UNIVERSITY OF CONNECTICUT Master of Public Health Program Policies and Procedures

August 2015

Program Vision Statement

Our program's vision is that the University of Connecticut (UConn) Graduate Program in Public Health is an integral contributor to the effort to make Connecticut residents among the healthiest, most productive and satisfied of Americans.

Program Mission Statement

In furtherance of our program's vision, the mission of the UConn Master of Public Health (MPH) program is to offer an exemplary academic environment that prepares interprofessional learners to achieve high standards of public health practice. Public health careers for the 21st century, along with many in the related health and human services, will require competence in interprofessional practice that coordinates skill sets and perspectives of various disciplines in pursuing effective, comprehensive, systems-level improvements to our environment and social structure. Interprofessional competencies refer to the capacity of individuals and teams to enact knowledge, skills, values and attitudes essential for working together across professions and stakeholder groups to improve outcomes.¹

Program Value Statement

In our approach to an interprofessional focus of our MPH program, we prioritize the following values:

- **Population centric** putting public concerns and needs above individuals or the profession.
- **Evidence based** utilizing best available information to inform decisions and actions in the practice of public health.
- **Social justice** believing that wellness is a public good and fundamental right of all individuals. As such, we challenge the basis of health inequity wherever it occurs.
- **Engagement** fostering reciprocal, equitable partnerships among stakeholders to distribute responsibilities for selection, implementation and assessment of public health activities.
- **Teamwork** functioning across disciplines and circumstance to achieve integrated, cohesive approaches to community concerns.
- Advocacy increasing awareness and support for a robust, comprehensive public health agenda.
- **Resolve** preparing life-long learners to address current and emerging public health challenges.
- **Integrity** promoting the highest standards of objectivity and accountability in work and interpersonal relations.
- **Respect** incorporating differing beliefs, cultures and practices into all program activities.

¹ Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel.* Washington, D.C.: Interprofessional Education Collaborative.

Program Goals

Our faculty, students and staff, through efforts in teaching, application, discovery and integration² of public health theory and practices, are committed to improving the well-being of individuals, here in Connecticut and beyond, through organized, comprehensive, effective and just action. Consistent with our program's mission and values, the UConn MPH program pursues the following seven goals:

MPH program goals	
Interprofessionalism - Scholarship of Integration We will sustain an environment wherein students, staff, faculty and community partners embrace collaboration across disciplines of public health, law, social work, pharmacy, medicine, dentistry, basic sciences and engineering, education, rehabilitation, business administration and allied health professions.	Goal #1 Recruit and prepare MPH students who will engage collaboratively with practitioners in the pursuit of system-level public health solutions to community health concerns.
Education - Scholarship of Teaching We will be innovative in the delivery of curriculum, the provision of experiential learning options and the evaluation of curricular practices.	Goal #2: Prepare, through exemplary didactic and experiential learning, competent public health practitioners who know and demonstrate interprofessional understanding of public health, medicine, dental medicine, nursing, pharmacy, law, social work and public administration. Goal #3: Be recognized nationally as the leading educational institution that prepares leaders in the
Service - Scholarship of Application We will be active proponents and policy developers to favorably affect the social determinants of health and	interprofessional practice of public health. Goal #4: Enable students, staff, faculty and community-based partners to contribute competent, collaborative effort toward assuring healthful, satisfying lives of
the delivery of public health services. Research - Scholarship of Discovery We will support activities that increase our understanding of the social, behavioral, physical and	Connecticut residents and beyond. Goal #5: Uncover determinants of health and well-being and disseminate that information in support of evidence-based health promotion/disease prevention practices for
biological bases of population health and health service delivery.	populations. Goal #6: Promote an environment where faculty and students collaborate on research addressing public health concerns and practices.
Leadership - Scholarship of Administration We will continually examine our efforts to prepare competent, successful and satisfied students, support the work of faculty, staff and community partners and have meaningful impact on the well-being and prosperity of our community	Goal #7: Effectively utilize University, program and community resources to sustain a high quality, high impact program in academic public health.

² The dimensions of scholarship are drawn from concepts developed by Ernest L. Boyer, *Scholarship Reconsidered: Priorities of the Professorate*, Carnegie Foundation for the Advancement of Teaching, October 1997.

Program Objectives

Consistent with our program's mission, values, and objectives, the UConn MPH program strives to meet the following 16 objectives:

MPH program objectiv	es			
Domain	Objectives			
Interprofessionalism	1. Provide options for public health students to pursue professional (dual) degrees that			
	integrate public health, clinical, and non-clinical disciplines.			
	2. Encourage and accommodate enrollment of students from across the University			
	and the community in our public health courses.			
Education	3. Offer a competency-based core curriculum.			
	4. Facilitate global learning and research by faculty and students.			
	5. Assure graduates are competent professional practitioners of public health.			
	6. Nurture diversity of experience and interest in faculty, students and program staff.			
	7. Maintain a faculty competent in the range of core public health disciplines.			
Service	8. Promote continuing education/life-long learning across public health specialties.			
	9. Emphasize opportunities for service learning throughout the curriculum.			
	10. Support career development among the public health workforce.			
Research	11. Prepare students to design, undertake and disseminate relevant public health research.			
	12. Promote ethical, compassionate and culturally appropriate public health research.			
	13. Emphasize research focused on causes and control of inequities in health.			
Administration	14. Maintain a rigorous and recurring schedule to evaluate program practices and			
	impact.			
	15. Recruit and retain a diversity student body and workforce.			
	16. Communicate effectively with stakeholders and community-at-large in advocacy			
	of our discipline and educational offerings.			

Program's Commitment to Fair and Ethical Dealings

UCHC is committed to ensuring non-discrimination, harassment-free and equal opportunity regarding education, employment and patient services. In accordance with applicable laws, UCHC has developed and implemented affirmative action programs with conviction and effort.

The MPH program adheres to all relevant UCHC policies on affirmative action, racism and acts of intolerance, equal employment and educational opportunity for persons with disabilities, HIV/AIDS non-discrimination, rules of conduct, family and medical leave, alcohol abuse and drug-free workplace policy, appropriate use of non-compensated individuals, confidentiality and prohibition on sexual harassment. All students are required to complete training in Health Insurance Portability and Accountability Act (HIPAA) and Institutional Review Board (IRB) procedures/policies. In addition to HIPPA and IRB training, program faculty and staff also are required to complete training in the University's Code of Ethics. All course outlines, as well as the program's website and student handbook, include explicit guidance on available protections to individuals pertaining to harassment, discrimination, safety or disabilities.

