REVIEW FOR ACCREDITATION
OF THE
STANDALONE BACCALAUREATE PROGRAM
AT THE
UNIVERSITY OF MIAMI

COUNCIL ON EDUCATION FOR PUBLIC HEALTH
SITE VISIT DATES:
   November 2-3, 2017

SITE VISIT TEAM:
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CRITERIA:
   Accreditation Criteria for Standalone Baccalaureate Programs, amended
   June 2014
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1.0 LEADERSHIP, MANAGEMENT AND GOVERNANCE

Criterion 1.1: The program maintains an organizational description and organizational chart(s) that define the program’s administrative structure and relationships to other institutional components. The organizational chart presents the program’s relationships with its department(s), school(s), college(s) and other relevant units within the institution.

Finding:
Met

Team Comments:

Observations from the Self-Study

The program is situated in the School of Nursing and Health Studies (SONHS). In addition to the BS in public health, the school also houses two doctoral nursing degrees, three master’s degrees in nursing, a master’s in health informatics, three bachelor’s degrees in nursing and a BS in health sciences.

In addition to the SONHS, the university also houses schools of architecture, arts and sciences, business, communications, education and human development, engineering, medicine, music, law and marine and atmospheric sciences.

Within the school, program faculty report to the associate dean for health studies programs. The associate dean serves as the designated leader of the program. The associate dean reports to the dean of the school. The dean of SONHS reports to the executive vice president and provost, who in turn reports to the university president.

Observations on Site

Faculty and school leaders who met with site visitors confirmed the organizational structure of the university, school and program. The dean described the school as a single, cohesive unit as opposed to a group of competing programs.

The role of the associate dean was also confirmed to be in concert with the self-study description. The associate dean is responsible for all health studies programs, including informatics, health studies and public health, and reports directly to the dean.

Commentary:
(if applicable)
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Criterion 1.2: The program demonstrates administrative autonomy that is sufficient to affirm its ability to fulfill its mission and goals and to conform to the conditions for accreditation. Administrative autonomy refers to the program's ability, within the institutional context, to make decisions related to the following:

- allocation of program resources
- implementation of personnel policies and procedures
- development and implementation of academic policies and procedures
- development and implementation of curricula
- admission to the major

Finding:
Met

Team Comments:

Observations from the Self-Study

The dean is ultimately responsible for all resource allocation; however, if program faculty identify any needs, the associate dean brings those requests to the weekly leadership meeting with the dean and associate deans of the school. Allocation of resources is discussed with faculty at program-level meetings and at an annual program faculty retreat.

The school’s faculty handbook details personnel policies and procedures. The associate dean is responsible for implementing these policies and procedures. Faculty serve on school and university committees that address personnel policies and procedures such as the Promotion, Tenure and Rank Committee.

The faculty and associate dean develop academic policies and procedures, and these policies are published in the health studies student handbook and university bulletin. The school’s Undergraduate Academic Standing and Admissions Committee oversees the implementation and revision of policy related to academic progression. Public health faculty serve on this committee, which must approve any changes to academic policy and procedure.

The program faculty are responsible for developing and implementing the public health curriculum. Any changes to the curriculum must be approved by the school’s Curriculum Committee and a vote of the full school faculty.
Admission of first-time freshmen to the public health program major is undertaken by the university’s Office of Admissions. Students who wish to transfer into the public health major are reviewed by the school’s Office of Student Services. The program faculty set minimum qualifications for admission to the major. Currently, the minimum GPA requirement to transfer into the program is 2.8.

Observations on Site

The public health faculty meet monthly and annually to discuss resource allocation, academic policies, curricula and admissions. The associate dean determines all teaching assignments; however, all are also subject to faculty recommendation and review. Curricula are changed and updated at the direction of faculty and administration.

Faculty who met with site visitors confirmed that they have the autonomy to set admissions standards for the program and have decided to maintain a 2.8 minimum GPA requirement.

Commentary:
(if applicable)

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Compliance Concern:
(if Partially Met or Not Met)

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Institution Comments:

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Council Comments:

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**Criterion 1.3:** Faculty have clearly defined rights and responsibilities concerning program governance and academic policies. Program faculty have formal opportunities for input in decisions affecting curriculum design, including program-specific degree requirements, program evaluation, student assessment and student admission to the major. Faculty have input in resource allocation to the extent possible, within the context of the institution and existing program administration.

**Finding:**

Met

**Team Comments:**

Observations from the Self-Study

<table>
<thead>
<tr>
<th>The faculty handbook defines program administrators and faculty rights, roles and responsibilities for program governance and academic policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Various committees within the school allow for faculty input in curriculum design, degree requirements and program evaluation. The faculty handbook defines student assessment as part of faculty responsibilities. Faculty input for resource allocation is an informal process. While the dean is ultimately responsible for all resource allocation, the program faculty can make requests to the associate dean who meets weekly with the dean on issues such as resources.</td>
</tr>
</tbody>
</table>

Observations on Site

<table>
<thead>
<tr>
<th>Faculty described their satisfaction with their rights and responsibilities related to program governance.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty develop the program’s curriculum. In addition, any changes to the public health curriculum must be approved by the school’s Curriculum Committee, which has public health representation. Public health faculty are also members of other pertinent school committees such as the Undergraduate Academic Standing and Admissions Committee, Academic Technology Committee and the Faculty Affairs Committee.</td>
</tr>
<tr>
<td>At the monthly public health faculty meeting, faculty members provide input into curriculum design, degree plans and student evaluation.</td>
</tr>
<tr>
<td>Faculty reported that, in general, resource requests have been granted by the dean.</td>
</tr>
</tbody>
</table>
Criterion 1.4: The program ensures that all faculty (including full-time and part-time faculty) regularly interact and are engaged in ways that benefit the instructional program (e.g., instructional workshops, curriculum committee).

Finding:
Met

Team Comments:

Observations from the Self-Study

All public health faculty members are required to attend Faculty Affairs Committee events including instructional workshops, technology updates and pedagogical training.

Instructional effectiveness workshops are offered for Blackboard basics, exam writing, mental health trends, civic engagement, university learning committees and intergroup dialogue.

Public health faculty serve on school committees for curriculum, undergraduate academic standing, academic technology, graduate affairs, faculty affairs, promotion and tenure and health studies.

The public health program’s full- and part-time faculty meet monthly for open group discussion. Several public health faculty members participate in larger, university-wide committees.

Observations on Site

The site visit team met with full- and part-time faculty who underscored and confirmed the faculty engagement present in the school and program.

Faculty members exhibited an effective rapport regarding program and university committees, teaching workloads, student advising responsibilities, research and publications. Civic engagement, service and community partnerships were also highlighted as priority activities by the faculty.

Commentary:
(if applicable)

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Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
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Council Comments:
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Criterion 1.5: Catalogs and bulletins used by the program, whether produced by the program or the institution, to describe its educational offerings accurately describe its academic calendar, admission policies, grading policies, academic integrity standards and degree completion requirements. Advertising, promotional materials, recruitment literature and other supporting material, in whatever medium it is presented, contains accurate information.

Finding:
Met

Team Comments:
Observations from the Self-Study
The school maintains the program’s website. All promotional and recruitment materials are developed and reviewed by the associate dean and assistant dean for student services. These individuals also review the website for accuracy annually. If any updates are required, the modified documents are approved first by the program faculty, then by the relevant committees and finally by the School Council, which consists of the full school faculty and communities of interest. Upon approval, the school's webmaster implements the updates.

Observations on Site
The site visit team confirmed that accurate information is available on the university webpage as well as in other promotional materials.

Commentary:
(if applicable)
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Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
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Council Comments:
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2.0 RESOURCES

Criterion 2.1: The program has sufficient faculty resources to accomplish its mission, to teach the required curriculum, to oversee extracurricular experiences and to achieve expected student outcomes. Generally, the minimum number of faculty required would be 2.0 FTE faculty in addition to the designated leader’s effort each semester, trimester, quarter, etc., though individual circumstances may vary. The FTE calculation follows the institution or unit’s formula and includes all individuals providing instruction in a given semester, trimester, quarter, etc.

