DOCTORAL PROGRAM
IN
HEALTH LEADERSHIP (DrPH)

Academic Policies, Guidelines, and Procedures
DEPARTMENT OF HEALTH POLICY AND MANAGEMENT
THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

2020-2022 Academic Years
Revised July 2020
These *Guidelines and Procedures* describe rules, regulations, policies, and procedures for the Doctoral Program in Health Leadership (DrPH), as established by the Department of Health Policy and Management and by the actions of the Administrative Board of the Graduate School. Each student should become familiar with the material pertaining to this program, and, together with a faculty advisor, make certain that the selected plan of study complies with the pertinent requirements.

In any instance of discrepancy between these guidelines and the Graduate School Handbook, the Graduate School Handbook takes precedence. The Handbook is on the Web: [http://handbook.unc.edu](http://handbook.unc.edu)
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**GENERAL INFORMATION**

**Program Goal**
The goal of the program is to produce graduates with the motivation, knowledge, and skills to become top leaders committed to improving the public's health.

This goal responds to the urgent need to develop better leaders to improve the health of the public both domestically and internationally. The Institute of Medicine's landmark 1988 report, *The Future of Public Health*, brought this need into sharp focus. The report concluded, “public health will serve society effectively only if a more efficient, scientifically sound system of practitioner and leadership development is established.” Since 1988, the Bureau of Health Professions, the Joint Council of Governmental Public Health Agencies, and the Centers for Disease Control and Prevention, among others, have called for improved training of top health leaders.

In 2003, the Institute of Medicine in two major reports renewed and strengthened its call for improved training of future health leaders. One of these reports, *The Future of the Public’s Health in the 21st Century*, recommended that “leadership training, support, and development should be a high priority.” The other report, *Who Will Keep the Public Healthy*, focused on “Educating Public Health Professionals for the 21st Century”, as its subtitle states. The report notes that much has changed since the original 1988 IOM report was issued, and these changes require modification and improvement of the education of top health leaders and other professionals. The report also notes that the DrPH degree should be designed specifically for advanced training in health leadership. The DrPH program pedagogy and curriculum respond to this need.

**Students**
The program is aimed at mid-to-senior level professionals working full-time in the U.S. and globally with the potential and ambition to become more influential health leaders. Examples include health directors, mid- to senior-career managers in government agencies, leaders within nonprofit, for-profit and non-governmental organizations, program officers and other mid-level or senior managers working for foundations, as well as others working within the health field, which may include entrepreneurs and individuals working in nontraditional settings affecting the health of the public.

The DrPH program is focused on developing leaders who will improve the public's health in the United States and globally. The curriculum is relevant to people who work domestically and internationally. While most students are from the US, many students work and live overseas. Because graduates will lead applied efforts to improve the public’s health, cohorts do not include individuals who intend to focus predominantly on research or aspire to academic teaching positions.

**DrPH Program Governance**
All responsibility for the academic conduct, standards, and requirements of the doctoral program rests with the faculty of the Department of Health Policy and Management through its duly appointed and elected officers and representatives, in accordance with other school and university policies.

**Program Director**
The Director of the DrPH program is responsible for all administrative affairs of the Program, including administration of academic conduct, standards, and requirements. In addition, the Director is responsible for recommending admissions and financial support, matching advisors with students, approving DrPH dissertation committee chairs and members, advising these committees on interpretation of policies and requirements, ruling on all petitions in accordance with School of Public Health and Graduate School guidelines, and fulfilling any other administrative duties or responsibilities delegated by the Department Chair.
Director: Pam Silberman, JD, DrPH
Professor
Director, Executive Doctoral Program in Health Leadership
Department of Health Policy and Management

Advisory Committee
The DrPH Advisory Committee advises the Directors with regard to all issues related to the DrPH Program (e.g., admissions, curriculum). In addition to Dr. Silberman, the members are:

Joe Barker, MPH (DrPH Cohort 14)
Chief, Health Systems & Evaluation Branch
Division of Global HIV & TB, Center for Global Health
US Centers for Disease Control and Prevention (CDC)

Emilee Coulter-Thompson, LMSW (DrPH Cohort 15)
Department Strategist, Department of Learning Sciences
University of Michigan Medical School

