REVIEW FOR ACCREDITATION

OF THE

PUBLIC HEALTH PROGRAM

AT THE

UNIVERSITY OF SOUTHERN MAINE

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

SITE VISIT DATES:
June 16-17, 2022

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CRITERIA:
Accreditation Criteria for Schools of Public Health & Public
Health Programs, amended October 2016

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INTRODUCTION

The University of Southern Maine (USM), chartered in 1878, is one of seven units in the University of Maine system. USM consists of three campuses with four colleges (arts, humanities and social sciences; management and human service; science, technology and health; and law). The university offers 50 undergraduate majors, 24 master's degrees and five doctoral degrees. USM employs 647 full- and part-time faculty and 842 full- and part-time staff. In spring 2020, there were 7,442 students enrolled at USM, 1,460 of whom were graduate students. USM holds specialized accreditation in over 20 disciplines including law, engineering, nursing, and psychology. The New England Commission of Higher Education accredits the USM system and will conduct its next evaluation in October 2022.

The public health program has operated at USM since 2012, offering one generalist concentration (prior to that, USM offered a CAHME-accredited MS in health policy and management). The program operates within the Muskie School of Public Service, in the College of Management and Human Service. The program comprises seven primary faculty members who teach both undergraduate and graduate courses. At the present time, there are 51 students enrolled in the MPH program. In 2018, the program added a Bachelor of Science in Public Health, and it currently enrolls 37 students. It offers the only graduate and undergraduate degrees in public health in the UMaine system. The program serves many non-traditional students including first-generation and rural student populations. The program is currently offered in an on-site format, though advances made during the COVID-19 pandemic built capacity for classes to be offered synchronously online.

CEPH first accredited the program in 2016, with required interim reporting since that date related to curriculum assessments and graduation rates. The Council accepted the program's 2017, 2020, and 2021 interim reports as evidence of compliance in these areas.

Instructional Matrix - Degrees and Concentrations				
Bachelor's Degrees			**Campus based**	**Distance based**
Generalist		BSPH	X	
Master's Degrees	**Academic**	**Professional**		
Generalist		MPH	X	

A1. ORGANIZATION & ADMINISTRATIVE PROCESSES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Designates appropriate committees or individuals for decision making, and implementation		The committee structures, organizations, and administrative processes are sufficient to allow the program to achieve its stated mission and goals. The program has a well-defined structure and position within the university. The public health program operates within the Muskie School of Public Service, under the leadership of the program chair, who leads both the MPH and BSPH programs. The self-study notes that the primary decision-making body for the program is a 'Committee of the Whole,' consisting of all full-time primary and non-primary instructional faculty and a faculty-nominated student representative. Part-time faculty participate but are non-voting members of the committee. Research, practice, and tenure-track faculty members comprise the other standing committees which include the following: Admissions; Academic and Curricular Affairs; BSPH Curriculum; and Diversity, Equity, and Inclusion. Ad hoc committees include the Accreditation Committee and the Public Health Search Committee, the latter of which addresses new faculty searches. The Committee of the Whole meets monthly to review all programmatic issues (aside from admissions). This committee also holds annual retreats and other meetings as necessary.	1) Since the site visit, the Public Health program has begun negotiating with the University for an additional course release for another Public Health faculty member to serve as either MPH or BSPH coordinator. While not yet approved, the Chair reports that USM's new President has been receptive to the request. In addition, Dr. Ziller is awaiting a decision on an additional course release for Spring 2023 so that she can dedicate enough time to lead both the MPH and BSPH programs. 1 & 2) Since the site visit, Public Health faculty have discussed additional options to engage part-time faculty. We have agreed to mentor part-time faculty more broadly as a whole, rather than channeling all interactions through the Chair. We have also agreed that we will identify specific meetings during each quarter where part-time faculty would be particularly relevant and to make special efforts	The Council appreciates the program's updates in this area.
Faculty have opportunities for input in all of the following: • degree requirements • curriculum design • student assessment policies & processes • admissions policies & decisions • faculty recruitment & promotion • research & service activities				
Ensures all faculty regularly interact with colleagues & are engaged in ways that benefit the instructional program				

| | | The Admissions Committee reviews and acts on all completed applications to the MPH program and comprises four faculty members (two of whom are tenure-track). Due to the rolling application deadline, the committee does not have an established meeting schedule; however, members generally meet at least twice yearly. The program chair and an additional faculty member screen all applications. If there is uncertainty or disagreement, the application is forwarded to the two remaining faculty on the committee. Feedback on all applicants is captured via email or face-to-face discussions to reach agreement. The university admissions office makes all decisions at the undergraduate level and program faculty are unable to provide input in that process.

The Academic and Curricular Affairs Committee reviews and recommends policies and curriculum changes to the Committee as a Whole. They are additionally responsible for reviewing transfer and waiver requests, which is done via e-vote. The committee generally meets once during the fall and spring semesters and comprises three tenure or tenure-track faculty. Voting faculty have full authority over the program's curriculum and degree requirements which are subject to review when required by the Muskie school, the dean, or the chief academic officer. Course or curriculum changes which involve additional funding require the dean's approval. Changes that do not require additional funding require the dean's approval only if the change is not supported by a two-thirds vote of the school.

The BSPH Curriculum Committee includes two faculty members who have dedicated responsibility for teaching BSPH courses and are engaged with USM undergraduate | to encourage them to attend these meetings.

Since the start of the semester, part-time faculty have attended both Public Health faculty meetings (2 in September and 1 in October). | |

		programming. This committee ensures that the BSPH curriculum aligns with both CEPH requirements and USM core curriculum and community engagement goals. This committee engages with the USM Core Curriculum Committee, the USM CareerHub, USM Student Life, and other undergraduate majors to identify opportunities for BSPH students. The committee meets annually. Changes to the BSPH curriculum are proposed to the Committee of the Whole and are subject to the same review processes detailed above. The Diversity, Equity, and Inclusion Committee is a newly established committee tasked with identifying and promoting best practices for anti-racism, equity, and the empowerment of historically underrepresented populations in the public health program and the field of public health. This committee engages with USM's Inclusion, Diversity, and Equity Council, comprises three faculty (tenure and non-tenure track) and two students, and meets each semester. This committee reviews and makes recommendations to the Committee of the Whole on several issues of equity and representation including recruitment and retention of students and faculty, curriculum review, and the identification of professional development for staff, faculty, and students to increase awareness of cultural humility, bias, and anti-racism. The Accreditation Committee met every two weeks during the preparation of the self-study. This committee comprises a research track faculty member and two tenured-faculty members. During off-cycle years, one faculty member who specializes in evaluation leads accreditation-related work and presents updates to the Committee of the Whole.		

| | | The Public Health Search Committee conducts hiring processes for full- or part-time faculty or staff. The program chair appoints a search committee chair in consultation with the faculty and USM trains all committee members in anti-bias hiring practices. Ideally, this committee contains a member of the Diversity, Equity, and Inclusion committee. This committee meets as needed when faculty or staff searches commence. Upon appointment to the program, each faculty member establishes a three-person peer committee consisting of public health, Muskie school, and USM faculty to advise through the promotion process. The peer committee sets performance expectations, assists with professional development, conducts performance evaluations, and makes recommendations for promotion. All recommendations for continued appointment and promotion are made to the dean and provost.

The program establishes expectations of research and service activities in line with USM and Muskie school policies. Public health faculty members have a varying mix of teaching, research, and service responsibilities that are explicitly recognized in the school's promotion and tenure criteria. Generally, performance expectations align with each faculty's role and defined responsibilities within the program.

Program faculty members have appropriate roles and responsibilities on college and university committees. Faculty are represented on several college-level committees such as the USM Graduate Council, the USM Faculty Senate, and the USM Research Advisory Council. | | |

		The self-study describes several program and institutional manuals of policy and procedure that guide the work and workload of faculty. The first commentary relates to what appears to be an excessive level of program leadership responsibilities that currently fall on the program chair. During the site visit, university leaders acknowledged the substantial and successful role played by the current program chair in growing the program and developing the new bachelor's degree. However, university leaders acknowledged that the current workload may not be sustainable over time and that their goal is "to make sure that this distinguished program at the university has what it needs to grow." Prioritizing and delegating administrative roles to program faculty may alleviate some of the burden. The second commentary relates to the difficulty acknowledged by the program chair in engaging part-time faculty in matters of program governance. During the site visit, faculty reported that it is difficult to engage non-PIF members in program-related decision-making as they are not compensated for their time. Non-PIF members do not regularly attend faculty meetings and have limited availability to interact with PIF and the program. The program chair makes a concerted effort to engage with non-PIF via email and in-person as evidenced in the self-study and accompanying documents.		

A2. MULTI-PARTNER SCHOOLS & PROGRAMS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A3. STUDENT ENGAGEMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have formal methods to participate in policy making & decision making		Students have several opportunities to provide feedback for program decision making. During the site visit, faculty explained that two students (one BSPH, one MPH) are nominated to attend all faculty meetings as part of the Committee of the Whole. Two additional MPH students from the school's Muskie Student Organization (MSO) attend the monthly faculty meetings to provide feedback when necessary.	Click here to enter text.	
Students engaged as members on decision-making bodies, where appropriate		The Public Health Advisory Committee, discussed in Criterion F1, also includes representation by one MPH and one BSPH student. The board's chairperson reported during the site visit that students actively participate at advisory committee meetings and during all deliberations. Students who met with site visitors praised the program director and faculty for openly calling for and accepting student feedback about courses and programmatic opportunities. Students agreed that they felt that suggestions were taken seriously and oftentimes implemented immediately.		

		MSO offers another opportunity for students to engage with the public health program. MSO comprises student leaders from the Muskie School's graduate programs, including two MPH students who are elected annually by their peers. Before the pandemic, the group met monthly. MSO's mission is to build a strong student community, create opportunities for civic discourse on public policy issues and advocate for students in policymaking and decision-making within the Muskie school. During the site visit, faculty noted that MSO became inactive during the pandemic. Program leaders are working to reinvigorate the organization.		

A4. AUTONOMY FOR SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

A5. DEGREE OFFERINGS IN SCHOOLS OF PUBLIC HEALTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

B1. GUIDING STATEMENTS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines a vision, mission statement, goals, statement of values		The program's guiding statements reflect aspirations, are sufficiently specific to rationally allocate resources, respond to needs of the intended service area, and guide evaluation of outcomes.

The program's vision is "thriving communities, in Maine and beyond, where every member has the opportunity to be their healthiest self."

The program's mission is to "educate students to become skilled public health professionals, sought after for their expertise and commitment to improve population health and promote health equity."

The program's core values include the use of evidence in decision-making; inclusion, diversity, and cultural humility; and lifelong learning and continuous professional growth.

Three goals are explicitly cited for the program. They address instruction, research, and service and are sufficiently specific to allocate resources and guide evaluation of outcomes. For example, the program's research goal focuses specifically on applied research to inform the field with direct implications for practice which is evidenced in their robust scholarship.

During the site visit, faculty elaborated on the program's goals, noting that students are particularly interested in | Click here to enter text. | |
Taken as a whole, guiding statements address instruction, scholarship, service				
Taken as a whole, guiding statements define plans to 1) advance the field of public health & 2) promote student success				
Guiding statements reflect aspirations & respond to needs of intended service area(s)				
Guiding statements sufficiently specific to rationally allocate resources & guide evaluation of outcomes				

		pursuing coursework and careers focused on topical areas most relevant to Maine health needs: data analytics, maternal and child health services, addictions, and rural health services. They further noted that they balance research and practice interests given the applied nature of projects that many faculty pursue (e.g., frequently linked to the State of Maine and regional health system entities). Students, in turn, are strongly encouraged to work with community partners in developing and completing curricular requirements.		

B2. GRADUATION RATES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & accurately presents graduation rate data for each public health degree offered		The program presents graduation rates that meet or exceed the established threshold across all its degree offerings.	Click here to enter text.	
Achieves graduation rates of at least 70% for bachelor's & master's degrees, 60% for doctoral degrees		Undergraduate students have a maximum of eight years to earn their degree. The BSPH program began in 2019, thus no cohorts have reached their maximum time to graduation. There were two students in the 2018-2019 cohort, 24 students in the 2019-2020 cohort, and 20 students in the 2020-2021 cohort. Fifty percent of the 2018-19 and 38% of the 2019-2020 cohorts have graduated. Attrition rates are low enough that the program can meet the threshold for all cohorts.

Students enrolled in the master's degree program have six years to earn their degree. The program has achieved graduation rates of 74% and 75% for the cohorts starting | | |

		in 2015-16 and 2016-17. If all remaining students graduate from more recent cohorts, the program will achieve rates of 75% (2017-18), 94% (2018-19), and 90% (2019-20).		

