and policies, including curriculum development

The Program must follow the academic standards and policies of the UNH Graduate School and the standards are found online at: <https://gradschool.unh.edu/fp.php#academic>

The Program also sets its own policies determined by the faculty and are published in the Student Handbook. (located in ERF 1.5/Governance/handbooks or can be found on our website at: https://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/Graduate_Landing_Page/mph_handbook_2017-2018_7_28_17.pdf)

Curriculum development

The MPH Director/Coordinator and the MPH Program Committee develop appropriate curriculum to reflect the CEPH requirements, as well as needs noted by stakeholders.

Authority

The Graduate Council is the faculty governance body charged with reviewing all proposals that fall within the scope of this policy. The Graduate Council makes positive or negative recommendations to the Dean of the Graduate School regarding the approval of proposals. The Dean in turn consults with the appropriate school and college deans before making a final determination. Prior to making a final recommendation for a new program (degree/major) approval to the Provost, the Dean of the Graduate School must convene a meeting of the UNH Graduate Faculty in accordance with the Graduate Faculty by-laws. A positive vote by a simple majority of the Graduate Faculty must occur before forwarding the proposal to the Provost.

All proposals to add, delete, or change the name of a program shall require the approval of the UNH President. Proposals to change the name of a degree program, add a new program or delete a program are forwarded to the USNH System and Board of Trustees for information.

Initial Planning

Whenever a change in a graduate program is contemplated that falls within the scope of these guidelines, the relevant faculty is encouraged to consult with their department chairs, school/college deans, and the Dean of the Graduate School. Such consultations may be informal initially. If the decision is made to proceed with planning, a Prospectus for Program Change must be prepared and submitted to the Dean of the Graduate School generally no less than 12 months prior to the anticipated effective date of the change. Part I describes the process for establishing new degrees or majors. Part II describes the process for changing the names of existing majors or degree designations, splitting or merging existing programs, and deleting programs.

Research and service expectations and policies

Research and service expectations of tenure-track faculty in the Program are discussed previously in Criterion 1.0 on Program mission, goals and objectives under the topics of research

and service and in Criterion 3.1 Research and 3.2 Service. Please see **Tables 3.1.b** and **3.1.c** for an outline of faculty research and service activities.

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 Program rests within the Health Management and Policy Department at UNH and the Program follows the by-laws of the Department of Health Management and Policy. A copy of the by-laws is found in ERF, 1.5 Governance/Bylaws.

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

The faculty is actively engaged in contributing to the stewardship of the University.

Table 1.5.d.: Faculty Membership on University Committees, 2014-2017

Faculty Member	Role	Department	Committee	Date(s)
Semra Aytur	Member	UNH Institute on Disability	Director Search Committee	2017 Summer - Present
	Member	UCAPC	UCAPC	2017
	Member	Communications and Speech Disorders Laboratory	Journal Club	2017 Fall
	Lecturer	CHHS	Inter-professional Methods Seminar	2017 Fall
	Representative	UNH	Decenter	2017 Summer - Present
	Member	HMP	Faculty Search Committee	2017 Fall
	Member	CHHS	PhD Program Planning Committee	2016 - Present
	Member	Faculty Senate	IT Committee	2016
	Member	UNH	Zero Waste Sustainability Task Force	2016
	Chair	UNH Sustainability Dual Major	Search Committee	2016
	Member	HMP	Bylaws Committee	2016
	Judge	UNH	Undergraduate Research Conference	2016
	Member	Sustainability Dual Major	Lecturer Search Committee	2015
	Member	Carsey School of Public Policy	Director Search Committee	2014
	Member	Carsey School of Public Policy-	Research Committee	2014
	Member	HMP	Faculty Search Committee	2014

	Member	Nutrition	Faculty Search Committee	2016 Fall - 2017 Spring
	Member	Sustainability Dual Major	Program Committee	2015 - 2016
	Lecturer	CHHS	Data Science Seminar	2017 - 2018
	Member	CHHS Strategic Planning Workgroup	Research Committee	2015 - 2016
	Advisor	HMP	Class of 2018	2015 - 2016
	Member	UNH	Faculty Senate	2014 - 2016
	Coordinator	HMP	Undergraduate Honors Program	2012 - Present
	Co-Instructor	NRESS Interdisciplinary Seminar		2012 - 2014
	Promoter of Transdisciplinary Research	UNH	Sustainability Collaborative and Research Learning Community	2010 - 2014
	Fellow	Carsey School of Public Policy		2009 - Present
Rosemary Caron	Co-Chair	UNH	University Awards Committee	2017
	Member	UNH	Fulbright Scholar Campus Committee	2016
	Member	UNH	University Writing Program	2015 – 2016
	Ambassador	UNH	Open Education Resources	2015 – 2016
	Member	UNH	Digital Learning Initiative,	2015
	Member	Carsey School of Public Policy	Academic Planning Committee, Masters in Public Policy	2014 - 2015
	Member	UNH	President's Commission on the Status of Women	2014 - 2015
	Member	UNH	Faculty Senate Agenda Committee	2013 - 2015
	Chair	HMP	Revision of HMP Promotion and Tenure Guidelines	2017
	Member	HMP	Ad Hoc Merit Pay Guidelines Committee	2017
	Chair	HMP	Ad Hoc Curriculum Committee	2016 - 2017
	Member	Occupational Therapy	Promotion and Tenure Committee	2016
	Member	HMP	Clinical Faculty Search Committee	2016 - 2017
	Member	CHHS	Executive Committee	2015 - Present
	Chair	HMP	HMP	2015 - Present

	Member	CHHS	Strategic Plan, Teaching Affinity Group	2015 - 2016
	Chair	HMP	Faculty Search Committee	2015 - 2016
	Program Director	HMP	Undergraduate Studies	Present
	Representative	CHHS/HMP	Discovery Program Committee Ad hoc Clinical Faculty Search	2014
	Member	HMP	Promotion and Tenure Committee	2014
	Chair	HMP	Faculty Search Committee	2013 – 2014
	Member	HMP	MPH Program Committee	2012 - Present
	Representative	HMP	Faculty Senate	2012 - 2014
	Liaison	HMP	Library Allocations	2010 - 2015
Ann-Marie Matteucci	Member	HMP	By-Laws Committee	2015 Fall
	Chair	HMP	MPH Admissions Committee	2015 - Present
	Member	Graduate School	Graduate Advisory Council	2014 - Present
	Member	HMP	Search Committee	Fall 2016

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

The MPH Student Committee was disbanded in 2013 due to lack of student involvement. Given that the program design allows students to work full-time by attending classes at night, the overall lower numbers did not demonstrate a need for a formal MPH student organization, as it would not address our students' needs. The MPH Program Coordinator (now Director) began classroom visits, at least twice per semester but typically biweekly, where students were provided with updates, asked questions about the curriculum or other pressing matters, and given an opportunity to express any concerns. These visits take place before class begins and students have come to expect these visits. They are also encouraged to talk with the Program Director in class by appointment or by email.

During the process of studying the MPH program over the last three years there have been several student surveys and students participated in two focus groups. The 2015 survey was done somewhat informally by the former Director. Some of the findings that the faculty and Strategic Planning group at the time were interested in was that students indicated they chose our program because they could complete the program while working full-time and that they valued the face-to-face connection. The survey wasn't set up well enough to be able to draw conclusions from the results. The survey itself was lost with Barbara Arrington's belongings (as previously noted, on her personal computer and not found once she passed.) A report of the findings is posted in ERF 2.7/Assessment.

In 2017, The Survey Center at UNH sent a survey to all current students and alumni. Answers were presented by each population. Of note, approximately 60% of our current students did not consider another college for their MPH, 100% said that cost was of important to them when deciding on a school and 60% stated that the reputation of the UNH program was an important

factor. Eight-six percent (86%) noted that a face-to-face environment was important to them. Full finding for both surveys are located in ERF 2.7/Assessment.

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.

Strengths:

The MPH Program has well-defined rights and responsibilities concerning Program governance. The Program follows the HMP Department By-laws, and works with several committees to govern the Program. The Program follows the academic policies set forth by the UNH Graduate School and works closely with this body. Program administration and faculty have significant opportunities to participate and actively do participate in policy and decision-making actions directed not only at accomplishing the Program's stated mission, goals and objectives, but in contributing to the general purposes of the College and University.

Some of the committees that are recommended and typically convened in this program, such as the Program Committee and the Student Committee, have not met due to the small nature of the MPH program, regarding size of the student body and faculty. The MPH program holds forums to obtain insight, and to guide the program using the classroom visits and the departmental faculty meetings, but we plan to revisit these committees once the program grows.

Challenges:

Most of our challenges have related to timing. The program experienced the death of a director, a hiring process for a new director and coordinator, and the start of the self-study. There has been no opportunity to recover from these operational challenges. We feel that we faced these challenges head-on by enlisting the full HMP faculty and the students for feedback

Plan:

The Work Group was charged to assist in the evaluation and strategic planning of the program. Once the reaccreditation process is completed, the plan is to resume the Program Committee to hold regular meetings, and that a greater interdisciplinary committee will be possible.

This criterion is met.

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.

The revenues for the Program are generated by tuition revenue for full-time and part-time students. The State of New Hampshire retains the distinction of providing the lowest level of support for higher education of all states. Thus, UNH programs are particularly dependent upon tuition revenue, as well as external funding which is becoming more competitive to obtain.

The state legislature reduced its funding to UNH by 48% (\$33 million) beginning in fiscal year 2013. UNH has attempted to make up for this shortfall by offering retirement incentive programs, not filling vacant position, expanding the market of various academic programs, and tuition increases to name a few approaches. The state's fiscal *contribution to UNH is now ~6%* (<http://unhmagazine.unh.edu/fl1/budget.html>). Currently, there have not been discussions of the UNH Foundation providing additional funding for the MPH program.

Given the reduced enrollment in the MPH program, and given the revenue system of the University System of New Hampshire, and within UNH the program has been experiencing budget shortfalls. Due to the way budgets are established at UNH and within the CHHS, it is possible for an individual program to incur an operating loss during a particular year; this has been the case, on occasion, for the MPH Program. In such instances, budget shortfalls are made up by transfers of funds from the HMP departmental budget and/or the College (which functions as the profit/loss center under the current UNH budgeting system).

The Dean of CHHS has been clear on his commitment to the MPH program in his actions and budgetary support to ensure that the University will offer an MPH program as it is vital to the central mission of the College of Health and Human Services and to the University. He is aware of student enrollment and the costs to run the program. He meets with the Chair regularly to receive updates and is fully invested in allowing the program to grow.

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.

Table 1.6.1 Sources of Funds and Expenditures by Major Category

	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017 (to current date, includes encumbrances)
Source of Funds					
Tuition & Fees	641,916	622,350	468,675	281,214	234,540
Other (explain) (1)			542		
Total	641,916	622,350	469,217	281,214	234,540
Expenditures					
Faculty Salaries & Benefits	256,980	220,819	258,629	252,258	176,132
Staff Salaries & Benefits			228		
Operations	4,296	5,903	5,721	1,452	8,266
Travel	955	85	175	288	1,024
Student Support (2)	5,000				
Other (CPS)	98,862	91,969	69,964	42,182	34,455
University Tax	95,537	93,353	70,301	44,994	41,514
Total	461,630	412,129	405,018	341,174	261,391
Net revenue (expense)	180,286	210,222	64,199	(59,960)	(26,851)
(1) transfer in to cover salary expense above budgeted amount					
(2) Includes funding from internally designated but not grant funds					

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.

Not applicable.

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.

Since the number of students who matriculate in the Program drives the financial viability of the Program, this outcome is monitored regularly. Should fewer students matriculate in the Program than expected, the Department and CHHS cover the loss. The Business Service Center of the College mandates quarterly budget meetings to review and assess all Program budgets.

A portion of the CEPH Outcomes Measure table (found on page 21) included is both our budgetary goal (last row). The current goal is to keep open communication with the Dean as he supports the MPH program while it was evaluated and now steps are being planned to grow the

program. Other outcome measures were shared because without growing the program, we will be unable to overcome our current budget shortfalls.

Outcome Measure	Target	2014-15	2015-16	2016-17
The MPH program will be evaluated for both delivery and curriculum to ensure that the program continues to meet the workforce needs.	Advisory board/work group (MPH) meets annually (target) to evaluate the curriculum and delivery method.	Not met (did not meet)	Not met (did not meet)	Met (4 meetings)
	Strategic planning meetings are held to address the evolution and vision of the program, Target: meet twice annually.	Met (met 3 times)	Did not meet	Met (4 meetings)
	HMP Advisory Board meets annually (target) to discuss the MPH program and its future,	Met (fall 2014)	Met (fall 2015)	Met (fall 2016)
A concentrated marketing plan will be developed and implemented. (Criterion 4.3)	Social (Facebook, Google, Twitter) and print media (ads in journals/papers) will be used to create awareness of the MPH program,	Not met	Not Met	Met (2 print, 2-week social media)
	Tables at conferences and graduate school fairs, on campus, information sessions, and other outreach	Met (3 tables)	Met (2 tables)	Met (two tables, 1 panel)
	Website review and revision	Not met	Met	Met
	In meetings with prospective students starting in fall 2017, ask” how they learned of program?” The target is to increase numbers of students and to have more students learn of program through marketing rather than word of mouth or website search. This is a goal moving forward.	Not measured	Not measured	Not measured
Assessment program viability using quarterly budget meetings to assess Dean’s support of program. (Criterion 1.6)	Quarterly budget meetings to review enrollment status and admission status.	Met (lower revenue but balanced)	Met (lower revenue but balanced)	Met (budget shortfall, College supported)

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.

Strengths: The UNH MPH program has been a self-sustaining program for 14 of its 16 years of existence. While the program is struggling with lower enrollments and budget shortfalls, the Department and the College have been supportive of the program through a difficult transition. Regular budget meetings to continuously review the budget help to keep the communication lines between the program, department and college open.

Challenges: Obviously, a program is not sustainable if a budget shortfall is not reversed. The Dean of CHHS has given the program and department the ability to assess the strengths and challenges of the program and to make the best decisions for moving forward. It is believed that this time and support will seed the program through this challenging period.

Plan: Combined efforts of adjusting curriculum, delivery method and marketing strategies will be implemented to grow the program.

This criterion is partially met.

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 1.7.1 Headcount of Primary Faculty				
	2014-2015	2015-2016	2016 -2017	Fall 2017
Core Area/Specialty #1	4	3	4	4

- 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 (nonprimary) 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 9 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.

Table 1.7.2: Faculty, Students and Student/Faculty Ratios, 2014 – 2017¹**

2014/2015*

	Head Count Core Faculty	Full Time Equivalent Core	Head Count Other Faculty	Full Time Equivalent Other	Total Faculty Head Count	Total Full Time Equivalent Faculty	Head Count Students	Full Time Equivalent Students²	Student Faculty Ratio by Core Full Time Equivalent	Student Faculty Ratio by Total Full Time Equivalent
Generalist degree/ focus	4	2.35	14	2	18	4.35	32	24.25	13.62	7.36

*These data were included because they represent the program when it was staffed with a Director and a Coordinator.

2015/2016*

	Head Count Core Faculty	Full Time Equivalent Core	Head Count Other Faculty	Full Time Equivalent Other	Total Faculty Head Count	Total Full Time Equivalent Faculty	Head Count Students	Full Time Equivalent Students²	Student Faculty Ratio by Core Full Time Equivalent	Student Faculty Ratio by Total Full Time Equivalent
Generalist degree/ focus	3	1.5	17	2.125	20	3.63	17	13.25	11.33	4.68

*This semester was when the program was without a Director due to the death of Barbara Arrington.

¹ At UNH, for full-time, tenure-track faculty, four courses are considered a full teaching load. A full-time position includes four classes representing five-eighths (5/8) of a faculty member's workload. The rest of the position includes Research/Scholarship (2/8) and Service (1/8). These core components are reviewed for promotion and tenure. To calculate the FTE contribution to the MPH Program, the number of courses a faculty member teaches, their Research/Scholarship effort, as well as their contribution to Service was divided by eight. The MPH Program Director contributes a total of 6/8 (0.75 of her effort towards Administration, Teaching, Research/Scholarship, and Service in the MPH Program. The remaining 2/8 (0.25) effort is contributed towards the undergraduate Health Management and Policy Program. Based on this calculation, the total FTE contribution to the UNH MPH Program from all staff, including tenured, tenure-track, and adjunct faculty is 5.13 for 2016-2017.