Jeff DeCelles, DrPH EdM (DrPH Cohort 11)
Senior Technical Advisor on Research & Curriculum

Sandra B. Greene, DrPH
Professor
Department of Health Policy and Management
Senior Research Fellow, Cecil G. Sheps Center for Health Services Research

Susan Helm-Murtagh, DrPH, MM (DrPH Cohort 2)
Assistant Professor
Department of Health Policy and Management

Tyonne Hinson, DrPH, MSN, RN, NE-BC (DrPH Cohort 9)
Director, Nursing Diversity Initiatives
Nursing Patient Services
Boston Children’s Hospital

David Pope, MHA, JD (DrPH Cohort 10)
Senior Vice President and Chief Operating Officer
Scotland Health Care System

Thomas C. (Tom) Ricketts, PhD
Professor Emeritus, Department of Health Policy and Management
Senior Policy Fellow, Cecil G. Sheps Center for Health Services Research

Mayra Serrano, MPH (DrPH Cohort 14)
Manager, Center of Community Alliance for Research & Education
City of Hope

Rebecca Slifkin, PhD
Professor
Department of Health Policy and Management

Stephanie Watson-Grant, DrPH (DrPH Cohort 7)
Deputy Director of Field Operations – MEASURE Evaluation Project
Graduate School Handbook

Additional information on the governance of and regulations for doctoral study are contained in the Graduate School Handbook (http://handbook.unc.edu). Students are responsible for being familiar with its contents, and complying with rules, regulations, policies, procedures, and deadlines. The core regulations have been incorporated in part in these Guidelines and Procedures, but additional, essential regulations are given only in the Graduate School Handbook. In instances of discrepancy between these Guidelines and Procedures and the Graduate School Handbook, the Graduate School Handbook takes precedence.

Class Size
Typically, between 12-15 students are admitted annually.

Program Costs
Tuition costs vary year to year for in-state and out-of-state students. Please check with the Department of Health Policy and Management (HPM) Academic Coordinator, Kim Sieler (krsieler@email.unc.edu) for the most current tuition rates and fees. Students pay per credit hour and take approximately 18 credit hours in each of years 1 and 2. In the following years, students generally take between 6-15 credit hours (depending on how long it takes to finish their dissertation). In addition to tuition, students must provide their own computers and web cams per program specifications (information is provided to students separately and updated as necessary as the technology changes). Students will also be responsible for travel expenses related to three annual visits to campus (or an alternate location) in each of the first two years.

Financial Aid
For general University information about financial assistance, see http://studentaid.unc.edu and http://gradschool.unc.edu/fellowships_and_funding/index.html.

If you are in the military, the University's military tuition benefit is described at https://registrar.unc.edu/academic-services/residency/special-residency-provisions/military-benefits/.

Information about residency status can be found at http://gradschool.unc.edu/residency.

Admission Requirements

- A prior master’s degree or doctoral degree (not necessarily in public health).
- Significant post-graduate experience in the health field, including at least five years in a mid-to-senior level leadership position, preferably with substantial management responsibility.
- Demonstrated leadership potential, with motivation to obtain senior-level positions and to improve the public’s health.
- Grade Point Average (GPA) of 3.0 or better in prior graduate study.

While all students are expected to be academically qualified for doctoral level study, special emphasis is placed on work history, demonstrated leadership and a practice-oriented career commitment.

**Also note:** Students without a MPH or MSPH from an accredited school of public health must successfully complete an additional three credit foundational learning objective course (which is offered online). This course need not be completed before matriculating, but it must be completed before graduation.

**DrPH Advising and Chairs of Dissertation**

The program director serves as the faculty advisor for the program, guides the students in interpreting course and program requirements, and helps to identify potential dissertation chairs. Students generally identify dissertation chairs in the spring or summer of their first year, based on mutual scholarly interests (see more about the dissertation process below). The chair will assist the student in their dissertation research and help identify other dissertation committee members. In addition, the HPM Academic Coordinator is available to work with students on general program matters and course registration issues.