Finding:
Met with Commentary

Team Comments:

Observations from the Self-Study

The program is led by the associate dean who oversees the BSPH program in addition to the BS in health sciences and the MS in health informatics within the school. He is responsible for ongoing program management and development, oversight of program policies and procedures, supervision of program faculty and staff, hiring of new faculty and staff, coordination of assessment and evaluation activities, accreditation activities and representing the program to various stakeholders.

The program is supported by four primary full-time faculty designated specifically to the program. In addition, full-time faculty from the school teach within the program as needed. Full-time faculty, in addition to their teaching responsibilities, assist students with career planning. The program is also supported by two part-time instructors.

The university’s FTE formula and faculty workload policy are determined by faculty status. Full-time tenured faculty are considered 1.0 FTE when teaching nine credits per semester. Full-time tenure-earning faculty are considered 1.0 FTE when teaching six credits per semester and engaging in the equivalent of three credit hours dedicated to scholarship. Full-time clinical-track faculty are considered 1.0 FTE when teaching 12 credits per semester.

The Office of Student Services provides full-time undergraduate advisors to support program students in academic advising and planning.
Observations on Site

After identifying inconsistencies in the self-study, site visitors conferred with the designated leader to obtain the program’s correct faculty resources for the past four semesters.

In spring 2016, the program was supported by three full-time faculty and four part-time faculty for a total of 4.0 FTE. In fall 2016, the program was supported by four full-time faculty and three part-time faculty for a total of 4.75 FTE. In both spring 2017 and fall 2017, the program was supported by six full-time faculty and two part-time faculty for a total of 5.0 FTE.

Of the program’s full-time faculty, only one is tenure-track with the associated research expectations built into her workload. The remaining three full-time faculty are clinical-track faculty. While clinical-track faculty are not officially required to participate in research, it is expected of them as part of the promotion process. In addition to teaching and research, faculty are also expected to provide career counseling to students, serve as mentors for student organizations, participate in school committees and serve as liaisons for preceptors. Faculty explained that the current workload is manageable, but any increase would be detrimental to their ability to fulfill their responsibilities.

Preceptors who met with site visitors reported that while their interactions with the program have been positive, they would recommend additional support and interaction with the program. In particular, preceptors suggested mid-internship evaluations, an orientation to expectations of the internship experience and additional interactions with the program for evaluation purposes. Under the program’s current model, this would be the responsibility of the faculty teaching the capstone course.

The school currently has six open faculty lines. The designated leader has advocated for one of these lines to be allocated to the program. The proposed faculty member would spend 0.5 FTE teaching and 0.5 FTE as a designated public health career counselor. The program expects the dean to make this decision by the end of the fall 2017 semester. If the line is approved, the program plans to hire the new faculty member for the spring 2018 semester.
Commentary:
(if applicable)

The commentary relates to the faculty's ability to accomplish its mission, teach the required curriculum and oversee extracurricular experiences given the continued growth in student enrollment. Faculty are responsible for providing career counseling, support to student organizations and individual scholarship/research that can include program students. These responsibilities are often not reflected in their official workload. Faculty reported that while their workload is currently manageable, if the program continues to grow consistently, as described in Criterion 2.3, faculty resources will be exhausted. The program expects an additional faculty line to be approved for the spring 2018 semester, which would result in additional capacity for the current program faculty.

Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
In the coming academic year, the program director will seek workload credits for faculty to provide career counseling to undergraduate public health students. Career advising for undergraduate public health students though the university Toppel Career Center will also expand significantly in the coming academic year. The School of Nursing and Health Studies Faculty Affairs Committee is also in the process of reviewing and revising faculty workload guidelines.

Council Comments:
Click here to enter text.
Criterion 2.2: The mix of full-time and part-time faculty is sufficient to accomplish the mission and to achieve expected student outcomes. The program relies primarily on faculty who are full-time institution employees.

Finding:
Met

Team Comments:

Observations from the Self-Study
The program relies primarily on faculty who are full-time university employees. The program currently relies on four full-time faculty who are fully dedicated to the program. The program also utilizes full-time faculty from the school as needed. In fall 2017, two full-time faculty from the school who are not public health faculty taught in the program. In addition, the program currently relies on two part-time faculty members. Part-time faculty teach within the program because their specific areas of expertise and professional experiences qualifies them as the best fit for a given course.

Part-time faculty teach two of the nine required public health courses. Part-time faculty teach two of eight approved public health electives offered by the program.

Observations on Site
Site visitors met with full-time and part-time faculty who teach in the program. Site visitors confirmed that as of fall 2017, the program is supported by six full-time faculty at 4.5 FTE and two part-time faculty at .5 FTE.

Commentary:
(if applicable)
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Compliance Concern:
(if Partially Met or Not Met)
Click here to enter text.
Institution Comments:
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Council Comments:
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**Criterion 2.3:** The program tracks student enrollment to assist in gauging resource adequacy. Given the complexity of defining "enrollment" in an undergraduate major or baccalaureate degree program, the program uses consistent, appropriate quantitative measures to track student enrollment at specific, regular intervals.

**Finding:**

| Met |

**Team Comments:**

**Observations from the Self-Study**

The school’s Office of Student Services tracks program enrollment using the university CaneLink system. Enrollment data are reported to the dean and associate deans at regular leadership meetings. The program also tracks program course enrollments, including both majors and non-majors, using CaneLink.

The program’s student headcount was 86 in spring 2016, 94 in fall 2016, 112 in spring 2017 and 138 in fall 2017.

**Observations on Site**

Students are considered enrolled once they declare the public health major. The designated leader receives the enrollment report from CaneLink at the end of each semester and reports the results to the dean at the leadership meeting.

Student enrollment has been steadily increasing over the last four semesters. The number of public health majors has increased by approximately 50% in the last two years. The program anticipates that this growth will continue. The program noted that program enrollment does not accurately depict the program’s resource needs as several of the lower-level required courses fulfill general education requirements and include students from across the university. Course enrollments and overall class sizes, as described in Criterion 2.4, have been used to gauge resource adequacy in relation to class size. As a result, additional sections of some courses, such as the introduction to public health, have been added.

The program faculty described their intention to serve as many students who are interested in public health as possible. As a result, they are not currently planning to heighten admissions requirements. If necessary, the faculty have the autonomy to limit registration to public health majors and add additional sections of a course. The program’s ability to do the latter is dependent on available faculty resources.
Criterion 2.4: The program’s student-faculty ratios (SFR) are sufficient to ensure appropriate instruction, assessment and advising. The program’s SFR are comparable to the SFR of other baccalaureate degree programs in the institution with similar degree objectives and methods of instruction.

**Finding:**
Partially Met

**Team Comments:**

Observations from the Self-Study

The program calculates its student-faculty ratios (SFR) using student FTE, which is equivalent to student headcount, and faculty FTE. In the self-study, the program reported 5.0 FTE faculty over the last four semesters and used this to calculate SFR.

The program identifies the BS in nursing (BSN) as its comparable program. The BSN is also housed within the SONHS and requires an equitable number of credits for completion. In addition, BSN student outcomes align with those of the BSPH and faculty use similar instructional methods including didactic lecture, small-group work and field experiences. The BSN has 355 majors and seven full-time faculty dedicated to the program.

The SFR for the BSN was 16.6 in spring 2017.

The average class size for the public health program was 56.8 in spring 2016, 56.5 in fall 2016, 61 in spring 2017 and 57 in fall 2017. The average class size for the BSN was 96 in spring 2016, 106 in fall 2016 and 116.3 in spring 2017. While the program has lower average class sizes than the BSN, the program’s SFR are consistently higher than that of the BSN and increasing at a higher rate than that of the BSN.

BSPH and BSN students are served by the same undergraduate advisors from the Office of Student Services. As such, the advising load for each program is the same. The advising load was 267.5 in spring 2016, 295 in fall 2016, 316.5 in spring 2017 and 359 in fall 2017. The self-study cited the National Academic Advising Association’s 2001 Survey of Academic Advising, which states that the median advising load for a private doctoral-granting institution was 200 to one.
The program hopes to hire an additional full-time instructor, with half of their time dedicated to career counseling; however, this new line has not been allocated to the program as of the time of the site visit.

Observations on Site
Site visitors obtained updated faculty resources on site. The program was supported by 4.0 FTE in spring 2016, 4.75 FTE in fall 2016 and 5.0 FTE in spring and fall 2017. As such, the program’s SFR was 21.5 in spring 2016, 19.8 in fall 2016, 22.4 in spring 2017 and 27.6 in fall 2017. In comparison, SFR for the BSN was 50.7 for fall 2017.