2016/2017*

	Head Count Core Faculty	Full Time Equivalent Core	Head Count Other Faculty	Full Time Equivalent Other	Total Faculty Head Count	Total Full Time Equivalent Faculty	Head Count Students	Full Time Equivalent Students²	Student Faculty Ratio by Core Full Time Equivalent	Student Faculty Ratio by Total Full Time Equivalent
Generalist degree/ focus	4	2.25	11	1.75	15	5.13	17	14.45	7.55	4.25

*This semester was with new Director in place

Fall 2017

	Head Count Core Faculty	Full Time Equivalent Core	Head Count Other Faculty	Full Time Equivalent Other	Total Faculty Head Count	Total Full Time Equivalent Faculty	Head Count Students *	Full Time Equivalent Students²	Student Faculty Ratio by Core Full Time Equivalent	Student Faculty Ratio by Total Full Time Equivalent
Generalist degree/ focus	4	2.25	11	1.75	15	4	15	11	6.66	3.75

² The majority of the students in the MPH program are employed full-time and are considered part-time students, however, if they pursue a two-year track they will carry a full-time course load for 2 out of 4 semesters. Some students will matriculate longer than two years and take some time off from the curriculum to address professional and personal situations, thus making it difficult to ascertain head count. For the purposes of this table, we used “active student” enrollment count as the head count to obtain a constant rate, even if the students were not enrolled in classes for any given semester.

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.

	Administrative Staff	FTE
2017 (Fall)	4	1.2
2016 - 2017	4	1.2
2015 - 2016	3	.30
2014 - 2015	3	.30

The MPH program is supported by an administrative assistant in the Department of Health Management and Policy. The position supports the undergraduate and graduate program so is listed as 50% support. In the fall of 2016 the Department of Health Management and Policy added a departmental coordinator who supports the undergraduate and the graduate program. Fifty percent of her position is dedicated to the MPH program. This coordinator position was previously held by a faculty member.

Through the administrative fees charged to the Program, the Graduate School in Manchester also offers staff who support the program in a variety of ways including but not limited to: marketing, meeting with prospective students, attending open houses and information sessions, assisting faculty and students with a variety of issues and supporting the Director of the MPH program as needed. There are two staff persons located in Manchester and it was determined that 10% of their time could be counted toward the MPH program

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

Overview

The MPH Program is offered at the University of New Hampshire Manchester (UNHM), a college of the University of New Hampshire. (Link: <http://manchester.unh.edu/>) UNHM is located in the largest city in the state and is within a thirty-minute drive of half the state's population. It is one-hour northwest of Boston and 45 minutes west of the University of New Hampshire Durham. UNHM has 1,500 undergraduates and is the location for the UNH Graduate School, Manchester Campus.

The University of New Hampshire Manchester is located in Manchester's historic mill yard. In 2015, the University of New Hampshire Manchester relocated to the Pandora Building, which includes five lounges, multimedia classrooms, 11 media labs, and three computer labs.

The UNH Graduate School, Manchester Campus shares 121,647 square feet of space that includes offices and classrooms, work stations, five student lounges, and two kitchens with the undergraduate programs on the UNH Manchester campus. MPH classes can be offered throughout the building based on size of class and special needs of the instructor.

Offices:

The Department of Health Management and Policy occupies the third floor of Hewitt Hall on the Durham campus. The third floor contains 14 offices, plus a main reception area, conference room, and student computer cluster. Faculty members with full-time appointment at the University have assigned office space on the UNH Durham campus. There is space available for meeting with MPH students in Durham, if this is needed.

UNH Manchester also provides the MPH Director/Coordinator an office shared with another Graduate Program. That program meets on different days so it offers a private space to meet with students before class and on other days during the week. Additionally, there is a shared office space for adjunct faculty in at UNHM. Faculty to have access to the space to meet with students. They also have access to a shared printer and copy machine, using the secure UNH network.

Classrooms:

MPH classes are assigned by the UNHM Registrar with the assistance of the UNH Graduate School, Manchester Campus. Any special classroom needs (e.g., internet access or wireless laptop computers, audio-visual equipment) are arranged for each class. When surveyed, alumni indicated they were satisfied with the classroom facilities.

Student Common Space:

MPH students have use of the entire UNHM campus. There are spaces for group meetings, the library, three general use computer clusters, five lounge areas, and a cafe.

The space is adequate for all facets of the Program.

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

Not applicable

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

Registered students gain a Computer Information Services (CIS) account with their enrollment. The CIS account gives them access to their UNH e-mail, as well as registration. The account also allows student access to Canvas, a web-based educational support software. The UNH MPH Program uses Canvas for all its courses from which students may gain access to all course materials, group projects etc. through Canvas.

Computer and instructional technology support is offered to all students, faculty and staff. IT personnel visit every classroom at the beginning of the semester and training sessions and one-on-one support is offered as needed.

UNHM has both, hands-on computer classrooms and a computer cluster available for students including a computer cluster on the first floor, laptops available to be signed out for four hours at a time and brought to class (only when Learning Commons is open). Wi-Fi is available throughout the Pandora building.

There is a hands-on computer laboratory room that is used for the biostatistics course and any other elective that may require computer use (example a GIS course offered fall 2017 and Biostatistics each spring). No other laboratory space is required by faculty.

Computer and instructional technology support is offered to all students, faculty and staff. IT personnel visit every classroom at the beginning of the semester and training sessions and one-on-one support is offered as needed.

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 UNH Library is an integrated library in that students can search and retrieve items from any of its branches. Students enrolled in the MPH Program have access to all library services. See <http://www.library.unh.edu/>

UNHM houses a collection of more than 30,000 volumes of print and non-print materials, integrated into an open-stack arrangement. A network of workstations provides access to many citation and full-text indexes for general and subject-specific searching. The UNHM library's on-line catalog is fully integrated with Dimond Library (the main UNH library in Durham) and other University branch libraries located in Durham. There are over 550 periodical titles; many of these periodicals can be obtained electronically, via microfilm or sent between campuses. The library can also provide database searches to students and faculty to assist them in their research. A UNHM I.D. card is provided to all MPH students for their use of library services. The Department of Health Management and Policy orders materials to add to the collection each year, and additional materials related to public health are supplemented by other Departments,

The UNH Library is the only library north of Boston that is a member of the Boston Library Consortium (BLC). BLC provides students and faculty with access to Boston area libraries as well as 24/7 research assistance.

The BLC is an association of 18 academic and research libraries located in Massachusetts, Connecticut, Rhode Island, and New Hampshire, and is dedicated to sharing human and information resources to advance the research and learning of its constituency. Founded in 1970, the Consortium supports resource sharing and enhancement of services to users through programs in cooperative collecting, access to electronic resources and physical collections, and enhanced interlibrary loan and document delivery.

The BLC has a “Virtual Catalog” which allows students and faculty to access the libraries at Boston College, Boston University, Brandeis University, Marine Bio Lab – Woods Hole, Massachusetts Institute of Technology, State Library of Massachusetts, Tufts University,

Northeastern University, U-Mass Amherst, U-Mass Boston, U-Mass Dartmouth, U-Mass Lowell, U-Mass Medical (Worcester), University of Connecticut, Wellesley College, and Williams College.

Consequently, students have access to four universities with Schools of Public Health (Boston University, Northeastern, Tufts, and University of Massachusetts, Amherst). Students and Faculty can borrow circulating items from these institutions for a period of up to 28 days. The items are delivered to the UNHM Library or UNH Dimond Library in about 4-5 days and may be picked up and returned at the Loan Desk at those two locations. In addition, students can log onto the system with their UNH account any day or time and receive assistance from a reference librarian somewhere in the system. See <https://manchester.unh.edu/support-services> or <https://www.library.unh.edu/research-support/ask-a-librarian>. This is a wonderful resource for students and faculty, and can be demonstrated on-site.

An orientation to the library is provided during the MPH orientation. Librarians are also invited to MPH classes to provide specific guidance and will develop course-specific library web pages for researching projects and completing course assignments.

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

Not applicable

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.

See full table on page 21

Outcome Measure	Target	2014-15	2015-16	2016-17
Increase the number of courses taught by core faculty.	Core faculty will teach at least 50% of required classes (6/11).	Met (6/11)	Not Met (3/11)	Met (6/11)

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.

Strengths: The resources related to the physical building, library and computer/technology are more than adequate. The space is modern and spacious. The Boston Consortium allows students to access to nearly any periodical, book or other resource desired. The IT staff can assist students and faculty with any technological issue and will work with people by phone or in person.

The faculty resources work for us but we recognize it is tenuous. We have more adjunct faculty than core faculty. We are fortunate that our adjunct faculty are dedicated and committed to public

health and the MPH program. Most are practitioners in the field, some are alums, and many have been with the program for over 10 years.

Challenges: In the 2016-2017 academic year, the core faculty taught 6 out of 11 required courses (54%) and have the possibility of offering a few electives. This has not always been the case, for example in 2015-2016 only 27% of the required courses were taught by core faculty. Part of this was due to the death of Barbara Arrington (former director) but the other part is the nature of having a small home academic department. The HMP department has six tenure track faculty members who teach in the HMP/MPH courses, two of whom are currently transitioning to retirement and three who have assigned teaching loads in the MPH program. There is one additional faculty member whose appointment is in IHPP, who has responsibilities to teach in the MPH, and round out the MPH faculty from UNH. A joint position between Economics and HMP was filled for the fall of 2016 and this position taught our Public Health Economics class. Unfortunately, this hire left the University after one year and now we are searching for that position. The remaining faculty within the program are adjunct.

Challenges will likely continue as the Director of the program, Ann-Marie Matteucci, is a tenure track faculty member and given the size of the program may need to teach larger classes in the undergraduate program and therefore, fewer classes in the MPH program until the numbers rebound. This is due to faculty senate rules regarding course evaluations that are a critical component of Promotion and Tenure.

Because of this we will not meet this goal this year and will only have 4 out of 11 required taught by core faculty.

Plans: Much of the plans still revolve around growing the program however attention does need to be given to the faculty distribution and commitment to the program. As the department plans for the upcoming transitions to retirement, there is the potential for hiring new tenure-track faculty to teach in the MPH program. Two searches are happening this year, one to replace the Economics/HMP professor (McKerley Chair) mentioned above.

This criterion is partially met.

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

Required Documentation. The self-study document should include the following:

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

UNH and the MPH program are committed to supporting and sustaining an educational community that is inclusive, diverse and equitable. The values of diversity, inclusion and equity are inextricably linked to our mission of teaching and research excellence, and we embrace these values as being critical to development, learning, and success. We expect nothing less than an accessible, multicultural community in which civility and respect are fostered, and discrimination and harassment are not tolerated, and aims at social justice.

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

As a program, we seek to embrace all forms of diversity included in this statement, however it is important to remember that our catchment area tends to be limited to New Hampshire, the northern section of Massachusetts, and the Western section of Maine due to the specific characteristics of our Program which include a physical location in Manchester NH, classes only offered in the evenings, and a face-to-face delivery mode. There are years we do very well with racial diversity, especially given the large refugee population in the greater Manchester area, however those populations are not consistent and are difficult to recruit.

Overall, we consider the following populations to be under-represented within the MPH program:

- Racial Ethnicity and Color: Individuals who identify as American Indian/Alaskan Native, Black/African American, Asian, Native Hawaiian/Other Pacific Islander, Hispanic/Latino, or two or more races represent 8% of the total UNH graduate population and 6% of the total NH population (sources NH Census - <https://www.census.gov/quickfacts/table/PST045216/33> and "Reports and Statistics", Community, Equity and Diversity at UNH- <http://www.unh.edu/ced/reports-statistics>.) For the purpose of this report, we will track African American and Hispanic populations which represent 1.5% and 3% of the New Hampshire, respectively.
- Gender: We have traditionally been underrepresented in female faculty members in the department but overrepresented in female students (56% of all UNH graduate students). This year we moved from 36% female in the faculty to 50% with recent hires. Currently, 29% of our student population are male, which is an improvement of more recent years.

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.

1. Provide an inclusive curriculum that

- a. promotes cultural competence and an understanding and valuing
 - b. incorporates research and discussion into class on ways to reach different populations
 - c. values health equity and examines health disparities.
- 2. Provide a safe environment for students to learn and thrive, and for faculty to work
 - a. Especially given the nature of our society today, and the fact that many of our students of color have been immigrants and refugees, we want students to feel comfortable in our program so they can achieve their the full potential
- 3. Increase numbers of students that meet the criteria of racial and gender diversity.
 - a. Gender: more male students and more female faculty
 - b. Racial/Ethnic: as is possible within our limited catchment area.

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.

All departments on campus following the University System of New Hampshire's Discrimination and Discriminatory Harassment Policy which can be found here:

<http://www.usnh.edu/policy/unh/v-personnel-policies/b-affirmative-action-and-equity#5>

If a student or faculty/staff member is a witness of harassment and discrimination, or feels they have been in a hostile, unsafe situation or have been discriminated against, they can talk to a faculty member, or the Director or the Director of the Affirmative Action and Equity Office.

The University supports a platform for faculty, students and staff to report anonymously bias or hate, discrimination and/or harassment called "reportit!" Which can be found at affirm@action.equity@unh.edu.

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

The policies noted above are designed to promote a climate for working and learning in a diverse setting. The further support this the following services are offered on campus:

http://www.unh.edu/sites/www.unh.edu/files/departments/affirmative_action_and_equity_office/Title_IX/title_ix_unh_offices_roles_contact_updated_6-17-14.pdf

While graduate students in Manchester may to use many of the resources offered at UNH, they are largely located on the Durham campus. Our students and faculty are encouraged to keep dialogue open and faculty strive to ensure a safe classroom.

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.

We could be more diligent in this area. We expect that faculty will update their curricula to include issues of health equity and health disparities, and to build cultural competency but this has not been formally evaluated during our transition period.

This was largely neglected because of the following reasons:

- Inconsistent leadership, including the death of our Director, Barbara Arrington. And it took time to hire a new Director and a Coordinator.
- Falling enrollment numbers led to focused efforts to understand why admissions were decreasing. This aspect of our program required all our attention, which led to the creation of the MPH Work Group and the strategic planning that occurred during 2016-2017.
- Now that programmatic leadership is in place, we can direct our attention to curriculum review and delivery model.

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

Our department is very small. When we do recruit faculty, we use the following steps to reach a diverse applicant pool.

The University Strategic plan urges us to create campus environments that foster inclusiveness and quality engagement for all. We can move towards this goal by redoubling our efforts to recruit a more diverse faculty and senior administrative staff who reflect scholarly traditions, experiences, and excellence.

It is the expectation that all advertising, recruiting and hiring processes will employ inclusive practices that advance the University's commitment to inclusive excellence among its administrators, faculty, staff, and students. Advertisements for the last two departmental faculty searches ran in: Diverse Issue Post, Hispanic Outlook Post, and Latinos in Higher Ed Online, as well as other locations.

The University of New Hampshire is an Equal Opportunity/Equal Access/Affirmative Action institution. The University seeks excellence through diversity among its administrators, faculty, staff, and students. The University prohibits discrimination on the basis of race, color, religion, sex, age, national origin, sexual orientation, gender identity or expression, disability, veteran status, or marital status. Application by members of all underrepresented groups is encouraged.

The Associate Vice President for Community, Equity, and Diversity (AVPCED) is responsible for developing and benchmarking methods for diversifying applicant pools and encouraging and supporting diverse faculty recruiting.

The Division Administrator or Dean and the Unit Administrator or Department Chair are responsible for monitoring all actions of the search committee, ensuring that members are knowledgeable about the search process and selection criteria for a successful candidate, and committed to enhancing faculty diversity. They are also responsible for ensuring that equal

opportunity is afforded to all candidates and that all reasonable efforts are made to meet the University's diversity initiatives and affirmative action goals.

The Program's efforts to attract and retain a diverse faculty and staff occur within the context of University and College efforts described in ERF, 1.8 Diversity/Hiring Procedures. In addition, however, in recruiting for new Program faculty, the Program identifies likely avenues for minority recruitment; i.e., sites in which to advertise faculty positions, individuals to contact for networking with a more diverse applicant pool, etc. These strategies have not been particularly successful. However, we have been a somewhat more successful in working closely with public health professionals in the state and Manchester area to identify minority candidates for adjunct positions, guest lecturers, presenters in the Grand Rounds series, and preceptors. Recruitment of a diverse faculty and staff remains a challenge.