**Program Design**

In each of the first two years, students come to Chapel Hill for four to five days in mid August, between fall and spring semesters (early January), and between spring and summer semesters (mid May). At times, an alternate site may be chosen which may require travel outside the U.S. or North Carolina. Students are given ample time to make travel arrangements in these cases. Otherwise, learning takes place at homes and offices, away from the UNC campus. Students connect to faculty and peers mainly via computer.

We make substantial use of technologies (Zoom and Sakai) that allow students and faculty to interact productively and that support live video, audio, and data sharing. The technologies can also be used to connect guest speakers with students without having to bring everyone together in the same room. **NOTE:** Students must have a reliable DSL or cable Internet connection. Dial-up connections will not work with our technology. It is recommended that students use headsets or earbuds if they choose to connect to class audio using their computers, especially if they will be in a noisy environment during class. Connecting via phone is also an option, but it is recommended that international users connect via computer audio to avoid unexpected phone charges.

The executive format functions as follows: During their first visit in August, students begin their studies with several days on campus during which they are oriented to the program, the Department, and the University. They are introduced to the remainder of the first semester curriculum and are trained in using the software. The students then return home for the balance of the semester.

Students receive material (recorded videos, narrative case studies, datasets, readings, etc.) via the Web each week. They study these materials on their own but must have completed required tasks before a regularly-scheduled class session when they will convene live via Internet Video. These three hour synchronous learning sessions are divided into the components of the curriculum and led by faculty members responsible for each component, sometimes including guest speakers.
First-year students meet for class on Tuesdays; second-year students meet for class on Wednesdays. Class times vary from cohort to cohort, depending upon the locations of students. However, typical connection times are 4-7pm EST. Third-year students registered for dissertation credit hours attend an optional monthly online video chat group meeting until they have successfully defended their doctoral dissertation.

Students return to Chapel Hill between semesters to conclude work on the preceding semester and begin work on the next semester's curriculum. This process is repeated throughout the first two years of the curriculum. All students move through the curriculum together at the same pace. Every DrPH course in the first two years is required of every student. Some students are experts on some of the subject matter taught in courses. Nonetheless, every student must take all the same courses. We want students to share their expertise with others in the cohort. We believe active interaction among students is an important part of good adult learning. The focus in the third year is on writing the dissertation, although students are also free to take two electives (if available online). We expect students to try their best to proceed through the program with their cohort and to defend their dissertation within five years of matriculation. At the discretion of the program director and dissertation chair, that time frame may be extended, but in no event will students be permitted to extend their time more than eight years from matriculation.

Note that participation in the doctoral program requires attendance at six on-campus sessions during years 1 and 2 of the program. (It is possible that not more than once each year, the on-campus visit will take place in a location outside Chapel Hill, including elsewhere in the U.S. or abroad.) Exceptions will be made only in the case of 1) illness or death in the family, 2) mandatory organizational obligation (one time only), acknowledged in writing by employer. We understand that important professional and personal opportunities may conflict with scheduled on-campus sessions. However, priority must be given to attendance at on-campus sessions. Only in rare cases will other extraordinary circumstances be considered by the program director.

Similarly, on-time attendance is required at all weekly class sessions throughout years 1 and 2 of the program. Students are expected to arrange vacation and work-related travel plans to accommodate class session times. **Failure to attend class sessions and/or on-campus (or scheduled off-site, in-person sessions held at alternative sites) as specified or chronic tardiness for class sessions will disqualify a student from continuation in the program.** Classes are set up in sequence and each is offered only once a year. Therefore, if a student does not complete a class on schedule, he or she will have to wait one year before the course is offered again.

## ACADEMIC REQUIREMENTS

### Competencies

The UNC Doctoral Program in Health Leadership is designed to give students certain competencies through their coursework and the completion of their dissertation. Competencies define what students should know and be able to do upon completion of their degree program. Competencies guide our curriculum planning process and serve as a measure against which student achievement is assessed. The competencies offered in this program include foundational DrPH competencies identified by the Council on Education for Public Health (CEPH), and additional competencies designed to impart the skills and knowledge needed for a leadership concentration. These later competencies were identified by members of the DrPH Advisory Committee and feedback from past
cohorts. Please refer to the competency matrix at the end of this document to review the learning experiences through which students in the DrPH develop and attain these competencies.