B3. POST-GRADUATION OUTCOMES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Collects, analyzes & presents data on graduates' employment or enrollment in further education post-graduation for each public health degree offered		The program collects and presents positive post-graduation placement information for all its degree offerings. The program surveys faculty toward the end of each calendar year to track post-graduation employment outcomes for students. Faculty are typically able to report on the outcomes for approximately 80-90% of MPH graduates. The Accreditation Committee uses LinkedIn to supplement the data for any unknown outcomes. The program reports positive post-graduation outcomes for its MPH graduates in the last three years (2018, 2019, and 2020). The percent of graduates either employed or continuing education over these years is 100%, 93%, and 100%, with 100% known outcomes for each group. The program reports positive post-graduation outcomes for all its known BSPH graduates. All BSPH graduates with known outcomes (56% known) are employed (100% in 2020). Unknown outcomes (44%) are higher for the BSPH program due to several reasons: 1) the program is relatively new, with few graduates so percentages of unknown may be misleadingly high (e.g., 100% unknown outcomes in the 2019 cohort with n=1) and 2) limited face-to-face interaction with BSPH students during the	Click here to enter text.	
Chooses methods explicitly designed to minimize number of students with unknown outcomes				
Achieves rates of at least 80% employment or enrollment in further education for each public health degree				

		pandemic. To address this, the program has recently implemented a graduation outcome tracking tool using Excel and encouraged students to join the program's LinkedIn page upon graduation. During the site visit, faculty spoke about annual focus groups conducted with exiting undergraduate students that will also illuminate post-graduation outcomes.		

B4. ALUMNI PERCEPTIONS OF CURRICULAR EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Defines qualitative &/or quantitative methods designed to provide meaningful, useful information on alumni perceptions		The program assesses alumni perceptions of the curriculum and preparation for post-graduation placements using university-administered alumni surveys and program-led focus groups.	Our program has begun instituting a new exit survey after the final capstone presentation. This survey includes information about our soon to-be-alumni's jobs (or prospects for job) and contact information after graduation. This will allow us to have more complete and accurate alumni records for ongoing communication. In addition, we will invite them to join our USM Public Health Student & Alumni Group, to help us follow their career. https://www.linkedin.com/groups/5078648,	The Council appreciates the program's updates in this area. We encourage the program to implement strategies they have identified to increase alumni participation in survey.
Documents & regularly examines its methodology & outcomes to ensure useful data		The program reports four methods of collecting data on alumni perceptions of curricular effectiveness for its MPH graduates: informal conversations after capstone presentations, the university commencement exit survey, the MPH alumni survey, and focus groups with exiting students. The program conducts its own focus groups and informal conversations while the university assessment office administers both surveys. Faculty who met with site visitors noted that the program has control of the questions asked of students in the MPH Alumni Survey and that the program chair will write a letter prior to survey administration to encourage students to fill it out. In 2021, the response rate was 34% (n=32).		
Data address alumni perceptions of success in achieving competencies				
Data address alumni perceptions of usefulness of defined competencies in post-graduation placements				

| | | This survey asks graduates if they feel confident in their abilities to execute 13 specific skills relating to foundational and concentration competencies, using a five-point Likert scale. The survey also has open-ended questions that ask for recommendations to improve the program and any additional notes graduates wish to share.

In general, most students indicated confidence in their ability to execute competency-related skills. The skills with the lowest-rated confidence (80%) were: apply planning and management frameworks; adopt approaches that rely on interprofessional practice; and identify approaches to address rural health disparities and challenges. Highly rated skills (100% of respondents felt confident) included the following: apply public health theory; identify solutions that reflect public health and health care systems; apply communication skills and strategies; and apply systems thinking frameworks.

Open-ended responses indicated a desire for more specialized courses like global health, epidemiology, and research. During the site visit, faculty acknowledged these comments and have responded by tailoring an elective course each semester to various topics in public health including rural health, women's health, global health, and substance abuse. This rotating topics course is popular among students, and enrollment is consistent.

The program also uses two questions from the university commencement exit survey to gauge overall student satisfaction with the program. The Office of | | |

		Academic Assessment administers this survey to all students who applied to graduate during the previous academic year and achieved response rates of 64%, 47%, and 50% for the 2019, 2020, and 2021 MPH graduate classes. All respondents agreed that they felt prepared to solve complex real-world problems and were satisfied with their overall experience in the program (100%, n=8).

The program also reports that informal conversations between advisors and students occur after capstone presentations. Though data and notes are not collected from these conversations, they may spur conversation at faculty meetings. For example, the program reports that it made a recent change to its applied research core course after students suggested a need for more qualitative data analysis instruction.

At the time of the site visit, 10 BSPH students had graduated. The program has used the university commencement exit survey and focus groups to evaluate BSPH graduates' perceptions of curricular effectiveness. In May 2022, four students attended a faculty-led focus group. The focus group data indicated general satisfaction with the curriculum. The program expects its first enrolled cohort to reach the maximum time to graduation in 2023 and plans to send an alumni survey through the assessment center specific to BSPH students, modeled off the MPH survey.

The commentary relates to the program's limited scope of data from its MPH alumni, due to low survey response rates (32%). During the site visit, faculty reported that the program has limited ability to gather | | |

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
		information from alumni, as the university does not share alumni contact information and has recently begun to administer the program-specific survey. During the site visit, the program chair discussed wanting to do more to increase alumni response rates and noted that this is an ongoing discussion with faculty; challenges in this area may also relate to issues with limited administrative support for the program, as discussed in detail in Criterion C2.		

B5. DEFINING EVALUATION PRACTICES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines sufficiently specific & appropriate evaluation measures. Measures & data allow reviewers to track progress in achieving goals & to assess progress in advancing the field of public health & promoting student success		The program defines several specific and appropriate measures for evaluating performance linked to the program's guiding statements. Each year, faculty review targets for evaluation in the interest of having measurable metrics that will improve program effectiveness. During the site visit, the program chair identified a PIF member with a background in program evaluation as the lead in this area.	Click here to enter text.	
Defines plan that is ongoing, systematic & well-documented. Plan defines sufficiently specific & appropriate methods, from data collection through review. Processes have clearly defined responsible parties & cycles for review		For each instructional, research, and service goal, the self-study identifies one or more evaluation measures, the sources of information, and the party responsible for review and comment on the program's performance regarding that measure. The selected measures are substantively aligned with the program's mission and goals and reflect values cited in the self-study. The rationale for the selection of measures is detailed in the self-study. For example, research-related metrics reflect faculty-led		

		applied research or evaluation activities and student participation in academic conferences. Similarly, education-related metrics include assessment of the BSPH and MPH curriculum and involvement of community partners in capstone project activities.		

B6. USE OF EVALUATION DATA

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages in regular, substantive review of all evaluation findings, including strategic discussions.		The program demonstrates how it uses feedback from various data sources to engage in continuous quality improvement. The faculty and associated committees review data collected from the evaluation plan on a regular basis throughout the academic year. One PIF assumes responsibility for collecting and presenting evaluation data to the Committee of the Whole and works with the program chair to identify larger scale issues to discuss at annual faculty retreats.	Click here to enter text.	
Translates evaluation findings into programmatic plans & changes. Provides specific examples of changes based on evaluation findings (including those in B2-B5, E3-E5, F1, G1, H1-H2, etc.)				
		The self-study provided examples of the use of evaluation data in decisions regarding the curriculum and program to make substantive improvements. In all examples, the program responded to evaluation data and quickly implemented changes.		
		For example, a program-level review of syllabi revealed that communication regarding coverage of competencies varied, with concentration competencies typically missing altogether. Faculty updated all syllabi prior to the 2022 academic year and a follow-up faculty meeting was		

| | | scheduled for summer 2022 to discuss a more standardized approach to communicating course objectives that can be adopted to create program-wide consistency.

Another example of programmatic changes relates to the student integrative learning experiences (ILE). Review of annual data illuminated three areas of needed improvement: establishing a streamlined process for students to identify competencies and requirements; creating a central spreadsheet to systematically record details, including community partners, for all ILE projects; and creating an organized system to store student ILE files to ensure easy review for faculty and community advisors.

The program continues to evaluate its degrees for quality improvement and recently implemented a change in its BSPH degree based on demonstrated success in the MPH program. MPH students indicated the utility of practice-based course assignments that were often tied to faculty service in the community. The program acted in 2021-22 to incorporate more of these experiences in the BSPH degree by initiating a new community partnership through which faculty can provide service and students can participate in a community-based project. | | |

C1. FISCAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Financial resources currently adequate to fulfill stated mission & goals & sustain degree offerings		The school appears to have financial resources adequate to fulfill its stated mission and goals. The program's budget is included in the school's budget, with specific personnel and other costs associated with the program separately identified. Program funding is not related to program-generated tuition and fees, and since 2016, program revenues have equaled expenditures.

The program chair is responsible for managing the program's budget and for requesting any additional funds related to operational costs, student support, or other expenses. If there is an identified need for a new faculty member, the program chair has an opportunity each academic year to submit a position request form to the associate dean of the Muskie School and the dean of the College of Management and Human Services. The request is then forwarded to the provost who reviews and submits the request for further approval. Since the beginning of the pandemic, the University of Maine's System's Office must approve all faculty positions.

Students receive support for tuition and fees, conference travel, and other activities through multiple methods. Undergraduate students have access to all university-wide merit and need-based scholarships. The Muskie School allocates funding for both undergraduate and graduate student scholarships, and faculty in the public health | Click here to enter text. | |
| Financial support appears sufficiently stable at time of site visit | | | | |

		program identify recipients based on two priorities: students from underrepresented groups and financial need. The Office of Graduate Studies provides financial support for graduate student travel, professional development, and assistantships. Faculty also include research assistantships within their grants. Program faculty can request professional development and travel funds from the Muskie School Professional Development Fund. Tenure-track faculty are awarded $1,200 in the USM budget per academic year for professional development. Faculty who win the USM Senate Award for instruction, research, or service are provided additional funds for professional development. Three public health faculty have won this award in the last three years. Four of the tenure track faculty are funded solely through legislatively appropriated funds to the University of Maine System, while five research-track faculty, one practice faculty and three part-time instructors are funded through a combination of University of Maine System funds, state grants, and federal grants. Three of the five research track faculty are funded through state public health agencies; this supports the unit's applied research and service mission. Externally funded projects such as contracts, cooperative agreements, or grants have a 25% indirect return (up to $25,000 per project per year). This has increased from $55,000 last academic year to an expected $90,000 this current year. These returns are used to pay research faculty for their teaching loads, among other functions.	

C2. FACULTY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
School employs at least 21 PIF; or program employs at least 3 PIF	🟩	The program has a generalist concentration for both the MPH and BSPH degrees and meets the minimum PIF requirements defined in parts one and two of this criterion's three-step analysis of faculty resources; these parts focus on the minimum required faculty (four) for a single concentration with two degree levels. As of spring 2022, there were seven PIF and six non-PIF. The program defines non-PIF as public health faculty members appointed on the research or practice tracks; though their official responsibilities do not require regular teaching or advising, these individuals serve as guest lecturers, capstone advisors, and APE preceptors. Students are asked about satisfaction with class size in core course instructor evaluations. Between 75-80% of BSPH students and 84-88% of MPH students perceived class sizes to be conducive to learning. Students are also asked about faculty availability in instructor evaluations. Between 60-80% of BSPH students felt faculty were available outside of class. MPH students were more likely to agree that faculty were available outside of class, ranging from 82-96%. Survey and focus group data indicate that students appreciate both class size and faculty availability, and students and alumni who met with	Since the site visit, the Public Health Chair has requested and received approval for additional resources for the MPH and BSPH Field Experiences. Randy Schwartz, a part-time faculty member with extensive (>30 years) experience in public health practice will now serve as the Field Experience coordinator for both degrees. Mr. Schwartz is extremely well-known across the Maine public health community, and these connections can facilitate meaningful field experience opportunities for our students. Dr. Sara Huston, a full-time, non-instructional faculty member has been approved for 7.5% FTE to conduct group Capstones for MPH and BSPH students. Dr. Huston is embedded in the Maine Center for Disease Control (part of the Maine	The Council reviewed information in the team's report and the program's response. The Council appreciates the additional resources made available to the program, but would like to receive a further information on how those resources are assisting the workload of faculty and program director in order to fully validate compliance with this criterion.
3 faculty members per concentration area for all concentrations; at least 2 are PIF; double-counting of PIF is appropriate, if applicable	🟩			
Additional PIF for each additional degree level in concentration; double-counting of PIF is appropriate, if applicable	N/A			
Ratios for general advising & career counseling are appropriate for degree level & type	🟩			
Ratios for MPH ILE are appropriate for degree level & nature of assignment	🟥			
Ratios for bachelor's cumulative or experiential activity are appropriate, if applicable	🟥			
Ratios for mentoring on doctoral students' integrative project are appropriate, if applicable	N/A			

Students' perceptions of class size & its relation to quality of learning are positive (note: evidence may be collected intentionally or received as a byproduct of other activities)		reviewers praised faculty members' availability, caring, and helpfulness.

