

Public Health Leadership Program

Student Handbook

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The University of North Carolina at Chapel Hill
Gillings School of Global Public Health

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Purpose of Handbook

Dear Entering Public Health Leadership Program (PHLP) Masters Student:

Welcome to the UNC-Chapel Hill Gillings School of Global Public Health and the Public Health Leadership Program! We look forward to working together with you to make your journey to a master's degree as productive and efficient as possible.

This Student Handbook is designed to serve as a guide for you as you navigate your way to a graduate degree in public health. In this handbook, we outline both opportunities and obligations of students in order to contribute to your successful education at the UNC-Chapel Hill Gillings School of Global Public Health. In the spirit of Continuous Quality Improvement (CQI), we welcome your feedback on this document.

PHLP has three distinct concentration areas: Health Care & Prevention, Leadership, and Occupational Health Nursing. Each student's situation is slightly different, depending on the concentration of study, whether studying on-campus residually or by distance learning, and prior educational experiences. Our goal is to facilitate your having the best growth and learning experience within the existing structure. Working with and through your advisor will help you reach that goal. This document is by no means exhaustive, so please ask your advisor or another PHLP faculty or staff member if you need more information or any clarifications.

Thank you for choosing our program at UNC. We look forward to getting to know you better and working with you to make your educational experience the best it can be!

Sincerely,

A handwritten signature in black ink that reads "Anna P. Schenck". The signature is written in a cursive, flowing style.

Anna P. Schenck, PhD
Professor of the Practice and Director
Public Health Leadership Program

Section I. Overview

Public Health Leadership Program

The Public Health Leadership Program (PHLP) is an academic unit dedicated to preparing leaders in public health practice and building linkages between professionals in academic and community based organizations. One major feature of the PHLP academic program is its interdisciplinary focus, building on the research, teaching and service functions of the seven departments within the Gillings School of Global Public Health (SPH). The public health principles and concepts to which students in this program are exposed are applicable in a wide variety of practice settings. These settings range from national, state and local governmental agencies to hospitals, integrated delivery systems and managed care organizations, environmental advocacy and policy groups, migrant and community health centers, rural health centers and the business and industrial community.

Master's of Public Health (MPH)

The PHLP MPH degree is designed for individuals with a professional identity who want to broaden their public health knowledge and skills. Students come from a variety of professional disciplines and have a range of experiences to share and learn from.

Students pursuing the degree select from one of three concentration options: Leadership, Health Care and Prevention (HC&P), or Occupational Health Nursing (OHN) - see the PHLP Organizational Chart at the end of this handbook. A traditional, residential learning format is available for students in all three concentrations. An internet-based, distance learning option is available to students in the Leadership or Occupational Health Nursing concentrations. For residential students, the curriculum is designed to allow flexible, customized programs of study to meet students' needs through the use of elective courses. The distance education format offers some flexibility, but less choice in number of electives available online.

To earn the MPH degree, students are required to meet SPH core course requirements, and to develop basic competency in **leadership** and the public health core function areas of **assessment, policy development, and assurance**. A field practicum designed to complement in-class work, a Master's Paper, and passing the written Comprehensive Examination complete the curriculum. Please see the individual Concentration sections for further requirements.

The MPH course of study requires a minimum of 42 credit hours, which can be completed in one calendar year by full-time HC&P residential students, one-and-a-half to 2 years by full-time residential Leadership MPH students, and in three years through a distance education strategy that involves taking two courses per term. The program must be completed within five years from the date of matriculation.

An on-campus MS degree is also offered for both public health nursing students and occupational health nursing students.

Student Responsibilities

Public Health Leadership Program (PHLP) Student Agreement/Charter

You will have the flexibility to choose from a range of courses. With these choices comes a set of student responsibilities that must be met to ensure the timely completion of all degree requirements. The requirements for receiving an MPH are outlined in this handbook. **Your first obligation is to read and understand this handbook.**

Your other specific requirements are to:

1. Meet with your advisor to develop a degree plan, early in your first semester or at orientation. Pay your cashiers bill so you do not have a hold on your account that will prevent or cancel your registration
2. Follow the degree plan.
3. Obtain your advisor's approval for any changes to your degree plan before you register for courses that are not in your degree plan. Make sure you know the opening dates for your registration in order to have the greatest chance of obtaining the classes you want.
4. Arrange periodic (at least once per semester) check-ins with your advisor to review progress and discuss options for electives, practicum opportunities and master's paper topics. These check-ins can be conducted via email, telephone, or in person. In addition to check-ins, your adviser should be informed as soon as possible of any problems, personal or otherwise that may interfere with program or course completion.
5. Register for courses at the appropriate time for each semester with approval from your advisor for any deviations from your degree plan, so that you:
 - a. Meet the school wide MPH core competencies – completion of the five core courses, or approved substitutes, in a timely manner;
 - b. Meet the PHLP competency requirements by enrolling in required courses and elective courses that are consistent with your degree plan, and consistent with your focus area (distance students only);
 - c. Comply with rules regarding drop and add of courses. These rules need to be carefully followed to avoid financial penalties. It is the student's responsibility to understand and adhere to those rules. Your adviser and student services manager will help with the filing of necessary forms, including obtaining permission from the graduate studies director or program director for all appropriate drop/add requests.

6. Sign up for and pass the PHLP MPH comprehensive examinations during the regularly scheduled examination period per your degree plan.
 - a. Please note that the comprehensive exams are based on the required and elective PHLP courses; so deviation from courses in your degree plan and those recommended in this handbook may jeopardize your ability to pass the comprehensive examinations.
 - b. Note for Leadership Concentration residential students: Completion of this program requires enrolling in all PHLP and school wide MPH required courses, some of which are only offered in a distance or hybrid format, e.g., PUBH 791. **No exceptions will be made to this requirement.**

7. Register for a practicum in your advisor's section (each adviser has a separate section number) and complete all required work efforts and associated forms in a timely manner, including the required online school wide practicum form (at the start and conclusion of your practicum). You are directly responsible for:
 - a. Choosing and negotiating a practicum agreement with an outside agency;
 - b. Securing your practicum preceptor;
 - c. Obtaining documented approval of your practicum from your adviser prior to initiating your practicum;
 - d. Submitting all required practicum documentation and forms in the format and manner as described in this handbook.

8. Register for your master's paper in your advisor's section (each adviser has a separate section number)

9. Discuss and develop with your advisor and second reader a mutually agreeable plan for the timing, scope, and review process of your master's paper.
 - a. Your responsibility also includes identifying an appropriate second (content expert) reader. See handbook for further details.
 - b. Please be advised that some faculty have part time appointments and are not available to read/approve masters papers during off-semester times.

10. Obtain prior approval from your adviser for any independent study or special studies course(s) that you propose to undertake, **before you register for them.**

11. Document the following independent studies or special studies course elements for your adviser's approval:
- a. Course Objectives
 - b. Process to accomplish course objectives
 - i. What
 1. Work product(s)
 2. Documentation of student efforts (e.g., email, Sakai, work log, other)
 - ii. Who
 1. Student
 2. Instructor
 3. Other(s)
 - iii. How (i.e., student contact hours)
 1. Independent effort with monthly meetings with instructor
 2. Weekly readings, written summaries and weekly meetings with instructor
 3. Other
 - iv. When
 1. Start date
 2. Interim deadlines
 3. Meetings with instructor
 4. Completion date
12. You are responsible for outlining and gaining your adviser's approval for understanding the course requirements (for example, number of hours required and expected deliverables) for registering for an independent study.

Students are encouraged to regularly frequent the school wide website at

<http://www.sph.unc.edu/students/>

Additional campus-wide graduate student policies and guidance are provided on the UNC Graduate School website at <http://gradschool.unc.edu/>

Time Expectations

Students enrolled in the distance-learning format who are taking two courses per term are expected to take three years to complete all requirements. The time required for the degree may be shortened when course credit (up to 8 credit hours upon review and approval by PHLP) is transferred from another university graduate program. An exception to the 8 credit transfer maximum is made for students who have completed courses in the SPH's certificate programs; with approval, those students may transfer up to 17 credit hours and may, therefore, be able to complete the additional course work for the MPH degree in two years. Part-time students will need more time to meet the same requirements. Regardless of format or full/part-time status, all **requirements for the MPH degree must be completed within five years of matriculation.**

If no course is taken during either Fall or Spring term, the student will no longer be considered active and will have to apply for readmission. Further registration is contingent on readmission, so the student must initiate the reapplication process well in advance of the registration period.

Credit Hours

The MPH in Public Health Leadership requires a minimum of 42 credit hours of passing course work. Additional credits may be required in certain circumstances, such as for OHN students who enter the program without experience in the field. The MS degree in Public Health Nursing (public health nursing and occupational health nursing students) is a minimum of 45 credit hours.

Final grades used are H (High Pass), P (Pass), L (Low Pass), and F (Fail). Students who receive a grade of Failing (F) in any course or nine or more credit hours of Low Pass (L) will become academically ineligible and must apply to the UNC Graduate School for consideration for reinstatement to continue in their degree program. Temporary grades of Absent from Final Examination (AB) and Incomplete (IN) will convert to an administrative grade of F if the time limit for a grade change expires. Students have until the last day of classes of the term one year later to replace their IN grade with a permanent grade and 30 days after exam to change an AB before they convert to grades of Failing.

Grade Appeals

The following summary details the steps involved in a grade appeal by a Public Health Leadership Program Graduate Student (degree seeking student).

1. Contact the instructor who assigned the grade for the course and voice your concern.

The University's Policy on Prohibited Harassment and Discrimination (www.unc.edu/campus/policies/harassanddiscrim.pdf) prohibits discrimination or harassment on the basis of an individual's race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression.

Appendix B of this Policy provides specific information for students who believe that they have been discriminated against or harassed on the basis of one or more of these protected classifications.

Students who want additional information regarding the University's process for investigating allegations of discrimination or harassment should contact the Equal Opportunity/ADA Office for assistance:

Equal Opportunity/ADA Office
 The University of North Carolina at Chapel Hill
 100 E. Franklin Street, Unit 110
 Campus Box 9160
 Chapel Hill, North Carolina 27599
 Telephone: (919) 966-3576
 Fax: (919) 962-2562
 Email: equalopportunity@unc.edu

Any administrator or supervisor, including a department chair, associate dean or other administrator, who receives a student's complaint about prohibited harassment or discrimination must notify the Equal Opportunity/ADA Office within five (5) calendar days of receiving the complaint. If a student raises a claim of prohibited harassment or discrimination during an academic appeal, an investigation of the student's claim must be performed under the direction of the Equal Opportunity/ADA Office. The school or department must await the results of the harassment or discrimination investigation before deciding the student's academic appeal.

2. If your concern is not resolved, appeal the instructor's documented decision (in writing) to:
 - Concentration Director of the PHLP in the concentration for which you are registered to receive your graduate degree, with a copy of the appeal sent to the instructor.

PHLP Concentration	Concentration Director
Health Care & Prevention	Dr. Russ Harris
Leadership	Dr. David Steffen
Occupational Health Nursing	Dr. Bonnie Rogers

3. If your concern is still not resolved, appeal the decision with the appropriate Chair/Director for the home unit of the course (in writing), with a copy of the appeal sent to the instructor. The home unit of the course could be PHLP or other Department within the School (e.g., core courses):

Department	Chair
Public Health Leadership Program	Dr. Anna Schenck
Biostatistics	Dr. Michael Kosorok
Environmental Sciences & Engineering	Dr. Mike Aitken
Epidemiology	Dr. Andy Olshan
Health Behavior & Health Education	Dr. Jo Ann Earp
Health Policy & Management	Dr. Peggy Leatt

Department	Chair
Maternal and Child Health	Dr. Herbert Peterson
Nutrition	Dr. June Stevens

4. If the outcome of this appeal is not satisfactory, you may appeal the chair's/director's decision (in writing), with a copy of the appeal sent to the instructor, with:
- the chair's/director's dean, in cases where the appeal was initially reviewed by the chair of the instructor's home unit, and the chair's school has a process for review at the dean's level.

UNC Gillings School of Public Health Dean	Dr. Barbara Rimer
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OR

- the Graduate School, in cases where the school is the instructor's home unit, or the school in which the chair's academic program is based does not have a process for review at the dean's level.
5. In cases where the student has appealed to the chair's dean, subsequent to appealing to the instructor's chair (4 above), and the outcome is not satisfactory to the student, the student may lodge an appeal of the dean's decision, in writing, with the Graduate School. A copy of the appeal should be sent to the instructor.
- In appealing an appeal decision (Steps 3 and 4, above), the burden of proof falls upon the student to show that
- an impermissible element existed in the review of the appeal, and
 - that element influenced the chair's/dean's determination of the outcome of the review to the detriment of the student.

6. Decisions of the Graduate School are final and cannot be appealed.

All appeals must be in writing and signed by the student. They must contain a summary of the evidence and arguments that supports your position in the appeal.

For more details, go the Graduate School Handbook, Graduate Grading section, Grade Appeals: <http://handbook.unc.edu/pdf/handbook.pdf>.

UNC Honor Code

The UNC Honor Code covers a large number of topics outlined at <http://honor.unc.edu/>, however the one most pertinent to PHLP is the area of Academic Dishonesty. Students will be asked to document in writing that they have upheld the UNC Honor Code in their academic work as described below.

Academic Dishonesty.

It shall be the responsibility of every student enrolled at the University of North Carolina to support the principles of academic integrity and to refrain from all forms of academic dishonesty, including but not limited to, the following:

1. **Plagiarism** in the form of deliberate or reckless representation of another's words, thoughts, or ideas as one's own without attribution in connection with submission of academic work, whether graded or otherwise.
2. **Falsification, fabrication, or misrepresentation of data**, other information, or citations in connection with an academic assignment, whether graded or otherwise.
3. **Unauthorized assistance or unauthorized collaboration** in connection with academic work, whether graded or otherwise.
4. **Cheating** on examinations or other academic assignments, whether graded or otherwise, including but not limited to the following:
 - a. Using unauthorized materials and methods (notes, books, electronic information, telephonic or other forms of electronic communication, or other sources or methods), or
 - b. Representing another's work as one's own.
5. **Violating procedures pertaining to the academic process**, including but not limited to the following:
 - a. Violating or subverting requirements governing administration of examinations or other academic assignments;
 - b. Compromising the security of examinations or academic assignments; or
 - c. Engaging in other actions that compromise the integrity of the grading or evaluation process.
6. **Deliberately furnishing false information** to members of the University community in connection with their efforts to prevent, investigate, or enforce University requirements regarding academic dishonesty.
7. **Forging, falsifying, or misusing University documents**, records, identification cards, computers, or other resources so as to violate requirements regarding academic dishonesty.
8. **Violating other University policies** that are designed to assure that academic work conforms to requirements relating to academic integrity.
9. **Assisting or aiding another** to engage in acts of academic dishonesty prohibited by Section II. B.

Transfer Credits

Transferring credits into PHLP is governed by the following regulations and procedures:

1. First, a few general rules governing transfer credits in the PHLP:
 - You cannot receive credit for a class that is not an equivalent to a regularly offered class at SPH.
 - You cannot receive credit for a class taken in a professional school such as Law, Medicine, or Dentistry.
 - You must have earned a grade of B or P or higher in any class you propose to submit for credit, and the course must be a graduate level course that was taken in the last 5 years.
 - Requests for course credit to fulfill elective hours requirements can be approved by the advisor and concentration director rather than a specific course instructor.
 - No more than 8 credits (i.e., 20% of 42 credit program) may be transferred into the UNC MPH unless one is transferring Core Concepts or Field Epi Certificate credits, in which case up to 40% (17 credits) may be submitted for consideration of transfer.
 - All transfer credits must be approved **by the end of the student's first semester.**
2. Requests to transfer in **UNC Certificate Program Course Credits.**

Students are eligible to request the transfer of more than the usual 20% of a degree program's required credit hours if these credits were earned in a relevant UNC Certificate Program.

 - Students enrolled in the Core Concepts in Public Health Certificate program may transfer any number of the credit hours earned in that program, up to all 15 credit hours, into the Leadership MPH degree program.
 - Students enrolled in the Field Epidemiology or Global Health Certificates may transfer any number of the credit hours earned in that program, up to all 12 credit hours, into the Leadership MPH degree program.
 - Students enrolled in the Leadership Certificate or MCH Certificate programs may transfer any number of the credit hours earned in that program, up to 11 credit hours, into the Leadership MPH degree program.

Note: Only students from these specific programs may transfer in more than 8 credit hours.

3. Requests for Graduate Courses from other Universities to **Substitute** for UNC SPH **Core Courses**

Leadership students applying for transfer credit from other universities for UNC SPH required core classes must follow this procedure:

 - Contact your advisor and inform him or her of your desire to petition for transfer credit for a specific SPH core class(es).
 - From the graduate level class for which you are petitioning to receive credit, submit to your advisor a copy of the class syllabus and a copy of the table of contents from the primary text used in the class. Additionally, an official transcript showing that you have earned credit with at least a grade of "B" or above for the class is required, but your advisor will normally secure this from your application file.
 - Your advisor will submit your request and the submitted documentation to the instructor of the class for which you are requesting transfer credit. If the instructor approves your request, the approval will then be forwarded to the SPH Associate Dean for Academic Affairs for final approval. If either the instructor or the Associate Dean for Academic

Affairs denies your petition for transfer credit, you will not receive transfer credit. Their decision is final. You will be notified of the final decision by the Leadership registrar.

4. Requests for Graduate Courses from other Universities to **Substitute** for UNC SPH **Non-Core Courses**

Leadership students applying for transfer credit for non-core SPH classes must follow this procedure:

- Contact your advisor and inform them of your desire to petition for transfer credit for a specific class(es).
- From the graduate level class (taken within the last 5 years) for which you are petitioning to receive credit, submit to your advisor a copy of the class syllabus. Additionally, an official transcript showing that you have earned credit with at least a grade of “P” or above for the class is required, but your advisor will normally secure this from your application file.

Note: Some instructors may require additional information from students, which may require an interview or additional documentation.

- Your advisor will submit your request and the submitted documentation to the instructor of the class for which you are requesting transfer credit. If the principal instructor approves your request, you will receive transfer credit. If the principal instructor denies your petition for transfer credit, you will not receive credit. The decision of the principal instructor is final. You will be notified of the final decision by the Leadership registrar.

5. Requests to Transfer Graduate Courses taken from **Another Department at UNC** into PHLP.

It is best to inquire into the transferability of a course before you register for it, as there is no guarantee it will be approved after the fact. PHLP students requesting to transfer coursework completed elsewhere within UNC must follow this procedure:

- Contact your advisor and inform them of your desire to petition for transfer credit for a specific class(es). Your advisor will make the first determination of the appropriateness of this course for transfer.
- From the graduate level class for which you are petitioning to receive credit, submit to your advisor a copy of the class syllabus. Additionally, an official transcript showing that you have earned credit with at least a grade of “P” or above for the class is required, but your advisor will normally secure this from your application file.

Note: Some instructors may require additional information from students, which may require an interview or additional documentation.

Your advisor will submit your request and the submitted documentation to the instructor of the PHLP class for which you are requesting transfer credit. If the principal instructor approves your request, you will receive transfer credit. If the principal instructor denies your petition for transfer credit, you will not receive credit. The decision of the principal instructor is final. You will be notified of the final decision by the PHLP registrar.

Waiver of Class Requirement

If a class requirement is waived rather than credit given for an alternative, equivalent course, then the student does not have to take the required course, however, he or she receives no course credit and therefore must fulfill the credit hours by taking a different course. For example, some students may have taken a graduate course in Biostatistics or Epidemiology and currently work in that field but cannot transfer in their course because they have already transferred in the maximum number of credits allowed. This most commonly happens to students who have completed a UNC certificate program. When a waiver of their required course is approved, students do not receive three hours of credit, but may take an elective course(s) to fulfill the credit hour requirement.

SPH Core Courses: All students are required to meet SPH requirements for core content. These requirements may be satisfied in a few ways, as shown below. Approved alternative courses are listed in the chart below.

CORE AREA	BASIC COURSE(S)	APPROVED ALTERNATIVE(S)		SUBSTITUTION
Biostatistics	BIOS 600	BIOS	Any 3 or 4 credit BIOS course above 540	Approval on file
		HPM	470 (HPM majors only)	
		PUBH	741 (majors only)	
		SOWO	510 <u>and</u> 911 (dual degree students only)	
Environmental health	ENVR 600	ENVR	430	Approval on file
Epidemiology	EPID 600	EPID	710 711	Approval on file
		PUBH	760	
Health administration	HPM 600	HPM	660 564 or 754 (HPM majors only)	Approval on file
		MHCH	701& 702	
		PUBH	600 (PUBH majors only)	
Social and behavioral science	HBHE 600	HBHE	700, 730 & 772 (HBHE only)	Approval on file
		MHCH	700 701, 702 & 723 (MCH students only) 859/860 (MCH DrPH students only) SOWO 500, 505, 510, 517, 530, 570 (dual degree students only) PHYT 824 (MCH DPT/MSPH students only)	
		NUTR	715	
		PUBH	750 (PUBH majors only)	

NOTE: Only the basic core courses are available in a distance format.

Courses and their descriptions available throughout UNC can be accessed via the Office of the University Registrar at: <http://registrar.unc.edu/Courses/ScheduleofClasses/index.htm#descrip>

Courses are also available through the Inter-institutional Agreement with Duke, NCSU, NCCU, and UNC-G. Check with Registrar for details.

Core courses and Elective courses, in conjunction with CEPH-required culminating experiences, assure that students gain necessary public health competency in their discipline and/or field.

All Concentrations feature a Field Practicum, Comprehensive Exam and Master's Paper. The Field Practicum is a CEPH requirement for every student and a culminating experience designed to apply learning as well as develop new competencies. The Master's Paper is an opportunity to study and discuss a Public Health topic in-depth. The Comprehensive Exam asks the student to bring accumulated knowledge to bear on contemporary public health issues. Requirements vary between Concentrations, so please refer to the section detailing the operations of your particular Concentration or check with your advisor.

Section II. Distance MPH in Leadership

PHLP Core Competencies:

In 1988 and again in 2003 the Institute of Medicine (IOM), using highly respected panels of public health experts, published two reports on the future of public health. In both they emphasized that the public health system was in “disarray” and in dire need of greater **leadership** to get back on track. In making this point, the 1988 report said, “Today, the need for leaders is too great to leave their emergence to chance,” and the 2003 report stated, “We must be led by those who have mastery of the skills to mobilize, coordinate, and direct broad collaborative actions within the complex public health system...”

The IOM also established the now well-accepted "core functions" of public health in these reports- **assessment, policy development, and assurance**. The public health community has since operationalized these core functions into 10 "essential public health services" (EPHS). In order to identify the workforce skills necessary to perform the essential public health services, the Council on Linkages Between Academia and Public Health (COL) has identified, through collaborative processes, eight domains of competencies for public health workers. COL finalized its first revision of its competencies in May 2008. In 2006, the Association of Schools of Public Health (ASPH) developed a similar yet different set of competencies for Masters degree graduates. The ASPH competencies have not been formally linked to the 10 essential public health services.

PHLP’s mission includes supporting the IOM efforts and improving public health and its leaders. In keeping with this mission, each MPH student is required to develop competency in **leadership** and in the three core functions of public health practice: **assessment, policy development, and assurance** of conditions in which people can be healthy. The PHLP final comprehensive written exam asks questions in these four categories of competence as well as global health.

The three core functions and leadership are based on a broad scope of knowledge and multiple skills. Students in PHLP should confer with their advisor to identify the specific knowledge and skill areas in which they would like to develop competence. It is highly recommended that each student develop an “electronic portfolio” with work they’ve accomplished that relates to each of the core competencies. The portfolio can be checked periodically by student and advisor to ensure all competency areas have received suitable attention.

The COL competencies in assessment, policy development, and assurance, categorized by the essential public health services that they help fulfill, should be reviewed at: http://www.phf.org/resourcestools/Pages/Core_Public_Health_Competencies.aspx and the ASPH competencies can be viewed at <http://www.asph.org/userfiles/version2.3.pdf>

The COL and ASPH competencies in leadership are listed on the following page.

Council on Linkages Public Health Leadership Competencies

1. Incorporates ethical standards of practice as the basis of all interactions with organizations, communities, and individuals
2. Integrates systems thinking into public health practice
3. Partners with stakeholders to determine key values and a shared vision as guiding principles for community action
4. Resolves internal and external problems that may affect the delivery of Essential Public Health Services
5. Advocates for individual, team and organizational learning opportunities within the organization
6. Promotes mentoring, peer advising, coaching or other personal development opportunities for the public health workforce, including him or herself
7. Ensures the measuring, reporting and continuous improvement of organizational performance
8. Ensures organizational practices are in concert with changes in the public health system, and the larger social, political, and economic environment
9. Ensures the management of organizational change

ASPH Public Health Leadership Competencies

1. Describe the attributes of leadership in public health.
2. Describe alternative strategies for collaboration and partnership among organizations, focused on public health goals.
3. Articulate an achievable mission, set of core values, and vision.
4. Engage in dialogue and learning from others to advance public health goals.
5. Demonstrate team building, negotiation, and conflict management skills.
6. Demonstrate transparency, integrity, and honesty in all actions,
7. Use collaborative methods for achieving organizational and community health goals.
8. Apply social justice and human rights principles when addressing community needs.
9. Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.

Careful consideration of these leadership and core function related competencies should guide student-advisor discussions and planning of coursework, practicum, master's paper, and comprehensive exam preparation.

Leadership Concentration:

The Leadership concentration is for experienced health professionals who want to pursue or further develop their careers in public health (e.g. policy advocacy organizations, community health centers, state and local government). Its major focus is on solving public health problems through application of the public health sciences at a population level. This course of study is intended to familiarize students with the many facets of public health practice and science, with special emphasis on the integration of the sciences with the administrative and leadership functions often assumed by health professionals in public health. The Leadership concentration is based on the three major functions of public health: assessment, policy development, and assurance of conditions in which people can be healthy. Students may choose from a variety of opportunities to explore these concepts and related practices from numerous perspectives. Courses are offered in both distance and residential formats, although not all courses are offered in both formats. In addition, emphasis is given to development of the communication and political skills that are essential to leadership of public health agencies.

For students in the Public Health Nursing focus area, selected course offerings are compatible with the accreditation requirement of the National League for Nursing Accrediting Commission (NLNAC). In addition to Public Health Nursing, there are focus areas in Field Epidemiology, Public Health Practice, and Global Health. These focus areas and their required courses are described later in the course requirement section.

Information about the University of North Carolina at Chapel Hill Graduate School degree requirements and important policies and procedures is published annually in *the Graduate School Handbook* and guidebooks which can be accessed at:

<http://gradschool.unc.edu/guidebooks.html>

The following guidelines for the MPH degree were developed to conform to School of Public Health and University requirements.