Course Requirements
The program curriculum is summarized in the table below and in Appendix B. A checklist for degree requirements is included in Appendix C. Students in this degree program must also demonstrate core public health competencies, as described in the Gillings Schoolwide Handbook.

**DOCTORAL PROGRAM IN HEALTH LEADERSHIP (DrPH) CURRICULUM**

<table>
<thead>
<tr>
<th>Themes</th>
<th>LEADERSHIP</th>
<th>PUBLIC HEALTH</th>
<th>RESEARCH*</th>
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<tbody>
<tr>
<td><strong>Year 1, Fall</strong></td>
<td>HPM 820: Organizational Leadership Theory and Practice (2)</td>
<td>HPM 860: Population Perspectives for Health (2)***</td>
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<td>HPM 810: Leadership in Public Health Law and Ethics (2)**</td>
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<td>HPM 970: Education and Pedagogy for Health Leaders (2) (starting in Fall, 2019)</td>
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<td><strong>Spring</strong></td>
<td>HPM 965: Cultural Competence for 21st Century Health Leaders (1)**</td>
<td>HPM 966: Systems Thinking/Collective Impact (1)</td>
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<td>HPM 953: Essentials of Practice-based Research (2) **</td>
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<td>HPM 951: Literature Review &amp; Appraisal (2)</td>
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<td><strong>Summer</strong></td>
<td>HPM 823: Global Health (1)**</td>
<td>HPM 963: Program Evaluation (2)***</td>
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<td>HPM 969: Program Planning and Design (1)</td>
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<td><strong>Year 2, Fall</strong></td>
<td>HPM 958: Financial Leadership (3)</td>
<td>HPM 964: Implementation Science (1)</td>
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<tr>
<td><strong>Spring</strong></td>
<td>HPM 957: Leading Organizational Change (1)</td>
<td>HPM 759: Health Policy Analysis and Advocacy for Leaders (2)***</td>
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<tr>
<td></td>
<td>HPM 959: Strategic Management in Health Leadership (2)</td>
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Practicum
DrPH students are expected to engage in one or more applied practice experiences in which they must complete at least one project that is meaningful for an organization and to advance public health practice. The practicum provides students an opportunity to apply the knowledge and skills being acquired through their coursework and further develop and demonstrate attainment of program competencies. Relevant organizations include governmental, non-governmental, non-profit, industrial, or for-profit settings, and may be the student’s own work setting. The work product may be a single project or a set of related projects that demonstrate depth of competence. It may be a discrete experience or integrated into program coursework.

The practicum must be approved, in advance, by the program director, and must cover a minimum of five foundation and/or concentration-specific competencies. At least one must be from the leadership, management and governance domain or from the health leadership domain. The practicum deliverable must incorporate a reflective component, that describes the students personal or professional reactions to their applied experience. Students can accomplish this through a journal entry or other written product, or another deliverable as approved by the program director.

Students can identify projects in classes to meet their practicum requirement, if the project identified is an application of the classroom learning to a “real world” setting (including the student’s worksite, or for another external organization). Alternatively, students can design their own practicum not directly tied to any specific class, as long as the practicum meets the other requirements.

Policy on Repeating Course Enrollments
Although rare, there are instances where a student in HPM does not successfully complete a required course on the first attempt. In the event that this occurs, the following procedures will apply:
Step 1. The student will meet with the instructor of the required course to determine whether it is appropriate and feasible for the student to repeat the same course. If the instructor determines the course is repeatable without any special modifications (e.g., alternative assignments or assessments that are not consistent with those required of other students in the course), and repeating the course does not create a significant hardship for the student (e.g., conflict with another required course) or instructor, then the student will re-enroll in the course in a subsequent semester. If the student believes repeating the course would create a hardship for any reason, the case will proceed to step four below.

Step 2. If the course is repeatable, but requires modification of any assignments or assessments (for example, because assignments or assessments are re-used and the student has access to the answers; prompts for writing assignments are re-used and the student has previously written a paper on the same topic), and the instructor is willing to make such modifications, the student and the instructor will agree to alternative assignments and/or assessments. The terms of the agreement should be documented and signed by both the instructor and the student. An e-mail exchange in which both parties agree is sufficient. This documentation should be provided to the Academic Coordinator so that it can be included in the student’s dossier. The student will re-enroll in the course in a subsequent semester and complete the course as modified in the agreement.