The program reported its average class size was 57 in fall 2017. Classes are not routinely capped; however, the program does monitor class sizes and can institute a cap, limit enrollment to public health majors or add an additional section of a course, if needed. The program capped writing intensive classes at 41 students in spring 2017. The program does sometimes use graduate nursing students as teaching assistants. This semester, the program was approved to offer teaching assistantships to MPH program students. The program has received interest from MPH students and has made a formal request for those students to serve as teaching assistant in the undergraduate program as of spring 2018.

The assistant dean for advising reported that one of the program’s advisors is on a temporary appointment, and a new advisor is currently being hired to fill her position. He anticipates the need to hire an additional advisor within the year, but no formal action has been taken toward this goal.

Commentary:
(if applicable)
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Compliance Concern:
(if Partially Met or Not Met)
The concern relates to the advising load of the undergraduate academic advisors. The program’s advisors are responsible for all undergraduate students within the school. As of fall 2017, the advising load was 359 students, approximately 150 students above the national median. Additionally, students who met with site visitors expressed concerns related to
advisors’ abilities to provide useful advising given their current workload. While the program has plans to expand its advising resources, no additional positions have been approved. The program must work to lower its advising loads in order to provide adequate advising resources to students.

**Institution Comments:**
Several steps have been taken to reduce the advising loads for the undergraduate academic advisors. First, another, full-time undergraduate advisor has been hired and is now in place in the Office of Student Services. Second, the number of transfer students entering the undergraduate public health program will be reduced in the coming year by strictly enforcing a 2.8 required GPA for students requesting transfer into the program. Third, the university is planning to centralize advising for all premed students. This is our largest group of health science students and this initiative, when combined with a reduced number of public health transfers, will reduce undergraduate advising loads within the School of Nursing and Health Studies.

**Council Comments:**
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Criterion 2.5: The program has access to financial and physical resources that are adequate to fulfill its operating needs, accomplish the mission, teach the required curriculum and provide an environment that facilitates student learning, including faculty office space, classroom space and student gathering space.

Finding:
Met

Team Comments:

Observations from the Self-Study
The program is housed in the M. Christine Schwartz Center for Nursing and Health Studies. This facility features classrooms, laboratories, informal meeting space, seminar and conference rooms, computer labs and faculty offices. In addition, the Office of Student Services, which houses the school’s academic advisors, is also located in the facility.

The program’s financial resources come primarily from university funds, which are allocated first to the school and then dispersed by the dean. In addition, the program receives funds from student tuition and for student and faculty travel as well as student organizations. Over the last five years, the program’s budget has more than doubled as the program’s enrollment has increased.

Observations on the Site Visit
The dean and university leaders confirmed a strong commitment to the public health program. They said that the public health program fits into the strategic plan of the university and serves students from every school in the general education programming.

University leaders said that they anticipate program enrollment and outside demand for public health courses to continue to grow, and they recognize that additional resources will be needed as this occurs.

The students and faculty expressed satisfaction with the physical resources available to the program.

Commentary:
(if applicable)
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Criterion 2.6: The academic support services available to the program are sufficient to accomplish the mission and to achieve expected student outcomes. Academic support services include, at a minimum, the following:

- computing and technology services
- library services
- distance education support, if applicable
- advising services
- public health-related career counseling services
- other student support services (e.g., writing center, disability support services), if they are particularly relevant to the public health program.

Finding:
Met

Team Comments:

Observations from the Self-Study

A number of academic support services exist on campus to help the program accomplish its mission. At the institutional level, these services include the UM Otto G. Richter Library, which provides students with access to 324 cross-discipline databases include access to major health science databases (e.g., PubMed, Medline, CINAHL, Cochrane Library, EMBASE and PsycINFO).

Program and student needs are also met through other institutional services including the UM Writing Center, the Office of Civic and Community Engagement, the Butler Center for Service and Leadership, Camner Center for Academic Resources, Counseling Center, Office of Disability Service and the Ombudsperson, Toppel Career Center, Academic Technologies and the Student Health Center.

Six full-time information technology staff members and one instructional designer are employed in the SONHS to provide technical support to program faculty. This team assists faculty with advanced technology and digital media production needs associated with classroom instruction.

Program-level advising occurs through the Office of Student Services. The SONHS has 10 staff members in this office who assist students with admissions, registration and advising. While program faculty are available to provide career advising, one half-time advisor through the Office of Student Services is dedicated to the program. The Toppel Career Center also provides students with general services related to resume writing, interviewing and employment
searches. The SONHS has co-sponsored one healthcare networking event with the Toppel Career Center. The center is also hosting a Professional Development Academy for SONHS students that will provide knowledge and skills necessary for career success.

Observations on Site

Site visitors confirmed that adequate academic support services exist to meet student needs. Advising occurs through the Office of Student Services. Two advisors are employed through this office who have advising responsibilities in the SONHS. An assistant dean in the Office of Student Services manages advising activities and supervises advising staff. The assistant dean reports that advising processes within the Office of Student Services have been modified over the past year to better meet the needs of students. The concern with resources available for program-specific advising is addressed in Criterion 2.4. Additional information on student advising can be found in Criterion 6.0.

Commentary:
(if applicable)

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Compliance Concern:
(if Partially Met or Not Met)

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Institution Comments:

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Council Comments:

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### 3.0 FACULTY QUALIFICATIONS

**Criterion 3.1:** The program meets the requirements of regional accreditors for faculty teaching baccalaureate degree students. Faculty with doctoral-level degrees are strongly preferred and, in most cases, expected. A faculty member trained at the master’s level may be appropriate in certain circumstances, but the program must document exceptional professional experience and teaching ability.

**Finding:**

| Met |

**Team Comments:**

**Observations from the Self-Study**

| The University of Miami is accredited by the Southern Association of Schools and Colleges and is fully accredited through 2020. |

| A total of eight full- and part-time faculty currently teach in the program and hold terminal degrees. Of the full-time faculty, three hold PhDs in public health disciplines including epidemiology and bio-behavioral health. Of these three, one faculty member also holds an MPH. The fourth full-time faculty member holds an MD and is completing a PhD in multidisciplinary human services with a concentration in public health. The part-time faculty hold degrees in public health, education and nursing. One part-time faculty member is in the process of completing her terminal degree and has significant public health experience. |

| Faculty who do not have a terminal degree in a public health-related area have strong evaluation, healthcare or public health-related professional experience. |

**Observations on Site**

| Site visitors confirmed that the program’s faculty meet the requirements for faculty teaching baccalaureate students. |

| The one part-time faculty member who is in the process of completing her terminal degree in public health has exceptional professional experience through her work with the Healthy Start Coalition of Miami-Dade County as well as program planning experience through the Florida Department of Health and the March of Dimes. |
Commentary:
(if applicable)
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Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
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Council Comments:
Click here to enter text.
**Criterion 3.2:** The designated leader of the program is a **full-time faculty member** with educational qualifications and professional experience in a **public health discipline.** If the designated program leader does not have educational qualifications and professional experience in a public health discipline, the program documents that it has sufficient public health educational qualifications, national professional certifications and professional experience in its primary faculty members. Preference is for the designated program leader to have formal doctoral-level training (e.g., PhD, DrPH) in a public health discipline or a terminal professional degree (e.g., MD, JD) and an MPH.

**Finding:**
Met

**Team Comments:**

**Observations from the Self-Study**

| The designated leader of the program is a full-time faculty member in the school and serves as an associate dean with responsibilities for the BS in health science and MS in health informatics in addition to the BSPH. The designated leader holds a PhD in pharmaceutical science from St. John’s University and has extensive experience in curricular development and accreditation in health-related disciplines. He is currently pursuing an MPH degree from the University of South Florida in public health practice and expects to graduate in 2018. |

**Observations on Site**

| Although the designated leader does not have public health experience or a public health-related degree, site visitors confirmed that faculty teaching in the program have relevant degrees and public health-related experience. Of the four full-time faculty members, three have doctoral degrees in public health areas. Additionally, one holds an MPH. The final full-time faculty member holds an MD and is completing a PhD in multidisciplinary human services with a concentration in public health. |

In addition, part-time faculty hold degrees in public health and other health fields and have professional experience in public health. For example, faculty have held positions with Health Start Coalition of Miami Dad, Sabin Vaccine Institute and the Florida Department of Health and Children’s Medical Services. |

**Commentary:**

*(if applicable)*
Compliance Concern:  
(if Partially Met or Not Met)  
Click here to enter text.