The University of Connecticut Compliance Program requires all individuals to report any known or suspected violations of laws, regulations, standards, policies and procedures that apply to the Health Center. The investigation of compliance inquiries is the responsibility of the UCHC Corporate Compliance Office. The Office may delegate investigations to appropriate units such as Human Resources, the Office of Diversity & Equity, or the Research Safety Office.

Depending upon your preference and comfort level, if you suspect a violation you can contact: the program administration, the Assistant Dean of the Graduate School, the Compliance Officer of the appropriate UCHC domain (there are five domains: Administration, Clinical, Research, Finance, and Education), or the REPORTLINE-this is a confidential telephone reporting system operated by a private firm under contract with the Health Center (1-888-685-2637). For more information and to review the policies listed, please see the contact information and websites below.

Office of Audit, Compliance, and Ethics 860-679-4180

compliance.officer@uchc.edu

Website: http://www.uchc.edu/compliance/index.html

Policies: Code of Conduct Confidentiality

Reporting Compliance Concerns

Office of Diversity and Equity:
Website: http://diversity.uchc.edu/

Policies: Affirmative Action

Racism and Acts of Intolerance

Equal Employment and Educational Opportunities for Persons with Disabilities

Prohibition on Sexual Harassment HIV/AIDS Non-Discrimination

Safety Issues

Website: http://www.ors.uchc.edu/overall.html Emergency within the Health Center: x 7777

Emergency off campus: 911 Non-emergency: 860-679-2121

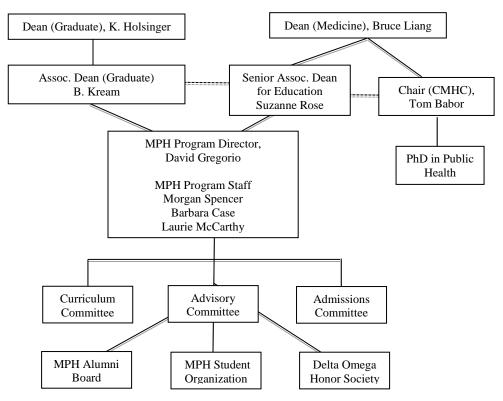
The police station is located on the ground floor of the Health Center. After 7 pm; if you are concerned for your safety; a police officer will take you to your car.

Roles and Responsibilities of Program's Major Units

Decision-making is the shared responsibility of the program administrators, faculty, students and community-based representatives of public health service agencies. Principle domains of decision-making are addressed by the program's standing committees.

The MPH program (and it's Director), based within the School of Medicine, has dual reporting responsibilities. As an academic entity, matters of curriculum, enrollment, matriculation of students, and the like, is within the purview of the University Dean of Graduate Studies. As an operational unit of the School of Medicine regarding material, physical and human resources, the program reports to the Dean of that School and his designee (e.g., Senior Associate Dean for Education).

MPH program administration



As indicated above, the Advisory Committee serves as the central governing body to the MPH Alumni Board, Public Health Student Organization, and UConn's Chapter of Delta Omega Honor Society, *Beta Rho*. A representative from each group serves on the program's Advisory Committee. Advisory Committee meetings serve as a place for representatives to present any suggestions, feedback, issues, or concerns of their respective groups.

The Director and Program Coordinator, with guidance from the program's Advisory Committee, and in conformance with relevant UConn policies and procedures, are responsible for routine activities pertaining to: curriculum; student recruitment and retention; financial, material and personnel resources; faculty appointment and review; administrative/office procedures; standards of academic performance; opportunities for applied practice learning; community outreach; program information and marketing. The Program Director, is expected to:

Provide leadership for the MPH program to improve quality and maintain CEPH accreditation.

- Develop and implement, with input from the MPH Advisory Committee, a vision and mission for the program.
- Establish and implement an effective management structure to ensure successful admission and retention of students, curriculum development, student evaluation and advising, class scheduling and overall program evaluation.
- Develop stable faculty commitments to teaching courses and advising students.
- Ensure that the curriculum develops competencies identified as appropriate for program graduates.
- Prepare an annual fiscal and programmatic report.
- Secure and manage fiscal, material and personnel resources to implement the program.
- Coordinate other activities in public health education through collaboration across University programs.
- Communicate with CEPH regarding available and needed resources for optimal program performance, significant changes in the MPH program, allocation of budgetary resources, relationships within the University that support or hinder the program and status of relationships with outside agencies.
- Secure collaborative relationships and partnerships within the University and with outside agencies and other parties to optimize their impact on the University and the University's impact on them.

The Program Coordinator is expected to:

- Oversee day-to-day operation of the MPH program office and its staff.
- Serve and support the Advisory, Admissions and Curriculum committees.
- Plan and develop course listings and direct the program's marketing and communications activities.
- Serve as liaison between the program, state agencies and relevant community organizations.
- Serve as an advisor for students in curriculum planning.
- Provide career development and service opportunities to students and alumni.

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Program administration's assigned responsibilities				
Role	Responsibilities			
UConn Graduate School (Dean Kent Holsinger;	Certify that students meet admissions & graduation standards			
Associate Dean, Barbara Kream)				
MPH Program Director (David Gregorio)	Academic standards/requirements, Budgeting and resource			
	allocation, Curriculum planning, Enrollment forecasting and			
	Faculty appointments & development			
Program Coordinator (Morgan Spencer)	Administrative/office procedures, Course scheduling,			
	Community outreach, Course/faculty evaluations, Student			
	recruitment, and Program information & Marketing			
Dual degree Coordinator (Jane Ungemack)	Advises joint degree applicants/candidates			
Program Assistant (Barbara Case)	Enrollment management, Blackboard® Learning Portal, and			
	Student & program handbooks			
Program Assistant (Laurene McCarthy)	Room scheduling, Administrative support and Data base			
	management			

Program Committee Charge and Composition

Program governance occurs through consensus/collaboration among standing and ad hoc committees. The Program Director oversees and is responsible for all matters of governance and administration relevant to day-to-day operations of the program. It is also the Director's responsibility for monitoring student issues

regarding admission, degree completion and recognition of distinction (e.g., meritorious awards for exemplary academic and service products) that fall outside other committee responsibilities. Decision-making within the MPH program benefits from a committee structure that assures input from important constituencies; students, staff, faculty and community partners. Each entity is represented on our 3 major committees: Advisory, Admissions and Curriculum. Our Advisory Committee, in turn, benefits from input from active organizations representing our students, alumni and the program's honor society.

Our Advisory Committee consists of 17 members and typically meets quarterly. Members include community-based practitioners, state government and local health agency personnel, program faculty, students, alumni and other interested stakeholders. Decision-making is by vote (all members of the committee are eligible), but frequently occurs by consensus. Students have equal status with other members of the Committee. The Advisory Committee monitors all phases of program activity.