Step 3. If the course is not repeatable as determined by the instructor, but there is an approved substitute available that does not conflict with other required courses in the student’s schedule, the student will enroll in the approved substitute and notify the program director. The HPM Academic Coordinator maintains a list of approved substitutes. The instructor may approve a substitute course that is not on the list with agreement from the program director; however, the HPM course exemption process maintained by student services must be followed.

Step 4. If the instructor and the student cannot come to agreement for any reason, the case will be reported to the program director and referred to the HPM Academic Appeals and Reinstatement Committee (“the Committee”) for resolution. The Committee will solicit information from the student, the instructor, the program director, academic coordinator, student services and others as needed. This information may include, but is not limited to, the availability of any approved or potential substitute courses. The decision of the HPM Academic Appeals and Reinstatement Committee is final, and the student, instructor and program director will proceed as instructed by the Committee. The program director and student, in collaboration with academic coordinator are responsible for implementing the resolution.

Reinstatement and Readmission Procedure for Graduate Students
Students who receive nine credit hours of L (low pass), or who fail one course (F) are academically ineligible to continue in the program. If they want to continue, they must petition for reinstatement.

Reinstatement Procedures
In the event that a student’s performance in the program leads to academic ineligibility to continue, the following policy applies:

“When a Health Policy and Management graduate student is made academically ineligible, s/he may petition the department for reinstatement by submitting the “Request for Reinstatement to Graduate School Form” http://gradschool.unc.edu/pdf/wrenstmt.pdf to the department chair. The chair convenes the department’s Student Appeals Committee to review the student’s request.

The Student Appeals Committee is chaired by a full professor and includes the associate department chair and one additional member of the faculty. In situations
where any of these individuals would have a conflict of interest, the committee chair will consult with the department chair to assign another faculty member(s) to the committee.

The committee gathers all relevant information from the instructor(s) who assigned the grade(s) that made the student ineligible, the student, and others.

The committee makes a recommendation to the chair to endorse or decline to endorse the student’s request for reinstatement, but the final decision is made by the chair and is forwarded to the Graduate School. Final approval rests with the Graduate School.”

Students should also refer to The Graduate School Handbook for the grade appeals process (http://handbook.unc.edu/grading.html)

Readmission Procedures
Students are expected to continue with the doctoral program without interruption. If a break from the 3-year sequence occurs for any reason, we cannot guarantee that a return to the program can be accommodated. Any time a student is not enrolled during the fall and/or spring term, readmission is required. In that event, the student must reapply to seek readmission. Readmission is contingent on approval from the program director and the Graduate School. The appropriate form must be completed by the student and submitted to the academic coordinator.

Readmission application forms can be found on the UNC Graduate School form site at: http://gradschool.unc.edu/forms/.

Culminating Experience
The DrPH program requires two culminating experiences, the successful completion of a written comprehensive exam and a dissertation.

Written Comprehensive Examination
A written comprehensive examination is administered at the end of the second year of the program. The examination integrates key concepts from the overall program curriculum. Students have forty-eight hours in which to take the exam. Specific details about the examination are provided to students at least one week before the exam is scheduled to take place. Note that this and all other examinations are given under the University Honor Code. Students are expected to read, understand, and follow the policies set forth in the Instrument of Student Judicial Governance (http://www.unc.edu/student/policies/isjg). A Department-specific policy governing the comprehensive exam is contained in a separate document available from the HPM Academic Coordinator.

Dissertation
The DrPH dissertation is the ultimate academic test of a student’s competency. It requires the student to apply key aspects of the curriculum to improving the understanding of or resolving an important public health-related administrative or policy issue.

