REVIEW FOR ACCREDITATION

OF THE

PUBLIC HEALTH PROGRAM

AT THE

UNIVERSITY OF TEXAS AT EL PASO
Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the Public Health Program at the University of Texas at El Paso (UTEP). The report assesses the program’s compliance with the Accreditation Criteria for Public Health Programs, amended June 2011. This accreditation review included the conduct of a self-study process by program constituents, the preparation of a document describing the program and its features in relation to the criteria for accreditation and a visit in February 2018 by a team of external peer reviewers. During the visit, the team had an opportunity to interview program and university officials, administrators, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the program and verify the self-study document.

UTEP is a 420-acre campus located near the US-Mexico border. The cities of El Paso, Texas and Cuidad Juarez, Mexico form the largest bi-national metropolitan area. UTEP is one of 14 educational institutions that form the University of Texas System. UTEP was founded in 1914 as the State School of Mines and Metallurgy and was renamed UTEP in 1967. The university includes five colleges and two schools: liberal arts, health sciences, engineering, business administration, education, nursing and pharmacy. The program is administratively housed in the Department of Public Health Sciences within the College of Health Sciences. The Department of Public Health Sciences also offers a BS in health promotion. Other departments within the college include kinesiology, clinical laboratory science, social work, rehabilitation sciences and interdisciplinary health sciences.

The MPH program began in 1988 as an MS in health and physical education degree in the Allied Health Program within the UTEP College of Education. In 1991, the Allied Health Program moved to the College of Nursing and Health Sciences, and its name was changed to the Health Sciences Program. In 2003, the program was granted status as a full department and was named the Department of Public Health Sciences. The former MS in health and physical education was phased out in 2004 after approval of a new MS degree in health promotion. In 2008, after approval by the Texas Board of Regents and the Texas Higher Education Coordinating Board, this degree was replaced by the new MPH degree.

The MPH program was initially accredited in 2013 for a five-year term. The program was required to do additional reporting related to competency mapping, and the Council accepted this report as evidence of compliance with the criteria in 2014.
Characteristics of a Public Health Program

To be considered eligible for accreditation review by CEPH, a public health program shall demonstrate the following characteristics:

a. The program shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education or its equivalent in other countries.

b. The program and its faculty and students shall have the same rights, privileges and status as other professional preparation programs that are components of its parent institution.

c. The program shall function as a collaboration of disciplines, addressing the health of populations and the community through instruction, research and service. Using an ecological perspective, the public health program should provide a special learning environment that supports interdisciplinary communication, promotes a broad intellectual framework for problem solving and fosters the development of professional public health values.

d. The public health program shall maintain an organizational culture that embraces the vision, goals and values common to public health. The program shall maintain this organizational culture through leadership, institutional rewards and dedication of resources in order to infuse public health values and goals into all aspects of the program's activities.

e. The program shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. At a minimum, the program shall offer the Master of Public Health (MPH) degree, or an equivalent professional degree.

f. The program shall plan, develop and evaluate its instructional, research and service activities in ways that assure sensitivity to the perceptions and needs of its students and that combines educational excellence with applicability to the world of public health practice.

These characteristics are evident in the UTEP MPH program. The program is housed in a regionally accredited university, and its faculty and students enjoy rights, privileges and status equivalent to those of other UTEP professional degree programs. An ecological perspective reinforces many aspects of the program’s operations, from the content of curricula to the collaborative approach to teaching and learning adopted by both faculty and students. Faculty members are prepared in a variety of disciplines, and interdisciplinary work is common in the program’s research, teaching and service components.

The program recognizes public health values and aligns its policies with the vision and goals common to public health. The program has appropriate resources to offer a single MPH concentration in the unit of accreditation.
1.0 THE PUBLIC HEALTH PROGRAM.

1.1 Mission.

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

This criterion is met. The program’s primary and secondary faculty developed and have revised the mission, goals and objectives through regularly scheduled faculty meetings. The program has received stakeholder input that has influenced the current version of the mission. The program’s mission is as follows:

To prepare future public health leaders through innovative teaching, research, and service by providing educational access and excellence. The program places a special emphasis on the promotion of health equity in Hispanic and border communities through the use of evidence-based approaches and the preparation of Hispanic public health professionals.

The mission embraces the public health needs of the community identified as the Paso del Norte region, which includes El Paso, Texas, and Ciudad Juarez, Mexico and surrounding cities and rural areas. This region includes a population of more than 2.5 million people. The mission statement is widely publicized on the program’s website and in promotional materials. Alumni, students and practicum preceptors, as well as employers and the region’s public health workforce, provided formal and informal feedback on the mission, goals and objectives. The goals and objectives have had minor revisions, most recently in summer 2017, in preparation for the accreditation review.

The dedication of the program to serving its unique community is notable. The program goals reflect this mission by emphasizing the importance of meeting the needs of regional students seeking public health professional training, recruiting students from the region and preparing students for work in the region. The goals also address research leading to improved population health, research that supports achieving health equity for Hispanic and border communities and service to communities and the public health workforce in those communities.

During the site visit, the team heard from members of the MPH Program Advisory Board about the importance of the Hispanic and border area mission, opportunities for students and the importance of the program’s students in meeting the needs of the public health workforce.
1.2 Evaluation and Planning.

The program shall have an explicit process for monitoring and evaluating its overall efforts against its mission, goals and objectives; for assessing the program's effectiveness in serving its various constituencies; and for using evaluation results in ongoing planning and decision making to achieve its mission. As part of the evaluation process, the program must conduct an analytical self-study that analyzes performance against the accreditation criteria.

This criterion is met with commentary. The self-study provides a detailed statement of the data sources for each objective that supports the program’s mission and goals. The program director is responsible for all source data and for maintaining the monitoring and evaluation processes. The program director obtains the required data through ad hoc surveys, required reports and university databases. The department chair oversees the program’s strategic planning and evaluation processes and engages program faculty through the MPH Program General Committee.

Site visitors confirmed through on-site discussions and meeting minutes that the MPH Program Advisory Board and program and departmental faculty review and discuss data and its relevance for strategic planning, curriculum planning and evaluation of research and instruction against the mission statement, goals and objectives during their meetings.

The program has identified several measurable objectives and targets related to their instruction, research and service and outreach goals. Targets for each of these objectives are reasonable and present a challenge for the program to work towards. The program has either met or shown improvement in meeting these targets over the last three years except for one outcome measure. One outcome measure sets a target of 60% or more program graduates employed in settings involving Hispanic or border health issues, and in 2016/2017 this target was not met (reported 58%). The self-study does state that not all graduate employment information for this period is known. The program's objectives are generally appropriate for assessing its success in accomplishing it mission and goals. Reviewers identified one objective which may be considered for deletion or modification. One objective proposes to provide concentration courses that address border health issues and lists the three required concentration courses as the outcome data. Since these courses are required as part of the official program of study, this objective has minimal potential value as an ongoing quality improvement measure.

The program included faculty, administrative leaders, community members and alumni in the development and revision of the self-study. The program director was primarily responsible for drafting, editing and incorporating feedback. Faculty reviewed and discussed the self-study during nine faculty meetings held during the 2016-2017 academic year. The MPH Program Advisory Board also reviewed the self-study and provided recommendations.
The commentary relates to the continually evolving nature of data evaluation and maintenance. Changes in program leadership resulted in loss of data and a gap in the continuity of program evaluation. In addition, this transition resulted in disruptions to the scheduling and holding of MPH Program Advisory Board meetings and in inconsistent student engagement in evaluation and planning. Currently, all data collection for evaluation is dependent on the program director; administrative procedures to support data collection and analysis are under development. Program leaders acknowledged these challenges and are actively working to ensure continuity related to the engagement of students and public health partners in the program’s strategic planning and evaluation efforts.

1.3 Institutional Environment.

The program shall be an integral part of an accredited institution of higher education.