The Program's Advisory Committee is responsible for recommending and reviewing general policy and practices related to program administration and performance for consistency with (a) CEPH accreditation criteria, (b) UConn Graduate School regulations, and (c) the program's mission, goals, objectives and values. Specific activities undertaken by the Advisory Committee include:

- strategic planning and advocacy
- mapping financial, equipment/facility and personnel assets at the disposal of the Program Director
- setting budgetary priorities for resource allocation
- providing direction regarding expectations for student and faculty recruitment
- monitoring practices for recruitment and retention of students, faculty, advisors and community preceptors (with particular attention to assuring diversity within such groups)
- guiding academic course and program development
- soliciting stakeholder feedback on program activities/performance
- assisting in resolving operational problems of program governance/administration
- disseminating program information to promote its agenda to the wider public health community

The Curriculum Committee consists of 12 members, meets every month and reports to the program's Advisory Committee. Five members are also on the Advisory Committee, with the remainder drawn from program faculty, alumni, and community-based practitioners. Students have equal status with other members of the Committee. The Curriculum Committee monitors all aspects of our program of study, from course to certificate to MPH degree requirements.

The Admissions Committee consists of 14 members meets weekly during the annual admissions cycle (January – April) and reports to the program's Advisory Committee. Four members of the Admissions Committee also serve on the Advisory Committee, with the remainder drawn from program faculty, alumni, and community-based practitioners. Students have equal status with other members of the Committee. The Admissions Committee evaluates the quality of applicants to our program in relation to criteria established by our Advisory Committee.

The Program's Alumni Board consists of 23 members and meets quarterly. The Alumni Board is organized to support the MPH program through their work with the UConn Foundation. The Board is responsible for developing and strengthening relationships and responsibilities of MPH graduates with one another and current program activities. The UConn program historically has depended on its alumni for student placements, course instruction, mentoring and advocacy on our behalf. Many members of the Alumni Board serve the program as instructors and preceptors, as well as participants on other program committees. As such, the Alumni Board has a strong and broad influence on program activities.

The Public Health Student Organization (PHSO), developed in 2006, consists of all matriculating MPH students, and is governed by an executive committee of 15 individuals. The PHSO meets weekly and reports to the Program's standing committees through various student representatives. It is responsible for developing and strengthening student interests and activities by promoting student involvement as an integral part of their public health education. The student organization distributes information, supports student interests and communicate suggestions, requests and concerns to the program administration and university leaders.

In December 2007, the PHSO worked diligently to enroll the program into Delta Omega, America's most prestigious public health honor society. *Beta Rho*, the UConn Chapter of Delta Omega, continues to expand and includes 68 members; 6 program faculty, 57 program alums, and 5 honorary members. Delta Omega works closely with both the program and the Connecticut Public Health Association (CPHA) to support the program. In late 2013, *Beta Rho*, partnered with CPHA to provide public health mentors, speakers, job shadowing, project advisors, internships and more for UConn public health students. Each year, the society selects two persons to serve as judges at the MPH Annual Poster session, and awards the recipient, the "*Delta Omega Beta Rho – MPH Poster Presentation of the Year*." This past year, *Beta Rho*, made the lead gift of \$2500 over five years to help seed the Program's newly developed Joan Segal Fellowship Fund.

Members of all committees pertinent to our program are presented below

MPH program com	mittee membership, 2014-15.					
•	MPH Advisory Committee					
Thomas Babor	Faculty	Department of Community Medicine				
Audrey Chapman	Faculty	Department of Community Medicine				
James Grady	Faculty	Department of Community Medicine				
Zita Lazzarini	Faculty	Department of Community Medicine				
Helen Swede	Faculty	Department of Community Medicine				
Scott Wetstone	Faculty	Department of Community Medicine				
Jane Ungemack	Faculty	Department of Community Medicine				
Thomas Buckley	Affiliated faculty	UConn School of Pharmacy				
Joan Segal	Adjunct faculty	Retired, UConn School of Medicine				
Paul Schur	Adjunct faculty	Retired, CT Department of Public Health				
Jennifer Kertanis	Community Partner	Director, Farmington Valley Health District				
Shane Lockwood	Alumni	Director, Southington-Plainville Health District				
Sean Cronin	Alumni	UConn Health Partial Hospitalization Program Manager				
Amna Sarwar	Student	Department of Community Medicine				
Daniel Davidson	Student	Department of Community Medicine				
Barbara Case	Program Staff	Department of Community Medicine				
Morgan Spencer	Program Staff	Department of Community Medicine				
	MPH Cur	riculum Committee				
Zita Lazzarini	Faculty	Department of Community Medicine				
Helen Swede	Faculty	Department of Community Medicine				
Jane Ungemack	Faculty	Department of Community Medicine				
Morgan Spencer	Program staff & alumni	Department of Community Medicine				
Joan Segal	Adjunct faculty & alumni	Retired, UConn School of Medicine				
Minakshi Tikoo	Adjunct Faculty	UConn School of Nursing				
Jessica Hoag	Student	Department of Community Medicine				
Mitchell Irving	Student	Department of Community Medicine				
Taryn Sidney	Student	Department of Community Medicine				
Sally Mancini	Community Partner	Non-Profit Org. Mngmt Consultant & Contractor				