Institution Comments:  
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Council Comments:  
Click here to enter text.
Criterion 3.3: Practitioners are involved in instruction through a variety of methods (e.g., guest lectures, service learning, internships and/or research opportunities). Use of practitioners as instructors in the program, when appropriate, is encouraged, as is use of practitioners as occasional guest lecturers.

**Finding:**
Met

**Team Comments:**

**Observations from the Self-Study**
Practitioners are involved in instruction and practical learning with the program. The self-study lists 43 practice partners from local public health-related nonprofits, global practicum partners, the Minority Health Disparities International Research Training Program and El Centro Research who serve as guest lecturers, practicum preceptors and research mentors.

**Observations on Site**
Students and faculty spoke extensively about practitioner involvement in the curriculum. Lectures, course instruction and practicum efforts were described in detail. One adjunct instructor was identified as a current practitioner in a local public health agency. Site visitors also met with practice partners who have served as practicum preceptors.

**Commentary:**
*(if applicable)*

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**Compliance Concern:**
*(if Partially Met or Not Met)*

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**Institution Comments:**

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**Criterion 3.4:** All faculty members are informed and current in their discipline or area of public health teaching.

**Finding:**

Met

**Team Comments:**

Observations from the Self-Study

Faculty members in the program stay informed and current in the field through a number of activities including attendance at local, national and international conferences; faculty development workshops; participation in symposia; involvement with community partners; and by conducting original research.

Tenure-track faculty in the program are expected to present their work at professional meetings and publish in peer-reviewed journals. In addition, they are expected to pursue external funding to support their research activities.

The SONHS provides the resources for each faculty member to attend one professional meeting a year. An additional meeting may be approved if the faculty member is presenting their research. The college also provides funds for professional membership dues.

Observations on Site

Site visitors confirmed that the activities noted in the self-study are regularly undertaken. Part-time faculty reported that they stay current through involvement with community organizations and groups such as coalitions.

Faculty described attending conferences as well as working with students on research and community-based projects. Research is primarily an expectation of tenure-track faculty, including at least two publications a year. Clinical faculty report that while it is not an official requirement defined in the workload policy, research and publishing is expected for promotion.

**Commentary:**

*(if applicable)*

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Compliance Concern:
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Institution Comments:
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Council Comments:
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Criterion 3.5: Course instructors who are currently enrolled graduate students, if serving as primary instructors, have at least a master’s degree in the teaching discipline or are pursuing a doctoral degree with at least 18 semester credits of doctoral coursework in the concentration in which they are teaching.

**Finding:**
Not Applicable

**Team Comments:**

**Observations from the Self-Study**
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**Observations on Site**
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**Commentary:**
*(if applicable)*
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**Compliance Concern:**
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**Institution Comments:**
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Council Comments:

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4.0 CURRICULUM

Criterion 4.1: The overall undergraduate curriculum (eg, general education, liberal learning, essential knowledge and skills, etc.) introduces students to the following domains:

- the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease
- the foundations of social and behavioral sciences
- basic statistics
- the humanities/fine arts

The curriculum addresses these domains through any combination of learning experiences throughout the undergraduate curriculum, including general education courses defined by the institution as well as concentration and major requirements or electives.

Finding:
Met

Team Comments:

Observations from the Self-Study

To complete the program, students must complete 120 credit hours, 18 of which are required by the university’s Areas of Knowledge requirement. This requirement is satisfied by completing three cognates: Arts & Humanities; People & Society; and Science, Technology, Engineering & Mathematics. Students must complete nine credit hours in each cognate.

Students must also complete the university’s general education requirements. Program students complete these requirements in English composition, advanced writing and communications skills, mathematics/statistics/computer science, social science, modern language and natural science.

Students are introduced to the foundations of scientific knowledge, including the biological and life sciences and the concepts of health and disease in required biology and chemistry courses. Additionally, as part of the program, students take BPH 352 Biological Principles of Public Health.

Students are introduced to the foundations of social and behavioral sciences through the required People & Society cognate, as well as through a required social science elective course. In addition, the program requires that all students complete PSY 110 General Psychology.
Students are required to complete BPH 202 Introduction to Statistics and BPH 465 Public Health Statistics and Data Management.

Students are introduced to the humanities and fine arts through the Arts & Humanities cognate as well as through required English composition courses.

Observations on Site
Site visitors confirmed the general education requirements and associated program courses with faculty and students.

Commentary:
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Compliance Concern:
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Institution Comments:
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Council Comments:
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**Criterion 4.2:** The requirements for the public health major or concentration provide instruction in the following domains. The curriculum addresses these domains through any combination of learning experiences throughout the requirements for the major or concentration coursework (ie, the program may identify multiple learning experiences that address a domain—the domains listed below do not each require a single designated course).

- the history and philosophy of public health as well as its core values, concepts and functions across the globe and in society
- the basic concepts, methods and tools of public health data collection, use and analysis and why evidence-based approaches are an essential part of public health practice
- the concepts of population health, and the basic processes, approaches and interventions that identify and address the major health-related needs and concerns of populations
- the underlying science of human health and disease including opportunities for promoting and protecting health across the life course
- the socioeconomic, behavioral, biological, environmental and other factors that impact human health and contribute to health disparities
- the fundamental concepts and features of project implementation, including planning, assessment and evaluation
- the fundamental characteristics and organizational structures of the US health system as well as the differences in systems in other countries
- basic concepts of legal, ethical, economic and regulatory dimensions of health care and public health policy and the roles, influences and responsibilities of the different agencies and branches of government
- basic concepts of public health-specific communication, including technical and professional writing and the use of mass media and electronic technology

**Finding:**
Met with Commentary

**Team Comments:**

**Observations from the Self-Study**

The curriculum consists of a clearly articulated core set of courses that provide students with a solid foundation in public health. Students must complete 27 credits in required core courses and six additional credits in public health electives.

The program has provided a detailed matrix of its curricular review of the domain areas. Domain areas were designated as “introduced” if key concepts of the domain were defined and presented in the broader context of the course. Domain areas were designated as “covered” if key concepts of the domain were presented with a high level of detail (ie, in-depth analysis, application and evaluation of the domain).

In reviewing the information provided in the self-study, site visitors confirmed that each public health domain area is introduced in one required course and covered in another required course.
with the exception of health communications and the use of electronic communications, which has less documentation.

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<th>Observations on Site</th>
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<td>Faculty described the process for mapping the curriculum to the required domain areas as a robust activity involving all full-time faculty. Faculty worked with those who taught the same courses to ensure equivalence across sections. The faculty reviewed the matrix as a whole at the annual retreat and worked to eliminate redundancies.</td>
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However, faculty acknowledged that during the exercise, not all faculty had a consistent understanding of the difference between introduced and covered. As a result, the health communication domain area was not correctly mapped. The faculty were able to discuss several assessments across courses including BPH 321 Health Promotion and Disease Prevention, where students use electronic technology in public health-specific communications.

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<td>The commentary relates to the fact that the program underrepresented their coverage of the health communications domain area. Underrepresentation was a reflection of the process faculty used to map their curriculum to the required domains. As site visitors probed the integration of health communications in the program, several clear examples were provided as to how the domain was covered in other courses. For example, in BPH 310 Global Health, students use technology to communicate public health data through data visualizations exercises.</td>
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<tr>
<td>We appreciate the site reviewers recognizing that we had underrepresented our coverage of the health communications domain area. We will revise our future course mapping to reflect more accurate coverage of this important domain.</td>
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**Criterion 4.3:** If the program intends to prepare students for a specific credential, then the curriculum must address the areas of responsibility required for credential eligibility (eg, CHES).

**Finding:**
Not Applicable

**Team Comments:**

Observations from the Self-Study
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Observations on Site
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**Commentary:**
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Criterion 4.4: Students must demonstrate the following skills:

- the ability to communicate public health information, in both oral and written forms and through a variety of media, to diverse audiences
- the ability to locate, use, evaluate and synthesize public health information.