Requirements At-a-Glance

Credit hours	at least 42
Courses	5 SPH core courses (15 credits)
	Biostatistics 600
	Health Policy & Management 600
	Environmental Science 600
	Health Behavior & Health Education 600
	Epidemiology 600
	Required Leadership Courses:

PUBH 790 Leadership Workshop -2 credits (residential)
PUBH 791 Principles of PH Leadership- 3 credits

PUBH 680 Public Health Practice-3 credits

Courses in each of the PHLP core competencies: leadership, assessment, policy development, and assurance; each focus area provides these required courses

Elective credit (1) hour

Master's paper	3 credits
Field practicum	3 credits
Comprehensive Exam	0 credits (must be registered to take exam)

Required Courses in Leadership, Assessment, Policy Development, and Assurance

In addition to taking the mandatory SPH core courses, all PHLP MPH students are required to complete two required Leadership courses, PUBH 790 and 791, and at least one course each in assessment, policy development, and assurance. PUBH 790 is a residential course only offered in the week before classes start in January and in late April/early May; it is a pre-requisite to PUBH 791, which is offered in the fall. It is recommended that these two leadership classes be taken in close conjunction to one another.

Distance learning Leadership MPH students are also required to attend the on-campus three-day Leadership Symposium in August. The Leadership Symposium serves as a program launch and orientation during which the first required class, PUBH 680, Public Health Practice, is begun and work groups for the course are formed and have their first formal meetings.

Distance learning students will fulfill the requirement for assessment, policy development, and assurance coursework by taking the distance courses outlined for them by their advisor in their degree plan.

Elective Courses: Students will complete their degree course requirements by taking electives in the School of Public Health and the greater University in order to fulfill the 42-credit hour requirement. Electives may be used to expand the breadth of an individual course of study or to provide depth in a particular area. Students will develop an approved course of study with their advisor during their first semester in the program. It should be noted that some students will have fewer or even no elective credits available depending on their course and mode of study, particularly distance learning students.

COURSES WITH CONTENT THAT MEETS PHLP CORE COMPETENCIES

ASSESSMENT

PUBH	690	Social Media
	730	Quality Improvement Leadership (<i>F, S</i>)
	731	Public Health Marketing (<i>S</i>)
	745	Community Health Improvement and Role of Assessment (<i>S</i>)
	746	Public Health Program Planning and Evaluation (<i>F</i>)

POLICY DEVELOPMENT

PUBH	680	Public Health Practice (<i>F</i>)
	731	Public Health Marketing (<i>S</i>)
	735	Policy Development in Public Health Leadership (<i>S</i>)

ASSURANCE

PUBH	730	Quality Improvement Leadership (<i>F, S</i>)
	746	Public Health Program Planning and Evaluation (<i>F</i>)
	747	Project Management Principles and Practices (<i>S, Su</i>)
PHNU	744	Roles and Functions in Public Health Nursing (<i>Su</i>)alt.

(F, S, SU) notations denote course offerings for fall/spring/summer; alt. notation denotes alternate years

Please note that some courses have content in two core function areas, however a single course can only be used to fulfill one requirement, i.e., assessment, or policy development, or assurance. Other courses than those listed may be used to fulfill core requirements, upon approval of the concentration director.

Before selecting and registering for a course, students must receive permission from their advisor

Sample Courses of Study

Examples of courses of study in each of the distance learning focus areas are shown on the following pages. Students should always consult with their advisors before registering for any courses.

Courses of Study for Leadership Concentration Distance Learning Students

Distance learning students in the Leadership Concentration have the option of four “focus areas,” Public Health Practice, Public Health Nursing, Field Epidemiology and Global Health. Selection of a focus area then determines the courses and degree plan that distance learning students will follow. Consult your advisor to request any deviations from the degree plan.

Requirements At-A-Glance for Public Health Practice Focus (Distance Learning)

Credit hours.....at least 42

Courses.....SPH core courses (15 credits)
Courses in PHLP core competencies: leadership, assessment, policy development, and assurance (14 credits)

Master's paper..... 3 credits

Practicum..... 3 credits

Comprehensive Exam.....0 credits (must be registered to take exam)

Public Health Core Courses

3	BIOS 600 Biostatistics
3	HPM 600 Health Administration
3	ENVR 600 Environmental Health
3	HBHE 600 Social & Behavioral Sciences
3	EPID 600 Epidemiology
15	credits

PH Leadership Core Courses

3	PUBH 680 PH Practice
2	PUBH 790 Leadership Workshop
3	PUBH 791 Principles of PH Leadership
3	PUBH/PHNU 886 Practicum
3	PUBH/PHNU 992 Master’s Paper
14	credits

Public Health Practice Courses

and any 4 of the following PUBH courses:

12	PUBH 711, 714, 730, 731, 735, 745, 746, 747
12	for a total of 41 credits
+1	Independent study, directed readings, or other elective

Before selecting and registering for a course, students must receive permission from their advisor

Requirements At-A-Glance for Public Health Nursing Focus (Distance)

Credit hours.....at least 42

Courses.....SPH core courses (15 credits)
Courses in each of the PHLP core competencies:
leadership, assessment, policy development, and
assurance (14 credits)

Master's paper..... 3 credits

Practicum..... 3 credits

Comprehensive Exam.....0 credits (must be registered to take exam)

Public Health Core Courses

3	BIOS 600 Biostatistics
3	HPM 600 Health Administration
3	ENVR 600 Environmental Health
3	HBHE 600 Social & Behavioral Sciences
3	EPID 600 Epidemiology
15	credits

PH Leadership Core Courses

3	PUBH 680 PH Practice
2	PUBH 790 Leadership Workshop
3	PUBH 791 Principles of PH Leadership
3	PUBH/PHNU 886 Practicum
3	PUBH/PHNU 992 Master's Paper
14	credits

Public Health Nursing Courses

3	PHNU 744 Roles & Functions in PH Nursing
3	PUBH/PHNU 745 Community Health Improvement & Assessment
3	PUBH/PHNU 746 Program Planning and Evaluation

and one of the following:

3	PUBH 711, 714, Global Health courses
3	PUBH 731 Social Marketing
3	PUBH 747 Project Management
3	PUBH/PHNU 748 Policy Development
3	PUBH 785 Interdisciplinary Approaches to Occupational Health

12 *for a total of 41 credits*

+1 *Independent study, directed readings, or other elective*

Before selecting and registering for a course, students must receive permission from their advisor

Requirements At-A-Glance for Field Epidemiology Focus (Distance)

Credit hours.....at least 42

Courses.....SPH core courses (15 credits)
Courses in each of the PHLP core competencies:
leadership, assessment, policy development, and
assurance (14 credits)

Master's paper..... 3 credits

Practicum..... 3 credits

Comprehensive Exam.....0 credits (must be registered to take exam)

Public Health Core Courses

3	BIOS 600 Biostatistics
3	HPM 600 Health Administration
3	ENVR 600 Environmental Health
3	HBHE 600 Social & Behavioral Sciences
3	EPID 600 Epidemiology
15	credits

PH Leadership Core Courses

3	PUBH 680 PH Practice
2	PUBH 790 Leadership Workshop
3	PUBH 791 Principles of PH Leadership
3	PUBH/PHNU 886 Practicum
3	PUBH/PHNU 992 Master's Paper
14	credits

Epidemiology Courses

3	EPID 759 Methods in Field Epidemiology
3	EPID 758 Principles & Methods of Applied Infectious Disease Epid
+3	EPID 750 Fundamentals of PH Surveillance
9	credits

PUBH Courses

+3	PUBH 735 or other course
3	for a total of 41 credits
+1	Independent study, directed readings, or other elective

-
- *Number of credits in parentheses. Students must have a minimum of 42 credits to complete requirements for the degree. Before selecting and registering for a course, students must receive permission from their advisor*

Requirements At-A-Glance for Global Health Focus (Distance Learning)

Credit hours.....at least 42

Courses.....SPH core courses (15 credits)
Courses in each of the PHLP core competencies:
leadership, assessment, policy development, and
assurance (14 credits)

Master's paper..... 3 credits – Must have Global Health emphasis
Practicum..... 3 credits

Comprehensive Exam.....0 credits (must be registered to take exam)

Public Health Core Courses

3	BIOS 600 Biostatistics
3	HPM 600 Health Administration
3	ENVR 600 Environmental Health
3	HBHE 600 Social & Behavioral Sciences
3	EPID 600 Epidemiology
15	credits

PH Leadership Core Courses

3	PUBH 680 PH Practice
2	PUBH 790 Leadership Workshop
3	PUBH 791 Principles of PH Leadership
3	PUBH/PHNU 886 Practicum
3	PUBH/PHNU 992 Master's Paper
14	credits

Global Health Courses*

3	PUBH 711 Critical Issues in Global Health (<i>pre-req for 714</i>)
+3	PUBH 714 <u>Introduction to Monitoring and Evaluation</u>
6	credits

PUBH Courses

+6	<i>two other PUBH courses</i>
6	<i>for a total of 41 credits</i>
+1	<i>Independent study, directed readings, or other elective</i>

Number of credits in parentheses. Students must have a minimum of 42 credits to complete requirements for the degree.

Before selecting and registering for a course, students must receive permission from their advisor

** Students might also be able to take PUBH 712 and/or 713 as electives (after taking pre-req 711) if space is available; registration is allowed only with permission of instructor and Global Health Certificate Director.*

Practicum Experience

The MPH degree in the Public Health Leadership Program has a 3-credit public health field practicum requirement, PUBH 886 or PHNU 886. This field experience is intended to provide the student with an opportunity to integrate course work into settings not previously experienced. The course is flexible in focus, location and format. Placement decisions are tailored to student needs and interests, the availability of sites, and according to the following principles:

- ◆ The placement should reflect an interdisciplinary experience;
- ◆ There should be maximum flexibility in type of placement and timing;
- ◆ The master's paper and the practicum can be coordinated if appropriate; and
- ◆ Students may have very different time demands and schedules, and this should be recognized in coordinating requirements.

As a public health practicum, it should involve experience that includes a population/community focus and an emphasis on public health principles of primary prevention and the community as client. As a leadership practicum, it should include recommendations for leadership action (e.g. policies to be implemented) and leadership lessons learned. Practicum experiences may involve any of the following combinations of setting, population focus, and disciplinary involvement, although the first option, which has an interdisciplinary focus, most closely approximates the intentions of the interdisciplinary MPH:

- ◆ Interdisciplinary focus: a team working on a public health problem at the population level;
- ◆ Interdisciplinary setting: an individual working on a public health problem at the population level;
- ◆ Disciplinary setting: an individual in a disciplinary setting, but focusing on a public health problem.

The preferred format is a concentrated experience that meets the 3-credit, 140 hour requirement as it provides an opportunity for focused effort. However, individual circumstances and/or previous work experience may favor an experience one or more days a week over a longer time period. Only in exceptional situations can additional credits may be assigned for a longer practicum. These decisions are negotiated among the faculty advisor, the student, and the preceptor prior to registration for the practicum. Products and outcomes of the experience will vary according to each student's objectives. Students in the Field Epidemiology Focus Area and the Public Health Nursing Focus Area should ensure that they include consideration of the unique perspective of their focus area in completing this culminating experience requirement.

The minimum requirements for the practicum are outlined in the Practicum Responsibilities document included at the end of this section. Descriptions of forms to fill out, procedures to follow and other resources are available on the Practicum Blackboard site.

Practicum Approval

A practicum approval form is required with signatures by advisor and preceptor and must be submitted **prior to registration** for credit. The practicum is a requirement for all MPH students in the UNC Gillings School of Global Public health; there is no provision for waiver of the practicum.

Human Subjects Review

All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even “non-invasive” actions such as asking questions on a survey may require IRB review and approval. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://research.unc.edu/offices/human-research-ethics/index.htm>. UNC IRB training ***must*** be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <http://research.unc.edu/offices/human-research-ethics/researchers/training/index.htm>. No data should be collected until full IRB approval has been received.

	STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
Previous Semester	Inform advisor of intent to work on practicum in the following semester	Determine whether student will be working on Practicum, if registered or not		Determine whether student will be working on Practicum, if registered or not Send list of students to advisors	Assure that there is a clear process for precepting and completion of practica
	Review competency portfolio and UNC SPH Student Practicum form (http://www.sph.unc.edu/forms/practicum/) Decide what competencies need to be worked on; submit to advisor	Review portfolio and student choice of competencies, including cross-cutting competencies (APC) Approve choices of competencies			
	Read Practicum Description/ Expectations Sheet	Review Practicum Description/ Expectations Sheet with Student			
		Formally approve Practicum idea after email or direct conversation with Student Verify with email approval			
	Determine agency that has population and primary prevention focus that can help develop competencies desired	Approve agency choice			
	Review IRB guidelines (http://ohre.unc.edu) Unless very clear that no IRB review is needed, submit "Determination Whether Research or Similar Activities Require IRB Approval"	Sign determination form if needed			

STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
Explain Preceptor Contract form to Preceptor		Fill out Preceptor Contract and fax in-- (919) 966-0981	File Preceptor Contract	
Complete cover sheet and fax to Registrar			Registrar puts in Student File	
	Share Objectives, Competencies, Preceptor Contract with Concentration Director			Approve Practicum plan
Confirm Agency Objectives and Student Competencies for project	Confirm Agency Objectives and Student Competencies for project	Confirm Agency Objectives and Student Competencies for project		
	Call or email Preceptor thanking them and offering assistance			
Fill out Pre-Practicum Abstract Post to Bb and email it to Advisor				
Perform work at Agency site				
Keep records of work, hours, objective and competency fulfillment, artifacts- transfer them to Activity log				

STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
COMPLETE PRACTICUM	Check in at least 2 times with Student and 1 time with Preceptor during Practicum			
Fill out Practicum Evaluation and remind preceptor to fill out his/her Evaluation		Fill out Practicum evaluation and fax to Advisor	Registrar files Student and Preceptor Evaluations	
Submit Evidence folder/binder to Advisor in notebook or electronically				
	Review Practicum Evaluation Call or email Preceptor to say "Thanks"			
Post Post-Practicum Abstract to Blackboard				
Post summary PowerPoint to Blackboard	Review notebook, log, Preceptor evaluation, Blackboard summary posting, and give feedback and grade			
Complete UNC SPH Student Practicum form (http://www.sph.unc.edu/forms/practicum/)—submit and make hard copy for PHLP binder. Add competencies developed/enhanced per Student Practicum log to Portfolio				

Master's Paper

Content: Each student is required to complete a Master's Paper which demonstrates synthesis of knowledge and advances or contributes to the field of public health. Here are six ways to satisfy this requirement:

- ◆ A systematic review of literature and research related to a specific topic. This must be a critical review and summary for the purpose of making recommendations for development of a program, change in policy, establishment of standards, program evaluation, etc.
- ◆ A program plan which addresses a significant health problem in a community (community may be defined by geography, ethnicity, worksite, medical practice or insurance plan, etc.).
- ◆ A research design complete to the data collection phase, including construction of data collection instruments, plans to pilot test the instrument, and methods of analysis of data.
- ◆ A research paper involving data analysis to address a specific problem. These data may be acquired by the student's participation in a faculty investigator's research project, using pre-existing data sources, or by primary data collection.
- ◆ A program evaluation or other research project involving primary data collection and analysis.
- ◆ A policy analysis in which a current or pending health policy is analyzed from two or more perspectives.

A Master's Paper can be developed in conjunction with a field practicum. This approach is often the most efficient way to meet program requirements in a limited time frame.

PUBH 992: To receive course credit for a Master's Paper, students must enroll in PUBH 992 for 3 credits. The Master's Paper is a requirement by the Graduate School for graduation, and students must be registered for it during the term **WHEN THE PAPER WILL BE COMPLETED**. Students are expected to discuss proposals for the Master's Paper with advisors well in advance of commencing writing. Requirements are outlined in the Master's Paper Responsibilities document included at the end of this section.

Examples of previous papers of graduates are available for review from the Program Registrar. (Specific approval forms must be signed by the academic advisor.)

Readers/Approval: The Master's Paper proposal must be approved in advance by the student's advisor and the **final** paper must be approved by the advisor and a second reader. The student's academic advisor is usually the primary reader unless a formal shift in responsibilities is made. The advisor must be a faculty member in PHLP and will assign the grade for PUBH 992. The second reader may be another faculty member with relevant expertise or an outside expert. These two work very closely with the student throughout the entire process of developing and completing a Master's Paper.

Preparation of the Paper: To meet the requirements of the course, students work with their advisor as first reader and a second reader with content knowledge of the topic area to write the paper. This may stretch over a month or a semester. Students are expected to write at least three drafts. The final paper is expected to be considered for publication by the advisor and the student or, if a proposal, considered for submission for funding. These discussions should take place in planning the Master's Paper.

The Master's Paper should represent the independent effort of the individual student, however, its development should involve discussions of format and content with other students and faculty. Papers should use a consistent standard reference style, such as APA (American Psychological Association Publication Manual, Latest Edition, Washington, DC, 2001) or the Journal of American Medical Association (JAMA).

Master's Paper requirements differ from a thesis in the following ways:

- ◆ No formal proposal defense is required and the paper is not registered with the Graduate School or UNC.
- ◆ Only one electronic copy is required to be submitted to the Program Registrar.
- ◆ The paper should be double-spaced, with 1-inch margins on top, bottom, left and right.
- ◆ Space should be reserved on the right side of the title page for signatures of the "Advisor" who is the first reader, and the second or "Content Reader." Typed names of both the Advisor and the Reader should be included below their signature lines. (See sample on page 39.
- ◆ The abstract should not exceed two pages, although one page is preferred.

Students should talk with their advisors early in the academic year about any requirements that are specific to their field of concentration. Students in the Field Epidemiology, Global Health and Public Health Nursing Focus Areas should ensure that they include consideration of the unique perspective of their focus area in completing this culminating experience requirement.

Deadlines: The final, signed Master's Paper must be submitted to the Program Registrar before the end of the semester in which the student expects to complete the paper and graduate. The deadline for the Master's Paper is established each semester/term by the Graduate School. **General deadlines are:** April (May graduation), July (August graduation), and November (December graduation). **Students must also formally apply to graduate using an "Application to Graduate" form found on the Graduate School web site- check deadlines for this action.**

See the Program Registrar for exact dates for each semester.

Human Subjects Review: All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even "non-invasive" actions such as asking questions on a survey

may require IRB review and approval. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://ohre.unc.edu>. UNC IRB training *must* be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <http://research.unc.edu/offices/human-research-ethics/researchers/training/index.htm> No data should be collected until full IRB approval has been received.

NOTE: Failure to comply with IRB regulations may prevent or delay graduation.

STUDENT		ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Previous Semester	Inform advisor of intent to work on paper in the following semester	Determine if student will be working on Paper, whether registered or not		Help determine if student will be working on Paper, whether registered or not; Send list of those registered to each advisor	Assure that there is a clear process for the advisement and completion of Master's papers
	Read Paper Description/ Expectations Sheet	Confirm Paper Description/ Expectations Sheet has been read by Student and answer any question, e.g., about types of papers			
	Review competency portfolio Decide what competencies need to be worked on	Review portfolio and student choice of competencies, including cross-cutting competencies (APC) Approve choices of competencies by email			
	Review IRB guidelines (http://ohre.unc.edu) Unless very clear that no IRB review is needed, submit "Determination Whether Research or Similar Activities Require IRB Approval"	Sign "Determination Whether Research or Similar Activities Require IRB Approval" if determination process is indicated			
	Submit Paper idea/ topic/ tentative title to advisor by end of Week 1	Formally approve Paper idea after email or direct conversation with Student Verify with email approval			
Develop Paper timetable	Approves Paper timetable				
Select Second Reader—should be an expert in the field; Master's Degree preferred	Approve Second Reader choice, send letter to Second Reader expressing thanks and laying out expectations				

STUDENT	ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Submit Paper Research Plan and outline, or, completed section of paper, (e.g. literature review), to advisor and Second Reader by end of Week 2	Review and provide edits within 5 working days	Review and provide edits within 5 working days (cc: Advisor)		
Complete rough draft, including title page, by end of Week 5 and send electronically to Advisor and the Second Reader	Return edited first draft to student within 10 working days; where appropriate, discuss edits and paper with second reader	Return edited first draft to student within 10 working days (cc: Advisor)		
Submit corrected second draft to Advisor and the Second Reader by the end of Week 9	Return edited second draft to student within 10 working days	Return edited second draft to student within 10 working days (cc: Advisor)		
Submit the third and final draft by first day of Week 12 to Advisor and Second Reader	Quickly review for anything that must be changed for acceptability; communicate either acceptance or the things that need to be changed to the student within 5 working days	Quickly review for anything that must be changed for acceptability; communicate either acceptance or the things that need to be changed as soon as possible to the student		
Obtain the signature of the Second Reader on the cover sheet for the Master's paper and send hardcopy to advisor	Sign cover sheet signifying approval of paper; submit it along with final grade and copy of paper to the Registrar	Sign the Master's Paper cover sheet	Submit final copy of paper and cover sheet to Graduate School and other appropriate parties	
	Reflect on the potential for publication of the masters paper or some spinoff from it			Review all Master's Paper abstracts at the end of the term, identifying for further review any that are unique or unclear. Look for those that are potentially publishable

STUDENT	ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Review portfolio and add competencies gained through Master's Paper experience, and share with advisor	Review portfolio/competencies gained through the masters paper experience and comment/discuss with the student			
Evaluate masters paper experience, giving feedback to the program on what worked and what did not and how we could improve upon it-send feedback to concentration director				Review feedback on masters paper by the student and bring concerns as well as compliments back to advisors and faculty as a whole

Master's Paper Title Page

**Combining Population and Individual
Health Education Perspectives**

By

Jane Smith

A Master's Paper submitted to the faculty of
the University of North Carolina at Chapel Hill
in partial fulfillment of the requirements for
the degree of Master of Public Health in
the Public Health Leadership Program

Chapel Hill

2011

[Signature]

Advisor

[Printed name]

Date

[Signature]

Second Reader

[Printed name]

Date

Section III. Residential MPH in Leadership

MPH Residential Program Requirements

Introduction

Information about the University of North Carolina at Chapel Hill Graduate School degree requirements and important policies and procedures is published annually in *the Graduate School Handbook* and guidebooks which can be accessed at:

<http://gradschool.unc.edu/guidebooks.html>

The following guidelines for the MPH degree were developed to conform to School of Public Health and University requirements.

Requirements At-a-Glance

Credit hours	at least 42
Courses	5 SPH core courses (15 credits) or approved alternatives
	Required Leadership Courses:
	PUBH 790 Leadership Workshop -2 credits
	PUBH 791 Principles of PH Leadership- 3 credits
	*Courses in each of the PHLP core competencies:
	Assessment, Policy Development, and Assurance (6-9 credits)
	*Electives (at least 10 credits)
Master's paper	3 credits
Field practicum	3 credits
Comprehensive Exam	0 credits (must be registered to take exam)

Many of the PHLP core courses are only offered online, and are open to residential students.

Required Courses in Leadership, Assessment, Policy Development, and Assurance

In addition to taking the mandatory SPH core courses, all PHLP MPH students are required to complete two required Leadership courses, PUBH 790 and 791, and at least one course each in assessment, policy development, and assurance. PUBH 790 is a residential course only offered in the week before classes start in January and in late April/early May; it is a pre-requisite to PUBH 791, which is offered in the fall. It is recommended that these two leadership classes be taken in close conjunction to one another.

Students attempting to complete their degree in less than 15 months must make special, advance plans in order to fulfill the leadership course requirements. These residential students must arrange to take the pre-requisite PUBH 790 in their first summer session or in the January session; in special circumstances, students may make individual arrangements with the Concentration Director to cover the pre-requisite content of 790 through independent study.

Residential students may choose from the list of Public Health Leadership Program courses (including distance courses) listed on the following pages to fulfill their assessment, policy development, and assurance course requirements. There are a number of other School of Public Health courses that will also fulfill these requirements, most of which are only available residentially. Decisions about courses should be made in collaboration with faculty advisors. Other courses may also be approved by your advisor or the program director.

Elective Courses: Students will complete their degree course requirements by taking electives in the School of Public Health and the greater University in order to fulfill the 42-credit hour requirement. Electives may be used to expand the breadth of an individual course of study or to provide depth in a particular area. Students will develop an approved course of study with their advisor during their first semester in the program. It should be noted that some students will have fewer elective credits available depending on their course of study.

COURSES WITH CONTENT THAT MEETS PHLP CORE COMPETENCIES

ASSESSMENT

PUBH	730	Quality Improvement Leadership (<i>F, S, SU1</i>)*
	732	Cultural Competencies of Health Organizations (<i>Su1</i>)*
	745	Community Health Improvement and Role of Assessment (<i>S</i>)*

POLICY DEVELOPMENT

PUBH	731	Social Marketing (<i>S</i>)*
	735	Policy Development in Public Health Leadership (<i>S</i>)*
	746	Public Health Program Planning and Evaluation (<i>F</i>)*

ASSURANCE

PUBH	730	Quality Improvement Leadership (<i>F, S, Su1</i>)*
	732	Cultural Competencies of Health Organizations (<i>Su1</i>)*
	746	Public Health Program Planning and Evaluation (<i>F</i>)*
	747	Project Management Principles and Practices (<i>S, Su1</i>)*
	756	Health Inequality in the United States (<i>S</i>)
PHNU	744	Roles and Functions in Public Health Nursing (<i>Su1</i>)*

LEADERSHIP

PUBH	790	Leadership Assessment Workshop (<i>Su1-usually in early May</i>)
PUBH	791	Core Principles of Public Health Leadership (<i>F</i>)

(F, S, SU1) notations denote course offerings for fall/spring/first summer 2005/2006; alt. notation denotes alternate years

Please note that some courses have content in two core function areas, however a single course can only be used to fulfill one requirement, i.e., assessment, or policy development, or assurance. Other courses than those listed may be used to fulfill core requirements, upon approval of the concentration director.

* Course offered in Distance Learning format

Before selecting and registering for a course, students must receive permission from their advisor

Sample Residential Leadership Course of Study (42 credits)

Note: Many different course plans may fulfill your requirements- check with your advisor. Most residential students take primarily residential courses, but may take distance learning courses.