Academic and career advising support appears adequate. At the master's level, the average advising load is ten with a minimum of two and maximum of 18. At the bachelor's level, the advising average is eight students per advisor with a range of three to 14. Students who met with the site visit team described strong relationships with their faculty advisors as well as the whole faculty complement. Students reported that faculty were accessible and that they felt empowered to share constructive feedback about the program. | Department of Health) and is a chronic disease epidemiologist.

In addition to these new resources, the advising faculty have identified additional opportunities to integrate information about the Field Experience and Capstone into the advising experience. This has included group advising sessions for both BSPH and MPH students (in September 2022), and a commitment from faculty to begin discussing the Field Experience and Capstone during their routine advising sessions with students. In addition, the Fall 2022 Capstone Instructor held a Capstone seminar for MPH students in September 2022 to provide additional information about the Capstone, address questions, and assist students in identifying potential projects and advisors. |
| Students are satisfied with faculty availability (note: evidence may be collected intentionally or received as a byproduct of other activities) | | The MPH ILE advising average is three with a minimum of one and a maximum of eight students. The average advising load for the bachelor's cumulative experience is four, with a minimum of one and a maximum of six. Only PIF advise students in these experiences.

During the site visit, MPH students indicated a need for more and higher quality advising related to both the APE and ILE. Students noted that both the APE and ILE could use more explicit guidance, particularly related to defining the scope of the project and a realistic timeframe for completion. Students who had a faculty-facilitated connection to an APE site acknowledged that they had a different and easier experience than their peers who found sites on their own. Students echoed this sentiment regarding the ILE process. All agreed on the need for more guidance regarding extending the APE into an ILE project, given the program's focus on involving community partners in the ILE, and identifying appropriate competencies for both. Multiple students expressed they | Finally, the Capstone Instructor is working to more proactively manage the advising load across faculty so that no individual faculty member takes on a large number of Capstones in a semester. |

felt they "didn't know what [they] were doing" and it "would have been nice to have more guidance to know if what [they're] doing is suitable and meeting requirements" regarding the ILE. BSPH students also reported feeling as if "there is no one to say: this is what we have available for BSPH students" regarding their cumulative experiences.

Faculty who met with site visitors agreed with students that APE and ILE advising is likely suffering due to competing priorities and unsustainable workloads. The program chair is responsible for coordinating all experiential learning for both the BSPH and MPH programs and no course is dedicated to help students through these processes. The program chair was not granted additional release time when the BSPH degree was added in 2018. Program faculty unanimously agreed that additional support, such as that provided by an additional faculty or staff member, would provide room for faculty to focus on advising and mentoring, rather than administration and management.

The concern relates to the need for additional faculty support for student mentoring in the required practice experiences and the integrative and culminating experiences for both the MPH and BSPH degree programs. During the site visit, the faculty noted that due to several PIF members retiring, the program can fully fund another full-time faculty member. The university halted plans to fill this position during the pandemic, and follow-up requests have been denied. The addition of a faculty member would allow distribution of responsibilities from the program

| | | chair, allowing her more time to advise and coordinate the experiences.

University leaders who met with site visitors were aware of the program's need for additional faculty resources. Advisory board members who met with site visitors emphasized that hiring additional faculty members would help elevate the program and attract more students statewide. | | |

C3. STAFF AND OTHER PERSONNEL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Staff & other personnel are currently adequate to fulfill the stated mission & goals Staff & other personnel resources appear sufficiently stable		One Muskie School staff member dedicates 0.15 FTE of administrative support to the public health program. Additional support provided to the program is based on university-provided shared services and is designed to meet the needs across all academic and research programs. This includes staff in human resources, internship coordination, grants management, financial management, and advising for undergraduate students. During the site visit, faculty noted that BSPH students have been able to gain some support from the university-level internship coordinator, which has somewhat relieved the burden on faculty for finding appropriate placements. Student enrollment is on an increasing trajectory having increased by 28% in the last year alone (2019-20 to 2020-21). Faculty expect additional enrollment growth through planned promotion of online options. Given the current and projected growth, the unit should consider	Since the Site Visit, the University of Southern Maine approved the hiring of an additional administrative support person for the Office of Graduate studies. This means that the Muskie Administrative Assistant is now devoted to Muskie programs 100% (instead of 50% previously). This change has now doubled the administrative support available to the Public Health program.	The Council appreciates the program's updates in this area. The program should continue to monitor staff support sufficiency.

| | | increasing administrative support for managing practicums, scheduling and organizing events, and other day-to-day administrative duties.

The commentary relates to the limited staff and other personnel dedicated to a program with two degree levels. Staffing is minimally sufficient to support the mission and goals and does not appear commensurate with the student body's needs. As noted in Criterion C2, one faculty member currently fulfills roles in day-to-day student support, practicum experience coordination, and many other program and administrative supports, including duties that could likely be fulfilled through staff support. | | |

C4. PHYSICAL RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Physical resources adequate to fulfill mission & goals & support degree programs		The program has adequate physical resources to support its mission and instructional programs. The program's main physical location is in the Wishcamper Center. All public health faculty members have private offices in the Wishcamper Center and are equipped with necessary resources, including a computer, phone, copier, printer, and office supplies.

Most public health classes are held in the Wishcamper Center or the Luther Bonney computer labs. Each classroom is equipped with state-of-the-art technology including projectors, LCD screens, bi-directional audio-video student access, and other electronic capabilities. Most classrooms include high-definition microphones and | Click here to enter text. | |
| Physical resources appear sufficiently stable | | | | |

| | | cameras, and students and faculty have access to video conferencing through Zoom.

Students have access to private study rooms and public spaces in several areas including the atrium of the Wishcamper Center, the USM Glickman Family Library, and the Muskie Library. Students who have an assistantship have a shared cube with a phone and computer connected to the network within the Wishcamper Center.

Student and faculty who met with site visitors expressed satisfaction with physical resources available to the program. | | |
|---|---|---|---|---|

C5. INFORMATION AND TECHNOLOGY RESOURCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Adequate library resources, including personnel, for students & faculty		The program's library and IT resources for personnel, students, and faculty are adequate.

Seven universities in Maine's Library System share a unified catalog of core technologies, resources, and standardized practices. Students and faculty have access to approximately 225 databases and 40,000 journals. USM assigns a library staff member to each academic program. The public health library liaison assists with library research instruction, provides research assistance, and receives input from faculty on the development of the public health library collection. | Click here to enter text. | |
| Adequate IT resources, including tech assistance for students & faculty | | | | |
| Library & IT resources appear sufficiently stable | | | | |

| | | Faculty receive a new computer of their choosing upon hire and every three to four years thereafter. Faculty have access to MS Office (with OneDrive) and specialized software such as SAS and SPSS. Faculty and staff are connected to the university network and WiFi. Printing, scanning, and copies are available through connected printers.

During the site visit, faculty and students agreed that they had the hardware and software necessary to complete their coursework and research. One student described that the library services were ample and readily available, even from a distance. Students enthusiastically agreed that the option to attend classes via Zoom made the program more accessible to non-traditional students. Both working-professional and more traditional campus-based students praised the program for offering this option and appreciated the available IT support. | | |

D1. MPH & DRPH FOUNDATIONAL PUBLIC HEALTH KNOWLEDGE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Ensures grounding in foundational public health knowledge through appropriate methods (see worksheet for detail)		MPH students are grounded in the 12 foundational public health knowledge areas through six courses: MPH 525: American Health Systems; MPH 565: Social and Behavioral Foundations; MPH 535: Introduction to Epidemiological Research; MPH 580: Health Literacy; MPH 555: Environmental Health; and MPH 650: Public Health Research and Evaluation. The curriculum provides grounding through a combination of lectures, exams, and assignments. Site visitors validated appropriate coverage	Click here to enter text.	

		for all 12 learning objectives, as indicated in the D1 worksheet. Students who met with site visitors praised the curriculum for its numerous opportunities to engage in practice and community-based work. Alumni noted that practical experience integrated into the classroom is a program strength and identified themes like policy and advocacy that are carried throughout the curriculum and reinforced in many courses.		

D1 Worksheet

Foundational Knowledge	Yes/CNV
1. Explain public health history, philosophy & values	Yes
2. Identify the core functions of public health & the 10 Essential Services	Yes
3. Explain the role of quantitative & qualitative methods & sciences in describing & assessing a population's health	Yes
4. List major causes & trends of morbidity & mortality in the US or other community relevant to the school or program	Yes
5. Discuss the science of primary, secondary & tertiary prevention in population health, including health promotion, screening, etc.	Yes
6. Explain the critical importance of evidence in advancing public health knowledge	Yes
7. Explain effects of environmental factors on a population's health	Yes
8. Explain biological & genetic factors that affect a population's health	Yes
9. Explain behavioral & psychological factors that affect a population's health	Yes
10. Explain the social, political & economic determinants of health & how they contribute to population health & health inequities	Yes
11. Explain how globalization affects global burdens of disease	Yes
12. Explain an ecological perspective on the connections among human health, animal health & ecosystem health (e.g., One Health)	Yes

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Assesses all MPH students, at least once, on their abilities to demonstrate each foundational competency (see worksheet for detail)		The school ensures didactic preparation and assessment opportunities for all MPH students in all foundational competencies, as shown in the D2 worksheet. The MPH degree is offered in one generalist concentration, as shown in the instructional matrix in the introduction of this report. Students achieve the competencies through nine three-credit courses as follows: MPH 525: American Health Systems; MPH 535: Introduction to Epidemiologic Research; MPH 545: Applied Biostatistical Analysis; MPH 555: Environmental Health; MPH 565: Social and Behavioral Health; MPH 575: Health Program Planning and Management; MPH 580: Health Literacy and Communication; MPH 650: Health Research and Evaluation; and MPH 660: Health Policy. Examples of assessments include case studies, data analyses, team debates, policy briefs, program and evaluation plans, and simulations. Site visitors reviewed self-study documentation and syllabi and were able to validate nearly all competencies based on written documentation. During the visit, reviewers asked about assessments for foundational competencies 19 and 21. Faculty spoke to how competency 19 is integrated throughout the MPH curriculum. Examples of assessments include social media campaigns, health education infographics, public health policy debates, and oral presentations to community stakeholders, including panels	Click here to enter text.	

| | | comprising community partners and local legislators. The integration of this competency throughout the curriculum is clear and rigorous. When asked about competency 21, the instructor responsible for the health literacy course described the assessment process. The occupational therapy program recently added this course as a requirement for graduation; additionally, the course serves as an elective for social work, business, medicine, and nursing students. As such, the course and group project assessments are interdisciplinary and interprofessional by nature. Assessments focus on how well students work as a team to incorporate their different disciplines. All projects are related to public service, working with a community organization who has a public-health related need.

Alumni who met with site visitors praised the curriculum's flexibility regarding electives and specifically noted strong courses in data analytics and geographic information systems available in the Muskie and business schools. Alumni agreed that they gained tangible, applicable skills from the program and gave examples related to interprofessional skills and knowledge related to facilitating focus groups.

Community stakeholders who met with site visitors noted that the program's interns come with extremely strong backgrounds in policy and often serve as a resource for other interns in their organizations. State government stakeholders stated that they always try to hire students from USM's program because they have been great matches in the past and continue to be strong hires. | | |

D2 Worksheet

MPH Foundational Competencies	Yes/CNV
1. Apply epidemiological methods to the breadth of settings & situations in public health practice	Yes
2. Select quantitative & qualitative data collection methods appropriate for a given public health context	Yes
3. Analyze quantitative & qualitative data using biostatistics, informatics, computer-based programming & software, as appropriate	Yes
4. Interpret results of data analysis for public health research, policy or practice	Yes
5. Compare the organization, structure & function of health care, public health & regulatory systems across national & international settings	Yes
6. Discuss the means by which structural bias, social inequities & racism undermine health & create challenges to achieving health equity at organizational, community & societal levels	Yes
7. Assess population needs, assets & capacities that affect communities' health	Yes
8. Apply awareness of cultural values & practices to the design or implementation of public health policies or programs	Yes
9. Design a population-based policy, program, project or intervention	Yes
10. Explain basic principles & tools of budget & resource management	Yes
11. Select methods to evaluate public health programs	Yes
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics & evidence	Yes
13. Propose strategies to identify stakeholders & build coalitions & partnerships for influencing public health outcomes	Yes
14. Advocate for political, social or economic policies & programs that will improve health in diverse populations	Yes
15. Evaluate policies for their impact on public health & health equity	Yes
16. Apply principles of leadership, governance & management, which include creating a vision, empowering others, fostering collaboration & guiding decision making	Yes
17. Apply negotiation & mediation skills to address organizational or community challenges	Yes
18. Select communication strategies for different audiences & sectors	Yes
19. Communicate audience-appropriate public health content, both in writing & through oral presentation	Yes
20. Describe the importance of cultural competence in communicating public health content	Yes
21. Perform effectively on interprofessional teams	Yes
22. Apply systems thinking tools to a public health issue	Yes

D3. DRPH FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D4. MPH & DRPH CONCENTRATION COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines at least five distinct competencies for each concentration or generalist degree in MPH & DrPH. Competencies articulate an appropriate depth or enhancement beyond foundational competencies		The program offers a generalist MPH with five distinct and appropriate concentration competencies, as indicated in the D4 worksheet. Competencies delineate an appropriately advanced set of knowledge and skills

Reviewers validated didactic coverage and appropriate assessments for all competencies through a review of syllabi and supplemental documentation. During the visit, faculty provided examples of additional reinforcing opportunities for competencies throughout the curriculum. Skills and knowledge relating to rural health disparities, for example, thread throughout the curriculum, as do skills relating to program planning and evaluation, among others.