Janet Tate	Alur	nni	Assistant Professor, Harvard School of Public Health			
R.Coleman		munity Partner	CT. Department of Public Health			
Mitchell						
	MPH Admissions Committee					
Barbara Case	Program Staff		Department of Community Medicine			
Morgan Spencer	J	ram Staff & Alumni	Department of Community Medicine			
Joe Burleson	Facu		Department of Community Medicine			
Richard Stevens	Facu	•	Department of Community Medicine			
Howard Tennen	Facu	•	Department of Community Medicine			
Helen Swede	Facu	•	Department of Community Medicine			
Jane Ungemack	Facu	•	Department of Community Medicine			
Paul Schur		net Faculty	Retired, CT Department of Public Health			
Joan Segal	_	net Faculty	Retired, UConn School of Medicine			
Laurene Powers	Alur		Independent Public Health Consultant			
Pamela Meliso	Alur		Attorney, Healthcare Management Systems			
Shane Lockwood		munity Partner & Alumni	Director of Health, Southington-Plainville			
Shahe Lockwood	Com		lumni Board			
Rosanne Berman	Stav	at Home Mom	Iumm Douru			
Elizabeth Conklin		ic Health Associate, CT De	pt of Public Health			
Matthew Cook			ool of Medicine and UConn			
Nancy Dupont		ic Health Nurse, UConn Sch				
Linda Estabrook		cutive Director, Hartford Ga				
Paul Gacek		emiologist, CT Dept of Pub				
Pamela Higgins	_	stant Professor, Springfield				
		membership, 2014-15.	College, WA			
MPH program com	muee	*	Board, Continued			
Pamela Kilbey-Fox	٨٨٠		,			
Shane Lockwood		anct Instructor, UConn MPH				
		ctor of Health, Southington-				
Tom Mahoney Bonnie McCree		Director, Special Clinical Services, Greenwich Department of Health Assistant Professor, Department of Community Medicine				
Amir Mohammad		ician, VA Connecticut Heal				
Jonathan Noel		Candidate, Department of C				
Martha Page		eutive Director, Hartford Fo				
Laurene Powers		pendent Public Health Cons				
Joan Segal		inct Faculty, Department of				
Karen Spargo		ctor of Health, Naugatuck V				
Morgan Spencer		ram Coordinator, Departme				
Cyndi Stern		cipal, Billian Stern Consulti	<u>C</u>			
Janice Vendetti		arch Associate, Department	•			
Meghan Wilson		ical Student, UConn School				
Samia Hussein	Presi	ident, Public Health Student	•			
g : II : 5 :	, , ,		ization (Executive Board)			
Samia Hussein, President		2 nd year student				
		2 nd year student				
Andrew Lyon, Treasurer 1st year student		·				
		1st year MPH Student				
		2 nd year student				
·		2 nd year student				
Daniel Davidson 2 nd year student MSW/MP			H student			
Stacey Edwards 2 nd year student						
Sara Leslie		1st year student				
Fiona Mohring		2 nd year student				
Caleb Cowles		3 rd year student				
Fawatih Mohamed 2 nd year student						

Sandy LoMonico	2 nd year MSW/MPH student			
Delta Omega Honor Society (Executive Committee)				
Matthew Cook	President University Director at UConn and UConn Health			
Katherine Kuzmeskas	Vice President	Director of Operations, Connecticut Innovation Ecosystem		
Martha Page	Secretary/Treasurer	Executive Director, Hartford Food Systems		

Program Resources: Operating Budget, Faculty and Resource Allocation

The program's annual operating budget is developed by the Program Director and reviewed by the Advisory Committee and the Chairperson of Community Medicine before submission to the School of Medicine's Assistant Dean of Finance. Operating expenses related to faculty time and effort in teaching, advising and program administration are recommended by the Program Director, but approved by the School of Medicine's Senior Associate Dean for Education (S. Rose), according to an agreed upon template (i.e., a semester-long course is credited 0.15FTE, lectures within courses receives prorated %FTE, thesis/capstone advisement is credited 0.5FTE, the chair of program committees is credited 0.10FTE), the Program Director is credited 0.40FTE). Final decisions on the availability of operating funds are the responsibility of the School of Medicine.

At the time of inception, tuition payments to the MPH program (minus graduate school fees) were returned to the program through a unique arrangement with the University governing the way the program addressed operating costs. Over time, however, the distinction between access to recovered tuition and reliance on the School of Medicine for resource allocation changed. Today, all recovered tuition is controlled by the School of Medicine which, consistent with its overall principles for budget allocation reviews the Program Director's revenue projections and proposed operating budget prior to determining the resource allocation for a given year.

Characteristics of primary MPH program faculty, Fall 2015								
Name	Academic rank	Fenure status	ELL	Degree	Discipline	Institution and Year	Teaching Area	Research Interests
Audrey Chapman	Professor	Non- tenure	.85	PhD	Government	Columbia, 1967	Law and Ethics	Human rights & health, reproductive technologies
Jennifer Cavallari	Assist Prof	Tenure track	1.0	ScD	Epidemiology	Harvard, 2007	Environmental Health	Environmental epidemiology
Amanda Durante	Assist Prof	Non- tenure	1.0	PhD	Epidemiology	Yale, 2001	Public Health Practice	Public Health workforce development
David Gregorio	Professor	Tenure	.80	PhD MS	Sociology Epidemiology	Buffalo 1980 Buffalo, 1983	Epidemiology	Cancer epidemiology Health disparities
Zita Lazzarin i	Assoc Prof	Tenure	.75	JD MPH	Law	UC Hastings, 1983 Harvard. 1991	Law and Ethics	Public health law, Human rights & health, HIV
Steven Schensul	Professor	Tenure	1.0	PhD	Anthropology	Minnesota, 1969	Soc/Behav Foundations	Community development, STI risk reduction
Richard Stevens	Professor	Tenure	.80	PhD	Epidemiology,	Washington, 1985	Epidemiology	Cancer epidemiology
Helen Swede*	Assist Prof	Tenure track ^a	.90	MS PhD	Epidemiology Occ. Health,	Buffalo, 1984 Buffalo, 2000	Epidemiology	Molecular epidemiology
Jane Ungemack	Assist Prof	Non- tenure	1.0	DrPh	Health Services	Columbia, 1991	Health Administration	Substance abuse treatment and prevention

The program depends upon resources made available throughout the University (e.g., library, auditoriums, classrooms, faculty office space, and computer facilities). Electives, generally limited to 15-20 students, are usually held in seminar or small classrooms, whereas most of the core courses (30-50 students) are scheduled in the larger classroom and auditoriums. All seminars, continuing education and workforce development events are held in the various auditoriums at UCH. For parking purposes, students appreciate courses held in the Department of Community Medicine but unfortunately doing so can be disruptive to individuals working within the Department. The program does not have direct control of any university space. Consequently, access to classrooms, conference rooms, laboratories or other venues depends upon their availability, as determined by the Departments/Centers that control the resources. Classroom re-assignments often occur as unanticipated needs of other programs trump our use of space.

The program is administered within space assigned it by the School of Medicine, including offices for the Director and Program Coordinator, and workstations for program staff. Within the Department of Community Medicine, there are 2 conference rooms available for meetings and seminars and a small kitchenette. Limited student study space is available in that suite. There is no designated space within the suite available for students to gather informally.

Facilities are adequate to deliver curriculum with access to appropriate information technology. The Faculty Instructional Technology Services (FITS) Unit is dedicated to supporting faculty in their use of technology for teaching and assessment. As a division of the IT Department's Health Informatics unit, our primary mission is to support faculty in maximizing the effectiveness of their instruction.

The UConn Health Center maintains a cafeteria, bookstore and several lounges accessible by MPH students. Parking remains a concern for students and adjunct faculty, as physical restrictions on available spaces and pay-for parking restrictions recently have been implemented.