SPH Core Courses	BIOS 600 (3)	Principles of Statistical Inference
	ENVR 600 (3)	Survey of Environmental Problems
	EPID 600 (3)	Principles of Epidemiology
	HBHE 600 (3)	Social and Behavioral Sciences in Public Health
	HPM 600 (3)	Introduction to Health Policy and Administration
PHLP Core Content- these requirements can be met by taking these PUBH courses OR other similar courses in the School of Public Health		
<u>Assessment 3 hrs</u>	*PUBH 745 (3)	Community Health Improvement & the Role of Assessment
<u>Policy Development 3 hrs</u>	*PUBH 735 (3)	Policy Development in Public Health
<u>Assurance 3 hrs</u>	*PUBH 746 (3) *PUBH 730 (3) *PUBH 747 (3)	Program Planning and Evaluation Quality Improvement & Leadership Project Management Principles
<u>Leadership (Required)</u>	PUBH 790 (2) *PUBH 791 (3)	Leadership Assessment Seminar Core Principles of Leadership
Elective Courses/ Other Courses	<u>7 hours from the following PUBH or other SPH courses:</u>	
	*PUBH 731 (3)	Social Marketing
	*PHNU 744 (3)	Nursing Roles & Functions
	*PUBH 732 (3)	Cultural Competency of Health Org.
	*PUBH 690 (1)	Emerging Technologies
Master's Paper	PUBH 992 (3)	Master's Paper (culminating experience)
Field Practicum	PUBH 886 (3)	Field Practice in Public Health (culminating experience)
Total Credits	42	

NOTES: (1) Many of the PHLP core courses are only offered online (marked with a *), but are open to residential students; residential students may also substitute for online PHLP core courses and electives by choosing approved courses from other departments with permission of advisor

- Alternatives from the core content can also be taken as electives
- Residential students who want to finish in less than 15 months must arrange to take PUBH 790 in first summer session before taking PUBH 791 in the fall or make special arrangements with the Concentration Director to cover the pre-requisite content of 790 through independent study.

(2) All students are required to take comprehensive examinations as an additional culminating experience.

Practicum Experience

The MPH degree in the Public Health Leadership Program has a 3-credit public health field practicum requirement, PUBH 886 or PHNU 886. This field experience is intended to provide the student with an opportunity to integrate course work into settings not previously experienced. The course is flexible in focus, location and format. Placement decisions are tailored to student needs and interests, the availability of sites, and according to the following principles:

- ◆ The placement should reflect an interdisciplinary experience;
- ◆ There should be maximum flexibility in type of placement and timing;
- ◆ The master's paper and the practicum can be coordinated if appropriate; and
- ◆ Students may have very different time demands and schedules, and this should be recognized in coordinating requirements.

As a public health practicum, it should involve experience that includes a population/community focus and an emphasis on public health principles of primary prevention and the community as client. As a leadership practicum, it should include recommendations for leadership action (e.g. policies to be implemented) and leadership lessons learned. Practicum experiences may involve any of the following combinations of setting, population focus, and disciplinary involvement, although the first option, which has an interdisciplinary focus, most closely approximates the intentions of the interdisciplinary MPH:

- ◆ Interdisciplinary focus: a team working on a public health problem at the population level;
- ◆ Interdisciplinary setting: an individual working on a public health problem at the population level;
- ◆ Disciplinary setting: an individual in a disciplinary setting, but focusing on a public health problem.

The preferred format is a concentrated experience that meets the 3-credit, 140 hour requirement as it provides an opportunity for focused effort. However, individual circumstances and/or previous work experience may favor an experience one or more days a week over a longer time period. Only in exceptional situations can additional credits may be assigned for a longer practicum. These decisions are negotiated among the faculty advisor, the student, and the preceptor prior to registration for the practicum. Products and outcomes of the experience will vary according to each student's objectives. Students in the Field Epidemiology Focus Area and the Public Health Nursing Focus Area should ensure that they include consideration of the unique perspective of their focus area in completing this culminating experience requirement.

The minimum requirements for the practicum are outlined in the Practicum Responsibilities document included at the end of this section. Descriptions of forms to fill out, procedures to follow and other resources are available on the Practicum Blackboard site.

Practicum Approval

A practicum approval form is required with signatures by advisor and preceptor and must be submitted **prior to registration** for credit. The practicum is a requirement for all MPH students in the UNC Gillings School of Global Public health; there is no provision for waiver of the practicum.

Human Subjects Review

All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even “non-invasive” actions such as asking questions on a survey may require IRB review and approval. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://research.unc.edu/offices/human-research-ethics/index.htm>. UNC IRB training ***must*** be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <http://research.unc.edu/offices/human-research-ethics/researchers/training/index.htm>. No data should be collected until full IRB approval has been received.

STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
Previous Semester	Inform advisor of intent to work on practicum in the following semester	Determine whether student will be working on Practicum, if registered or not	Determine whether student will be working on Practicum, if registered or not Send list of students to advisors	Assure that there is a clear process for precepting and completion of practica
	Review competency portfolio and UNC SPH Student Practicum form (http://www.sph.unc.edu/forms/practicum/) Decide what competencies need to be worked on; submit to advisor	Review portfolio and student choice of competencies, including cross-cutting competencies (APC) Approve choices of competencies		
	Read Practicum Description/ Expectations Sheet	Review Practicum Description/ Expectations Sheet with Student		
	Formally approve Practicum idea after email or direct conversation with Student Verify with email approval			
Determine agency that has population and primary prevention focus that can help develop competencies desired	Approve agency choice			
Review IRB guidelines (http://ohre.unc.edu) Unless very clear that no IRB review is needed, submit "Determination Whether Research or Similar Activities Require IRB Approval"	Sign determination form if needed			

STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
Explain Preceptor Contract form to Preceptor		Fill out Preceptor Contract and fax in-- (919) 966-0981	File Preceptor Contract	
Complete cover sheet and fax to Registrar			Registrar puts in Student File	
	Share Objectives, Competencies, Preceptor Contract with Concentration Director			Approve Practicum plan
Confirm Agency Objectives and Student Competencies for project	Confirm Agency Objectives and Student Competencies for project	Confirm Agency Objectives and Student Competencies for project		
	Call or email Preceptor thanking them and offering assistance			
Fill out Pre-Practicum Abstract Post to Bb and email it to Advisor				
Perform work at Agency site				
Keep records of work, hours, objective and competency fulfillment, artifacts- transfer them to Activity log				

STUDENT	ADVISOR	PRECEPTOR	REGISTRAR	CONCENTRATION DIRECTOR
COMPLETE PRACTICUM	Check in at least 2 times with Student and 1 time with Preceptor during Practicum			
Fill out Practicum Evaluation and remind preceptor to fill out his/her Evaluation		Fill out Practicum evaluation and fax to Advisor	Registrar files Student and Preceptor Evaluations	
Submit Evidence folder/binder to Advisor in notebook or electronically				
	Review Practicum Evaluation Call or email Preceptor to say "Thanks"			
Post Post-Practicum Abstract to Blackboard				
Post summary PowerPoint to Blackboard	Review notebook, log, Preceptor evaluation, Blackboard summary posting, and give feedback and grade			
Complete UNC SPH Student Practicum form (http://www.sph.unc.edu/forms/practicum/)—submit and make hard copy for PHLP binder. Add competencies developed/enhanced per Student Practicum log to Portfolio				

Master's Paper

Content: Each student is required to complete a Master's Paper which demonstrates synthesis of knowledge and advances or contributes to the field of public health. Here are six ways to satisfy this requirement:

- ◆ A systematic review of literature and research related to a specific topic. This must be a critical review and summary for the purpose of making recommendations for development of a program, change in policy, establishment of standards, program evaluation, etc.
- ◆ A program plan which addresses a significant health problem in a community (community may be defined by geography, ethnicity, worksite, medical practice or insurance plan, etc.).
- ◆ A research design complete to the data collection phase, including construction of data collection instruments, plans to pilot test the instrument, and methods of analysis of data.
- ◆ A research paper involving data analysis to address a specific problem. These data may be acquired by the student's participation in a faculty investigator's research project, using pre-existing data sources, or by primary data collection.
- ◆ A program evaluation or other research project involving primary data collection and analysis.
- ◆ A policy analysis in which a current or pending health policy is analyzed from two or more perspectives.

A Master's Paper can be developed in conjunction with a field practicum. This approach is often the most efficient way to meet program requirements in a limited time frame.

PUBH 992: To receive course credit for a Master's Paper, students must enroll in PUBH 992 for 3 credits. The Master's Paper is a requirement by the Graduate School for graduation, and students must be registered for it during the term **WHEN THE PAPER WILL BE COMPLETED**. Students are expected to discuss proposals for the Master's Paper with advisors well in advance of commencing writing. Requirements are outlined in the Master's Paper Responsibilities document included at the end of this section.

Examples of previous papers of graduates are available for review from the Program Registrar. (Specific approval forms must be signed by the academic advisor.)

Readers/Approval: The Master's Paper proposal must be approved in advance by the student's advisor and the ***final*** paper must be approved by the advisor and a second reader. The student's academic advisor is usually the primary reader unless a formal shift in responsibilities is made. The advisor must be a faculty member in PHLP and will assign the grade for PUBH 992. The second reader may be another faculty member with relevant expertise or an outside expert. These two work very closely with the student throughout the entire process of developing and completing a Master's Paper.

Preparation of the Paper: To meet the requirements of the course, students work with their advisor as first reader and a second reader with content knowledge of the topic area to write the paper. This may stretch over a month or a semester. Students are expected to write at least three drafts. The final paper is expected to be considered for publication by the advisor and the student or, if a proposal, considered for submission for funding. These discussions should take place in planning the Master's Paper.

The Master's Paper should represent the independent effort of the individual student, however, its development should involve discussions of format and content with other students and faculty. Papers should use a consistent standard reference style, such as APA (American Psychological Association Publication Manual, Latest Edition, Washington, DC, 2001) or the Journal of American Medical Association (JAMA).

Master's Paper requirements differ from a thesis in the following ways:

- ◆ No formal proposal defense is required and the paper is not registered with the Graduate School or UNC.
- ◆ Only one electronic copy is required to be submitted to the Program Registrar.
- ◆ The paper should be double-spaced, with 1-inch margins on top, bottom, left and right.
- ◆ Space should be reserved on the right side of the title page for signatures of the "Advisor" who is the first reader, and the second or "Content Reader." Typed names of both the Advisor and the Reader should be included below their signature lines. (See sample on page 39.
- ◆ The abstract should not exceed two pages, although one page is preferred.

Students should talk with their advisors early in the academic year about any requirements that are specific to their field of concentration. Students in the Field Epidemiology, Global Health and Public Health Nursing Focus Areas should ensure that they include consideration of the unique perspective of their focus area in completing this culminating experience requirement.

Deadlines: The final, signed Master's Paper must be submitted to the Program Registrar before the end of the semester in which the student expects to complete the paper and graduate. The deadline for the Master's Paper is established each semester/term by the Graduate School. **General deadlines are:** April (May graduation), July (August graduation), and November (December graduation). **Students must also formally apply to graduate using an "Application to Graduate" form found on the Graduate School web site- check deadlines for this action.**

See the Program Registrar for exact dates for each semester.

Human Subjects Review: All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even "non-invasive" actions such as asking questions on a survey may require IRB review and approval. The purpose of this review is to determine whether

adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://ohre.unc.edu>. UNC IRB training *must* be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <http://research.unc.edu/offices/human-research-ethics/researchers/training/index.htm> No data should be collected until full IRB approval has been received.

NOTE: Failure to comply with IRB regulations may prevent or delay graduation.

STUDENT		ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Previous Semester	Inform advisor of intent to work on paper in the following semester	Determine if student will be working on Paper, whether registered or not		Help determine if student will be working on Paper, whether registered or not; Send list of those registered to each advisor	Assure that there is a clear process for the advisement and completion of Master's papers
	Read Paper Description/ Expectations Sheet	Confirm Paper Description/ Expectations Sheet has been read by Student and answer any question, e.g., about types of papers			
	Review competency portfolio Decide what competencies need to be worked on	Review portfolio and student choice of competencies, including cross-cutting competencies (APC) Approve choices of competencies by email			
	Review IRB guidelines (http://ohre.unc.edu) Unless very clear that no IRB review is needed, submit "Determination Whether Research or Similar Activities Require IRB Approval"	Sign "Determination Whether Research or Similar Activities Require IRB Approval" if determination process is indicated			
	Submit Paper idea/ topic/ tentative title to advisor by end of Week 1	Formally approve Paper idea after email or direct conversation with Student Verify with email approval			
Develop Paper timetable	Approves Paper timetable				
Select Second Reader—should be an expert in the field; Master's Degree preferred	Approve Second Reader choice, send letter to Second Reader expressing thanks and laying out expectations				

STUDENT	ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Submit Paper Research Plan and outline, or, completed section of paper, (e.g. literature review), to advisor and Second Reader by end of Week 2	Review and provide edits within 5 working days	Review and provide edits within 5 working days (cc: Advisor)		
Complete rough draft, including title page, by end of Week 5 and send electronically to Advisor and the Second Reader	Return edited first draft to student within 10 working days; where appropriate, discuss edits and paper with second reader	Return edited first draft to student within 10 working days (cc: Advisor)		
Submit corrected second draft to Advisor and the Second Reader by the end of Week 9	Return edited second draft to student within 10 working days	Return edited second draft to student within 10 working days (cc: Advisor)		
Submit the third and final draft by first day of Week 12 to Advisor and Second Reader	Quickly review for anything that must be changed for acceptability; communicate either acceptance or the things that need to be changed to the student within 5 working days	Quickly review for anything that must be changed for acceptability; communicate either acceptance or the things that need to be changed as soon as possible to the student		
Obtain the signature of the Second Reader on the cover sheet for the Master's paper and send hardcopy to advisor	Sign cover sheet signifying approval of paper; submit it along with final grade and copy of paper to the Registrar	Sign the Master's Paper cover sheet	Submit final copy of paper and cover sheet to Graduate School and other appropriate parties	
	Reflect on the potential for publication of the masters paper or some spinoff from it			Review all Master's Paper abstracts at the end of the term, identifying for further review any that are unique or unclear. Look for those that are potentially publishable

STUDENT	ADVISOR	SECOND READER	REGISTRAR	CONCENTRATION DIRECTOR
Review portfolio and add competencies gained through Master's Paper experience, and share with advisor	Review portfolio/competencies gained through the masters paper experience and comment/discuss with the student			
Evaluate masters paper experience, giving feedback to the program on what worked and what did not and how we could improve upon it-send feedback to concentration director				Review feedback on masters paper by the student and bring concerns as well as compliments back to advisors and faculty as a whole

Master's Paper Title Page

**Combining Population and Individual
Health Education Perspectives**

By

Jane Smith

A Master's Paper submitted to the faculty of
the University of North Carolina at Chapel Hill
in partial fulfillment of the requirements for
the degree of Master of Public Health in
the Public Health Leadership Program

Chapel Hill

2011

[Signature]

Advisor

[Printed name]

Date

[Signature]

Second Reader

[Printed name]

Date

Section IV. Health Care and Prevention

Overview

HC&P Mission and Core Competencies

The Health Care and Prevention (HC&P) concentration is designed to provide clinicians (physicians and other health professionals who identify themselves with clinical medicine) with a population perspective, and with the skills and knowledge to use that perspective in a clinical setting. Graduates of this program often take positions in academia (usually in a medical school), in a policy agency, or with a health care delivery system (as medical directors, or in other leadership positions), or become clinicians who practice with the ability to think and act in population as well as individual terms. Clinicians have traditionally cared for, and thought of, patients one at a time. But clinicians can also focus on populations in at least three general ways:

- ♦ by using data from studies of populations to provide better care for individuals;
- ♦ by organizing health care to maximize the contribution of the clinical care of individuals to the health of the public, using data from health services research; and
- ♦ by taking part in population initiatives to benefit the health of the public beyond individual clinical care alone.

This curriculum differs both from traditional medical curricula and from other public health curricula. The HC&P curriculum seeks to train people who can bridge the health gap between individual and population approaches. Because such people will vary widely in their interests and career goals in the health care system, the curriculum is maximally flexible, with a number of different options for satisfying core requirements.

Course work includes core courses in clinical epidemiology; biostatistics for health care professionals; critical appraisal of the health care literature; strategies of prevention; organization and financing of the health care system; and environmental health. Beyond this, the curriculum is individualized, including elective courses and the opportunity for independent study. A practicum experience, a Master's Paper, a comprehensive examination, and an oral presentation are also required. The program can be completed in 12 months, or can be spread out over a longer period of time. We discourage students from trying to complete the degree in less than 12 months. Faculty in the program are from both the School of Public Health and the School of Medicine.

Following is the HC&P Program **Mission Statement** and **Statement of Core Competencies**:

Mission:

- (1) To provide an educational program of the highest quality that has a focus on population and social sciences for medical students, residents, fellows, and others who have clinical science backgrounds.
- (2) To help people in the HC&P program to integrate population and clinical sciences into a life course that will prepare them to contribute to improving the health of the public in a broader manner with a focus on the needs of populations as well as individual patients.

Statement of Core Competencies:

Upon graduation, students who earn an MPH in the HC&P concentration of the Public Health Leadership Program should be able to

- (1) Apply the basic principles of the core public health disciplines: clinical epidemiology; biostatistics; prevention science; public policy; and environmental health;
- (2) Critically appraise medical and public health literature;
- (3) Understand the importance of rigorous analysis of health evidence of many types, such as health system, economic, effectiveness, and patient-reported outcomes data;
- (4) Demonstrate and utilize knowledge of the critical issues facing our health care system today in assuring access, improving quality of care, and assessing cost of care;
- (5) Discuss in depth the implications of their rigorous analysis of at least one area of population health;
- (6) Utilize enhanced communication skills, with a particular emphasis on clear writing and speaking to a variety of stakeholders;
- (7) Demonstrate leadership skills, including an appreciation of one's own strengths and weaknesses in interacting with others.

Also see the PHLP Breadth Requirements section below.

MPH Program Requirements

Introduction

Information about the University of North Carolina at Chapel Hill Graduate School degree requirements and important policies and procedures is published annually in *The Graduate School Handbook* and other guidebooks that can be found at this website: <http://handbook.unc.edu>. The following guidelines for the MPH degree were developed to conform to School of Public Health and University requirements.

Requirements at a Glance

Credit hours	minimum of 42 required
Courses	<p><u>5 SPH core courses (required):</u></p> <ul style="list-style-type: none"> ○ Epidemiology (Clinical Measurement/Evaluation, PUBH 760) – 3 credits ○ Biostatistics (Quantitative Methods for Health Care Professionals, PUBH 741) – 4 credits ○ Policy (Introduction to the U.S. Health System, PUBH 600) – 3 credits ○ Prevention (Strategies of Prevention for Clinicians, PUBH 750) – 4 credits ○ Environmental Health (ENVR 600) – 3 credits <p><u>Strongly Encouraged:</u></p> <ul style="list-style-type: none"> ○ Critical Appraisal of the Health Literature (fall: PUBH 751 – 2 credits; spring: PUBH 752 – 1 credit) ○ Spring Master’s Seminar (spring: PUBH 749 – 1 credit) (1 additional credit can be earned by attending the five required fall evening seminar sessions) <p><u>General areas:</u> Breadth of coursework in the population sciences, usually including such areas as health assessment, policy development, and health care assurance (many courses satisfy these requirements)</p> <p><u>Electives:</u> May be from a variety of departments</p>
Master's Paper	3 credits (PUBH 992) (register for credit in your final semester)
Practicum Experience	3-6 credits (PUBH 886) (usually spring or summer)

Comprehensive Exam	0 credits (spring or summer) (students must be registered in the semester in which they take the exam)
Oral Presentation	0 credits (spring or summer)

Sample Health Care and Prevention MPH Course of Study - Summer Admission

(A sample schedule for students who begin the HC&P program in the summer. Minimum of 42 credit hours required.)

Summer Session *(Note: PUBH 600 does not follow the university's Summer Session II academic calendar. It starts in early July and usually runs through the first week of August.)*

PUBH 600*	Introduction to the U.S. Health System (meets T/TH 9:00am-noon plus one Friday meeting to make up one canceled T/TH class for instructor to attend international meeting)	3
Summer Semester Credit Hours		3

Fall Semester (maximum of 19.5 credit hours)

PUBH 741*	Quantitative Methods for Health Care Professionals (meets T/TH 12:00-1:55 pm)	4
PUBH 760*	Clinical Measurement/Evaluation (meets T/TH 2:00-3:15 pm)	3
PUBH 750*	Strategies of Prevention for Clinicians (meets T/TH 3:30-4:55 pm)	4
ENVR 600*	Environmental Health (online course – may also be taken in the spring in order to take a fall elective)	3
PUBH 751**	Critical Appraisal of the Health Literature (meets Mon 2:00-3:50 pm)	2
ELECTIVE		3
ALSO REQUIRED: 5 Evening Seminar sessions (no registration, but attendance at all sessions will earn 1 additional credit hour for PUBH 749 in the spring) (five Mondays during fall semester, 5-7 pm)		
Fall Semester Credit Hours		19

Spring Semester (maximum of 19.5 credit hours)

PUBH 749**	Spring Master's Seminar (1 credit without attendance at fall evening seminar series) (meets Mon 2:25-3:50 pm)	2
PUBH 752**	Critical Appraisal of the Health Literature II (meets Mon 4:00-4:50 pm)	1
ELECTIVE		3
ELECTIVE		3

ELECTIVE	3
ELECTIVE	3
ELECTIVE	3
Spring Semester Credit Hours	18

Summer Session

PUBH 886	Field Practicum in Public Health (3-6 hours) (may be spring or summer; register for credit in the semester in which you complete the practicum)	3
PUBH 992	Master's Paper (register for credit in your final semester)	3
Summer Semester Credit Hours		6

TOTAL Credit Hours 43

*School of Public Health required core course (all but ENVR 600 are especially designed for HC&P students)

**Strongly encouraged

Sample Health Care and Prevention MPH Course of Study – Fall**Admission**

(A sample schedule for students who begin the HC&P program in the fall. Minimum of 42 credit hours required.)

Fall Semester (maximum of 19.5 credit hours)

PUBH 741*	Quantitative Methods for Health Care Professionals (meets T/TH 12:00-1:55 pm)	4
PUBH 760*	Clinical Measurement/Evaluation (meets T/TH 2:00-3:15 pm)	3
PUBH 750*	Strategies of Prevention for Clinicians (meets T/TH 3:30-4:55 pm)	4
PUBH 600*	Introduction to the U.S. Health System (meets Weds 3:00-5:50 pm)	3
ENVR 600*	Environmental Health (online course – may also be taken in the spring in order to take a fall elective)	3
PUBH 751**	Critical Appraisal of the Health Literature (meets Mon 2:00-3:50 pm)	2

ALSO REQUIRED: 5 Evening Seminar sessions (no registration, but attendance at all sessions will earn 1 additional credit hour for PUBH 749 in the spring) (five Mondays during fall semester, 5-7 pm)

Fall Semester Credit Hours 19

Spring Semester (maximum of 19.5 credit hours)

PUBH 749**	Spring Master's Seminar (1 credit without attendance at fall evening seminar series) (meets Mon 2:25-3:50 pm)	2
PUBH 752**	Critical Appraisal of the Health Literature II (meets Mon 4:00-4:50 pm)	1
ELECTIVE		3
ELECTIVE		3
ELECTIVE		3
ELECTIVE		3
ELECTIVE		3

Spring Semester Credit Hours 18

Summer Session

PUBH 886	Field Practicum in Public Health (3-6 credits) (may be spring or summer; register for credit in the semester in which you complete the practicum)	3
PUBH 992	Master's Paper (register for credit in your final semester)	3

Summer Semester Credit Hours 6

TOTAL Credit Hours 43

*School of Public Health required core course (all but ENVR 600 are especially designed for HC&P students)

**Strongly encouraged

Registration for Classes

Most HC&P students will be taking the core courses in the fall. Our registrar, Sue Robeson, (919-966-5305, robeson@email.unc.edu) has pre-registered students for these courses. Students who wish to register for other fall courses (including students who take PUBH 600 in Summer Session II and wish to take an elective course in the fall) should contact Ms. Robeson, as she can register students most efficiently. **Please note that the only required course that is available in the spring is the online Environmental Health course. If there is a non-required fall course that you would especially like to take, or if you are not sure about this, please talk with one of the program directors (Russ Harris, Anthony Viera, Sue Tolleson-Rinehart) as soon as possible to consider whether this would be a reasonable option for you. We discourage taking more than 19 credits in one semester.**

For spring courses, there is one registration period in early November. We encourage students to register for classes as early as possible, as many classes fill quickly. In October, we will have a group session for HC&P students to discuss various options for spring courses.

Registration for Independent Study, Practicum, and Master's Paper

When students register for Independent Study (PUBH 690), Practicum (PUBH 886), or Master's Paper (PUBH 992) courses, they should register as for a usual course, with a specific faculty member. **Each faculty member has an assigned section number for all three of these courses (Anthony Viera: 003; Sue Tolleson-Rinehart: 005; Russ Harris: 006; Diane Calleson: 007; Anna Schenck: 001)**, which should be used along with the course number. Please check with the registrar for section numbers for other faculty members.

Sometimes, the student will work independently of the faculty member for much of the semester for the course. When this occurs, it is the student's responsibility to check in periodically with the faculty member, and to make a report to the faculty member prior to the time when grades are due. If the faculty member has not heard from a student, an incomplete or failing grade may be turned in.

Time Expectations

Students enrolled full-time (i.e., nine or more credit hours per semester) ordinarily take at least 12 months to complete all degree requirements. Part-time students need more time to meet the same requirements. The time required for the degree may be modified when course credit (up to 8 credit hours upon review and approval by PHLP – see Transfer Credits section below) is transferred from another university or another program at UNC. All requirements for the MPH degree must be completed within five years of matriculation.

Attendance and Preparation for Class

This is graduate school; we adhere to the principles of adult education. Basically, you get out of a class what you put into it. Most classes have been structured to build on the preparatory readings/assignments rather than to repeat those assignments during class. **Thus, preparatory assignments usually do not compensate for what is lost in not coming to class.** Good attendance, good preparation for class, and class participation are often taken into account in grades. These factors may also affect the faculty's willingness to write future letters of recommendation.

Even in classes where attendance is not taken, faculty know when students miss more than an occasional class. It is often embarrassing for lead faculty when guest lecturers come and few students show up. Students who miss several classes forfeit their right to comment on the course's quality at the end of the semester.

We suggest that you make every effort to attend all classes. Think of it as your "job." Certainly you wouldn't be late for morning rounds in the hospital. If circumstances outside your control prevent attendance, we suggest that you communicate that to the course faculty at the earliest possible time. We believe that faculty will be sympathetic and helpful where possible.

Pregnancy, Maternity/Paternity Leaves, and Other Expected Absences

Students anticipating an absence or break in the continuity of the semester (e.g., for childbirth, STEP 2 exams, attendance at academic conferences) must inform the program directors and their instructors as early as possible and make arrangements for completing any work missed.