Students and alumni who met with site visitors expressed appreciation for the generalist curriculum, which they felt prepared them to work in a variety of different post-graduation placements. Several alumni spoke to the applied skillset they graduated with and how well it has served them in professional settings. Examples given included how to run a meeting, facilitate a focus group, and produce strong technical scientific writing. | Click here to enter text. | |
| Assesses all students at least once on their ability to demonstrate each concentration competency | | | | |
| If applicable, covers & assesses defined competencies for a specific credential (e.g., CHES, MCHES) | N/A | | | |

D4 Worksheet

MPH Generalist Concentration Competencies	Comp statement acceptable as written? Yes/No	Comp taught and assessed? Yes/CNV
1. Apply public health theory and frameworks to address public health issues	Yes	Yes
2. Analyze health policy options and assess their adoption and implementation feasibility	Yes	Yes
3. Describe rural health disparities and the challenges of health care delivery/public health in rural areas	Yes	Yes
4. Apply principles of planning, evaluation, and communication to address community partner needs	Yes	Yes
5. Analyze how environmental factors interact with race, ethnicity, socioeconomic status, and other social determinants to affect health	Yes	Yes

D5. MPH APPLIED PRACTICE EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
All MPH students produce at least two work products that are meaningful to an organization in appropriate applied practice settings		The program requires all MPH students to enroll in MPH 698: Field Experience, a three-credit course that facilitates its APE. Students may enroll after they complete five foundational courses. The program describes the field experience as experience-based learning in which students work in community organizations delivering and planning public health services on jointly developed projects. Students are required to submit a final report for assessment and are made aware of all requirements through the APE handbook.

Students prepare a planning document in conjunction with the field experience coordinator and the site preceptor that describes the proposed scope of work, learning objectives, deliverables with mapped competencies, and timeline. The field experience coordinator is responsible | Since the site visit, the MPH Field Experience manual (attached) has been revised to address these deficiencies. 1) Students are now clearly expected to develop and submit TWO products for the Field Experience. 2) Students are now required to include a self-assessment of the competencies that are demonstrated by their Field Experience products. The Field Experience final report now requires students to qualitatively assess how their anticipated products changed over the course of the experience. They are also required to identify | The Council reviewed the team's report and program's response, including attachments. Information in the program's response indicates that the program has addressed the concerns identified by the site visit team. Therefore, the Council acted to change the team's finding of partially met to a finding of met. |
| Qualified individuals assess each work product & determine whether it demonstrates attainment of competencies | | | | |
| All students demonstrate at least five competencies, at least three of which are foundational | | | | |

for managing all preceptor and student paperwork, reviewing student planning documents, and grading work products.

Site visitors reviewed five student samples of the field experience report. All included appendices of more than one work product of high quality that clearly addressed at least five foundational competencies. Examples included monthly infographics for the WellStarME program on topics including cervical health awareness, alcohol misuse, and mental health awareness; a best practice guide to developing culturally appropriate health information; a focus group question guide and qualitative data analysis plan; policy briefs on various Maine-specific legislative topics; and a data collection sheet for a grant-funded opioid use disorder program.

The first concern relates to the lack of evidence that the program's APE fully aligns with this criterion's requirements for students to submit at least two practice-based products. The handbook indicates that students must submit a field experience report with at least one deliverable. Upon review of the five student samples provided, reviewers noted that all samples included more than one deliverable for the community partner; however, they are not required to.

The second concern relates to the insufficient assessment of work products by the field experience coordinator. During the site visit, the field experience coordinator affirmed that they do not assess the products based on the competencies selected by students but generally review to see whether the products demonstrate any of the 22 foundational competencies. This criterion requires two

which competencies are demonstrated by each of their two submitted products. The instructor also now assesses whether the student's products demonstrate application of the competencies selected by the student (see grading sheet, attached). 3) The program has deployed additional resources and advising strategies related to the Field Experience as documented above for Criterion C2. The Field Experience manual also now includes an example of a Field Experience Plan, in which the learning objectives, program competencies, and corresponding products are delineated to provide students with a clearer understanding of what is required. Finally, the Chair is working with the new Field Experience Coordinator (Randy Schwartz) to develop Brightspace courses for the BSPH and MPH Field Experiences that will provide video recordings describing the Field Experience process and discussion boards for students to ask questions and interact with each other. Over time, these discussion boards may yield Field Experience frequently asked questions, which we can answer and post to Brightspace for future students. We

		products to be assessed against the five or more competencies students selected. The third concern relates to student desire and need for more advising and guidance throughout the APE process. Students who met with site visitors expressed unmet needs throughout the process, including a desire to connect with other students doing their own practice experiences, a need for more hands-on assistance from the program chair or APE coordinator to identify sites, and more guidance on mapping competencies to work products. One student stated that understanding what a competency is and how to apply it to a deliverable was unfamiliar to them until they searched online about how to do it. Site visitors determined that the flexibility and self-directed structure lends itself to a variable and sometimes negative student experience.	anticipate these Brightspace courses will be fully developed by January 2023. Also, as the new Field Experience coordinator, Randy Schwartz will be keeping a list of the roles and responsibilities of the coordinator position. This document can be used and built upon by the next Field Experience coordinator, so that he/she does not start from scratch or rely on the Chair for all this knowledge.	

D6. DRPH APPLIED PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D7. MPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Students complete project explicitly designed to demonstrate synthesis		The ILE is a required capstone project that students complete near the end of their program and after they	Click here to enter text.	The Council reviewed the self-study document and team's report. Based

of foundational & concentration competencies	■	have taken all foundational courses. The capstone project is "a self- directed, independent endeavor completed with guidance from the capstone course manager, a capstone advisor (first reader), and an external partner (second reader)." To complete the ILE, students must enroll in a capstone course, MPH 699. The ILE process was reviewed and overhauled in 2020 to introduce more robust guidelines and assessment tools.	on the totality of the information, and to ensure consistency with other Council decisions, the Council acted to change the team's finding of met to a finding of partially met.
Project occurs at or near end of program of study	■		The concern relates to the lack of evidence that the program's ILE fully aligns with this criterion's requirements for students to integrate at least two foundational and one concentration competencies in the final written product. The ILE manual does not define a minimum number of MPH foundational competencies and does not specify that any concentration competencies must be chosen for integration.
Students produce a high-quality written product	■	Students complete the ILE through one semester of work. ILE projects consist of four deliverables: • a written proposal for preliminary approval by a faculty advisor • a capstone proposal presentation • a capstone project • a capstone presentation	
Faculty reviews student project & validates demonstration & synthesis of specific competencies	■	Students must include the following elements within the paper: a literature review; an expression of purpose (i.e., questions to be addressed and target audience(s); data collection plan; synthesis, analysis, and presentation of findings necessary to draw conclusions and recommendations; and summary of how the project has integrated MPH student learning. Graded assignments are distinguished as "exceptional work," "meets competency," or "does not meet competency." The capstone manual indicates that students must identify public health competencies related to their project; however the manual does not define a minimum number of MPH foundational competencies and does not specify that any concentration competencies must be chosen for integration. Among the five samples provided to reviewers, two did not have any competencies identified	

	(these examples were from before the overhaul in 2020 which formalized competency assessment); one did not include any concentration competencies; and the final two met all ILE requirements synthesizing both foundational and concentration competencies. During the site visit, conversations with faculty further illuminated the ILE process. The program highly encourages students to work with a community partner for their ILE; thus, students can elect to expand upon one of their APE products to address the ILE. Regardless of whether the student continues with an APE product, all ILEs start with a proposal template that at least three faculty review. This template serves as a "guidance worksheet" for students that also aids in assessment for faculty and community partners. Students work with the capstone instructor, who helps brainstorm topic ideas if necessary, connects the student with community partners, and makes suggestions for the first reader, who serves as the primary ILE advisor. If the capstone course instructor has relevant experience, they serve as the first reader and advisor for as many ILE projects as possible. Other faculty members volunteer their time as first readers as part of their service commitment to the program. Responsibilities of the first reader include the following: fine-tuning topic, purpose, questions, and approach sections; assisting in selecting a second reader; overseeing the IRB application; coaching students on writing a successful proposal; approving proposals prior to presentations and final products; providing written feedback on the proposal and final product; and assessing and assigning a grade for the final product. Faculty members who met with site visitors agreed that advising		

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the ILE project is an intensive process, and the program has had discussions about how best to alleviate the workload for PIF overburdened with ILE projects.

Students who met with site visitors noted a desire for a more structured ILE course, including more guidance on the scope and suitability of the ILE project and more chances to engage with fellow classmates to troubleshoot, problem-solve, and compare projects. Several students noted that the ILE process works well for dedicated, self-starters but stated that some of their peers may benefit from greater advising and guidance throughout the process.

Five examples of ILE portfolios were provided to the site visit team:
- a project focused on communication strategies to reduce substance use (alcohol, marijuana and e-cigarette use among college students)
- a project assessing rates of vaping and smoking among Maine high school students
- a project assessing capacity and access to care in Maine for persons hospitalized for a traumatic brain injury
- an analysis of the well-being of Emergency Department physicians
- an assessment of approaches to measuring behavioral health

The documents reveal thorough, well-written projects, accompanied by the program rubric implemented in 2020 regarding competency assessments.

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D8. DRPH INTEGRATIVE LEARNING EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D9. PUBLIC HEALTH BACHELOR'S DEGREE GENERAL CURRICULUM

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students introduced to all domains: 1. Foundations of scientific knowledge, including biological & life sciences & concepts of health & disease 2. Foundations of social & behavioral sciences 3. Basic statistics 4. Humanities / fine arts		The program offers one undergraduate degree: a BS in public health. The BSPH requires foundational public health courses as well as capstone experience courses. The BSPH degree requires 35 credits in public health courses, nine credits in approved electives, and an additional statistics course for a total of 48 credits. The USM core curriculum derives the remaining 72 credits to meet a 120-credit graduation requirement. The program uses both public health and USM core curriculum courses to satisfy the four domains in the general education curriculum. The life sciences requirement is met with BPH 160: Biology of Human Health with lab; the social/behavioral sciences requirement is met with BPH 315: Population Health Improvement; the math requirement is met with BPH 450: Analysis of Public Health Data with lab and MAT 120: Introduction to Statistics or LOS 120: Statistics for Informed Decision Making; and the humanities/fine arts requirement is met through the USM core courses in	Click here to enter text.	

| | | Creative Expression and Cultural Interpretation (e.g., ENG 201: Creative Writing; SCI 104: Basic Photography; THE 170: Public Speaking; and SPA 101: Beginning Spanish I; PHI 101: Free Will and Determinism; WGS 201: Women, Knowledge, and Power). | | |

D10. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL DOMAINS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Curriculum ensures that all elements of all domains are covered at least once (see worksheet for detail)		Students take required courses across a variety of areas including a course on the US health system, biology of human health, fundamentals of public health, health communication, health disparities, epidemiology, public health research methods and data analysis, and population health improvement.	The program has determined that the foundational competencies of policy and communication are included in the BPH 160/161 syllabus in error. These elements are instead covered in BPH 101 (U.S. Health Care System), 205 (Health Communication) and 210 (Health Disparities and Social Justice). The CEPH competency grid in the syllabus will be corrected before BPH 160/161 is taught again.	The Council reviewed the program's response and determined that the program has addressed the commentary identified by the site visit team. Therefore, the Council acted to change the team's finding of met with commentary to a finding of met.
If curriculum intends to prepare students for a specific credential (e.g., CHES), curriculum addresses the areas of instruction required for credential eligibility	N/A	Reviewers were able to validate the coverage of all domains through information provided in the syllabi and additional materials, as presented in the D10 worksheet. Many of the foundational domains are introduced then covered across multiple required courses in the curriculum to reinforce the content. The faculty note that global functions of public health and health systems and policy are only covered in one course, and they are exploring opportunities to expand exposure to these topics, whether in BSPH required courses or through the USM core curriculum.

