

**Masters in Public Health, MPH
Plan for Assessment of Student Learning Outcomes
The University of New Mexico**

A. College, Department and Date

1. College: *School of Medicine*
2. Department: *Biomedical Sciences Program*
3. Date: *May 28, 2008*

B. Academic Program of Study

MPH, Masters in Public Health

C. Contact Person(s) for the Assessment Plan

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D/E. Broad Program Goals & Measurable Student Learning Outcomes related to UNM Learning Outcomes

MPH Competencies (Program Goals) and Student Learning Objectives	UNM Student Learning Outcomes		
	Knowledge	Skills	Responsibility
A. Knowledge of basic principles and core functions of public health			
1. Apply the basic public health sciences, including epidemiology, health and policy administration, behavioral and social sciences, biostatistics, and environmental and occupational public health, to the prevention of illness and injury.	X	X	
2. Apply appropriate theory, research principles, and methods to the development and evaluation of community health prevention/intervention programs.	X	X	
3. Assess the role of health care systems and health policies in the prevention of illness and injury.	X	X	
B. Integration of knowledge, theory and practice.			
1. Identify approaches to public health problems that are appropriate for diverse populations.	X	X	X
2. Integrate epidemiologic, community and policy perspectives in the critical evaluation of public health literature.	X	X	X
3. Apply public health theory, knowledge and skills in a practice setting.	X	X	X
C. Communication			
1. Communicate effectively both in writing and orally to diverse professional and lay audiences regarding public health issues		X	X
D. Cultural skills			
1. Identify the role of cultural factors in determining disease, disease prevention, health promoting behavior, and health care services organization and delivery.	X	X	X
E. Professional behavior			
1. Apply ethical principles to the practice of public health in a variety of settings.		X	X

E. Assessment of Student Learning Three-Year Plan

All programs are expected to measure some outcomes annually and to measure all priority program outcomes at least once over two consecutive three-year review cycles. Describe below the plan for the next three years of assessment of program-level student learning outcomes.

1. Student Learning Outcomes

We are undergoing our regular 7 year accreditation in 2009 by the Council on Education for Public Health (CEPH). Our self-study document is due on May 5, 2009 with a site visit by CEPH in October, 2009. The accreditation document will address all of our student learning objectives listed above. Thus, at this point, we will not select 2-5 priority learning outcomes since we must focus on all of them for our accreditation. After our accreditation process is complete, we will be able to select appropriate learning outcomes based on our review.

2. How will learning outcomes be assessed?

Student Learning Objectives	Means of Assessment	Direct/Indirect	Criteria for Success
A. Knowledge			
1. Apply the basic public health sciences, including epidemiology, health and policy administration, behavioral and social sciences, biostatistics, and environmental and occupational public health, to the prevention of illness and injury.	<ul style="list-style-type: none"> Course-level written exams, written and oral projects. Masters Examination 	Direct	<p>80% of students will obtain a B in the core basic public health sciences courses.</p> <p>Passing the Masters Examination is a graduation requirement for 100% of the students.</p>
2. Apply appropriate theory, research principles, and methods to the development and evaluation of community health prevention/intervention programs.	<ul style="list-style-type: none"> Course-level written exams, written and oral projects. Masters Examination 	Direct	<p>80% of students will obtain a B in either of the two core courses addressing community health prevention and intervention.</p> <p>Passing the Masters Examination is a graduation requirement for 100% of the students.</p>
3. Assess the role of health care systems and health policies in the prevention of illness and injury.	<ul style="list-style-type: none"> Course-level written exams, written and oral projects. 	Direct	80% of students will obtain a B in the health care management or health policy courses.
B. Integration of knowledge, theory and practice.			
1. Identify approaches to public health problems that are appropriate for diverse populations.	<ul style="list-style-type: none"> Capstone: Integrative Experience Course 	Direct	80% of students will complete the course and final paper with a grade of B or higher.
2. Integrate epidemiologic, community and policy perspective in the evaluation of public health literature.	<ul style="list-style-type: none"> Capstone: Integrative Experience Course 	Direct	80% of students will complete the course and final paper with a grade of B or higher.
3. Apply public health theory, knowledge and skills in a practice setting.	<ul style="list-style-type: none"> Practicum: After students have completed 21 credit hours, they must complete 160 hours (2 credits) of practical experience in an approved public health 	Direct	100% of students will develop a practicum proposal approved by the MPH Practicum Director and faculty adviser. An evaluation of the student's performance is written by the practicum preceptor and is reviewed by the MPH Practicum Director. 100% of students will