Please see ERF 1.8 Diversity/Hiring Procedures, to review UNH hiring procedures

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

As noted above we have 2 staff members associated with the MPH program whom we have control over the recruitment and hiring. The following steps are used to hire staff:

The University of New Hampshire is an Equal Opportunity/Equal Access/Affirmative Action institution. The University seeks excellence through diversity among its administrators, faculty, staff, and students. The university prohibits discrimination on the basis of race, color, religion, sex, age, national origin, sexual orientation, gender identity or expression, disability, veteran status, or marital status. Application by members of all underrepresented groups is encouraged.

It is the expectation that all advertising, recruiting and hiring processes will employ inclusive practices that advance the University's commitment to inclusive excellence among its administrators, faculty, staff, and students. All hiring practices will support the University's policy that prohibits discrimination on the basis of race, color, religion, sex, age, national origin, sexual orientation, gender identity or expression, disability, veteran status, or marital status.

Faculty and Staff: There are extraordinary circumstances when it is appropriate for the search process and advertising to be waived. Exceptions to advertising are case specific and will typically be the result of insufficient recruiting time, settlement of employee/institutional transfer complaints or needs, or to comply with the intent of the employment policy. Requests for exceptions will be submitted in writing (*see USNH Policy Manual, USY V.C.3.5.3*).

As noted in the last two faculty searches we fully complied with the University policies to recruit a diverse faculty.

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

The Program actively works with the Graduate School regarding recruitment and retention, for outreach to minority populations. The recruiting strategies center around membership within several different consortiums/programs designed to increase minority enrollment in graduate

education and visits to various institutions. To increase the recruiting for diversity each year the UNH Graduate School visits and works with various institutions and attends conferences. regarding recruitment and retention, for outreach to minority populations to increase minority enrollment in graduate education and visits to various institutions

The Graduate School purchases lists of students who completed the GRE to seek out candidates from the entire country for UNH graduate programs. More specifically, recruitment fairs are attended by Graduate School staff, UNH faculty and current graduate students throughout the year. The McNair Annual Conference and visits to other institutions with high numbers of diversity to encourage students, not yet attending UNH, to be part of the UNH community as a graduate student.

The UNH Graduate School engages in numerous activities designed to promote graduate education to UNH minority undergraduates. These activities include funding visits for top-ranked students to explore the graduate programs at UNH. There is a joint program with the Office of Multicultural Student Affairs, the UNH McNair Scholars Program. These meetings allow for UNH minority undergraduates to gain information about graduate education (including “*how-to’s*” on applying and increasing chances of admission). However, with all that is being done, the diversity is minimal within our student population, resulting from financial and staff cut-backs.

It is important to note that if the University is having trouble recruiting a greater racially diverse population overall, it is unlikely the MPH program can exceed the overall university diversity recruitment. Since the majority of MPH students come from a one-hour radius of Manchester our recruitment efforts have been largely local. We rely on the Graduate School’s outreach efforts to reach beyond NH and even New England. The Graduate School has suffered cuts in their recruitment efforts with the previously discussed budget allocations from the State, however they still serve as our best way to reach potential students outside of our catchment area. This year they have hired a Graduate Assistant to work more closely with our own diverse undergraduates to increase their interest in staying at UNH to finish an advanced degree.

The plan for the Graduate Assistant, which should benefit the MPH program include:

- Coordinate Graduate community and diversity-related events, including:
 - Dean’s Lunches/Dinners with various groups, including Graduate Fellowship recipients, DYF, international students
- Coordinate underrepresented graduate student advisory committee
- Coordinate annual maintenance of relationships with underrepresented alumni
- Promote various Grad School and UNH activities to underrepresented graduate student body, e.g., Graduate Student Senate events, etc.
- Assist the Assistant Dean and Operations Coordinator with underrepresented student recruiting efforts (publicize Graduate Fellowships program, coordinate campus visits, outreach to groups such as UNH undergraduates, IRT and McNair)
- Assist with data analysis on retention and recruitment-based trends and factors
- Assist with coordinating events related to Health & Wellness
- Assist with investigating the potential for developing a “Community of Scholars program” (in collaboration with other offices, e.g., VP for Community and Equity)

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

We are a small program that attracts students from a primarily white catchment area. We did have a period where we recruited a more diverse population but most of these students were refugees and that population increases and decreases with the State's refugee plan. As noted since most of our students come from a one-hour radius from Manchester, NH, we do not spend our limited resources on recruiting efforts outside of NH/New England. We rely on the Graduate School to reach beyond those borders.

We may never reach goals for racial diversity that other larger schools are able to reach, however we can, and do, embrace diversity.

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.

The curriculum integrates cultural competence in much of the coursework. Courses include content that develops knowledge, skills and beliefs to increase students' abilities to interact with people of different cultures, and to ensure the needs of the entire population are met. See syllabi in ERF 2.1, Degree Offerings/Syllabi. Specifically, the syllabi for PHP 900 (Intro to PH Systems), PHP 904 (Social and Behavioral Health) and PHP 936 (Global Health).

We also strive to ensure that those accepted into the program can succeed and thrive in the rigors of graduate work. In the past three years, 100% of our students of color have graduated within the six years allotted by the Graduate School, with the average completion time taking three years.

Finally, as noted in table 1.8.1, our numbers of male students have increased in recent years which as noted by student admission records.

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

The diversity plans and policies that are implemented for faculty, staff and student recruitment and retention are developed by the University. It is the expectation that all advertising, recruiting and hiring processes will employ inclusive practices that advance the University's commitment to inclusive excellence among its administrators, faculty, staff, and students. The University of New Hampshire is an Equal Opportunity/Equal Access/Affirmative Action institution. The University seeks excellence through diversity among its administrators, faculty, staff, and students. The university prohibits discrimination on the basis of race, color, religion, sex, age, national origin, sexual orientation, gender identity or expression, disability, veteran status, or marital status. Application by members of all underrepresented groups is encouraged.

To support the diverse population at UNH, according to the UNH policy on diversity, *“the values of diversity, inclusion and equity are inextricably linked to our mission of teaching and research excellence, and we embrace these values as being critical to development, learning, and success. We expect nothing less than an accessible, multicultural community in which civility and respect are fostered, and discrimination and harassment are not tolerated.”*
<http://www.unh.edu/ced>

The plan for recruitment to increase the diversity within the graduate programs is reflective of the financial, faculty and staff resources that are part of the UNH Graduate School. Faculty and staff are sent to attend as many recruiting opportunities as can be afforded, as well as the continual collaboration with the Office for Multicultural Affairs, and the McNair Program. Additionally, top ranked students are invited to campus at the expense of the UNH Graduate School.

The MPH program follows the diversity plans of the University of New Hampshire. Given the nature of Public Health, we value a curriculum that focuses on health equity and the strives to reduce health disparity. Given that, when classes were designed this was the emphasis on the curriculum.

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.

The plans and policies around diversity are monitored by the University, the Graduate School and the Program.

The University, with the Graduate School have policies and plans to increase student and faculty/staff recruitment and retention. As stated, graduate student recruitment was scaled back by the Graduate School in part due to financial cuts from the State. Decisions moving forward will be made by the Graduate School, and are reviewed as financial resources increase or decrease.

The program continues to monitor applications and admissions of students. We attempt to provide an inclusive environment and ensure that our graduates are prepared to work in a multicultural environment.

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.

Template 1.8.1. Summary Data for Faculty, Students and/or Staff						
Category/Definition	Method of Collection	Data Source	Target	Year 1 2014- 2015	Year 2 2015- 2016	Year 3 2016- 2017
Faculty (TT)- gender (women)	Self-report	Department records	50%	40%	33%	44%
Faculty (Adjunct)- gender	Self-report	Departmental records	50%	57%	50%	38%
Staff- gender (female)	Self-report	Departmental records	50%	100% ¹	100% ¹	100%
Students – African American	Self-report	Application	1.5%	1%	0%	0%
Students - Hispanic	Self-report	Application	3%	.3%	0%	.6%
Student – Gender (male)	Self-report	Application	25%	16%	.6%	29%

¹ We have 2 staff persons with the department and additional staff who work for the University/Graduate School but not within our hiring parameter. It is difficult to have a hiring plan that encompasses diversity. Our goal is to hire the best possible candidate and have been pleased to be able to have several working single mothers fill these positions, however we do not recruit to that end. In 2014-2015 and 2015-2016 there was only one staff member in HMP.

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.

Strengths: As a department, we believe an important goal has been to increase the gender balance among our faculty which we feel we have made significant progress on. Given we only have two staff members, increasing any diversity among the staff is challenging.

Finally, while we are limited in the recruitment of a racially diverse student body we strive to ensure that we retain students of color (see 1.8.b.) and that we offer a curriculum that enhances cultural competency.

Challenges: UNH continues to strive to enroll a diverse student population and while we objectively conclude that this criterion is met, it is recognized that the Program has a low number of minority students. New Hampshire has one of the lowest percentages of minority populations in the United States. Given the lack of diversity in the New Hampshire's population, achieving a diverse student population is challenging. The Program will continue to work with the Graduate School to strive to improve the diversity of the student population.

Plans: We plan to grow the program and with that expect that our numbers of diverse (racially and in other areas) will also increase.

This criterion is met

Criterion 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. Non-degree programs, such as certificates or continuing education, should not be included in the matrix. See CEPH Data Template 2.1.

The UNH MPH Program does not offer specialty areas, in accordance with the previous recommendations from CEPH. The three tracks originally part of the MPH Program, (environmental health, nursing, and occupational health), were eliminated based on recommendations from CEPH and subsequent discussions with HMP faculty, and the Program became a generalist program providing professional training.

The MPH Program only confers the Master of Public Health degree.

Table 2.1.1. Instructional Matrix – Degrees & Specializations		
	Academic	Professional
Master's Degrees		
Specialization/Concentration/Focus Area		Degree*
	N/A	MPH - generalist

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 UNH Graduate Catalogue (<https://www.unh.edu/grad-catalog/choosecatalog.cfm>) provides information about the University and information that is specific to the MPH Program, which can also be found in the MPH and PHC Student Handbook. The Handbook outlines the MPH policies, procedures, curriculum, academic standards and expectations, and the Public Health Certificate Program. The MPH and PHC Student Handbook is available online at: http://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/mph_handbook_2016-2017.pdf and will be on-site.

This information is also available through the UNH HMP website that describes the MPH Program at: <http://www.chhs.unh.edu/hmp/master-public-health-mph>.

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.

The 48 credit MPH Program offers a generalist degree that reflects the Program's mission of developing knowledgeable and professionally educated people so that they may enhance the public health infrastructure and the health of the populations. The curriculum is based upon the core public health functions and the eight public health competency domains identified by the Council on Linkages between Academia and Public Health. The MPH Program is included in the UNH Graduate Catalog and is outlined, in detail, in the MPH and PHC Student Handbook, which is available in print and online, and through published materials (e.g., pamphlets), information is made available to individuals inquiring about UNH's MPH Program. The MPH website provides an overview of the Program, the curricula, the expectations, and the faculty.

This criterion is met.

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.

The MPH Program is a 48-credit curriculum comprised of eleven required courses and five electives. Consistent with guidelines from the UNH Graduate School, all courses carry three credits and consist of four hours of classroom time per class session for eight week classes, and three hours of classroom time for sixteen week classes. Teaching is, didactic and experiential/active learning with the split depending on the course.

Students have the option to complete the program in two years; however, Graduate School guidelines permit up to six years. Students average three years to complete the program, however most students aim to finish in two academic years. Students will extend their matriculation due to life issues and financial concerns. As noted previously, our students are generally full-time working professionals and have competing demands placed on their time, and limited financial assistance is available to assist with the tuition costs. In recognition of this trend, the MPH Program Committee approved a suggested three-year model.

Not following a cohort curriculum model presents challenges to the administration of the Program, for example, in scheduling of classes, tracking students, and budget development, however most student do attempt to follow the suggested sequence for classes so there have been a decrease in issues from the last reaccreditation period.

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 MPH Program offers an integrated, generalist MPH Program curriculum consisting of 11 required courses and 5 elective courses, for a total of 48 credits. Typically, students complete their required courses during the academic year and most of their electives in the summer session. In their final semester, MPH students enroll in the Field Study course, complete any remaining electives, and finish the Program by participating in the Integrating Seminar.

Table 2.2.b.a. Matrix of Required Courses

Course Number	Course Title	Credits
PHP 900	Health Care Systems	3
PHP 901	Epidemiology	3
PHP 902	Environmental Health	3
PHP 903	Biostatistics	3
PHP 904	Social and Behavioral Health	3
PHP 905	Public Health Administration	3
PHP 907	Public Health Policy	3
PHP 908	Public Health Ethics	3
PHP 922	Public Health Economics	3
PHP 990	Field Study	3
PHP 998	Integrating Seminar	3
	Eleven required courses	33 credits in total
	Five elective courses @ 3 credits each	15 credits in total
	16 total classes	48 credits

A variety of electives are offered through the MPH program and are rotated each year. When the program was larger we offered 4-5 electives each summer and 2-3 during the academic year. In the last few years we have offered approximately 4-5 total throughout the year. Students can choose from the electives offered through the program, or can go to other courses offered in the University. If the student chooses a class outside of the program, permissions is required by the MPH Director or Coordinator and a petition must be completed for the Graduate School. There are a set number of classes that we routinely approve, (for example: Budget and Financing of Non-Profit Organizations and Non-Profit Administration, both through the Master of Public Administration Program.)

The following table shows the electives offered in the last three years and projected for this year. Syllabi can be found in ERF, 2.1, degree offerings/syllabi.

	2015-2016	2016-2017	2017-2018*
PHP 912 Public Health Law	Spring	Spring	Spring*
PHP 926 Evaluation in Public Health	Summer	Summer	Summer*
PHP 934 Work Environment Policy and Health of Workers	Summer	Summer-canceled	
PHP 936 Global Health		Fall	
PHP 938 Health Education and Promotion		Summer (canceled due to low enrollment)	Summer*
PHP 940 Health and Built Environment		Spring	
PHP 964: Applied Epidemiology	Summer	Summer - canceled	Summer*
PHP 985A Special Topics: GIS in Public Health			Fall
PHP 985A: Special Topics: Public Health and Nutrition	Fall		

*expected

2.2.c. Information about the number of MPH degrees awarded for less than 42 semester credit units, or equivalent, over each of the last three years. A summary reason should be included.

The MPH Program, since its inception, has consisted of a 48-credit requirement. If a student has completed coursework that is deemed to have satisfied a requirement for the program the MPH course is waived and the student will choose a replacement course. Every student graduates with 48 credits.

2.2.d. Assessment of the extent to which this criterion is met.

Strengths: The MPH Program exceeds the current CEPH accreditation requirements for the minimum number of required credits (42 semester credit units), as the UNH MPH Program is a 48-credit program.

Challenges: The last two years have seen some challenges with elective courses. Low numbers of students coupled with students taking longer than two years to complete the program mean that several of our planned electives have needed to be canceled due to low enrollment. We have offered fewer with the attempt to fill the classes that are offered.

Plan: The immediate plan has been to work with students to offer electives that meet the needs and interests of the students most likely to take an elective in a given semester. We are also

working with each student to be sure their elective needs are met. The greater plan is to increase the numbers of students in the program.

This criterion is met.

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.

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 2.3.1 Required Courses Addressing Public Health Core Knowledge Areas for MPH Degree		
Core Knowledge Area	Course Number & Title	Credits
Biostatistics	PHP 903: Biostatistics	3
Epidemiology	PHP 901: Epidemiology	3
Environmental Health Sciences	PHP 902: Environmental health	3
Social & Behavioral Sciences	PHP 904: Social and Behavioral Health	3
Health Services Administration	PHP 905: Public Health Administration	3

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.

The UNH MPH Program focuses on preparing students for careers as practitioners in public health by providing students with courses that explore *what is known* about public health conditions *and what is done* to assure that the necessary conditions for good health are met.

Through courses in biostatistics, epidemiology, environmental health sciences, health services administration, and social and behavioral sciences, along with other coursework in public health ethics, law, and policy, students learn the *10 Essential Services of Public Health* that lead them to understand the public health foundation of assessment, policy development, and assurance.

The MPH program places a high priority on having the students learn these principles and practices through group projects, case studies, guest lectures, field placements, and a capstone project. We seek to have these experiences and materials reflect topical issues relevant to training practitioners, and survey students, alumni, faculty members, advisory board members, and the MPH Work Group in order to remain current in our approaches and content.

The Program has carefully developed the curriculum to reflect the core public health functions and the eight public health competency domains promulgated by Council on Linkages between Academia and Public Health. Through matriculation in the required courses, a variety of electives, and the completion of two experiential courses (i.e., the Field Study, Integrating Seminar), the students graduate from the MPH Program with a strong foundation of public health knowledge, research, and practice. Objective evaluations made by placement mentors have been positive and supportive.