This criterion is met. UTEP is accredited by the Southern Association of Colleges and Schools – Commission on Colleges. The university reaffirmed its regional accreditation status in 2016, with a term extending through 2026. The university includes colleges and schools of liberal arts, health sciences, engineering, business administration, education, nursing and pharmacy. Through these schools and colleges, UTEP offers 72 bachelor’s degrees, 73 master’s degrees and 21 doctoral degree programs to more than 23,000 students. The university’s programs hold accreditation from many specialized and professional accreditors, including those in engineering, pharmacy, nursing, business, clinical lab sciences, social work, speech and language pathology, occupational therapy and physical therapy.

The MPH program began in 1988 as an MS in health and physical education within the Allied Health Program in the UTEP College of Education. After restructuring, the Texas Board of Regents and the Texas Higher Education Coordinating Board approved the MPH degree, and it replaced the MS in health and physical education.

The program is administratively housed in the Department of Public Health Sciences within the College of Health Sciences. The dean of the College of Health Sciences shared with the site visit team that the program is a strong pillar within the college. The university president told the team that the power of the program is in its ability to do good work, help people in the region and community and conduct strong research.

The university’s president is the chief administrator and has responsibility for the operations of the university within the policies and regulations of the Texas Board of Regents. The president serves under the supervision and direction of the chancellor, deputy chancellor and executive vice chancellor of the University of Texas System. The MPH program faculty and staff are accountable to the chair of the Department of Public Health Sciences. The chair is accountable to the dean of the College of Health Sciences, who is accountable to the provost/vice president for academic affairs. The provost/vice
president for academic affairs reports to the president of the university. MPH degrees are conferred through the UTEP Graduate School following recommendation by the program director and the thesis or graduate project committee pursuant to university-specific policies and procedures.

The program’s funding flows through the College of Health Sciences and the Department of Public Health Sciences. The chair is responsible for the distribution, allocation, monitoring and accounting of financial resources. Annual department budgets are used for expenditures related to supplies, services and faculty travel. The Office of the Dean pays for support for faculty recruitment, graduate teaching assistantships and accreditation expenditures. Faculty provide feedback regarding financial priorities for the program during monthly faculty meetings; final decisions regarding priorities are determined by the program director and chair.

Indirect cost recovery funds are managed by the UTEP Office of Research and Sponsored Projects. These funds are awarded back to the grant’s principal investigator and department in allotments of 2% and 1%, respectively.

Personnel recruitment and selection is managed collaboratively between the provost and the program through designated channels. The provost allocates faculty and support staff positions to the college based on need and available resources, and the dean allocates positions to the department and program. The provost, following recommendation by the dean, extends appointments to tenure-track and tenured faculty. Faculty undergo annual merit reviews and evaluations that guide progression toward reappointment, promotion, tenure and post-tenure review. University policies stipulate that a college-wide Faculty Development, Recruitment and Evaluation Committee be charged with reviewing faculty portfolios and providing recommendations to the dean. Faculty and department chairs make up this committee. Staff reviews are conducted by immediate supervisors in accordance with policies mandated by the state.

The Graduate Council and Faculty Senate oversee the university’s graduate academic program policies and procedures. The MPH program director and faculty can propose program-specific policies and procedures. The establishment of new degrees requires approval from the University of Texas System and the Texas Higher Education Coordinating Board. The chair submits proposed curricular changes to the college’s Academic Affairs Committee; approval is then required from the dean, the provost, the Graduate Council and, finally, the Faculty Senate.
1.4 Organization and Administration.

The program shall provide an organizational setting conducive to public health learning, research and service. The organizational setting shall facilitate interdisciplinary communication, cooperation and collaboration that contribute to achieving the program’s public health mission. The organizational structure shall effectively support the work of the program’s constituents.

This criterion is met. The program provides an organizational setting that is conducive to public health learning, research and service, as well as one that facilitates interdisciplinary collaboration and cooperation.

The MPH program faculty, staff and director report directly to the chair of the Department of Public Health Sciences. The department chair oversees administrative aspects such as faculty and personnel appointments, promotion and teaching assignments as well as preparation of departmental budgets. The chair is also responsible for course schedules, evaluation and development of programs, approval of degree plans for students and appointment of all department committees and chairs of committees. The program director is responsible for day-to-day operation and academic administration of the MPH program. Responsibilities include preparation of student degree plans, new student recruitment, academic advising of students, maintenance of student records, resolving student issues and managing program monitoring and assessment.

The program and the university are dedicated to fostering interdisciplinary collaboration and research among students and faculty. The El Paso Norte Institute for Healthy Living, housed on the UTEP campus, serves to provide “leadership for developing innovative, multi-disciplinary and sustainable approaches to increase healthy eating and active living in the El Paso border region.” Students in the MPH program have an opportunity to participate in research at the Institute for Healthy Living, which also has partnerships throughout several universities in Texas and New Mexico, and through several school districts, health care systems and local non-profit organizations. Students in the MPH program are required to have at least one committee member for the graduate research or thesis option who is 1) from a UTEP department other than public health sciences, 2) from a department in another accredited university or 3) from a qualified local public health agency. Students are also offered the opportunity to take classes in other graduate departments as part of their elective requirements.

The program takes great pride in the varied backgrounds and interests of its faculty. Program faculty have backgrounds ranging from public health to molecular biology to the social sciences. Faculty participate in intra-departmental, inter-departmental and inter-college research collaborations, which are evident in their current research projects. Partnerships and collaboration take place with faculty at other institutions throughout Texas, the country and internationally. The program’s varied faculty backgrounds and research areas provide adequate opportunities for interdisciplinary learning and research opportunities among faculty and students.
The university’s commitment to furthering interdisciplinary research is evident in the construction of a 162,000 square foot research complex that brings together a variety of disciplines and professions. Faculty also participate in university-wide interdisciplinary research and education initiatives, which provide conferences, workshops, meetings and research socials to connect faculty who share common research interests and to foster collaboration.

1.5 Governance.

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

This criterion is met with commentary. The program has a well-defined governance structure that includes faculty and other program stakeholders in decision making.

The department chair, program director and program faculty are responsible for developing program-specific policies. The chair and program director are ultimately responsible for making decisions about the program in accordance with UTEP operating procedures. Faculty provide suggestions regarding program improvement, including academic and curricular considerations, at monthly faculty meetings and through participation in departmental committees. This feedback is considered by the program director during department strategic planning.

The program includes several standing committees where faculty are involved either on a voluntary or assigned basis. The MPH Program Graduate Admissions Committee is charged with reviewing student applications and making recommendations for admittance to the program director. This committee includes membership from all tenured and tenure-track faculty in the department.

The MPH Program General Committee is composed of all full-time faculty and functions as a “committee of the whole.” The committee advises on academic governance of the program, including program development and assessment. This committee reports to the department chair.

The Academic Curricular Excellence Committee is composed of self-selected faculty members and is charged with review of student- and program-level issues regarding academic and curricular compliance. This committee assists with completion of accreditation compliance requirements and evaluation reports.

In addition to monthly faculty meetings, the program uses these committees for evaluation and assessment. Evaluation data from surveys assessing student satisfaction and performance, faculty performance and progress toward strategic goals is reviewed yearly during faculty meetings.
The Workforce Development Committee, composed of faculty members who choose to participate, is charged with planning and creating workforce development and training opportunities. Site visitors learned that this committee was developed in December 2017 to address workforce development issues of the community and apparent to the program. Committee members shared with the team that they are in the process of establishing activities and preparing a community needs assessment.

The MPH Program Advisory Board consists of eight public health practitioners, the department chair, the program director and the president of the public health graduate student association called Students for Public Health. This committee provides advice about program quality, program relevance and public health workforce needs in the Paso del Norte region. The self-study indicates challenges in maintaining consistent meetings for the Advisory Board since 2012 due to change in program directors. However, the self-study, ERF and Advisory Board members verified meetings in fall 2016, spring 2017 and fall 2017. The team also learned that there is a plan and desire to continue regular meetings with the Advisory Board moving forward.

The ad hoc Faculty Search Committee includes self-selected members from the program’s faculty and is guided by the Office of Equal Opportunity to ensure compliance with search procedures, university policies and regulatory requirements. This committee is assembled by the department chair and serves to review and provide recommendations for new faculty positions to the chair and the dean. The Faculty Search Committee is also involved in designing recruitment materials as well as interviewing and vetting candidates.