During the site visit, students praised the curriculum for introducing a wide variety of public health topics that are reinforced across the degree. | | |

| | | The commentary pertains to student feedback that some of the courses in the curriculum (i.e., BPH 160: Biology of Human Health) are tied to too many foundational domains, which limits the depth of coverage on any given topic. Students specifically mentioned BPH 160: Biology of Human Health which is mapped to health policy and health communication domains in addition to human health and determinants of health. The program would benefit from reviewing the curriculum mapping to avoid presenting too many foundational domains in any given course. | | |

D10 Worksheet

Public Health Domains	Yes/CNV
1. History & philosophy of public health as well as its core values, concepts & functions across the globe & in society	Yes
2. Basic concepts, methods & tools of public health data collection, use & analysis & why evidence-based approaches are an essential part of public health practice	Yes
3. Concepts of population health, & the basic processes, approaches & interventions that identify & address the major health-related needs & concerns of populations	Yes
4. Underlying science of human health & disease, including opportunities for promoting & protecting health across the life course	Yes
5. Socioeconomic, behavioral, biological, environmental & other factors that impact human health & contribute to health disparities	Yes
6. Fundamental concepts & features of project implementation, including planning, assessment & evaluation	Yes
7. Fundamental characteristics & organizational structures of the US health system as well as the differences between systems in other countries	Yes
8. Basic concepts of legal, ethical, economic & regulatory dimensions of health care & public health policy & the roles, influences & responsibilities of the different agencies & branches of government	Yes
9. Basic concepts of public health-specific communication, including technical & professional writing & the use of mass media & electronic technology	Yes

D11. PUBLIC HEALTH BACHELOR'S DEGREE FOUNDATIONAL COMPETENCIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students demonstrate & are assessed on each competency & all its elements:		Bachelor's students have multiple opportunities to develop competence in public health communication and information literacy. The D11 worksheet summarizes reviewers' findings.	Click here to enter text.	
1. ability to communicate public health information, in both oral & written forms, through a variety of media & to diverse audiences		Students develop skills in oral communication in BPH 450: Analysis of Public Health Data in which they prepare and give an oral summary of a data analysis project. The program did not identify in the self-study where written communication is assessed, though reviewers verified that this is covered and assessed in BPH 320: Methods of Public Health Research through the research abstract required for this course.		
2. ability to locate, use, evaluate & synthesize public health information		The self-study indicated that students are assessed on communicating with diverse audiences in BPH 320, in which students create an infographic that is accessible to diverse audiences. Reviewers noted that this is also covered and assessed in depth in the assignments and discussions in BPH 205: Health Communications and Marketing. Students demonstrate that they can communicate through different forms of media in BPH 205 through a variety of assignments. For example, students create health communications material for social media		

	messaging, highway signs, and current emergency health crises.
	Information literacy is taught and assessed across many courses in the BSPH curriculum. Students conduct literature reviews in BPH 450: Analysis of Public Health Data, BPH 210: Health Disparities and Social Justice, and BPH 315: Population Health Improvement. Each literature review assignment in these classes asks the student to choose a public health issue to locate, analyze, and evaluate relevant data and current literature on the topic. In BPH 320: Methods of Public Health Research, students submit a research abstract as part of their final research project to demonstrate skill in synthesizing information.		

D11 Worksheet

Competency Elements	Yes/CNV
Public Health Communication	
Oral communication	Yes
Written communication	Yes
Communicate with diverse audiences	Yes
Communicate through variety of media	Yes
Information Literacy	
Locate information	Yes
Use information	Yes
Evaluation information	Yes
Synthesize information	Yes

D12. PUBLIC HEALTH BACHELOR'S DEGREE CUMULATIVE AND EXPERIENTIAL ACTIVITIES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Students complete cumulative & experiential activities		All BSPH students complete the following cumulative and experiential activities: • BPH 320: Methods of Public Health Research includes a class-based research project requiring use of data collection tools, data gathering and generation of a research report • BPH 450: Analysis of Public Health Data includes an intensive literature review and data analysis that requires selection of a public health topic, research question development and written and oral reporting • BPH 499: Field Experience, requires an internship during the final undergraduate year	As discussed in our response to Criterion C2, our program has received additional resources to support BPH 499 Field Experience, including the University's commitment to hire Randy Schwartz to coordinate the course. In addition, we are working to connect students with the CareerHub earlier in the process so that they can prepare for finding an internship, including resume development and	The Council appreciates the program's updates in this area.
Activities require students to integrate, synthesize & apply knowledge & program encourages exposure to local-level professionals & agencies		The self-study described several examples of experiential learning by undergraduate students which included the following: • work with not-for-profit health organizations in rural Maine • work with USM on a COVID-19 testing project • development of an assessment for collecting data on mask wearing Students complete their fieldwork requirements working with the course instructor for BPH 499 who monitors their 120 hours of activity and production of a final summary report. A detailed field experience handbook was provided to the site visit team for review.	referrals for job shadowing. The Brightspace course (in preparation) for BPH 499 will include links to the CareerHub and encourage participation in on-going workshops and other career preparation activities. Finally, to develop more of a cohort model for the Field Experience, beginning in 2023, the program will only offer BPH 499 in the Spring semester. Students may complete the course in Summer (suggested, given the wealth of internships available during the summer) or Spring only. In addition, we are exploring options to provide	

| | | During the site visit, faculty reported that BSPH students regularly ask for more support regarding the BPH 499: Field Experience course, and the field experience is the biggest area of dissatisfaction for BSPH students. Focus group data provided to the site visit team supported this assertion. The program chair acknowledged that using a university-based internship coordinator has helped students identify sites but that BSPH students generally need more professional development assistance than is available to them, either through the program or the university. Discussions with faculty during the site visit revealed that many BSPH students are first generation and/or rural students who struggle to independently find a site. Faculty noted that many students come to the program without professional experience and are not adequately prepared to make the jump from the classroom to the community. Other faculty and stakeholders who met with the site visit team echoed this sentiment, noting that there is a need for the program to offer a more robust field experience course in which professionalism, interview skills, conflict resolution, and other soft skills are covered. However, there are limited faculty resources to offer such a course.

The commentary relates to concerns students and stakeholders who met with site visitors raised about the field experience not being well-coordinated. Advisory board members specifically mentioned that using USM's field experience coordinator has improved the experience, but they continued to experience administrative and logistical challenges. Students expressed frustration with BPH 499 and stated that they perceive insufficient institutional support to prepare and place students in community settings. | students with additional support for their Field Experience, such as a structured service learning course instead of individual internships. | |

D13. PUBLIC HEALTH BACHELOR'S DEGREE CROSS-CUTTING CONCEPTS AND EXPERIENCES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Program ensures opportunities available in all cross-cutting areas (see worksheet for detail)		Students engage with cross-cutting concepts and experiences throughout the structured curriculum, which develops skills in population health, social justice and health disparities, epidemiology, health communication, and public health research. Findings are summarized in the D13 worksheet. The USM Core Curriculum introduces and reinforces many of the cross-cutting concepts and experiences through its five goals and provides opportunities outside of the BSPH program for students to strengthen these skills. The BSPH curriculum also covers cross-cutting concepts and experiences. Introductory courses BPH 101: Introduction to the US Health System and BPH 205: Health Communication and Marketing introduce students to many cross-cutting concepts including advocacy for public health at all levels of society, critical thinking and creativity, cultural contexts in which public health professionals work, ethical decision making related to self and society, organizational dynamics, professionalism, and systems thinking. Other required core courses expose students to community dynamics (i.e., BPH 160: Biology of Human Health and BPH 315: Population Health Improvement); independent work, research methods, and teamwork and leadership (i.e., BPH 320: Methods of Public	Click here to enter text.	

	Health Research and BPH 450: Analysis of Public Health Data).

D13 Worksheet

Cross-cutting Concepts & Experiences	Yes/CNV
1. Advocacy for protection & promotion of the public's health at all levels of society	Yes
2. Community dynamics	Yes
3. Critical thinking & creativity	Yes
4. Cultural contexts in which public health professionals work	Yes
5. Ethical decision making as related to self & society	Yes
6. Independent work & a personal work ethic	Yes
7. Networking	Yes
8. Organizational dynamics	Yes
9. Professionalism	Yes
10. Research methods	Yes
11. Systems thinking	Yes
12. Teamwork & leadership	Yes

D14. MPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
MPH requires at least 42 semester credits or equivalent		All students in the MPH program must complete a minimum of 45 semester credit hours to graduate. The university defines one credit hour as one hour of classroom or direct faculty instruction and no less than two hours of out-of-class student work each week for approximately 15 weeks or the equivalent amount of work over a different amount of time.	Click here to enter text.	

D15. DRPH PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D16. BACHELOR'S DEGREE PROGRAM LENGTH

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Required credit hours commensurate with other similar degrees in institution		The BSPH requires a minimum of 120 semester credits to graduate, with 48 credits specific to the public health curriculum.	Click here to enter text.	
Clear, public policies on coursework taken elsewhere, including at community colleges		For all baccalaureate degrees at the university, a minimum of 30 credit hours, including at least nine hours in the major, must be completed while matriculated in the school or college from which the degree is sought. A student may earn no more than six of these 30 from another campus of the University of Maine system. Additionally, 30 of the final 45 credits of a student's degree program must be completed at the university. The site visit team determined that the requirements for undergraduate public health students are comparable to similar undergraduate degrees at the university. Transfer credit requests for coursework completed at other institutions are reviewed by the Academic and Curricular Affairs Committee. Most transfer requests are for electives. However, in the case of a transfer request for		

		a BSPH core course, syllabi are reviewed as part of the decision-making process.		

D17. ACADEMIC PUBLIC HEALTH MASTER'S DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D18. ACADEMIC PUBLIC HEALTH DOCTORAL DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D19. ALL REMAINING DEGREES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

D20. DISTANCE EDUCATION

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Not Applicable			

E1. FACULTY ALIGNMENT WITH DEGREES OFFERED

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Faculty teach & supervise students in areas of knowledge with which they are thoroughly familiar & qualified by the totality of their education & experience		Seven primary and three non-primary faculty deliver the program's curriculum. All primary faculty hold doctoral degrees, and six hold a public health or public health-adjacent degree.	Click here to enter text.	
Faculty education & experience is appropriate for the degree level (e.g., bachelor's, master's) & nature of program (e.g., research, practice)		Faculty members have training in foundational fields of epidemiology, community health, environmental health, medicine, maternal and child health, and public policy. A review of faculty CVs indicates that the designated persons are appropriate instructors for bachelor's and master's-level education emphasizing both research and practice aspects of the field. During the site visit, students and alumni spoke highly of the faculty complement, praising specific members who often go above and beyond for their students. Alumni reported feeling lucky to have been taught, advised, and mentored by both primary and non-primary faculty members who prepared them well for post-graduation employment.		

E2. INTEGRATION OF FACULTY WITH PRACTICE EXPERIENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Employs faculty who have professional experience in settings outside of academia & have demonstrated competence in public health practice		The program employs faculty who have professional experience in settings outside of academia and have demonstrated competence in public health practice. Both tenured and non-tenured faculty have local, state, and federal public health experience, outside of academia. Additionally, the Muskie School has an appointment track for "practice" faculty, and the program currently employs one practice PIF. Non-PIF members are well connected to Maine's public health system. When combined, they bring over 81 years of practice experience to the classroom.	Click here to enter text.	
Encourages faculty to maintain ongoing practice links with public health agencies, especially at state & local levels		The program encourages faculty to maintain ongoing practice links with public health agencies, especially at state and local levels. The majority of non-PIF are embedded within local public health agencies full-time. Students who met with site visitors praised the amount of practical experience available to them throughout the program, including community-based assignments, assistantships, and application and preparation of tangible public health skills in the classroom.		
Regularly involves practitioners in instruction through variety of methods & types of affiliation		The program regularly involves practitioners active in the community in instruction through variety of methods including serving as capstone readers, supervising research assistants, preparing case studies for instruction, and serving as guest speakers in class. During the site visit, faculty described the benefit of using research faculty and		

| | | public health practitioners to prepare specialized course content.

Three USM research faculty who met with site visitors explained that they work for the state public health department and provide full-time expertise, leadership, and support for the state's environmental health, epidemiological, and surveillance efforts. The program occasionally buys out research faculty time to teach but university finances in recent years have not allowed for this to continue. Instead, these research faculty regularly supervise assistantships and occasionally guest lecture.

During the site visit, students agreed that faculty are connected to local institutions and able to facilitate field placements during and after the program. Students and alumni were particularly enthusiastic about the opportunities for assistantships and praised the program for imparting highly practical knowledge and skills and connecting them with the local professional workforce. | | |

E3. FACULTY INSTRUCTIONAL EFFECTIVENESS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Systems in place to document that all faculty are current in areas of instructional responsibility		The program maintains a commitment to measuring and improving instructional effectiveness. The program relies on individual faculty to seek out professional development opportunities to stay current in areas of instructional responsibility, and program funding is readily available to cover associated fees. The program measures	In response to the reviewers' concerns about the systems in place to document that all faculty are current in areas of instructional responsibility, we are engaging with USM's CTEL (Center for Technology	The Council appreciates the program's updates in this area.
Systems in place to document that all faculty are current in pedagogical methods				

Establishes & consistently applies procedures for evaluating faculty competence & performance in instruction	 	instructional effectiveness based on aggregated results from student course evaluations using a standardized university electronic tool. Each semester, instructors are provided feedback, and program faculty conduct annual reviews of curriculum adequacy at their annual retreat. Additional professional development opportunities available at the program level are also discussed at the faculty annual retreat.	Enhanced Learning) to help redesign our Brightspace courses so they are consistent with best practices in web-based course design.
Supports professional development & advancement in instructional effectiveness for all faculty	 		In response to the reviewer's concerns about procedures for evaluation faculty competence and performance in instruction, we have decided to create a peer-to-peer mentorship program for teaching faculty. We plan to sit in on each other's classes (at least once per semester) to assess competence and performance in instruction. After attending a class, we will provide encouraging feedback on how the class instruction was effective and what could be improved.