The Health Center's Lyman Maynard Stowe Library maintains a Computer Education Center (CEC) that provides educational and technical support and resources to students and faculty. The CEC is used for several MPH courses, including Introduction to Epidemiology and Biostatistics I and II, Public Health Informatics, SAS Data and Programming, and Measuring the Built Environment for Health Research. The CEC has 3 PC classrooms equipped with overhead projectors and SMART Board® technology available for teaching as well as student use when classes are not in session. The library's automated online card catalog, LYMAN (Library Management and Access Network), provides off-site access to the books, journals, computer software and audiovisuals in the collection. The library, accessible through all networked computers on campus has available 255 electronic databases (including *PubMed* and *Community of Science*), over 10,000 electronic journals, including linkage to the full electronic resources of the main campus library in Storrs and is a National Library of Medicine repository.

Public Health and Dual Degree Options

The UConn MPH degree is focused on preparing students for interprofessional practice. Through didactic and experiential core requirements and electives, our students develop competencies relevant to the delivery of systems level services that promote health and prevent disease within populations. A significant aspect of this focus is attention to needs and interests of joint degree students engaged in the study of Medicine (MD/MPH), Dental Medicine (DMD/MPH), Nursing (MSN/MPH), Pharmacy (PharmD/MPH), Social Work (MSW/MPH), Law (JD/MPH) and anticipated for 2015, Public Administration (MPA/MPH). Interdisciplinary study typically is accomplished by our respective programs recognizing equivalency of coursework completed within our respective programs (i.e., public health credits waived for specified courses completed within the schools of medicine, dental medicine, nursing, law or social work).

Instructional matrix – public degrees and specializations				
	Academic	Professional		
Master of Public Health (MPH)- Interprofessional practice		X		
Joint Degrees				
Medicine – MD/MPH		X		
Dentistry – DMD/MPH		X		
Pharmacy – PharmD/MPH		X		
Social Work – MSW/MPH		X		
Law – JD/MPH		X		
Nursing – MSN/MPH		X		

Our mission to prepare students for interprofessional public health practice encourages students to pursue joint degrees. To date, joint degrees are established with Medicine (MD/MPH), Dental Medicine (DMD/MPH) Pharmacy (PharmD/MPH), Law (JD/MPH), Social Work (MSW/MPH) and Nursing (MSN/MPH). Preliminary discussions are underway to establish a 7th joint degree with Public Administration (MPA/MPH). Nearly one-quarter of our MPH students (26 of 105 enrolled students in 2014-15) are simultaneously matriculating toward another degree. Jane Ungemack, Assistant Professor of Community Medicine is the coordinator of all joint degree programs.

The MD/MPH and DMD/MPH degrees prepare medical and dental students to work effectively and creatively within the rapidly changing environment of health care. Medical and dental education at UConn addresses numerous topics of public health and social medicine throughout 4 years of study. MD/MPH and DMD/MPH candidates can request a 12-credit load reduction of public health-related coursework on the basis of their didactic and experiential study in medical or dental school. Professors Jane Ungemack, Assistant Professor of Community Medicine and David Henderson, Professor of family Medicine and Assistant Dean coordinator the MD/MPH program; Professors Jane Ungemack and Steven Lepowsky, Associate Professor, Craniofacial Sciences Senior Associate Dean coordinate the DMD/MPH program.

Each MD/MPH and DMD/MPH application for credit reduction is evaluated individually on the merits of medical/dental coursework completed. Credit waivers are offered for approved curriculum relevant to public/population health sciences; curriculum pertaining to clinical medicine or dental medicine does not justify a reduction of credit for the MPH degree.

<u>The PharmD/MPH</u> provides students with special skills in public health related to pharmacotherapy and health promotion, medication safety, drug development and distribution. Typically, PharmD students complete their P1 and P2 years in Pharmacy School, apply for admission to the MPH program in the spring of their P2 year and spend the following year as a full-time MPH candidate. Upon returning to the School of Pharmacy for their P3 and P4 years, students complete remaining MPH degree requirements including a 9 credit thesis. Professor Jane Ungemack and Thomas Buckley, Associate Clinical Professor of Pharmacy coordinate this program.

Each PharmD/MPH application for credit reduction is evaluated individually on the merits of PharmD coursework completed. Credit waivers are offered for approved curriculum relevant to public/population health sciences; curriculum pertaining to clinical e does not justify a reduction of credit for the MPH degree.

The JD/MPH is designed for students who wish to integrate study of the legal and health care systems. Students enrolled in the JD/MPH program must earn 74 credits toward the law degree and 36 credits toward the MPH degree. Law courses applicable to joint degree enable students to appreciate and apply legal, ethical and policy concepts to their public health knowledge. Candidates ordinarily will spend their first year at the School of Law, while students in their first year of the MPH program may reverse this procedure if they are admitted to the School of Law for the following year. After the first year of law school, JD/MPH students ordinarily spend the next year as full-time students of public health. During the third and fourth years, the students will divide their time between the law and public health programs depending on their preferences and the scheduling of desired courses. Professors Jane Ungemack and Susan Schmeiser, Professor of Law coordinate this program.

<u>MSW/MPH</u> The interdisciplinary program in social work/public affords students the opportunity to complete interdisciplinary preparation in the fields of both public health and social work. The curriculum of each MSW/MPH student is designed on an individual basis, depending on the student's area of interest. Students are expected to complete a minimum of 36 credits in public health and a minimum of

48 credits in social work. All requirements for the MSW/MPH may be completed in 3-4 years due to the elective/selective waivers, together with the evening and summer schedule of MPH courses. Because the social work program requires 2 semesters of field placements, the MPH group practicum is waived for MSW/MPH students. The second social work placement, however, must include content of relevance to public health. Brenda Kurz, PhD, MSW, MSPH, Associate Professor of Social Work assists Professor Jane Ungemack in coordination of these programs.

MSN/MPH UConn offers nursing students the opportunity of interdisciplinary nursing/public health study designed to prepare nurses to deal more effectively and creatively with the rapidly changing environment of medicine and health care. The nursing portion of the joint program requires a minimum of 27 credits; the public health program requires a minimum of 36 credits. Tom Van Hoof, MD, MA, EdD, Associate Professor of Nursing Instruction and Research, assists Professor Jane Ungemack in coordination of these programs.

Program Competencies

The following 13 competencies address core elements of public health practice expected of all program graduates. Competency on these topics is gained primarily through completion of required coursework, practical experiences and capstone activities.