Finding:
Met

Team Comments:

Observations from the Self-Study

Students demonstrate skills in communication and information literacy across the required public health curriculum.

For example, in BPH 310 Global Health, students produce country-specific written assignments that culminate in an oral presentation on the topic. This course also requires students to demonstrate the use of a variety of media by creating a data visualization, such as an infographic, data aggregation or data map.

In BPH 321 Health Promotion and Disease Prevention, students complete at least 20 hours at a community-based organization where they communicate and interact with diverse audiences. This course also requires students to demonstrate written communication in the form of a technical analysis paper and an extended intervention. As part of this intervention, students must locate required information through a literature review and use this to inform their project.

In BPH 465 Public Health Statistics, students learn to access and use publicly available data sets to run various statistical analyses, interpret the results and analyze future implications in a written report.

Observations on Site

Students who met with site visitors described experiences throughout the curriculum and during their internships that required them to employ skills in public health communication and information literacy. BPH 321 Health Promotion and Disease Prevention was regularly cited as a class that allowed students to build on their skills in these areas by researching an interest area in depth, developing an intervention and then communicating that project to different audiences and tailoring the communication appropriately.
Additionally, internship supervisors said that they were pleased with the communications skills of their interns. Both internship placements represented require students to work in communities that are underserved and underrepresented. The preceptors described program students as respectful and willing to learn how to best communicate with the select community.

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Council Comments:
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Criterion 4.5: Students have opportunities to integrate, synthesize and apply knowledge through cumulative and experiential activities. All students complete a cumulative, integrative and scholarly or applied experience or inquiry project that serves as a capstone to the education experience. These experiences may include, but are not limited to, internships, service-learning projects, senior seminars, portfolio projects, research papers or honors theses. Programs encourage exposure to local-level public health professionals and/or agencies that engage in public health practice.

Finding:
Met

Team Comments:

Observations from the Self-Study

Students integrate, synthesize and apply knowledge in courses and experiences throughout the curriculum. Several of these courses include service learning projects and assignments that build on one another throughout the course.

All students complete BPH 490 Fieldwork Practicum in Community Health at the end of their degree program. In BPH 490, students complete 84 hours at a health-related agency that advocates for health education and promotion. As part of this experience, students conduct a literature review to research a health disparity addressed by their organization and write a program plan and evaluation to address the identified disparities.

Observations on Site

The team discussed BPH 490 at length with faculty who provided further detail of the expectations for the practicum and related course. In addition to the field hours, BPH 490 includes some classroom work. The majority of the classwork is a refresher of information that is needed to complete the cumulative portions of the students’ projects. For example, students learn about logic models early in the curriculum and practice using them in BPH 490.

The final project, while not a thesis by name, encapsulates the entire coursework learning objectives and requires an extensive written report. The site visit team reviewed samples of student projects from the cumulative experience and determined that they provided strong evidence of students integrating and synthesizing knowledge from throughout the program.

Students who met with the site visit team described their work and experiences in the practicum. They said that the experience was challenging but provided a rewarding capstone to their
degree program. Preceptors who met with the site visitors spoke highly of both the students and their projects. Students and faculty repeatedly praised the course and its curriculum placement.

Commentary: 
(if applicable)

Compliance Concern: 
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Institution Comments: 
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Council Comments: 
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Criterion 4.6: The overall undergraduate curriculum and public health major curriculum expose students to concepts and experiences necessary for success in the workplace, further education and life-long learning. Students are exposed to these concepts through any combination of learning experiences and co-curricular experiences. These concepts include the following:

- advocacy for protection and promotion of the public’s health at all levels of society
- community dynamics
- critical thinking and creativity
- cultural contexts in which public health professionals work
- ethical decision making as related to self and society
- independent work and a personal work ethic
- networking
- organizational dynamics
- professionalism
- research methods
- systems thinking
- teamwork and leadership

Finding:

Met

Team Comments:

Observations from the Self-Study

The program exposes students to the required concepts through its required curriculum. Additional exposure is provided to students through elective courses and activities such as global practicum trips and research projects. The program aims to provide students with experiences that will develop the real-life skills required to be successful graduate students and public health professionals.

BPH 321 Health Promotion and Disease Prevention is a required course that addresses advocacy for the protection and promotion of the public’s health at all levels of society, community dynamics, research methods and teamwork and leadership.

BPH 301 Human Sexuality in Vulnerable Populations is an elective that provides opportunities for exposure to advocacy, critical thinking and creativity, cultural contexts in which public health professionals work, ethical decision making as related to self and society and networking.
BPH 487 Global Practicum is an elective experience that exposes students to the concepts of systems thinking, teamwork and leadership, professionalism and independent work and a personal work ethic.

Observations on Site
The site visit team met with faculty, students, alumni and community stakeholders who each provided examples of how students are exposed to the required concepts.

In addition to the curricular examples, faculty discussed the Health Sciences Student Association, which has developed programming and resources for all of the school's students including public health students. For example, the organization has secured $11,000 in student travel dollars to support student travel to global community practice sites. These funds will subsidize student experiences in community dynamics and cultural contexts in which public health professionals work. The faculty also discussed the Healthcare Meetups organized by the Office of Student Services, which brings potential employers to campus for a networking event each year.

Students described having to take individual projects and combine them into group projects, exposing them to teamwork and creativity. One alum also discussed how she was inspired by some data entry during her internship to develop an intervention for transgender youths who are HIV positive, which demonstrated critical thinking and creativity. Internship supervisors described integrating students into their organizations and exposing them to organizational dynamics.

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Institution Comments:
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Council Comments:
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Criterion 4.7: Syllabi for required and elective courses for the major include objectives that are sufficient to demonstrate that they address the domain(s) identified in Criterion 4.

Finding:
Met

Team Comments:

Observations from the Self-Study
The program provided syllabi for all required and elective courses in the electronic resource file. All syllabi include course objectives.

The program plans to implement a standardized template for program courses in the coming year. The reformatted syllabi will include specific student outcomes and elements of the course that assess the outcome. The program plans for this template to assist in data collection for ongoing curriculum and program assessment.

Observations on Site
Site visitors reviewed the syllabi provided in the electronic resource file. The course objectives and assignment descriptions provided were sufficient to evaluate the domains identified in Criterion 4.

Commentary:
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Compliance Concern:
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Institution Comments:
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5.0 PROGRAM EFFECTIVENESS

Criterion 5.1: The program defines a mission statement that guides program activities and is congruent with the mission statement(s) of the parent institution(s).

Finding:
Met

Team Comments:

Observations from the Self-Study
The program has a clear mission statement that aligns with the guiding statements of the school and university. The mission statement of the program is “to develop competencies in public health among undergraduate students, equip undergraduate students for entry-level public health positions, and develop a pipeline of undergraduate students who will pursue graduate studies in public health and related disciplines.”

The program mission is congruent with the school’s, which is “to educate students and support faculty committed to excellence in nursing and health science. In addition, the school seeks to create and disseminate health knowledge and prepare culturally competent leaders to provide safe service to our community through education, research, and practice.”

Observations on Site
The site visit team confirmed that the program is committed to the mission statement and seeks to prepare students for practice and graduate education. For example, faculty reported a strong collaborative relationship with the university’s accredited graduate-level public health program and have developed an accelerated option for students wishing to pursue an MPH at the university.

Commentary:
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Institution Comments:
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Council Comments:
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Criterion 5.2: The program defines expected student learning outcomes that align with the program’s defined mission and the institution’s regional accreditation standards and guide curriculum design and implementation as well as student assessment.

Finding:
Met

Team Comments:

Observations from the Self-Study
The program defines 10 expected student learning outcomes. Outcomes were partially based on recommendations for undergraduate public health coursework made by the Association for Prevention Teaching and Research (APTR) and competency areas outlined by the National Board of Public Health Examiners (NBPHE) for certification in public health (CPH).