The criterion is met.

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:

Background

Each student must complete a Field Study (PHP 990) and the Integrating Seminar (PHP 998). These are normally taken during the last semester, though in specific circumstances students may complete one or two classes following these classes, with permission.

Field Study students develop a 5- to 10-page Statement of Work that outlines a project and demonstrates how the project relates to the principles of public health. In addition, a contract between the student and the placement site is written, detailing the project and expectations. Both documents are reviewed by the course instructor to ensure that projects are rigorous, they address a public health issue, and they provide an opportunity for the students to apply the knowledge and skills learned during the Program.

The following are requirements for the Field Study:

- A minimum of 100 hours is required; however, students generally spend up to 120 hours working on projects either on-site or off-site by choice for additional experience;
- Statement of a public health issue/problem;
- A contract with the placement site that outlines expectations;
- Annotated bibliography of the public health issue/problem;
- Identification of boundary expanding stakeholders in the issue;
- A written project/product developed for the organization, a public health policy analysis, or a case study that addresses that issue;
- A journal as to the student's reflections on the process of discovery through the Field Study;
- A poster summarizing the project and presented at the New Hampshire Public Association's Annual Membership Meeting; and
- Presentation to an external reviewer of the poster reflecting the students' project, program, policy analysis, or case study.

Selection of sites

Students have their first conversation about the field study experience at orientation. The purpose of this discussion is to ensure that students understand what the field study is and how sites and projects are selected. A meeting is held in October with students who are eligible to complete field student in the spring semester (generally in their second year) with the course instructor and the Director/Coordinator of the Program. During the meeting the student is given an opportunity to develop his or her own placement site and project by providing students with opportunities

shared and strategies on how to secure a project of interest. Stakeholders in the region will send opportunities to the MPH program for students to consider. Students are asked to secure a site with a signed contract by January 1. Placement sites are reviewed by the MPH Program Director and the Field Study instructor.

Methods for approving preceptors and preceptor qualifications

Preceptors are identified through several sources: 1) past work with UNH and MPH students; 2) availability of projects for students; 3) respect in the field of public health; and 4) student identification of potential preceptor and placement sites.

Students complete a Statement of Work that outlines the project, its relevance to public health, and the organization and the preceptor, and the specifics of the project. The Statement of Work is reviewed and approved by the Field Study instructor. The placement site is described in the Statement of Work, as is the preceptor.

One of the hallmarks of the UNH MPH Program is the small size of the Program and the personalized attention that is provided to students. In this regard, the students work closely with the Field Study instructor when the placements are being arranged to ensure that the arrangements will be productive and beneficial to the student and the specific agencies.

Most field studies take place in the region and the preceptor or the organization is known to the MPH faculty, due to the small size of the public health industry in this area.

Progress is monitored by the instructor during one-hour seminar sessions and one-on-one contact with students and preceptors. At the conclusion of the field study, the preceptor completes student a student evaluation and the student completes an evaluation of field study experience, including the preceptor and the placement site.

Should the need arise, the instructor will work with both the student and the placement site to resolve any issues that may not be in keeping with the intent of the field placement. We have found that using a Field Study Contract helps to clearly elucidate the scope of the work and the expectations. The preceptor, the student, and the course instructor sign the contract before a student undertakes work at a placement site.

Opportunities for orientation and support for preceptors

There are no formal orientations for preceptors, but there the field study handbook outlines the responsibilities and rights of both the students and the preceptor. Many of the preceptors are repeat sites so they are aware of the requirements. The course instructor is available to meet with preceptors and will assist the student with necessary communications.

Approaches for faculty supervision

The students work closely with the course instructor. While completing this course, students participate in regularly scheduled seminars so that their work may be supervised and any issues

addressed immediately. Students and faculty are also in touch, frequently, by email, through Canvas, and individual meetings, as necessary.

Means of evaluating practice placement sites

Students complete an evaluation form for the placement sites and mentors complete an evaluation form on the students who worked at the sites. These evaluations are submitted to the course instructor. The Field Study instructor is in contact with each mentor to review the student's work and the mentor completes a formal evaluation of the student's performance. Final grades include the evaluation from mentors. ERF 2.4, Practical Skills.

Criteria for waiving the experience

The public health field placement experience is a required course and is not waived for any student for any reason.

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

Table 2.4.b. Field Experience Projects, 2016 and 2017

Year	Agency and Location	Preceptor	Specialty Area/Project
2016	Town of Westford Health Department, Westford MA	Sandy Collins, R.N., Health Director	<i>Developing an educational library of public health information for residents and local business to keep them informed and empowered on by-laws and local regulations</i>
2016	Occupational Health Surveillance Program, Institute on Disability, UNH and <i>Environmental Public Health Tracking</i> , Division of Public Health Services, NH DHHS	Karla Armenti, Principal Investigator (OHSP) Kathleen Bush, Program Manager (EPHT)	<i>Workplace Best Practices for Tickborne Illness Prevention</i>
2016	Department of Public Health and Community Services-Nashua, NH	Beverly Doolan, Program Coordinator/Grants manager	<i>Needle Disposal Community Guide</i>
2016	NH Institute on Disability, UNH	Kimberly Phillips, Project Director, Co-Chair of Equity Task Force	<i>NH Comprehensive Cancer Collaboration White Paper: A Project Supervised by the NH Institute of Disability</i>
2016	Northeastern University, Boston, Massachusetts	Meredith Scannell, MPH, RN, NP, PhD(c)	<i>Factors that May Influence HIV Medication Adherence in Sexually Abused Women</i>
2016	NH Dept. of Agriculture, Markets, and Food: Division of Animal Industry	Steve Crawford, DVM; NH State Veterinarian and Deputy Commissioner of the Division of Animal Industry	<i>Importation of dogs and cats into NH: A zoonotic disease risk assessment of pet rescue activity</i>
2016	Prevention Innovations Research Center, UNH	Sharyn J. Potter, Ph.D., M.P.H. and Jane Stapleton, M.A.- Co-Directors of Prevention Innovations Research Center	<i>Advocating for Effective Policies and Evidence-Based Programs to Prevent and Address Sexual and Intimate Partner Violence at Institutions of Higher Education</i>

2016	National Committee on Vital Statistics Subcommittee on Population Health	Gib Parrish, MD, Consultant to National Committee on Vital Statistics Subcommittee on Population Health, US DHHS	<i>Measuring Community Wellbeing and its Determinants</i>
2016	UNH Cooperative Extension, Durham, NH	Debbie Luppold, Extension Professor/Specialist: Food and Nutrition, RD, LD	<i>Improving Nutrition and Physical Activity Environment in Childcare</i>
2016	NH Occupational Health Surveillance Program/WIC Breastfeeding/Nutrition Services Section, Division of Public Health Services	Karla Armenti, MS, ScD, Principal Investigator/Program Manager; Lissa Sirois, RD, IBCLC WIC Breastfeeding Coordinator	<i>Breastfeeding and Work Survey Project</i>
2017	NH Department of Health and Human Services	Zachary McCormic, MPH	Shiga Toxin-producing Escherichia Coli Eight Year Analysis
2017	Manchester Health Department	Philip Alexakos, REHS, MPH	City of Manchester Emergency Heat Response Plan
2017	University of New Hampshire Institute for Health Policy and Practice	David Laflamme, PhD, MPH, State Maternal and Child Health Epidemiologist	Developing a Public Newborn Screening Timeliness Report for the New Hampshire Newborn Screening Program
2017	NH Occupational Health Surveillance Program, University of New Hampshire	Karla Armenti, MS, ScD	Influenza Vaccination Rates of Healthcare Personnel and Workplace Influenza Policies
2017	NH Department of Health and Human Services	Elizabeth Daly, MPH & Abigail Mathewson, DVM, MPH	Evaluation of New Hampshire's Surveillance System for Reportable Infectious Diseases

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

Practice experience waivers are not allowed; therefore, no waivers have been requested nor granted.

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.

None.

2.4.e. Assessment of the extent to which this criterion is met.

Strengths: A well-developed and monitored set of policies and procedures have been enacted for MPH students to plan and complete a field experience, utilizing a variety of organizations and mentors. A faculty member monitors the students' projects from development to completion. Seminars are scheduled throughout the Field Placement to review work, monitor progress, and provide technical support to students. Placement mentors have praised the performance of our students.

Challenges: We have had few challenges in this area.

Plans: We have been managing our field studies well. There have been years where there have been many to manage (19 in 2015). In high-demand years it may be helpful to revisit a preceptor training, perhaps online, to ensure each preceptor's needs are met.

The criterion is met.

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

2.5.a. Identification of the culminating experience required for each professional public health degree program. If this is common across the program's professional degree programs, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each.

PHP 998, Integrating Seminar, is separate from the practice experience of PHP 990, Field Study. The latter is driven by the student's area of interest (e.g., maternal child health, environmental health, dental health, etc.). PHP 998 is a group-oriented course. There are typically multiple sites selected by the instructor to provide experiences for the cohort of students taking PHP 998. Groups generally have 3-4 students. The sites are selected prior to the beginning of the semester to provide the students with a running start on the project.

The instructor meets with the agency preceptor prior to the class to make sure there is a common understanding of the project's complexities and expectations. The project is described in a one-page brief in terms of the organization, preceptor, and scope of the assignment.

Students have an opportunity to indicate a preference regarding which field project they would like to participate; with their skills and knowledge considered for the greatest match to contribute to the project. Each member of the group brings different areas of expertise to the group's activities. One student might have experience with running focus groups, another with project evaluation, another with the topic of the project. The idea is to draw upon the strengths and competencies of the individuals. The instructor is the one who assigns individuals to the various groups. Materials for the project are shared with students in person and using the course site on Canvas. In 2017, there was only one site given the class only had 4 students.

Part of the first class of this course is devoted to a review of the courses already taken so that the students reflect on the attitudes, skills, and knowledge that they have accumulated over the course of the Program.

The groups work using a consultative model. Roles and responsibilities of a consultant in terms of defining the expectations, deciphering the culture of the organization, data confidentiality, how to present their findings, etc.

Each group is encouraged to develop their own method to communicate with each other. They can do this through a group site within the Canvas class site, but they have also used Google Docs, email and other sources. Most of the groups also meet informally outside of class. The class meets weekly to discuss progress, problems, and needs. This is the time where students might be reminded of parts of the curriculum that might be useful to utilize. The instructor(s) are available during the class as well as electronically to provide counsel to groups.

The deliverables vary based on the project's needs. At the end of the class, the students do an in-class PowerPoint presentation of their project with a discussion in terms of what went well and what could have been done better. The group does a final presentation to the agency and delivers a copy of the PowerPoint Presentation, a report, and any data that might be part of the project. The students are required to submit electronic versions of their PowerPoint Presentation as well as the report to the instructors for grading. The preceptor is given a form to complete to provide feedback on the performance of the group and a recommended grade. The instructor is the person who determines the grade for each group.

Course Objectives:

By the end of the course the student should have:

Knowledge:

- Demonstrated general knowledge of public health and public health organizations
- Demonstrated specific knowledge as applied to the area of concern
- Demonstrated the ability to learn and apply new information, as needed

Skills:

- Demonstrated an ability to apply analytical skills to a public health problem
- Demonstrated an ability to work collaboratively in a group to solve a public health problem
- Demonstrated an ability to work professionally with a public health organization as a consultant

Length of the Project

The project must be realistic to complete within an eight-week period. A list of projects and samples of the projects can be found in ERF 2.5 Culminating Experience.

2.5.b. Assessment of the extent to which this criterion is met.

Strengths: Similar to the Field Experience, students participate in a project that is a real issue/problem/project within a NH public health agency or organization. Students are assigned to projects, based on their background and interests, and students apply the tools, knowledge, and skills developed during enrollment in the MPH Program. A faculty member oversees the students' work and meets regularly with the students to review work, monitor progress, and provide support to students following a well-designed set of policies and procedures. Mentors have found the students to be above average in their performances.

Challenges: Depending on the Integrating Seminar project eight weeks can be a tight schedule. Faculty and sites work to make sure the workload is manageable and to date everyone has successfully completed the project.

Plans: We plan to continue to offer a high-quality capstone project, that are well managed by the faculty member so they workload is manageable and meaningful for the students and the site.

This criterion is met.

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 the 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).

- **Domain 1: Analytical Assessment Skills** (e.g., problem definition, interpretation and assessment of data and information, and implications of decision making)
- **Domain 2: Policy Development/Program Planning Skills** (e.g., collection, interpretation and assessment of information, and development and communication of policies, plans, and programs)
- **Domain 3: Communication Skills** (e.g., written and oral presentation of information and data, interactions with individuals, groups, and organizations, and respectful listening)
- **Domain 4: Cultural Competency Skills** (e.g., sensitive and effective interaction, and recognition and understanding of multicultural factors, issues, and preferences)
- **Domain 5: Community Dimensions of Practice Skills** (e.g., effective collaboration with community and public and private entities)
- **Domain 6: Basic Public Health Science Skills** (e.g., understanding history of public health, Ten Essential Services of Public Health and core public health functions)
- **Domain 7: Financial Planning and Management Skills** (e.g., budget assessment, process, and monitoring)
- **Domain 8: Leadership and Systems Thinking Skills** (e. g., development of ethical leadership, common culture/mission/vision, and performance standards)

Descriptions of the core competencies are outlined in the MPH and PHC Handbook on-line at: https://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/Graduate_Landing_Page/mph_handbook_2017-2018_7_28_17.pdf and located in the ERF 1.5, governance/handbooks.

The UNH MPH Program prepares students to address emerging public health problems and perform essential public health services by developing the curriculum around a core set of public health competencies that provide students with a solid foundation in general health principles and practices.

The domains developed by CLAPHP provide a broad understanding of the knowledge areas related to public health, which guide the curriculum of UNH's MPH Program. CLAPHP competencies were developed after extensive research and are generally recognized by the nation's leading public health agencies and organizations as a set of competencies necessary for the training of public health practitioners. We realize moving forward we will be using the CEPH 2016 criteria.

The table below (2.6.1) outlines the courses in the MPH Program and which competencies are covered or expected in each course. Each course is developed to address specific competencies and these are communicated in the learning objectives of the course. The courses use different models and perspectives, including case studies, guest lecturers who are leading public health practitioners, and the use of field placement experiences to provide a broad understanding of public health.

Each year, the curriculum is reviewed by the HMP faculty, MPH Advisory Council, and the MPH Program Committee to ensure that the curriculum is current, relevant and meeting the needs of public health practitioners.

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.

The degree offered is a general MPH. There are eight competencies with the MPH at UNH which are discussed at in detail in 2.6.a.

- **Analytical Assessment Skills**
- **Policy Development/Program Planning Skills**
- **Communication Skills**
- **Cultural Competency Skills**
- **Community Dimensions of Practice Skills**
- **Basic Public Health Science Skills**
- **Financial Planning and Management Skills**
- **Leadership and Systems Thinking Skills**

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.

Course	Domain 1: Analytical Assessment Skills	Domain 2: Policy Development /Program Planning Skills	Domain 3: Communi - cation Skills	Domain 4: Cultural Competency Skills	Domain 5: Community Dimensions of Practice Skills	Domain 6: Basic Public Health Science Skills	Domain 7: Financial Planning & Manage- ment Skills	Domain 8: Leadership & Systems Thinking Skills
PHP 900: Public Health Care Systems (required course)		R	R	R	P	P		P
PHP 901: Epidemiology (required)	P	R	R	R	P	P		P
PHP 902: Environmental Health (required)	P	P	P	P	P	P		
PHP 903: Biostatistics (required)	P				R	R		R
PHP 904: Social and Behavioral Health (required)	R	P	R	R	P	P	R	R
PHP 905: Public Health Administration (required)	P	R	R		P		P	R
PHP 907: Public Health Policy (required)	P	R	R	P	P	R		P

Course	Domain 1: Analytical Assessment Skills	Domain 2: Policy Development/ Program Planning Skills	Domain 3: Communi - cation Skills	Domain 4: Cultural Competency Skills	Domain 5: Community Dimensions of Practice Skills	Domain 6: Basic Public Health Science Skills	Domain 7: Financial Planning & Managem ent Skills	Domain 8: Leadership & Systems Thinking Skills
PHP 908: Public Health Ethics (required)	P	P	R	R	P		R	P
PHP 912: Public Health Law	P	P	P					P
PHP 914: Public Health Policy Analysis	P	P	P	R			P	R
PHP 920: Social Marketing	P		P	P				P
PHP 922: Public Health Economics (required)	P	P	P				P	
PHP 924: Community Health Assessment	P	P	P	P	P			P
PHP 926: Evaluation in Public Health	P	P	P	P	P	P	P	P
PHP 932: Disease Ecology	P	P	P		P	P		P
PHP 934: Work Environmental Policy		P	P	P	P	P		P
PHP 964: Applied Epidemiology	P	R	R		P	P		R

Course	Domain 1: Analytical Assessment Skills	Domain 2: Policy Development /Program Planning Skills	Domain 3: Communi - cation Skills	Domain 4: Cultural Competency Skills	Domain 5: Community Dimensions of Practice Skills	Domain 6: Basic Public Health Science Skills	Domain 7: Financial Planning & Manageme nt Skills	Domain 8: Leadership & Systems Thinking Skills
PHP 990: Field Study* (required)	P	P	P	P	P	P	P	P
PHP 998: Integrating Seminar* (required)	P	P	P	P	P	P	P	P

*Field Study and Integrating Seminar (capstone) experience vary by project. Given this, there will be a greater emphasis on some competencies than others depending on the project.