The department chair is responsible for making recommendations regarding initial appointment, reappointment, retention, dismissal, tenure, promotion and merit salary determinations for all faculty and department personnel and is expected to receive and consider advice from faculty. Faculty inclusion in retention and promotion decisions exists in the form of peer review and committee involvement. Faculty complete an annual performance self-evaluation that is reviewed by the college’s Faculty Development, Recruitment and Evaluation Committee and includes members of all departments and programs in the college. Tenure-track faculty are also evaluated by their peers on indicators chosen by the Faculty Development, Recruitment and Evaluation Committee. The indicators relate to the areas of instruction, scholarship and service. In addition, faculty are reviewed at the program level by their peers in the program.

Faculty research and service expectations and policies are set at the college level by the dean, consistent with the University of Texas System and UTEP-specific policies and procedures. Primary and secondary faculty members affiliated with the MPH program are active in college- and university-level service. The self-study provides information about the standing and ad hoc committees on which the primary faculty
members serve, which include the UTEP Wellness Program, UTEP Faculty Senate (Student Wellness, Library and Nominating Committees), Culture and Health Interdisciplinary Research Group, Health Promotion Student Association, Institutional Biosafety, Strategic Planning Committee on Graduate Education and Steering Committee – Wellness Program.

The self-study describes student inclusion in governance through membership and leadership on the Students for Public Health association. However, the site visit team learned through on-site interviews that the student association primarily functions as a forum for discussion and development of student interests related to research and practical experience in the community, as well as serving as an advocacy body on campus. In practice, students provide feedback regarding the curriculum, career counseling and information technology through the annual student survey. Students are also included in evaluation of candidates for tenured and tenure-track faculty positions by attending the applicants’ colloquia, conducting on-campus interviews and completing application evaluation forms that are then shared and utilized by the faculty search committee as recommendation for hiring.

The commentary relates to the limited ability of students to engage in program governance. The self-study states, and on-site meetings with faculty confirmed, that student opportunities to provide feedback on the program exist informally, mostly between advisors and students. Site visitors found that the lack of formalized inclusion of students in the governing process has led to delays in communicating important programmatic and/or curricular changes to students. For instance, students told site visitors that they wished the practicum experience could be offered over a longer duration of time (or potentially split over two summers) to accommodate their work schedules. During on-site meetings with program faculty, site visitors learned that the practicum coordinator, in conjunction with program leaders, was in the process of addressing this student concern. During the site visit, students told site visitors that they were not aware of this change to the practicum offering.

### 1.6 Fiscal Resources.

**The program shall have financial resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.**

This criterion is met. The program’s fiscal resources are adequate to support achievement of the mission and goals, as well as the instructional, research and service objectives.

Each year, the department chair prepares the departmental budget and submits it to the dean for review. The MPH program director provides recommendations regarding financial needs to the chair. All department chairs within the college discuss their budgetary considerations with the dean and negotiate based on need before the college’s budget is sent to the provost. The provost approves the final budget and submits it to the Board of Regents.
The self-study explains that the state portion of tuition is returned as part of the state appropriation, while the local portion of tuition is retained by the university and used for instructional purposes. Unspent funds from state appropriations are reverted to the state. The university retains student fees. The Board of Regents approves tuition and fee rate increases. Indirect cost funds, managed through the Office of Research and Sponsored Programs, are awarded back to the grant’s principal investigator (2%) and the department (1%). The program has introduced a process to pay for all students who desire to take the Certified in Public Health exam. The program director informed the site visit team that, to date, six students had benefited from this funding; the program plans to continue offering this benefit to students in the future.

Faculty salaries are paid for a nine-month period, and adjunct faculty are paid a fixed amount per course per semester. Salary support comes from state funds. As shown in Table 1, program expenditures have steadily increased over the last five years and have been matched by increases in funding. Institutional expenditures per FTE student have increasingly exceeded the program target of $10,000 over the last three years. The total amount of external funding has exceeded the program target and doubled over the last three reporting years. The program anticipates that state funding and tuition revenues will continue to be the major source of funding support for the program in the future. The president, provost and dean all affirmed their commitment to the sustainability of the program.

Table 1. Sources of Funds and Expenditures by Major Category, 2012 to 2017

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>2012-13</th>
<th>2013-14</th>
<th>2014-15</th>
<th>2015-16</th>
<th>2016-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition &amp; Fees</td>
<td>$488,072</td>
<td>$525,474</td>
<td>$602,714</td>
<td>$615,586</td>
<td>$657,694</td>
</tr>
<tr>
<td>University Funds</td>
<td>$46,900</td>
<td>$46,500</td>
<td>$47,665</td>
<td>$46,500</td>
<td>$46,500</td>
</tr>
<tr>
<td>Indirect Cost Recovery</td>
<td>$0</td>
<td>$18,670</td>
<td>$7,350</td>
<td>$3,754</td>
<td>$4,427</td>
</tr>
<tr>
<td>Gifts</td>
<td>$0</td>
<td>$88</td>
<td>$500</td>
<td>$300</td>
<td>$4,700</td>
</tr>
<tr>
<td>Total</td>
<td>$534,972</td>
<td>$590,732</td>
<td>$658,229</td>
<td>$666,140</td>
<td>$713,321</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty Salaries &amp; Benefits</td>
<td>$414,753</td>
<td>$502,012</td>
<td>$540,440</td>
<td>$511,289</td>
<td>$586,676</td>
</tr>
<tr>
<td>Staff Salaries &amp; Benefits</td>
<td>$17,570</td>
<td>$18,916</td>
<td>$20,371</td>
<td>$20,874</td>
<td>$22,496</td>
</tr>
<tr>
<td>Operations</td>
<td>$4,629</td>
<td>$4,897</td>
<td>$7,799</td>
<td>$7,052</td>
<td>$7,256</td>
</tr>
<tr>
<td>Travel</td>
<td>$3,312</td>
<td>$5,059</td>
<td>$4,413</td>
<td>$3,913</td>
<td>$4,102</td>
</tr>
<tr>
<td>Student Support</td>
<td>$47,808</td>
<td>$59,760</td>
<td>$77,856</td>
<td>$71,712</td>
<td>$83,664</td>
</tr>
<tr>
<td>Total</td>
<td>$488,072</td>
<td>$590,644</td>
<td>$650,879</td>
<td>$614,840</td>
<td>$704,194</td>
</tr>
</tbody>
</table>
1.7 Faculty and Other Resources.

The program shall have personnel and other resources adequate to fulfill its stated mission and goals, and its instructional, research and service objectives.

This criterion is met. The program has adequate personnel and other resources to fulfill its mission, goals and objectives. For 2017-2018, the program has five primary faculty (3.5 FTE) and a student-faculty ratio (SFR) of 6:1. The program has maintained an SFR below 10:1 over the last three reporting years.

In addition to faculty, the program has been supported by one 0.5 FTE staff member over the last four years. According to the program director and other program stakeholders, the staff support for the program is sufficient.

In 2011, the program moved into a new $60 million, 132,000 square foot Health Sciences and Nursing building on the main UTEP campus. This building contains teaching spaces, administrative offices and faculty and student office spaces. The building houses five specialized research laboratory facilities where faculty and students undertake bench research in areas such as immunology and nutrition. Students told the site visit team that classrooms, study rooms and laboratories meet their educational needs.

All faculty and administrators have 24-hour access to their own university computers via UTEP’s virtual private network. Classrooms used by the program are equipped with multi-media projectors, as well as wired and wireless internet. Faculty and students reported having adequate access to software, such as SPSS and SAS, for research. The program has access to the university’s Technology Support Center where free technology services such as video editing are provided. Students have access to a network scanner, printers, charging stations and mobile computing areas. Students reported that these facilities are accessible and adequate.

The UTEP library contains over one million books, 192 graduate study carrels, a small auditorium and space for both group and quiet study. The library holds a Collaborative Learning Center with over 300 computers. Online access is robust, with over 395 subscription electronic databases, which provides access to thousands of electronic journals. Health science librarians provide an orientation to library resources and support to students and faculty in the MPH program.

