



## Establish a Doctorate of Public Health (PCC 18081)

**PRESENTED BY** Janna Bianchini, Chair, Senate Programs, Curricula, and Courses Committee

**REVIEW DATES** SEC – August 28, 2019 | SENATE – September 12, 2019

**VOTING METHOD** In a single vote

**RELEVANT POLICY/DOCUMENT** NA

**NECESSARY APPROVALS** Senate, President, University System of Maryland Board of Regents, and Maryland Higher Education Commission

### ISSUE

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The School of Public Health proposes to establish a Doctorate of Public Health (DrPH), a professional practice doctoral degree that is recognized as a terminal degree for high-level leaders in the field of public health. In response to the growing need in the field, DrPH offerings are increasingly popular among Schools of Public Health. The DrPH bridges the gap between public health research and practice by developing senior public health leaders who are trained in advocacy, communication, community and cultural orientation, critical analysis, leadership, management, professionalism and ethics, and policy analysis and development. Admitted students must have at least three years of public health practice experience and have a Master of Public Health, Master of Health Administration, or an equivalent degree. Students receive an advanced education intended to provide mastery of high-level competencies through scholarship in knowledge translation and evidence-based approaches to public health issues; use of systems thinking to approach public health issues; advocacy and policy implementation to improve public health; and strategic planning to promote community health.

The goal of the program is to develop health professionals who are competent in understanding the health needs of populations and qualified to design, implement, and evaluate programs and policies aimed at improving the public's health. In accordance with the Council on Education for Public Health, which is the accrediting organization for Schools of Public Health, the UMD DrPH will emphasize leadership by requiring field experiences and projects situated within public health organizations. As a professional practice doctoral degree, the program will not require a dissertation, but a 15-credit culminating experience that will focus on a public health challenge facing a public health organization.

The program will be offered online in a semester-based format with an additional requirement that students spend two one-week periods per year on campus in January and August. The curriculum consists of 44 total credits: 13 core credits, 16 specialization credits, and 15 culminating experience credits. The 13 core credits focus on leadership, communication, policy, and quantitative methods. The 16 specialization credits focus on executive leadership in public health. The School plans to develop and add more specializations after the program is established. This first concentration in executive leadership will be administered by the Department of Behavioral and Community Health.

The 15 credits of culminating experience requires two courses. First, HLTH790 Leadership in Action (3 credits) requires students, under faculty mentorship, to complete at least one project addressing a public health challenge facing an organization. HLTH829 Doctoral Capstone (12 credits) requires students to complete a field-based doctoral project designed to influence public health programs, policies, or systems. The project may be a continuation of HLTH790, but will require the student to demonstrate synthesis of all competencies in the program. The course will include both a written deliverable and an oral defense.

The program will be School-wide with the first concentration administered by the Department of Behavioral and Community Health. Tuition revenue will be used to cover all program expenses. This self-support program will have no impact on the School or Department's traditional programs.

This proposal was approved by the Graduate School Programs, Curricula, and Courses committee on April 26, 2019, and the Senate Programs, Curricula, and Courses committee on May 3, 2019.

## **RECOMMENDATION(S)**

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The Senate Committee on Programs, Curricula, and Courses recommends that the Senate approve this new degree program.

## **COMMITTEE WORK**

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The committee considered this proposal at its meeting on May 3, 2019. The following participants presented the proposal and responded to committee questions: Robert Gold, Professor of Behavioral and Community Health; Stephen Roth, Associate Dean of the School of Public Health; and Sara Olsen, Graduate Assistant, School of Public Health. The proposal was unanimously approved by the committee.

## **ALTERNATIVES**

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The Senate could decline to approve this new degree program.

## **RISKS**

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If the Senate declines to approve this degree program, the University will lose an opportunity to offer an increasingly popular terminal Doctor of Public Health degree that is necessary to develop a critical segment of public health leadership.

## **FINANCIAL IMPLICATIONS**

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The program will be self-supported. Tuition revenue will cover program expenses. Some start-up costs will be covered by the Provost's Office.

**University of Maryland PCC  
Program/Curriculum/Unit Proposal**

PCC Log No: **18081**

**Program:** Proposed DrPH Program  
**Department/Unit:** Department of Behavioral and Community Health  
**College/School:** School of Public Health  
**Proposal Contact Person (with email):** Dr. Robert Gold, rsgold@umd.edu

**Type of Action (check one):**

- Curriculum change (includes modifying minors, concentrations/specializations and creating informal specializations)
  - Curriculum change is for an LEP Program
- Rename a program or formal Area of Concentration
- Establish/Discontinue a formal Area of Concentration
- Other:
- Establish a new academic degree/certificate program
- Create an online version of an existing program
- Establish a new minor
- Suspend/Discontinue a degree/certificate program
- Establish a new Master or Certificate of Professional Studies program
- New Professional Studies program will be administered by Office of Extended Studies

*Italics indicate that the proposal must be presented to the full University Senate for consideration.*

**Approval Signatures - Please print name, sign, and date. For proposals requiring multiple unit approvals, please use additional cover sheet(s).**

1. Department Committee Chair KATHERINE SHARP *Katherine Sharp* 02/28/19
2. Department Chair Barbara Curshaw *Barbara Curshaw* 12/28/19
3. College/School PCC Chair Brit Saksvig *Brit Saksvig* 3/25/19
4. Dean Boris D Lushniak *Boris D Lushniak* 3/25/19
5. Dean of the Graduate School (if required) *John F. ...* 5/14/19
6. Chair, Senate PCC Janna Bianchini *Janna Bianchini* 5-8-19
7. University Senate Chair (if required) \_\_\_\_\_
8. Senior Vice President and Provost \_\_\_\_\_

**Instructions:**

When approved by the dean of the college or school, please send the proposal and signed form to the Office of the Associate Provost for Academic Planning and Programs, 1119 Main Administration Building, Campus-5031, and email the proposal document as an MSWord attachment to [pcc-submissions@umd.edu](mailto:pcc-submissions@umd.edu).

**Summary of Proposed Action (use additional sheet if necessary):**

This proposal seeks to establish an online DrPH degree in the School of Public Health. The DrPH program will be a School-wide program with the potential for several concentrations. This proposal includes the first of the concentrations, Executive Leadership in Public Health, and will be administered by the Department of Behavioral and Community Health. It is designed to develop leaders prepared to take on the transformation mandate of expanding the scope and reach of public health to address all factors that promote health and well-being. This hybrid course format and cohort structure promotes a learning community with full time students able to complete the program in three years. The goal of the doctoral program is to develop health professionals competent in understanding the health needs of populations who are qualified to conduct and translate research to implement programs and policies aimed at improving the public's health.

**Unit Code(s)** (to be entered by the Office of Academic Planning and Programs):

A new degree program proposal will need to be approved not just by campus but also by the University System of Maryland (USM) Board of Regents and the Maryland Higher Education Commission (MHEC). New certificate programs need to be approved by the USM Chancellor and MHEC. The following prompts are based on academic policies for programs and reflect campus requirements and MHEC requirements. The prompts also include questions frequently asked by review committees. For more information about MHEC requirements, see [http://mhec.maryland.gov/institutions\\_training/Pages/acadaff/AcadProgInstApprovals/NewAcademicProgramProposals.aspx](http://mhec.maryland.gov/institutions_training/Pages/acadaff/AcadProgInstApprovals/NewAcademicProgramProposals.aspx).

## MISSION AND PURPOSE

1. Describe the program and explain how it fits the institutional mission statement and planning priorities. The University Mission Statement and Strategic Plan can be found on this site: <https://www.umd.edu/history-and-mission>.

As the flagship campus of the University System of Maryland, the mission of the University of Maryland, College Park is to provide excellent teaching, research, and service. The University educates students and advances knowledge in areas of importance to the State, the nation, and the world. The University is committed to being a preeminent national center for research and for graduate education. The University will accomplish this through five clearly stated objectives. The proposed doctor of public health, DrPH, program aligns perfectly with Objective 4: Expand excellent professional graduate programs that are nationally recognized for their contributions to the practice of the professions, for their pioneering curricula, and for their spirit of innovation and creativity.

A DrPH is an advanced professional degree designed for public health practitioners. The proposed DrPH program will focus on the practical application of public health principles across a variety of fields—including communications, public policy, public health strategy development, and advocacy—preparing graduate students for careers as senior-level administrators, applied researchers, policy makers, and educators providing leadership to protect and improve the public's health.

Recognizing the gap between public health research and practice, the Institute of Medicine's 1988 *The Future of Public Health* recommended public health educational programs emphasize practice and arm graduates with evidence-based research knowledge combined with leadership skills to bridge that gap. In the 15 years following this report, Association of Schools and Programs of Public Health (ASPPH) data showed the number of DrPH students enrolled in an accredited program remained steady. However, in the last 15 years, the DrPH has grown in importance as it has become clear the increased need for senior public health leaders educated in advocacy, communication, community and cultural orientation, critical analysis, leadership, management, professionalism and ethics, and policy analysis and development. During the years between 2002 and 2015, ASPPH data showed enrollments in DrPH programs increase 250% from 605 to 1526 and is still on the rise.

The University shares its research, educational, cultural, and technological strengths with the Maryland citizenry. Its collaborations with State, federal, private, and other not-for-profit partners promote economic development and improve quality of life. As a public flagship campus, the university is committed to providing high quality educational opportunities that are affordable by all students regardless of family income. The proposed DrPH program will offer the flexibility of a hybrid design for working leaders combined with the proximity and

longstanding relationships with local partners to enhance the student practicum experience and continue to collaborate with Maryland citizenry. As public health challenges become more complex, requiring comprehensive systems approaches, the next generation of leaders must be multiskilled practitioners to address entrenched problems locally, nationally, and around the world.

The School of Public Health is proposing a schoolwide DrPH with the potential for several concentrations. The first of these concentrations – DrPH Executive Leadership in Public Health – is represented in this proposal and will be administered through the Department of Behavioral and Community Health. We anticipate a relatively small cohort size per concentration, growing to 12 students admitted annually as the program is developed. We expect to draw a wide variety of public health practitioners who seek to add doctoral level applied research, communication, and leadership skills to their professional training.