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.

Changes to the curricula are made as warranted. Of the required courses, names of the courses have not changed in this self-study period, however course content is updated and shifted as needed. Faculty members are expected to keep curricula current and faculty routinely change topics, assignments and other materials to be current.

As the average age of our students decreased and students entered the program with less professional experience, more emphasis was needed on communication skills and analytical thinking. Feedback received from the HMP Advisory Board, and the MPH Work Group this year reinforced that stakeholders and employers value these skills. Our students receive multiple opportunities to develop these skills in their coursework. To further support the needs identified from employers in the workforce identified by the MPH Work Group, we will continue addressing and revising the curriculum.

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

The UNH MPH Program originally created our competencies based on a modified version of the competencies developed by the Council on Linkages Between Academia and Public Health Practice, which attempts to join academe and the field of practice. Through the work with our students, alumni and stakeholders we have adjusted our curriculum to meet the needs of the public health workforce in New Hampshire and beyond. We feel that the competencies listed in table 2.6.c represents the skills identified as being valuable to the NH workforce and reflect the changing nature of the field of Public Health.

These courses and competencies are examined by the HMP faculty, the MPH Program Committee, the HMP Advisory board and the MPH work group (2017). Adjustments are made as needed. We plan to update our competencies using the CEPH 2016 criteria moving forward.

The competencies are made available to prospective and current students via the MPH Student Handbook at https://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/Graduate_Landing_Page/mpg_handbook_2017-2018_7_28_17.pdf and on the UNH MPH Program website: <http://chhs.unh.edu/hmp/master-public-health-mpg-0>

Competencies are also listed in the course syllabi. Examples can be found in ERF 2.1. Degree Offerings/Syllabi.

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 MPH Program originally began the self-evaluation process in 2014 under the direction of the former MPH Director, Barbara Arrington. After her untimely death, it took approximately a year to hire and regroup. In January of 2017, the MPH Work Group was established convening a group of external stakeholders from the state of New Hampshire, and University faculty and staff. The roster of Work Group members and findings can be found in ERF 1.5 Governance/Committees and Membership Lists.

This group was tasked with evaluating the MPH program to determine the strengths and challenges of the program, and to determine what changes should be made to ensure its growth and position in educating the Public Health workforce. The group utilized the CDC's "Public Health 3.0" and the Association of School and Programs of Public Health's "MPH of the Future," as well as surveys, interviews and focus groups to assess the program's content and delivery. Recommendations were made to the Dean of CHHS in June of 2017. It is important to note that the MPH Program has not yet performed a formal evaluation of syllabi during the self-study period, as documented in 1.8 (Diversity).

Simultaneously the HMP faculty met to discuss the current issues and needs of the program. They also revised the mission, values and goals from the work that had been started in the 2014 academic year (ERF, 1.5 Governance/committees/HMP.)

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.

Strengths: Faculty in the program have adjusted the content of the curriculum to better address the needs of the student body. We believe that our students receive multiple opportunities to develop these competencies in their coursework. The meetings with stakeholders in the MPH work group and the HMP Advisory group reinforced our concentration on skills such as communication and analytical skills. This also highlighted areas where we can develop this further.

Challenges: Despite our faculty addressing these issues within each of their classes, we recognize that we have been more reactive than proactive in our overall process. Admission numbers had started to decline when former the MPH Director Barbara Arrington had first convened a strategic planning group in 2014. Her untimely death slowed our process even further. An aggressive agenda was put in place last year, recognizing the need to help grow the program and, as mentioned earlier, using Public Health 3.0, and other resources, to help direct our next path. In an ideal world, this would not have overlapped with a self-study year but circumstances were out of our control.

Plans: We plan to adopt the competencies outline in the CEPH 2016 criteria and further build on the skills that our stakeholders say are necessary in the workforce.

This criterion is partially met.

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.

A variety of strategies are used to monitor and evaluate students in achieving the expected competencies. UNH uses the traditional grading system of A-F, however to graduate, students must have a cumulative grade point average of 3.0 or higher. Students receiving grades below a B- in a graded course are considered to have failed and must retake the course, with the original failing grade, remaining on the student's record, despite the retaking of the course. Students receiving failing grades in six or more credits either in two courses or in one course taken twice will be recommended by the MPH Program Director to The Graduate School for dismissal. Students' grades are monitored by The Graduate School and the MPH Program Director.

The following pedagogy is used in classes:

Classroom observation/Lab work. Courses combine theory with application and some courses include lab sessions whereby students may immediately apply new materials. Immediate feedback may be provided by peers and course instructors.

Project work. Project work is common for the MPH students and allows for students to develop skills through team projects, individual projects, research papers, oral presentations and poster presentations. Students are expected to synthesize the theories from courses and apply skills to complete projects.

Examinations. Traditional assessment takes place through course examination including quizzes, mid-terms, and final exams. Progress is monitored and students are offered support and counseling, should they need it.

Field experience. The field experience is an opportunity for students to apply the knowledge and skills acquired in the curriculum to a real-world setting. Through oversight from the course instructor and the mentor, students' progress is assessed.

Integrating seminar. The integrating seminar is an opportunity to perform as a team member of a consulting group in a specific work setting. Through oversight from the integrating seminar instructor and the mentor, students' progress is assessed.

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 2.7.1. Students in X Degree, By Cohorts Entering Between 2011-2012 and 2016-2017							
	Cohort of Students	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017
2011-2012	# Students entered	21					
	# Students withdrew, dropped, etc.	1					
	# Students graduated	0					
	Cumulative graduation rate	0.0%					
2012-2013	# Students continuing at beginning of this school year	20	19				
	# Students withdrew, dropped, etc.	0	0				
	# Students graduated	11	1				
	Cumulative graduation rate	52.3%	0.05%				
2013-2014	# Students continuing at beginning of this school year	9	18	13			
	# Students withdrew, dropped, etc.	1	1	1			
	# Students graduated	5	8	0			
	Cumulative graduation rate	76.1%	47.3%	0.00%			
2014-2015	# Students continuing at beginning of this school year	3	9	12	14		

	# Students withdrew, dropped, etc.	0	1	3	3		
	# Students graduated	2	6	8	0		
	Cumulative graduation rate	76.0%	78.9%	61.5%	0.0%		
2015-2016	# Students continuing at beginning of this school year	1	2	1	11	7	
	# Students withdrew, dropped, etc.	0	0	0	1	0	
	# Students graduated	1	0	1	8	0	
	Cumulative graduation rate	90.0%	78.9%	69.2%	57.1%	0.0%	
2016-2017	# Students continuing at beginning of this school year	0	2	0	2	7	6
	# Students withdrew, dropped, etc.	0	0	0	0	0	0
	# Students graduated	0	1	0	2	2	0
	Cumulative graduation rate	90.0%	84.2%	69.2%	71.4%	28.6%	0.0%

Degree completion rate. Degree completion rate is an indicator of students satisfactorily completing degree requirements, course requirements, project work, field experience, and integrating capstone projects to qualify to graduate from the Program. Our Program is designed for part-time matriculation and, ideally, students complete the Program in two years. As noted, however, students may, per the policy of UNH's Graduate School, and do, take up to 6 years to complete the Program. Each year several students withdraw from the Program, due to personal and professional reasons like a change in location or change in employment, or a change in financial status. In 2013-2014, we had a larger than normal withdrawal rate (4 students). One had withdrawn a year earlier, applied for readmission but withdrew before the third week of classes. We believe these were personal reasons though the student did not disclose. Another student was diagnosed with a health condition that she felt she needed to move home to be treated. The third withdrew before attending any classes, and the last withdrew because she did not feel she could handle the academic load after earning low grades following a semester of more quantitative classes. We were also concerned about the withdrawal rate in 2014-2015 (4 students). Two left due to low grades/difficulty with curriculum. One of these students struggled primarily due to language. We attempted to connect her with assistance both for additional English support and the writing center, however she chose to withdraw. Another student left before taking any classes, not giving a reason. The last left because he was not satisfied with the program, specifically having issues with the Program Director at the time.

Template 2.7.2 Destination of Graduates by Employment Type in 2017	2013 - 2014	2014 - 2015	2015 - 2016
Employed	16	15	8
Continuing education/training (not employed)	0	2	0
Actively seeking employment	0	0	1
Not seeking employment (not employed and not continuing education/training, by choice)	1	0	0
Unknown	2	1	0
Total	19	18	9

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.

This program was designed to meet the needs of the working professions. Many, if not most of our students entered the program working full-time in health care or public health and most remained in their positions upon completion of the program, many receiving promotions or later moving to other jobs. Over the past few years the student body has entered younger and with less experience. It has been more challenging for students to obtain jobs. Those students who find jobs in health care or public health while in the program, or who take on additional internships have done well finding employment upon completion but some have struggled. Most are employed within one year out but we would like to see that window reduced to 6 months out (see objective in outcomes measure table 1.2.c.) We surveyed our students in 2017 both as part of the work group and 76% indicate they are working within the field of public health. Further, through conversations with alumni at NH public health events, and through email correspondence, we know when alums are between jobs, pursuing educational opportunities, and when they are working outside of what they consider to be public health (but is often still health care related.) Results to the survey are in ERF 2.7 Assessment Procedures.

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.

To our knowledge, no Program graduate has taken this examination.

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.

In 2017, a survey was sent to stakeholders and employers, distributed via email. Key informant interviews were also held. Finally, the HMP advisory board and the MPH work group both include employers of MPH graduates.

Thirty-two percent of the respondents of the stakeholder survey hired a UNH MPH graduate in the past 5 years. This has been a noted issue on our end as historically our students came into our program already working in the field of public health, as the age of our students have decreased, more are seeking jobs upon graduation but key stakeholders are not often hiring. Our survey did not ask how many UNH MPH grads they employ overall.

100% noted that MPH students were either very well prepared for the jobs (38%) or satisfactorily prepared (62%).

Of the skills stakeholders valued:

- 45% indicated leadership skills
- 18% indicated cultural competence
- 14% indicated analytic skills
- 59% indicated communication skills

Fifty-seven percent indicated that they see data and analysis as an “emerging trend”

In the key informant interviews, several expressed the importance of core public health skills (epidemiology and the social determinants of health); emerging importance of additional skills such as economics, public health law, deep knowledge of the insurance and payment structures (i.e. the business of health care), however the questions did not ask if our students were able to execute those competencies. They were asked how they viewed MPH Graduates and many reported that they were “outstanding” and “phenomenal”. Others described Program graduates using words such as “good”, “competent”, or “average”. The strongest students were described as talented, dedicated, and ambitious.

The alumni survey of 2017 noted that students highly valued the analytical assessment skills (68%) and the policy development/planning skills (62%) that they learned in the program. Communications skills and leadership/systems thinking also were considered most valuable (57%, 52% respectively). Ninety percent (90%) indicated that the UNH MPH prepared them for their jobs.

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.

Strengths: A strength of the program continues to be the hands-on nature of the administration. Most applicants meet with the Director/Coordinator before applying so they are very aware of the challenges of graduate work. It is unfortunate that as a small, part-time program we are not able to offer more financial assistance. Also, we are in a time in the state where fewer and fewer employers are offering tuition assistance. While students still find the program to be a good value, compared to others, there are a few who do not complete due to financial reasons. We also

have students change jobs, move away, and/or have a change in personal situations. Overall, the majority of our students stay with our program through graduation.

Challenges: This program has experienced a fair amount of change in recent years. Beyond the well documented changes in leadership, the nature of our student body also shifted. This degree was designed to offer graduate education to professionals who already had experience in the field. Likewise, a few years ago, most of our students were not entering the job market after graduation as they were typically already employed. Over the past few years, more students have joined the program with less professional experience. Many MPH students have chosen to continue with their jobs outside of the field of Public Health to financially support their education. For some students, this decision has meant that they are entering the field with a degree but little active experience. Students expressed concern that they either weren't qualified for jobs, or that the jobs they were being offered were not adequate to pay their loans and costs of living. A few students have not found jobs in the field, or were faced with choices to move to other parts of the country with a more robust public health network. This was deeply troubling to us. Immediately, we began to more actively assist students with career counseling. Students with little experience were encouraged to take on internships. One student who entered in 2015 took this to heart and applied for non-paid internships with the State. A short time later, he was offered a part-time job, and then a full-time job, all before graduating in May of 2017. As we have been evaluating the MPH program this year, we learned that the State often will pay someone with an MPH the same as someone with a bachelor's degree. This was disheartening, and conversations about "value-added" were discussed at length during our Work Group meetings. Unfortunately, the Public Health structure in NH is limited due to the governance and funding from the State. Obtaining new positions and opportunities for advancement in public health for MPH graduates has been challenging as a result.

Plans: We will continue to advise students to pursue internships if they are not working in the public health field while in school. If we shift our platform to a hybrid model, we also expect to expand our geographic reach. This should increase job opportunities outside of NH. In the meantime, we plan to sell our program better to stakeholders. When asked, only 47% of stakeholders said they would recommend our program, the rest all said they didn't know enough about the program. This was surprising but definitely something we can address.

This criterion is met.

2.8 Bachelor's Degrees in Public Health. If the program offers baccalaureate public health degrees, they shall include the following elements:

2.8.a. Identification of all bachelor's-level majors offered by the program. The instructional matrix in Criterion 2.1.a. may be referenced for this purpose.

Not applicable

2.8.b. Description of specific support and resources available in the program for the bachelor's degree programs.

Not applicable

2.8.c. Identification of required and elective public health courses for the bachelor's degree(s). Note: The program must demonstrate in Criterion 2.6.c that courses are connected to identified competencies (i.e., required and elective public health courses must be listed in the competency matrix in Criterion 2.6.d).

Not applicable

2.8.d. A description of program policies and procedures regarding the capstone experience.

Not applicable

2.8.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.

Not applicable

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

2.9.a. Identification of all academic degree programs, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

Not applicable

2.9.b. Identification of the means by which the program assures that students in academic curricula acquire a public health orientation. 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.

Not applicable

2.9.c. Identification of the culminating experience required for each academic degree program. If this is common across the program's academic degree programs, it need be described only once. If it varies by degree or specialty area, sufficient information must be provided to assess compliance by each.

Not applicable

2.9.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.

Not applicable

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

2.10.a. Identification of all doctoral programs offered by the program, by degree and area of specialization. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

Not applicable

2.10.b. Description of specific support and resources available to doctoral students including traineeships, mentorship opportunities, etc.

Not applicable

2.10.c. Data on student progression through each of the program's doctoral programs, to include the total number of students enrolled, number of students completing coursework and number of students in candidacy for each doctoral program. See CEPH Template 2.10.1.

Not applicable

2.10.d. Identification of specific coursework, for each degree, that is aimed at doctoral-level education.

Not applicable

2.10.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.

Not applicable

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

2.11.a. Identification of joint degree programs offered by the program. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

Not applicable

2.11.b. A list and description of how each joint degree program differs from the standard degree program. The program must explain the rationale for any credit-sharing or substitution as well as the process for validating that the joint degree curriculum is equivalent.

Not applicable

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.

Not applicable

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

2.12.a. Identification of all degree programs that are offered in a format other than regular, on-site course sessions spread over a standard term, including those offered in full or in part through distance education in which the instructor and student are separated in time or place or both. The instructional matrix in Criterion 2.1.a may be referenced for this purpose.

Not applicable

2.12.b. Description of the processes that the program uses to verify that the student who registers in a distance education course or degree is the same student who participates in and completes the course or degree and receives the academic credit.