The dissertation should demonstrate the candidate’s mastery of the skills and knowledge required to lead an important health-related program, to create a substantial change in policy for the public’s health, or to develop new methods that accomplish either of these two goals. The dissertation should be of publishable quality in either the scholarly literature or applied literature in health care delivery or public health.
Dissertation Committee
Students must have a 5-member dissertation committee. The chair must be a faculty member in Health Policy and Management. Two other committee members must be faculty members within the Gillings School of Global Public Health (they can be, but are not required to be, from the Department of Health Policy and Management). The three SPH faculty members must also be regular graduate faculty or be specially appointed regular graduate faculty. See: http://gradschool.unc.edu/policies/faculty-staff/faculty/. The other two committee members can be either from UNC or can be practitioners with relevant experience to the dissertation. Students can petition to have practitioners who are not on the UNC faculty appointed as fixed term graduate faculty for purposes of participating on a dissertation.

Guidelines for the Dissertation
Students have flexibility in designing a dissertation project, but all will highlight a potential strategy for addressing a current or past health policy or organizational issue or problem. The dissertation will outline a plan to guide implementation of organizational or policy change. The objective of the DrPH dissertation is to combine research with an understanding of the role of leadership in creating an implementation plan to improve the public’s health.

Students have two options for dissertation formatting. One is the traditional, single monograph DrPH dissertation. The second option is to prepare three manuscripts for publication, tying them together with opening and closing chapters for submission to the UNC Graduate School. Those who are interested in the three-paper option should consult with the program director, dissertation chair, and their dissertation committee members to determine whether or not the alternative is feasible and desirable in their case. Choosing between the traditional DrPH dissertation format and the three-paper option requires consideration of the number of research questions that merit separate treatment in stand-alone manuscripts. There should be agreement at the end of a successful oral proposal defense as to what the format will be. The three-paper option is not appropriate for all students, and the choice of whether or not to use this option does not reflect the quality of the dissertation.

IRB
The School of Public Health’s Institutional Review Board on Research Involving Human Subjects (IRB) (http://research.unc.edu/ohre/) must review all research involving human subjects (including dissertations and class research projects). Students must submit to the IRB, even if the planned research may be exempt as defined for certain human subjects research by the Code of Federal Regulations. Only the IRB can determine whether research is exempt. It is essential to receive IRB approval prior to beginning research. Approval is not given retroactively for any research.

The University requires that all faculty, staff and students who are engaged in the planning, conduct or analysis of research at UNC-Chapel Hill involving human subjects complete an online training module. This training must be completed before beginning work on the dissertation. It is recommended that this module be completed during the first semester in the Doctoral Program. A link to the online training module and details about the module can be found at http://ohre.unc.edu/educ.php. The Collaborative IRB Training Initiative (CITI) at https://www.citiprogram.org/default.asp (direct link to the sign-in page for the module) is a web-based training package on issues relating to human subjects research. The CITI web
site is maintained by the University of Miami, with content developed by a national consortium. CITI contains modules on topics like informed consent, vulnerable populations, ethical principles and IRB regulations. Each module has a short quiz at the end to assess understanding. Thousands of institutions worldwide are using CITI for their mandatory training.

Conflict of interest
The University requires students engaged in research to successfully complete an online training on conflict of interest every four years https://ramses.research.unc.edu/coi-training/. Students who are engaged in research for their dissertation which involves people, resources, or intellectual property associated with their workplace may have a financial conflict of interest. The student will be required to disclose that potential conflict to the University, and may need to work out a management plan with the University to manage their potential conflict.

Outline of single monograph HPM DrPH dissertations

Chapter 1: The Topic. The topic must be innovative and significant. “Innovative” means the dissertation must either identify new approaches to existing or past problems or apply existing approaches to new problems. “Significant” means that the dissertation’s implementation plan must have the potential to create one or more important improvements in the health of the public, or that the identification and understanding of past failures and successes illuminates principles of organizational change or policy implementation that have application in improving future health policy.

Focus: Most dissertations will focus on either:
- A change in an organization or a set of organizations that improves the organizations’ ability to improve the public’s health; or
- Program development, policy development or implementation of evidence-informed strategies at the local, regional, state, or national level aimed at improving the public’s health

Researchable: The topic must be able to be stated as a research question.

Chapter 2: Literature Review. The dissertation must produce a scholarly analytical synthesis that demonstrates the student’s ability to critically evaluate the relevant literature on the issue or problem.