MPH	MPH Program Core Competencies					
Upor	Upon completing requirements of the MPH degree, UConn graduates will be able to:					
1.	Use vital statistics and other key data sources to characterize the health status, social conditions and health					
	risk factors evident in communities, with particular attention given to health inequalities.					
2.	Illustrate the role public health plays in informing scientific, ethical, economic, social and political					
	discussions about health.					
3.	Apply basic methods and terminology to calculate and report disease rates and risks in populations.					
4.	Employ principles of research design, probability and measurement to draw appropriate inferences from					
	data.					
5.	Utilize appropriate information technologies to collect, analyze and disseminate data.					
6.	Assess the strengths and limitations of various research designs in collecting, analyzing and interpreting					
	information from public health studies.					
7.	Identify main components of the organization, financing and delivery of health care and public health					
	services in the U.S. and in other countries.					
8.	Promote evidence-based public health practices that affect the health of communities.					
9.	Identify genetic, behavioral and circumstantial factors affecting individual and group susceptibility to					
	adverse environmental hazards.					
10.	Describe mechanisms of toxicity that explain direct and indirect effects of environments on human health.					
11.	Contrast basic social and behavioral science theories about the causes and control of public health concerns.					
12.	Examine root causes of injustice, inefficiency and ineffectiveness of U.S. health care.					
13.	Design and implement public health interventions according to sound ethical and legal standards.					

The following four competencies address elements of interprofessional public health practice expected of all program graduates. Competency on these topics is presumed to be gained through completion of required and elective/selective coursework, practical experiences and capstone activities.

MPH Program Concentration Competencies				
Upon completing requirements of the MPH degree, UConn graduates will be able to:				
14.	Use written and oral formats to deliver efficient and effective messages that assess risk, promote health			
	and manage disease in communities			
15.	Acknowledge one's role and those of other professions in addressing the needs of communities served.			
16.	Establish and lead teams to develop and advocate for effective policy and program change.			
17.	Respect and protect the rights and differences of persons and the communities in which they live.			

MPH Curriculum Requirements

The curriculum requires completion of 16 courses/48 credits, distributed among the core (8 courses) addressing epidemiology, biostatistics, social sciences, health systems administration and policy, environmental health, public health law and research methods; plus a practicum; 5-7 electives (1 course for each domain of assessment, assurance and policy development and 2 to 4 courses specific to a student's interests); and a capstone activity involving either a 9-credit thesis or a 3-credit applied practice project or policy analysis. Typical plans of study for part-time and full-time UConn MPH students are outlined below. **Please note: Students must register for courses or for continuous registration each fall and spring semester until they graduate to maintain active status in the program.**

Typical Curriculum for MPH students.

Year	Fall		Spring						
For students pursuing part-time study – 48 credits over 4 years									
1	Health Administrat	ion	Social Foundations of Public Health						
	Epidemiology/Bios	tatistics I	Epidemiology/Biostatistics II						
2	Law and Public He	alth	Environmental Health						
	Research Methods		Practicum in Public	Health					
3	Electives (6 credits))	Electives (6 credits))					
4	Applied Practice or	Thesis option	Applied Practice or	Thesis option					
	Electives (6 cr.)	Elective (3 cr.)	Elective (3 cr.)	Thesis (6 cr.)					
		Thesis (3 cr.)	Project (3 cr.)						
For students pu	For students pursing full-time study – 48 credits over 2 years								
1	Health Systems Ad	ministration	Social Foundations of Public Health						
	Epidemiology/Bios	tatistics I	Epidemiology/Bios	tatistics II					
	Law and Public He	alth	Environmental Health						
	Elective (3 credits)		Elective (3 credits)						
2	Research Methods		Practicum in Public	Health					
	Applied Practice or	Thesis option	Applied Practice or	Thesis option					
	Electives (9 cr.)	Electives (6 cr.)	Electives (6 cr.)	Elective (3 cr.)					
		Thesis (3 cr.)	Project (3 cr.)	Thesis (6 cr.)					

The UConn MPH Program is focused on preparing individuals for careers as practitioners of public health through employment in government, non-government agencies, academic and advocacy organizations. As a generalist program with a concentration in applied public health practice, we seek a balance between conveying *what is known* about conditions by which people are healthy or at-risk of injury/illness and *what is done* to assure that necessary conditions for good health are met. In doing so, we place high priority on collaborative problem-solving through participatory student-faculty-preceptor experiences.

Our curriculum, as outlined above, is distributed according to core courses (21 credits), practicum (3 cr.), elective courses (15-21 cr.) and the capstone project (3-9 cr.). Beginning with the 2007-08 academic year, our elective course offerings will be organized around the 3 core functions of public health. Initially, students will be expected, at a minimum, to select 1 course from within each domain listed in the following table with options for remaining electives to reflect the special interests they may have.

Elective Distribution for MPH Students Concentrating in Applied Public Health Practice

Assessment	Assurance	Policy Development
5430-Pub Health Informatics	5410-Strategic Planning & Eval	5451-MCH Services
5434-Intermediate Biostatistics	5412-Health Regulation	5461-Health Care Law & Ethics
5438-Invest. of Disease Outbreaks	5414- Health Economics	5463-Comparative Health Systems
5452-Injury & Viol Prevention	5416-Quality Improvement	5465-Occ/Enviro Health Policy
5468-Occ/Enviro Epidemiology	5419-Pub Health Agencies	5467-Occ/Enviro Diseases
5472-Disability & Pub Health	5433-Health Program Evaluation	5473-Women, PH & Reproduction
5486-Infectious Disease Epi	5453-Chronic Disease Control	5497-Food, Health & Policy
5497-Toxicology	5455-Health Education	5497-Human Rights & Health
5497- Latino Health Disparities	5466-Industrial Hygiene	5497-Disability Law
5497-Applied Regression Analysis	5497-Ergonomics/Exposure Asses.	5497-Policy& Legislative Development
5497-Epi Research Appraisal	5497- Health Communication	
5497-Public Hlth Issues in Genetics	S	
5497- Nutritional Epidemiology		
5497-Intermediate Epidemiology		
5497-Health and the Built Env't		

A student's curriculum checklist developed at the time core courses are completed, with input from a major and 2 associate advisors and approval by the program director and the Graduate School. Until they have fulfilled their coursework requirements, students are expected to register for a minimum of 6 credits per semester and complete core requirements before enrolling in elective courses.

Students can graduate with less than the required 48 credits through transfer credits or advanced standing. Individuals who have completed courses outside the MPH program (e.g., UConn courses completed as non-degree students or courses completed at another institution) may request transfer of up to 6 credits to our program with evidence of appropriateness of content, equivalence of requirements, and minimum grades of B. Transfer credits are included in the student's curriculum checklist and counted toward the MPH degree.