The program has identified three outcome measures related to student-faculty ratios (<8:1 for all faculty, and <10:1 for primary faculty), library resources (inclusion of academic technology resources for students and faculty) and classroom space quality (80% of MPH courses taught in a modern classroom). The program has been successful in meeting these targets in each of the last three years, with the exception to the student-faculty ratio in 2015-2016. During the 2015-2016 year, the student-faculty ratio exceeded
the target for all faculty (8.5:1) and for primary faculty (12.5:1), but the program has met this target in subsequent years.

1.8 Diversity.

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

This criterion is met with commentary. The program’s commitment to diversity is evident in the students admitted to the program, the faculty leading instruction and research efforts and in the research and service conducted in the surrounding area. The program focuses on serving Hispanic and/or Mexican nationals (who comprise 81.2% of the region’s population) and recruiting public health students who are from this population and/or will serve this population.

The program has identified targets for recruiting students typically underrepresented in public health, and accordingly has set out to recruit a student body that is at least 75% Hispanic and/or Mexican national and 20-30% male. The program has maintained more than 20% male students in the last three years (30%, 23% and 31%, respectively). The target for Hispanic/Latino student representation was met in one of the last three years (70%, 100% and 67%, respectively). The program recruits and accepts other minority students, including students from within and outside the United States. The program supports its diversity goals by providing additional attention and services to those students who need it. For example, students can receive support in English-language skills for speakers of other languages.

To enhance the success of a diverse student body, the program also seeks to recruit and retain a culturally diverse faculty attuned to the Paso del Norte region. The program strives to maintain 60% (faculty) and 50-100% (staff) Hispanic/Latino representation and 10-20% male representation. The self-study reports male faculty representation of 22%, 13% and 13% over the last three years. Hispanic/Latino representation among faculty has been 56%, 60% and 60% in the last three years; Hispanic/Latino staff has consistently been 100%.

The program maintains its efforts to foster diversity through three courses explicitly tied to the Hispanic and border health concentration (ie, PUBH 5321 Responding to Chronic and Infectious Diseases in Hispanic and Border Communities; PUBH 5352 Public Health Evaluation and Research; and PUBH 5322 Eliminating Health Disparities); each of these courses focuses on diversity and cultural competence.

The program also maintains significant capacity to support research and service goals with Hispanic communities, professionals and institutions. Program leaders acknowledged the risk of becoming a mono-cultural program for Hispanics, and the program is committed to monitoring its performance on diversity goals going forward.
The commentary relates to opportunities to attract more male faculty and students and more students from under-represented populations other than Hispanics. The program has clearly identified these priority populations; however, the means of recruiting individuals in these populations are not always clearly defined.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

The program shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master’s degree. The program may offer a generalist MPH degree and/or an MPH with areas of specialization. The program, depending on how it defines the unit of accreditation, may offer other degrees, if consistent with its mission and resources.

This criterion is met. Table 2 presents the program’s single degree offering: the MPH in Hispanic and border health. In addition to five core courses, a practicum and a culminating project, students complete three required concentration courses and two to three electives. Site visitors reviewed the syllabi for the concentration coursework and found that the courses show an appropriate breadth and depth of content for graduate-level study.

<table>
<thead>
<tr>
<th>Table 2. Instructional Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Master’s Degree</td>
</tr>
<tr>
<td>Hispanic and Border Health</td>
</tr>
<tr>
<td>MPH</td>
</tr>
</tbody>
</table>

Students who met with site visitors said that they were generally satisfied with the focus of the program and the courses offered. When asked if there were any opportunities for improvement, students told site visitors that they appreciated the opportunity to take elective courses outside the department but that some are more applicable to public health than others.

MPH courses are primarily offered in the evenings to accommodate working students; however, the practicum experience requires students to work during their practicum site’s requested hours.

2.2 Program Length.

An MPH degree program or equivalent professional public health master’s degree must be at least 42 semester-credit units in length.

This criterion is met. The MPH degree requires 42 semester credit hours. Students are required to maintain a grade of B or higher in each course. One semester credit equals one hour of classroom or direct faculty instruction for 15 weeks and two hours of student work outside of class for each credit hour.
Courses in the MPH curriculum are three semester credits. The program has not awarded any degrees for fewer than 42 credit hours.

### 2.3 Public Health Core Knowledge.

All graduate professional public health degree students must complete sufficient coursework to attain depth and breadth in the five core areas of public health knowledge.

This criterion is met. Table 3 presents the required core courses for MPH students. Students in the program are required to complete 15 credits of core courses, each of which is assigned three credits.

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics</td>
<td>PUBH 5305 Biostatistics in Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>PUBH 5302 Epidemiology for Public Health Professionals</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>PUBH 5304 Environmental Health</td>
<td>3</td>
</tr>
<tr>
<td>Social &amp; Behavioral Sciences</td>
<td>PUBH 5353 Social and Behavioral Approaches to Public Health</td>
<td>3</td>
</tr>
<tr>
<td>Health Services Administration</td>
<td>PUBH 5307 Health Services Administration and Health Policy</td>
<td>3</td>
</tr>
</tbody>
</table>

Based on a review of syllabi, site visitors determined that these courses provide robust coverage of the core areas of knowledge basic to public health. Core courses in biostatistics and epidemiology have a prerequisite of undergraduate or graduate statistics. The university offers statistics courses at both the graduate and undergraduate level that are accessible to MPH students. The content of course syllabi is in alignment with the program’s mission, and waivers of core courses are not permitted.

### 2.4 Practical Skills.

All graduate professional public health degree students must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to students’ areas of specialization.

This criterion is met. All students are required to complete a six-credit-hour practicum that requires 240 hours of on-site work time. Practicum experiences are completed in a public health agency or worksite setting under the supervision of a preceptor. The program director approves experiences, and the practicum coordinator provides day-to-day monitoring of experiences.

Students are required to create a significant project proposal that is approved by the preceptor, practicum coordinator and program director. At the end of the experience, students develop a final written report and poster presentation. The appropriate learning objectives, competencies and activities are identified together by the student, site preceptor and program coordinator and take into account the student’s professional and career goals. The plan (including the student’s chosen objectives and activities) is
documented in the field placement site agency agreement and affiliation agreement. During the practicum period, students attend a weekly class taught by the practicum coordinator that discusses practicum progress and addresses leadership and professional development skills. Students and preceptors are required to submit midterm and final evaluations to assess student performance. Students are required to submit reflective journals as another aspect of the practicum assessment.

Site visitors reviewed student reports and evaluative materials and found that they reflected a solid process for developing and evaluating a student’s practicum experience. Site visitors also saw the value of the student practicum to the host agency.

Practicum field site opportunities are managed by the practicum coordinator and include a variety of public health, health and social service agencies serving the Paso del Norte region and other programs that express interest or have experience working with students from the program. Local, state and federal public health and social service agencies, environmental, industrial and worksite wellness companies, schools, non-profit health and welfare providers and international and cross-border health agencies are among the sites approved for practicum placements. The administrative and teaching responsibilities of the practicum coordinator will increase as student enrollment grows. Faculty shared during the site visit that the development of additional practicum sites is key to growing the student body and to meeting needs for workforce growth.

Each public health agency or organization that participates with the program is required to submit a field placement site agency application and sign an affiliation agreement prior to student placement. New practicum site supervisors are required to complete the agency application even if the site is already affiliated with the program. Students can pursue practicum sites outside of the approved list with approval from the program director and with the existence of a current affiliation agreement.

The program requires that preceptors be professionals with sufficient experience in developing, managing and/or evaluating public health or health-related programs or policies. Preceptors are expected to have a graduate or professional degree such as a PhD, MS, DrPH or MPH in public health or a closely related field. Exceptions apply to individuals who work in public health and have a related professional or graduate degree (eg, MD, DVM, DDS, MSW, MHA, MPA, MEd). When a site is selected, either the student or the site selects the preceptor. Preceptors are required to meet with the practicum coordinator prior to the start of practicum experiences. The coordinator also holds a mandatory formal orientation session for all practicum preceptors.