Not applicable

2.12.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.

Not applicable

Criterion 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.

Required Documentation. The self-study document should include the following:

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

UNH is classified as a Carnegie university with higher research activity. The research office is led by Senior Vice Provost for Research, Jan Nisbet. There are specific policies regarding research at the University. The policies are listed at: <http://www.unh.edu/research/forms-policies>

Tenure-track faculty members are required to maintain scholarly activity. For tenure-track faculty three- eight of a faculty member's effort is to be devoted to research. Further, faculty can buy out of teaching responsibilities with grants/contracts. The University, College, and Department support research activities. In keeping with this support, the University gives a percent of the Indirect Costs of grants back to the Principal Investigator (PI). These accounts can be used by the PI for supporting her/his research activities. The University's Office of Sponsored Research provides support for grant writing endeavors.

Each tenure-track faculty member is reviewed annually in a letter by the Department Chair. This letter includes the three traditional areas of Instruction, Research/Scholarship, and Service. In addition to the letter from the Chair, there is a letter from the Dean who also makes evaluative comments regarding these three areas.

UNH views scholarship as part of the traditional promotion and tenure decision. There are Department, College, and University (Graduate School Dean and Provost) reviews of promotion and tenure decisions. In addition, faculty members undergo review every year. This includes a review of scholarship. One possible outcome of review is that the workload of a faculty member can be adjusted, e.g., a faculty member can be given additional teaching assignments if that faculty member is not sufficiently productive in research. Faculty members set their own research agendas which support the practice of public health.

In regard to the MPH Program, the mission statement, goals and faculty research objectives guide the activities of the faculty and the MPH Program, which was previously stated.

Notable Number of publications - The members of the MPH faculty are involved in publishing in both peer reviewed journals as well other publications for public health. The list of publications appears in Table 3.1.a. Listed are 31 articles listed in peer reviewed journals. In addition, there are eight other contributions including 1 book and book chapters, white papers, and reports, for a total of 39 publications. We did not list presentations.

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.

The faculty and students of the MPH program have forged many relationships with National and State organizations, and community-based organizations. Some examples include:

- Karla Armenti (adjunct) collaborates with the CDC on Occupational, safety and health issues.
- David Laflamme (research faculty/Core faculty), collaborates with the pregnancy risk and assessment monitoring system
- Semra Aytur, (Associate Professor/Core faculty) collaborates with NOAA on several projects, and the NH Endowment for Health
- Gib Parrish (adjunct) collaborates with Council of State and Territorial Epidemiologists (CDC), The National Center for Vital and Health Statistics CDC, and the National Center for Health Statistics
- Sharon McDonnell (adjunct) collaborates with John Snow International and the Centers for Disease Control and Prevention, as well as the Gobe Group and the Bill and Melinda Gates Foundation. She also serves on the Council of State and Territorial Epidemiologists for the CDC.

There are multiple research Institutes within the College of Health and Human Services and the faculty works with several in an informal manner – there are no formal contracts or arrangements with these Institutions. The UNH groups are noted below.

The **Institute for Health Policy and Practice** is under the direction of Jo Porter. Housed within the College of Health and Human Services, the mission of the Institute for Health Policy and Practice is to serve as the catalyst for the creation and application of knowledge to improve the health status of, and the healthcare within New Hampshire. The Institute accomplishes this mission with work in three domains: 1) applied health policy; 2) technical assistance and research; and 3) teaching and professional development. A listing of current projects may be found at: <http://www.nhhealthpolicyinstitute.unh.edu/projects.html>.

The **Institute on Disability** is a nationally recognized institute focusing on the disabled. It has multiple research and policy initiatives and has a staff of 23 individuals. The IOD joined the College of Health and Human Services, effective July 1, 2004. <http://www.iod.unh.edu/>

Faculty from the MPH program have collaborated from individuals from these institutes. More has been done in the past and we hope, after our transition activity will increase again.

Finally, though not research, faculty have worked with various State agencies and local health departments on assessment, implementation and evaluation when appropriate. Rosemary Caron sits on the Manchester Board of Health and shares her research skills when needed.

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 3.1.1: Research Activity of Tenure-track and Adjunct Faculty from 2014 to 2017									
Project Name	Principal Investigator & Concentration (for programs)	Funding Source	Funding Period Start/End	Amount Total Award	Amount 2014	Amount 2015	Amount 2016	Community-Based Y/N	Student Participation Y/N
New Hampshire Occupational Health Surveillance Program	Karla Armenti, MPH	CDC, National Institute for Occupational Safety and Health	July 2015 through June 2020	\$725,000 (\$145,000 per year)				N	Y
Reducing low birth weight and infant mortality	David Laflamme, MPH	Pregnancy Risk Assessment Monitoring System	unknown	unknown				Y	Y
Collaborative. <i>Collaborative Planning for Climate Change Adaptation: A Case Study in Great Bay National Estuarine Research Reserve</i>	Kirshen, P (P.I, UMass Boston) and Aytur, S. (UNH, Co-PI)	NOAA - National Estuarine Research Reserve System Science (NERRS)	2012-2015	\$655,963				Yes	Yes
<i>Integrated Analysis of the Value of Ecosystem Services in Coastal Climate Adaptation: Methodology and Collaborative Case Study of Hampton-Seabrook Estuary, New Hampshire</i>	Kirshen, P (P.I, UMass Boston) and Aytur, S (UNH, Co-PI)	NOAA - Coastal and Ocean Climate Applications (COCA).	2014-2017	\$294,394				Yes	Yes
<i>Risk Perception in Provision of Ecosystem Services and Water Quality.</i>	Aytur, S, (UNH), and Webster, DG (Dartmouth College) Co-(P.I.s)	National Socio-Environmental Synthesis Center (SESYNC)/NSF	2017-2019	\$120,000 (team science grant for big data synthesis, meetings, and				Yes	Yes

				computing infrastructure).					
<i>Aging in New Hampshire: Using Photovoice to engage the perspectives of communities of color and of language minorities.</i>	Adachi-Mejia, A (Dartmouth College) and Aytur, S (UNH, Co-PI).	NH Endowment for Health	2017-2018:	\$100,000				Yes	Yes
<i>Through the Lens of a Camera: Exploring the Meaning of Competitive Sport Participation Among Youth Athletes with Disabilities through Photovoice.</i>	Craig, P, and Aytur, S. (UNH, Co-PIs)	UNH College of Health and Human Services Research Affinity Group Award	2015-2017	\$5000				Yes	Yes
<i>Healthy People, Healthy Places: Improving Equitable Access to Active Recreation Opportunities in Vulnerable Communities.</i>	Barcelona R, Aytur, S, and Seaman, J. (UNH, Co-PIs)	UNH College of Health and Human Services Research Affinity Group Award	2016-2017	\$4,957				Yes	Yes
Totals									

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.

This shows the section of the CEPH Outcome Measures Template that discusses research, the full table can be found on page 21.

Outcome Measure	Target	2014-15	2015-16	2016-17
Students will benefit from exposure to current research, including faculty research, in and outside of the classroom (Criterion 3.1)	100% TT Faculty will publish at least one publication per year to stay current in field (may also service as PI investigator with external funding greater than \$100,000	Not Met (3/4)	Met (4/4)	Met (4/4)
	40% of courses will incorporate faculty research into course curriculum.	Met (45%)	Met (45%)	Met (55%)

As noted earlier we have a research goal drawn from our mission statement and have tracked objectives from this goal. The merit guidelines for the department of HMP is to have one peer reviewed publication, presentation, or to serve as a PI for external funding. We have adopted those measures as our guidelines for the first outcome. For the table, we noted publications from the faculty who teach in the MPH program, both primary and secondary. We did not include the publishing activity of HMP faculty who do not teach in the MPH program. Many of our adjunct faculty are very active researchers, however this is not a requirement for adjunct faculty at UNH.

We measure these objectives through counting peer reviewed and other published materials, as well as tracking the diversity and impact of the journals. We also feel that presentations are an important way to disseminate important public health research. We did not include presentations in this self-study.

These goals and objectives are outlined in the CEPH Outcome Measures Template, 1.2.c and discussed in greater detail in criterion 1.

3.1.e. A description of student involvement in research.

Since students are generally employed full-time, typically they are not formally involved in research projects. However, because students are very involved in the practice of public health, their field studies can take on more of a research focus. In some instances, students have completed projects with the goal of publications and presentations of research findings at professional conferences. Table 3.1.c demonstrates that most of the projects that faculty are involved with can, and often do, include student participation, when they are willing and able. For example, Rebecca Butcher '12 published "Creating safe neighborhoods for obesity prevention: Perceptions of Urban Youth" with Semra Aytur and current student Sara Rainer has worked on a continuing project with Professors Aytur and Bonica.

In the classroom context, there are a number of ways in which UNH MPH students may be involved in research while they matriculate at UNH. In particular, courses such as PHP 990 (Field Study) and PHP 998 (Integrating Seminar) require presentations to the community and faculty in the form of formal poster presentations or formal oral presentations.

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.

Strengths: The Program's research agenda is judged to be consistent with its stated research goal. Tenure-track faculty carry a base teaching load of four courses per year, and course releases are available for large funded research projects. The emphasis on instruction places some limits on the opportunity for research. Nonetheless, program faculty have made concerted efforts to implement and maintain an active research program. The research efforts of students are generally confined to research activities in course projects, independent studies and, during Field Experience projects.

Challenges: Given the size of the faculty and the nature of the research conducted, along with the teaching and service workload, this is not currently a priority. We could be more purposeful to reach out and work with local and state organizations, but given the size of the faculty and the nature of the research conducted, we do not have this as a priority currently.

Plan: To continue to offer students opportunities to participate in research and to present their research when possible.

This criterion is met.

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.

Required Documentation. The self-study document should include the following:

3.2.a. 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.

Service activities outside of the University are largely based on the faculty member's area of expertise, or with activities that benefit the local Public Health community. For example, many of the faculty are actively engaged with the New Hampshire Public Health Association, serving on committees, helping with workshops and even serving as President over the years.

We also provide service to the community via our students' field study projects which are presented at the annual NHPHA meeting.

Policies, procedures and practices that support service

It is an expectation that faculty will provide service to the academic and community, at large. In accordance with the policies of the College of Health and Human Services, tenure-track faculty members allocate one-eighth of their time to service. Faculty members in the College of Health and Human Services have traditionally done a great deal of community and public service as part of their academic responsibilities.

We entered a contract with the State of New Hampshire in the spring of 2016 for three years to cover the liability associated with our Integrated Seminar projects.

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

It is important to note, tenure-track faculty members are expected to complete service as part of their contract. Service consists of one-eighth of the faculty contract, and this time also includes service to the Department, College and University.

Given this requirement, our faculty go over and above this expectation and serve their community in many ways. The Promotion and Tenure handbook for the College of Health and Human Services can be found in the electronic resource file.

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.

The University expects faculty members to assume leadership positions in the institution and in the community; however, there are no performance measures or targets established for faculty to adhere to nor are there specific procedures in place to support faculty involvement in community service. Despite the lack of requirement or formal processes, the MPH faculty are engaged in a large number of varied community service activities, as outlined below.

Table 3.2.1. Faculty Service from 2014 to 2017				
Faculty member	Role	Organization	Activity or Project	Year(s)
Semra Aytur	Executive Board Member,	New Hampshire Comprehensive Cancer Collaboration	Equity Task Force Co-Chair Modeling Seminar	2016-present
	Presenter	New England Health in All Policies (HiAP) Community of Practice	Case Study and Presentation	2015
	Presenter	Providence, RI by NOAA-NERRS.	A Community Climate Adaptation Planning Case Study and Learning Exchange	2013-present
	Advisory Board	New England Health Impact Assessment (HIA) Advisory Board	A Community Climate Adaptation Planning Case Study and Learning Exchange	2012-Present
	Instructor:	UNH Continuing Education; Professional Development and Training Program	Building Healthy Communities Using the Health Impact Assessment (HIA) Process.	
	Member	NH Healthy Eating Active Living (HEAL) New Hampshire	Evaluation and Grants Committee	2012-Present
	Mentor / Event Co- Organizer	immigrant/refugee students (high school/college) Berwick Academy, Maine		2017

	Mentor	Health Careers	Water Quality Awareness Day Epidemiology Day	2015
Rosemary Caron	Member	Manchester Board of Health	Board of Directors	2016-2017
	Member	Association for Prevention Teaching and Research (APTR)	Board of Directors	2013-2019
	Member and Liaison	American College of Epidemiology	Publications Committee	2012-2014
	Member	American College of Epidemiology	Board of Directors	2011-2014
	Moderator	Annual Meeting of the Association for Prevention Teaching and Research, Session Title:	Implementing the New MPH Accreditation Criteria	2017
	Chair	Graduate Programs	Association for Prevention Teaching and Research (APTR)	2016-2018
	Advisory Board	Environmental Protection Agency	Led Charge	2016-2017
	Selection Committee	Association of University Programs in Health Administration (AUPHA)	Filerman Prize Winner	2016-2017
	Selection Committee	American Public Health Association (APHA), Community Health Planning and Policy Development Session titled, "Using Community Health Impact and Needs	Consultant	2015
	Publications Committee	Assessment to Change Health Policies", APHA Annual Meeting	Moderator	2013-2015
	Presenter	American College of Epidemiology (ACE), Best Paper in the <i>Annals of Epidemiology</i> Workstream	Chair Board of Directors	2012-2015 2016-2017
	Presenter	American College of Epidemiology (ACE), "From the American College of Epidemiology" Pages in the <i>Annals of Epidemiology</i> Workstream Manchester Board of Health	Member	2009-2015
	Presenter	Professional Development Committee, Association of University Programs in Health Administration (AUPHA)	Council Member	2016-2017

	Presenter	Manchester Environmental Health Leadership Council, Manchester, NH	Chair	2013-2019
RG Parrish	Member	National Committee on Vital and Health Statistics	Presentation	2016
Ann-Marie Matteucci	Member	New Hampshire Public Health Association	Membership committee	2016- present

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.

This table is from the CEPH Outcome Measures Template, page 21.

Outcome Measure	Target	2014-15	2015-16	2016-17
Student field study/integrated seminar projects will benefit rural and urban health needs in NH (or New England). (Criterion 3.2)	100% of field study projects directly benefit community health in NH.	Met (18/18)	Met (10/10)	Met (5/5)
	100% of Capstone projects will directly benefit community health in NH.	Met (4/4)	Met (3/3)	Met (1/1)
The UNH MPH faculty, students and alumni will assist in the development of the Public Health workforce. (Criterion 3.2 and 3.3)	85% of TT faculty serve on a committee, board or other work group to benefit the field of Public Health and/or the workforce	Met (100%)	Met (100%)	Met (100%)
	25% of students/alumni serve on a committee, board or other work group to benefit the field of Public Health and/or the workforce.	Met	Met	Met

As members of the College of Health and Human Services faculty, full-time Program faculty members are expected to spend one eighth of their time providing service. This is divided between service to the community and state, and to the Program as well as to the faculty member's department, school, and university.

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.

Most of the students are currently employed in the public health field and, therefore, provide direct service to the profession.

We are cognizant of the fact that our students' ability to participate in any additional service activities is limited by the fact that are generally employed full-time, commute to Manchester to take courses, matriculate in class one or two nights per week for up to 4 – 8 hours per week, and have a considerable assignment load that is to be dealt with in their private time. Thus, any additional service time is handled by the students in their professional and/or private life.

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.

Strengths: As mentioned earlier, only one-eighth of the tenure track faculty's contract is devoted to services, and this includes service to department, College and University. For some faculty, the commitment to specific organizations has been long-standing. Despite a relatively small program, the faculty participate in a wide range of service activities.

Challenges: Students are generally employed full-time and historically it has been challenging for them to complete service activities in addition to taking courses. We feel confident through our interactions with our alumni at events throughout the State that our alums are very active in the public health field and overall workforce development. We feel the challenge has been that we haven't formally tracked this for either group.

Plan: We will build questions into student and alumni surveys to better assess the service provided by our students and alums.

This criterion is partially met.

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.

Required Documentation. The self-study document should include the following:

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.

Historically the MPH Program has offered continuing education through: Public Health Grand Round lectures and a Public Health Certificate Program, described in Criterion 3.3.b. During these years of transition, these Grand Rounds were greatly diminished. While it was a conscience decision made due to the time constraints of the then coordinator, it is not something we had planned and we hope that we will have our target of 6 Grand Rounds during the 2017-2018 year.