## **PROGRAM CHARACTERISTICS**

*2. Provide a full catalog description of the proposed program. As part of the description, please indicate any areas of concentration or specializations that will be offered.*

The DrPH degree is a multidisciplinary program designed to provide working professionals with the broad range of knowledge and skill-based competencies needed to assume leadership roles in addressing important public health practice. Students receive an advanced education intended to provide mastery of high-level competencies in leadership, management, innovation, and communications through scholarship in knowledge translation and evidence-based approaches to public health issues; use of systems thinking to approach public health issues; advocacy and policy implementation to improve public health; and strategic planning to promote community health.

Executive Leadership in Public Health degree program may be completed either full-time or part-time, although full-time is preferred. Faculty support coursework, research and practice experiences in many areas, including: health communication; health behavior; adolescent health; women’s health; health literacy and health disparities. Faculty hold doctoral degrees in public health, psychology, health education, sociology and epidemiology. The Department of Behavioral and Community Health offers excellent research and laboratory facilities with strong ties to the community including the Center for Young Adult Health and Development, Laboratory for Health Behavior Assessment and Intervention, Prevention Research Center, and The Center for Health Behavior Research.

*3. What are the educational objectives of the program?*

In the modern era of public health often referred to as Public Health 3.0, there exists a call to action to “boldly expand the scope and reach of public health to address all factors that promote health and well-being...” (DeSalvo 2016) which now also includes social determinants of health as well as economic factors, education, environment, violence and other societal influences.

The DrPH Executive Leadership Program in Public Health is designed to develop leaders prepared to take on the transformation mandate for Public Health 3.0. This hybrid course format and cohort structure promotes a learning community with full time students able to complete the program in three years. Through its proximity to Washington D.C. and access to transformative leaders in multiple sectors, this program combines the best of executive type programming with the finest pedagogy found in online programs. The goal of the doctoral program is to develop health professionals competent in understanding the health needs of populations who are qualified to conduct research in order to implement programs and policies aimed at improving the public’s health. The program will provide students with the opportunity to develop research application skills essential in making significant contributions to the scientific and professional literature in behavioral and community health.

4. Describe any selective admissions policy or special criteria for students selecting this field of study.

Admission is for the Fall semester. Applicants must meet the following minimum admission criteria as established by the Graduate School:

- Applicants must have earned a four-year baccalaureate degree from a regionally accredited U.S. institution, or an equivalent degree from a non-U.S. institution.
- Applicants must have earned a 3.0 GPA (on a 4.0 scale) in all prior undergraduate and graduate coursework.
- Applicants must provide an official copy of a transcript for all of their post-secondary work.
- International applicants must fulfill all requirements relating to international academic credentials, evidence of English proficiency, financial certification, and visa documentation.

Applicants must fulfill the School of Public Health’s admission requirements:

- Applicants must have MPH / MHA or equivalent.
- Applicants must first apply through SOPHAS (Schools of Public Health Application Service) website, [www.sophas.org](http://www.sophas.org), and include the following information with the completed SOPHAS application:
  - Official transcripts for all post-secondary work
  - Three letters of recommendations that address the applicant’s academic capabilities and probability of success in a doctoral program.
  - Statement of Goals and Interests.
- Following the submission of the SOPHAS application, applicants are notified that they are required to submit a supplemental application to The Graduate School, University of Maryland. Applicants are required to also submit:
  - An official copy of transcripts for all post-secondary work.
  - GRE scores, as required by concentration administering Department

5. Indicate the course requirements with course numbers, titles and credits. If applicable, indicate if any course will also count for a general education requirement. In an appendix, provide the course catalog information (credits, description, prerequisites, etc.) for all of the courses.

Module	Course Number and Name	Credits
Core Courses (13 credits)	Introduction to Successful Online Learning – SPH Canvas Catalog Module	0
	SPHL 705 Transformational Leadership and Systems	2
	SPHL 706 Leadership in Crisis	2
	HLTH 720 Crisis Management and Risk Communication	3

	HLSA 723 Health Policy and Advocacy	3
	EPIB 651 Applied Regression Analysis	3
Public Health Leadership in Practice (16 credits)	HLTH 625 Community Assessment Through Qualitative Methods	3
	HLTH 711 Advanced Research Methods in Health	3
	HLTH 609 Journal Club: Foundations of Leadership	1
	HLTH 609 Journal Club: Understanding Role of Technology in Public Health Practice and Communication	1
	HLTH 609 Journal Club: Big Data and Predictive Analytics	1
	HLTH 709 Leadership Seminar: Designing the DrPH Capstone	1
	HLTH 709 Leadership Seminar: Grant & Scholarly Writing	1
	HLTH 709 Leadership Seminar: Strategic Planning in Public Health	1
	HLTH 709 Leadership Seminar: Evidence-Based Practice/Practice-Based Evidence	1
	Elective	3
Culminating Experience (15 credits)	HLTH 790 Leadership in Action Field Experience and Capstone	3
	HLTH 829 Doctoral Capstone	12

Course catalog information can be found in Appendix A.

6. *Summarize the factors that were considered in developing the proposed curriculum (such as recommendations of advisory or other groups, articulated workforce needs, standards set by disciplinary associations or specialized-accrediting groups, etc.).*

Our accrediting body, the Council on Education for Public Health (CEPH) has outlined in its new accreditation standards a substantial change in its thinking about professional doctoral programs. They have outlined a specific vision for a DrPH with a focus on leadership skills. The DrPH degree has been offered by accredited schools of public health for many years but there have been few differences between this degree and the traditional PhD program. This new emphasis in leadership is an opportunity for the University of Maryland School of Public Health to leverage unique opportunities available in this region.

With a new Dean in place (Dr. Boris Lushniak), our intent is to add a substantive focus on workforce development and recruit professionals at a stage in their career to take on more leadership and strategic planning roles. The School of Public Health initiated a year-long investigation into existing programs, enrollment levels, and curriculum emphasis. The courses that comprise the core of any DrPH in the School of Public Health (SPH) were reviewed by SPH department chairs. The proposed curriculum has been reviewed and commented upon by the faculty of the Department of Behavioral and Community Health (BCH), the proposed administrator of the DrPH Executive Leadership in Public Health.

Our current research on other programs suggest that there are three principal competitors with hybrid-online DrPH programs. The three programs are at the Schools of Public Health at: 1) Johns Hopkins University; 2) University of North Carolina, Chapel Hill; and, 3) University of South Florida. The high cost of their programs is a barrier to enrollment for the target candidate - public health leaders with an MPH and less than 10 years of experience. The locality of the University offers opportunities for State and federal practicum experiences not available outside of the National Capital Region.



On an anecdotal level – we maintain a booth each year at the largest annual meeting of public health practitioners and potential students. The number one request we’ve fielded each year at that booth for the last three years has been “do we offer a DrPH program?” We take that as a proxy for increasing demand for such a program.

7. *Sample plan. Provide a term-by-term sample plan that shows how a hypothetical student would progress through the program to completion. It should be clear the length of time it will take for a typical student to graduate.*

The online program may be completed in 40 months of full-time study. UMD Graduate School registration policies stipulate students have 5 years to obtain a DrPH s degree and circumstances may arise when students cannot continuously dedicate time to the program. In such cases, students making satisfactory progress may receive a waiver of continuous registration or leave of absence from the UMD Graduate School for up to one year. The time taken on an approved leave of absence is not included in the time limitation for degree completion. Detailed information about registration policies may be accessed via <https://academiccatalog.umd.edu/graduate/policies/registration-policies/#text>

First Year	Second Year	Third Year
Summer I – 1 credit (in person)	Summer II – 4 credits	Summer III – 3 credits
Introduction to Successful Online Learning (0) HLTH 609 - Journal Club: Foundations of Leadership (1)	HLSA 723 - Health Policy Analysis and Advocacy (3) HLTH 709 - Leadership Seminar: Strategic Planning in Public Health (1) (in person)	HLTH 829 - Doctoral Capstone Proposal (3) Qualifying Exams – Advance to Candidacy
Fall I – 5 credits	Fall II – 6 credits	Fall III – 3 credits
EPIB 651 - Applied Regression Analysis (3) SPHL 705 - Transformational Leadership and Systems Thinking (2)	HLTH 625 - Community Assessment Through Qualitative Methods (3) Elective (3) [e.g. implementation science, disabilities studies, health communication, health literacy]	HLTH 829 - Doctoral Capstone (3)
Winter I – 2 credits (in person)	Winter II – 3 credits (in person)	Winter III – 3 credits
HLTH 709 - Leadership Seminar: Designing the DrPH Capstone (1) HLTH 709 - Leadership Seminar: Grant & Scholarly Writing (1)	HLTH 609 Journal Club: Understanding Role of Technology in Public Health Practice and Communication (1) SPHL 706 - Leadership in Crisis (2)	HLTH 829 - Doctoral Capstone (3)
Spring I – 6 credits	Spring II – 5 credits	Spring III – 3 credits
HLTH 720 - Crisis Management and Risk Communication (3) HLTH 711 - Advanced Research Methods in Health (3)	HLTH 790 - Leadership in Action Field Experience (3) HLTH 609 - Journal Club 3: Big Data and Predictive Analytics (1) HLTH 709 - Leadership Seminar : Evidence-Based Practice/Practice-Based Evidence (1)	HLTH 829 - Doctoral Capstone (3) Doctoral Capstone Defense



8. *Indicate whether the program will be offered in a non-standard delivery format, such as online delivery, off-campus, or through a semester-based, term-based, or non-standard terms calendar. Please note that MHEC requires a separate proposal for off-campus delivery. If the program will be offered in a term-based or non-standard terms calendar, describe the term structure and whether the Office of the Registrar and the Office of International Scholar and Student Services have been notified and support the proposal. If the program will be offered exclusively online or will have both a face-to-face and online version of the program, complete this additional form and add as an appendix:*

<https://docs.google.com/document/d/1ojpUBt4mAWINPCiQNzZ48UH68zGPYj31TPgEOfW3q1E/>

The DrPH Program will be offered online in a semester-based format with an additional requirement that students spend two one-week periods per year on our campus (January and August) and one semester-long practicum experience. This is consistent with all other online DrPH programs. Supplemental form attached as Appendix B.