Students expecting the birth of a child during the semester should meet with the program director as well as their instructors before the semester begins to make plans for completing their academic work while they are on parental leave.

Structure

Students generally find that the School of Public Health is much less structured than the School of Medicine. With a few exceptions, we will not tell you what to do or be on your back when you have missed a deadline. This may require some adjustment. Success in this program involves becoming self-directed in a new kind of way – developing an internal drive that keeps you moving, different from the external drive of other programs. Usually, things will not be done for you – we will expect you to do them for yourself. It is a time to take charge of your own education rather than leaving it to others. We encourage you to be pro-active. Do not wait for us to remind you about something. Understand the program and make it work for you. We are always happy to meet/talk with you about anything at all – academics, problems, life, career, etc. Just let us know.

NOTE: It is your responsibility to be sure you meet all MPH requirements as well as the minimum number of credit hours (42) required for graduation. You can access this information through the Student Services Center in Connect Carolina (<http://my.unc.edu>).

Transfer Credits

Transfer credits are governed by the following regulations:

(1) The Graduate School

A student may transfer no more than 8 credit hours into an MPH degree program. One may only transfer in credits from graduate-level courses; credit from undergraduate-level courses is not allowed.

(2) The School of Public Health

Students applying for transfer credit for one of the SPH required core classes must follow this procedure:

- Contact your advisor and inform him or her of your desire to petition for transfer credit for a specific SPH core class.
- Submit to your advisor a copy of the class syllabus and a copy of the table of contents from the primary text used in the class for which you are asking to receive credit. Additionally, an official transcript showing that you have earned credit for the class is required (your advisor may be able to secure this from your application file).

- Your advisor will submit your request and the submitted documentation to the instructor of the class for which you are requesting transfer credit. If the instructor approves your request, the approval will then be forwarded to the Associate Dean for Academic Affairs for final approval. If either the instructor or the Associate Dean for Academic Affairs denies your petition for transfer credit, you will not receive transfer credit. Their decision is final. You will be notified of the final decision by the Public Health Leadership Program registrar.

(3) Finally, a few general rules governing transfer credits:

- You cannot receive credit for a class that has no similar class in the SPH.
- You cannot receive credit for a class taken in a professional school, such as law, medicine, or dentistry.
- You must have earned a grade of B or higher in any class you propose to submit for credit.
- **All transfer credits must be approved by the end of the student's first semester.**

Waiver of Class Requirement

If a class requirement is waived rather than credit given for an alternative, equivalent course, then the student receives no course credit and must fulfill the credit hours by taking a different course.

Grades

HC&P students are expected to be familiar with the Graduate School policies on grades and academic ineligibility as stated in *The Graduate School Handbook* (see <http://handbook.unc.edu/grading.html>).

Students will receive one of the following grades:

Permanent Grades

- H: High pass
- P: Pass
- L: Low pass*
- F: Fail*

***NOTE: A student with nine or more hours of L (usually three 3-hour courses) or one F becomes academically ineligible to continue in the Graduate School (see Eligibility section below).** Students who receive 2 Ls must meet with one of the program directors for a conference about their work.

Special Grading Symbol

S: Satisfactory progress (given only for master's paper or practicum courses).
Used to indicate satisfactory progress in master's paper and practicum courses in cases

where the project is not completed during a term but is under way in a satisfactory manner. A grade of S must be changed to a permanent grade before graduation.

Temporary Grade

IN: Work incomplete. A grade of IN is given when the course instructor determines that exceptional circumstances warrant extending the time for the student to complete the course. IN is a temporary grade that converts to F unless the grade is replaced with a permanent grade by the last day of classes for the same term one year later. NOTE: It is the sole responsibility of the student to complete the course and initiate the grade change prior to the one-year deadline.

The University Registrar automatically converts the temporary grade of IN to F when the time limit for a grade change on temporary grades has expired. Receiving a grade of F results in the student becoming academically ineligible to continue in the Graduate School (see Eligibility section below).

Emergencies

Students with personal or family emergencies during the semester or at exam time should notify their instructors as soon as possible and, if necessary, request a delay in writing for submitting required papers or taking an exam. **If the instructor is not notified in advance, an IN or F grade may be turned in. We strongly suggest that students who find themselves coping with such emergencies also contact one of the program directors. The program directors are always ready to do what we can to help students maintain their standing in the program while they resolve personal or family problems.**

Eligibility

A student may become ineligible to continue studies at UNC-Chapel Hill and the Graduate School for academic reasons and/or Honor Code violations.

Academic Eligibility

A student becomes academically ineligible to continue in the Graduate School **when he/she receives a grade of F, or nine or more hours of L** (usually three 3-credit-hour courses).

Consequences of Becoming Academically Ineligible

When a student becomes academically ineligible, a **university-wide stop** is placed on the student's account. While a stop is in place,

- 1) the student may not register in any UNC school (including the School of Medicine)
- 2) no transcripts will be issued from any school (including the School of Medicine), and
- 3) no diplomas will be issued from any school (including the School of Medicine).

Reinstatement

When special circumstances warrant, a student made academically ineligible may be reinstated upon petition initiated through the student's academic program. Students must fill out the Request for Reinstatement to Graduate School form, submit a statement from the HC&P program directors endorsing or declining to endorse the student's request, and be approved by the HC&P program director of graduate studies.

The student's director of graduate studies must submit the petition together with a statement endorsing or declining to endorse the student's request to the Graduate School. Final approval rests with the Graduate School.

After academic eligibility reinstatement, any subsequent grade below P will result in the student becoming academically ineligible again.

Honor Code

It shall be the responsibility of every student at the University of North Carolina at Chapel Hill to obey and to support the enforcement of the Honor Code, which prohibits lying, cheating, or stealing when these actions involve academic processes or University, student, or academic personnel acting in an official capacity.

Students are subject to the regulations of student government under the Honor Code. They are expected to understand and conduct themselves according to the provisions of the Honor Code, and to be aware of the serious consequences of Honor Code violations. The Honor Code is found in a document known as the *Instrument of Student Judicial Governance*. The Instrument is the University's official document containing the rules and regulations that guide the Honor System. The list of prohibited conduct and the possible sanctions given by the Honor Court can all be found in the *Instrument*. This document also includes information on the rights and responsibilities of all members of our community to the Honor System and under the Honor System. For more information on the Honor Code and procedures for handling suspected violations, see <http://honor.unc.edu/>.

Honor Code Violations

Students may become ineligible to continue studies at UNC-Chapel Hill for Honor Code violations. Instances of suspected plagiarism, cheating on examinations, or other violations of the Honor Code will be reported to the Office of the Graduate Student Attorney General or the Office of the Dean of Students.

NOTE: In order to avoid delays in resolving cases brought before the Honor Court, it is in the best interest of students to familiarize themselves with Honor Court procedures and to cooperate fully with the attorneys and members of the Honor Court.

PHLP Breadth Requirements

Each HC&P MPH student is encouraged to develop his/her own academic program with program leaders and with the student's advisor, based on what he/she would like to get out of the program. In doing this, we encourage students to develop a broad program that helps meet the competencies of the program. As can be seen from the competencies enumerated above, these can be considered in 3 broad areas: **assessment of health, policy development, and assurance of health**. Students in HC&P should confer with their advisors and program leaders (including Russ Harris, Sue Tolleson-Rinehart, and Anthony Viera) to identify the specific ways that they would like to tailor their academic program to meet these competencies. The 3 areas are described more fully below. As there is some overlap in these basic areas, some courses can meet more than one requirement.

Assessment of Population Health

1. Assess the health of populations: understand the need for and difficulties in collecting, analyzing, and interpreting information on the health status, health needs, and health resources of a defined population. This objective implies knowledge of methods to access data on issues such as mortality, disability, health services, socioeconomic resources, environmental health, other public health and health services concerns, and local governmental and non-governmental agencies influencing the public health and health care status of the population.

2. Critically appraise the health literature: understand the process of critical appraisal of existing medical research literature as the foundation of understanding and adopting evidence-based practice. This objective implies an understanding of the methods and techniques used to conduct medical research, and an ability to apply that understanding to the literature, with a goal of separating better from less good evidence.

3. Communicate health information: Objectives #2 and #3 require skills in culling important information from research reports and publications and presenting it so that it is readily understood by health care providers, policy makers, administrators, legislators, and interested members of the general public. After this information is assessed, it must be communicated to the public, policy-makers, and other stakeholders to improve health decisions.

Policy Development

1. Develop and evaluate policy options: examine public health and health services issues from an interdisciplinary perspective; understand the process of formulating and evaluating policy strategies for addressing these issues. This goal requires an understanding of the politics of the health care system, since what can and cannot be done to create health policy is often as much or more a matter of what will be politically feasible than of any other consideration.

2. Set priorities and implement policy: understand approaches to setting priorities for health needs based on the magnitude and seriousness of the problems and the political feasibility and acceptability, economic feasibility, and effectiveness of interventions.

Consider strategies to implement policy, addressing issues of organizational design and management, leadership, communication, economic issues, community participation, ethics, and values.

3. Develop strategies: understand approaches to gather and organize information on health care system, governmental, media, and public actions that may affect the public's health. This objective implies an understanding of the importance of relationships among people and between organizations in the policy process, including between providers and the public, health care systems and providers, the dance of legislation and regulation, and the different perspectives of different constituencies. It also involves an understanding of the importance and role of networking with public and private agencies to achieve goals.

Assurance of Population Health

1. Formulate program objectives: an understanding of approaches to developing measurable program objectives designed to improve the health of the public.

2. Program administration: an understanding of approaches to developing management plans for providing essential public health or other health care services.

3. Program evaluation: an understanding of approaches to monitoring and evaluating public health or other health services programs for their effectiveness and quality. This objective implies awareness of scientifically proven strategies to analyze interventions and awareness of methods to evaluate organizational performance.

4. Targeting resource use: an understanding of approaches to targeting scarce resources to best implement programs designed to assure priority health services for needy populations.

5. Implementation of high quality health services: understanding the most feasible approaches to implementing high quality, effective health services to improve the health of the public. Developing an understanding of approaches to communicating the need for such services to decision-makers at all levels.

Elective Courses

Students will complete their degree course requirements by taking electives in the School of Public Health and the greater University in order to fulfill the 42-credit-hour requirement. Electives may be used to expand the breadth of an individual course of study or to provide depth in a particular area. Students will develop an approved course of study with their advisors, including Dr. Harris. Students who wish may set up an independent study course with a willing professor, establishing learning objectives, readings, discussion questions, and meeting times.

Master's Paper

All MPH students in the School of Public Health are required to submit a written report at the conclusion of their program. Candidates for the MPH degree in Health Care & Prevention are required to write a Master's Paper. The Public Health Leadership Program has specified the following guidelines:

The Master's Paper should synthesize your knowledge, and **make a contribution to the field of health care and/or prevention**. Note that this means the paper is more in-depth and extensive than any paper in a single course. Most papers have at least 50 references and are usually 40-70 pages long, double-spaced, with the margins given below (see Guidelines for the Preparation of Your Paper below). Papers should follow the Uniform Requirements for Manuscripts (URM) of the International Committee of Medical Journal Editors (ICMJE) whenever possible. (See the complete reference and citation policy below, under Guidelines for the Preparation of Your Paper.)

It is important to develop a focused topic **first**; this should be done in association with your Master's Paper advisor. It is also important to note that the criteria below include demonstrating excellent communication skills. Even a paper on a good idea will not be approved unless it is well written.

The Master's Paper has been the most troublesome requirement for many past HC&P students. It may also be the most rewarding. We encourage you to begin thinking about your topic as soon as possible, starting to write a proposal and outline, and starting to talk with your advisor as soon as possible. We also encourage you to take the spring "HC&P Master's Seminar" (PUBH 749), which includes a component on planning and writing a Master's Paper, and to attend our fall evening seminar series, which will help you begin the process.

Although the first general way of satisfying the requirement noted below is a systematic review, we expect all five ways to include at least a limited systematic review of some part of the medical/health literature. We also expect that all students will choose a topic that deals with an important issue in the health of the public or in the health care system. All papers should discuss the implications of their conclusions for public health.

Note that this is NOT a "thesis" – it is a "Master's Paper." The UNC Graduate School has a specific definition for a thesis; there will be confusion if the word "thesis" appears on the paper.

THE MASTER'S PAPER REQUIREMENT CAN BE SATISFIED IN FIVE GENERAL WAYS [Note: We are flexible, so if you have a sixth approach, check with us.]:

- ◆ 1. A full and extensive systematic review of the research literature related to a specific health-related topic. This must be a critical review and summary for the

purpose of making recommendations for development of a program, change in policy, establishment of standards, program evaluation, etc.

- ◆ 2. An evaluation of a public health or clinical program (including curriculum, intervention, project, etc.). This may involve developing an evaluation plan without actually collecting the data to perform the evaluation, or it may involve collecting or examining existing data that bear on an existing evaluation plan.
- ◆ 3. A research design complete to the data collection phase including construction of data collection instruments, plans to pilot test measurement instruments, and methods of analysis of data.
- ◆ 4. An analysis of original data collected by the student or collected by others (e.g., a faculty member), or a secondary data analysis of data collected for other reasons. This may be written in either of two ways: (1) as a typical Master's Paper; or (2) as a research paper potentially suitable for submission to a journal for publication. If the student chooses option #2, the Master's Paper must also include appendices that provide more in-depth information about the research question (including a systematic review of what is known on the topic), more discussion of research methods and why the research design and measurement/analysis approach was chosen, and a more in-depth discussion section that considers strengths and weaknesses of the research and implications for future practice or research. This paper may be either quantitative or qualitative research.
- ◆ 5. A policy analysis in which an important issue in health policy is analyzed objectively, concluding with recommendations for practice, research, or further policy change. This policy analysis will, typically, triangulate methods, including reviewing relevant literature and gathering original qualitative and/or quantitative data.

Please note: Duke medical students must satisfy both UNC criteria and also the criteria outlined by Duke.

TO BE ACCEPTED, THIS PAPER SHOULD SATISFY THE FOLLOWING FIVE REQUIREMENTS:

1. The paper includes a systematic review and critical appraisal of some part of the health or health-care literature. The review is well-conducted, including defining the question; developing eligibility criteria for admissible evidence; developing a search strategy; doing the search and selecting eligible articles; reviewing the articles for internal and external validity (based on pre-set quality criteria); constructing evidence tables; synthesizing the results; presenting the results; and considering the implications.
2. The paper demonstrates thinking from a population perspective.

3. The paper demonstrates in-depth thinking, beyond the superficial level.
4. The paper includes a consideration of the implications of the paper for
 - health care policy;
 - future research; and
 - the health of a population of people.
5. The paper demonstrates the ability to communicate clearly and precisely in writing.

The topic you choose could come from a variety of sources. Regardless of the origin of your question, the closer your subject is to a real issue or problem you have encountered, the greater the benefits are likely to be. The Master's Paper should represent the independent effort of the individual student.

Although there is no absolute length requirement for the paper, we have found that it is difficult to satisfy the above requirements (including critical thinking and thinking in-depth) in a short paper (see above for usual lengths). If you choose to write a paper that may be submitted for publication, this is usually done with the addition of several Addenda, as noted above.

It is important to realize that **the Master's Paper will take months of work to complete**. It is far more rigorous than a term paper for a course. **You are expected to write at least three drafts**. Prior to the first draft, you should discuss the topic with your advisor and then submit a detailed outline for discussion and approval.

Although you will be working with an advisor (chosen by you) from the earliest stages, the Master's Paper is your responsibility. As a general rule, you should start thinking about your paper in the fall, have your topic approved by your advisor by early January (or earlier), have a good outline by mid-January, and begin working/writing by the end of January. You should be more than half finished by early May and have a full first draft submitted to your advisor for review by the following dates:

- ◆ **For May graduation: February 1 (discouraged)**
- ◆ **For August graduation: May 20**
- ◆ **For December graduation: October 1**

There will likely be further discussion and revisions to the paper after this.

Human Subjects Review

All research that involves collection of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection is provided for subjects at risk. Instructions and forms may be obtained from the secretary of the IRB. Advisors should be involved in preparation of the IRB application and must sign the form. Note that Duke students must satisfy the requirements of both UNC and Duke IRBs.

Advisors & Readers

Your Master's Paper must be approved by two readers; it is the responsibility of the student to find two readers. Your advisor may be one reader, but does not have to be. If you would like to select a first reader who is not your HC&P advisor, please secure permission from the Director (Russ Harris) or one of the Co-Associate Directors (Anthony Viera and Sue Tolleson-Rinehart). Often the readers include a methodologist and a content expert. *(For Duke medical students, the second reader must be an appointed Duke faculty member.)* These two will work very closely with you throughout the entire process of developing and completing the Master's Paper.

It is important to recruit these two readers early in the process of planning and writing the Master's Paper. **Ideally, the student should have a Master's Paper topic and two readers by early January at the latest.** The student should understand that readers may need 2-3 weeks or more to give feedback on a draft of the Master's Paper. Thus, the student cannot wait until a short time before the deadline and expect to complete the paper on time. When a student needs a quick turn-around on a paper draft, he/she should have discussed this with the readers beforehand. For example, readers may be traveling at a time when the student needs approval of the final draft of the paper. This type of problem can be avoided by the student discussing appropriate timelines with the readers.

Master's Paper Proposal Form

Early in the process, you must submit a Master's Paper Proposal form to your advisor for his or her signature, listing the type of paper and proposed topic, and including a brief description of the content. Once you and your two readers have agreed on the content of the paper, you should then submit a detailed outline of the paper to your readers for approval. For your convenience, a limited number of sample papers of various types have been made available for your review in the HC&P office (4105 McGavran-Greenberg).

Course Credit and Grading for Master's Paper

To receive course credit for the Master's Paper, **you must enroll in PUBH 992, in your advisor's section, for 3 credits in your final semester.** **If the paper is not completed in the term for which you are registered for PUBH 992, you must register and pay tuition again for at least one credit hour of independent study (PUBH 690, in your advisor's section) in the semester in which you plan to graduate.** For faculty section numbers, see Registration for Independent Study, Practicum, and Master's Paper, above.

Grades are the same as with any course: H, P, L, or F. An "S" grade is given to denote that satisfactory progress is being made on the Master's Paper if the paper is not completed during the term in which you registered for PUBH 992. An "S" grade is considered a temporary grade and must be changed to a permanent grade before graduation

Guidelines for the Preparation of Your Paper

Margins Double-spaced pages, with page numbers
Use either Arial - 11 point or Times New Roman - 12 point type.
Margins should be one inch all around - not more or less.

References Papers should follow the Uniform Requirements for Manuscripts (URM) of the International Committee of Medical Journal Editors (ICMJE), found at <http://www.icmje.org>, whenever possible, while using necessary modifications, as you and your advisor think appropriate, for the purpose of assuring the most complete and proper citation style for your particular research, such as APSA style for policy papers, or for the journal to which you plan to submit it. We expect all students to gain thorough familiarity with the URM on the ICMJE website, however, and to demonstrate their understanding of the ethics and professionalism associated with correct and complete citation regardless of the particular style required.

References should be numbered consecutively throughout the paper, and a list of references should follow the main text of the paper, unless you are using another citation style appropriate for your paper type, in which case you should follow that reference style's guidance for citations and reference lists.

Title Page See Attachment A below for format. Please follow this format exactly, especially noting the following:

- The title page should be in the same type font and size as the body of the paper, but the margins will be different.
- Readers' signatures should be on the right side, with a date line for each reader. This section should have a one-inch right margin.
- The title should be centered with a top margin of 2 inches and side margins of 2 ½ inches.
- Your name should be centered.
- The statement "A Master's Paper submitted to the faculty of the University of North Carolina at Chapel Hill in partial fulfillment of the requirements for the degree of Master of Public Health in the Public Health Leadership Program" should have side margins of 2 ½ inches.
- "Chapel Hill" and the year should be centered, on separate lines.
- The back of the title page should be left blank.
- A title page in the correct format should be included in the electronic copy submitted to the PHLP registrar.

NOTE: Also submit a hard (paper) copy of the title page with original signatures of both readers to the PHLP registrar.

Abstract An abstract is required. It should be located at the beginning of the paper, following the title page, and should be double-spaced like the body of the paper. It should not exceed 2 pages; one page is preferred.

Deadlines

A clean electronic copy of the final paper, including the title page, must be submitted to the PHLP registrar prior to the deadline established by the Graduate School. This date varies by semester or term but is approximately four weeks prior to graduation. (See the PHLP registrar for exact dates for each semester.) A paper title page signed by your advisor and second reader must also be submitted to the PHLP registrar.

In addition, you should ask your readers if they wish to have a copy of your paper.

Please note that students must also formally apply to graduate using the “Application for Graduation” online form found on the Graduate School website (at https://cfx.research.unc.edu/grad_appOnline/). For degree, HC&P students should check “Other,” and list “MPH” in the box. There is no penalty for applying and then not graduating for any reason, but you will not be able to graduate without submitting this graduation application form by the deadline for each semester. You can check the deadlines as part of the application process. If you do not graduate in the semester for which you applied, you must submit a new application for the semester in which you actually graduate.

Master's Paper Title Page

**Combining Population and Individual
Health Education Perspectives**

By

Jane Smith

A Master's Paper submitted to the faculty of
the University of North Carolina at Chapel Hill
in partial fulfillment of the requirements for
the degree of Master of Public Health in
the Public Health Leadership Program

Chapel Hill

2011

[Signature]

Advisor

[Printed name]

Date

[Signature]

Second Reader

[Printed name]

Date

Practicum Experience

PURPOSE

All students in the School of Public Health must develop skills in basic public health concepts and demonstrate the application of these concepts through a practice experience that is relevant to the students' areas of specialization. The practicum experience in the Health Care and Prevention curriculum is designed to provide the student an opportunity to learn and apply generalizable approaches, skills, and information relevant to his/her interest area outside of the classroom. Each student works with a faculty advisor to plan the practicum and then carries out the practicum work under the general supervision of the practicum preceptor. The practicum site and the preceptor should be outside the Public Health Leadership Program and the School of Public Health whenever feasible. A 3-6 credit practicum experience (one credit = 40 hours of work on the practicum) is required of all HC&P MPH students. To be acceptable, a practicum must be planned, supervised, and evaluated.

STRUCTURE AND REGISTRATION

A written practicum plan must be approved by the student's advisor and practicum preceptor before the practicum work begins. In addition, an online School of Public Health Student Practicum Form (<http://www.sph.unc.edu/forms/practicum>) should be completed after the student has discussed the practicum plan with his or her advisor, but before the practicum work begins. This form documents the student's practicum in the school-wide database (locations, activities, and competencies to be addressed); more detailed instructions for completing it are available on the HC&P cohort Blackboard site.

The practicum plan starts with learning objectives. What is it that the student wants to learn? These learning objectives go beyond those in many courses, as they must consider not only learning from readings and discussions, but also learning from observing and/or doing. The learning objectives should be developed in discussions with your advisor and your practicum preceptor, and approved by both. The practicum plan should also document the credentials of the practicum preceptor.

The practicum plan should indicate how the learning objectives will be achieved. This usually begins with an explicit set of readings plus meetings and discussions with the practicum preceptor or others, but the practicum plan should also include explicit observations or experiences involving population-based research or health-promoting activities in the real world.

The practicum must be evaluated. The student must complete a 1-2 page report on the practicum at the end of the experience, reflecting on the success in meeting the learning objectives. The student must also complete the practicum evaluation form, and the practicum preceptor must complete the student evaluation form. The student also completes a post-practicum version of the School of Public Health online form

(<http://www.sph.unc.edu/forms/practicum>) to document any changes in dates, hours, activities, or competencies achieved (compared to those the student planned to achieve).

Students often undertake their HC&P MPH practicum experiences during the summer months (i.e., beginning in May) following the first nine months of academic study; some students prefer to start their practicum experience earlier and work on it concurrently with their coursework. Some students pursue their practicum the summer before starting academic courses in the fall. Any of these approaches is acceptable. **Students should register for PUBH 886 in the semester (or summer session) in which they plan to complete the practicum.** At a minimum, students are required to complete the equivalent of three 40-hour weeks of practicum work for 3 credit hours. For each additional 40 hours worked, one credit hour may be earned for a maximum of 6 credit hours applied toward the 42 credits required for the MPH degree. Students must obtain practicum approval from their advisor prior to registering for PUBH 886 for a given number of credit hours.

PROCESS

The planning, implementation, and evaluation of the practicum experience require a joint effort among the student, the faculty advisor, and the preceptor.

A. Working with the Faculty Advisor and Practicum Preceptor (see also Advising below)

1. Learning Objectives: The learning objectives for the practicum are critical to the experience. Students should begin to define general learning objectives (what they would like to gain from the practicum experience) early so that they can begin to explore potential opportunities. The faculty advisor plays a key role in this process and should be consulted for ideas and suggestions. The student should then develop specific learning objectives within the context of overall goals for the MPH program. The advisor must review and approve the learning objectives.

In addition to specific learning objectives, the student should recruit and work with a practicum preceptor to develop a list of activities to allow the student to achieve the learning objectives. Usually the practicum involves some additional readings relevant to the topic that the student discusses with the preceptor, along with meetings and discussions with the practicum supervisor and observations and/or experiences involving population-based research or health-promoting activities in the real world. The student is expected to take a critical attitude toward the learning objectives. The student, the faculty advisor, and the practicum preceptor must agree on the learning objectives and on how the student will document successful completion of the objectives. The student then writes the learning objectives and the practicum plan on the Practicum Approval Form and submits the form to the advisor and the practicum preceptor for signatures. A copy of the signed form should be given to the advisor, practicum preceptor, and registrar. The student must also complete the online School of Public Health Practicum Form

(<http://www.sph.unc.edu/forms/practicum>) to document the practicum in the school-wide database; instructions for completing this form are on the HC&P cohort Blackboard site.

2. Developing Practicum Experiences: **It is the student's responsibility to identify the practicum experience and practicum preceptor, and develop the learning objectives and activities with the advisor.** The student may meet regularly with the advisor to discuss options and to elicit suggestions for possibilities.

3. Approval of Practicum: The faculty advisor approves the practicum plan, including learning objectives and activities to achieve the objectives. The advisor must also approve the practicum supervisor and the number of credits requested.

4. Monitoring of Practicum: The practicum preceptor will monitor the student's practicum experience. The student should take responsibility for keeping his/her faculty advisor informed and updated on any issues/questions/problems that may arise during the practicum experience. The faculty advisor, in consultation with the practicum preceptor, assigns the final grade for the practicum.

B. Finding Practicum Experiences

There are many ways in which students select their practicum experiences. The primary criterion for selecting a specific practicum experience is that both the faculty advisor and the student believe that the experience proposed is appropriate for the achievement of the student's learning objectives. While some students may choose practicum experiences that are closely related to their Master's Paper topic, others may choose experiences unrelated to the Master's Paper; either is acceptable.