Public Health Grand Rounds lectures focus on burgeoning public health issues. The public series is a vehicle to: 1) provide timely information to the public health community in NH; 2) encourage networking among the public health community in NH; and 3) build relationships between the public health community in NH and UNH.

Grand Rounds are advertised to professionals in public health, education and health care in the State of New Hampshire and others in the surrounding area. Announcements are also placed on the Department, College and Graduate School websites.

Needs assessment activities were lapsed during the transition process. We did continue to ask faculty, alumni, and current students for their interest in creating the trainings, workshops, and lectures that we were able to hold. We heard very clearly from stakeholders in both the HMP advisory board meeting in October 2016 and the MPH work group in the spring of 2017 that they feel the biggest areas of need are communication skills, decision-making and critical thinking. They also noted analytical skills as a need, as were leadership skills. These were components that we planned to build in our curriculum but we feel can also be included in part in our grand rounds as part of our work force development sessions. For example, “working with big data” could fill analytical skills need. “Being a leader in Public Health” could address the need to build leadership skills. Finally, a presentation on “how to present public health data to broad audiences” could build communication and decision-making skills. Minutes from the MPH work group sessions and advisory board and can be further reviewed in the Electronic Resource file ERF 1.5/Governance.

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 (i.e., 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.

Table 3.3.b: Continuing Education Programs (Grand Rounds) from 2014 - 2017		
Date	Title	Numbers
2014	Nicotine and Electronic Cigarettes <i>Old Vices, New Devices</i>	10 (5 MPH students, 5 community members)
2014	"The Care and Feeding of Volunteers"	4 (1 alum, 3 community)
2014	State Marijuana Policies & Adolescents, What's The Big Deal?	8 (2 MPH students, 1 alum, 5 community members)
2014	Growing Your MPH Degree Into A Successful Career	Canceled due to weather
2016	The Evolution of Marijuana	8 (3 MPH students, 5 community members)

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 UNH Public Health Certificate seeks to further enhance the state's public health infrastructure by providing individuals managing public or community health programs, with no formal academic background in public health, the opportunity to earn a Public Health Certificate.

For some individuals who are at a stage in their life where a Master of Public Health is not possible, the Public Health Certificate provides them with basic skill sets and knowledge which will enhance their abilities in public health. For those who can continue, it provides a vehicle to ease into the MPH Program.

The PHC requires 12 credits (four three-credit courses) that can be completed over a one-year time-period, though students have up to three years to complete all required certificate coursework. The University gives certificate students three years to complete.

The PHC was approved by the UNH Graduate School in 2005. To enter the PHC Program, a student must have a Baccalaureate degree from an accredited academic institution.

Students must complete the three courses described below and an elective offered by the MPH Program; therefore, the total credit accumulated is 12 credits for the Public Health Certificate Program and students must maintain a GPA of 3.0 to graduate from the Certificate Program.

Table 3.3.b.a.: Required Courses for Public Health Certificate Program

Course Number	Course Title	Credits
PHP 900	Health Care Systems	3
PHP 901	Epidemiology	3
PHP 996	Applied Topics in the Essentials of Public Health	3
MPH Elective	One elective of the student's choosing	3

Full information is found in the MPH and PHC Student Handbook, p 60 – 67. The handbook is located in ERF1.5/Governance/handbooks.

Table 3.3.b.b: Enrollment of Students in Public Health Certificate Program

	Year 2014-2015	Year 2015-2016	Year 2016-2017	Fall 2017
Number of Total Students	3	2	3	2*
Number of New Students	1	1	1	1

*One student from the 2016-2017 year withdrew due to being accepted to a full-time PA program in MA and therefore the number of total students remained the same.

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

The program strives to offer six Grand Rounds per year (three per semester) and to survey students, alumni, faculty and key stakeholders on their interests and needs to further development their knowledge, skills and values in the field of public health.

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.

Not applicable

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.

Strengths: The Certificate program has offered a nice pipeline for some of our students into the MPH. We have had a few students supplement other degrees with their Public Health Certificate as well.

Challenges: Unfortunately, during the transition experienced in leadership and overall management of the MPH program, much of this criterion was lost during this time-period. The program's practice in the past was to offer 6 Grand Rounds a year and this was completed through 2012. In 2013, 4 were offered and the decline is noted further in the table above. The priority during this transition period was to keep the program running on a day-to-day basis to offer a strong program for our students. It took time in the 2016-2017 to obtain desired staffing for the program as well as a thorough evaluation.

We value workforce development and continuing education and plan to continue this moving forward. Topics have been based on interest of community and willingness of the presenter. Formal evaluation and/or assessments specifically for workforce developments have not been completed during this self-study time-period but are planned.

Plans: We plan to change the certificate slightly moving forward as we hope to adjust the classes so that people who complete the certificate will have the classes required to sit for the Certified Public Health Examination, assuming they have the required years of experience.

With the continued assistance from the Graduate School at Manchester, we are confident we will be able to rebuild the Grand Rounds and expand our efforts with both the workshops and the formally assessment workforce interests and needs.

This criterion is partially met.

Criterion 4.0 Faculty, Staff and Students

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

Required Documentation. The self-study document should include the following:

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 4.1.1. Current Primary Faculty Supporting Degree Offerings of School or Program by Department/Specialty Area

Department (schools)/ Specialty Area (programs)	Name	Title/ Academic Rank	Tenure Status or Classification*	FTE or % Time to the school or program	Graduate Degrees Earned	Institution where degrees were earned	Discipline in which degrees were earned	Teaching Area	Research Interest
HMP	Ann-Marie Matteucci	Assistant Professor	Tenure Track	.75 FTE	PhD, MHA	Brandeis University, University of New Hampshire	Social Policy	Community health, public health and US health care, health education	Substance Abuse prevention
HMP	Rosemary Caron	Professor	Tenured	.50 FTE	PhD, MPH	Dartmouth University	Toxicology	Disease Ecology/ Toxicology	Comm. Health/ Public Health Education
HMP	Semra Aytur	Associate Professor	Tenured	.50 FTE	PhD	UNC, Chapel Hill	Policy	Health Policy/ Biostatistics.	Health Disparities, Built Environ.
IHHP	David Laflamme	Associate Professor	Research faculty	.50 FTE	PhD	Johns Hopkins	Public Health	Social and Behavioral Health	Maternal Health

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.

Template 4.1.2. Other Faculty Used to Support Teaching Programs (adjunct, part-time, secondary appointments, etc.)

Department (school)/Specialty Area (program)	Name	Title/Academic Rank	Title & Current Employer	FTE or % Time	Graduate Degrees Earned	Discipline for earned graduate degrees	Teaching Areas
MPH	Philip J. Alexakos	Adjunct	Chief of Environmental Health and Emergency Preparedness Manchester Health Department, Manchester, NH	.125 FTE	MPH REHS	Public Health/Environment Health	Environmental Health
MPH	Nick Smith	Professor and Chair	UNH- Department of Philosophy	.125 FTE	PhD, JD	Ethics and law	Ethics
MPH	Fred Ruszcek	Adjunct	Retired, Formerly Executive Director at Child Health Services - Child Health Services	.25 FTE	MPH	Public Health	Administration and Field Study
MPH	R. Gibson Parrish	Adjunct	Consultant, Self Employed,	.25	MD	Medicine	Epidemiology, Global health
MPH	Sharon McDonnell	Adjunct	Consultant, Self Employed,	.25	MD, MPH	Medicine, MPH	Epidemiology, Global health
MPH	John Martin	Adjunct	Manager Bureau of Licensing and Certification, Department of Health and Human Services, State of NY	.125	JD	Law	Public Health Law
MPH	Richard Rumba	Adjunct	Retired (formally Keene State College)	.125	MPH	Public Health	Built Environments
MPH	Karla Armenti	Adjunct	Research Assistant Professor Principal Investigator, NH Occupational Health Surveillance Program Institute on Disability / UCED UNH	.125	ScD	Environmental Health	Work Environment and Policy
MPH	Lida Anderson	Adjunct	Evidence-based medicine analyst at Fresenius Medical Care, North America	.125	MD, MPH	Charles University, Prague, Czech Republic, Boston University	Epidemiology

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.

The faculty of the Program is a mix of people who come from the field of practice as well as traditional academics.

To cite a few examples, prior to joining UNH, Dr. Caron obtained practical public health experience by working as an Assistant State Epidemiologist and Chief of the Bureau of Health Statistics and Data Management at the New Hampshire Division of Public Health Services (DPHS). The Manchester NH Health Department created a position for her where she worked as the Environmental Toxicologist and Chronic Disease Epidemiologist at the local public health level. Dr. Caron also has experience working with the federal government as a Senior Toxicologist as a private consultant and is able to bring these varied experiences to class, lectures, and during case studies.

Sharon McDonnell continues her practical experience in Public Health since 2016 with John Snow International and the Centers for Disease Control and Prevention. She is a reviewer of technical content for training materials developed by the US CDC for the frontline, basic, intermediate, and advanced tiers of curricula from countries with Field Epidemiology Training Programs (FETP). The objective of the activity is to improve the quality and effectiveness of existing public health and epidemiology training material in order to improve capacity building at all levels in participating countries, thereby supporting implementation of WHO's International Public Health regulations (IHR, 2005).

She also works with the Gobe Group, the Bill and Melinda Gates Foundation, as well as serving as a Consulting Medical Epidemiologist. Further she is involved with a private-public partnership on the development of a biometric device for pediatric pneumonia diagnosis in low resource settings, such as India, Ethiopia, and Nigeria. Prior to this, she was on the Council of State and Territorial Epidemiologists and the US CDC, and was on the International Rescue Committee, and served as a consultant as a Medical Epidemiologist in response to the Ebola epidemic in Monrovia Liberia. During the outbreak response, she worked on re-establishing health services, along with Integrated Disease Surveillance and Response from 2014-2015.

Since 2015, Roy Gibson Parrish provided consultation for several public health organizations, including Council of State and Territorial Epidemiologists, Atlanta, Georgia, National Center for Vital and Health Statistics, and National Center for Vital and Health Statistics

In addition, faculty members invite speakers from the field of practice into classes to give presentations on various aspects within field of practice. This integration of practical knowledge is done in most classes.

The faculty are also active with service activities of various state and local public health care organizations. They serve on boards as indicated elsewhere in this report under Service. For

example, Rosemary Caron and Ann-Marie Matteucci are present members of New Hampshire Public Health Association (NHPHA). Ann-Marie Matteucci serves on the NHPHA membership committee and Dr. Caron is on the Manchester Health Department Board.

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.

We have a very small program. To teach in the program, a tenure-track faculty member must hold a PhD or equivalent. Adjuncts must hold at least a master degree. We annually monitor teaching, research and service of our tenure-track faculty. All faculty must earn a 4.2/5 on the evaluations (College average). Faculty are given a chance to revise syllabi and take advantage of teaching support offered by the University, however low evaluations continue, adjunct faculty contracts can be discontinued. Low evaluations are considered for tenure-track faculty in their annual reviews and in the tenure process. Our research goals for tenure-track faculty are shown in the row for the CEPH Outcome Measures Template (for full table refer to page 21).

Outcome Measure	Target	2014-15	2015-16	2016-17
Students will benefit from exposure to current research, including faculty research, in and outside of the classroom (Criterion 3.1)	100% TT Faculty will publish at least one publication per year to stay current in field (may also service as PI investigator with external funding greater than \$100,000	Not Met (3/4)	Met (4/4)	Met (4/4)

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.

Strengths: The Program has a clearly defined multi-disciplinary faculty, consisting of well-trained, fully qualified, and experienced professionals who maintain strong links with the external public health practice communities. All tenure-track faculty have earned doctoral degrees, in public health or related areas, and are known in the College and University for their commitment to students, teaching excellence, and support of the concepts and principles of public health. Our adjunct faculty are committed to the program and the field of Public Health. Many have taught in the program for over ten year.

Challenges: The core faculty is small, however so is the overall department. Due to the size of the program, Ann-Marie Matteucci (Director) is unable to teach two classes in the program this year due to requirements for the class size and course evaluations (necessary for tenure.)

Plan: We will have one more core faculty member once the McKerley Chair position is filled. This position is a joint appointment between the departments of Economics and HMP and the person teaches the PH Economics course. This position was available following the retirement of Robert Woodward. After a year-long search was filled by Joseph Sabia. Dr. Sabia resigned his position this past summer and a new search will be opened this fall. The course and the position have been in flux for three years. Further plans also include continuing to work toward growing the MPH program. As it grows, Ann-Marie Matteucci will be able to resume teaching two courses within the program.

This criterion is met.

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.

Required Documentation. The self-study document should include the following:

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

The UNH tenure-track faculty are covered by a collective agreement with a local chapter of the American Association of University Professors (AAUP). This agreement covers the rules and regulations governing tenure-track faculty. *The UNH AAUP website can be accessed here:*

Promotion and Tenure Guidelines for the Department, College and University will be available on-site.

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

Faculty members are reviewed annually. Faculty development funds are designated within the College and University for tenure-track faculty. These funds are awarded on a competitive basis based upon a faculty development proposal. In addition, travel funds are allotted to faculty for presentations at professional meetings. There are multiple opportunities at UNH for small faculty development grants.

The University provides resources to full-time, part-time, and adjunct faculty, and teaching graduate students to incorporate best practices in college teaching through the Center for Excellence in Teaching and Learning. The Center's mission is:

"The Center for Excellence in Teaching and Learning strives to promote the highest quality of student learning by providing full-time faculty, part-time faculty, and teaching graduate students with the resources they need to implement in their classrooms the best practices in college teaching. The Center's staff consults with individual teachers; offers workshops and courses on effective teaching; collaborates with other campus units interested in program development and review; assists individuals and academic units interested in designing and implementing student learning outcomes assessment initiatives; and conducts and disseminates research on the teaching/learning process."

The website for the Center is: <http://www.unh.edu/teaching-excellence/>

Additionally, the University provides technical assistance to all full-time, part-time and adjunct faculty.

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

Promotion and tenure for tenure-track faculty follows normal UNH tenure procedures; this is a traditional tenure process which focuses on the three areas of teaching, research, and service.

Starting in the first year, each new untenured faculty works with a faculty mentor to guide them through the process of tenure. In addition to annual reviews, untenured faculty members receive a third-year review by the College's Promotion and Tenure Committee as well as the Dean to provide appropriate guidance for the faculty member.

During the sixth year, the faculty member is reviewed by Promotion and Tenure Committees at the Department and College levels, with a recommendation to the Dean. The tenure decision is linked to promotion to Associate Professor. The College Dean and the Graduate Dean make recommendations to the Provost and Vice President for Academic Affairs.

The final promotion and tenure decision rests with the Board of Trustees. A faculty member may negotiate for an early promotion and tenure decision at the time of hiring or elect to go for tenure earlier than the sixth year. College Promotion and Tenure guidelines can be found in ERF 4.2/Faculty policies.

All faculty members are reviewed on an annual basis by their respective Department Chair and Dean. The faculty member provides a portfolio of work in teaching, research, and service for review. All tenure-track faculty are reviewed in a Post-Tenure Process every five years.

When necessary, the Department of HMP creates an Ad Hoc Post-Tenure Review Committee to evaluate faculty. The Chair of the Department gathers input from this Committee and forwards a Departmental letter of evaluation to the College's Post-Tenure Review Committee.

The College's Review Committee evaluates the faculty member's portfolio and forwards its recommendation to the Dean. The Dean writes a letter to the faculty member copying the Chair.

For non-tenure-track faculty the MPH Program Director, in consultation with the Department Chair, reviews the teaching evaluations for each course taught. Based upon these evaluations the part-time instructors may or may not be retained for future teaching assignments. In addition, the MPH Program Director meets MPH students to discuss courses.

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

All courses with six or more students are reviewed at the end of the semester using a standard UNH evaluation form. These evaluations are conducted online. UNH has slowly moved to an online system over the past few years. Fall of 2016 was the first year that all tenured, tenure-track and adjunct faculty received online evaluations. Two campus-wide trends have been noticed. The first is that the overall scores across campus have been slightly lower than when evaluations were done in person. The second is that the numbers of completion have also been

lower. The University suggests that the second issue of low completion can be improved by the faculty members with encouragement and it is hoped that the numbers will rebound.

The evaluations are then processed and returned to the Director of the Program who, along with the Department Chair, reviews them and then forwards evaluations to the individual instructor after grades have been submitted. There is the opportunity for students to also write qualitative open ended comments on the back of the form. Faculty members frequently undertake informal evaluations part way through the course to provide students the opportunity for input prior to the end of the class.

Course evaluations can be found in the ERF 2.7/Assessment/Course Evaluations.