The practicum experience and associated requirements are provided to students through a practicum handbook, which is available online. The self-study states that students may petition to waive the
experience based on prior professional experience that meets the requirements of the practicum. If approved, students are required to take additional courses to earn the six credits. As of the site visit, no one in the program’s history had applied for a waiver.

Student feedback during the site visit indicated that the practicum structure is supportive of students and is intended to provide a wide variety of practice learning environments. Community-based organizations, public health advocates and research faculty all praised the products of the practica, noting contributions to public health.

As discussed in Criterion 1.5, during the site visit, students described some challenges related to fulfilling the required number of practicum hours while meeting employment expectations. The practicum coordinator and the program director are in the process of responding to this challenge and said that beginning in May 2018, students will be able to start the practicum experience earlier in the program so that they may complete the required hours over a longer period of time.

2.5 Culminating Experience.

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

This criterion is met. The MPH program has structured two culminating experience options designed to meet the needs of students on different career paths. Both culminating experiences require students to produce and defend a substantial scholarly product.

The graduate project focuses on skills needed for professional public health practice and emphasizes critically applying existing knowledge and methods in the solution of a public health problem. This option requires students to take a three-credit course: PUBH 5397 Graduate Research Project. Satisfactory completion of this course includes proposal development under the direction of a faculty member and submission of a written report and oral presentation. Students completing the graduate research project in a single term are required to take an additional elective to fill their credit requirements.

The graduate research thesis requires the generation of new knowledge through the comprehensive application of the research process. This path is recommended for students intending to pursue further professional study in a health sciences discipline (e.g., medicine, dentistry, etc.) or an academic/research doctoral degree. Students following this path must take (at least) two three-credit thesis courses (PUBH 5398 Thesis I and PUBH 5399 Thesis II) and remain enrolled until the thesis is completed. These courses serve as advisory courses rather than classes or seminars. Under the direction of a faculty member, students are required to create a research proposal, submit the final research thesis and complete an oral presentation.
Students work with and are reviewed by a committee (consisting of a tenured/tenure-track faculty member from the department acting as the chair, one other departmental faculty member and a third external member). The committee assists students in the progression of the thesis/project proposal and in the identification of competencies that will be demonstrated in the thesis or project. Students defend the proposal using the final defense criteria, which outlines expectations for content and for the capacity of students to successfully implement the protocol. Student performance on the oral and written thesis proposal defense is assessed by the committee members using a written standard evaluation rubric. Upon completion of the thesis/project, students complete a final oral defense and examination, as well as a written paper.

Site visitors reviewed samples of student deliverables and found them to be appropriate integrative experiences. The associated grading rubrics assess the work’s organization, clarity, rigor, inclusion of pertinent information, appropriate application of program competencies and relevance and/or application to the Hispanic/border population or region. Of the six thesis examples reviewed, all dealt with public health issues of importance in the region and/or the Hispanic/border population. Among the projects reviewed, topics included strategies for serving LGBT populations, development of a clinical electronic health record to meet new requirements, development of a patient information strategy for women with gestational diabetes and prevention of hepatitis C in Ciudad Juarez. All clearly dealt with Hispanic, border and other underserved populations and supported the practice needs of local public health providers.

Both types of culminating experiences were praised by faculty and community partners as producing real value for students, public health organizations and the community. Program faculty told site visitors that the program is currently working to increase opportunities for students to present their research at scientific meetings.

2.6 Required Competencies.

For each degree program and area of specialization within each program identified in the instructional matrix, there shall be clearly stated competencies that guide the development of degree programs. The program must identify competencies for graduate professional, academic and baccalaureate public health degree programs. Additionally, the program must identify competencies for specializations within the degree program at all levels (bachelor’s, master’s and doctoral).

This criterion is partially met. The program uses 22 foundational competencies and 12 concentration competencies in Hispanic and border health to assess student learning. The self-study provides a matrix of the 22 foundational competencies mapped to the core, concentration-specific and elective MPH coursework and corresponding assessment opportunities. The self-study also includes a matrix of the concentration competencies mapped to MPH coursework and provides the learning opportunities designed to measure competency attainment.
The program recently adopted the foundational competencies adopted by CEPH in 2016. The self-study and on-site interviews with faculty indicated that the program used the process of incorporating the 22 foundational competencies to review and recommend changes in current course syllabi. However, no course changes had been made at the time of the site visit.

The first concern relates to the inability of site visitors to validate that all foundational competencies are appropriately addressed and assessed in the curriculum. Course syllabi reviewed by site visitors still included the program’s previous competencies and learning objectives. The self-study maps the foundational competencies to specific courses and assessment opportunities. However, the site visit team could not validate (CNV) that several competencies were appropriately addressed. Table 4 includes a summary of the site visit team's analysis of these competencies.

The self-study indicates that the program developed the Hispanic and border health concentration competencies when the program was developed in 2013. These competencies were developed to align with the needs of the public health agencies and organizations that serve the local Hispanic and border communities. The competencies range from lower-level (“Access the major sources of public health data that pertain to Hispanic and border communities…”) to more advanced skills (“Apply the social justice perspective in public health practice as it relates to community capacity building and empowerment.”).

The self-study notes that the appropriateness of the competencies is evaluated by surveying students, alumni, public health employers, practicum supervisors and in discussions with the MPH Program Advisory Board. On site, the program also noted that competency evaluation is done during faculty meetings with dedicated time set aside for review. Faculty indicated that this review method will continue with the incorporation of the CEPH-defined foundational competencies.
Table 4. MPH Foundational Competencies

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

The second concern relates to the overlap between some of the concentration competencies and the foundational competencies. While some of the concentration competencies define appropriate skills that are specific to the Hispanic and border health focus, others simply add the Hispanic and border health focus to a statement that is captured through the foundational competency set. For example, concentration competency 8, “Plan, implement...public health programs in Hispanic and border communities,” does not require unique skills beyond those required in the foundational competencies (eg, “Apply awareness of cultural values and practices to the design or implementation of public health policies or programs” or “Design a population-based policy, program or intervention.”). The addition of an
identified community for implementation does not provide a substantive difference in the skills the
competencies are requiring students to perform. The program should re-evaluate its concentration
competencies to ensure that they are distinct in skill and assessment from the foundational
competencies.

2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each student has
demonstrated achievement of the competencies defined for his or her degree program and area of
concentration.

This criterion is partially met. The program employs a variety of measures to monitor and evaluate student
progress throughout the course of study. As reflected in the syllabi, assessment methods such as
multiple-choice examinations, written papers, reflective written assignments, oral presentations, essays,
projects and discussions are used to assess the outcomes of student learning. Rubrics are often provided
to support the assessments.

The supervised practicum experience focuses on experiences relevant to Hispanic and/or border
populations. Faculty and students reported that the practicum provides an opportunity for students to
integrate, synthesize and apply knowledge and skills acquired in the required courses to the population
practice setting. The practicum experience is self-assessed qualitatively by students, and the student's
performance is evaluated by a practicum preceptor based on a rubric. Competencies are specifically
noted on the rubric.

The culminating experience is designed to assess student mastery of and ability to apply selected core
(to be updated with foundational competencies in the future) and concentration competencies.
Assessment of the culminating experience is managed by faculty and is based on a rubric. Faculty
reported that this culminating experience ensures that only qualified students (who meet the core and
concentration competencies, at a minimum) are given the opportunity to graduate from the program.

Course assessments are developed and evaluated by instructors and course directors, and the syllabi
and evaluations are reviewed by the Curriculum Committee. The program director guides each student to
establish a plan of study, with attention paid to course sequence and timely completion. The academic
progress of each MPH student is tracked by the program director; she meets with each MPH student at
least once a semester. MPH students at UTEP are required to achieve a minimum grade of B or its
equivalent (80%) in all core and concentration courses starting with the fall 2017 cohort and must
maintain a GPA of 3.0 or higher.
The goal of the program, as expressed by the program director, is completion of the 42 credits within four years; it is possible to complete the program in as little as 2.5 years. Students are given up to six years to complete the program based on university policies. Faculty told the site visit team that faculty mentoring of students has been a major factor in the achievement of a high graduation rate. For students who matriculated between 2011-2012 and 2014-2015, the self-study presents graduation rates of 81.8%, 85.7%, 80% and 81.8%. Students in more recent cohorts are still continuing in the program, and the program appears on track to continue meeting or exceeding the graduation threshold of 70%.