Students seeking advanced standing must furnish a rationale for the request and evidence (i.e., course outline, catalog descriptions, etc.) that prior coursework was equivalent to that within a traditional public health curriculum regarding content (addressing 1 or more public health competencies) and scope of effort (approximately 50 hours of effort per credit). Each request for advanced standing is considered individually; the request must be approved by the student's major advisor and the program director and be accompanied by appropriate documentation. Individuals who have completed relevant post-baccalaureate study in medicine, dentistry, nursing, social work, business or the social sciences may receive "advanced standing," which lowers their required credit load (by 12 credits maximum).

A student may request a waiver of a specific required course (e.g., if competency in biostatistics and/or epidemiology is acknowledged). A course wavier does not reflect a reduction in total credits and requires the student to substitute a more advanced course for the course being waived (e.g., Intermediate Statistics or Applied Regression Analysis *and* Investigation of Disease Outbreaks or Epidemiological Research Appraisal as substitutes for Introduction to Epidemiology and Biostatistics I and II).

Requests for transfer credit, advanced standing or course waiver are only considered prior to students' completing their curriculum checklist. Advanced standing is not granted for prior work or volunteer experience. In no instance can advanced standing or transfer credits be

substituted for the practicum or capstone project, nor can the practicum or capstone project be waived.

Experiential Learning: The Practicum Project

The UConn MPH program has emphasized the development of practical skills by students throughout its history and our students benefit from both required and elective field experiences. Every student completes a semester-long service-learning (practicum) project under the guidance of a community-based public health practitioner. These projects have afforded students experience in application of theory to problem solving on behalf of the State's citizenry and have fostered strong interprofessional partnerships that enhance workforce development, continuing education and program advocacy. In addition, students have opportunities to complete experiential placements in a number of government and nongovernment settings.

We will focus attention here primarily on the content and outcomes of our required practicum but note that we see the completion of PUBH 5407 - Practicum in Public Health along with our required PUBH 5431 - Public Health Research Methods, the elective PUBH 5498 - Field Experiences in Public Health Systems, and the required capstone project as the core for developing practical skill competencies (gathering, evaluating and disseminating information) in our students.

The learning objectives and expected competencies related to our required practicum can be seen in our course syllabus. Leadership of our practicum course has undergone several changes in recent years. Course director during the 2012-13 year was Dr.Stanton Wolfe, since retired; course director for 2013-14 and 2014-15 was Professor Joan Segal, since retired; course director for 2015-16 will be Dr. Amanda Durante, recently recruited member of the Community Medicine faculty.

Selection of sites Over the past five years or so, the program has developed a cadre of regular sites for the group practicum, although often the specific project changes from year to year. Prior to finalizing the practicum site and project, preceptors submit written descriptions of the projects and their vitae to the practicum coordinator for review, and practicum projects are presented at a Curriculum Committee meeting. Prior to approval by that committee, the practicum coordinator meets with each potential group practicum preceptor on site (for new sites) or at minimum over the telephone (for continuing participants). While we have consistently worked with the Hartford Health Department, a second local health department site is often chosen based on convenience of location to students in a particular class as well as suitability of the proposed project. While most practicum sites are in the Greater Hartford area, Connecticut is a relatively small state and sites or projects can extend almost anywhere within its borders. Other organizations that served as practicum sites for at minimum of two years the Community Health Association of Connecticut, the Connecticut Department of Public Health, the March of Dimes Connecticut Chapter, and the Town of Manchester School Readiness Council.

The selection of practicum sites and preceptors for individual practicum projects (as well as for the field placement elective) is done in consultation between the practicum coordinator and the student, with input from the student's major advisor. Before a student can register for the independent practicum or field placement, he or she must meet with the practicum coordinator and submit the previously-mentioned Applied Public Health Practice Learning Experience: Independent Practicum or Field Experience in Public Health form.

Faculty Rules and Regulations

Policies governing recruitment, retention and promotion of University-based faculty rests with the Departments where individuals have primary academic appointments. Faculty affairs are governed by the statutes of the University and the by-laws of the School of Medicine. The program director, when requested, provides input to Department Heads about the level and quality of faculty participation as teachers, advisors and contributors to program administration. School of Medicine By-Laws providing guidelines on appointment and promotion of faculty members are found at http://medicine.uchc.edu/faculty/pdfs/bylaws.pdf. The program director has responsibility for recruitment, retention and promotion of community-based faculty.

Faculty Development

While the locus of faculty development is within academic departments, the program supports professional growth and development of individuals by providing opportunity for students to work as graduate assistants with faculty and through expenditures to cover some of their academically related expenses (e.g., textbook and software acquisition, AV equipment, professional dues and travel reimbursement).

Procedures for Evaluating Faculty Competence and Performance

Faculty performance is evaluated by department heads where individuals hold primary appointments. The MPH program director provides information, when requested, relative to an individual's involvement and success teaching, advising or supporting program activities.

Evaluation of competency and performance occur at the time a person is recruited to the University, annually through their probationary period, and (where appropriate) when considered for promotion and/or tenure. Recent by-laws changes call for periodic post-tenure review of academic performance. Concurrent with such evaluations, every member of the faculty participates in annual performance reviews that provide a basis for salary decisions. At the beginning of each academic year, individuals and their Department heads specify a distribution of time/effort across research, education, service and miscellaneous functions and set expectations (i.e., number of grant applications to be submitted, number of peer-reviewed papers to be published, hours of institutional and community service, etc.) for assessing performance. Determinations that individuals "fail to meet" expectations trigger ongoing review and advisement; determinations that individuals "meet" or "exceed" expectations are the basis for merit salary awards.

Processes Used for Student Course Evaluation and Evaluation of Teaching Effectiveness

All courses are monitored through end-of-semester course evaluations and student feedback. Anonymous questions, completed at the end of each semester allow students to assess the quality and scope of the curriculum, the value of class activities and the quality of program supports. Feedback is routinely provided to instructors and, as conditions warrant, concerns/issues are communicated directly to instructors by the program director. Summaries of semester evaluations are reviewed by the Program's Advisory Committee. The process has served the program well, both as a quality improvement device and as a way to acknowledge

performance excellence. Information from course evaluations is shared by the program with department heads in merit and other performance assessments of individual faculty.

Description of the Emphasis Given to Community Service Activities in the Promotion and Tenure Process

Promotion and tenure decisions at UConn are the responsibility of the School within which an individual holds a primary academic appointment. As requested, the program director will provide an assessment of the extent and quality of contributions an individual makes to teaching, advising and supporting program functions. Service, whether within the University or across the community is expected of all faculty. The manner by which it is to be measured and judged is described in the School of Medicine's Promotion and Tenure guidelines.