The hybrid online nature of this program would not comply with educational visa restrictions. Because of this, Office of International Scholar and Student Services has not been notified.

9. *For Master's degree programs, describe the thesis requirement and/or the non-thesis requirement.*

N/A – Doctoral Program

10. *List the intended student learning outcomes. In an appendix, provide the plan for assessing these outcomes.*

There are eight primary competencies of the DrPH program. These encompass all of the Council on Education for Public Health (CEPH) required competencies to acquire and maintain accreditation as well as those specific to the University of Maryland School of Public Health (SPH) and BCH. Specific courses and assessments are detailed in Appendix C for each competency and subcomponent.

**1. Profession & Science of Public Health. Define communities and identify and assess relevant population health needs.**

Explain public health history, philosophy and values.

Identify the core functions of public health and the 10 Essential Services.

Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population's health.

List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program.

Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc.

Explain the critical importance of evidence in advancing public health knowledge.

**2. Factors Related to Human Health. Analyze and theorize the influences of social context and behavior on health.**

Explain effects of environmental factors on a population's health.

Explain biological and genetic factors that affect a population's health.

Explain behavioral and psychological factors that affect a population's health.

Explain the social, political and economic determinants of health and how they contribute to population health and health inequities.

Explain how globalization affects global burdens of disease.

Explain an ecological perspective on the connections among human health, animal health and ecosystem health (e.g. One Health).

**3. Data & Analysis. Apply relevant qualitative and quantitative tools and concepts.**

Explain qualitative, quantitative, mixed methods and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community and population) levels.

Design a qualitative, quantitative, mixed methods, policy analysis or evaluation project to address a public health issue.

Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring and evaluating policies and programs and to address a population's health.

**4. Leadership, Management & Governance. Enhance leadership skills through experiential coursework and reflection.**

Propose strategies for health improvement and elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders and other partners.

Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies.

Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems.

**5. Create a strategic plan. Apply public health theory and experiential evidence to develop and manage program and institutional strategies.**

Facilitate shared decision making through negotiation and consensus-building methods.

Create organizational change strategies.

Propose strategies to promote inclusion and equity within public health programs, policies and systems.

Assess one's own strengths and weaknesses in leadership capacities, including cultural proficiency.

Propose human, fiscal and other resources to achieve a strategic goal.

Cultivate new resources and revenue streams to achieve a strategic goal.

**6. Policy & Programs. Assess the functions, capacities, management and governance of governmental, international and non-state organizations.**

Design a system-level intervention to address a public health issue.

Integrate knowledge of cultural values and practices in the design of public health policies and programs.

Integrate scientific information, legal and regulatory approaches, ethical frameworks and varied stakeholder interests in policy development and analysis.

Propose interprofessional team approaches to improving public health.

**7. Education & Workforce Development. Plan health education/communication programs.**

Assess an audience's knowledge and learning needs.

Deliver training or educational experiences that promote learning in academic, organizational or community settings.

Use best practice modalities in pedagogical practices.

**8. UMD SPH-specific Program Competencies. Promote and protect the health and well-being of communities throughout Maryland, the nation, and the world through engagement in transdisciplinary research, teaching, and service from within a biopsychosocial framework.**

Build organizational capacity to envision and select strategies to address acute problems.

Utilize principles of media advocacy to communicate the public health mission, values, objectives, and priorities to all intended audiences.

Utilize principles of social marketing and health education to communicate routinely with target audiences regarding public health needs, objectives, accomplishments, and critical or crisis-related information.

Identify escalating public health issues and guide or mediate action to avoid crisis levels.

Identify and analyze policy issues and alternatives related to selected public health problems.

*11. Identify specific actions and strategies that will be utilized to recruit and retain a diverse student body.*

SPH and BCH faculty are a diverse group committed to recruiting, retaining, and graduating a diverse student body. For the last 5 years, BCH has consistently admitted a diverse graduate student body (>50% underrepresented minorities). Many of the faculty focus their research efforts on issues that impact health disparities and will use their networks of colleagues and professional organizations to continue to recruit a diverse pool of applicants. This includes ongoing participation in the annual meeting of the American Public Health Association (APHA), advertising in the Nation's Health (APHA newsletter), announcements on public health listservs, and engaging with local Departments of Health, to include Health and Human Services (22% African American, 15% American Indian, 10% Asian, 3% Latinx) to connect with current public health professionals.

## **RELATIONSHIP TO OTHER UNITS OR INSTITUTIONS**

*12. If a required or recommended course is offered by another department, discuss how the additional students will not unduly burden that department's faculty and resources. Discuss any other potential impacts on another department, such as academic content that may significantly overlap with existing programs. Use space below for any comments, otherwise add supporting correspondence as an appendix.*

All required courses can be taught by primary SPH and BCH faculty. The core courses will be taught by faculty across SPH Departments.

*13. Accreditation and Licensure. Will program need to be accredited? If so, indicate the accrediting agency. Also, indicate if students will expect to be licensed or certified in order to engage in or be successful in the program's target occupation.*

The proposed DrPH program will have to be reviewed by CEPH for inclusion in SPH accreditation.

*14. Describe any cooperative arrangements with other institutions or organizations that will be important for the success of this program.*

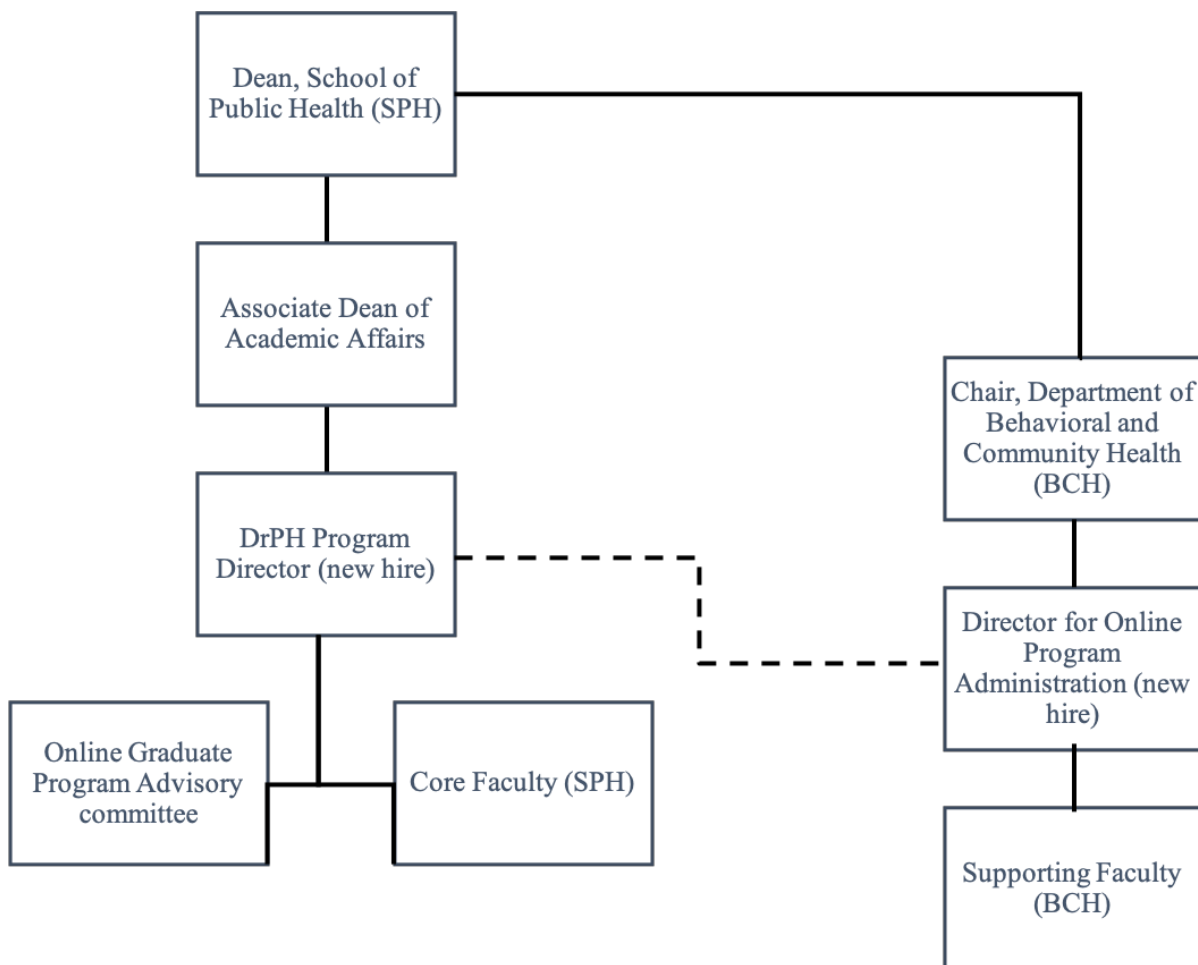
Not applicable.

## **FACULTY AND ORGANIZATION**

*15. Faculty and organization. Who will provide academic direction and oversight for the program? As an appendix, please indicate the faculty involved in the program. Include their titles, credentials, and courses they may teach for the program.*

### **A. Academic Direction and Program Oversight**

The DrPH program will be a School-wide program with the first concentration, Executive Leadership in Public Health, administered by the Department of Behavioral and Community Health. Resources for the program will be supported by both the School and the Department with start-up financial costs supported by the Provost.



## B. Faculty

### **Core Faculty and Advisory personnel drawn from multiple departments:**

James Butler, DrPH Health Services Administration; Associate Professor, Full-Time. Associate Director, Maryland Center for Health Equity.

Craig Fryer, DrPH Sociomedical Sciences; Associate Professor, Full-Time. Associate Director, Maryland Center for Health Equity.

Robert Gold, DrPH Public Health Practice, PhD Health Education/Computer Science; Professor Full-Time. Director of Educational Innovation.

Xin He, PhD Statistics; Associate Professor, Full-Time.

Donna Howard, DrPH Behavioral Sciences and Health Education; Associate Professor, Full-Time.