The program’s expected learning outcomes are:
1. Apply knowledge from multiple disciplines to define and describe public health problems locally and globally.
2. Use principles of epidemiology to describe health and alterations in health.
3. Interpret quantitative and qualitative research findings in the medical, nursing, public health, and social science literature.
4. Examine the principal determinants of health problems facing the world’s populations within social, economic, and political contexts.
5. Identify biological, behavioral, and social principles of health promotion and disease prevention across the life span.
6. Discuss the impact of the physical and social environment on health.
7. Describe the interactions between biological, psychological, environmental, and cultural factors influencing public health and disease prevention strategies.
8. Examine health care policy, finance, and regulatory environments with attention to health care disparities.
9. Demonstrate awareness of local health problems, determinants, and interventions in South Florida, with attention to vulnerable populations.
10. Effectively communicate information related to public health in both speech and in writing, using appropriate information sources, presentation formats, and technologies.
Observations on Site

Site visitors verified that program-level learning outcomes align with the program’s mission and have been in place since the program’s inception in 2012.

**Commentary:**

*(if applicable)*

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**Compliance Concern:**

*(if Partially Met or Not Met)*

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**Institution Comments:**

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**Council Comments:**

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**Criterion 5.3:** The program regularly revisits its mission and expected student outcomes to ensure their continuing relevance.

**Finding:**
Met

**Team Comments:**

Observations from the Self-Study

The faculty review the program’s mission annually through the SONHS evaluation plan and bi-annually at SONHS retreats. The program incorporated this review into its annual program retreats as of the 2017-2018 academic year.

Student learning outcomes are reviewed by faculty through annual public health retreats.

Observations on Site

Site visitors confirmed that program faculty review the mission and expected student outcomes on an annual basis through their program retreats. A review of the retreat agenda confirmed that the meeting included a review of the mission and student learning outcomes. Faculty reported that during the most recent retreat, learning outcome 10, related to communication, was expanded to include various modes of communication as a result of the last review.

Faculty also meet monthly and discuss learning outcomes as needed.

**Commentary:**
*(if applicable)*

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**Compliance Concern:**
*(if Partially Met or Not Met)*

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**Institution Comments:**

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Council Comments:
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Criterion 5.4: The program defines and implements a plan that determines the program’s effectiveness. Methodologies may vary based on the mission, organization and resources of the program, but whatever the approach, assessment processes are analytical, useful, cost-effective, accurate and truthful, carefully planned and organized, systematic and sustained.

At a minimum, the plan includes regular surveys or other data collection (eg, focus groups, key informant interviews, data from national exams (eg, CHES) from:

- enrolled students
- alumni
- relevant community stakeholders (eg, practitioners who teach in the program, service learning community partners, internship preceptors, employers of graduates, etc.)

Data collection must address student satisfaction with advising.

The program collects quantitative data at least annually on 1) graduation rates within the maximum time to graduation allowed by the institution and 2) rates of job placement or continued education within one year of graduation. The program defines plans, including data sources and methodologies, for collecting these data, identifies limitations and continually works to address data limitations and improve data accuracy. The program’s plan does not rely exclusively on institution- or unit-collected data, unless those data are sufficiently detailed and descriptive. Data collection methods for graduates’ destinations are sufficient to ensure at least a 30% response rate.

The program collects qualitative data on the destination of graduates related to both employment and further education, such as type of graduate degree pursued and sector of employment, as defined by the program.

Finding:
Met with Commentary

Team Comments:

Observations from the Self-Study

The program assesses programmatic effectiveness on an annual basis. The program collects data from students, alumni and relevant community stakeholders through various mechanisms.

The program conducts focus groups with graduating students each spring as part of BPH 490 Field Practicum in Community Health. These focus groups are designed to gather feedback on student satisfaction, specific strengths and weaknesses of the program, quality of instruction and quality of advising. Students are also asked about their plans after graduation. Using this methodology, the program has a 100% response rate for collecting data on graduates’ destinations. In addition to this focus group, the university’s Office of Planning, Institutional Research and Assessment administers a graduating student survey. This survey collects information on student learning outcomes, satisfaction with the major, post-graduation plans
and student involvement. The survey’s response rate was 75% in 2014 and 2015 and 73% in 2016.

As of 2016, the program had 27 alumni. In 2016, 15 students graduated and nine (60%) responded to an alumni survey. Of the nine respondents, 100% were either employed or enrolled in graduate programs. Alumni pursue graduate degrees in public health, medicine, nursing and law. Additionally, alumni enter the workforce in positions such as Americorps, Peace Corps, public health non-profits and research. Of the 27 students who graduated in 2017 and participated in the associated focus group, 89% were employed or enrolled in graduate school.

Preceptors complete evaluations of program students at the conclusion of their internship. These data are compiled in a report and reviewed by the program faculty during the annual faculty retreat.

The program identified a list of curricular activities that serve as assessment tools for each of the program’s student learning outcomes. Site visitors reviewed examples of these assessments in the electronic resource file.

Observations on Site

The alumni survey is administered by the school annually; therefore, there was not yet data from this survey for students who graduated in spring 2017 at the time of the site visit. The program does not have any supplemental formal contact with alumni, although faculty are administrators for a Facebook group for program faculty and alumni.

Community partners who met with the site visit team expressed a desire to professionalize their relationship with the program. This could include additional opportunities for data collection.

Commentary: (if applicable)

The commentary relates to the program’s limited data collection from alumni and community partners. As the program continues to graduate more students, program-specific data collection methods may be required. Internship supervisors are the only community partners currently surveyed by the program. The information provided is student-specific, although it can be extrapolated to evaluate the program as a whole. The program does not explicitly ask
preceptors about their overall impressions of the program or how the program as a whole is meeting their needs or may be improved. Tailoring data collection for the purpose of programmatic effectiveness could result in more useful data.

Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
To better remain connected with recent graduates and alumni, the program has started a Facebook page. A full-time dedicated individual from the School of Nursing and Health Studies (Ms. Danette Perez) has also now been designated to conduct e-mail surveys of our BSPH graduates in the Spring of each academic year. Personal e-mail and contact information for all graduating BSPH seniors will also be collected at the focus group that is conducted at the end of the Spring semester of the their senior year. This contact information will be used in addition to their life-long University of Miami email accounts to reach out to them for future alumni surveys.

In order to obtain better feedback from community partners regarding our BSPH program, we are now conducting both mid-semester and end of semester evaluations with all community partners who currently take our students for their Community Health Capstone Practicum. These evaluations now include questions related to the partners impressions of how well our program meets their needs and includes open-ended questions that affords them an opportunity to provide input into as to how the program might be improved. Students also now complete a self-reflection with their community partner that addresses how the program has helped them met the needs of our partners and if there are any changes that might be made to better address those needs in the future.

Council Comments:
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**Criterion 5.5:** The program demonstrates that at least 70% of students for whom data are available graduate within six years or the maximum time to graduation as defined by the institution, whichever is longer. The program demonstrates that at least 80% of graduates for whom data are available have secured employment or enrolled in further education within one year of graduation. If the program cannot demonstrate that it meets these thresholds, the program must document 1) that its rates are comparable to similar baccalaureate programs in the home unit (typically a school or college) and 2) a detailed analysis of factors contributing to the reduced rate and a specific plan for future improvement that is based on this analysis.

**Finding:**
Met

**Team Comments:**

**Observations from the Self-Study**

The university has a maximum time to graduation of six years. On average, program students graduate in 3.21 years.

The cohort entering in 2012 had a graduation rate of 75%. This cohort consisted of four students: three graduated on time from the program, and one graduated on time from a different major. The cohort entering in 2013 had a graduation rate of 79%. The cohort entering in 2014 has a graduation rate of 76%, with four students still enrolled in the program.

The program’s first graduates completed the program in 2016. The program’s job placement rate was 100% for these graduates. The job placement rate is currently 89% for students who graduated in 2017.

**Observations on Site**

Site visitors confirmed the program’s graduation and job placement rates with program faculty and advisors on site.

**Commentary:**

*(if applicable)*

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**Compliance Concern:**

*(if Partially Met or Not Met)*

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Institution Comments:
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Council Comments:
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Criterion 5.6: The program establishes a schedule for reviewing data on student outcomes and program effectiveness. The program uses data on student outcomes and program effectiveness to improve student learning and the program.

Finding:
Partially Met

Team Comments:

Observations from the Self-Study

Program faculty review programmatic data as it becomes available at monthly faculty meetings. The faculty also review assessment data on an annual basis. The program faculty annual retreat was last held in May 2017, and the main goal was to review assessment data.