Practicum experiences often have an interdisciplinary focus. The following are examples of successful practicum experiences:

1. Disciplinary or Interdisciplinary Focus: The student works with an individual or team on a public health problem at the population level using perspectives and tools that the student wants to learn. Readings and discussions support the student's observations and experiences.

2. Research team: The student works with a research team investigating a health problem, usually on a project using perspectives and tools that the student wants to learn. Readings and discussions support the student's observations and experiences.

3. International Health Experience: The student works with individuals or teams working on one or more international health problems, often involving visiting the country, gaining specific perspectives or tools.

Previous HC&P students have done practicum experiences of many types, including experiences at nonprofit organizations and agencies, local and state health departments,

universities, research institutions, community health centers, hospitals, international settings, etc.

Note that the Public Health Leadership Program does not provide resources for practicum experiences. “Scholarship” resources, however, may defray the student’s expenses and allow the student to participate in a practicum experience. Students are not prohibited from participating in a practicum that pays a small stipend.

C. Working with the Practicum Preceptor

The practicum preceptor is a vital part of the practicum experience. His/her responsibilities are as follows:

1. Assist student with his/her learning objectives to determine scope of practicum;
2. Orient the student to the experience, its structure, and the key people with whom the student will be relating;
3. Serve as the student’s key liaison at the practicum experience;
4. Meet regularly with the student to provide guidance and direction;
5. Provide adequate workspace for the student;
6. Communicate with the faculty advisor to monitor the practicum experience as needed; and
7. Complete an evaluation form at the end of the practicum.

D. At the Conclusion of the Practicum

1. Students complete an evaluation form about their practicum experience; the practicum supervisor completes an evaluation form on the student.
2. Students write a 1-2 page report on the practicum experience, describing what they intended to do, to what extent they were able to achieve their learning objectives (if not achieved, why not), and a general assessment of how their experience went. These reports are good feedback to the preceptor and are also very useful for the program coordinator in developing and maintaining a list of high-quality practicum sites. The report should be submitted to the faculty advisor, the practicum preceptor, and the registrar.
3. Students must also complete a post-practicum version of the online School of Public Health Practicum Form (<http://www.sph.unc.edu/forms/practicum>) to document any changes in dates, hours, activities, or competencies achieved (compared to those the student planned to achieve).

Oral Presentation

Topic: Students must give an oral presentation on an important topic in health care during the MPH year. Many people choose to focus on either their practicum or Master's Paper, but this is not required. A work-in-progress may also be appropriate.

Purpose: The presentations will be no more than 10 minutes long, with 5 minutes for questions and feedback. The purpose of the oral presentation exercise is to help people practice and improve their skills at communicating orally. Thus, the point of the question and answer period is to learn how to improve your communication skills. The actual topic/content is of secondary importance.

Outline: Many (but not all) topics will lend themselves to the following outline:

1. organization of the talk – what you plan to talk about;
2. background of the problem you're addressing;
3. the goals/objectives for the experience/paper (i.e., what you wanted to learn from doing this);
4. methods used/to be used (i.e., how you did/will accomplish your goals/objectives);
5. results (i.e., what you learned or anticipate learning);
6. conclusion (i.e., what it means, how it fits with work others have done, what is to be done from here to continue work on this problem)

Technology: We encourage a one-page handout at the end of the talk; you may use overheads, slides, or a PowerPoint presentation. Other topics may require a different outline. It is important, however, to have an organized approach to your talk.

Keep in mind these points:

1. do not put too much on one slide
2. do not try to say more than you have time for
3. speak slowly and distinctly
4. leave time for questions and comments

The oral presentation is a requirement for receiving the HC&P MPH degree. Opportunities to present your work will be offered in May and June. Students are required to attend the entire session of oral presentations for which they are signed up, not just their own presentation, to support one another, learn about their student colleagues' work, and learn to give feedback.

NOTE: In-class presentations or any presentation made to fulfill course requirements do not satisfy the HC&P oral presentation requirement, nor do presentations made at another venue. All students must present at the scheduled HC&P oral presentation days in May or June.

Comprehensive Examination

The comprehensive examination is scheduled two times each year, usually one date in April and one date in May. Dates are announced at the beginning of each semester on the HC&P Blackboard site and in email reminders to students. We encourage students to take the comprehensive exam close to the time they have completed most of their coursework. NOTE: Students must be registered for the semester in which they take the exam. It is an all-day, written examination, open-book (students may use any and all resources, and should provide citations to any references they use). Students must notify the PHLP registrar of their intention to take the exam at least 3 weeks prior to the scheduled date, pick up the exam on the morning of the assigned day, and return the exam to the registrar by 5:00 p.m. on the assigned day.

The exam is designed to assess the student's basic understanding of the core concepts in the HC&P MPH degree and provide an opportunity for the student to demonstrate mastery of the program's core competencies (see above). Students must answer 3 of 5 questions addressing these competencies. Passing answers will demonstrate a thorough grasp of the concepts, background, and tools necessary to answer the questions. The exam is graded (pass or fail) by the Director and Co-Associate Directors of the HC&P program acting as a committee. The student must pass each of the 3 questions. If the student fails a question, he/she must have an oral examination by the directors of the HC&P program. The student who fails the oral examination must wait for at least one month and retake a written examination in the failed areas. Each student must pass the comprehensive examination to receive the MPH degree.

Students have commented in the past that the comprehensive exam requires the entire day to complete. Students should pick up the exam promptly early on the morning of the exam. It **MUST** be returned by 5:00 p.m. that day. Turning in the exam late may mean failure on the exam.

What Is the Minimum Required to Pass the Comprehensive Examination?

You must take the comprehensive examination seriously (as you would one of your medical school Board Exams). Along with your Master's Paper, the comprehensive exam is your final chance to demonstrate to the School of Public Health that you have acquired the knowledge, skills, and level of expertise required of a public health professional. Therefore, in order to receive a passing grade on the exam, your written answer to at least one of your chosen questions must demonstrate a sophisticated understanding of the particular subject area of public health and reflect mastery (hence the name *Master's* degree) level thinking. While your answers to the other two questions need not reflect the same degree of mastery, they nevertheless must reflect your comprehension of most (we use 70% as the minimum) of the concepts applicable to the particular public health subject area.

Advising

We believe it is important for students to develop a relationship with at least one faculty member during their time in the HC&P program. This is someone that the student can go to with any type of concern, including academic problems, career counseling, problems of living (which we all have), etc. Most important is finding an advisor who is a good “fit” for the student. Sometimes, students already have faculty members, either at UNC or elsewhere, who can serve this function. We encourage students who can to choose their own advisors, but to let the HC&P program know who this is. If you have no idea whom to choose as an advisor, or if you need suggestions, please let us know. We are happy to help students find the right advisor. The advisor does not need to be a faculty member in the School of Public Health (or even the School of Medicine).

Sometimes the first advisor the student chooses does not work out, for some reason. It is okay for the student to change advisors at any time during the year. We do expect that the student will let the HC&P office know about any change in advisor.

The “backup” advisor for all students is the HC&P Director (Russ Harris) and Co-Associate Directors (Sue Tolleson-Rinehart and Anthony Viera). We are always available to discuss any issues that come up with students. If an issue may have an impact on the student’s academic performance, we ask that one of these program leaders be contacted in addition to the advisor.

Advisors should also play an important role in selecting a topic for the Master’s Paper and an experience for the practicum (see above). For these situations, the student may have initial discussions with the faculty advisor but may also decide to choose another advisor to work with more closely for these projects. The “lead advisor” for the Master’s Paper is also the first reader of the paper. The “lead advisor” for the practicum may also be the practicum preceptor.

Course Advising

Advisors may or may not know much about which School of Public Health courses would be most useful for the student. It is fine to discuss this issue with advisors, but we suggest you also discuss this with the program leaders. For all students, decisions about spring courses are best made by late October, so you will be prepared when the registration period opens in early November. In October, we will have a group session for students to discuss spring courses.

Meetings with Advisors

It is the responsibility of the student to contact and set up meetings with the advisor. The advisor may not pro-actively contact the student at all. Although everyone is busy, advisors are interested in talking with you regularly. We suggest that you meet with your advisor at least twice each semester, and more often if the advisor is also involved with your Master’s Paper or practicum.

School of Medicine Credit for MPH Work

The UNC School of Medicine will allow the transfer of 1 month of elective credit (up to 6 credit hours) from the School of Public Health for medical students who complete their MPH degree requirements and graduate in August of the term in which they return from Leave to the medical school curriculum.

Returning to the School of Medicine

The HC&P program and the UNC School of Medicine encourage medical students to complete their MPH requirements before returning to the School of Medicine. To allow adequate time to complete the practicum and master's paper requirements, we strongly recommend that students plan to return to the School of Medicine in July. (Note that for August graduation, the completed master's paper must be submitted by early to mid July.)

Students will not be approved to register for the School of Medicine's block 0 rotation in June unless they have completed all MPH requirements.

Section V. Occupational Health Nursing

Occupational Health Nursing Concentration

The Occupational Health Nursing (OHN) Concentration provides interdisciplinary education, training, and research experiences as appropriate to occupational health nursing. The mission of the Program is to provide education and training in occupational health nursing and encourage research in occupational and environmental health and related fields to promote worker health and safety. It is achieved through an interdisciplinary curriculum that supports the science and disciplinary development of the occupational health nursing specialty and application of the occupational health and safety knowledge acquired into practice.

- ❖ The **MPH** program in Occupational Health Nursing, using a theoretical and conceptual framework, prepares occupational health nurse specialists for leadership/management positions in industry, government, and other occupational health settings, to act as consultants to business, industry, and government, and to provide program planning and evaluation expertise. The program is offered on-campus or through distance education.
- ❖ The **MS** program in Occupational Health Nursing, using a theoretical and conceptual framework, prepares graduates as described in the MPH curriculum above but also emphasizes research skill development as beginning researchers. The MS program is available on-campus only.
- ❖ The **OHN Certificate Program** is an academic program of study. Students take 11-12 credits in coursework that has been specially developed for distance education. All credits earned are completely transferable (for 10 years) that can be used to meet the requirements for the completion of the OHN Concentration MPH degree.

OHN Concentration Objectives

1. Provide MPH training both on-campus and via distance education and on-campus MS degree education.
2. Provide OHN Certificate program via distance education.
3. Provide interdisciplinary learning opportunities and experiences.
4. Provide integrated/applied learning through practicum experiences.
5. Provide opportunities for scholarly demonstration of knowledge learned (e.g., master's paper publications, presentations).
6. Offer continuing education/outreach to the occupational safety and health community.
7. Provide research training (MS degree).

Course Content

Occupational health nursing course content uses an occupational health nursing model based on system's theory developed by the Program Director to emphasize OHN roles, worksite assessment, interdisciplinary functioning, health promotion and prevention, management theory and functions, program planning and evaluation, and administration including cost-benefit/effectiveness in occupational settings.

Most courses are offered in both distance and residential formats. Residential students are eligible to take any PHLP online courses. However, the Gillings School of Global Public Health online core courses are only rarely available to residential students, and only after receiving special permission of the instructor and the SPH registrar.

OHN Concentration Competencies

In 2004, the Occupational Health Nursing Faculty developed 12 competency statements, with several indicators identified for each competency, which OHN graduates should be able to demonstrate upon completion of the program. Each area has three levels of competency, demonstrated by being competent, proficient, or expert. The competencies are listed below.

1. Fosters collaborative practice as a member of the interdisciplinary team with emphasis on occupational health and safety areas.
2. Uses written, oral, and technological strategies to communicate effectively with individuals, groups, and communities about occupational health and safety issues.
3. Develops, implements, and evaluates comprehensive occupational health and safety programs and services for diverse client populations.
4. Assumes occupational health nursing leadership role in business, academia, government, and in the community.
5. Utilizes critical and creative thinking to identify trends in health and health care that impact workers and communities and determine appropriate intervention and prevention strategies.
6. Influences policy development and its implications on business, legislation/regulation, health care, occupational health and safety issues, and the environment.
7. Understands the importance of utilizing research findings to advance occupational health nursing practice.
8. Demonstrates effective skills in planning, financial management, organizing, staffing, directing, and evaluating health, safety, and environmental programs and services consistent with corporate culture, business objectives, and population needs.
9. Utilizes knowledge from occupational health sciences to assess and control exposures in work environments.
10. Applies epidemiologic and environmental health knowledge and concepts to occupational health nursing practice.
11. Applies ethical decision making principles, personal values and beliefs, and ethical behavior in situations requiring judgment.
12. Engages in ongoing and lifelong professional development and develops advanced occupational health nursing skills to improve professionalism in occupational health and safety.

MPH Program Requirements

Introduction

Information about the University of North Carolina at Chapel Hill Graduate School degree requirements and important policies and procedures is published annually in *the Graduate School Handbook* and guidebooks which can be accessed at: <http://handbook.unc.edu/pdf/handbook.pdf>. The following guidelines for the MPH degree were developed to conform to the Gillings School of Global Public Health and University requirements.

To earn the Master of Public Health (MPH) degree (distance education) in the OHN Concentration, students are required to meet SPH core course requirements, the public health/occupational health nursing core courses, occupational health cognate courses, which also help develop basic competency in the public health core function areas of assessment, policy development, and assurance. Field practicum/s designed to complement academic study, a Master's Paper (MPH), passing the written comprehensive examination, and certifications in first aid, CPR/AED Instructor, hearing conservation, spirometry, and CITI Course in the Protection of Human Research Subjects complete the curriculum. Students can enroll and complete the program full-time (1½ years) or part-time (2-3 years), but have 5 years from admission to complete the program of study. The MPH course of study requires a minimum of 42 credit hours.

The Occupational Health Nursing Concentration (MPH and MS degrees) and the Public Health Nursing Focus Area are accredited by the National League for Nursing Accrediting Commission, Inc. (NLNAC), 3343 Peachtree Road, NE, Suite 500, Atlanta, GA 30326; 404-975-5000. The Gillings School of Global Public Health is accredited by the Council on Education for Public Health (CEPH).

OHN MPH Requirements At-a-Glance

Credit hours	at least 42
Courses	5 SPH core courses (15 credits)
	Public Health/Occupational Health Nursing core courses (11 credits)
	Occupational Health Cognate courses (11 credits)
Master's paper	3 credits
Field practicum/a	3 to 7 credits*
Certifications	Cardiopulmonary Resuscitation (CPR), AED, and First Aid Spirometry Hearing Conservation CITI Course in the Protection of Human Research Subjects
Comprehensive Exam	0 credits (must be registered to take exam)

* NOTE: Requirements and credit hours in these areas may vary by OHN experience

Required Courses in Assessment, Policy Development, & Assurance

In addition to taking the mandatory Gillings School of Global Public Health core courses, all PHLP MPH students are required to complete at least one course each in assessment, policy development, and assurance. The OHN program of study fulfills this requirement as shown below.

OHN Required Courses Meeting PHLP Core Competencies

Core Competency	Course No.	Title
Assessment	ENVR 422	Air and Industrial Hygiene
	ENVR 432/PHNU 786	Occupational Safety and Ergonomics
	PHNU 781	Occupational Health Nursing I
	PHNU 782	Occupational Health Nursing II
	PHNU 787	Fundamentals of Industrial Hygiene
	PUBH/PHNU 785	Interdisciplinary Approaches to Occupational Health
Policy Development	PUBH/PHNU 748	Policy Development
Assurance	ENVR/PHNU 423	Industrial Toxicology
	PHNU 744	Roles and Functions in Public Health Nursing
	PHNU 781	Occupational Health Nursing I
	PHNU 782	Occupational Health Nursing II
	PUBH/PHNU 746	Program Planning and Evaluation

Elective Courses

Students will complete their degree course requirements by taking electives in the Gillings School of Global Public Health and the greater University in order to fulfill the 42-credit hour requirement (MPH) and 45-credit hour requirement (MS). Electives may be used to expand the breadth of an individual course of study or to provide depth in a particular area. Students will develop an approved course of study with their advisor during their first semester in the program. It should be noted that some students will have fewer elective credits available depending on their course and mode of study.

Sample Course of Study (MPH)

Sample course of study for the MPH OHN Program on-campus option is listed below. Students should always consult with their advisor before registering for any courses, because each course plan should be tailored to the student's goals. **Minimum credits required for graduation = 42**

Year 1

Summer (Fall Registration)	Fall	Spring
PHNU 781 (3) ²	EPID 600 (3) BIOS 600 (3) HPM 600 (3) ENVR 432/PHNU 786 (3) PHNU 783 (2)*	HBHE 600 (3) ENVR 600 (3) ENVR/PHNU 423 (3) PHNU 784 (2)* PUBH/PHNU 746 (3) ¹ PUBH/PHNU 785 (3)

Year 2

Summer (Fall Registration)	Fall	Spring
PHNU 782 (3) ² PHNU 886 (3)	PUBH/PHNU 748 (2) ¹ ENVR 422 (3) or PHNU 787 (2) PUBH 992 (3)	

1 = Internet based

2 = On-Campus course (1 week; however course completion extends throughout semester)

Note:

- This format is fluid and is constructed as a guide to which course offerings may vary in the semester in which they are offered.
- The program of study can be completed in 1½ to 2 years as outlined above. However, you have 5 years from admission within which the program must be completed.
- Independent study/transfer in credit (20% of total program credits may be transferred in with approval)

Certifications

- CITI Course in Protection of Human Research Subjects (**first year**)
- CPR, AED, & First Aid (anytime)
- Spirometry (anytime)
- Hearing Conservation (anytime)

Course	Hours	Title
BIOS 600	3	Fundamentals of Biostatistics/Principles of Statistical Inference
ENVR 600	3	Environmental Health
ENVR 422	3	Air and Industrial Hygiene
ENVR/PHNU 423	3	Industrial Toxicology
ENVR 432/PHNU786	3	Occupational Safety and Ergonomics
EPID 600	3	Principles of Epidemiology
HBHE 600	3	Social and Behavioral Sciences in Public Health
HPM 600	3	Introduction to Health Policy and Management
PHNU 744	3	Roles and Functions of Public Health Nursing
PHNU 781	3	Occupational Health Nursing I
PHNU 782	2	Occupational Health Nursing II
PHNU 783*	2	Occupational Health Nursing Field Practicum I
PHNU 784*	3	Occupational Health Nursing Field Practicum II
PHNU 787	2	Fundamentals of Industrial Hygiene
PHNU 886	3	Field Practice in Public Health
PUBH 740	1-3	Special Issues in Public Health Practice
PUBH/PHNU 746	3	Program Planning and Evaluation
PUBH/PHNU 748	2	Policy Development
PUBH/PHNU 785	3	Interdisciplinary Approaches to Occupational Health
PUBH 992	3	Master's Paper

* PHNU 783/784 required for students without occupational health nursing experience

Master's Paper (MPH Degree Only)

Each OHN MPH student is required to complete a Master's Paper, which demonstrates synthesis of knowledge, and advances or contributes to the field of occupational health. The paper should also represent the independent effort of the student. Students **must be registered** for PUBH 992, 3 credits, **during the semester the paper will be completed.**

Topic and Paper Outline

The Master's Paper concept and substance **must be discussed** with and approved by the student's primary reader and in some cases the second reader depending on the content area of the paper. A detailed outline must be submitted to the student's primary master's paper reader for approval of the proposed concept/content. This must be done prior to submitting the first draft of the paper. The outline may take several drafts and should follow the paper format, (i.e., 5 chapters). All outline pages must be numbered. The student must allow for sufficient lead time for completion and approval of the outline prior to starting the paper. Examples of previous OHN Master's Papers are available for review in the OHN Program or from the PHLP Registrar.

Readers

The student is required to have two readers for the master's paper. The student's academic advisor is usually the primary reader; however, the student may negotiate a different primary reader with approval of the advisor. The second reader should be identified early, **by the student**, and may be another faculty member with relevant expertise or adjunct faculty. It is the student's responsibility to obtain both the primary and second readers.

Paper

- ❖ Review carefully and follow the Overview Guidelines for the Occupational Health Nursing Program Master's Paper. You will receive a copy of these guidelines.
- ❖ The first draft of the paper must be received by the student's primary reader **AT LEAST 6 months before anticipated graduation.**
- ❖ The student should expect to complete a minimum of three drafts for review and comment by the primary master's paper reader before the paper is submitted to the second reader. It generally takes faculty 2-3 weeks to review and comment on each draft of the paper.
- ❖ Please remember you will have at least two readers for the master's paper and will need to allocate your time accordingly in order to meet deadline dates.
- ❖ Typically a final paper is 60 - 85 pages in length.
- ❖ Students are strongly encouraged to submit their master's papers for publication and should do so with the faculty advisor and reader of their paper, all who would be co-authors.

Deadlines for Submission

The final, signed Master's Paper must be submitted to the Public Health Leadership Program Registrar approximately three to four weeks before the end of the semester in which the student expects to complete the paper. The Graduate School establishes the deadline for the Master's Paper/Thesis each semester. General deadlines are: mid-April (May graduation), early to mid-July (August graduation), and late-November (December graduation). **Check specific deadline dates with PHLP Registrar at 919-966-5305. Contact the Program Registrar for exact dates for each semester.**

Submit 2 or 3 copies of the final, signed paper to your advisor:

- One *electronic copy* goes to the registrar by email (your advisor will tell you when the paper is **FINAL**)
- One hardcopy to OHN Program Director for NIOSH
- One hardcopy to primary reader, if different from Program Director
- One hardcopy to second reader, if different from Program Director

Your advisor will supply the binders for the remaining copies. Follow the directions for typing the information for the spine label. When you type the spine label, it should include Date (Year only), Title of Paper, and Your Name (Last Name, First Name).

Format

In general, the latest edition of the American Psychological Association (APA) Publication Manual will be your source for writing your paper. However, the final structure and format of the paper will be determined by faculty.

Human Subjects Review

All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even “non-invasive” actions such as asking questions on a survey may require IRB review and approval. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://ohre.unc.edu/>. UNC IRB training *must* be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <https://www.citiprogram.org/default.asp?language=english>. No data should be collected until full IRB approval has been received.

NOTE: Failure to comply with IRB regulations may prevent or delay graduation.

Master's Paper Title Page

**Combining Population and Individual
Health Education Perspectives**

By

Jane Smith

A Master's Paper submitted to the faculty of the
University of North Carolina at Chapel Hill
in partial fulfillment of the requirements for the degree of
Master of Public Health
in the Public Health Leadership Program.

Month Year

[Signature]

Advisor

[Printed name]

[Signature]

Second Reader

[Printed name]

MS Program Requirements

Introduction

Information about the University of North Carolina at Chapel Hill Graduate School degree requirements and important policies and procedures is published annually in *the Graduate School Handbook* and guidebooks which can be accessed at: <http://handbook.unc.edu/pdf/handbook.pdf>. The following guidelines for the MS degree were developed to conform to School of Public Health and University requirements.

The Master of Science (MS) degree is offered in Public Health Nursing with a concentration in Occupational Health Nursing. The residential program of study prepares graduates in program planning and evaluation, with emphasis on the development of research skills as beginning researchers. The MS course of study requires a minimum of 45 credit hours and can be completed in 2-2½ years of full-time study. Students have 5 years from admission to complete the program of study. Three of the SPH core courses are required in epidemiology, biostatistics, and environmental health sciences. Two additional courses are required in research methods and statistics for research skills development. The remaining course requirements are the same as the MPH requirements.

The Occupational Health Nursing Concentration (MPH and MS degrees) and the Public Health Nursing Focus Area are accredited by the National League for Nursing Accrediting Commission, Inc. (NLNAC), 3343 Peachtree Road, NE, Suite 500, Atlanta, GA 30326; 404-975-5000. The Gillings School of Global Public Health is accredited by the Council on Education for Public Health (CEPH).

OHN MS Requirements At-a-Glance

Credit hours	at least 45
Courses	3 SPH core courses (9 credits) Public Health/Occupational Health Nursing core courses (15 credits) Occupational Health Cognate courses (11 credits)
Master's Thesis	3 to 9 credits
Field practicum/a	3 to 7 credits*
Electives	4 credits
Certifications	Cardiopulmonary Resuscitation (CPR), AED, and First Aid Spirometry Hearing Conservation CITI Course in the Protection of Human Research Subjects
Comprehensive Exam	0 credits (must be registered to take exam)

* NOTE: Requirements and credit hours in these areas may vary by OHN experience

Sample Course of Study (MS)

Sample course of study for the MS OHN Program on-campus option is listed below. Students should always consult with their advisors before registering for any courses, because each course plan should be tailored to the student's goals. **Minimum credits required for graduation = 45**

Year 1

Summer (Fall Registration)	Fall	Spring
PHNU 781 (3)	EPID 600 (3) BIOS 600 (3) PHNU 783 (2)* HBHE 750 (4)	ENVR 600 (3) ENVR/PHNU 423 (3) PHNU 784 (2)* PUBH/PHNU 785 (3)

Year 2

Summer (Fall Registration)	Fall	Spring
PHNU 782 (3) PHNU 886 (3)	PUBH/PHNU 748 (2) ENVR 422 (3) or PHNU 787 (2) ENVR 432/PHNU 786 (3) Elective (3)	BIOS 545 (3) PUBH 993 (3) Elective (1)

Certifications

- CITI Course in Protection of Human Research Subjects (**first year**)
- CPR, AED, & First Aid (anytime)
- Spirometry (anytime)
- Hearing Conservation (anytime)

Course	Hours	Title
BIOS 600	3	Fundamentals of Biostatistics/Principles of Statistical Inference
BIOS 545	3	Principles of Experimental Analysis
ENVR 600	3	Environmental Health
ENVR 422	3	Air and Industrial Hygiene
ENVR/PHNU 423	3	Industrial Toxicology
ENVR 432/PHNU 786	3	Occupational Safety and Ergonomics
EPID 600	3	Principles of Epidemiology
HBHE 600	3	Social and Behavioral Sciences in Public Health
HBHE 750	4	Applied Research Methods
HPM 600	3	Introduction to Health Policy and Management
PHNU 744	3	Roles and Functions of Public Health Nursing
PHNU 781	3	Occupational Health Nursing I
PHNU 782	3	Occupational Health Nursing II
PHNU 783*	2	Occupational Health Nursing Field Practicum I
PHNU 784*	2	Occupational Health Nursing Field Practicum II
PHNU 787	2	Fundamentals of Industrial Hygiene
PHNU 886	3	Field Practice in Public Health
PUBH 740	1-3	Special Issues in Public Health Practice
PUBH/PHNU 746	3	Program Planning and Evaluation
PUBH/PHNU 748	2	Policy Development
PUBH/PHNU 785	3	Interdisciplinary Approaches to Occupational Health
PUBH 993	3	Master's Thesis

* PHNU 783/784 required for students without occupational health nursing experience

Note: Students are required to complete the 45 credit minimum through elective courses. While PHNU 744 (Roles and Functions of Public Health Nursing) and PUBH/PHNU 746 (Program Planning and Evaluation) are recommended as electives, students are encouraged to select courses that meet specific learning needs.