Dylan Roby, PhD Public Policy; Associate Professor, Full-Time.

### **Additional Supporting Faculty for Executive Leadership in Public Health concentration:**

Elizabeth Aparicio, PhD Social Work; Assistant Professor, Full-time.

Amelia Arria, PhD Epidemiology; Professor, Full-Time. Director, Center on Young Adult Health and Development and Director, Office of Planning and Evaluation.

Kenneth Beck, PhD Social Psychology; Professor, Full-Time. Associate Chair of Academics, Department of Behavioral and Community Health.

Bradley Boekeloo, PhD Health Policy and Management; Professor, Full-Time. Director, Preventive Research Center.

Barbara Curbow, PhD Social Psychology; Professor, Full-Time. Chair, Department of Behavioral and Community Health.

Sharon Desmond, PhD Health Education; Associate Professor, Full-Time. Community Engagement Committee Chair.

Robert Feldman, PhD Social Psychology; Professor, Full-Time. Director, Post-Doctoral Program of the Tobacco Center of Regulatory Science.

Kerry Green, PhD Health Policy and Management; Associate Professor, Full-Time.

Cheryl Knott, PhD Applied/Experimental Psychology; Professor, Full-Time. Director, CHAMP (Community Health Awareness, Messages, and Prevention) Lab and Co-Director, Center for Health Behavior Research.

## RESOURCE NEEDS AND SOURCES

*16. Each new program is required to have a library assessment in order to determine any new library resources that may be required. Please contact your departmental/programmatic library liaison or Daniel Mack at [dmack@umd.edu](mailto:dmack@umd.edu), Associate Dean of Collections, to request a library assessment that will be added as an appendix.*

Library assessment completed and attached to this application. Conclusion of assessment is UMD Libraries holdings are adequate to support the proposed new DrPH program in the School of Public Health, and current purchasing preferences and trends are especially beneficial for collaborative projects and programs. See Appendix D.

*17. Discuss the adequacy of physical facilities, infrastructure, and instructional equipment.*

Existing facilities, infrastructure, and equipment are adequate to support this program. Classroom space will be required for up to 2 weeks each summer and winter term but will not be required during the fall and spring semesters. New students will need email accounts, access to Canvas and the library systems but no new information systems infrastructure will be required. Otherwise, we expect little impact on existing facilities.

*18. Discuss the instructional resources (faculty, staff, and teaching assistants) that will be needed to cover new courses or needed additional sections of existing courses to be taught. Indicate the source of resources for covering these costs.*

Source of Resources: Tuition revenue will be used to cover all program expenses (salaries, benefits, program materials, and physical resources). All students will pay all associated mandatory fees and the graduate application fee. This self-support program will have no impact on the unit's traditional programs.

The proposed program will result in the addition of 4 new courses:

- SPHL 705 Transformational Leadership and Systems Thinking. 2 cr
- SPHL 706 Leadership in Crisis. 2 cr
- HLTH 720 Crisis Management and Risk Communication. 3 cr

- HLTH 709 Leadership Seminar. 1 cr

The DrPH program will be a School-wide program with the Executive Leadership in Public Health concentration administered by the Department of Behavioral and Community Health as depicted in question 15. Resources for the program will be supported by both the School and the Department. Our current faculty are in a position to add the above courses, off-load, to our existing schedule by minor shifting of some elective course offerings.

Initial capital for the program will be provided through reallocated funds at the University level to support hiring of professional track teaching and management personnel and operations costs. After three years, the program will be self-sustained through and entrepreneurial design. Attached budget document details resources and expenses predicted for the first 5 years of the program.

*19. Discuss the administrative and advising resources that will be needed for the program. Indicate the source of resources for covering these costs.*

Source of Resources: Tuition revenue will be used to cover all program expenses (salaries, benefits, program materials, and physical resources). All students will pay all associated mandatory fees and the graduate application fee. This self-support program will have no impact on the unit's traditional programs.

The DrPH program will be a School-wide program with the Executive Leadership in Public Health concentration administered by the Department of Behavioral and Community Health as depicted in question 15. Administrative resources for the program will be supported by both the School and the Department in part through hiring of professional track teaching and management personnel. Advising and concentration management will be the responsibility of the Department of Behavioral and Community Health.

Initial capital for the program will be provided through reallocated funds at the University level to support hiring of professional track teaching and management personnel and operations costs. After three years, the program will be self-sustained through and entrepreneurial design. Attached budget document details resources and expenses predicted for the first 5 years of the program.

*20. Use the Maryland Higher Education Commission (MHEC) commission financial tables to describe the program's financial plan for the next five years:*

<https://docs.google.com/spreadsheets/d/1V6iSZG05edMitWP6CAOXjCoGO58Gf6VXxPaacKfrhZ4/edit#gid=0>.

*Add these tables as attachments. Use the space below for any additional comments on program funding.*

Program Financial Five-Year Plan: see Appendix E.

Initial capital for the program will be provided through reallocated funds at the University level to support hiring of program personnel and operations costs. After two years, the program will be self-sustained through and entrepreneurial design. Attached budget document details resources and expenses predicted for the first 5 years of the program which depicts the following programmatic assumptions:

- Initial Investment \$600,000 allocated evenly over the first three years
  - Supports course development provided in Year 0
  - Program management and teaching FTE
  - Administrative support 0.5 FTE

- At least 10 full-time students will be admitted in the first two years of the program and increase to 12 students in subsequent years.
- Half-time administrative support will be adequate to manage recruiting and enrollment efforts for the first year.
- Full-time professional track professors will be on 12 month contracts, teach at least 10 credit hours per year, and will support candidate development as advisors and committee chairs
- Program Director role will be a collateral duty for at least the first 5 years of the program
- BCH faculty are able to support the addition of 12 capstone defenses annually.
- Tuition of \$1100 per credit will not be a barrier to enrollment/recruitment.

## **IMPLICATIONS FOR THE STATE (ADDITIONAL INFORMATION REQUIRED BY MHEC AND THE BOARD OF REGENTS)**

21. *Explain how there is a compelling regional or statewide need for the program. Argument for need may be based on the need for the advancement of knowledge and/or societal needs, including the need for “expanding educational opportunities and choices for minority and educationally disadvantaged students at institutions of higher education.” Also, explain how need is consistent with the [Maryland State Plan for Postsecondary Education](http://mhec.maryland.gov/institutions_training/Documents/acadaff/acadproginstapprovals/MHECStatePlan_2014.pdf).*  
[http://mhec.maryland.gov/institutions\\_training/Documents/acadaff/acadproginstapprovals/MHECStatePlan\\_2014.pdf](http://mhec.maryland.gov/institutions_training/Documents/acadaff/acadproginstapprovals/MHECStatePlan_2014.pdf)

The University sits at the nexus of public health employment in the US in all sectors – State, federal, private, and nonprofit. The vast majority, 79%, of all federal employees, including the more than 84,000 employed by Health and Human Services, reside in the National Capital Region (NCR). The NCR also has the highest percentage, 26%, of workers employed by nonprofit organizations of any region in the US with 68% of all nonprofit private sector employment falling in the health care and social assistance category. The third largest employment sector in Maryland in education and health services, which has shown consistent annual growth greater than 3% over the last 10 years, according to the Bureau of Labor and Statistics.

The Maryland State Plan for Postsecondary Education emphasizes 6 goals: quality and effectiveness; access, affordability and completion; diversity; innovation; economic growth and vitality; data use and distribution. A DrPH program at the University would directly address these goals. By focusing on application of research for the professional public health practitioner rising through the ranks, the University fulfills the evolving educational needs of the State, region, and Nation’s students in a growing field with unmet post-secondary educational needs.

The proposed DrPH program is a hybrid-online program, optimizing access for public health professionals in the State and beyond by allowing full-time doctoral students to continue working and advancing their career while studying. Preliminary research shows the top 3 competitors with similar programs have much higher tuition rates without the benefit of NCR relationships the University holds or regional practicum opportunities.

22. *Present data and analysis projecting market demand and the availability of openings in a job market to be served by the new program. Possible sources of information include industry or disciplinary studies on job market, the USBLS [Occupational Outlook Handbook](https://www.bls.gov/ooh/) <https://www.bls.gov/ooh/>, or Maryland state [Occupational and Industry Projections](http://www.dllr.state.md.us/lmi/iandoproj/) <http://www.dllr.state.md.us/lmi/iandoproj/> over the next five years. Also, provide information on the existing supply of graduates in similar programs in the state (use MHEC’s Office of Research and Policy Analysis [webpage](http://mhec.maryland.gov/publications/Pages/research/index.aspx) <http://mhec.maryland.gov/publications/Pages/research/index.aspx> for Annual Reports on Enrollment by*



*Program) and discuss how future demand for graduates will exceed the existing supply. As part of this analysis, indicate the anticipated number of students your program will graduate per year at steady state.*

USBLS identifies 26 of 818 jobs that are growing faster than average and will require Master's or higher at entry level; of those, 4 of 26 would be categorized as Public Health but not Healthcare/Medicine. This does not account for those positions that would require a doctoral degree for competitive promotion opportunities.

Government sector jobs are also growing at faster than average rate with the majority of employment opportunity in the NCR.

The six schools with accredited hybrid DrPH programs as well as those with in residence programs have seen a steady increase in applications and enrollments since ASPH published guidelines for DrPH curricula in 2009.

*23. Identify similar programs in the state. Discuss any differences between the proposed program and existing programs. Explain how your program will not result in an unreasonable duplication of an existing program (you can base this argument on program differences or market demand for graduates). The MHEC website can be used to find academic programs operating in the state:*

[http://mhec.maryland.gov/institutions\\_training/pages/HEPrograms.aspx](http://mhec.maryland.gov/institutions_training/pages/HEPrograms.aspx).

Two other programs in the state offer DrPH degrees, but neither emphasize interdisciplinary public health leadership and strategy for combatting complex emerging and anticipated public health issues.