The program has made changes based on assessment data. For example, the academic advising process for program students was revised and additional training for advisors was implemented as a result of data from the graduating student survey. Also in response to the graduating student survey, the program began to offer introductory courses multiple times a year to reduce class sizes. Based on feedback from student focus groups, a course in research methods will be added to the curriculum in spring 2018.

The self-study does not include a description of a review schedule for data on student outcomes.

Observations on Site

Faculty who met with the site visit team described how data from the senior student focus groups and graduating senior survey is regularly reviewed. However, there is a lack of evidence of reports, committee meeting minutes or other sources to substantiate a regularly scheduled review of student learning outcomes or other programmatic effectiveness data. Faculty reported reviewing assessments from courses, but acknowledged that no overall programmatic review exists. Faculty who met with site visitors confirmed that data from the assessments defined in Criterion 5.4 are not compiled and reviewed to evaluate program effectiveness.

Commentary:
(if applicable)

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Compliance Concern:
(if Partially Met or Not Met)
The concern relates to the lack of scheduled, regular review of performance data for the student outcomes defined in Criterion 5.2. The agenda from the faculty retreat included a review of current BSPH educational outcomes; however, conversations on site revealed that this did not include performance data from students. In addition, the graduating student survey and focus group questions provided in the ERF did not include any direct measures of student learning outcomes.

Institution Comments:
The program currently has a plan in place to assess the achievement of student learning outcomes and program effectiveness on a yearly basis (see attachment A). The assessment of individual student learning outcomes (SLO’S) and indicators of program effectiveness will occur on a rotating basis. For the academic years 2018-2020, three SLO’s will be assessed along with one key indicator of program effectiveness. Data from these assessments will be reviewed by the program director and program faculty as on an annual basis. These data will also be reviewed on an annual basis by the University of Miami Office of Assessment and Accreditation as part of our ongoing accreditation review by the Southern Association of Colleges and Schools (SACS).

Council Comments:
Click here to enter text.
Criterion 5.7: The program maintains clear, publicly available policies on student grievances or complaints and maintains records on the aggregate number of complaints received for the last three years.

Finding:
Met

Team Comments:

Observations from the Self-Study

If students are unable to resolve a complaint, such as a grade dispute, with the course instructor, they may take the issues to the associate dean. The associate dean will attempt to intervene and resolve the issue informally. If no resolution is found, students can begin the formal academic appeals process, and the issue will be taken to the dean. Students can also redress the grievance to the university ombudsperson if there continues to be no resolution or if they feel that the matter has been handled unfairly. The policies and procedures for student grievances are available in the Student Rights and Responsibilities Handbook.

The self-study noted that no complaints or grievances have been filed during the self-study period.

Observations on Site

Interviews with faculty and students confirmed that no grievances or complaints have been referred to the Dean’s Office. Faculty noted that most complaints are minor and are resolved between the individual faculty member and student without rising to the level of a formal complaint with administration involvement. The university’s Office of the Ombudsman retains complaint/grievance records and results. Students confirmed knowledge of grievance policies and procedures. Students and faculty were aware of the existence and location of grievance and complaint policies.

Commentary:
(if applicable)

Click here to enter text.

Compliance Concern:
(if Partially Met or Not Met)

Click here to enter text.
6.0 ADVISING

Criterion 6.1: Students are advised by program faculty (as defined in Criterion 2.1) or qualified program staff beginning no later than the semester (quarter, trimester, term, etc.) during which students begin coursework in the major and continuing through program completion. Advising includes academic planning and selection of courses as well as public health-related career counseling.

Finding:
Met with Commentary

Team Comments:

Observations from the Self-Study

Advising occurs through several avenues. At the university, undergraduate academic and career advising has been decentralized, and advising is primarily the responsibility of the school’s Office of Student Services. Through this office, 10 staff members work to administer and provide advising across the school. Two advisors with the office are dedicated to undergraduate advising. Presently, an open advising system is used where students can meet with any available advisor on a walk-in basis. Students are required to meet with an advisor once during fall semester and once during spring semester to receive assistance with registration and schedule building.

The UM Toppel Career Center also provides institution-level career services to current students and new graduates. The center exists to help students develop skills in resume writing, interviewing and employment searching.

At the program level, public health faculty are available for public health-specific career advising. There is no formal faculty advising system in place. Professional advisors in the Office of Student Services also provide career advising.

Observations on Site

Site visitors learned that the UM Toppel Career Center is developing a Public Health Institute to assist students in their preparation for the workforce. The UM Toppel Career Center is working with the SONHS Office of Student Services and assistant dean of student affairs to develop this institute.

Other initiatives are occurring through the school’s Office of Student Services to help prepare students for careers in public health. Healthcare Meetups have been held where students can
connect and network with professionals in the fields of healthcare and public health. In addition, a healthcare week has been held within the past year that involved as many as 25 professionals from organizations that exposed students to opportunities. A professional development academy is also being offered that involves a nine-week course focusing on communication, thinking and reasoning and professionalism.

Site visitors also confirmed that two senior advisors are currently on staff in the Office of Student Services. Students access advisors on a walk-in first come, first served basis. The assistant dean of student services reported that although advisors are busy, they are typically able to accommodate student demand for advising. In addition, new systems and procedures for advising were instituted during fall 2016 that helped to streamline advising serves for students. For example, an online training tool (academic reference form) was implemented that walks new students through their degree requirements. Once the reference form is completed by the student, a copy is reviewed by an advisor who assists with registration. This process has elevated the types of questions that students ask, including about career advising. Additionally, since fall 2016, advisors have undergone additional training and increased communication with the program faculty.

Several senior-level students who met with the site visit team reported having received inaccurate advising in the past that led to delays in graduation and missed opportunities for graduate school. These issues with advising services occurred prior to changes in systems and procedures noted previously. Site visitors did not meet with any students who entered the program under the new advising protocols.

Students said that public health-specific career counseling happens with the program faculty. While they are not assigned to specific faculty advisors, students said that the program faculty are readily available after class and during office hours to discuss career and graduate school goals.

**Commentary:**
*(if applicable)*

The commentary relates to the fact that academic planning and course scheduling for students has been inadequate for some students who are still matriculating through the program. The program has made positive changes in advising systems and procedures; however, changes have not completely addressed the concerns expressed by junior- and senior-level students.
Students noted that communication between program faculty and SONHS advisors could be improved.

While the school’s Office of Student Services is providing valuable professional development programming and networking opportunities, it does not provide public health-specific career counseling. Program faculty have an open-door policy, and students are free to access them for career counseling. However, no formal or systematic career counseling effort currently exists in the program where all students have the established opportunity to experience public health-specific career counseling. The onus is on the student to seek out public health career counseling.

**Compliance Concern:**
*(if Partially Met or Not Met)*

**Institution Comments:**

Communication between advisors and program faculty has improved greatly during the last year. Undergraduate advisors are encouraged to contact the program director or program faculty directly if they have any uncertainty about courses, curriculum or the program in general. All incoming freshmen now also complete an Academic Reference Form (ARF) online before they are able to register for their first semester. The ARF is an educational tool that walks them through their degree requirements, requires them to think about the courses they would like to take as a SONHS student, and helps them generate their first semester schedule. Our new student orientation sessions were also revised to include a 2-hour graduation plan building class where all students will build on the knowledge they gained through the ARF and will actually put together the first draft of their graduation plan. This plan will account for all of their degree requirements as well as the items they must do to achieve their goals (e.g., professional school requirements, research, study abroad, etc.). Once they put together their initial graduation plan, they will be able to bring it to an advising session for a one-on-one critique with an academic advisor. We believe this will further empower students to take charge of their education and will further promote higher-order thinking as related to academic and career advising. The orientation session information will also be offered as an online webinar starting in Fall 2018 so that we can run it live with the incoming students and post it for any others to use throughout the semester. We would then rerun and rerecord this each Fall and Spring.
Based on student surveys and focus groups, a number of additional changes were implemented in 2017-2018 to improve advising satisfaction. These changes include:

- Additional training for undergraduate advisors
- Better and more frequent communication between advisors and the BSPH program faculty and the Associate Dean
- Development of a clear and detailed advisor worksheet for the BSPH
- Development of a “Next Steps” plan for advising which includes:
  - Creating intentional avenues through one-on-one advising sessions, events and web resources to discuss career plans, graduate school options, goals, research opportunities and to form action steps with students.
  - Encouraging students to develop graduation plans and to meet one-on-one with an advisor for a graduation plan critique.
  - Addressing all course catalog issues for the 2017-2018 academic year to ensure uniformity and accuracy.