Chapter 3: Methodology. This chapter identifies and describes the appropriate tools to study the issue being examined. The methods used in the dissertation fall under the general rubric of “mechanisms for social change” and may include one or more of the following, as is appropriate for the topic: quantitative data analysis, including large data sets; qualitative analysis; or policy analysis.

Chapter 4: Results. This chapter describes results of the analysis.

Chapter 5: The Plan for Change (eg, Implementation Plan). This section is the centerpiece of the DrPH dissertation and should be comprehensively detailed. This chapter includes recommendations and an explicit strategy for addressing the issue with a focus on the
resources, players, and contextual parameters affecting the change and should include a proposed evaluation methodology. Students should identify an appropriate framework to ground their plan for change. For example, students who are trying to change their own organizational policies or practices may choose to use Kotter’s 8 steps for transforming organizations. Those who want to change public policies may use a policy advocacy framework. Others who want to implement best practices identified during the dissertation may choose to use an implementation framework. Students may use more than one type of change framework for their plan for change. The plan for change should be built around the chosen change framework, and include both the components the student plans to implement, as well as the components that others will need to implement.

The plan for change should combines the various elements of the curriculum in a coherent and comprehensive strategy for making organizational or policy change. Topics covered in the curriculum that should be incorporated as applicable include communications, informatics, policy analysis, social forecasting, scheduling, negotiation, assessment, planning, assurance, public relations, marketing, and evaluation.

Chapter 6: Discussion. This chapter explains how the plan will improve the public’s health if implemented, incorporating the principles identified in the analysis in Chapter 5. It identifies any drawbacks/limitations and explains why the advantages outweigh the disadvantages. This chapter also discusses the implications for future research, practice, and/or policy, and the potential for further dissemination.

Outline of 3-Paper Option DrPH Dissertations

Chapter 1: The Topic and Literature Review. The topic must be innovative and significant as with the traditional dissertation. Note: The chair and/or committee may want this to be split into more than one Chapter, with a more extensive methodology section than what is included in your manuscripts for publication (eg, Chapters 2-4).

The literature review must be an analytical synthesis that demonstrates the student’s ability to critically evaluate the relevant literatures on leadership and organizational or policy change as they relate to understanding the issue or problem and identifying alternative courses of action. The literature review should provide the detailed literature critique that is not usually included in empirical journal articles.

Focus: Most dissertations will focus on either:

- A change in an organization or a set of organizations that improves the organizations’ ability to improve the public’s health;
- Program development, policy development,, or implementation of evidence-informed strategies designed to improve the public’s health

Researchable: The topic must be able to be stated as a research question.
### Chapters 2-4: One manuscript per chapter. Each manuscript should be a journal length paper that is written and formatted according to target journal requirements.

### Chapter 5: The Plan for Change (Implementation Plan). This section is the centerpiece of the DrPH dissertation and should be comprehensively detailed. This chapter synthesizes findings across dissertation papers, and includes recommendations for change. The plan for change should include an explicit strategy for addressing the issue with a focus on the resources, players, and contextual parameters affecting the change. Students should identify an appropriate framework to ground their plan for change. For example, students who are trying to change their own organizational policies or practices may choose to use Kotter's 8 steps for transforming organizations. Others, who want to change public policies may use a policy advocacy framework. Others who want to implement best practices identified during the dissertation may choose to use an implementation or dissemination framework. Students may use more than one type of change framework for their plan for change. The plan for change should be built around this change framework, and include both the components the student plans to implement, as well as the components of the plan that others will need to help implement.

The plan for change should combines the various elements of the curriculum in a coherent and comprehensive strategy for making organizational or policy change. Topics covered in the curriculum that should be incorporated as applicable include communications, informatics, policy analysis, social forecasting, scheduling, negotiation, assessment, planning, assurance, public relations, marketing, and evaluation.

### Chapter 6: Discussion. This chapter explains how the plan for change will improve the public’s health if implemented, incorporating the principles identified in the analysis in Chapter 5. It identifies any drawbacks/limitations and explains why the advantages outweigh the disadvantages. This chapter also discusses the implications for future research, practice, and/or policy, and the potential for further dissemination.