The self-study indicates that a majority of program graduates (over 90%) who completed the program between 2012 and 2016 are either employed or are continuing their education or training. Community representatives and employers on the MPH Program Advisory Board told the site visit team that graduates of the UTEP MPH program have demonstrated excellence in their work and that they would be enthusiastic about hiring other graduates when opportunities are available. Community representatives also shared onsite and in the self-study that students could benefit from more exposure to oral presentations, and the program acknowledges this challenge and describes efforts toward improvement. Employer survey data shared in the self-study indicates that cultural competence, technical knowledge and skills, analytical and data skills, familiarity with regional health issues, ability to manage a diverse program team and ability to interact with local stakeholders are areas of student strength. Survey data suggest further development in technical writing, leadership, managing processes related to fiscal program components, compiling reports for multiple audiences and applying systems thinking skills. The self-study indicates that the program director and faculty are working with students to provide resources to strengthen technical writing but does not address the other areas were suggestions were provided.

The concern relates to the need to collect information from alumni about their ability to perform competencies in employment settings after graduation. The self-study indicates that the program decided not to update its survey instrument to include the updated competencies because it would make the survey too long. While the program must seek feedback from alumni about competency attainment, including every competency statement individually is not required. In addition, this information may be collected using methods such as key informant interviews, focus groups or documented discussions.

2.8 Bachelor’s Degrees in Public Health.

If the program offers baccalaureate public health degrees, they shall include the following elements:

**Required Coursework in Public Health Core Knowledge:** students must complete courses that provide a basic understanding of the five core public health knowledge areas defined in Criterion 2.1, including one course that focuses on epidemiology. Collectively, this coursework should be at least the equivalent of 12 semester-credit hours.
Elective Public Health Coursework: in addition to the required public health core knowledge courses, students must complete additional public health-related courses.

Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

Capstone Experience: students must complete an experience that provides opportunities to apply public health principles outside of a typical classroom setting and builds on public health coursework. This experience should be at least equivalent to three semester-credit hours or sufficient to satisfy the typical capstone requirement for a bachelor’s degree at the parent university. The experience may be tailored to students’ expected post-baccalaureate goals (eg, graduate and/or professional school, entry-level employment), and a variety of experiences that meet university requirements may be appropriate. Acceptable capstone experiences might include one or more of the following: internship, service-learning project, senior seminar, portfolio project, research paper or honors thesis.

The required public health core coursework and capstone experience must be taught (in the case of coursework) and supervised (in the case of capstone experiences) by faculty documented in Criteria 4.1.a and 4.1.b.

This criterion is not applicable.

2.9 Academic Degrees.

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

This criterion is not applicable.

2.10 Doctoral Degrees.

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

This criterion is not applicable.

2.11 Joint Degrees.

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

This criterion is not applicable.

2.12 Distance Education or Executive Degree Programs.

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

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

The program shall pursue an active research program, consistent with its mission, through which its faculty and students contribute to the knowledge base of the public health disciplines, including research directed at improving the practice of public health.

This criterion is met. The program has a robust interdisciplinary research agenda that focuses on public health issues affecting Hispanic and border populations. The university reports over $84 million in annual research expenditures. Research goals for the program have been met for the last three reporting years. Over 75% of primary faculty published at least one peer-reviewed article, book chapter or book annually and presented research findings annually at scientific meetings. During the same period, over 80% of primary faculty applied for at least one grant per year. The program reports over $23 million in total research grant awards from 2014 to 2017.

All primary and some secondary program faculty participate in research relevant and connected to the mission of the program. Research topics include studies on gestational diabetes in Hispanic women, lead and arsenic exposures in children in the El Paso border region, health disparities across cultures in Latin America and evaluation of lifestyle and environment changes to reduce cardiovascular disease in Texas. Some faculty also participate in the Minority Health International Research Training Program. Research productivity is a key component of evaluation of faculty for promotion and tenure. Research at UTEP is governed by policies and procedures published in the Handbook of Operating Procedures.

Community-based research is an integral aspect of the program and university. In addition to the research pursuits of faculty in collaboration with community-based organizations, UTEP has a Community and Academic Partnership for Health Science Research program that fosters collaborative clinical and translational research to address health disparities among Hispanic populations on the US-Mexico border. This program has funded MPH faculty research in recent years.

Research is strongly supported by several offices at the university. The Office of Research and Sponsored Projects provides research-related services such as proposal development assistance, pre-award support, post-award support, institutional endorsement of research applications and maintenance
of sponsored research data. This office manages the university’s Research Institute, which provides funds to faculty for pilot studies and houses the Institutional Review Board, a proposal development team and the Interdisciplinary Enhancement Program. The Office of Research and Sponsored Projects also manages the distribution of indirect costs recovered.

The MPH program benefits from the university’s large capital investment in research equipment and facilities. This investment is evident in the laboratory facilities in which faculty conduct research. Formal research agreements exist with agencies such as the National Institutes of Health, the Substance Abuse and Mental Health Services Administration and the Paso del Norte Health Foundation. The College of Health Sciences offers a summer writing program designed to promote publishing and writing of grant proposals. The College of Health Sciences maintains a Research Committee that serves all the programs in the college, including the MPH program. The Research Committee advises and makes recommendations for the award and allocation of funds for research activities.

Student inclusion in research—and the support of student research—is evident throughout the program. The Research Committee solicits and evaluates proposals for graduate student travel for research presentations, research fellowships and research awards to graduate students. There are Affinity Research Groups that emphasize student research skills and provide students with opportunities to learn and apply research skills required for the workforce. The UTEP Graduate School and the department also have budget lines to fund student travel to conferences. Students reported that they have ample opportunities to participate in faculty research and have traveled to conferences sponsored by the American Public Health Association and the Texas Public Health Association. The program reports student participation in almost all its research projects, and some students serve on funded research programs as graduate assistants. Faculty reported that students have participated in authorship or co-authorship of peer-reviewed presentations in several local, regional and national conferences, as well as publications.

3.2 Service.

The program shall pursue active service activities, consistent with its mission, through which faculty and students contribute to the advancement of public health practice.

This criterion is met. The MPH program collaborates with many community agencies and institutions in the Paso del Norte region to support its community and professional service efforts. The program defines its service activities in the context of a university-wide strategic plan that defines service activities carried out by faculty and students as exemplifying “an engaged, community-centered institution that fosters human, cultural and social development and enhances the quality of life of people in the region.”
The MPH Program Advisory Board provides an external review of the program’s service agenda. Some of these members shared with the site visit team that collaboration and cooperation between the program and community organizations is strong. Members also said that program contributions (including students’ thesis projects and projects with community-based organizations) help generate data and evaluate organizations’ efforts.

Service activities are also a major area assessed in faculty evaluations and promotion decisions. Categories of faculty service include service on professional and community boards, clinical work and activities involving community partners, such as service learning, presentations and collaborative projects. The site visit team verified that most, if not all, faculty members include service components in their teaching and research agendas. The assessment measures for faculty service are clear, and the level of participation for the last two years is strong.

In addition to service activities that are incorporated into the curriculum, students participate in activities facilitated by the student-run organization Students for Public Health. Several students participated in multi-year disaster preparedness training exercises with state and local officials, for example.

The program is committed to strengthening relationships with governmental and community-based public health organizations in its region to enhance both service opportunities and opportunities for thesis/graduate projects and practicum placements. Program, college and university leaders emphasized their dedication and commitment to improving health and strengthening the region’s public health structure.

The program identifies five outcome measures related to faculty service including measurable targets. Measures include faculty engagement in leadership positions in health related, international or public health professional associations, service in peer review, participation within an external professional association, inclusion of community outreach and service-learning activities that will benefit the local communities into their curriculum and faculty collaboration with community-based organizations. The self-study shows attainment of the associated targets for these measures over all of the last three years.

3.3 Workforce Development.

The program shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.