Council Comments:
Click here to enter text.
7.0 DIVERSITY

**Criterion 7.1**: The program demonstrates a commitment to diversity and provides evidence of an ongoing practice of cultural competence in student learning.

Aspects of diversity may include, but are not limited to, age, country of birth, disability, ethnicity, gender, gender identity and expression, language, national origin, race, refugee status, religion, culture, sexual orientation, health status, community affiliation and socioeconomic status. This list is not intended to be exhaustive.

Cultural competence, in this context, refers to skills for working with diverse individuals and communities in ways that are appropriate and responsive to relevant cultural factors. Requisite skills include self-awareness, open-minded inquiry and assessment and the ability to recognize and adapt to cultural differences. Reflecting on the public health context, recognizing that cultural differences affect all aspects of health and health systems, cultural competence refers to the skills for recognizing and adapting to cultural differences. Each program defines these terms in its own context.

Programs can accomplish these aims through a variety of practices including the following:

- incorporation of diversity and cultural competency considerations in the curriculum;
- recruitment/retention of faculty, staff and students; and
- reflection in the types of research and/or community engagement conducted.

*(For evidence, see DR 7-1 and DR 7-2)*

**Finding:**
Met

**Team Comments:**

**Observations from the Self-Study**

The concepts of diversity and cultural competence are built on throughout the public health curriculum. Courses highlighting cultural competence, ethnic or racial differences and disparities are taught across curricula elements. For example, courses in global health and health promotion and disease prevention include content related to health disparities and underrepresented populations including service learning projects with community partners. In addition to this required coursework, students can take electives that further integrate cultural competence and diversity into their education. In BPH 305 Issues in Health Disparities, students work with at-risk populations in Miami as part of a service learning project addressing health disparities. The Global Health Practicum is a strong example of immersing students in another culture.
Faculty, students and guest lecturers represent diverse backgrounds and contribute to a culturally competent educational experience. Students also have opportunities to work with faculty on their research. Faculty research includes health disparities across underrepresented populations such as the LGBTQ community. Student and faculty diversity reflects a commitment to recruitment and retention of underrepresented populations.

Observations on Site
Interviews confirmed faculty competence in diversity topics as well as experiential elements for students. Several capstone experiences have been located in LGBTQ nonprofit organizations, and site preceptors noted student preparation and professionalism. Student who met with site visitors said that the diverse makeup of their peers and faculty and the exposure to the local community has added a richness to their undergraduate experience.

The university administration confirmed support and dedication to cultural competency and diversity in both curricula and faculty/student make up.

Commentary:
(if applicable)
Click here to enter text.

Compliance Concern:
(if Partially Met or Not Met)
Click here to enter text.

Institution Comments:
Click here to enter text.

Council Comments:
Click here to enter text.
8.0 DISTANCE EDUCATION PROGRAMS

Criterion 8.1: A degree program offered via distance education is a curriculum or course of study designated to be primarily accessed remotely via various technologies, including internet-based course management systems, audio or web-based conferencing, video, chat, or other modes of delivery. All methods used by the SBP support regular and substantive interaction between and among students and the instructor either synchronously and/or asynchronously and are:

a) consistent with the mission of the program and within the program’s established areas of expertise;
b) guided by clearly articulated student learning outcomes that are rigorously evaluated;
c) 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 online learners.

(For evidence, see DR 8-1 and DR 8-2)

Finding:
Not Applicable

Team Comments:

Observations from the Self-Study

Click here to enter text.

Observations on Site

Click here to enter text.

Commentary:
(if applicable)

Click here to enter text.

Compliance Concern:
(if Partially Met or Not Met)

Click here to enter text.
Institution Comments:
Click here to enter text.

Council Comments:
Click here to enter text.
Criterion 8.2: The university provides needed support for the program, including administrative, communication, IT and student services.

(For evidence, see DR 8-2)

Finding:
Not Applicable

Team Comments:

Observations from the Self-Study
Click here to enter text.

Observations on Site
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Commentary:
(if applicable)
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Compliance Concern:
(if Partially Met or Not Met)
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Institution Comments:
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Council Comments:
Click here to enter text.
Criterion 8.3: There is an ongoing effort to evaluate the academic effectiveness of the format, to assess learning methods and to systematically use this information to stimulate program improvements. Evaluation of student outcomes and of the learning model are especially important in institutions that offer distance learning but do not offer a comparable in-residence program.

(For evidence, see DR 8-2)

Finding:  
Not Applicable

Team Comments: 

Observations from the Self-Study  
Click here to enter text.

Observations on Site  
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Commentary:  
(if applicable)  
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Compliance Concern:  
(if Partially Met or Not Met)  
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Institution Comments:  
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Council Comments:  
Click here to enter text.
Criterion 8.4: The program has 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. Student identity may be verified by using, at the option of the institution, methods such as a secure login and pass code; proctored examinations; and new or other technologies and practices that are effective in verifying student identity. The university notifies students in writing that it uses processes that protect student privacy and alerts students to any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

(For evidence, see DR 8-3)

Finding:
Not Applicable

Team Comments:

Observations from the Self-Study
Click here to enter text.

Observations on Site
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Commentary:
(if applicable)
Click here to enter text.

Compliance Concern:
(if Partially Met or Not Met)
Click here to enter text.

Institution Comments:
Click here to enter text.
Council Comments:
Click here to enter text.
Thursday November 2, 2017

8:30 am  Site Visit Team Request for Additional Documents
Martin Zdanowicz, PhD, Associate Dean for Health Studies

8:45 am  Executive Session

9:15 am  Break

9:30 am  Meet with Program Leader and Faculty/Staff with significant roles relating to the following criteria:
- Criterion 1: Leadership, Management and Governance (1.1-1.6)
- Criterion 2: Resources (2.1-2.6)
- Criterion 3: Faculty Qualifications (3.1-3.5)
- Criterion 7: Diversity (7.1)
Martin Zdanowicz, PhD
Andrew Porter, PhD
Ashley Falcon, PhD
Denise Vidot, PhD
Diego Deleon, MD
Linda Parker, PhD
Olivia Ceavers, MPH

10:45 am  Break

11:00 am  Meet with Program Leader and Faculty Related to Curriculum and Degree Programs
Martin Zdanowicz, PhD
Andrew Porter, PhD
Ashley Falcon, PhD
Denise Vidot, PhD
Diego Deleon, MD
Linda Parker, PhD
Olivia Ceavers, MPH

12:15 pm  Break

12:30 pm  Lunch with Students
Alex Klar
Zoe Jacoby
Natalia Morales
Dann Gomez
Ji Su Lee
Sania Kamran

1:30 pm  Break
1:45 pm  Meet with Faculty and Staff with Significant Responsibilities related to the following criteria:
- **Criterion 1**: Leadership, Management and Governance (1.4, 1.5)
- **Criterion 2**: Resources (2.4-2.6)
- **Criterion 3**: Faculty Qualification (3.4)
- **Criterion 6**: Advising (6.1)
- **Criterion 7**: Diversity (7.1)

Martin Zdanowicz, PhD
Andrew Porter, PhD
Ashley Falcon, PhD
Denise Vidot, PhD
Diego Deleon, MD
Linda Parker, PhD
Olivia Ceavers, MPH
Sean Kilpatrick, MS.

2:45 pm  Break

3:00 pm  Executive Session

3:45 pm  Break

4:00 pm  Meet with Alumni, Community Representatives, Preceptors
Luigi Ferrer, Prideline
Joseph Zolobczuk, YES
Melissa Lipnick, Alumna

5:00 pm  Adjourn

**Friday, November 3, 2017**

8:30 am  Meet with Institutional Academic Leadership/University Officials
*President's Office, Room 230, Ashe Building*
Julio Frenk, MD, PhD, President
Jeffrey Duerk, PhD, MS, Executive Vice President and Provost
Cindy Munro, PhD, Dean and Professor, School of Nursing and Health Studies

9:15 am  Break

9:30 am  Executive Session and Report Preparation

12:30 pm  Exit Briefing