The program chair reviews aggregated data on faculty performance in course evaluations annually. During the site visit, faculty discussed the evaluation process, and the program chair indicated that the "student evaluations [of instructional effectiveness] are not enough." When asked about the peer evaluation process, faculty explained that peer reviews occur on an ad hoc basis; they have discussed making it a formal process but have not yet voted on it. The program chair reported that faculty contracts preclude review of individual course evaluations, making individual evaluation and feedback difficult. Reviewers noted extensive participation by all faculty in scholarship, service, and practice activities that suggests currency in areas of instructional responsibility. PIF and non-PIF regularly participate in professional development within and outside of USM related to currency in pedagogical methods. Recent examples of professional development aimed at currency in pedagogical methods include diversity, equity, and inclusion training, best practices in online teaching, and adapting to new platforms for instructional support.

USM provides several supportive services intended to increase faculty instructional effectiveness, including the Center for Technology Enhanced Learning and the Center

for Collaboration and Learning. Additionally, the provost's office provides numerous resources and incentives to increase instructional effectiveness. Examples include the following:

- Training grants for innovative instructional practices
- Reading and reflection groups
- Reflective teaching partnerships
- Workshop sponsorship
- Professional development scholarships

The self-study presents several measures based on aggregate student evaluations, with targets and results, pertaining to instructional effectiveness. All measures meet or exceed targets.

During the site visit, students and alumni spoke highly of faculty dedication and experience in public health. Students called out specific faculty members to express their gratitude for the breadth and depth of content covered across courses and their engagement with students outside of class. For example, students named several research professors who went above and beyond in providing out-of-class lessons and mentoring, while other students commended their advisors for facilitating career-oriented APE placements and introducing relevant professional skills in their classes. University leaders who met with site visitors praised program faculty as "some of the best professors we have at the university."

The commentary relates to the site visit team's conclusion that the program maintains commitment to improving instructional effectiveness but may lack effective means for assessing progress in this regard. Aggregate student evaluation data does not allow for individual assessment

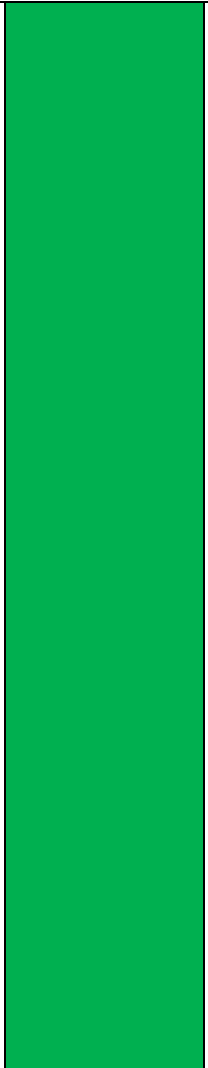| Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
		of currency in instructional effectiveness, and data that directly informs program leaders about individual courses and faculty is limited. Students who met with site visitors indicated that some program faculty could benefit from peer mentoring or institutional support especially in cases where the faculty member is new to the program or is responsible for teaching a course outside of their specialty area.		

E4. FACULTY SCHOLARSHIP

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Policies & practices in place to support faculty involvement in scholarly activities		The program has clear scholarship expectations of faculty as outlined in its by-laws. All PIF members pursue and work on externally funded projects. Since 2012, the program has generated almost $33 million in grant-funded support through 76 funded projects. To date, over half of these projects are community-based and two-thirds have included students. Faculty regularly include funding for students in their grant applications and have provided an annual average of $70,000 in student support over the past five years.	Click here to enter text.	
Faculty are involved in research & scholarly activity, whether funded or unfunded				
Type & extent of faculty research aligns with mission & types of degrees offered				
Faculty integrate their own experiences with scholarly activities into instructional activities		Research productivity is one of four domains considered in faculty promotion and tenure decisions. The self-study describes five metrics (with targets) by which the program's research activities are assessed:		
Students have opportunities for involvement in faculty research & scholarly activities		• % faculty who lead or participate in externally funded research projects • % faculty who serve in grant review or peer-review editorial roles		

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	• % faculty who make presentations at state and national meetings • # program-sponsored graduate assistantships to students • # students who present at annual conferences. The program has performed at or above its target levels over the past three years. Since 2017, 80% of all externally funded research projects have been community-based and 73% have included students. Based on the inventory of projects presented in the self-study document, the research activities of the faculty align well with the program's mission and degree option. Faculty research regularly informs instructional efforts. For example, one PIF uses data visualizations created in partnership with the New England Clinical and Translational Research Initiative to teach students how to package evaluation findings using performance dashboards, infographics, chartbooks, and other visuals that add value to a project. Several faculty use journal articles they have published as required reading for journal clubs or analysis assignments. In consideration of the program's focus on rural health disparities, one PIF highlights readings from their own research and bases a midterm exam question on this body of work. Students have access to faculty-guided research. The self-study provides examples that have led to publications/presentations on the following topics: • Out-of-hospital births and U.S. infant mortality		

		• Cannabis- and opioid-related hospitalizations in Maine • Trends in diagnosis of neonatal abstinence syndrome in newborn hospitalizations in Maine • Health status and healthcare access among Maines' low-income, childless adults. Students and alumni who met with site visitors spoke enthusiastically about the research opportunities available to them. Alumni credited research assistantships with providing practical and professional training that serves them well in their current employment and spoke highly of research faculty as supervisors and mentors. Students voiced appreciation of the clear link between research and community highlighted in the program. One alumnus described having a research assistantship which was crucial to their post-graduation employment. Another student praised their research assistantship with the Muskie School as good practice for the real world, especially in introducing professionals to working on a team and getting a sense of the qualitative and quantitative aspects of public health.		

E5. FACULTY EXTRAMURAL SERVICE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defines expectations for faculty extramural service		The MPH program is situated within the Muskie School of Public Service; thus, service is particularly relevant to the program and its faculty. Faculty place high import on service to the profession and activities that promote public health broadly. All PIF and research faculty have	Click here to enter text.	
Faculty are actively engaged with the community through				

| communication, consultation, provision of technical assistance & other means | | extensive service commitments, both locally and nationally. The university supports extramural service through articulating service-related expectations of faculty as a part of promotion and tenue guidelines and as one of the four pillars of academic excellence defined by the provost's office. During the site visit, faculty explained that service considered during their professional review process is an internal expectation within the program.

The program regularly meets or exceeds its targets regarding faculty involvement in service. For example, the program expects at least 50% of its faculty to serve on one or more local or state advisory boards or committees. Since 2018, 100% of faculty have served in these roles. During the site visit, faculty indicated that new measures and/or targets will be identified at a future faculty retreat given the program's success in this area.

All PIF have served as reviewers on public health related journals including BMJ, JAMA Pediatrics, the Journal of Public Health Management and Practice, and the Journal of Rural Health. Many PIF have held leadership positions on local coalitions or associations including the Maine Public Health Association and the Maine Coalition Against Sexual Assault. Other service commitments include memberships on local and regional committees (i.e., New England Rural Health Association, Maine Shared Community Health Needs Assessment) as well as national board representation (i.e., NIH study sections, Public Health Accreditation Board, and APHA sections). | | |

F1. COMMUNITY INVOLVEMENT IN SCHOOL/PROGRAM EVALUATION & ASSESSMENT

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Engages with community stakeholders, alumni, employers & other relevant community partners. Does not exclusively use data from supervisors of student practice experiences		The program regularly engages community stakeholders to gain feedback on the curriculum, student outcomes, and overall planning processes. The program uses its advisory committee as a formal structure for constituent input. The committee meets at least quarterly and comprises at least ten members that represent the employer community in Maine. Current members represent Veteran's Affairs, local health clinics and departments, medical centers, current students, and faculty from universities and colleges. Past members included representatives from local health departments, local government, local hospital systems, and non-profit organizations. The advisory committee provides feedback on many topics including program development, accreditation, scholarship, marketing and recruitment, community partnerships, and any other topic related to the program's mission and goals. The public health curriculum and CEPH accreditation are standing agenda items for the advisory committee and the program regularly incorporates member feedback in decision-making and implementing change. For example, the committee recently reviewed CEPH findings from the preliminary self-study review to discuss program	Click here to enter text.	
Ensures that constituents provide regular feedback on all of these: • student outcomes • curriculum • overall planning processes • self-study process				
Defines methods designed to provide useful information & regularly examines methods				
Regularly reviews findings from constituent feedback				

| | | strengths and weaknesses and to provide feedback for the final self-study document.

Additionally, the program began its BSPH degree in response to a workforce needs assessment that included the advisory committee, MPH preceptors, and representatives from the Maine Public Health Association. These stakeholders largely influenced the design of the degree. For example, the advisory committee members recommended data analytic skills be a core feature of the curriculum, an area they believed to be critical for the workforce. This is evidenced in the heavy focus on research methods, data analysis, and epidemiology in the bachelor's curriculum.

The advisory committee is intentionally made up of local public health employers who routinely hire program graduates. Additionally, the program collects feedback from alumni through its alumni survey and focus groups. The program regularly engages in open discussion with the committee to interpret alumni feedback and respond to potential areas of quality improvement. During the site visit, employers who sit on the advisory committee praised the program's responsiveness to addressing local workforce needs, specifically calling out the recent hire of a PIF with expertise in environmental health.

Reviewers validated advisory committee discussions and input through meeting agendas and minutes provided with the self-study and verified with committee members during the site visit. Advisory committee members relayed to the site visit team that the program regularly asks for their input and expertise and felt their suggestions were taken seriously and implemented | | |

		quickly. They felt that meetings with the program were substantive and engaging and described discussions about emerging workforce needs, program evaluation, guiding statements, and curricular strengths and weaknesses. The program also uses the Muskie Board of Visitors as a source of support and community engagement. This board comprises retired and senior-level external advisors who support the Muskie School of Public Service in advocacy, fundraising, academic program support, and sponsorship of student events such as panel discussions, networking, and job placement. In addition to feedback from the advisory committee and Muskie School Board of Visitors, the program has implemented many changes to its curriculum based on recommendations from the state's most recent five-year Public Health Workforce Development Plan. Changes made in response to this plan included the following: a move to a skill-based curriculum aligned with public health competency domains; providing curricular opportunities for learning across the divide between clinical care and public health; providing curricula that address workforce education and training needs resulting from the Affordable Care Act; instituting a mentoring program for MPH students; and creating the BSPH program, public health minor, and a public health cluster for undergraduate students.		

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met with Commentary			
Makes community & professional service opportunities available to all students		Students participate in community and professional service through program- and university-level organizations.	Since the Site Visit, the program has been engaged in several community and professional development activities to address this student feedback. This has included having the Maine Public Health Association at our September BSPH and MPH Student Welcome Meetings (in-person and via Zoom) and hosting a training for Public Health faculty and students by Wabanaki REACH (an indigenous-led nonprofit in Maine).	The Council appreciates the program's updates in this area.
Opportunities expose students to contexts in which public health work is performed outside of an academic setting &/or the importance of learning & contributing to professional advancement of the field		MPH students are introduced to community and professional service at the beginning of their program, during orientation, and throughout their studies. Students are encouraged to join several professional and university organizations (e.g., Muskie Student Organization and the Maine Public Health Association), and the program or the graduate school covers their membership fees and registration at local, regional, and national conferences. USM engages and advises BSPH students to connect them with the community. All USM incoming students meet with advisors who introduce opportunities for involvement in student activities on campus. USM offers professional development opportunities for undergraduate students through its Career Hub, which is available to all students. The public health program formally connects all of its BSPH students with the Career Hub and invites staff from the center to present in the Foundations of Public Health course. MPH students are active participants at conferences and professional associations. For example, students have served as abstract reviewers for APHA, exhibitors for state-level conferences, and as members and leaders of	For the first time since Spring 2020, the Muskie Student Organization (MSO) is active and includes Public Health students. We anticipate this will increase student connectedness with each other and with the broader USM community. The MSO recently hosted a webinar for students to meet successful Muskie School alumni and the MSO routinely hosts social activities. Finally, after a 3-year hiatus, Public Health is engaged in planning its annual Spring networking event with local public health employers. We anticipate this	

| | | the USM Muskie Student Organization. The program also reports that both BSPH and MPH students have volunteered to support local and university-based COVID-19 response efforts.