This criterion is met with commentary. The program conducted a formal workforce needs assessment in 2012 just before its initial accreditation review; however, the program acknowledges that the needs assessment had a low response rate and needed to be updated. Since that time, the program’s major
effort has been participation in developing a five-year workforce development plan for the El Paso Department of Public Health in preparation for a review by the Public Health Accreditation Board (PHAB).

In December 2017, the department formed a Workforce Development Committee, and its first task is to determine when and how to conducting a new needs assessment to update the 2012 findings. MPH program faculty serve on this committee, and they expressed strong support during the site visit for the renewed effort to address workforce needs. The program’s response to the site visit team’s report indicated that the program completed the needs assessment work in the months between the site visit and the accreditation decision.

Workforce development activities that have occurred to date are documented at the department level rather than at the program level. MPH program faculty have participated in the planning and logistics and have also served as presenters. Workforce development activities have, at times, been driven by the interests and availability of individual faculty members, while other activities have been offered at the request of community agencies.

Examples of opportunities sponsored and implemented by MPH faculty members include a co-sponsored program on first responder safety (49 attendees), Heal-U event for public health practitioners on healthy eating, active living and obesity prevention (125 attendees in 2016 and 2017) and on-campus fairs, demonstrations and seminars for National Public Health Week (100 attendees).

The program offers a graduate certificate in public health to provide more formal academic training for employees who may not have a public health degree and for current and post-baccalaureate students. Enrollment has been low: one participant in 2014-2015, one in 2015-2016 and two in 2016-2017. During the site visit, program leaders said that interest in the certificate is increasing and more inquiries have been received this academic year.

The commentary relates to the need for sustained efforts to ensure that the program develops and delivers workforce programming that aligns with identified needs.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The program has a clearly defined faculty complement that is multidisciplinary, educationally well prepared and competent in its instructional and research responsibilities. The
disciplines of primary faculty members include public health, epidemiology, applied statistics, environmental science, medicine, engineering, clinical psychology and interdisciplinary health science. All program faculty hold a doctoral degree, and four of the primary faculty hold an additional degree at the master’s level, one of which is an MPH. The primary faculty teach a majority of the required core and concentration courses and mentor graduate students as they complete the thesis/graduate project. They have diverse areas of research interests and engagement that include health disparities, border health, infectious diseases, environmental health, substance abuse and environmental health. Primary faculty have been trained at a variety of reputable institutions.

The secondary faculty complement consists of seven individuals who contribute 1.48 FTE to the program. The disciplines from which the secondary faculty have earned their degrees include public health, health promotion, nutrition and toxicology, education and interdisciplinary health science. The areas of instruction of the secondary faculty include health administration and infectious diseases. Many secondary faculty members also supervise students through the graduate thesis. As evidenced in their curriculum vitae, the faculty have the necessary qualifications to deliver the curriculum commensurate with the MPH in Hispanic and border health.

The program has several outcome measures related to faculty qualifications that align and contribute to the attainment of the program’s goals and mission statement. These measures include targets for primary faculty having a doctoral degree in a core public health or interdisciplinary discipline (75%), primary faculty having Hispanic and Border Health research focus (75%) and primary faculty publishing more than one full-length peer-reviewed journal article, book chapter or book per year (75%). The program has met or exceeded these targets in each of the last three years.

4.2 Faculty Policies and Procedures.

The program shall have well-defined policies and procedures to recruit, appoint and promote qualified faculty, to evaluate competence and performance of faculty, and to support the professional development and advancement of faculty.

This criterion is met. The program is governed by well-defined policies and procedures that are established by the university. These policies are published on the provost’s website and are accessible to faculty and administrators. The faculty handbook outlines rules and regulations pertaining to faculty and includes policies and procedures that address faculty recruitment, appointment, promotion and tenure. These policies are clearly delineated and are accessible to faculty. The Handbook of Operating Procedures and the New Faculty Guide, which are published on the provost’s website, are readily available to all faculty. Frequently asked questions are also published on the provost’s website.

Classification of faculty includes professor, associate professor, assistant professor and instructor. There are full-time, part-time and adjunct faculty positions. Full-time faculty positions are tenure-track or tenured.
The recruitment and hiring of MPH faculty members is collaboratively managed through the department faculty and the chair. A search committee composed of three faculty members from the department and one external faculty member from another College of Health Sciences unit, other university department or a local institution is assigned. In consultation with the UTEP Office of Equal Opportunity, the search committee is responsible for designing recruitment materials, developing telephone and in-person interview formats, contacting the applicant’s references, recommending finalists for campus interviews, conducting interviews and submitting final recommendations for hire. The search committee chair works with the Office of Equal Opportunity and the dean of the College of Health Sciences to ensure adherence to established policies. The department chair is charged with the responsibility for making recommendations to the dean related to initial appointment, reappointment, retention, dismissal, tenure, promotion and merit salary determinations. The chair is expected to receive and consider advice from faculty before acting on personnel matters.

The Office of the Dean provides new faculty with information at a new faculty orientation session. Topics addressed include procedures, timelines and expectations for the third-year review, tenure and promotion. Written documentation regarding tenure and promotion is provided during the third-year review as well as at the orientation that is held in the fall semester of the faculty member’s second-year and fifth-year probationary period.

Faculty competence is assessed through a formal process that includes an annual performance appraisal and merit review, which is aligned with policies endorsed by the Board of Regents. Faculty members reported that they routinely enter their professional activities in teaching, research and service, as well as professional accomplishments and activities, in a Digital Measures database. These database entries also serve as a resource for faculty evaluation for formal reviews during promotion, pre-tenure, tenure and post-tenure processes.

Courses and instructors from the program are evaluated regularly. There is a detailed online course and instructor evaluation with a rubric that is administered each time a course is offered, along with space to enter comments. Faculty acknowledged to site visitors that the level of response has not been adequate and that efforts are underway to encourage student participation. Faculty members and program administrators receive summaries of the student evaluations and apply them to student learning enhancement and program development. Course and instructor evaluations by students contribute to faculty members’ annual merit evaluations. In addition, each faculty member arranges for peer observation once per semester.
Many faculty development opportunities are available to support instructional, research and service needs. The UTEP Center for Faculty Leadership and Development provides educational programs for faculty to enhance their pedagogical skills and teaching effectiveness, as well as technological strategies to enhance student learning. This center provides confidential teaching consultation and instructional workshops. The Center for Faculty Leadership and Development also promotes leadership among faculty and provides the necessary support to those faculty who desire to serve in university leadership roles.

The UTEP Academic Technologies Department sponsors trainings for faculty in Blackboard and the use of a variety of instructional and administrative software. Faculty reported that they use these services with regularity. The Office of Research and Sponsored Programs provides a comprehensive array of research support services to faculty. During the site visit, faculty expressed satisfaction with these services.

Additionally, the university offers educational benefits through the Human Resource Services Office and through a partnership with the Office of Professional and Public Programs. Faculty can access enrichment training that includes registration in a limited number of courses with associated fee waivers. A wide variety of conferences and seminars are presented or hosted by the university, and MPH faculty members are invited and encouraged to attend. These opportunities include 1) a healthy exchange lecture series that showcases faculty expertise and research engagement; 2) academic partnerships for health sciences research that fosters interdisciplinary and community collaborations; 3) a centennial lectures series by prominent guest speakers; and 4) a conference on Economic Development and Growth through Education (EDGE).

4.3 Student Recruitment and Admissions.

The program shall have student recruitment and admissions policies and procedures designed to locate and select qualified individuals capable of taking advantage of the program’s various learning activities, which will enable each of them to develop competence for a career in public health.

This criterion is met. The admissions process is published online through the university’s website, and it is clearly defined and straightforward. The program has had stable admissions rates for the past three years, admitting 15 to 16 students per year. This admission level resulted in a headcount of 39 to 46 students in each of the last three academic years.

Students without key prerequisite coursework or without previous exposure to the health field are admitted conditionally. In 2017, 10 of 15 accepted students were admitted conditionally and needed to complete two or three required prerequisite courses in the fall term. The common prerequisite deficits are biostatistics and environmental health. The program sets thresholds for the GRE (50% combined score for all three segments of 280 or higher), GPA (3.0/4.0) and, when applicable, TOEFL.
The program participates in the Paul Coverdell Fellows Program (Peace Corps returning volunteers) and recruits at Fort Bliss, other universities in Texas, California and New Mexico, and at professional meetings.