- The Bloomberg School of Public Health at Johns Hopkins University, a private institution, offers a DrPH in 4-6 years. The School requires a full year of coursework in a specialty track in addition to the core courses, and follows a more traditional qualifying exam and dissertation route akin to a PhD program.
- The School of Community Health and Policy at Morgan State University offers a generalized DrPH with advanced courses required in each of the five foundational public health domains, electives, three internships, and a dissertation. The program is taught entirely in person over the course of 4 years for full-time students. The program does not require a Master's degree for admission and does not have a leadership focus embedded within the curriculum. As an in-person program, tuition is offered at the in-state and out-of-state costs (currently \$433 and \$851 per graduate credit, respectively).

The proposed program will be primarily taught online, with a concentration in Executive Leadership in Public Health. The expected student will be an experienced Public Health Practitioner with at least 5 years experience in roles of increasing responsibility and leadership, and will have already earned a Master's Degree. It is expected applicants to the proposed program will be working full time and will be able to complete all requirements of the DrPH within three years. One internship will be required and a Capstone project will be the culminating scholarship requirement as opposed to a dissertation. Because the proposed program will be limited in enrollment, need to account for instruction in an overload capacity, and will not differentiate between in-state and out-of-state students, tuition will be \$1,100 per graduate credit.

*24. Discuss the possible impact on Historically Black Institutions (HBIs) in the state. Will the program affect any existing programs at Maryland HBIs? Will the program impact the uniqueness or identity of a Maryland HBI?*

Morgan State University offers a DrPH through their School of Community Health and Policy. According to their website, "The Public Health Program offers The Doctor of Public Health (DrPH) generalist specialization which provides its students with research, policy making, program planning, and cultural skills. Graduates are competent

in the development and implementation of health promotion and disease prevention programs which support behavior change at the community, family, and individual levels.”

The University of Maryland, College Park School of Public Health (SPH) proposes to offer a DrPH that de-emphasizes the specialization in the coursework and focuses instead on leadership, analytical skills and communication, policy, management, ethics, program design and evaluation. Our students will be able to target specific areas of public health through their practicum and capstone. Additionally, admissions requirements at SPH include having previously earned a MPH, at least 5 years as a public health practitioner with a resume showing increasing responsibility and leadership positions. It is expected applicants to the proposed program will be working full time and will be able to complete all requirements of the DrPH within three years. Those interested in a DrPH earlier in their career would be able to matriculate to MSU to advance their knowledge in the five domains of public health plus a chosen specialization based on electives offered at MSU. The SPH proposed program will be primarily taught online, with a concentration in Executive Leadership in Public Health.

The exiting MSU and proposed SPH programs are designed to support students with very different characteristics, interests, and required career entry points. Finally, the MSU program is not offered online.

*25. For new Post-Baccalaureate Certificates derived from existing master’s programs only, include the complete curriculum of the existing master’s program.*

Not applicable.

## APPENDIX A: COURSE CATALOG INFORMATION

### Summer I

**Introduction to Successful Online Learning:** This course will include an introduction to the UMD School of Public Health, faculty expectations for this online DrPH and students will receive tips to help them be more successful online learners. [no credits]

**HLTH 609 Journal Club – Foundations of Leadership:** This journal club will encourage students to explore leadership types, recognize their leadership style and discuss current and past public health leaders. [1cr]

### Fall I

**EPIB 651 Applied Regression Analysis:** An introduction to important statistical methods used in public health research, including nonparametric hypothesis testing, ANOVA, simple and multiple linear regression, logistic regression, and categorical data analysis. [3cr] Prerequisite: graduate level introduction to Biostatistics course with minimum grade of B-

**SPHL 705 Transformational Leadership and Systems Thinking:** Transformational leadership is the term often used to describe a leadership style where an individual works with others to identify needed change, create a vision to guide the change, and then execute the change in partnership with a team of committed members. This course will explore this leadership style and will introduce the importance of systems thinking; a critical skill necessary to build programs and policies that are aware of and prepared for unintended consequences. [2cr]

### Winter I

**HLTH 709 Leadership Seminar: Designing the DrPH Capstone:** This seminar will provide an opportunity for students to work with UMD faculty to organize their capstone outline. [1cr]

**HLTH 709 Leadership Seminar: Grant and Scholarly Writing:** This seminar provides practical examples and exercises to enable students to become more effective writers. Topics include: principles of good writing, the format of a peer-reviewed manuscript, grant writing, and ethical issues in scientific publications. [1cr]

### Spring I

**HLTH 720 Crisis Management and Risk Communication:** This course will draw from lessons learned during recent and past public health emergencies and consider research in the field of crisis management and risk communication. The course will include a focus on vulnerable populations and the use of technology and social media for disaster preparedness. [3cr]

**HLTH 711 Advanced Research Methods in Health:** This course will explore quantitative techniques, advanced research methods and design issues. [3cr]

### Summer II

**HLSA 723 Health Policy Analysis and Advocacy:** Examination of the politics of the health policy process, including the effects of American political structure and institutions; economic and social factors; interest groups, classes, and social movements; media and public opinion, and other factors. The emphasis is both on understanding how public policy is made as well as how to influence the process. Students will learn about (1) how health policy is developed, adopted, and implemented, (2) the political, institutional, economic, social, and other factors that influence and shape the process, and (3) the basic approaches and tools of strategic advocacy. [3cr] Prerequisite: graduate level introduction to health policy

**HLTH 709 Leadership Seminar - Strategic Planning for Public Health** (a hybrid course): This course will begin in-person but will continue online as students end the course with a proposal to conduct a strategic plan to address a critical public health or leadership related issue within their own organization or affiliate institution. [1cr]

Fall II

**HLTH 625 Community Assessment Through Qualitative Methods:** This course covers major paradigms in qualitative inquiry, an overview of the process of qualitative research, and an introduction to several qualitative research methods, including grounded theory, ethnography, phenomenology, and content analysis. Students will collect, transcribe, analyze, and present qualitative data using interview and analytic techniques. [3cr]

Winter II

**HLTH 609 Journal Club – Understanding the Role of Technology in Public Health Practice and Communication:** This journal club will encourage students to explore understand the basic tools and building blocks of health informatics and how it is applied to public health practice. [1cr]

**SPHL 706 Leadership in Crisis:** This course on leadership will focus on the development of a case study examining a critical public health challenge and approaches by leaders to address the challenge. [2cr]

Spring II

**HLTH 790 Leadership in Action:** Under the mentorship of their faculty advisor, students will create a strategic plan to address a public health challenge facing their organization or a partnering organization. [3cr]

**HLTH 609 Journal Club – Big Data and Predictive Analytics:** This journal club will explore how big data is organized, analyzed, and interpreted. The discussion will include insights to real-world public health problems and future questions. [1cr]

**HLTH 709 Leadership Seminar – Evidence-based Practice/Practice-Based Evidence:** The goal of practice-based research is to move the knowledge derived from research to creation, through dissemination, and to application to assure the translation and uptake of relevant science into evidence based best practices (Source: ASPPH). This journal club will discuss the opportunities and challenges of this strategy for public health. [1cr]

Summer III

**HLTH 829 Doctoral Capstone Hours:** Students develop, implement, and finalize capstone work and set a date for their defense with committee members. [3cr] A minimum of 12 HLTH 829 credits are required to complete the program. Capstone defenses will be conducted in-person

Fall III

**HLTH 829 Doctoral Capstone Hours:** Students work on all components of capstone. [3cr] A minimum of 12 HLTH 829 credits are required to complete the program. Capstone defenses will be conducted in-person

Winter III

**HLTH 829 Doctoral Capstone Hours:** Students work on all components of capstone. [3cr] A minimum of 12 HLTH 829 credits are required to complete the program. Capstone defenses will be conducted in-person

Spring III

**HLTH 829 Doctoral Capstone Hours:** Students work on all components of capstone. [3cr] A minimum of 12 HLTH 829 credits are required to complete the program. Capstone defenses will be conducted in-person

## **APPENDIX B ONLINE PROGRAM OFFERING SUPPLEMENTAL INFORMATION**

1. Discuss the role of faculty in the development, oversight, and teaching of this online program. Note that MHEC 13B.02.03.11(F) requires that “at least 50 percent of the total semester credit hours within the proposed program shall be taught by full-time faculty.”

All faculty must be full or adjunct members of the Graduate Faculty and approved by the Dean of the Graduate School to teach. A full time professional track faculty member will be hired at program approval. The program’s core courses will all be led by full time tenure-track or professional track faculty, as will the professional and capstone requirements. More than 50% of the total credits will be covered by these full time faculty as listed below:

### **Core Faculty and Advisory personnel drawn from multiple departments:**

James Butler, DrPH Health Services Administration; Associate Professor, Full-Time.

Craig Fryer, DrPH Sociomedical Sciences; Associate Professor, Full-Time.

Robert Gold, DrPH Public Health Practice, PhD Health Education/Computer Science; Professor Full-Time.

Kerry Green, PhD Health Policy and Management; Associate Professor, Full-Time.

Xin He, PhD Statistics; Associate Professor, Full-Time.

Donna Howard, DrPH Behavioral Sciences and Health Education; Associate Professor, Full-Time.

Dylan Roby, PhD Public Policy; Associate Professor, Full-Time.

### **Additional Supporting Faculty for Executive Leadership in Public Health concentration:**

Elizabeth Aparicio, PhD Social Work; Assistant Professor, Full-time.

Amelia Arria, PhD Epidemiology; Professor, Full-Time. Director, Center on Young Adult Health and Development.

Kenneth Beck, PhD Social Psychology; Professor, Full-Time. Associate Chair of Academics, Department of Behavioral and Community Health.

Bradley Boekeloo, PhD Health Policy and Management; Professor, Full-Time. Director, Preventive Research Center.

Barbara Curbow, PhD Social Psychology; Professor and Chair, Full-Time.

Sharon Desmond, PhD Health Education; Associate Professor, Full-Time. Community Engagement Committee Chair.

Robert Feldman, PhD Social Psychology; Professor, Full-Time. Director, Post-Doctoral Program of the Tobacco Center of Regulatory Science.

Cheryl Holt, PhD Applied/Experimental Psychology; Professor, Full-Time. Director, Community Health Awareness, Messages, and Prevention.

Full time professional faculty member TBN

2. Discuss the resources available for training and supporting faculty in regard to course development and instructional technology. Indicate any other unit or vendor that will be used to administer or deliver the program.