The self-study provides several examples of MPH student involvement in service, facilitated through the curriculum. The program intentionally builds service into the curriculum through course assignments. For example, MPH 650: Applied Research and Evaluation works with one organization every year that needs evaluation assistance. Students are organized into teams and each group develops a feasible evaluation plan responsive to the organization's needs, culminating in a final presentation to the community partner. This course also gives students the opportunity to understand the process of reviewing and scoring federal grants made possible by the faculty member's service on NIH study sections.

Other examples include a service-learning project in MPH 580: Health Literacy and Communication and opportunities for students to volunteer at a Rural Community Engaged Research Symposium at which PIF presented.

The self-study indicates that service projects are in the process of being implemented into the BSPH curriculum.

The commentary pertains to the program's opportunity to engage its undergraduate students more closely in community and professional service. During the site visit, faculty noted difficulties in reaching BSPH students due to the pandemic and lack of administrative support for the new program. BSPH students meet with university | event will occur in February or March 2023 and will provide students with the opportunity to learn about local public health organizations, identify potential Field Experience placements and Capstone projects, and meet employers for whom they could work in the future. | |

		advisors and are exposed to community service in USM's core curriculum learning engagement courses; however, they do not receive the same attention or engagement with the program as do MPH students. Students who met with site visitors indicated a desire for more program support related to opportunities to engage with the local public health community and profession. Self-starting students acknowledged that they can seek out options but noted that more opportunities from the program and faculty would help cohorts better engage with public health.		

F3. ASSESSMENT OF THE COMMUNITY'S PROFESSIONAL DEVELOPMENT NEEDS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Periodically assesses, formally and/or informally, the professional development needs of individuals in priority community or communities		The program assesses the professional development needs of its priority communities through formal and informal assessments and its advisory committee. The program's professional community of interest includes governmental public health, community coalitions, and public health professionals in rural areas. In Maine, nearly 60% of residents live in rural areas and the public health infrastructure is limited. For this reason, the program's curriculum emphasizes preparing students to work in contexts particularly relevant to Maine such as local nonprofit organizations and health systems that support most of the state's public health services.		

The state of Maine, through the Maine CDC, leads two formal assessment processes to set priorities for the state's public health system: *The Maine Shared Community Health Needs Assessment* and the *State Public Health System Assessment.* USM public health faculty are involved in executing, analyzing, and writing both assessments, and the program uses these reports to respond to the topical and functional training needs of Maine's public health professionals. The 2019 health needs assessments indicated that mental health, substance use, access to care, and social determinants of health are the top four health priorities for the state. The State Public Health Systems Assessment revealed that evaluation of effectiveness, accessibility, and quality of personal and population-based health services is the area that requires the most attention in the state.

To supplement the statewide needs assessments, the program's faculty are active in the local public health community, which supports ongoing informal assessment of workforce training needs. For example, one PIF is an active member of Maine's Statewide Coordinating Council for Public Health, the state's representative body of public health stakeholders for collaborative public health planning and coordination. They also serve on two committees, one with MaineHealth (the state's largest health system) and the other with the Northern New England Clinical and Translational Research Network. Additionally, several other program faculty work with the Maine CDC and provide essential governmental public health functions including epidemiological surveillance, research, and dissemination. During the site visit, the program chair reported that faculty who work with Maine CDC provide feedback crucial to responding to workforce

| | | development needs. Other faculty's service positions in the community, discussed in depth in Criterion E5, also support informal assessment of professional needs of the program's communities of interest.

The program's advisory committee, described in detail in F1, also provides direct feedback on community workforce needs as membership largely comprises local employers. Advisory committee members praised the program's active dedication and responsiveness to workforce development needs. | | |

F4. DELIVERY OF PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR THE WORKFORCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Provides activities that address professional development needs & are based on assessment results described in Criterion F3		The program actively responds to community workforce needs and provides appropriate training and activities to its identified priority community. The program currently offers two certificates: Healthcare Quality and Patient Safety; and the graduate certificate in public health. Additionally, the program is developing a third in Health Services Research. The certificate in Healthcare Quality and Patient Safety requires 12 credits of graduate-level work and, to date, the program has conferred the certificate on approximately 40 students, several of whom have used it to advance their careers. The graduate certificate in public health is offered online and serves as a strong introduction to the field of public health. Coursework focuses on foundational public health knowledge, health policy, epidemiology, and program	Click here to enter text.	

planning and evaluation. The certificate in Health Services Research is under development in response to expressed needs from Maine's two largest health systems, which are working to expand their clinical and population health research capacities.

The program is also exploring micro-credentialing as part of USM's greater initiative to fund this instructional method. Micro-credentialing allows learners to highlight the skills and competencies they have achieved in a particular course or pathway and consists of "digital badges" that are meant to be shared on social media, websites, during interviews, and in emails. The public health program is working with USM's interprofessional education workgroup to identify opportunities for micro-courses.

Public health faculty members regularly lead annual continuing education opportunities that are responsive to evaluation findings outlined in Criterion F3. Since 2017, these offerings have served between 15 and 750 participants (with one national program attracting 5,000 over three years and a COVID-19 webinar with 400 participants). Topics have included rural-urban health differences; tobacco prevention and control in rural areas; the Maine Patient Safety Academy; the Maine Infection Prevention Academy; and various COVID-19-related webinars.

During the site visit, the program chair described recent efforts to increase the program's professional development offerings. USM recently created a Graduate and Professional Center that partners with the university's professional degree programs in law, business, policy, and

	 	health. Both the program chair and university leaders spoke highly of the center and its contributions to the local community and workforce. The chair explained that the center collaborates with the program to conduct research on the professional needs of the local community and suggests topics for webinars and trainings that the program can host. University leaders indicated that they believe that this partnership will continue to attract working professionals to the public health program.		

G1. DIVERSITY & CULTURAL COMPETENCE

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Defines appropriate priority population(s)	 	The program has identified four priority populations in line with both university and program-level goals. The program defines under-represented communities of interest for students as immigrants and refugees, students from rural areas, students of color, and first-generation college students. The self-study provides evidence that the program has successfully recruited and supported students with minoritized social identities, including first-generation students. Student recruitment strategies are further detailed in Criterion H4.

For its faculty-related metrics, the program focuses on a racially and ethnically diverse faculty complement who represent the rural communities the program serves. The self-study indicates significant faculty engagement in rural communities but reveals that the program has not met its goal in hiring any faculty of color. | The Public Health faculty have referred the concern expressed in this commentary to the program's Diversity, Equity, and Inclusion (DEI) committee. The DEI committee will explore options to more routinely collect data on and assess perceptions of the program's climate. The DEI committee will also identify opportunities to formalize recruitment and retention goals for improving diversity, equity, and inclusion within the Public Health Program. The DEI committee is scheduled to provide recommendations on this issues to the full faculty in Spring 2023. | The Council reviewed the self-study document and team's report. Based on the totality of the information; to reflect the Council's assessment of the issue identified; and to ensure consistency with other Council decisions, the Council acted to change the team's finding of met with commentary to a finding of partially met.

The concern relates to the program's lack of actionable data on perceptions of the program's climate, which prevents the |
Identifies goals to advance diversity & cultural competence, as well as strategies to achieve goals	 			
Learning environment prepares students with broad competencies regarding diversity & cultural competence	 			
Identifies strategies and actions that create and maintain a culturally competent environment	 			
Practices support recruitment, retention, promotion of faculty (and staff, if applicable), with attention to priority population(s)	 			
Practices support recruitment, retention, graduation of diverse	 			

students, with attention to priority population(s)	🟩	The program lists three diversity goals that are consistent with the USM's mission: • Provide a learning environment that supports equality, honesty and respect • Prepare students to collaborate with diverse communities • Engage diverse groups of students, staff and faculty associated with the program In its ongoing effort to reach target goals of diversity and equity, the program works collaboratively with other research and service entities across the university. Examples targeting the student population include using available scholarship funding to support the program's diversity goals; engaging in a partnership with the local resource center for immigrants and refugees to encourage facilitated application to the program; and working with the Muskie School to reduce out-of-state tuition to recruit students regionally throughout New England given the demographic homogeneity in Maine. To create and maintain a culturally competent environment, faculty are active participants in DEI-related professional development activities. Examples of the program's dedication to increasing diversity and equity include the program chair's participation on USM's Inclusion, Diversity, and Equity Council's Curriculum Committee and the new development of a program-specific DEI committee. Recent examples of opportunities for professional development in DEI include training on supporting LGBTQ+ students, Wabanaki REACH workshops, and various webinars on advancing racial equity.		program from ensuring that its diversity plans are systematic and coherent, as required by the criterion. Alumni are asked how equitably they were treated in the classroom in the university-administered survey which has a response rate around 30%. No other data address student perceptions of the program's climate relating to diversity and cultural competence. The program does not regularly assess faculty and staff perceptions of its climate.
Regularly collects & reviews quantitative & qualitative data & uses data to inform & adjust strategies	🟥			
Perceptions of climate regarding diversity & cultural competence are positive	🟩			

		In addition to faculty-specific efforts to maintain a culturally competent environment, the program has expanded student exposure to health equity content and competencies. In 2020, the program defined its generalist concentration competencies with an intentional eye towards equity. Two of the five concentration competencies center on rural health equity and environmental justice. Additionally, several faculty have introduced specific antiracist readings and discussions into their courses. Examples include requiring works on cultural competence and the social construction of medicine as a racist institution and an overhaul of the health leadership course to highlight content that features BIPOC, LGBTQ+, and women leaders and scholars. Though the program has been unable to hire and retain a racially and ethnically diverse faculty complement to meet its defined goals, it has numerous strategies in place to address this issue. The program hired a new faculty member in 2019-2020 and implemented several new strategies to ensure equity throughout the process including requiring an anti-bias hiring training for committee members and tailoring the position description to highlight health equity. The program is also committed to diversifying its part-time faculty pool, specifically through the "topics in public health" course. For example, the program recently recruited a citizen of the Passamaquoddy Tribe to teach Indigenous Public Health in spring 2022. The commentary relates to gaps in the program's ability to document a sufficiently systematic approach to assuring diversity, based on the lack of actionable data on perceptions of the program's climate. Alumni are asked		

		how equitably they were treated in the classroom in the university-administered survey, which has a response rate around 30%. No other data address student perceptions of the program's climate relating to diversity and cultural competence. The program does not regularly assess faculty and staff perceptions of its cultural climate.		

H1. ACADEMIC ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Partially Met			
Students have ready access to advisors from the time of enrollment		All public health students are assigned to a faculty advisor upon admission to the program. The program chair provides all students with a checklist specific to the degree level that informs graduation requirements (for BSPH students) or an academic plan (for MPH students). Graduate students discuss and review their individualized academic plan periodically with their advisors. BSPH students meet with program faculty advisors each semester. Graduate students who met with site visitors praised faculty flexibility, openness, and especially their help directing students to electives that best suit their academic and professional goals. Students reported feeling welcome to speak with faculty and saw feedback, including criticism, addressed quickly.

MPH student survey data indicates overall satisfaction with the advising process with few exceptions. Several comments from 2018 and 2019 indicate that students need clearer guidance on graduation requirements (at least one student reports believing they had graduated only to find out they still needed six credits) and that the | The Program hosted two separate "Welcome and Group Advising" sessions with BSPH and MPH in September 2022. These sessions included an orientation to program competencies, discussion of the Field Experience and (for MPH students only) Capstone requirements, and an orientation to the Program's updated Brightspace course pages. Although widely advertised multiple times (with refreshments provided), attendance at these events was not robust. While we intend to hold a comparable session in Spring 2023, we are also developing alternative approaches to orientation. For example, we are revising our online Orientation course and organizing several general orientations to the public health profession. This | The Council reviewed the site visit team's report and program's response. Based on the information in the response, the Council concluded that the program has at least minimally addressed the second concern identified by the team, revising orientation activities for students and both degree levels. The team's first concern remains. |
Advisors are actively engaged & knowledgeable about the curricula & about specific courses & programs of study				
Qualified individuals monitor student progress & identify and support those who may experience difficulty				
Orientation, including written guidance, is provided to all entering students				

program needs a "better introduction for new students." In general over the past three years, the majority of MPH students reported that their advising was good or excellent.

BSPH students who met with site visitors expressed concerns about the quality of advising and suggested that there could be more collaboration between university advisors and program advisors, especially regarding program requirements for admission, graduation, and transfer credits. A transfer student who met with site visitors described the process of working with university advisors to ascertain the requirements for the public health program as "a nightmare" and noted that her university advisor did not have a good grasp of program-specific requirements. The program has not yet administered advising satisfaction surveys to its BSPH cohorts but plans to do so in the next administration cycle.