The current rates of admission and high levels of retention meet the program’s stated goals for the student body size. The program indicates in the self-study that it is dedicated to continued growth of the student body and notes that increases to the faculty complement will be necessary as enrollment growth occurs.

The program has two outcome measures related to student admissions and enrollment, which include student GPA minimums above 3.0/4.0 (100%) and combined GRE scores greater than 280. The program has met or exceeded these targets in each of the last three years.

4.4 Advising and Career Counseling.

There shall be available a clearly explained and accessible academic advising system for students, as well as readily available career and placement advice.

This criterion is met with commentary. Students are provided with clearly explained and accessible academic and career advising. Students in the MPH program meet with the program director for advising. Advising sessions occur at a minimum of two times per year and address student progression in the program, including review of the plan of study. These sessions are also used to assist first-year students in matching with a research mentor. All students have a faculty research mentor who works with them on the thesis/graduate project. The faculty research mentor also serves as a source of professional and career advice. Faculty research mentors are matched by consent between faculty members and students. Students may change mentors, but this process must be approved by the current mentor.

The self-study indicates that students receive career counseling from the program director and from their faculty research mentors. The self-study also states that students receive notifications of professional opportunities (e.g., jobs, assistantships, internships, fellowships, and scholarships) through faculty instructors, and students and alumni receive notifications through the MPH listserv. The college, UTEP Graduate School, and the UTEP Alumni Office offer several career fairs per year. At the program level, current students have attended a career panel featuring recent MPH graduates. In addition, students have an opportunity to present their work and network regarding employment during the program’s practicum poster sessions. MPH students also have access to the Graduate School’s career resources and the university’s Career Center.

Despite the opportunities outlined in the self-study, responses collected from the second-year student survey indicated that students felt that the program did not provide career advice or communicate about
job opportunities well. Students reiterated on site that they perceived career advising to be more student driven than an intentional aspect of advising. The self-study indicates that the program has taken steps to address this feedback by creating an online source of information regarding public health jobs, careers, fellowships and scholarship opportunities for students.

The commentary relates to the dissatisfaction among some students regarding the program’s advising efforts. While meeting with the site visit team, students described the challenges that exist when advising responsibilities are divided among the program director, the faculty research mentor and the practicum coordinator. For example, students relayed that they would prefer that advising related to coursework, research opportunities and the thesis/graduate project be centralized to one advisor for the duration of the program.

The university has a clear set of procedures that govern student grievances. These procedures are outlined in the student handbook and include possible resolution at the informal level, formal level or appeals level. To date, two MPH student have filed a formal grievance; both were related to dismissal based on poor academic performance. One of these grievances was reversed based on appeal, and the other’s dismissal decision was upheld.

Students can report concerns and program quality improvement suggestions informally through their mentors, through other program faculty and directly to the program director and chair. Students told site visitors that the program director and chair have an open-door policy for sharing feedback and concerns and that they feel comfortable doing so. Students remarked specifically on the efforts of the program director to be responsive and attentive to student needs. Students shared that their feedback and concerns have been heard and responded to; for example, students have suggested modifications to the biostatistics course, and these changes have been implemented.
Thursday, February 15, 2018

8:30 am  Site Visit Team Request for Additional Documents
Carla Campbell, MD, MS, Associate Professor & MPH Program Director

8:45 am  Team Resource File Review/Executive Session of the Site Visit Team

9:45 am  Meet with Program and Department Administration
Maria Duarte-Gardea, PhD, RD, Professor & Chair, Dept. of Public Health Sciences
Carla Campbell, MD, MS, Associate Professor & MPH Program Director

10:45 am  Break

11:00 am  Meet with Faculty Related to Curriculum and Degree Programs
Ximena Burgos, PhD, Full-time Instructor
Carla Campbell, MD, MS, Associate Professor
Jeannie Concha, PhD, MPH, Assistant Professor
Delfina Dominguez, PhD, MS, Professor
Maria Duarte, PhD, RD, Professor & Chair
Gabriel Ibarra-Mejia, PhD, MD, Assistant Professor
Oralia Loza, PhD, MA, Associate Professor
Thenral Mangadu, PhD, MPH, MBBS, Assistant Professor
Christina Sobin, PhD, Professor
Leah Whigham, PhD, FTOS, Associate Professor
Cynthia Wittenburg, MS, Full-time Instructor

12:00 pm  Break

12:15 pm  Lunch with Students
Elizabeth Alvarado Navarro
Jaleen Avila
Tiffany Butler
Crystal Costa
Zuleika Curiel
Maribel Dominguez
Maria Fuentes
Pablo Magallanes
Samantha Meza
Renee Orrantia
Andrea Perez
Gilberto Perez
Rosa Ramirez
Alexis Ramos
Amit Raysoni
1:15 pm  Break

1:30 pm  **Meet with Faculty Related to Research, Service, Workforce Development, Faculty Issues**

Ximena Burgos, PhD, Full-time Instructor
Jeannie Concha, PhD, MPH, Assistant Professor
Delfina Dominguez, PhD, MS, Professor
Gabriel Ibarra-Mejia, PhD, MD, Assistant Professor
Oralia Loza, PhD, MA, Associate Professor
Thenral Mangadu, PhD, MPH, MBBS, Assistant Professor
Christina Sobin, PhD, Professor
Leah Whigham, PhD, FTOS, Associate Professor
Cynthia Wittenburg, MS, Full-time Instructor

2:30 pm  **Resource File Review and Executive Session**

4:00 pm  **Meet with Alumni, Community Representatives, Preceptors**

Elke Cummings, MPH, Executive Director, Paso del Norte Center of Hope, MPH Advisory Board Member
Angela Mora, MEd, City of El Paso Department of Public Health, MPH Advisory Board Member and practicum preceptor
Juan Aguilera, MD, MPH (2016 alumnus), Interdisciplinary Health Sciences (IHS) PhD student
Michelle Del Rio, MPH (2015 alumna), IHS PhD student
Daniela Marquez, MPH (2017 alumna)
Salvador Marquez, MPH, (2017 alumnus), IHS PhD student
Silvia Salinas Lopez, (2016 alumna), IHS PhD student, MPH Advisory Board Member
Erika Castillo, Students for Public Health President, MPH Advisory Board Member
Stephen Borron, MD, MS, Chief, Division of Toxicology, Texas Tech University Health Sciences Center, MPH Advisory Board Member and thesis advisor
Stephanie Karr, Executive Director, Center Against Sexual and Family Violence, MPH Advisory Board Member
Patrick Tarwater, PhD, University of Texas at Houston School of Public Health, MPH Advisory Board Member
Kenneth Waldrup, DVM, MS, PhD, Infectious Disease Control Unit, Texas Department of State Health Services, MPH Advisory Board Member and thesis advisor
Rosalba Ruiz, MD, MPH, Alliance of Border Collaboratives, MPH Advisory Board Member

5:00 pm  Adjourn
Friday February 16, 2018

8:10 am  Site Visit Team Walks to Administration Building, 500 West University Ave.

8:30 am  Meet with Institutional Academic Leadership/University Officials
Administration Building, President’s Conference Room, 5th Floor
Diana Natalicio, PhD, MA President of UTEP
Carol Parker, JD, MSI, Provost of UTEP
Shafik Dharamsi, PhD, Dean, College of Health Sciences

9:00 am  Break

9:30 am  Executive Session and Report Preparation

12:30 pm  Exit Briefing
Shafik Dharamsi, PhD, Dean, College of Health Sciences
Maria Duarte-Gardea, PhD, RD, Professor & Chair, Dept. of Public Health Sciences
Carla Campbell, MD, MS, Associate Professor & MPH Program Director
Jeannie Concha, PhD, MPH, Assistant Professor
Gabriel Ibarra-Mejia, MD, PhD, Assistant Professor
Oralia Loza, PhD, Associate Professor
Thenral Mangadu, MD, PhD, MPH, Assistant Professor
Christina Sobin, PhD, Professor

1:15 pm  Team Departs