Student Recruitment

Our student recruitment efforts focus on individuals who aspire to work (practice) in public health. We offer a curriculum that emphasizes interprofessional action and we seek students who are capable and motivated for collaborative problem solving. In particular, we encourage applicants whose educational experiences and/or work responsibilities have enriched their thinking about systems-oriented solutions to health concerns of communities and the individuals residing therein. Such individuals may have had limited formal exposure to the public health sciences, particularly as they increasingly are drawn to our program directly from undergraduate studies, and thus they view, and we facilitate, graduate work as a blend of didactic and experiential learning. The preference of many such individuals is to acquire skills relevant to on-the-job problem-solving. Our program also welcomes joint degree students who have primary interests in medicine, dental medicine, pharmacy, nursing, social work and law.

Admissions Policies and Procedures

Admissions procedures, set by the UConn Graduate school, and outlined in the *Graduate Catalog* and online, include a standard Graduate School application, personal statement, letters of recommendation, transcripts and application fee. Our program also strongly encourages (but does not require) applicants to report scores from the General GRE exam or an equivalent (e.g., MCAT, DMAT, LSAT, GMAT).

Applications are received throughout the year, but without extenuating circumstances, are reviewed each spring for fall enrollment (applications must be in hand by February 1 to be considered; January 1 for international students). For applicants to be considered at another time of the year, they must be considered to be highly qualified with significant reason requiring out-of-cycle review. Admissions decisions generally are made by May of each year and classes are set by early summer.

Every application is rated by the Admissions Committee following detailed presentation of candidates by 2-3 committee members. Criteria guiding decisions are:

- a. Academic ability to complete program requirements
- b. Relevant work experience or background/potential contribution to program
- c. Appropriateness of MPH degree to career goals
- d. Commitment to health of the community

Candidates receive overall scores of 1 (unacceptable) to 5 (excellent). Scores of 4.5 or 5.0 and 2.5 or less by both reviewers are given an expedited review at the beginning of each

meeting: those with overall scores of 4.5 or 5.0 by both reviewers are recommended for admission and those with scores of 2.5 or below by both reviewers are refused admission, usually without further discussion. Extended deliberation is afforded applications scored between 2.6 and 4.4. Three possible decisions are made after the discussion of each candidate: "accept," "refuse" or "hold." Candidates who are ineligible for admission to the Graduate School on a provisional basis (cumulative GPAs below 2.6) are reviewed by the chair of admissions and the associate program director to determine whether there are extenuating circumstances that warrant encouragement or further deliberation.

The University of Connecticut *Graduate Catalog*, which is updated annually and available online at: http://gradcatalog.uconn.edu/ includes the academic calendar, grading information, and the academic offerings of the program. The program also has its own brochure as a supplement to the catalog. A website for recruitment is maintained: http://www.commed.uchc.edu/education/mph/prospective/admissions.html

The Graduate Catalog spells out specific advising processes and procedures that all UConn graduate programs follow. Once students are admitted to the program, they are assigned1 of 6 advisors, depending on their background and interest, to assist them through the first 2-4 semesters of study. These advisors are expected to clarify academic expectations, program organization and procedures, and degree requirements. Advisors assist in course selection and monitor student progress while helping to resolve academic, professional or personal problems that are brought to their attention.

As students progress through the curriculum, they must select an advisory committee consisting of a major advisor and 2 associate advisors. Associate advisors who are not members of the UConn faculty must be approved by the Graduate School prior to their participation. An advisory committee should reflect the students' interests, particularly with regard to their anticipated capstone project. A major advisor, together with the associate advisors, helps the student prepare a curriculum checklist for meeting the program's requirements, guides the development of the capstone project, conducts the oral examination and recommends conferral of the degree.

Each academic year begins with a half-day orientation for new students. The orientation introduces key program and graduate school administrators and staff. Students also receive an introduction to the library as well as an overview of the various navigation systems used by the program (e.g., Blackboard®, PeopleSoft®, and Microsoft Outlook®). Most importantly, program administrators outline major program academic expectations, rules and procedures, while the registrar and bursar describe important graduate school policies (e.g, the need to register every fall and spring semester to maintain active status). The students are also given a tour of the Health Center, including the library, and the opportunity to obtain an identification badge and parking sticker. Lastly, the students are given time to ask questions and socialize with the other students. The orientation concludes with a convocation for the new students.

Career and placement advice is provided by the students' advisors and program administrators. Services are sought infrequently, yet the program administrators regularly inform students (and alumni) of employment, internship, fellowship, and other career opportunities through the electronic newsletter, *Public Health Happenings*, and our bulletin board. The program often distributes information to specific students (and alumni) when opportunities match a particular student or alumnus interest and qualifications. Preadmission counseling also occurs through group information sessions and individual appointments with

potential candidates. Such sessions not only focus on program and admission requirements, but on career opportunities in public health.

Communicating Concerns to Program Officials

Program administration take student grievances/concerns very seriously and when necessary promptly report them to the appropriate individuals or organizations in the school for consideration and response.

Through our student handbook, orientation materials and individual course syllabi, students are made aware of the University and program's policies regarding fair and ethical practices. Students with concerns regarding curriculum, procedures and encounters/experiences within the program are advised how to register and monitor concerns.

For internal programmatic issues or concerns, the program maintains a student complaint file that is kept in the Program Coordinator's office by lock and key. During the 2004 through 2015 period, the program received a number of complaints covering a range of issues. Among those concerns that were raised were: (a) MPH Program graduates were not sufficiently acknowledged during commencement ceremonies (the official commencement is on the Storrs campus); (b) the Program should offer graduate courses on regional campuses at Avery Point and Stamford, CT; (c) the requirement to enroll in at least 2 courses per semester was onerous for working professionals; (d) the quality of a 1-credit course/workshop offered by a new adjunct instructor was poor; (e) treatment of an international applicant by the University's International Office was inappropriate; (f) an advisor's comments regarding a student's capstone paper were inappropriate and untimely; (g) university-wide administrative procedures that drop students from active status for failure to register for classes were burdensome; (h) cost and location of parking on campus; (i) teaching practices of the Health Administration instructor and (j) the failure to offer select courses when expected conflicted with a student's plan of study. All such concerns receive a response from the Program Director and/or higher University administrators. Each occasion provides an opportunity to review and, where appropriate, modify procedures to enhance student experiences. One formal complaint submitted to the ODE alleged discrimination by the Program Director regarding a student's performance in the program. Investigation of the complaint by the University determined it was without merit.