Thesis (MS Degree Only)

Each OHN MS student is required to complete a thesis which demonstrates synthesis of knowledge, and advances or contributes to the field of occupational health. The thesis should also represent the independent effort of the student. Students **must be registered** for PHNU 993, 3 credits, **during the semester the paper will be completed.**

Topic and Thesis Proposal

The thesis concept and substance **must be discussed** with and approved by the student's thesis advisor and committee members. A written proposal must be submitted to the student's thesis committee for approval of the proposed concept/content followed by a proposal defense. The student is responsible for organizing the logistics of the proposal defense. An IRB application must also be completed by the student for approval of the research. The research may not begin prior to approval by both the thesis committee and IRB. Examples of previous OHN MS Papers are available for review in the OHN Program Office or from the PHLP Registrar.

Committee

A committee of at least three members approves any thesis required and administers any oral examination that may be given. A majority of the persons signing a master's thesis must be regular members of the UNC-Chapel Hill Graduate Faculty from the OHN Program. Other members may be special appointees to the Graduate Faculty. The committee is normally appointed by the academic program director, after consultation with the student. At least one committee member is named thesis advisor.

Thesis

- ❖ Review carefully and follow the Overview Guidelines for the Occupational Health Nursing Program. You will receive a copy of these guidelines. Also review *A Guide to Theses and Dissertations* (<http://gradschool.unc.edu/etdguide/pdf/etdguide.pdf>).
- ❖ The first draft of the thesis must be received by the student's primary reader **AT LEAST** 6 months before anticipated graduation.
- ❖ The student should expect to complete a minimum of three drafts for review and comment by the thesis advisor before the paper is submitted to the other committee members. It generally takes faculty 2-3 weeks to review and comment on each draft of the thesis.
- ❖ Please remember you will have at least three thesis committee members to read the paper and will need to allocate your time accordingly in order to meet deadline dates.
- ❖ Typically a final paper is 85 - 125 pages in length.
- ❖ Students are strongly encouraged to submit their master's thesis for publication and should do so with the faculty advisor and readers of their paper, all who would be co-authors.

Final Oral Defense

A final oral defense is scheduled after all members of the committee have had opportunity to review the written thesis. The student is responsible for determining that the thesis is in appropriate form for committee evaluation. If substantial revisions are necessary, they should be completed before the final oral defense is scheduled. The committee may, at the time of the final oral but no later, require alterations and corrections. All committee members are expected to be present at the defense. Questions that relate the thesis to the field are appropriate. A thesis is accepted only after the approval of at least two-thirds of the examining committee members.

Deadlines for Submission

The final, signed Master's Thesis must be submitted to the Public Health Leadership Program Registrar approximately three to four weeks before the end of the semester in which the student expects to complete the paper. The Graduate School establishes the deadline for the Master's Paper/Thesis each semester. General deadlines are: mid-April (May graduation), early to mid-July (August graduation), and late-November (December graduation). **Check specific deadline dates with PHLP Registrar at 919-966-5305. Contact the Program Registrar for exact dates for each semester.**

Format

The Graduate School will accept only theses produced according to the standards in *A Guide to Theses and Dissertations* (<http://gradschool.unc.edu/etdguide/pdf/etdguide.pdf>). In general, the latest edition of the American Psychological Association (APA) Publication Manual will be your source for writing the paper. Review the guidelines carefully as an electronic copy is submitted. All committee members should receive a final copy.

Human Subjects Review

All research which involves collection or analysis of data from human subjects must be reviewed by the School's Institutional Review Board (IRB) for Research Involving Human Subjects. Even "non-invasive" actions such as asking questions on a survey may require IRB review and approval. The purpose of this review is to determine whether adequate procedures for informed consent have been followed and adequate protection provided for subjects at risk.

Instructions and forms may be obtained from the IRB website: <http://ohre.unc.edu/>. NC IRB training *must* be completed in advance of requesting approval and advisors should be involved in preparation of the IRB application and provide their signature on the form. Students and advisors must also have completed the IRB certification. Details and procedures for completing this mandatory, on-line, Collaborative IRB Training Initiative (CITI) can be attained at <https://www.citiprogram.org/default.asp?language=english>. No data should be collected until full IRB approval has been received.

NOTE: Failure to comply with IRB regulations may prevent or delay graduation.

Practica Experience

Field practica or training is a planned and supervised experiential component of the academic program which provides learning opportunities not available in the classroom. The purpose and potential benefits of the field practicum are to relate theoretical classroom learning to practice situations; gain experience, skills and confidence in dealing with administrative, and/or service problems; explore and increase understanding of the structure and dynamics (e.g., agency objectives, goals, values, resources, constraints, etc.) of the setting in which the OHN student is working and the influence of occupational health/safety; and identify work-related health problems for intervention, prevention, and control. This is perhaps one of the best learning experiences offered and is not only completed in traditional industry settings but also in government, professional associations, agricultural, and hospital employee health settings.

The preceptor and faculty assume primary responsibility for facilitating the student's learning during the practica. This means identifying those resources, experiences, projects, activities, etc. that are available to assist the student in meeting the learning objectives which are approved by the faculty advisor. While the academic faculty has the primary responsibility for managing the field practicum, the student as a self-directed learner and the preceptor as an expert in his/her functional role, guide the learning process.

PHNU 783 and 784

Students may have a concurrent academic year practicum, one day each week, (PHNU 783 and 784) depending on previous occupational health experience. PHNU 783 is designed to offer students without experience the opportunity to learn about the role and functions of the OHN within the context of the work environment. PHNU 784 follows with the opportunity to increase their knowledge about developing occupational health and safety services. Emphasis is placed on learning about managerial and administrative components of the occupational health unit within the overall work environment. Each practicum experience is uniquely tailored to the student's needs, interests, and professional growth and is planned jointly by the student, faculty, and field course preceptors.

Practicum sites and resource field people will generally be selected and arranged for by the OHN practicum instructor; however, students may select practicum sites with faculty approval. Detailed information about the objectives and specific requirements are on the course syllabi.

PHNU 886

All students are required to complete a concentrated practicum (PHNU 886), which generally lasts five to eight weeks. This practicum enables them to develop and implement advanced OHN practice projects (comprehensive program/administrative project) and synthesize the practice within their functional roles.

Specific field training objectives are individually planned and tailored to the student's needs and are planned jointly by the student, faculty field practicum instructor, and preceptor. Detailed information about course objectives and requirements are specified in the course syllabus.

All students must complete the practicum form which is available at <http://www.sph.unc.edu/forms/practicum/> at the time you start your practicum and **again** when you finish it.

When the practicum is over, you will complete this same form online, indicating which competencies you achieved, and also modifying the description of your practicum if it changed substantially from what you anticipated. **Your course grade cannot be assigned until this step is completed;** this is a requirement of the Gillings School of Global Public Health.

Section VI. Courses, Faculty and Organization of Public Health Leadership

Faculty and Organization of the Public Health Leadership Program

The Public Health Leadership Program is guided by a committee of senior advisors and the Interdisciplinary Curriculum Committee (for structure, see chart, p. 112). The Interdisciplinary Curriculum Committee is composed of faculty from departments within the School and focuses on the operational challenges of the curriculum.

Academic Advising

(Note: Health Care and Prevention advising operates differently—see p. 79)

Within the Public Health Leadership Program, each student is assigned a faculty advisor prior to the first semester of his or her program. Initial student-advisor meetings are ordinarily scheduled during the orientation/registration period. Advisors must meet or communicate with students at least once per semester before registration. Advisors must have completed the IRB on-line certification at <http://research.unc.edu/ohre/educ.php>

The PHLP Policy on Academic Advising is:

1. The academic advisor is responsible for:
 - ♦ collaborating with the student on overall program planning and selection of specific courses;
 - ♦ primary guidance on the Master's Paper, including active participation in establishment of a primary goal and approval of an additional reader with expertise relevant to the topic and complementary to that of the advisor; and
 - ♦ primary responsibility for approving and facilitating field experiences.
2. In some circumstances, students may request to change advisors. A student contemplating such a change should:
 - ♦ discuss the proposal with his/her current advisor;
 - ♦ discuss the proposal with the potential new advisor; and
 - ♦ meet with the Director of Graduate Studies or the director of his/her concentration program.
3. Any exceptions to the Policy on Academic Advisement must be approved by the Director of PHLP.

PHLP/PHNU Courses

PHLP offers a variety of distance learning courses that can be used by students to fulfill their requirements for their focus areas, credits in assessment, policy development and assurance, PHLP Core courses, Leadership credits, and electives. Each course is taught by faculty with special expertise in the curricular area represented.

PUBH 420 - AIDS: PRINCIPLES AND POLICY (1). Elective course jointly given by the Schools of Dentistry, Public Health, Nursing, Pharmacy and Medicine designed to provide a multifaceted understanding of social, clinical and biological aspects of the AIDS epidemic. Spring and summer, Strauss.

PUBH 423 - AIDS SERVICE (1). This course will integrate community service into the Campus-wide AIDS course. Students will work as volunteer interns three to five hours per week for 10 weeks during the semester with Triangle-area community service organizations. Spring, Strauss.

PUBH 496 - READINGS IN PUBLIC HEALTH PRACTICE (Variable). Intensive study of a special problem in public health practice. Fall, spring and summer, Staff.

PUBH 500 - GLOBAL HEALTH DISCUSSION SERIES (.5). The *Global Health Discussion Series* is required of all students pursuing the Graduate Certificate in Global Health and students must register and attend 2 semesters of the course. The course meets in the evening for one and a half hours, 5 times a semester. Each session in the series will have a thematic frame that guides facilitated discussion. Formats might include: presentations, showing and discussion of a documentary, discussion of a news report, discussion of a book chapter or article, or, attending a special campus speaker's presentation or event. This course is only open to students pursuing the Graduate Certificate in Global Health. Fall and spring, Fried.

PUBH 510 - INTERDISCIPLINARY PERSPECTIVES IN GLOBAL HEALTH (3) This course will explore contemporary issues, problems, and controversies in global health through an interdisciplinary perspective; examine the complex tapestry of social, economic, political, and environmental factors that affect global health; analyze global health disparities through a social justice and human rights lens; and expose students to opportunities in global health work and research. Residential only. Fall. Bentley.

PUBH 600 - INTRODUCTION TO THE UNITED STATES HEALTH SYSTEM (3). An introduction to the fundamental organization, behavior, financing, and challenges of the health system of the United States. The course treats the entire edifice of American health care as "the American health system," and intends to examine it in toto, including by comparing it to other national health systems, and in part, by examining critical components of the system. Fall and summer, Tolleson-Rinehart.

PUBH 610 - INTRODUCTORY SPANISH FOR HEALTH PROFESSIONALS (3). This course is designed to provide undergraduate and graduate health professional and

social work students with introductory-level Spanish skills the opportunity to develop their oral communication skills with their Latino patients and clients. The majority of the work is done via a DVD-ROM, a web component and a textbook/workbook. Students will have access to their instructor and fellow students during a weekly in-class meeting and via email and web. The course is for students with no prior or limited Spanish skills.

PUBH 613I - INTERMEDIATE SPANISH FOR HEALTH CARE 1 (AHSC613I) (DENT613) (MEDI613) (NURS613I) (PHCY613I) (SOWO613I) (3). Prerequisites, college-level Spanish 2, a minimum score on a self-assessment test available on the Web, and permission of instructor. This primarily e-learning course provides public health students with the opportunity to improve their oral communication skills in Spanish at the intermediate level via DVD, Web, and workbook. Instructor-led. Online course. Fall, spring and summer. Instructors from the UNC-Chapel Hill.

PUBH 615I - ADVANCED SPANISH FOR HEALTH CARE 1 (AHSC615I) (DENT615) (MEDI615) (NURS615I) (PHCY615I) (SOWO615I) (3). Prerequisite, college-level Spanish 3, a minimum score on a self-assessment test available on the Web, and permission of instructor. This primarily e-learning course provides public health students with the opportunity to improve their oral communication skills in Spanish at the advanced level via DVD, Web, and workbook. Students who meet the criteria but are still not sure if the course is right for them can view a video accessible on the Web along with a sample from the workbook to determine if the course materials are a good match for their abilities. Instructor-led. Online course. Fall, spring, summer. Instructors from the UNC-Chapel Hill Department of Romance Languages.

PUBH 670 - INTRODUCTION TO CLINICAL RESEARCH - Part 1 (3). Designed to give the undergraduate student an overview of clinical research methods. Students carry actual research projects through from conception to completion. The class will be divided into working teams who will each tackle a research project. Permission of the instructor required. Fall, Brice.

PUBH 671 - INTRODUCTION TO CLINICAL RESEARCH - Part 2 (3). Designed to give the undergraduate student an overview of clinical research manuscript writing. Students continue to collect data for the clinical research projects begun last semester. The emphasis of this class is transforming book learning into practical application. Permission of the instructor required. Spring, Brice.

PUBH 680 - PUBLIC HEALTH PRACTICE (3). A comprehensive introduction to public health concepts and practice that examines the philosophy, mission, history, organization, and services of public health systems functioning at the global, national and community levels. Online course. Fall, Lesneski.

PUBH 690 - SPECIAL STUDIES (1-3). Permission of instructor required. Sections will focus on specific topics of current interest to health workers. Fliers describing the section offering will be distributed prior to registration each semester. Lecture hours per week dependent upon credit. Fall, spring and summer, Staff.

PUBH 690 RESEARCH METHODS FOR PUBLIC HEALTH PRACTICE (3), Section 001. This course is designed to provide students with the fundamental mental research and analytic methods needed by public health leaders to assess the effectiveness, efficiency and equity of healthcare in order to improve population health. The focus will be on research skills needed by practitioners with the objective of improving health outcomes. This course meets once each week in the early evening. Spring, Schenck, Harris.

PUBH 690 ONE HEALTH (3), Section 008. Graduate/professional seminar (with team project) addressing the intersections of human, animal and environmental health. Cross-listed at Duke University School of Medicine and North Carolina State University the course includes participants from the three institutions, plus related private-sector members, non-governmental organizations, and governmental professionals. The purpose is to facilitate understanding of one health as an inexorably linked system requiring the collaborative effort of multiple disciplines and to promote cross-campus and cross-discipline interactions. Early evening course held weekly at NC Biotechnology Center, RTP. Limit: 15 students per university. Spring. Glickman, Bentley.

PUBH 690 EMERGING TECHNOLOGIES (1 or 3), Section 968. Blending the disciplines of health education, health policy and information science, this course will explore popular and emerging social technologies and the ways in which these technologies can deliver health messages and critical, time-sensitive, information. This course will be held online and in a state-of-the-art computing lab and a significant portion of class time will be spent learning to use new technologies and exploring current applications of social media for health communications. Spring. Lackey, Glassman.

PUBH 711 CRITICAL ISSUES IN GLOBAL PUBLIC HEALTH (3). PHLP permission is required. This course teaches systems thinking by exploring how social, political, economic and environmental factors around the world affect the health of populations. Each lesson covers one critical global health issue, primarily using interviews with experts in the field and case studies, supported by readings from the literature. Students analyze the implications of these complex global interactions on local health issues, especially as they pertain to the following core public health functions: investigating community health problems, preventing and controlling disease, conducting research and innovation, assessing community needs, promoting healthy environments, continuous improvement, and focusing on vulnerable populations. Online course. Fall, Ramaswamy.

PUBH 712 GLOBAL HEALTH ETHICS (3). This course will introduce students to the theoretical and practical aspects of public health ethics. Develop students analytical skills to evaluate ethical issues related to public health policy, prevention, treatment, and research. Topics include: ethical reasoning; concepts of justice; principles of interacting with communities; professional conduct and research. Online course. Spring, Winstanly.

PUBH 713 GLOBAL INFECTIOUS DISEASE EPIDEMIOLOGY (3): This course encompasses the interaction between an infectious agent, host, and environment, modes

and dynamics of transmission, the role of immunity in infectious disease epidemiology, and disease elimination strategies, focusing on issues affecting a global society. Online course. Fall, Griffin (EPID)

PUBH 714 MONITORING & EVALUATION OF GLOBAL HEALTH

PROGRAMS (3): This course covers the fundamental concepts and tools for monitoring and evaluation of public health programs such as for HIV/AIDS/STDs, maternal health, reproductive health, child health, environment, and nutrition. Basic concepts and practices in M&E will be covered such as performance monitoring, impact evaluation, indicators, information systems, data collection methods, evaluation designs, strategic information in decision making, and communicating results to policy makers. Online course. Summer, Samandari (MCH)

PUBH 715 COMMUNICATION FOR HEALTH-RELATED DECISION

MAKING (HBHE 715) (2). Theories and principles of communication tailored to health providers' needs to communicate health risks, benefits, and outcomes to patients and families. Spring, Golin.

PUBH 730 - QUALITY IMPROVEMENT AND LEADERSHIP (3). Prerequisite.

Course designed to provide students with understanding of use of continuous quality improvement methods in community health settings drawing heavily on actual experiences of the students in their professional lives. Online course. Fall and spring, Kelly.

PUBH 731 - PUBLIC HEALTH AND SOCIAL MARKETING (3). Course will

orient students to market-based strategies, models, and tactics for improving individual and community health status within framework of marketing, strategic communication, and advocacy. Online course. Spring, Newton Ward.

PUBH 735 - POLICY DEVELOPMENT (3). Permission of the instructor is required

for non-SPH students. Focus is on institutional policy development, regulation and enforcement, and field observation. Online course. Spring, Searing.

PUBH 745 - COMMUNITY ASSESSMENT AND HEALTH IMPROVEMENT

(PHNU 745) (3). Course focuses on development of knowledge and skills to aid communities in improving health outcomes (a) through the analysis of community data and (b) the establishment of collaborative efforts to prioritize health issues for action and identify evidence-based strategies to improve community health. Students interact with a local public health system in a real-time case study involving the collection and analysis of community data. Online course. Spring, Lesneski.

PUBH 746 - PUBLIC HEALTH PROGRAM PLANNING AND EVALUATION

(PHNU 746) (3). Permission required for non-PHLP students. Fundamentals of public health program planning and monitoring with emphasis on applications in community settings and proposal development for program funding. Online course. Fall, Calleson.

PUBH 747 - PROJECT MANAGEMENT PRINCIPLES AND PRACTICES (3).

Graduate students only. Provides an overview of knowledge and skills required for effective project/team leadership and management. Includes modules on leadership and management techniques and organizational designs that complement team-based organizations. Also includes an introduction to continuous quality improvement with an emphasis on application to project management. Online course. Admission by permission of instructor. Spring and Summer, Evarts and Sollecito.

PUBH 748 - POLICY DEVELOPMENT (2 or 3). Permission of the instructor is required for non-SPH students. Designed to provide students with an opportunity to focus on the fundamental aspects of policy development, with an emphasis on local, state and federal levels within community setting. Online course. Fall, Randolph.

PUBH 749 - MASTER'S SEMINAR (1). Designed for students in the HC&P MPH Program who are actively working on their master's paper. 5 required evening sessions in the fall and the regularly scheduled course in the spring. Students receive 1 credit for the spring course, and can receive an additional credit by attending the fall sessions, which focus on completing the MPH program in 1 year, provide an overview of the types of master's paper topics and the practicum, and ask students to develop a topic idea to discuss in small groups. Fall and Spring, Calleson and others.

PUBH 750 - STRATEGIES OF PREVENTION FOR CLINICIANS (4). Designed for those interested in the clinical arena. Establishes a framework for examining prevention activities for clinicians, and then considers a number of important health problems and the evidence for applying prevention strategies to these health problems. Encourages active student participation and involves a multidisciplinary faculty. Fall, Harris.

PUBH 751 - CRITICAL APPRAISAL OF HEALTH LITERATURE I (2).

Emphasizes the process of critical appraisal of existing research literature, with examples from a variety of subject areas. Fall, Harris

PUBH 752 - SEMINAR IN CRITICAL APPRAISAL OF HEALTH LITERATURE

(1). Emphasizes the process of critical appraisal of existing research literature, with examples from a variety of subject areas. Student presentations of structured critical appraisals constitute about 50% of sessions. Spring, Harris.

PUBH 756 - ADDRESSING HEALTH INEQUALITIES IN THE US (MHCH 756)

(3). Disparities in morbidity/mortality in sub-populations continue compared to other U.S. populations. Course explores contributors to inequalities and identifies strategies to counterbalance contributors to correct inequalities using public health resources. Spring, Hogan.

PUBH 760 - CLINICAL MEASUREMENT/EVALUATION (EPID 711) (3).

Prerequisite: Epidemiology or HC & P major. Introduction to clinical epidemiology. Provides a broad-based introduction to the concepts and methods of epidemiology with

particular emphasis on their application to clinical research, clinical practice, and health care policy. Fall, Miller, Loehr.

PUBH 763 - POLICY ISSUES IN HEALTH OUTCOMES AND QUALITY OF CARE (3). Introduces students to the political history and contemporary policy challenges to the U.S. health care system's efforts to assure that health care is timely, equitable, efficient, effective, and patient-centered. Course explores various areas of quality and outcomes measurement and asks how such measurement can contribute to better health policymaking. Spring, Tolleson-Rinehart.

PUBH 767 - TEAM LEADERSHIP IN RESEARCH NAVIGATION (3). This course presents an overview of team leadership and management principles and practices with an emphasis on successful team leadership in clinical research. Understanding and employing team basics and team effectiveness strategies provide the framework for the development of successful leadership of teams undertaking clinical research. Collaborative learning techniques, guest speakers, access to NC TraCS Institute, and team assignments will afford students opportunities to address and further their research efforts. Spring, Evarts and Sollecito.

PUBH 784 PROJECT MANAGEMENT STRATEGY & APPLICATION (INLS 784)(3). This course presents classic project management concepts and methods that will be applied to current projects to develop a toolbox of strategies to effectively manage projects. Spring. Evarts.

PUBH 785 - INTERDISCIPLINARY APPROACHES TO OCCUPATIONAL HEALTH (3). Focuses on work, workplace exposures and hazards, and their effect on health. Interdisciplinary approaches to risk identification, reduction, and communication will be emphasized within regulatory and ethical contexts. Spring, Rogers and Randolph.

PUBH 786 - OCCUPATIONAL SAFETY & ERGONOMICS (ENVR 432) (PHNU 786) (3). Fundamentals of occupational safety and ergonomics with emphasis on legislation and organization of industrial safety and ergonomic programs, including hazard recognition, analysis, control, and motivational factors pertaining to industrial accident and cumulative trauma disorder prevention. Fall, Ostendorf and Wallace.

PUBH 790 - LEADERSHIP ASSESSMENT (2). Course is structured as a highly interactive, intensive, three-day workshop that focuses on helping participants understand their own and others' leadership styles. Self-assessment instruments and readings required in advance. Summer I, Steffen and Fernandez..

PUBH 791 - CORE PRINCIPLES OF PUBLIC HEALTH LEADERSHIP (3). Course will introduce students to leadership theories and research, provide a context for leadership in public health, and help students learn core leadership skills. Online course. Fall, Steffen.

PUBH 886 - FIELD PRACTICUM IN PUBLIC HEALTH (3-6). This experience will be completed after most regular course work. It is intended to provide the student an opportunity to integrate course work in a new or different type of health-related setting. The practicum cannot be only an observational experience. Rather, it must involve a project acceptable to all relevant parties. Fall, spring and summer, Staff.

PUBH 992 - MASTER'S PAPER (3). Permission of the instructor required. A major paper on a problem relevant to public health practice. This study may extend over more than one semester. Fall, spring and summer, Staff.

PHNU COURSES

PHNU 423 - INDUSTRIAL TOXICOLOGY (ENVR 423)(3). Toxicological assessment and a case presentation of related exposure is given. A conceptual approach is utilized to design appropriate programs to prevent worker ill health due to industrial toxicant exposure. Spring, Stopford.

PHNU 496 - READINGS IN PUBLIC HEALTH NURSING (1-3). Prerequisites to be arranged with the faculty. Reading and tutorial guidance in a selected area of public health nursing or occupational health nursing. Two or more hours per week. Fall, spring and summer, Staff.

PHNU 740 - PROBLEMS IN PUBLIC HEALTH NURSING (1-4). Students study a special public health problem relevant to public health/occupational health nursing. Study will result in a paper demonstrating application of research principles. Fall, spring and summer, Staff.

PHNU 742 - INSTRUMENT DEVELOPMENT (HBHE 254) (3). Prerequisite, graduate statistics and graduate methods course. This course provides a knowledge base and experiences in instrument construction and testing, emphasizing a broad spectrum of psychosocial and behavioral instrument scaling methodologies for field research and evaluation. Staff.

PHNU 744 - ROLES AND FUNCTIONS IN PUBLIC HEALTH NURSING (3). Emerging roles and responsibilities of public health nurses and health departments. Emphasis on program areas in health departments and public health under health care reform. Summer, Randolph.

PHNU 745 - COMMUNITY ASSESSMENT AND HEALTH IMPROVEMENT (PUBH 745) (3) See under PUBH.

PHNU 746 - PUBLIC HEALTH PROGRAM PLANNING AND EVALUATION (PUBH 746) (3) See under PUBH.

PHNU 748 POLICY DEVELOPMENT (PUBH 748) (2-3). See under PUBH.

PHNU 781 - OCCUPATIONAL HEALTH NURSING I - OCCUPATIONAL HEALTH ASSESSMENT (3). Permission of the instructor required. Concerns factors influencing the development and operation of occupational health programs. General and special health services contingent on work environment and inherent health problems in the employed populations are considered. Fall, Rogers.

PHNU 782 - OCCUPATIONAL HEALTH NURSING II - OCCUPATIONAL HEALTH PROGRAMMING (3). Prerequisite, PHNU 781. Permission of the instructor required. Continuation of PHNU 781. Role components of occupational health nursing with emphasis on designing, implementing, and evaluating occupational health programs. Emphasis on analysis of factors influencing the delivery of health care at the worksite. Fall, Rogers.

PHNU 783 - OCCUPATIONAL HEALTH NURSING, FIELD PRACTICUM I (2). Prerequisite or co requisite, PHNU 781. Permission of the instructor required. Students have the opportunity to discuss and apply concepts of OHN practice and the work environment. Concepts related to workplace hazards, interdisciplinary activities, and nursing interventions with worker aggregates are emphasized. Fall, spring and summer, Rogers.