	setting.		write a summary of experience which is approved by the MPH Practicum Director.
C. Communication			
1. Communicate effectively both in writing and orally to diverse professional and lay audiences regarding public health issues	<ul style="list-style-type: none"> • Practicum • Capstone: Integrative Experience Course • Capstone: MPH Professional/Masters Thesis • Masters Examination 	Direct	<p>100% of students will write a summary of experience which is approved by the MPH Practicum Director.</p> <p>80% of students will complete the course and final paper with a grade of B or higher.</p> <p>Must complete a written professional paper/masters thesis that is approved by a professional paper/masters thesis committee consisting of three faculty approved by the Office of Graduate Studies.</p> <p>Passing the Masters Examination is a graduation requirement for 100% of the students.</p>
D. Cultural skills			
1. Identify the role of cultural factors in determining disease, disease prevention, health promoting behavior, and health care services organization and delivery.	<ul style="list-style-type: none"> • Masters Examination 	Direct	Passing the Masters Examination is a graduation requirement for 100% of the students.
E. Professional behavior			
1. Apply ethical principles to the practice of public health in a variety of settings.	<ul style="list-style-type: none"> • Practicum 		An evaluation of the student's performance is written by the practicum preceptor and is reviewed by the MPH Practicum Director.
All Student Learning Objectives	<ul style="list-style-type: none"> • An annual review is completed of all students in the program to identify at-risk students (those with a low GPA or not on-schedule). • Data are collected on an annual basis on the number of students dropping out of the program and the number graduating. These numbers are reported to CEPH, the accrediting body on an annual basis. • Written exit interview is completed by graduates 6 months after graduation. Topics include: job location, satisfaction with the program, and assessment of competencies obtained. • Meetings with the Department of Health and 		<p>Student performance in courses is assessed and plans are developed to assist poorly performing students. We expect a 100% compliance with a 3.0 GPA to remain in the program.</p> <p>Less than 10% of students enrolling in the program will drop out of the program before completing the degree. 75% of students will graduate within the expected 5 year time period.</p> <p>Exit interviews are analyzed and reviewed every 2 - 3 years by the MPH Director and other faculty and discussed with the MPH Academic Committee. The Academic Committee oversees changes to the program to address any identified problems</p> <p>Informal discussions and formal meeting are conducted with potential employers (e.g. NM</p>

	other employers are conducted to discuss whether graduates are prepared for working in this setting.		Department of Health) every 3 - 4 years to assess whether the program is meeting the needs of agencies within the state. Summaries of these meetings are presented to the MPH Academic Committee which oversees potential revisions to the program.
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3. When will learning outcomes be assessed? When and in what forum will the results of the assessment be discussed?

Time line	Assessment Type	Review/Decision Making Bodies
Annually	Capstone experiences (Integrative Experience Course, MPH Professional Paper, Masters Thesis)	MPH Academic Committee
Annually	Masters Examination	MPH Academic Committee
Annually	Practicum	MPH Practicum Director and MPH Academic Committee
Annually	Interviews with instructors, program coordinators and others who have direct contact with students.	MPH Program Director and MPH Academic Committee
Annually	Retention and graduation rates	MPH Director and MPH Academic Committee
Annually	Annual Report to the Council on Education for Public Health	MPH Director, Academic Committee, and Council on Education for Public Health
Every 2 – 3 years	Written exit interview	MPH Academic Committee
Every 2 – 3 years	Face-to-face meetings with potential employers	Epidemiology Concentration Committee, Community Health Concentration Committee, MPH Academic Committee
Five – seven years	Council on Education for Public Health	Self-study document, site visit, and accreditation by Council on Education for Public Health.

4. What is the unit’s process to analyze/interpret assessment data and use results to improve student learning?

Evaluation of students is an ongoing effort by faculty and program staff. Student files are maintained by the MPH graduate advisor. The graduate advisor and faculty advisors both monitor student success in courses as reflected in success in exams and papers, grade point average, and progress towards the degree. Practicum experiences are monitored the MPH Practicum Director and the faculty advisor both during the practicum experience as well as at its completion.

The Academic Committee consisting of all core MPH faculty, adjunct teaching faculty, and student representatives meets on a monthly basis. The committee regularly discusses program curriculum, goals and measures of student success. Quarterly retreats are held to strengthen the program’s ability to assess students, curriculum, and outcomes and build faculty skills in teaching and evaluation. These retreats have focused on reviewing and refining student learning objectives for the program, learning assessment strategies, and creating common rubrics to assess student progress.

The MPH Program is accredited by the Council on Education in Public Health. The next accreditation is scheduled for 2009, with a self-study document due in May, 2009, and a site visit in October, 2009. CEPH provides recommendations to the program as part of the accreditation process. CEPH also conducts an annual review which assesses retention and graduation rates, faculty FTE's, major changes in funding, and changes in program direction.