The University of Maryland’s Division of Information Technology (DIT) offers a rich array of services to support online instruction. Learning Technology Design Services (consultation, training, and online course development support) is provided by the ATI Learning Technology Design Team. The team provides expert support in the instructional technology tools and pedagogical strategies that foster online learning and teaching at the university. The team offers documentation, customized workshops, templates, and learning modules. A complete overview of services may accessed via: <https://umd.service>

[now.com/itsc?id=service&service=bc40857f3708c20041271f9543990ece&t=so](https://umd.service). In addition, the university’s

Teaching and Learning Transformation Center (TLTC) offers faculty professional development activities that help

advance teaching, collect evidence of effectiveness, and leverage innovative, evidence-based approaches for online instruction. A complete overview of such services, including training and individualized consultations, may be accessed via <https://ttc.umd.edu/>.

3. Discuss how courses will be taught using online technologies. Will courses be synchronous, asynchronous, or a combination of both? What technologies will be used to present material and evaluate the quality and authenticity of student work?

The University of Maryland's learning management system is called ELMS and is hosted in Canvas by Instructure. ELMS supports online instruction and learning and provides access to static course content (e.g., syllabi, schedules, announcements, and lecture notes), as well as access to interactive tools (e.g., discussion groups, live chats, and online assessments) for face-to-face, blended, or online programs. Course offerings will be asynchronous. Student quality and authenticity of work will be evaluated in ELMS/Canvas through the Turnitin "Originality Checker" tool. Students will also be required to read and confirm the UMD honor pledge in online courses. Furthermore, students will complete ongoing advising to discuss progress and identify strategies to improve quality of work and performance in the program. Kaltura media hosting, Panopto lecture capture, and WebEx technology will be used to present material online. A complete list of teaching technologies may be accessed at [https://umd.servicenow.com/itsc?id=sc\\_category&sys\\_id=327500fc6f16e20051281ecbbb3ee447&t=so&filter=stafffaculty](https://umd.servicenow.com/itsc?id=sc_category&sys_id=327500fc6f16e20051281ecbbb3ee447&t=so&filter=stafffaculty)

4. Discuss how students will have reasonable and adequate access to the range of student support services (library materials, teacher interaction, advising, counseling, accessibility, disability support, and financial aid) needed to support their learning activities.

As officially admitted to UMD, students in this program obtain a UID, a directory ID, and other authentication devices. Once a student activates the authentication information, s/he will have access to all University resources that are accessible in the online environment. Students are assessed the online student services fee which supports access to University online resources. Students access online course work through ELMS which supports online instruction and learning and provides access to static course content (e.g., syllabi, schedules, announcements, and lecture notes), as well as access to interactive tools (e.g., discussion groups, live chats, and online assessments). DIT offers a plethora of services specifically for students which may be accessed in the online environment with the student authentication. See [https://umd.servicenow.com/itsc?id=sc\\_home&filter=student](https://umd.servicenow.com/itsc?id=sc_home&filter=student).

UMD Libraries extends a number of online resources and services through its website: [www.lib.umd.edu/UMCP](http://www.lib.umd.edu/UMCP). Per the university's Accessibility Guidelines and state and federal government regulations, instructors have an obligation to ensure that their web-based courses and materials are accessible to all students. The Division of Information Technology works with instructors to ensure that online course content is accessible to all students. The academic unit provides academic oversight and advising to both incoming and admitted students. Advising is provided face to face, online, or via phone to accommodate all students. Graduate students who are eligible for a range of financial resources to fund their studies including loans (federal and private), scholarships, grants, or institutional aid work directly with the [Office of Student Financial Aid](#).

5. Discuss how the program will provide students with clear, complete, and timely information on the curriculum, technological competence and equipment needed for the program, admissions criteria, financial aid resources, and cost and payment policies.

The Office of Extended Studies (OES) will provide overall administrative support for the program. As part of this support, OES hosts the program's website that provides complete information, including admissions criteria, plan of study, registration information, financial aid resources, and information on tuition, fees, and payment policies. In addition, each admitted student is contacted each term, via the email of record, with timely information regarding upcoming registration, payment requirements, and graduation information.

6. Intellectual Property Rights: The proposal must clearly delineate ownership and usage rights for materials that may be developed for courses in the program.

Intellectual property rights for both the program and online courses will align with IV-3.20(A) UNIVERSITY OF MARYLAND INTELLECTUAL PROPERTY POLICY (Approved by the President April 21, 2017, Approved by the Chancellor January 10, 2018, effective January 10, 2018) On-line at <https://www.president.umd.edu/administration/policies/section-iv-research/iv-320a>.



**APPENDIX C: ASSESSMENT OF LEARNING OUTCOMES**

Competency	Course Appropriate	Specific Requirements
<b>Profession &amp; Science of Public Health.</b>		
Explain public health history, philosophy and values.	Covered by Admission Requirements – Current MPH and 3 – 5 years professional experience	
Identify the core functions of public health and the 10 Essential Services <sup>11</sup> .		
Explain the role of quantitative and qualitative methods and sciences in describing and assessing a population’s health.		
List major causes and trends of morbidity and mortality in the US or other community relevant to the school or program.		
Discuss the science of primary, secondary and tertiary prevention in population health, including health promotion, screening, etc..		
Explain the critical importance of evidence in advancing public health knowledge.		
<b>Factors Related to Human Health.</b>		
Explain effects of environmental factors on a population’s health.	Covered by Admission Requirements – Current MPH and 3 – 5 years professional experience	
Explain biological and genetic factors that affect a population’s health.		
Explain behavioral and psychological factors that affect a population’s health.		
Explain the social, political and economic determinants of health and how they contribute to population health and health inequities.		
Explain how globalization affects global burdens of disease.		
Explain an ecological perspective on the connections among human health, animal health and ecosystem health (eg, One Health).		
<b>Data &amp; Analysis.</b>		
Explain qualitative, quantitative, mixed methods and policy analysis research and evaluation methods to address health issues at multiple (individual, group, organization, community and population) levels.	HLTH 711 Advanced Research Methods in Health  HLTH 625 Community Assessment Through Qualitative Methods	Examinations  Class projects

Competency	Course Appropriate	Specific Requirements
Design a qualitative, quantitative, mixed methods, policy analysis or evaluation project to address a public health issue.	HLTH 711 Advanced Research Methods in Health  HLTH 625 Community Assessment Through Qualitative Methods	Examinations  Written proposal
Explain the use and limitations of surveillance systems and national surveys in assessing, monitoring and evaluating policies and programs and to address a population's health.	EPIB 651 Applied Regression Analysis	Examinations
<b>Leadership, Management &amp; Governance.</b>		
Propose strategies for health improvement and elimination of health inequities by organizing stakeholders, including researchers, practitioners, community leaders and other partners.	HLTH 709 Leadership Seminar - Grant and Scholarly Writing  HLTH 609 Journal Club - Research in Leadership	Course project
Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies.	HLTH 720 Crisis Management and Risk Communication:  SPHL 706 Leadership in Crisis	Course assignments  Case study project
Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health problems.	HLTH 609 Journal Club - Foundations of Leadership  HLSA 723 Health Policy Analysis and Advocacy  HLTH 829 Doctoral Capstone	Course examinations  Capstone
<b>Create a strategic plan.</b>		
Facilitate shared decision making through negotiation and consensus-building methods. Create organizational change strategies. Propose strategies to promote inclusion and equity within public health programs, policies and systems. Assess one's own strengths and weaknesses in leadership capacities, including cultural proficiency.	HLTH 709 Strategic Planning in Public Health  HLTH 790 Leadership in Action Field Experience	Required readings and examinations  Completion of individual strategic plan for a community stakeholder

Competency	Course Appropriate	Specific Requirements
Propose human, fiscal and other resources to achieve a strategic goal.		
Cultivate new resources and revenue streams to achieve a strategic goal.		
<b>Policy &amp; Programs.</b>		
Design a system-level intervention to address a public health issue.	HLTH 829 Doctoral Capstone	Capstone
Integrate knowledge of cultural values and practices in the design of public health policies and programs.	SPHL 705 Transformational Leadership and Systems Thinking  HLTH 790 Leadership in Action Field Experience	Examinations  Course projects
Integrate scientific information, legal and regulatory approaches, ethical frameworks and varied stakeholder interests in policy development and analysis.	HLSA 723 Health Policy Analysis and Advocacy  SPHL 706 Leadership in Crisis	Required readings and examinations
Propose interprofessional team approaches to improving public health.	SPHL 705 Transformational Leadership and Systems Thinking	Required readings and examinations
<b>Education &amp; Workforce Development.</b>		
Assess an audience's knowledge and learning needs.	HLTH 790 Leadership in Action Field Experience	Required readings and examinations  Course assignments
Deliver training or educational experiences that promote learning in academic, organizational or community settings.	HLTH 790 Leadership in Action Field Experience	Required readings and examinations  Course assignments
Use best practice modalities in pedagogical practices.	SPHL 705 Transformational Leadership and Systems Thinking	Required readings and examinations

**APPENDIX D: LIBRARY ASSESSMENT**

See attached.

**APPENDIX E: FIVE-YEAR BUDGET**

See attached.

**DATE:** August 30, 2018

**TO:** Dr. Boris Lushniak, Dean, School of Public Health

**CC:** Daniel Mack, Associate Dean, Collection Strategies & Services, University of Maryland Libraries  
Margaret Saponaro, Head, Collection Development, University of Maryland Libraries

**FROM:** Nedelina Tchangalova, Public Health Librarian

**RE:** Library Resources to Support New Instructional Program – Doctor of Public Health (DrPH)

The University of Maryland (UMD) Libraries' mission is "to enable the intellectual inquiry and learning required to meet the education, research and community outreach mission of the University." Currently they support undergraduate and graduate students in a variety of face-to-face, online and distance learning programs, as well faculty working collaboratively with internal and external partners. The UMD Libraries' collections will adequately support the instruction and research needs of the newly proposed program of Doctor of Public Health.