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.

Strengths: The Program, as a component of the HMP Department, the College and the University, is required to conform to mandatory policies and procedures for the recruitment, appointment, and promotion of faculty, plus policies and procedures to evaluate faculty productivity and quality in relation to their instruction, research, and service responsibilities.

University and College policies require an annual performance review that is based on an annual report showing the faculty member's instruction, research, and service productivity. In addition, the MPH Program Director reviews all teaching evaluations and discusses these critiques with all adjunct faculty members. The HMP department chair discusses the evaluations with full time faculty.

All tenure-track faculty hold graduate degrees appropriate for the Program and for their instruction, research, and service activities.

Evaluation of faculty competence and performance involves a wide variety of approaches, both formal and informal, that includes educational administrators, peers, students, and alumni.

Challenges: There has been a lack of continuity with some of the core faculty, specifically in the McKereley chair. As noted earlier, we aim for more full-time faculty teach in the program, however, we have been fortunate to have long-standing, highly qualified adjunct faculty who are popular with the students.

Plans: We will continue to evaluate faculty to ensure a competent teaching contingent. We plan to host meetings (annually) with all faculty, adjunct and full-time, to better plan across the curriculum.

This criterion is met.

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 vs. graduate degree), a description should be provided for each.

The UNH MPH Program was created to meet the needs of public health workers seeking an MPH without needing to relocate or leave their full-time positions. Over time fewer of those students existed in the one-hour radius of Manchester, NH and a decision was made to allow new baccalaureate graduates to be admitted. Since we strive to meet the needs of both populations we attempt to recruit from both groups.

The Program has its own budget to advertise in a regional health newspaper, attend specific conferences and job fairs and advertise in local media. The Program holds Information Sessions at UNH Manchester and at invited locations and participates in Open Houses arranged by the Graduate School at Manchester.

The Graduate School also markets the Program along with the other programs offered in Manchester. The Graduate School purchases mailing lists of students who have completed an exam required to enter graduate school to direct marketing. The MPH Director is updated on these marketing efforts during the Graduate School Advisory Committee meetings, held twice a year.

The Program is a sponsor of the NH Public Health Association and shares promotional materials at the fall meeting, also receiving sponsorship credit on materials at the Spring annual meeting. The Program participates in job fairs and other local events and the MPH Program Director meets with local leaders in the community.

The Program has a website on the HMP department's website, which is also available through the College of Health and Human Services and from the Graduate School.

Any requests for information that comes to the Graduate School in Durham or Manchester, as well as the College and the Department are referred to the MPH Program Director. The Director (or designee) answers questions via email and meets with prospective students in person on either campus, or by phone. The Director will answer questions and share a copy of the MPH/PHC Student Handbook. An abbreviated handbook with the information pertinent to prospective students has also been made available.

In the spring of 2017, a social media campaign was created with the assistance of the department of Communication and Public Affairs (CPA). Social media advertisements promoting the MPH program were run on Facebook, LinkedIn and Google Search. A traditional newspaper ad was also run in the Manchester based paper, the Union Leader, in their healthy living insert. An

advertisement was also run in the NH Nurses Association newsletter. Sample copies can be found in ERF 4.2, Student Recruitment Emails/Flyers.

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

The MPH Program Director meets with most applicants to discuss any questions they may have about the Program. Applications for admission must include the standard University Graduate School Application Form, an essay replying to five questions about public health (in lieu of a personal statement), official transcripts, current resume, and three letters of recommendation.

The Program requires the GRE exam for students who do not hold an advanced degree and/or have work experience in public health or health care. Students who join the program having considerable life and work experience can be exempt from the exam as the Program feels that standardized aptitude examinations may be a barrier to higher education for many people who can perform well at the graduate level. Students should have a GPA of 3.0 or better from their undergraduate program. Their essays should demonstrate a motivation to work in the field of public health

Once the application package is complete it is made available to the Program. The package is compiled and shared with the MPH Admissions Committee. Individual recommendations are made to the MPH Program Director and the MPH Program Director makes the final decision to recommend to the Dean of the Graduate School. The decision alternatives are to: 1) admit as a regular student; 2) to admit conditionally (e.g., applicants with lower than expected grades and expected to perform at a given level for a period of time); 3) admit provisionally (e.g., undergraduate or experience is not adequate and must complete a requirement prior to admission); or 4) denial. Based on the recommendation of the MPH Program Director, the Dean of the Graduate School formally admits the student. The Graduate School Dean typically takes the recommendation of the committee. If there are concerns about an admission or denial, the Graduate School will pose questions to the MPH Program Director, who will return to the Admissions Committee. The Graduate School has never overturned a final decision by the program.

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.

Examples of recruitment materials can be found in ERF 4.3/Student Recruitment Emails/Flyers.)

The MPH program maintains a website that answers many questions that both current and prospective students may have about the program. This website is updated regularly but had a full overhaul in the spring of 2016 and then a more functional revision in the spring of 2017. The

website is: <http://chhs.unh.edu/hmp/master-public-health-mph-0>

The UNH MPH/PHC Student Handbook is available via the website and upon request. It is made available to all students before they start classes. The handbook provides information about:

- The MPH Program including the mission, goals and objectives, the curriculum and expectations and rights of the students.
- The MPH curriculum including suggested two and three year tracks to maximize the curriculum.
- The academic regulations of the University, Graduate School and the Program.
- UNH Manchester campus including information about tuition, the bookstore and other pertinent information.
- The Public Health Continuing Education program including the Public Health Certificate and the Grand Rounds.

The MPH and PHC Student Handbook is ERF 1.5/Governance.

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.

Template 4.3.1 Admissions Process Data: Information on Applicants, Acceptances, and New Enrollments, by Specialty Area for the last 3 years

Table 4.3.1 Quantitative Information on Applicants, Acceptances, and Enrollments, 2015 to 2017				
		Year 1: 2015-2016	Year 2: 2016-2017	Year 3 – Fall 2017
MPH	Applied	9	8	3
	Accepted	9	8	3
	Enrolled	7	6	2

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.

Template 4.3.2 Total Enrollment Data: Students Enrolled in each Area of Specialization Identified in Instructional Matrix for each of the last 3 years

Table 4.3.2 Student Enrollment Data from 2015 to 2017						
	Year 1: 2015 - 2016		Year 2: 2016-2017		Year 3: Fall 2017	
	HC	FTE	HC	FTE	HC	FTE
MPH	17	13.25	17	14.45	15	11

Note: All MPH students are considered part-time by the nature of the program (evenings, two nights per week.) Students who are on the two-year track take 9+ credits which is considered full-time. FTE was calculated by how many classes the student took divided by the total number of classes suggested within the confines of the program. For example, in year 1 there are a total of six classes possible to take. If the student took all six classes they were considered 100% full time and counted as a 1. If they took five of the six classes they were counted as .83.

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.

We have a goal to increase the number of qualified students in the program, however our more pressing goals were to better market the program to increase our inquiries and applications. We added the budget meetings in the measureable objectives because to date the Dean of CHHS has been fully supportive of the process used to grow the program, and we feel that these ongoing meetings are the way that we can ensure that the Dean's office is aware of our situation and is continuing their support (theoretical and financial) of the program.
For the full CEPH Outcome Measures Template, see page 21.

Outcome Measure	Target	2014-15	2015-16	2016-17
A concentrated marketing plan will be developed and implemented. (Criterion 4.3)	Social (Facebook, Google, Twitter) and print media (ads in journals/papers) will be used to create awareness of the MPH program,	Not met	Not Met	Met (2 print, 2-week social media)
	Tables at conferences and graduate school fairs, on campus, information sessions, and other outreach	Met (3 tables)	Met (2 tables)	Met (two tables, 1 panel)
	Website review and revision	Not met	Met	Met
	In meetings with prospective students starting in fall 2017, ask” how they learned of program?” The target is to increase numbers of students and to have more students learn of program through marketing rather than word of mouth or website search. This is a goal moving forward.	Not measured	Not measured	Not measured
Assessment program viability using quarterly budget meetings to assess Dean’s support of program. (Criterion 1.6)	Quarterly budget meetings to review enrollment status and admission status.	Met (lower revenue but balanced)	Met (lower revenue but balanced)	Met (budget shortfall, College supported)

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.

Strengths: The students who have been attracted to the UNH MPH program have been, for the most part, well prepared, excited about public health, and have been an asset to our program and the field.

We have attempted to maintain the quality of the student body during our transition and despite our smaller numbers. We continue to look for students with experience in the field. If their interest and commitment to Public Health appears strong, and yet they lack experience, we encourage them to pursue volunteer and internship opportunities while in the program. The goal is to graduate students who are ready to join the Public Health workforce.

We require a GPA of 3.0 for admissions, however if the student has many years of work experience we may waive that realizing that a GPA from 10 -20 years ago may not reflect the potential of the student today. We hold the minimum GPA for younger students and we also look to see their achievements in more quantitative classes. In recent years, we began to require the

GRE for individuals who do not have a higher degree and/or work experience.

A major outcome measure is the ability of students to pass the required courses in the curriculum with a B- or better. Few students have failed courses in the Program. Students are allowed to re-take a course that they have failed one time and it must be taken at UNH.

The MPH Program has a formal Admissions Committee in place to assess applicants and follows the admissions policies and procedures of the Graduate School.

Challenges: The largest area of challenges and concern for the MPH Program is a dwindling student enrollment. The numbers in the program have declined over the years, and while there was an increase in the fall of 2016, the numbers are still considered low and of concern. The cause of the low enrollment is directly tied to the low number of applications. The fact that withdrawal numbers continue to be low for this program support that students are satisfied with their experience, but we are not getting enough students to apply or matriculate.

The decrease is likely due to the following reasons:

- **Marketing:** The program has not engaged in a concentrated marketing campaign. As NH is a small state, and as stated previously, the origin of the program was to meet the needs of the NH working professional, the program had previously operated well using word of mouth. The average age of the student in the MPH program has decreased and with that, it should have been anticipated that our marketing frame needed to shift. A marketing campaign was developed in the spring of 2017 to advertise the program better to key groups in NH, northern Massachusetts and southern Maine using social media (Facebook, LinkedIn, and Google Search.)
- **Delivery model:** The program was established to meet the needs of the working NH professional. If that population has been saturated a different delivery model that could meet the needs of a larger geographical range may need to be entertained. The MPH Work Group is tasked to address that issue.
- **Competition:** When the UNH program was established the only other MPH program in the state was at Dartmouth. It was a practical solution for prospective students to choose the part-time face-to-face program located in Manchester over traveling to residential programs like Dartmouth or into Boston. Now there are several MPH programs offering a variety of delivery models in the state (Rivier University, Southern New Hampshire University) and nearby (University of MA-Lowell, Massachusetts College of Pharmacy and Health Sciences). Finally, there are many online options that may be meeting the needs for some better than our face-to-face program.

Plans: The Program has worked to better develop an active recruitment and marketing plan. We will continue to coordinate with the Graduate School, especially the staff located on the Manchester campus. The College of Health and Human Services has assisted in growing these marketing initiatives

The criterion is partially met.

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.

During the period of the self-study, Ann-Marie Matteucci, in her role as Coordinator in the 2014-2015 and 2015-2016, and then as Director of the program starting in August of 2016, has served as the advisor to the MPH and PHC students. Since most of the students in the program are employed in full time professional position the advising is generally about course sequencing, independent studies, and their field study projects. These meetings generally occur before classes on Tuesday/Thursday in Manchester or on other days/times as scheduled. Likewise, meetings can be scheduled on the Durham campus if that is more convenient for the student. Finally, many meetings occur by phone/email. The Program Director/Coordinator also makes drop-in visits to the classes where students will often ask questions.

Since the MPH Program Director has offices on both the Durham and Manchester campus, the Graduate School staff in Manchester are invaluable in helping students when the Director/Coordinator are not physically available at UNH Manchester. Candice Morey serves as the Educational Program Coordinator. Candice has one or two other staff members and between them they cover the Graduate office from 8 am – 8 pm Monday-Friday. Graduate School Manchester staff members know the students by name and get to know them well over the years. They are available during normal business hours as well as in the evening when the students are attending classes.

Once students are admitted, the MPH Director/Coordinator sends students a letter via email welcoming students to the Program. This contains information regarding a new student orientation the week before classes begin. The orientation session is coordinated by the Graduate School at Manchester and includes a training on the University education platform, using the library and other administrative needs such as parking permits and student IDs. The MPH students then meet separately with the MPH Program Director/Coordinator. In this session students are given a chance to get to know one another, ask questions about the program and to learn what to expect from their program. At this meeting, students are provided with the Student Handbook. The MPH Program Director also introduces the concept of the field study even though the class is at the end of their tenure.

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.

The majority of career counseling has been shared between Graduate School in Manchester and the MPH program until the spring of 2017. In the last few years the various graduate programs located at UNH Manchester have worked with the Graduate School to offer Career Workshops to students across master degree programs. MPH students have not typically attended the scheduled sessions again, likely because most are already working and it is challenging to come to campus on the nights they are not already on campus.

The MPH Director/Coordinator has offered resume reviews, and as mentioned earlier, shares open position/internship opportunities as they are shared with the program via email, or through the newly created MPH Canvas site. The Graduate staff also post positions on their Canvas site and on a bulletin board outside of their offices.

Students are introduced to potential employers through their faculty and via guest lecturers.

In the 2016-2017 academic year, the University changed the approach of career services, putting a Director for Career Services in each College. Lauren Haley filled this position for the College of Health and Human Services in the spring of 2017. We anticipate that with Lauren's new position we will be able to engage MPH students in activities that enhance their career search from the day of matriculation through graduation.

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

As mentioned the MPH Program Director meets with students as scheduled and informally before class. Students are encouraged to share concerns about the program including with advising and career counseling. We do not formally ask students to evaluate advising, however graduating students were surveyed in Spring of 2015 regarding their experience with the program and there was room to comment on advising and career placement. Additionally, all students and alumni were surveyed in the spring of 2017 as part of the MPH Work Group process. The Graduate school also surveys students as part of an exit survey.

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.

Grievance Procedures are explained in the MPH Handbook provided to students at their orientation session, and it is also available online at http://chhs.unh.edu/sites/chhs.unh.edu/files/departments/health_management_policy/mph_handbook_2017-2018.pdf

Grievance Procedures

The MPH Program Appeals Process is designed to address student challenges regarding a faculty evaluation, decision, or action. This appeal process applies to both academic and non-academic

issues. MPH and PHC students, as well as other members of the academic community, are encouraged to resolve conflicts concerning academic issues; faculty, staff, or peer conduct; or student development informally before initiating the MPH Program Appeals Process (electronic resource file)

Complaints About Faculty

Students should discuss their concerns directly with the faculty member and seek a resolution. However, if the student feels that direct discussion would be counterproductive or if, after consulting with the faculty member, a student still has a complaint, she or he should talk with the Director of the MPH Program and then the issue should be brought to the HMP Chairperson. If no satisfactory resolution results, the student may talk with the Dean of the Graduate School. If the matter is not resolved by the dean, final appeal may be made to the Provost.

Grievances over the past three years:

Two grievances have been lodged in the past three years, both by certificate students, not MPH students. Neither faculty member currently teaches for the department and however neither grievance was the reason for that change in status with the department. One grievance went to the Dean of the Graduate School and a recommendation was made for the student and the faculty member to seek a compromise in an assignment where the faculty member felt the student plagiarized a portion of the paper, but the student felt that he misunderstood the expectations. There was not program director in place at the time but the department of HMP had supported the faculty member. The second grievance also involved a grade where the student claimed that the technology the faculty member used was faulty causing him to receive a lower (yet still an A) grade. The Department Chair worked with the faculty member and the student to find a resolution.

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.

As with any program there are strengths and weaknesses, and room to grow.

Strengths: The current MPH Director, formerly the coordinator, has maintained a personal relationship with each student, offering personalized advising to meet each student's needs. The faculty are very supportive to the students, giving the students time outside of class to explore career possibilities and other opportunities. The additional Graduate School staff at Manchester increases the students' ability to get questions answered quickly and obtain advice as needed.

Challenges: During the recent years, the MPH program has suffered from a decline in applications and experienced a good amount of leadership change. During this time, however, the students have largely been protected.

Plan: The newly created Director of Career Services who is housed in the College should fill any potential holes in the overall process of career counseling and may become even more

important as the average age of the student body decreases, which in turn has generally meant less experience in the field.

This criterion is met.

References

2. University of New Hampshire. Students' Rights, Rules, and Responsibilities Handbook, 2016-2017. Durham: University of New Hampshire