PHNU 784 - OCCUPATIONAL HEALTH NURSING, FIELD PRACTICUM II (2). Prerequisites, PHNU 781, 783. Co requisite, PHNU 782. Permission of the instructor required. Students have the opportunity to learn about the managerial and administrative role of the OHN. Emphasis is placed on analysis of the organizational structure, external influencing factors, and evaluation mechanisms. Fall, spring and summer, Rogers.

PHNU 785 INTERDISCIPLINARY APPROACHES TO OCCUPATIONAL HEALTH (PUBH 785) (3). See under PUBH.

PHNU 786 - OCCUPATIONAL SAFETY AND ERGONOMICS (ENVR 432) (PUBH 786) (3). See under PUBH.

PHNU 787 - FUNDAMENTALS OF INDUSTRIAL HYGIENE (2). Provides broad understanding of industrial hygiene. Major emphasis is recognition of hazards in the workplace, evaluation of measurement of those hazards, and application of control strategies. Fall, Randolph.

PHNU 886 - FIELD PRACTICE IN COMMUNITY HEALTH NURSING (3-6). Permission of the instructor required. Field experience in public health nursing or occupational health nursing practice. Study and observation of selected areas related to students' program of study. Field fee, \$450. Fall, spring and summer, Staff.

PHNU 993 - MASTER'S THESIS (3-6). Fall, spring and summer, Staff.



UNC
GILLINGS SCHOOL OF
GLOBAL PUBLIC HEALTH

Organizational Chart

Dean
Barbara K. Rimer, DrPH



Administrative Support

Finance, HR and Facilities

Associate Dean
Charlotte Nuñez-Wolff, EdD



Information Technology

Assistant Dean
Kathy Barboriak, PhD



External Affairs

Associate Dean
Peggy Dean Glenn



Communications

Director
Ramona DuBose



Academic Support

Academic and Student Affairs

Associate Dean
Anna Maria Siega-Riz, PhD



Student Affairs

Assistant Dean
Felicia Mebane, PhD



Global Health

Associate Dean
Peggy Bentley, PhD



Practice

Associate Dean

N.C. Institute for Public Health

Director
Anna Schenck, PhD



Research

Associate Dean
Sandra Martin, PhD



Research & Innovation Solutions

Managing Director
Julie MacMillan, MPH



Departments

Biostatistics

Chair
Michael Kosorok, PhD



Environmental Sciences and Engineering

Chair
Mike Aitken, PhD



Epidemiology

Chair
Andy Olshan, PhD



Health Behavior and Health Education

Chair
Jo Anne Earp, ScD



Health Policy and Management

Chair
Peggy Leatt, PhD



Maternal and Child Health

Chair
Herbert Peterson, MD



Nutrition

Chair
June Stevens, PhD, RD



Public Health Leadership Program

Director
Anna Schenck, PhD



External Advisory Groups

SPH Advisory Council

External Advisory Committee

Public Health Foundation Board

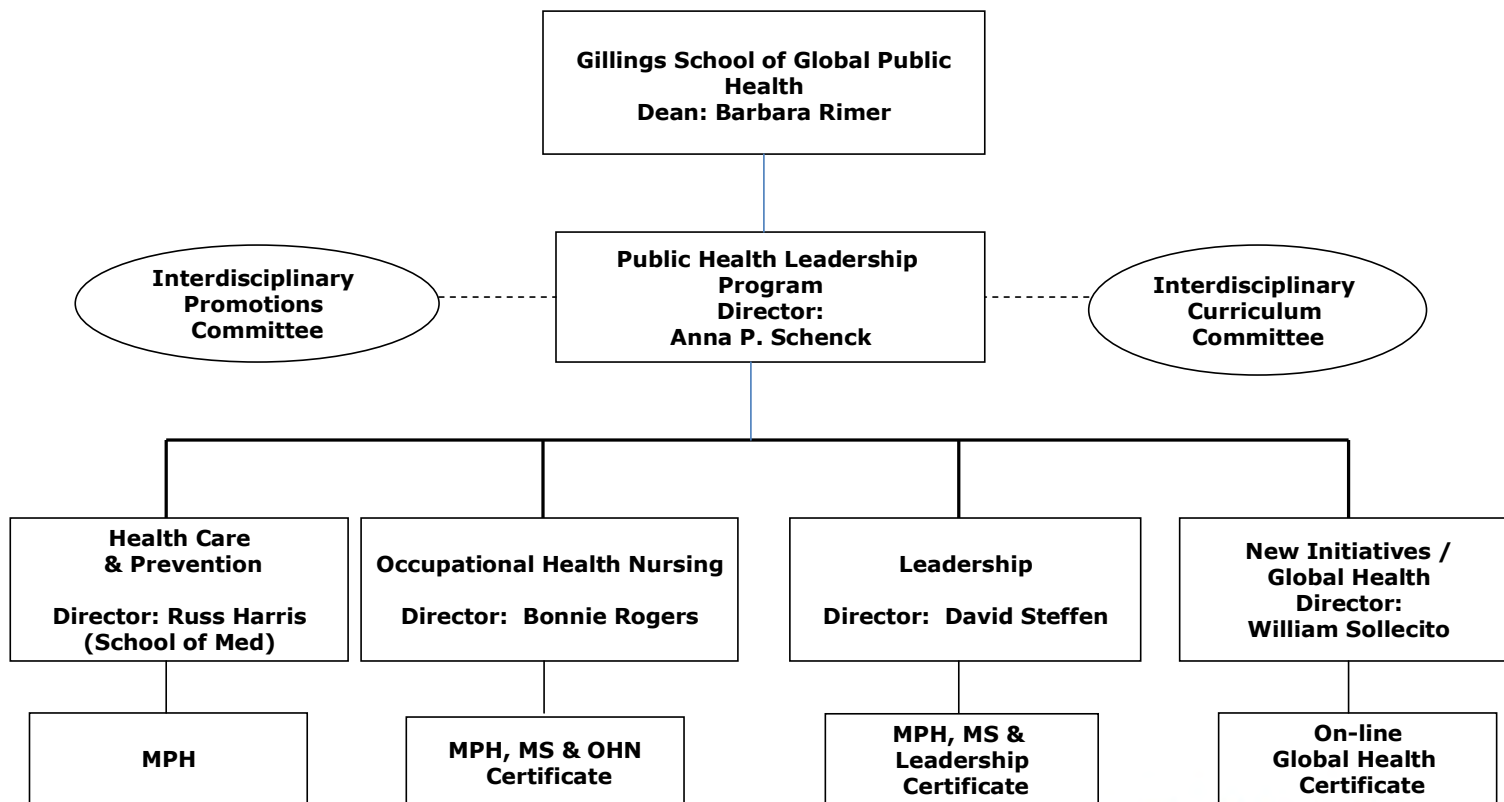
Student Leaders

Student Government
Co-Presidents
Clayton Velicer
tbd

Minority Student Caucus
Co-Presidents
Christian Douglas
Kristin Black



Public Health Leadership Program



Faculty Biographies

Courses are taught primarily by faculty in respective departments in the School of Public Health.

Kathryn M. Andolsek, Professor, Community and Family Medicine, Duke University School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program, School of Public Health, University of North Carolina
M145 Davison Building, Box 3190, DUMC, Durham, NC 27710

Dr. Kathryn M. Andolsek holds an adjunct appointment as an assistant professor with the Public Health Leadership Program. Her primary appointment is as Professor, Department of Community and Family Medicine, Duke University School of Medicine. Dr. Andolsek received her MD and MPH degrees from Northwestern University. She is board certified in Family Medicine and has a Certificate of Added Qualifications in Geriatrics. She currently is associate director of Duke Graduate Medical Education and continues her clinical work in primary care. She is the study track director for Duke medical students who pursue an MPH concurrently with their third year of medical school.

Dr. Andolsek's research interests include prevention, community health, and education. She has had significant grant funding in curriculum development and outcome assessment, most recently, nearly \$1 million through the Josiah Macy, Jr. Foundation (www.lifecurriculum.info). She has had over 10 years of experience in distance internet and other technological strategies used in education. She is the Course Director for the AAMC GME Leadership course.

Jane Brice, Associate Professor, Department of Emergency Medicine, School of Medicine
G0623 Neurosciences Hospital

Dr. Brice received her BA, MD, and MPH degrees from the University of North Carolina at Chapel Hill. Her research interests are stroke, emergency medical services, and disparities in the provision of health care. She is a Fellow of the Academy of Educators of the UNC School of Medicine.

Diane C. Calleson, Clinical Associate Professor, Public Health Leadership Program
1406 McGavran-Greenberg Hall

Dr. Calleson received her PhD from North Carolina State University. Her work crosses the disciplinary boundaries between educational research, evaluation, policy, and community health, with a focus on community-academic partnerships. She trained in educational policy at the doctoral level and completed a postdoctoral fellowship with the W. K. Kellogg Community Health Scholars Program at the UNC-Chapel Hill School of Public Health (1999-2000). Dr. Calleson teaches the Health Care and Prevention (HC&P) master's seminar; Program Planning and Evaluation with the PHLP Leadership

MPH concentration; and a second Program Planning and Evaluation course in the Department of Maternal and Child Health. Dr. Calleson recently developed an online toolkit (<http://depts.washington.edu/ccph/toolkit.html>) to support faculty in developing strong portfolios for promotion and tenure that highlight their community involvement (i.e., CBPR, service-learning, public health practice, community service). Diane's current interests involve mind-body health and healing practices, and she is writing a collection of healing stories.

Timothy S. Carey, Professor, Departments of Medicine and Social Medicine, School of Medicine, and Director of the Cecil G. Sheps Center for Health Services Research Sheps Center, 725 Martin Luther King Jr. Blvd.

Dr. Tim Carey received his medical degree from the University of Vermont and a Master's in Public Health and Epidemiology from the University of North Carolina. Dr. Carey served for almost 10 years as the Chief of the Division of General Internal Medicine and Clinical Epidemiology at UNC. He currently directs the Sheps Center Fellowship in Health Services Research. In 2004, he was appointed to a Sarah Graham Kenan Professorship in Medicine.

Dr. Carey's research interests have included studies in the areas of clinical epidemiology, access to care, and health services research. In the mid-1990s he served on the Institute of Medicine Technical Advisory Committee on Measurement of Access to Care. In recent years he has served as co-director of the joint RTI-UNC Evidence-based Practice Center, and his research interests have branched out to include end of life care, including evaluation of technologies such as gastric feeding tubes.

Giselle Corbie-Smith, Associate Professor of Social Medicine, School of Medicine 342-A MacNider

Dr. Giselle Corbie-Smith completed medical school at Albert Einstein College of Medicine and received a Master's of Science in Clinical Research from the Epidemiology Department at Emory University. Her interest in minority health issues, especially access to care and the influence of culture, race, ethnicity, and social class on health, dates from early in her academic career. Her clinical work focuses on serving underserved populations in public hospitals or clinics, and she currently maintains a clinical practice at a local community health center. Since joining the faculty at UNC in 2000, she has continued her research on barriers to minority participation in research, focusing on trust and distrust as it impacts participation in research among minorities and the methodological and ethical issues involved in the inclusion of minorities in research. Dr. Corbie-Smith is also the Director of the Program on Health Disparities at the Sheps Center for Health Services Research. The purpose of this program is to coordinate and enhance disparity research within the Sheps Center and throughout UNC, to build expertise in working with minority communities, and to improve collaboration and communication with minority-serving institutions in North Carolina and the nation.

Lori Evarts, MPH, PMP, CPH, *Clinical Assistant Professor, Public Health Leadership Program*

Lori Evarts is a Clinical Assistant Professor in the Public Health Leadership Program and also a member of the Carolina Public Health Solutions Program, serving as a Project Manager. Ms. Evarts received her BA degree in Economics in 1984 and her MPH degree in Biostatistics in 1989, both from UNC at Chapel Hill. She is a certified Project Management Professional (PMP) as awarded by the Project Management Institute, the leading global project management professional society.

Ms. Evarts has worked in non-profit, business, and academic institutions for nearly 30 years, beginning in the SPH Biostatistics Department as an Editorial Assistant for *The American Statistician*, then at Blue Cross & Blue Shield of NC as a Research Assistant and Statistician, followed by 17 years at Quintiles, Inc. holding roles of statistician, project manager, director of operations, and then concluding her Quintiles career as the Director of the Quintiles University, School of Project Management. She has developed and taught a variety of courses in various modalities (instructor-led, distance, self-study) for most of her career beginning in 1985 at BCBSNC providing internal training focused on personal computer implementation in the statistical services department. While at Quintiles, she developed and provided training on research data quality, quality control audits, statistical operations, project management, world-wide project management training, and global project management orientation program. She obtained and managed Quintiles University's status as a *Global Corporate Project Management Institute (PMI) Registered Education Provider (R.E.P.)*, enabling certified Project Management Professionals to earn continuing education credits via Quintiles University course completion. Ms. Evarts served as the leader of several quality action teams while at Quintiles. In 2000, she provided an invited training on Matrix Management to the National Cancer Institute, Division of Cancer Prevention.

She joined UNC-CH in 2005 as the Director of Operations for a center within the School of Medicine, Department of Pediatrics that then transitioned to Cincinnati Children's Medical Hospital. Ms. Evarts began teaching in the PHLP as an adjunct instructor in 2005 and served as the Project Manager for the PHLP Graduate School Review undertaken during 2006-2007. In August 2007, she was appointed to the faculty in PHLP.

Ms. Evarts co-teaches PUBH 747, Project Management Principles and Practices, advises graduate students, serves as a reader for Practicum documents and Master's papers, chairs the PHLP Awards Committee, and represents PHLP on the SPH-wide Scholarship and Awards Committee. As a Project Manager for the Carolina Public Health Solutions Program, she focuses on the Gillings Innovation Laboratories (GILs) and assists with the development and implementation of other CPHS program initiatives. Her teaching interests and areas of specialization are project management, distance learning, and continuous quality improvement.

Joanne Garrett, Professor, Department of Obstetrics and Gynecology, School of Medicine
Sheps Center, 725 Martin Luther King Jr. Blvd.

Dr. Garrett received her MSPH in Biostatistics and her PhD in Epidemiology from the University of North Carolina, where she also completed an NRSA Fellowship. She has published in a wide range of clinical areas, bringing her statistical insights to bear particularly on studies of improved patient outcomes and measures of effectiveness. Her areas of interest also include outcomes of low back pain treatments and end of life decision making.

Bradley Gaynes, Associate Professor, Department of Psychiatry, School of Medicine; and Research Fellow, Sheps Center for Health Services Research 10306, 1st Floor, Neurosciences Hospital

Dr. Gaynes received his medical degree from the University of Virginia School of Medicine and completed his general psychiatry training at the University of Colorado. His postgraduate training has included a Robert Wood Johnson Clinical Scholar Fellowship at the University of North Carolina, where he also received his MPH in Epidemiology and completed a fellowship in Preventive Medicine.

Dr. Gaynes works at the crossroads between clinical trials research and mental health services research (including systematic evidence reviews), and he focuses his clinical and research efforts on health care delivery in real world primary care practices. His primary research interests are the assessment and management of mood and anxiety disorders in non-psychiatric medical settings (including primary care, obstetric and gynecology, and HIV clinics) and management strategies for treatment-resistant depression.

Adam Goldstein, Professor, Department of Family Medicine, School of Medicine; Adjunct Professor, Public Health Leadership Program
William B. Aycock Family Medicine Building, 590 Manning Drive

Dr. Goldstein received his medical degree from the Medical College of Georgia, where he also completed his residency in family medicine. He completed an NRSA Primary Care Research Fellowship and a Preventive Medicine fellowship in 1993 at the University of North Carolina, where he also earned his MPH in Epidemiology in 2003. He has been recognized with numerous awards for his skill as a medical educator, including induction into the Academy of Educators of the UNC School of Medicine. Currently, he directs UNC's Tobacco Prevention and Evaluation Program and Nicotine Dependence Program.

Dr. Goldstein has published more than 60 refereed articles and book chapters, as well as editorials and educational materials, in the areas of tobacco control, dermatology, AIDS, immunizations, community medicine, alternative medicine, and faith and medicine. He

has held educational, prevention, and research grants from federal, state, and foundation funders.

Carol Golin, *Assistant Professor of Medicine, School of Medicine, and Health Behavior and Health Education, School of Public Health; Research Fellow, Sheps Center for Health Services Research*
Sheps Center, 725 Martin Luther King Jr. Blvd.

Dr. Golin is engaged in research on the development and assessment of behavioral interventions to enhance compliance, HIV prevention, and health care for persons living with HIV/AIDS and access to care for incarcerated persons. In addition, she studies the influence of patient-provider communication on health outcomes and is particularly interested in the effects of enhanced patient participation in medical decision-making. She is also interested in behavioral interventions to prevent the secondary spread of HIV. Dr. Golin earned her BA in Sociology at Oberlin College and her MD from the University of North Carolina at Chapel Hill. She has been a Robert Wood Johnson Clinical Scholar and NRSA Fellow. Dr. Golin is a guest lecturer in several HBHE courses and is one of the leaders of the spring course on Health Communication. She has a joint appointment with the Department of Medicine.

Margaret L. Gourlay, *Assistant Professor, Department of Family Medicine, School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program*
William B. Aycock Family Medicine Building, 590 Manning Drive

Dr. Gourlay received her MD degree from Rush Medical College in Chicago in 1998 and completed her family medicine residency at the University of California, San Diego Medical Center in 2001. She served as the American Family Physician Medical Editing Fellow at Georgetown University from 2001 to 2002. From 2002 to 2004, she was a Robert Wood Johnson Clinical Research Scholar at the University of North Carolina and earned her MPH in the Health Care and Prevention MPH concentration of the Public Health Leadership Program. She has been an Assistant Professor in the Department of Family Medicine since 2004. She is supported on an NIH K23 Career Development Award to study osteoporosis screening in younger postmenopausal women.

Russell Harris, *Director, Health Care and Prevention Program; Professor, Department of Medicine, School of Medicine; Adjunct Professor of Epidemiology, School of Public Health*
Sheps Center, 725 Martin Luther King Jr. Blvd. (research office)
113 MacNider

Dr. Harris is a Professor of Medicine (School of Medicine) and Adjunct Professor of Epidemiology (School of Public Health). He received both his undergraduate and medical degrees from The Johns Hopkins University and his MPH in Epidemiology from the School of Public Health, University of North Carolina at Chapel Hill. He is the Director of the School of Medicine Program on Prevention and a former member of the U.S. Preventive Services Task Force. His research interests are in developing guidelines

for and implementation of preventive services in primary care practice, especially cancer and diabetes prevention and screening. Dr. Harris is a Fellow of the Academy of Educators of the UNC School of Medicine, and a nationally recognized authority on evidence for prevention.

Vijaya Hogan, *Clinical Associate Professor of Maternal and Child Health, School of Public Health, and Social Medicine, School of Medicine*
421-C Rosenau Hall

Dr. Hogan is a Clinical Associate Professor, with joint appointments in the Department of Maternal and Child Health (School of Public Health) and the Department of Social Medicine (School of Medicine). She is Director of the Curriculum on Health Disparities at the School of Public Health and is a fellow at the Cecil G. Sheps Center for Health Services Research. She received her MPH and DrPH degree from the University of North Carolina and her BA from Hampshire College.

Dr. Hogan is a perinatal epidemiologist who served as the lead epidemiologist on the Preterm Delivery Research Group in the Pregnancy and Infant Health Branch, Division of Reproductive Health at the Centers for Disease Control and Prevention. In her career, she has directed research and programmatic activities relating to understanding the etiologic contributors to health disparities in perinatal outcomes, and to defining appropriate prevention strategies. Her scientific work focuses on understanding mechanisms for how social experiences translate into physiologic changes that lead to adverse health, and to measuring the extent that these social factors contribute to health disparities.

Daniel E. Jonas, *Assistant Professor, Department of Medicine, School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program; Associate Director of the RTI-UNC Evidence-based Practice Center*
5039 Old Clinic Building

Dr. Dan Jonas graduated from Davidson College with Honors in Medical Economics. He received his medical degree from the Ohio State University and his MPH in Health Policy and Administration from the University of North Carolina. He is currently the Associate Director of the RTI-UNC Evidence-based Practice Center and the Associate Director of evidence-based medicine for the Institute for Pharmacogenomics and Individualized Therapy. His research interests include health services research, systematic reviews, comparative effectiveness research, pharmacogenomics, anticoagulation, patient time costs, and health economics.

Arnold S. Kaluzny, PhD, *Director Emeritus, Public Health Leadership Program*

Dr. Kaluzny is Professor Emeritus of Health Policy and Administration, and Director Emeritus of the Public Health Leadership Program, School of Public Health, as well as a Senior Research Fellow in the Cecil G. Sheps Center for Health Services Research and a

member of the Lineberger Comprehensive Cancer at the University of North Carolina at Chapel Hill.

He is a consultant to a number of private research organizations and various international, federal, and state agencies, including Project HOPE, the World Health Organization, the National Cancer Institute, the Joint Commission on the Accreditation of Healthcare Organizations, the Department of Veterans Affairs, and the Agency for Health Care Policy and Research and Institute for Medicine. From 1991 through 1995, he was a member of the Board of Scientific Counselors for the Division of Prevention and Control at the National Cancer Institute and served as Chairman from 1993 to 1995.

Dr. Kaluzny was a member of the Advisory Panel for Public Health, Pew Health Professions Commission, and chaired the Commission's Advisory Panel for Health Care Management. He also served as Chairman of the Accrediting Commission for Graduate Education in Health Services Administration.

His research has focused on the organizational factors affecting implementation and change of a variety of health care organizations, with specific emphasis given to cancer treatment and prevention and control, continuous quality improvement initiatives in both organizational and primary care settings, and most recently, the study of alliances within health care. In all these endeavors, a major focus has been to strengthen the science base of policy and practice.

Dr. Kaluzny received his undergraduate degree from the University of Wisconsin at River Falls, his Master's degree in Hospital Administration from the University of Michigan School of Business, and his PhD. in Medical Care Organization-Social Psychology from the University of Michigan.

Diane L. Kelly, DrPH, MBS, RN, *Adjunct Assistant Clinical Professor in the Public Health Leadership Program*

Diane Kelly previously taught as an Adjunct Instructor in the Department of Health Policy and Administration. Dr. Kelly received her Bachelor of Science in Nursing from West Virginia University in 1977 and a Master's of Business Administration from University of Utah in 1986. She earned her Doctor of Public Health in 2002 from University of North Carolina at Chapel Hill, School of Public Health, Public Health Leadership Program.

Dr. Kelly has over 29 years experience in the health services organizations. After working as a clinical practitioner for 15 years, Dr. Kelly has held positions of Internal Consultant for Redesign and Quality at Intermountain Health Care in Salt Lake City, Utah; Re-Engineering Specialist for the University of North Carolina Hospitals in Chapel Hill North Carolina; Director of Organizational Change at HealthInsight, the Utah / Nevada Quality Improvement Organization (QIO); and, Assistant Administrator for Quality at St. Mark's Hospital in Salt Lake City, Utah. As a faculty consultant for Project HOPE, Dr. Kelly also taught management, quality, and operations management for the

Health Care Management Training Program in Central and Eastern Europe. In addition to her appointment with the Public Health Leadership Program, Dr. Kelly holds the appointments of Assistant Professor (Clinical) at the University of Utah College of Nursing and a Consulting Associate at Duke University School of Nursing. Dr. Kelly served as a member of the board of examiners for the Baldrige National Quality Program from 1999-2001 and currently serves as an active member of the editorial advisory board for the *Joint Commission Journal for Quality and Safety*.

Dr. Kelly's areas of interest include: quality and performance excellence in healthcare delivery and public health organizations; international management development; organizational development in rural settings and underserved populations; and, leadership development. She currently teaches PUBH 730, Quality Improvement/ Leadership online for the PHL. The second edition of her text, *Applying Quality Management in Healthcare: A Systems Approach*, was published in early 2007.

Linda Kinsinger, *Adjunct Associate Professor, Public Health Leadership Program, and Adjunct Assistant Professor, Department of Health Behavior and Education, School of Public Health*

3022 Croasdaile Dr., Suite 200, Durham, NC 27705

Dr. Kinsinger received her medical degree from the University of Iowa and her MPH in Health Behavior and Health Education from the University of North Carolina. Dr. Kinsinger was a faculty member in the UNC Department of Medicine's Division of General Internal Medicine and Clinical Epidemiology for 11 years (1991-2002). She is currently the Chief Consultant for Preventive Medicine in the Office of Patient Care Services in the Veterans Health Administration and is located at the VA National Center for Health Promotion and Disease Prevention in Durham, NC.

Dr. Kinsinger's research interest is in the area of delivery of clinical preventive services. She is currently the VA liaison to the U.S. Preventive Services Task Force. When she was at UNC she was the Director of the Preventive Medicine Residency Training Program and served as the Director of the Health Care and Prevention MPH Program from 1998 to 2002.

Cheryll D. Lesneski, DrPH, *Clinical Assistant Professor, Public Health Leadership Program*

Cheryl Lesnecki has an appointment with the NC Institute for Public Health as a performance improvement advisor, having worked for the NC Center for Public Health Preparedness and most recently assisting the NC Public Health Academy for public health leaders in NC local public health systems (LPHS). She received her DrPH degree in Public Health Leadership and Health Policy and Administration at UNC-CH, School of Public Health in 2005. Her dissertation is entitled "Developing a Performance Measurement System for Local Public Health Agencies in the Florida Department of Health Using the Balanced Scorecard Framework." She earned a Master's degree in

Political Science with a certificate in Public Affairs and Administration in 1998 from the University of Florida.

Dr. Lesneski teaches public health practice and community health assessment and improvement classes for students in the MPH Public Health Leadership Program. She has also helped to develop a public health service class that organizes and implements service education for a group of interdisciplinary students to assist the gulf coast communities of MS with disaster recovery following Hurricane Katrina. Her work for the NC Center for Public Health Preparedness involved the development of strategic plan and measures designed to improve the knowledge and skills of public health professionals in NC, VA, WV, TN, and SC. Currently, Dr. Lesneski is organizing and developing assessment and performance improvement tools for the NC Public Health Academy. Included in these activities is research about the evidence base for coaching and mentoring public leaders to achieve professional, organizational, and community improvement goals. She worked as an Improvement Advisor with the North Carolina Center for Children's Healthcare Improvement and the National Initiative for Children's Healthcare Quality. Some of the quality improvement projects Dr. Lesneski has worked on include the American Board of Pediatrics' Project on Quality in Subspecialty Care, Improving Care for Children with Cystic Fibrosis, the Vermont Hospital Preventive Services Initiative, and Improving Care for Children with ADHD. She also worked for local public health systems in Florida for 19 years and was director of the Putnam County Health Department in Florida from 1992-2002. During her tenure as a Health Officer in Florida, she was the Principle Investigator for a Robert Wood Johnson funded project, TB in the 90's, addressing TB case finding and control among migrant and seasonal farm workers in northeast Florida. She also led initiatives to assure safe water systems for low-income communities, to reduce violence through prevention and intervention programs, to improve health outcomes for the chronically ill, and to increase opportunities for adolescents in Putnam county through mentoring and enrichment programs.