As a school with strong ties with other departments/schools on and off campus, the UMD School of Public Health is confident that library resources are readily available and accessible. Ease of access and flexible availability of library materials is paramount, and researchers, as well students expect this flexibility to be coupled with high academic quality and integrity. The current purchasing practices and available collections at the UMD Libraries will ensure that these two goals can be met, both now and for the life of the school.

In addition, UMD Libraries have developed partnerships and collaborations with state, regional and national institutions and consortiums in order to enhance access to library collections and provide necessary materials for teaching and research. The membership in the Big Ten Academic Alliance (BTAA)<sup>1</sup> and Chesapeake Information and Research Library Alliance (CIRLA)<sup>2</sup> allows patrons to obtain print materials from other participating libraries through interlibrary loan services. For digital content, UMD Libraries offer access through its collaborations with B10AA, HathiTrust<sup>3</sup>, and University System of Maryland and Affiliated Institutions (USMAI)<sup>4</sup>. Thus, the broader medical and public health journals not held by UMD Libraries, are available through these memberships. Moreover, UMD Libraries' existing public health collections of monographs, journals and databases will continue to support the research and teaching needs of the School of Public Health.

### **Public Health Science Library Collections**

McKeldin Library supports the undergraduate and graduate students in SPH, housing the majority of the monographs and serials pertaining to public health in general. A significant portion of these collections are electronically accessible, both on and off campus, and therefore are not location dependent.

#### **1. Monographs**

The Libraries' current collection of books related to public health is sufficient to meet the needs of the school. The ongoing acquisition of scholarly books is expected to be adequately covered through existing acquisition practices and budgeting. As a land grant institution, the University of Maryland already has a tradition of

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<sup>1</sup> Big Ten Academic Alliance (B10AA) - <https://www.btaa.org/library/libraries>

<sup>2</sup> Chesapeake Information and Research Library Alliance (CIRLA) - <http://www.cirla.org/>

<sup>3</sup> HathiTrust - <http://www.hathitrust.org/>

<sup>4</sup> University System of Maryland and Affiliated Institutions (USMAI) - <http://usmai.umd.edu/>

emphasizing public health, including environmental health, occupational health, global health, epidemiology, environmental justice, health policy, as well as social, political, and ethical issues in public health, and current collection development practices in the Libraries already support these topics.

At this time, UMD Libraries have access to several multidisciplinary ebook collections related to human and environmental health, and health policy and law (*Credo Reference, ebrary, EBSCO ebook collection, Gale Virtual Reference Library, Springer, World Scientific eBooks* and more). Due to the UMD Libraries' purchasing preference for electronic materials, especially prevalent across the STEM fields, the number of electronic book collections is expected to continue to increase significantly in the coming years.

## 2. Electronic Resources: Journals and Databases

The Libraries' current list of subscriptions includes both core and related journals that support research and teaching in public health, and policy.

A search was performed in *Journal Citation Reports 2017* (JCR), a database that uses citation data to rank and determine the impact factor of journals in an academic field. To support the existing courses, at the present time the Libraries provide access to all of the top ten ranked journals from the JCR categories of *Environmental Sciences; Public, Environment & Occupational Health; and Health Policy & Services*.

While other aspects of public and environmental health, and policy do not fall as neatly into a JCR-specified category, the UMD Libraries provide access to numerous highly ranked journals from cross-sections of the JCR categories of Agricultural Economics & Policy, Behavioral Sciences, Family Studies, Law, Political Science, Public Administration, as well as the majority of top ten ranked journals from all engineering disciplines.

Relevant top-ranked titles include:

- *Annual Review of Public Health*
- *Energy & Environmental Science*
- *Epidemiologic Reviews*
- *Epidemiology*
- *Frontiers in Ecology and the Environment*
- *Health Affairs*
- *Journal of Health Economics*
- *Lancet Global Health*
- *Milbank quarterly*
- *Value in Health*

In addition to journal subscriptions, the UMD Libraries subscribe to the following significant databases that will support the school by providing access to the previously mentioned journals as well as other relevant resources:

- *Academic Search Ultimate (EBSCO)*
- *Congressional Publications (ProQuest)*
- *CINAHL (EBSCO)*
- *Environmental Science Collection (ProQuest)*
- *Environment & Energy Daily*
- *Health Reference Policy Center (EBSCO)*
- *Public Health (ProQuest)*
- *PubMed*
- *ScienceDirect*
- *TOXLINE*
- *Web of Science*

At this time, the UMD Libraries' purchasing preference is for electronic materials (i.e. those that can be accessed online), a trend that will serve to enhance research and teaching experience. This is especially relevant to the



collaboration initiatives, where online flexibility is presented with no reduction in educational and research quality. The UMD Libraries purchasing and access priorities are in line with this goal.

### **Interlibrary Loan & Scan and Deliver Services**

Through the UMD Libraries' membership in the Big Ten Academic Alliance (BTAA), our faculty and students are able to take advantage of a number of new materials access options. The Libraries' participation in the *UBorrow*<sup>5</sup> program allows rapid access to the collections of other Big Ten member libraries.

When resources are not part of our holdings within the sixteen University System of Maryland and Affiliated Institutions (USMAI) libraries, the *Interlibrary Loan* unit can obtain materials from other libraries at no charge to the student or faculty. Most recent journal articles can be provided through electronic delivery, allowing students and faculty to make the most flexible use of their time.

Additionally, through the auspices of the Interlibrary Loan unit, students and faculty can make use of *Scan & Deliver* service, an electronic document delivery service for in-house materials. *Scan & Deliver* allows students and faculty to place requests for book chapters and journal and/or conference papers that are available in print in the Libraries, and have them scanned and delivered electronically within three business days. This service is also free of charge.

### **Conclusions**

At the present time, UMD Libraries holdings are adequate to support the proposed new DrPH program in the School of Public Health, and current purchasing preferences and trends are especially beneficial for collaborative projects and programs. While it is anticipated that this will continue, the Libraries collections are vulnerable to budget and market fluctuations. Journal collections and other continuing resources remain particularly vulnerable. The level of future support is thus dependent upon ongoing funding and other circumstances affecting continuing subscriptions.

### **Statement from Associate Dean, Collection Strategies and Services**

Nedelina Tchangalova, Public Health Librarian, has prepared this report according to standard practices for collection assessment in research libraries. I have reviewed Ms. Tchangalova's report and I concur with her findings.

Daniel C. Mack

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<sup>5</sup> UBorrow service - <http://www.btaa.org/library/reciprocal-borrowing/uborrow>

**\*\*Budget represents worst case estimated expenses; as a result anticipated profits are minimized**

<b>PCC Budget</b>						
<b>DrPH</b>						
[This program is self-support. Instructors may not teach on-load.]						
<b>Estimated Program Revenue &amp; Support</b>	Planning	Year 1	Year 2	Year 3	Year 4	Year 5
<b>I. Total Tuition Revenue</b>	<b>\$0</b>	<b>\$154,000</b>	<b>\$381,150</b>	<b>\$567,567</b>	<b>\$644,334</b>	<b>\$705,966</b>
A. Total number of students (by enrollment year)		10	20	32	34	36
1. Enrollment Year 1		10	10	12	12	12
2. Enrollment Year 2			10	10	12	12
3. Enrollment Year 3				10	10	12
B. Total Credits (based on fulltime enrollment)		14	33	44	44	44
1. Credits Year 1		14	14	14	14	14
2. Credits Year 2			19	19	19	19
3. Credits Year 3				11	11	11
C. Tuition Per Credit Rate; Assumes 5% increase		\$1,100	1,155	1,213	1,273	1,337
<b>II. Other Support</b>	<b>\$200,000</b>	<b>\$200,000</b>	<b>\$200,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
A. Dean Support						
B. Department Support						
C. Other program support (grant/vendor) - Provost's Office	200,000	200,000	200000			
<b>Total Estimated Program Revenue &amp; Support</b>	<b>\$200,000</b>	<b>\$354,000</b>	<b>\$581,150</b>	<b>\$567,567</b>	<b>\$644,334</b>	<b>\$705,966</b>