The first concern pertains to the inability of the site visit team to confirm that BSPH advising is appropriate and sufficient based on the lack of data available. At the time of the site visit, the program had not yet administered its planned advising satisfaction surveys to its BSPH students. The program will likely benefit from review of student comments, particularly regarding processes for transfer and first-year students.

The second concern relates to the lack of a robust orientation to the program and the field of public health for both undergraduate and graduate students. The self-study indicates that program-level orientation for all students consists of a one-hour meet and greet, led by current students, and attended by faculty. During the

includes the Employer networking event described under Criterion F2 and encouraging students to participate in the Maine Public Health Association's mentorship program. Dr. Brenda Joly holds a public health professional panel discussion in BPH 201 that she will open to all BSPH students to provide another opportunity for students to receive orientation to the public health profession.

Our program is working with the Advising Office to ensure a warm hand-off from the undergraduate professional advisors to our BSPH faculty advisors (once they reach the required credits). We have also been meeting routinely with the professional advisors to identify ways to improve collaboration and coordination. This has included professional advisor attendance at the BSPH Welcome & Group Advising session in Fall 2022 and the development of a shared Google spreadsheet that documents pre-approved electives and other course substitutions. Finally, the Chair has worked with professional advising and the USM Registrar to update the online Degree Progress Report (DPR) to ensure that students have

| | | pandemic, this orientation was conducted via Zoom. The self-study notes that the online orientation has not been updated in several years and is not well-attended. Students who met with site visitors strongly recommended adding an orientation for both degree levels to introduce cohorts to both the field of public health and the requirements of the program. Students reported that for undergraduate or non-working professional students, an introduction to what public health is and what careers are available would be invaluable. Both BSPH and MPH students noted that a formal orientation to program requirements including an explanation of the field experience/practicum and culminating experience/ILE would have been useful. Alumni who met with site visitors agreed that orientation to the field and to the program would have been useful, especially for the program's identified priority populations (first-generation, rural, immigrant/refugee students). | accurate, up-to-date information on the courses still needed to graduate.

Finally, the Public Health program has developed a brief survey for undergraduate students to assess advising satisfaction. The survey will be administered by the Muskie School Administrative Assistant via a Google Forms tool after the open registration period for Spring 2023 (November 7-18, 2022). We will review the results and develop a quality improvement plan at our Spring 2023 retreat. | |

H2. CAREER ADVISING

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Students have access to qualified advisors who are actively engaged & knowledgeable about the workforce & can provide career placement advice		The program leverages its extensive ties to the local workforce and community to ensure that students receive career advising. Faculty, alumni, advisory committee members, and university staff all provide careering counseling services.	Click here to enter text.	
Variety of resources & services are available to current students		The program uses faculty members' public health		

| Variety of resources & services are available to alumni | | expertise, experience, and connections to the local community to provide career advising. Faculty advisors encourage students to think about their field experience and capstone projects as opportunities to explore new career paths and facilitate introductions. Advisors also actively encourage students to conduct informational interviews with alumni, adjunct faculty, preceptors, and advisory board committee members. The program frequently engages its alumni to meet with current students for networking opportunities and informational interviews. Additionally, the university hosts a career and employment hub that disseminates information about career opportunities to all students. Staff from the hub have visited public health courses to share available resources and connect with students.

During the site visit, faculty shared that prior to the pandemic, the program hosted an in-person networking event that was well-attended by MPH students and featured 12 community partners. The program chair indicated a desire to continue this event and extend invitations to BSPH students as well. The program is motivated to engage its undergraduate students and sees this as an important opportunity to do so in the future more thoroughly. BSPH alumni who met with site visitors recommended more career advising for undergraduate students and felt that this was an area the program could improve.

Alumni who met with site visitors expressed gratitude for faculty-facilitated connections that led them to their current careers. Alumni spoke highly of program faculty and felt comfortable reaching out as a graduate for professional advice and career counselling. Many faculty | | |
|---|---|---|---|---|

| | | serve as professional references for alumni in addition to helping review resumes, prepare for interviews, and facilitate introductions to professional contacts in the community. Student survey data from the past three years indicates high levels of satisfaction with career advising, access to hands-on community-based experiences in the program, and discussions with advisors regarding post-graduation plans and opportunities in which they may be interested. | | |

H3. STUDENT COMPLAINT PROCEDURES

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Defined set of policies & procedures govern formal student complaints & grievances		Student complaint procedures are clearly articulated through documentation on the USM website and student catalogs. The dean of students' office also provides guidance to students in identifying whether the nature of their complaint is academic, administrative, or non-academic. Formal grievances must be submitted in writing to the senior college vice-chairperson and include a description of the grievous behavior. During the site visit, faculty reported that students often feel comfortable speaking with the program chair or other faculty members if a problem arises. Students and alumni who met with site visitors agreed and stated that they knew where to find information on how to file a formal complaint if necessary. Both students and faculty described instances in which students approached the program with constructive feedback that was taken seriously and change, if necessary, was implemented quickly.	Click here to enter text.	
Procedures are clearly articulated & communicated to students				
Depending on the nature & level of each complaint, students are encouraged to voice concerns to unit officials or other appropriate personnel				
Designated administrators are charged with reviewing & resolving formal complaints				
All complaints are processed & documented				

		There have been no formal complaints in the past three years. One alumnus described submitting a formal complaint several years ago and praised the program and university for handling the situation professionally, keeping the students' confidence, and protecting anonymity throughout the process.		

H4. STUDENT RECRUITMENT & ADMISSIONS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Implements recruitment policies designed to locate qualified individuals capable of taking advantage of program of study & developing competence for public health careers		The program focuses on recruiting and retaining students who are Maine residents, from diverse backgrounds (immigrants, refugees, people from rural areas, and students of color), and working professionals. Student recruitment occurs at both a university and program level. USM provides marketing for all undergraduate programs including public health and targets television and social media campaigns during peak recruitment cycles. USM also conducts outreach to local high school guidance counselors, providing flyers and website information. At the graduate level, the university's newly created graduate and professional center works closely with the program to recruit target populations through Google search advertisements and social media campaigns. During the site visit, the chair discussed program-level efforts for recruitment and retention. The program has recently increased efforts to recruit its identified priority populations. Examples include fostering relationships with local community partners like Portland Adult Education and the local Wabanaki Tribe, consideration of enrolling	Click here to enter text.	
Implements admissions policies designed to select & enroll qualified individuals capable of taking advantage of program of study & developing competence for public health careers				

remote, synchronous students in rural Maine, and the submission of a recent grant to the Health Resources and Service Administration to aid in recruiting, enrolling, and retaining refugee and immigrant students. Faculty who met with site visitors acknowledged that recruitment was an area they would like to focus on, especially for the BSPH degree, and consider these concerted efforts a good start.

Students interested in matriculating into the MPH program can apply on a rolling basis. The Admissions Committee reviews all applications within three weeks of submission. Applications must include a personal statement, undergraduate or equivalent transcripts, letters of recommendations and considerations including GPA, international life experience, and a description of experience working in public health or healthcare delivery. In 2019, the program dropped the GRE requirement in favor of a more equitable admissions process.

USM's Office of Admissions processes all undergraduate applications on a rolling basis. Requirements for application include an official transcript or General Education Diploma, or similar; letter of recommendation; Official Test of English as a Foreign Language, or International English Language Testing System; optional application materials include a personal essay and SAT or ACT. Students must declare a major before earning 60 credits at USM and work with the registration and scheduling services office to do so.

The program has identified several measures to assess recruitment success and has met or exceeded all of its self-defined targets for both the MPH and BSPH degrees. Examples of these metrics include the number of MPH

		students of color, immigrant or refugee students, and rural students supported financially each year; how many MPH students with previous healthcare experience enroll; and how many students with a high school GPA of at least 2.75 enroll in the BSPH.		

H5. PUBLICATION OF EDUCATIONAL OFFERINGS

Criterion Elements	Compliance Finding	Team's Evidence for Compliance Finding	School/Program Response	Council Comments
	Met			
Catalogs & bulletins used to describe educational offerings are publicly available		The course catalogs, academic calendar, admissions policies, grading policies, academic integrity standards, promotional recruitment materials and degree completion requirements are up to date and publicly available, linked to USM's website.	Click here to enter text.	
Catalogs & bulletins accurately describe the academic calendar, admissions policies, grading policies, academic integrity standards & degree completion requirements				
Advertising, promotional & recruitment materials contain accurate information				

Agenda

Wednesday, June 15, 2022

5:00 pm   **Site Visit Team Executive Session 1**

Thursday, June 16, 2022

8:30 am   **Program Evaluation**

Participants	Topics on which participants are prepared to answer team questions
Ben Greenfield, PhD, Assistant Professor	*Guiding statements – process of development and review?*
Brenda Joly, PhD, Professor	*Evaluation processes – how does program collect and use input/data?*
Erika Ziller, PhD, Program Chair	*Resources (personnel, physical, IT) – who determines sufficiency? Acts when additional resources are needed?*
Erika Lichter, ScD, Associate Research Professor	*Budget – who develops and makes decisions?*
Total participants: 4	

9:30 am   **Break**

9:45 am   **Curriculum 1**

Participants	Topics on which participants are prepared to answer team questions
Ben Greenfield, PhD, Assistant Professor	*Foundational knowledge*
Brenda Joly, PhD, Professor	
Erika Lichter, ScD, Associate Research Professor	*Foundational competencies – didactic coverage and assessment*
Erika Ziller, PhD, Program Chair	*Concentration competencies – development, didactic coverage, and assessment*
Judy Tupper, DHEd, Practice Faculty	
Kate Ahrens, PhD, Assistant Research Professor (via Zoom)	
Sara Huston, PhD, Associate Research Professor	
Total participants: 7	

11:00 am   **Break**

11:15 am **Curriculum 2**

Participants	Topics on which participants are prepared to answer team questions
Ben Greenfield, PhD, Assistant Professor	*Applied practice experiences*
Brenda Joly, PhD, Professor	*Integrative learning experiences*
Erika Lichter, ScD, Associate Research Professor	
Erika Ziller, PhD, Program Chair	*Public health bachelor's degrees*
Judy Tupper, DHEd, Practice Faculty	
Sara Huston, PhD, Associate Research Professor	
Total participants: 6	

12:15 pm **Break & Boxed Lunch in Executive Session**

1:00 pm **Instructional Effectiveness**

Participants	Topics on which participants are prepared to answer team questions
Ben Greenfield, PhD, Assistant Professor	*Currency in areas of instruction & pedagogical methods*
Brenda Joly, PhD, Professor	*Scholarship and integration in instruction*
Chris Paulu, PhD, Assistant Research Professor	*Extramural service and integration in instruction*
Erika Lichter, ScD, Associate Research Professor	*Integration of practice perspectives*
Erika Ziller, PhD, Program Chair (will step out at 1:30)	*Professional development of community*
Judy Tupper, DHEd, Practice Faculty	
Sara Huston, PhD, Associate Research Professor	
Total participants: 7	

2:00 pm **Break**

3:00 pm **Students via Zoom Meeting**

Participants, matriculation semester	Topics on which participants are prepared to answer team questions
Graduate Students	*Student engagement in program operations*
Debra Dunlap (Fall 2020)	*Curriculum*
Raul Gierbolini-Rivera (Summer 2021)	*Resources (physical, faculty/staff, IT)*
Katy Bizier (Spring 2021)	*Involvement in scholarship and service*
Emily Kovalsky (Fall 2019)	*Academic and career advising*

Undergraduate Students Erin Price (Fall 2021) Kayla Lewis (Fall 2021)	*Diversity and cultural competence* *Complaint procedures*
Total participants: 8	

4:00 pm **Break**

4:15 pm **Stakeholder/ Alumni Feedback & Input via Zoom Meeting**

Participants	Topics on which participants are prepared to answer team questions
Stephen Sears, MD	*Involvement in program evaluation & assessment*
Nancy Birkhimer, MPH	*Perceptions of current students & program graduates*
Tania Strout, PhD, RN	*Perceptions of curricular effectiveness*
Joe Zamboni, MPH, MPPM	*Applied practice experiences*
	Integration of practice perspectives
Jaclyn Janis, MPH, RN	*Program delivery of professional development opportunities*
Sarah Gabrielson, MPH, RN	
Connor Huggins, MPH	
Kristina Wilson, BSPH	
Mike Flaherty, MPH	
Ren Morrill (MPH candidate)	
Total participants: 10	

5:15 pm **Site Visit Team Executive Session 3**

Friday, June 17, 2022

8:30 am   **University Leaders via Zoom Meeting**

Participants	Topics on which participants are prepared to answer team questions
Jo Williams, PhD, Dean of College of Management and Human Services	*Program's position within larger institution*
Jeannine Uzzi, PhD, Provost	*Provision of program-level resources*
Glenn Cummings, PhD, President	*Institutional priorities*
Total participants: 3	

10:00 am   **Site Visit Team Executive Session 4**

12:00 pm   **Site Visit Team Working Lunch**

1:00 pm   **Exit Briefing**