Dr. Lesneski continues to assist professionals in local public health agencies (LPHAs) with systems thinking and performance improvement techniques as part of her research and teaching interests in PHLP. Her work with LPHAs includes developing system-wide performance measures and instituting and evaluating quality improvement initiatives for public health services. She is a member of the Council on Education for Public Health (CEPH) committee for the SPH and a representative for the SPH on the UNC Faculty Governance Committee.

*William C. Miller, Associate Professor, Division of Infectious Diseases, Department of Medicine, School of Medicine, and Associate Professor of Epidemiology, School of Public Health
2105-F McGavran-Greenberg Hall*

Dr. Miller received both his medical degree and his PhD in Neuroscience from The Johns Hopkins University, and earned his MPH in Epidemiology from the University of North Carolina. His research focuses primarily on sexually transmitted diseases and HIV

infection. A particular area of interest is targeted screening for STDs in areas with limited resources. His research interests also include international health, women's health, and clinical epidemiology.

Judith S. Ostendorf, MPH, RN, COHN-S, CCM, FAAOHN, *Clinical Assistant Professor, Occupational Health Nursing Program, and Deputy Director, NC Occupational Safety and Health Education and Research Center, Room 335, 1700 Airport Road*

Judith Ostendorf is a Clinical Assistant Professor and Deputy Director of the National Institute for Occupational Safety and Health (NIOSH) North Carolina Occupational Safety and Health Education and Research Center (NC OSHERC). She received a BSN from Indiana University in Bloomington, Indiana and an MPH from the University of North Carolina at Chapel Hill. She brings a strong background in occupational health, having served as the occupational health services manager of a meat processing manufacturing corporation in the Raleigh, NC area for more than 13 years. She coordinated and presented many occupational and environmental health education programs and was a key member of the ergonomics task force during this time. She is certified in both occupational health nursing and case management. She is a Fellow of the American Association of Occupational Health Nurses and is a past president of the North Carolina Association of Occupational Health Nurses. Her research interests include ergonomics, musculoskeletal disorders, worksite regulatory issues, case management, and the aging worker.

Deborah Porterfield, *Research Assistant Professor, Department of Social Medicine, and Director, UNC Preventive Medicine Residency, School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program*
342-B MacNider

Dr. Porterfield received her MD from the University of California, San Francisco, and trained in internal medicine at the University of Virginia. She worked as an internist in a community health center in Virginia before arriving in Chapel Hill to complete her MPH degree, the Robert Wood Johnson Clinical Scholars Program, and a Preventive Medicine residency at the University of North Carolina. She worked at the NC Division of Public Health for 6 years as a cancer epidemiologist before recently assuming a position at RTI International where she conducts research and evaluation projects in chronic disease public health practice. She also is the Director of the UNC Preventive Medicine Residency, housed in the Department of Social Medicine.

Gregory D. Randolph, *Associate Professor of Pediatrics and Co-Director of the North Carolina Children's Center for Clinical Excellence, School of Medicine; Adjunct Associate Professor, Public Health Leadership Program*
5116 Bioinformatics

Dr. Randolph received his MD/MPH degree from the University of North Carolina in 1990 and completed his General Academic Pediatric Fellowship and Preventive Medicine Residency at UNC in 2001. Dr. Randolph's work focuses on quality improvement (QI) leadership, implementation, and research. He is involved in a range of QI programs, including improving scheduling and patient flow at UNC Health Care, the NC AHEC

Statewide Quality Program, the NC Children's Commitment to Caring, and the UNC Pediatric Residency QI program. He enjoys teaching and is currently Co-Director of the NC AHEC/NC Hospital Association's QI 101 and QI 201 courses and co-teaches the HC&P Strategies of Prevention for Clinicians course. Dr. Randolph has also served as faculty for the National Initiative for Children's Healthcare Quality, the New York City Department of Health, and the Institute for Healthcare Improvement.

He is currently Co-Chair of the Committee on Quality Improvement at the NC Pediatric Society and serves on the NC Improving Performance in Practice Steering Committee and the Clinical Advisory Committee for the Governor's Quality Initiative. He has assisted the RAND Corporation, UCLA, Cincinnati Children's Hospital, the NC Division of Public Health, and the American Academy of Pediatrics with their QI activities.

Susan A. Randolph, MSN, RN, COHN-S, FAAOHN, *Clinical Assistant Professor, Occupational Health Nursing Program, Room 337, 1700 Airport Road.*

Susan Randolph holds a BSN from The Ohio State University, and a MSN degree from Indiana University at Indianapolis, IN where she majored in Community Health Nursing and minored in Nursing Administration. She also completed a one-year, post-master's study in Occupational Health Nursing from the University of Cincinnati. She served as the State Occupational Health Nursing Consultant at the state public health agency in Raleigh, NC for 15 years and was head of occupational surveillance activities. Prior to that, she taught Occupational Health Nursing at the State University of New York at Buffalo for two years. She is certified in occupational health nursing. Ms. Randolph served as an Adjunct Instructor in the UNC Occupational Health Nursing Program from 1987-2000. She is a Fellow of the American Association of Occupational Health Nurses, and is a past president of that organization. She was appointed Secretary of the Scientific Committee on Occupational Health Nursing (2009-2012) for the International Commission on Occupational Health (ICOH). She has published over 30 articles, 3 book chapters, and is a co-author with Dr. Rogers on *Occupational Health Nursing Guidelines for Primary Clinical Conditions*. Her research interests include agricultural health and safety, competencies in occupational health nursing, and medications in the workplace. Ms. Randolph was re-appointed by U.S. Department of Labor Secretary as a health member of the National Advisory Committee on Occupational Safety and Health (NACOSH) for a two year term, March 2010 to March 2012.

Bonnie Rogers, DrPH, COHN-S, LNCC, FAAN, *Associate Professor and Director, NC Occupational Safety and Health Education and Research Center and the Occupational Health Nursing Program, Room 343, 1700 Airport Road.*

Dr. Rogers is an Associate Professor of Nursing and Public Health, and is Director of the North Carolina Occupational Safety and Health Education and Research Center, and the Occupational Health Nursing Program. She has joint appointments with the Department of Epidemiology, and the Department of Health Policy and Management. Dr. Rogers received her baccalaureate in nursing from George Mason University, School of Nursing, Fairfax, VA, and doctorate in public health, with a major in environmental health sciences and occupational health nursing from the Johns Hopkins School of Hygiene and Public Health, Baltimore, MD. She has a master's degree in public health with a major in nursing administration and an emphasis in epidemiology. She holds a post-graduate certificate as an adult health clinical nurse specialist and is a certified occupational health nurse, certified case manager, and certified legal nurse consultant. She is also a fellow in the American Academy of Nursing and the American Association of Occupational

Health Nurses. Dr. Rogers is very active in research which focuses on occupational hazards to health care workers, ergonomics, and ethical issues in occupational health nursing. Dr. Rogers is a nurse ethicist having studied as a visiting scholar at the Hastings Center in New York. She has nearly 200 published articles and book chapters and three books, *Occupational Health Nursing Concepts and Practice*, *Occupational Health Nursing Guidelines for Primary Clinical Conditions*, and *Legal Nurse Consulting Principles and Practices*. Dr. Rogers is Vice-President of the International Commission on Occupational Health. She is past president of the American Association of Occupational Health Nurses, the Association of Occupational and Environmental Clinics, and served several terms on the National Advisory Committee on Occupational Safety and Health. She is Chairperson of the NIOSH Board of Scientific Counselors and of the National Occupational Research Agenda Liaison Committee.

Alfred Reid, *Assistant Professor and Director of Information and Research Services, Department of Family Medicine, School of Medicine*
William B. Aycock Family Medicine Building, 590 Manning Drive

Alfred Reid received his BA and MA degrees in Sociology from the University of North Carolina at Chapel Hill, where he also completed an internship in Applied Medical Sociology. He joined the Department of Family Medicine in 1987. He directs the research and scholarship curriculum of the Family Medicine Faculty Development Fellowship and the medical informatics curriculum of the General Internal Medicine Faculty Development Fellowship. In the School of Medicine, Mr. Reid co-chairs the Faculty Advisory Committee for Educational Technology (FACET) and is a member of the Curriculum Advisory Board. In the Department of Family Medicine, he serves as Director of Information and Research Services and leads strategic information management for the I³ Academic Chronic Disease Collaborative and Medical Home for the Uninsured projects. His research interests have focused on educational outcomes, but also include quality improvement, the use of information technology in medical education, and qualitative methods.

Anna P. Schenck, *Professor of the Practice and Director, Public Health Leadership Program*
4103 McGavran-Greenberg

Dr. Schenck received an MSPH (1983) from the Department of Health Education in the UNC School of Public Health. She received her PhD (1997) from the Department of Epidemiology in the UNC School of Public Health, where she was a cancer prevention, education, and control fellow with the Lineberger Comprehensive Cancer Center. Prior to joining the faculty at UNC in 2009, Dr. Schenck was with The Carolinas Center for Medical Excellence, working first as an epidemiologist, then as manager of epidemiology, and finally, as Director of Research (1997-2009). Previously, she served as county epidemiologist for the Guilford County (NC) Department of Public Health (1989-1994) where she was the first epidemiologist in a local health department in the state. She also worked as a health educator for the local health department (1987-1989) and as a cancer educator with UNC Lineberger (1983-1986).

Dr. Schenck has conducted research on quality of care across the continuum of care, from primary prevention to palliative care. She has extensive analytic experience in using administrative data to improve care. Dr. Schenck established the only national resource for surveillance of colorectal cancer screening in the Medicare population (www.thecarolinascenter.org/crc) and the first comprehensive set of quality measures for use in hospice and palliative care (www.medqic.org). Dr. Schenck has been an individual member of the National Colorectal Cancer Roundtable since 2004.

Adam Searing, JD, MPH, Adjunct Assistant Professor

Adam Searing joined the Justice Center as Director of the North Carolina Health Access Coalition in 1997. The Health Access Coalition is North Carolina's leading voice for progressive health care reforms that address the needs of the uninsured and underinsured. The project advocates both for more comprehensive and effective public health care programs and on behalf of average consumers in the private market. During his tenure, Dr. Searing has led the fight to defeat a proposed conversion of Blue Cross/Blue Shield NC to a for-profit, won and helped implement expansions of the state Medicaid program, helped win passage of the state's Children's Health Insurance Program (Health Choice), and fought for consumer rights for North Carolinians in HMOs.

Dr. Searing has received awards and recognition for his work from the NC Public Health Association, the NC Primary Health Care Association, regional and state newspapers, and the honorary societies Delta Omega (public health) and Pi Sigma Alpha (political science). He grew up in Chapel Hill, NC and received his graduate degrees in law and public health from the University of North Carolina at Chapel Hill in 1994.

Stacey Sheridan, Assistant Professor of Medicine, School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program
5039 Old Clinic Building

Dr. Sheridan received her medical degree from Pennsylvania State University and her residency training in internal medicine from Dartmouth College. She then received residency training in preventive medicine and fellowship training in primary care research from the University of North Carolina, where she earned her MPH in the Health Care and Prevention program.

Dr. Sheridan's research is focused on chronic disease prevention and physician-patient communication in primary care settings. Her main areas of interest include heart disease prevention and prostate cancer screening. She has conducted research examining the role of shared decision-making in screening and chemoprevention, how well physicians and patients understand various presentations of risk, and the effects of literacy on health outcomes. Dr. Sheridan is a fellow of the Cecil Sheps Center for Health Services Research and the Center for Health Promotion and Disease Prevention.

William Sollecito, Clinical Professor, Public Health Leadership Program
4102 McGavran-Greenberg

Dr. Sollecito received a Doctor of Public Health degree in Biostatistics in 1982 from the School of Public Health at the University of North Carolina at Chapel Hill. After working for ten years in public health and health services research, he worked in the contract research industry at Quintiles Transnational Corporation from 1982-1996. As President of Quintiles Americas, Dr. Sollecito was responsible for all clinical operations in Canada and South America, as well as the United States. He also served as a member of the Quintiles Transnational Board of Directors during 1995 and 1996.

Dr. Sollecito was appointed to the faculty of the UNC School of Public Health in 1997 and was Director of the Public Health Leadership Program from 2000 through 2009. His primary areas of interest include global health, continuous quality improvement, project management, and leadership in public health and clinical research; his teaching interests center on the application of distance education and e-learning technology.

David P. Steffen, *Clinical Assistant Professor, Public Health Leadership Program*
4110 McGavran-Greenberg

David Steffen is the Director of the Leadership MPH concentration, including both the distance and residential components, with oversight responsibilities for the public health nursing track. David has extensive experience as a leader in public health, having served as a District Health Director for the southwest quarter of the state of New Mexico from 1988 to 2001. During that time he also held an adjunct assistant professor appointment in the Health Science Department at New Mexico State University. From 2001 to 2004 David served as the Director of the National Public Health Leadership Institute (PHLI), a CDC-sponsored national program for senior public health leaders that is run by the North Carolina Institute of Public Health in partnership with the Kenan-Flagler Business School and the Center for Creative Leadership.

David received an MSN in Community Health Nursing and an MPH in Health Administration from Yale University. In 2000 he earned a Doctor of Public Health from the UNC Department of Health Policy and Administration, through the Public Health Leadership Program. David received his bachelor's degree in English, journalism, and secondary education from Valparaiso University. He served three years in the Peace Corps in Morocco, where he was an English teacher, teacher trainer, and director of cross-cultural training for new volunteers. His experiences in Morocco stimulated his initial interest in the fields of public health and health care. He has worked as a family nurse practitioner in hospital outpatient clinic, community health center, and public health department settings. David's areas of interest and expertise in public health include community health improvement processes, social marketing, public perception of public health, border health, policy, public health values and ethics, and leadership.

Hugh H. Tilson, MD, DrPH, *Adjunct Professor, Public Health Leadership Program*

Hugh Tilson received his MD from Washington University in St. Louis, MO in 1964 and his DrPH from the Harvard School of Public Health in 1972. He is a practicing

epidemiologist and outcomes researcher, whose career in public health and preventive medicine spans more than 40 years. Fifteen years of public service included duties as a U.S. Army Preventive Medicine Officer in Europe; Consultant to several Federal agencies; Local Public Health Officer and Human Services Director for Multnomah County (Portland), OR (NACHO President, 1976); and State Public Health Director for North Carolina. During fifteen years in the multinational pharmaceutical industry for the world-wide Wellcome Foundation (now GlaxoSmithKline), he is credited with introducing many epidemiologic principles and innovations—public health in the private sector.

Upon his retirement from industry in 1996, he joined the full-time faculty of UNC School of Public Health in Chapel Hill. He is an advisor to government and industry in health outcomes, drug safety and improved therapeutics, and evidence-based health policy, including most recently public health preparedness. As a half-time resident of Maine, he serves as a “Senior Fellow” for Maine’s Center for Public Health and is volunteer Public Health Officer for Sagadahoc County, including Bath, Maine.

Dr. Tilson’s primary focus for teaching, research, and public health service is the application of leadership principles to practice. He has served on the National Advisory Committee for the National Public Health Leadership Institute (PHLI) since its inception, and has co-chaired the NAC for the past five years for UNC. His favorite role in PHLI is as the facilitator for the “museum walk,” a unique educational enterprise to engage very senior leaders in PHLI. As a researcher, his national leadership in advancing the Public Health Systems Performance Standards as a tool for understanding and building the public health infrastructure has received national recognition, including the 2005 Balderson Award.

Sue Tolleson-Rinehart, Co-Associate Director, Health Care and Prevention Program; Assistant Chair for Faculty Development, Department of Pediatrics, School of Medicine; Research Assistant Professor, Public Health Leadership Program; and an adjunct member of the Political Science Department
039 MacNider

Dr. Tolleson-Rinehart earned the BS degree in Applied Biology at the Georgia Institute of Technology in 1973; the MA in Political Science at Georgia State University in 1978; and the PhD in Political Science at Rutgers University in 1983. She began a second career in health policy and health services at the University of North Carolina at Chapel Hill after reaching the rank of professor (with tenure) in political science at Texas Tech University and becoming a nationally known scholar in gender politics. Shortly after coming to UNC, she developed and administered the UNC Program on Health Outcomes for William L. Roper, then Dean of Public Health (now Dean of Medicine and Chief Executive Officer of the UNC Health Care System). In 1998, Dr. Tolleson-Rinehart helped to write UNC’s proposal to become a Center for Education and Research on Therapeutics (CERTs); UNC’s successful application resulted in its becoming the nation’s only CERTs devoted to pediatrics. Dr. Tolleson-Rinehart is in her 9th year as the CERTs administrator. She is also the principal investigator of *PEDS: Pediatric*

Education for Drug Safety, a UNC CERTs Safety Curriculum, a project funded as a part of the national Attorney General Prescriber Education Program. She was elected as a Fellow of the Academy of Educators of the UNC School of Medicine in 2008.

Dr. Tolleson-Rinehart's academic political science expertise helps her provide public policy advising to the HC&P students as well as consider policies such as the Best Pharmaceuticals for Children Act of 2002 (PL 107-109) and the Pediatric Research Equity Act of 2003 (PL 108-155) and the implications of such laws for better health care for children. She has continued to publish in gender politics, completing a second edition of an edited volume in 2004 and publishing an essay on gender in the Centennial Issue (100:4) of political science's premier academic journal, *The American Political Science Review*.

Anthony Viera, *Co-Associate Director, Health Care and Prevention Program; Assistant Professor of Family Medicine, School of Medicine; Adjunct Assistant Professor, Public Health Leadership Program*
William B. Aycock Family Medicine Building, 590 Manning Drive

Dr. Viera received his medical degree from the Medical University of South Carolina and completed his residency training in family medicine at the United States Naval Hospital, Jacksonville, Florida. He received his MPH from the Health Care & Prevention Program while he was a Robert Wood Johnson Clinical Scholar at the University of North Carolina from 2004 to 2006. He was elected an Associate Fellow of the Academy of Educators of the UNC School of Medicine in 2008, and he has been recognized in numerous venues for his skill as a teacher and resident preceptor. Dr. Viera has published more than 40 articles, editorials, reviews, and educational pieces on various clinical, prevention, and research topics. His research on hypertension screening and management is supported by a K12 Career Development Award as well as a grant from the American Academy of Family Physicians.

Affiliated Faculty Who Participate in PHLP Courses

Ruth Barlow, MS, RN, COHN-S, CCM, Statewide Wellness Coordinating Director, NC State Government, Raleigh, NC

Kathleen Buckheit, MPH, RN, COHN-S/CM/SM, FAAOHN, CE Director, NC OSHERC, UNC-Chapel Hill

Kay Campbell, EdD, RN-C, COHN-S, FAAOHN, Consultant, Cary, NC

Nelson Couch, PhD, CIH, CSP, Triangle Safety and Health, Inc., Research Triangle Park, NC

Judith Holder Cooper, PhD, Director, Occupational Mental Health Program, Duke University, Durham, NC

Pamela Dickens – UNC Frank Porter Graham Child Development Institute

Claudia Fernandez – Maternal and Child Health

Gary Greenberg, MD, MPH, President, G. Greenberg Occ-Health Consulting, UNC-Chapel Hill, NC

Jennifer Griffin, PhD, Epidemiology

Sheila Higgins, MPH, RN, COHN-S, OHN Consultant, NC Department of Health and Human Services, Raleigh, NC

Kathy Kirkland, DrPH, Executive Director, Association of Occupational and Environmental Clinics, Washington, DC

Mellanye Lackey, Health Sciences Librarian

Elizabeth Lawhorn, MSN, RN, COHN-S, CCM, FAAOHN, Houston, TX

Karen Mastroianni, MPH, (Doctoral Candidate), RN, COHN-S, FAAOHN, President, Dimensions in Occupational Safety and Health, Raleigh, NC

Leyla McCurdy, MPhil, Senior Director of Health & Environment for the National Environmental Education & Training Foundation in Washington, DC.

Ghazaleh Samandari, PhD,

Woodhall ‘Sandy’ Stopford, MD, MSPH, Director, OEM Toxicology Program, Duke University, Durham, NC

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APPENDIX

Availability of PHLP MPH Leadership Concentration Courses

updated: 10-Aug-11

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	PH Core Function	PHLP Focus Area				Course Availability					
		Public Health Practice	Public Health Nursing	Field Epidemiology	Global Health	FALL	SPRING	SUM I	SUM II		
PHLP MPH Graduation Requirements:		R=REQUIRED CORE COURSE; R ^{distance} =Distance REQUIRED COURSE; R*=Pick 4 of the 3 courses; E=RECOMMENDED ELECTIVE (NOTE: Course substitutions may be allowed with your advisor's prior permission.)									
PUBH 680 Public Health Practice	Practice	R ^{distance}	R ^{distance}	R ^{distance}	R ^{distance}	Distance					
PUBH 790 Leadership Workshop	Assurance	R (May)	R (May)	R (May)	R (May)		MCH Jan Workshop at UNC	PUBH May Workshop at UNC			PUBH Students taking PUBH Courses Register for:
PUBH 791 Principles of Public Health Leadership	Assurance	R	R	R	R	Distance					Section 966 Distance MPH students
PUBH 886 Field Practicum in Public Health	PRACTICUM	R	R	R	R	Schedule with your Adviser (Register for section number per adviser instruction)				Section 965	Certificate students
PUBH 992 Master's Paper	MASTER'S PAPER	R	R	R	R (Global)	Schedule with your Adviser (Register for section number per adviser instruction)				Section 01W	Residential students
Take Comprehensive Exam	REQUIREMENT	R	R	R	R	Distance or Residential (October 1st)	Distance or Residential (March 3rd)				
Apply to Graduate: http://ch.research.unc.edu/grad_appOnline/	REQUIREMENT	R	R	R	R	Distance	Distance	Distance	Distance		PUBH Students taking Core Courses Register for:
PUBH 735 Policy Development in Public Health Leadership	Policy	R* 735 or 748		R 735 or 748			Distance				Section 968 Distance MPH students
PUBH/PHNU 748 Policy Development Distance Learning Course	Policy	R* 735 or 748	E	R 735 or 748		Distance					Section 969 OHN Distance MPH students
PUBH/PHNU 744 Roles & Functions in Public Health Nursing	Assurance		R					Distance per instructor			Section 001, 002 etc Residential MPH students
PUBH/PHNU 745 Community Health Improvement & Role of Assessment	Assessment	R*	R				Distance				Section 01W Residential MPH students
PUBH/PHNU 746 Public Health Program Planning & Evaluation	Assurance	R*	R			Distance					Section 02W Residential (HC&P) MPH students -
PUBH 747 Project Management Principles & Practices	Assurance	R*					Distance	Distance			
PUBH 690, section 001 Research Methods for Public Health Practice	Assessment	R*					Distance & Residential				
PUBH 730 Quality Improvement Leadership	Assurance	R*				Distance	Distance				
PUBH 731 Public Health and Social Marketing	Assurance	R*					Distance				
EPID 750 Fundamentals of Public Health Surveillance	Assessment			R		Distance					

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Availability of PHLP MPH Leadership Concentration Courses

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PHLP MPH Graduation Requirements:		R=REQUIRED CORE COURSE; R ^{distance} =Distance REQUIRED COURSE; R ^{Pick 4} =Pick 4 of the 3 courses; E=RECOMMENDED ELECTIVE (NOTE: Course substitutions may be allowed with your advisor's prior permission.)							
EPID 758 Methods & Principles of Applied Infectious Disease Epid	Assessment			R			Distance		
EPID 759 Methods in Field Epidemiology	Practice			R		Distance			
<small>Residential:</small> PUBH 500 Global Health Discussion Series	Policy				residential	Residential	Residential		
<small>Residential:</small> PUBH 510 Interdisciplinary Perspectives in Global Health	Policy				residential	Residential			
<small>Residential:</small> HPM 664 Globalization and Health	Policy				residential		Residential		
PUBH 711 Critical Issues in Global Public Health	Policy				R	Distance			
PUBH 712 Global Health Ethics	Policy & Assurance						Distance		
PUBH 713 Global Health Infectious Disease	Assurance					Distance			
PUBH 714 Intro Monitoring & Evaluation - Global Public Health	Assessment				R			Distance	
PHNU 423/ENVR 423 - Industrial Toxicology	Assurance						Distance		
PUBH 785/PHNU 785 - Interdisciplinary Approaches to Occupational Health	Assessment						Distance		
PUBH 690 Special Studies	varies					Distance & Residential per instructor	Distance & Residential per instructor	Distance & Residential per instructor	Distance & Residential per instructor
PUBH 420 - AIDS: Principles and Policy (1-hour credit)	Policy & Assessment					Distance	Residential	Distance	
<small>Residential:</small> PUBH 767 Team Leadership in Research Navigation	Assurance						Residential		
<small>Residential:</small> PUBH 784 Project Management Strategy & Application	Assurance						Residential		
MHCH 701 Foundations In Maternal Child Health (1st semester)	Policy						Distance		
MHCH 702 Foundations In Maternal Child Health (2nd semester)	Policy							Distance	

PUBH Students taking PUBH Courses Register for:

Section 966	Distance MPH students
Section 965	Certificate students
Section 01W	Residential students

PUBH Students taking Core Courses Register for:

Section 968	Distance MPH students
Section 969	OHN Distance MPH students
Section 001, 002 etc	Residential MPH students
Section 01W	Residential MPH students
Section 02W	Residential (HC&P) MPH students -

APPENDIX

Availability of SPH Core Courses for MPH Programs

Distance Students	FALL	SPRING	SUM I	SUM II
BIOS 600	Distance	Distance	Distance	
EPID 600	Distance		Distance	
ENVR 600	Distance	Distance		
HBHE 600	Distance	Distance	Distance	
HPM 600	Distance	Distance		

Residential Students	FALL	SPRING	SUM I	SUM II
BIOS 600	Distance	Residential	Distance	
EPID 600	Distance	Residential	Distance	
ENVR 600	Distance	Distance		
HBHE 600	Distance	Distance	Distance	
HPM 600	Distance	Distance		

updated: 20-Jul-11

PUBH Students taking Core Courses Register for:		
Section	968	Distance MPH students
Section	969	OHN Distance MPH students
Section	001, 002 etc	Residential MPH students
Section	01W	Residential MPH students
Section	02W	Residential (HC&P) MPH students - ENVR only