<b>Estimated Program Expenses</b>	Planning	Year 1	Year 2	Year 3	Year 4	Year 5
<b>I.Total Instructional and Academic Administration</b>	<b>\$0</b>	<b>\$271,852</b>	<b>\$483,216</b>	<b>\$497,224</b>	<b>\$511,642</b>	<b>\$526,483</b>
<b>A. Adjunct/Overload Instructional Totals</b>	<b>\$0</b>	<b>\$19,152</b>	<b>\$48,838</b>	<b>\$49,814</b>	<b>\$50,811</b>	<b>\$51,827</b>
1. Instructor Totals	<b>\$0</b>	<b>\$14,400</b>	<b>\$36,720</b>	<b>\$37,454</b>	<b>\$38,203</b>	<b>\$38,968</b>
a. Instructor salary at per credit rate (assumes 2% increase)		2,400	2,448	2,497	2,547	2,598
b. Total Per Credit Instruction		6	15	15	15	15
(1). # of Instructor Credits Year 1		6	6	6	6	6
(2). # of Instructor Credits Year 2			9	9	9	9
(3). # of Instructor Credits Year 3						
2. Benefits: Total (33%)		4,752	12,118	12,360	12,607	12,859
<b>B. Academic Administration Totals / Contract teaching</b>	<b>\$0</b>	<b>\$252,700</b>	<b>\$434,378</b>	<b>\$447,409</b>	<b>\$460,832</b>	<b>\$474,657</b>
1. Total Academic Admin Salary (assumes 3% increase)		190,000	326,600	336,398	346,490	356,885
a. Academic Administrator (half time year 1)		30,000	61,800	63,654	65,564	67,531
b. Program Director		160,000	164,800	169,744	174,836	180,081
c. Associate Program Director		0	100,000	103,000	106,090	109,273
2. Benefits: Total (33%)		62,700	107,778	111,011	114,342	117,772
<b>II. Materials &amp; Supplies</b>	<b>\$0</b>	<b>\$300</b>	<b>\$1,500</b>	<b>\$17,400</b>	<b>\$17,550</b>	<b>\$20,700</b>
A. Cost per course (estimated)		\$5	\$5	\$5	\$5	\$5
B. Total number of courses		6	15	15	15	15
C. Total number of students		10	20	32	34	36
D. Dissertation advisor/chair stipend		0	0	15,000	15,000	18,000
<b>III. Marketing</b>	<b>\$0</b>	<b>\$25,000</b>	<b>\$22,000</b>	<b>\$21,000</b>	<b>\$21,000</b>	<b>\$21,000</b>
A. Marketing		20,000	20,000	20,000	20,000	20,000
B. Website (on SPH hosted department website)		5,000	2,000	1,000	1,000	1,000
<b>IV. Equipment</b>	<b>\$0</b>	<b>\$20,000</b>	<b>\$20,000</b>	<b>\$10,000</b>	<b>\$10,000</b>	<b>\$10,000</b>
A. Computer-related (laptops, tablets)		15,000	15,000	5,000	5,000	5,000
B. Other Devices (printer, scanner, etc)		5,000	5,000	5,000	5,000	5,000
<b>V. Library</b>	<b>\$0</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$5,000</b>	<b>\$5,000</b>
A. Library		5,000	5,000	5,000	5,000	5,000
<b>VI. Other Operational Expenses</b>	<b>\$0</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>
A. Travel (for recruitment)		1,000	1,000	1,000	1,000	1,000
B. Other		24,000	24,000	24,000	24,000	24,000
<b>VII. Courses: Development &amp; Design</b>	<b>\$60,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
A1. Per course instructor stipend	5,000					
A2. Ttl # of new/revised/updated courses	12					
<b>Total Estimated Program Expenses</b>	<b>\$60,000</b>	<b>\$347,152</b>	<b>\$556,716</b>	<b>\$575,624</b>	<b>\$590,192</b>	<b>\$608,183</b>
<b>Total Estimated Program Revenue &amp; Support</b>	<b>\$200,000</b>	<b>\$354,000</b>	<b>\$581,150</b>	<b>\$567,567</b>	<b>\$644,334</b>	<b>\$705,966</b>
<b>Total Estimated Program Expenses</b>	<b>\$60,000</b>	<b>\$347,152</b>	<b>\$556,716</b>	<b>\$575,624</b>	<b>\$590,192</b>	<b>\$608,183</b>
<b>Estimated Net Revenue</b>	<b>\$140,000</b>	<b>\$6,848</b>	<b>\$24,434</b>	<b>-\$8,057</b>	<b>\$54,142</b>	<b>\$97,783</b>

Assumptions						
#' of semesters/credits per year	Summer	Fall	Winter	Spring	TTL	
Year 1 (full-time)	1	5	2	6	14	
Year 2 (full-time)	4	6	3	5	18	
Year 3 (full-time)	3	3	3	3	12	
				<b>TTL</b>	<b>44</b>	
Instructors /Courses	Summer	Fall	Winter	Spring	TTL	
Year 1	1	2	1	2	6	
Year 2	2	2	1	1	6	
Year 3	1	1	1	1	4	
<b>TTL</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>4</b>	<b>16</b>	

Overall Program With OES 10% Admin Fee	Planning	Year 1	Year 2	Year 3	Year 4	Year 5
<b>Total Estimated Program Revenue</b>	\$200,000	\$354,000	\$581,150	\$567,567	\$644,334	\$705,966
<b>Total Estimated Program Expenses</b>	\$60,000	\$347,152	\$556,716	\$575,624	\$590,192	\$608,183
<b>OES Administrative Fee (10% Program Revenue)</b>	\$0	\$15,400	\$38,115	\$56,757	\$64,433	\$70,597
<b>Estimated Annual Net Revenue</b>	\$140,000	(\$8,552)	(\$13,681)	(\$64,813)	(\$10,292)	\$27,186
<b>Estimated Cumulative Revenue</b>	\$140,000	\$131,448	\$117,767	\$52,954	\$42,662	\$69,848

## ADDENDUM TO UNIVERSITY OF MARYLAND PCC PROPOSED PROGRAM

Program: Proposed DrPH  
Department: Behavioral and Community Health  
School: School of Public Health  
Addendum Number: 1  
Addendum Date: April 29, 2019  
Point of Contact: Dr. Robert Gold

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### 1.0 PURPOSE OF THIS ADDENDUM

The School of Public Health is issuing this Addendum to respond to questions received during the Graduate School review.

### 2.0 CLARIFICATION OF ADMISSIONS CRITERIA

The requirement for practical experience was listed in Appendix C but not clearly delineated in Item 4 of the main body of the proposal. The below updates and corrects Item 4 to explicitly require practical experience before applying to the proposed DrPH program.

Admission is for the Fall semester. Applicants must meet the following minimum admission criteria as established by the Graduate School:

- Applicants must have earned a four-year baccalaureate degree from a regionally accredited U.S. institution, or an equivalent degree from a non-U.S. institution.
- Applicants must have earned a 3.0 GPA (on a 4.0 scale) in all prior undergraduate and graduate coursework.
- Applicants must provide an official copy of a transcript for all of their post-secondary work.
- International applicants must fulfill all requirements relating to international academic credentials, evidence of English proficiency, financial certification, and visa documentation.

Applicants must fulfill the School of Public Health's admission requirements:

- Applicants must have MPH / MHA or equivalent.
- Applicants must have a minimum of 3 years experience in public health practice.
- Applicants must first apply through SOPHAS (Schools of Public Health Application Service) website, [www.sophas.org](http://www.sophas.org), and include the following information with the completed SOPHAS application:
  - Official transcripts for all post-secondary work
  - Three letters of recommendations that address the applicant's academic capabilities and probability of success in a doctoral program.
  - Statement of Goals and Interests.
- Following the submission of the SOPHAS application, applicants are notified that they are required to submit a supplemental application to The Graduate School, University of Maryland. Applicants are required to also submit:
  - An official copy of transcripts for all post-secondary work.
  - A resume or CV detailing a minimum of 3 years of increasing levels of leadership or responsibility in a public health environment
  - GRE scores, as required by the Department administering the concentration. For this concentration the GRE's are not required.

### 3.0 CLARIFICATION OF CULMINATING EXPERIENCE REQUIREMENTS AND EXPECTATIONS

As the first new professional doctoral program being presented to the Graduate School after review of the Professional Doctorate Task Force's recommendations for Capstones, the Graduate School suggested more detail on the expectations for the DrPH culminating experience.

The culminating experience for the proposed DrPH consists of CEPH required applied practice experience, SPH mid-program evaluation for advancement to candidacy, and a Capstone experience.

#### **Applied Practice Experience**

HLTH 790 Leadership in Action: Regardless of the amount or level of prior experience, all DrPH students engage in one or more applied practice experiences to develop advanced practice and leadership skills. As part of this experience, students are responsible for completion of at least one project to address a public health leadership challenge facing their organization or a partnering organization. The work product may be a single project or a set of related projects that demonstrate a depth of competence and must contain a reflective component that includes the student's expression of personal and/or professional reactions to the applied practice experience. This may take the form of a journal or other written product or another deliverable as appropriate for the program. The applied practice experience may be completed within a student's own work setting but the project must be beyond the student's regular responsibilities. [3cr]

Under the mentorship of their faculty advisor, the practicum requires the student to establish learning objectives that involve at least three of the program competencies, and result in a deliverable that both demonstrates attainment of program competencies and is meaningful for the organization to advance public health practice.

The practicum, learning objectives, and deliverables must be approved in advance by the student's advisor and the program director. The practicum deliverable must incorporate a reflective component, which describes the student's personal or professional reactions to their applied experience and that will be included in the portfolio used in the mid-program review for advancement to candidacy.

#### **Mid-Program Evaluation**

Consistent with accredited and competitive DrPH programs at other schools, the non-traditional approach to qualifying exams will include two components: 1) The independent development of the Capstone proposal; and 2) The review of an up to date, compiled, and refined portfolio exhibiting systematic reflection, critical thinking, synthesis, and discovery.

Each required course will include a portfolio piece. The final portfolio should include these assignments, edited based on professor feedback. This process is more applicable to a distance-learning degree focused on competencies of public health leaders and practitioners. It is unconventional but no less rigorous if developed and instituted with high standards from the outset. Some example portfolio pieces:

- Capstone Proposal
- Applied Practice Experience Reflection Paper
- Leadership in Crisis Case study
- Sample Grant application
- Presentation of collected qualitative data and proposed follow-on research
- Crisis communications plan
- Development of personal/professional profile
- Inclusion of artifacts pertaining to data collection and analysis, communication, systems thinking, leadership, critical thinking, and problem solving

- Other demonstration of students' broad public health knowledge, specialized knowledge, translation of this knowledge into evidence-based public health practice, and leadership style

### **Capstone: Integrative Learning Experience**

HLTH 829 Doctoral Capstone: Students develop, implement, and finalize capstone work and set a date for their defense with committee members. [12cr]

In maintaining the key differentiators between a DrPh and PhD in Public Health, the culminating Capstone should be project based. The candidate should complete a field-based doctoral project that is designed to influence programs, policies, or systems applicable to public health practice. This can be an extension of the student's applied learning experience (HLTH 790). The doctoral project should demonstrate synthesis of all competencies in the DrPH. It will include both a written deliverable and an oral defense.

Based on the candidate's long-term goals, the Capstone project format should be flexible without reducing expectation of rigor. The Capstone project should demonstrate the application of doctoral level research skills to a problem or issue of significance to public health leadership.

Thus, an acceptable DrPH Capstone project written deliverable may include, but is not limited to:

- A carefully designed plan, developed with stakeholder input, intended to address a complex public health problem of strategic importance to public health; it should include identification of long-term aims and interests associated with the selected public health issue and the means of achieving them
- Combining translational research with an understanding of the role of leadership in creating an implementation plan to improve the public's health; it should use an explicit methodology and study design that is clearly specified and specifically designed to address the problem selected
- Advancing or contributing to the evidence base of public health practice (e.g., application of an existing methodology to a new problem, a new technique to address an old problem, or a novel approach for dealing with an emerging issue)

As planning is a basic leadership skill, candidates are expected to create a work plan for completing the Capstone. The work plan should outline major tasks, time frames and milestones, including how the committee will review the work along the way.

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END OF ADDENDUM