### Appendices: For details not included in the Chapters 2-4 journal articles, but necessary for the detail traditionally included in a dissertation, students should use additional appendices.

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For all dissertations, a committee of at least five persons approved by the Graduate School evaluates the quality of the dissertation. The committee is chaired by an HPM tenure track or Graduate School approved fixed-term faculty member (“Specially appointed regular graduate faculty member”) and consists of at least four other persons. Two of these other persons must be a tenure track or approved fixed-term faculty member in the School of Public Health. Other members of the committee may be drawn from elsewhere within the University. Also, persons from outside the University may serve on dissertation committees with the approval of the Chair of the Department of Health Policy and Management and the Graduate School. These persons will be granted adjunct faculty status in HPM for the duration of their service on dissertation committees.

The committee reviews and approves the dissertation proposal, provides guidance to the student in conducting the dissertation, and ultimately judges whether the dissertation meets the criteria for a scholarly work as outlined above. Specific areas of concern include the significance and appropriateness of the issue chosen, the appropriateness and execution of any conceptual model identified, the methodology used, whether the results logically follow...
from the findings, the completeness and feasibility of the proposed implementation strategy and evaluation plan.

For all dissertations, the committee should be able to answer relevant questions about the dissertation, such as:

Overall Dissertation Evaluation Criteria:
- Considered as a whole, is the dissertation, its methods and findings, significant and innovative?
- Is the literature review thorough and applicable, and has it been synthesized effectively?
- Are relevant leadership theories cited and explained?

Needs or Problem Statement:
- Is the need for the project clearly identified?

Goals and Evaluation Criteria:
- Does the dissertation include a description of policy goals and relevant evaluation measures (e.g., cost, resources needed to implement, feasibility of implementation, political feasibility)?

Data or Policy Analysis:
- Have appropriate research and data analysis methods been employed? (For example, has the student used appropriate quantitative, qualitative, or policy analysis methods to evaluate competing options?)
- Does the project describe how populations and communities will be affected by the change? Are the pros and cons in terms of effect on populations thoroughly analyzed?
- Are considerations of the ethical implications of the change adequate and appropriate?

Recommendations:
- Are the recommendations reasonable and based in the research findings?
- Are the recommendations likely to lead to health improvements?

Implementation Plan (“Plan for Change”):
(Students should address some or all of the following, as appropriate to the dissertation):
- What resources (financial, human and other) are/were needed to implement and maintain the change?
- Has the student grounded their plan for change in an appropriate change framework?
- Have the effects of the laws and policies that bear on this issue been adequately addressed?
- Are/Were the relevant policy makers and stakeholders identified? What are/were their positions? Has the student described a plan to obtain stakeholder support and/or reduce stakeholder opposition?
- Is/Was the proposed schedule for the plan for change realistic? Does/Did it make sense in the context of the project’s budget and resources?
• Have the appropriate policy analyses, social forecasts, assessments, negotiations, communications, and other applications methods been identified and integrated appropriately into the plan?

NOTE: Most students are not able to implement their plan for change before they defend their dissertation. Thus, the dissertation committee members must assess of the potential "real world" utility of the plan for change, and whether it can be implemented in the future.

Dissertation chairs have some leeway in the actual format of the final oral dissertation defense. However, the following process is typical:

**Doctoral Defenses -- Procedures**

1. Convene the defense with introductions (as needed), greetings/welcome, and procedure/plan for proposal or final defense
2. Hold optional closed Executive Session of Committee to clarify any remaining initial concerns before commencing defense.
3. Candidate’s presentation, 20-30 minutes. Questions from Committee/audience should be held to end, unless for clarification only.
4. Committee members should be provided copies of any slides; three-per-page and b&w only generally OK.
5. Questions to Candidate first from Committee, then audience, or
6. Questions to Candidate first from audience, then from Committee, either in (a) open or (b) closed session.
7. Candidate excused from room following all questions.
8. Hold closed Executive Session of Committee to discuss the dissertation and the defense; additional requirements, if any; and outcome.
9. Invite Candidate back into the meeting and brief on the outcome
10. If successful defense, obtain signatures on Doctoral Dissertation completion form and dissertation cover sheets. (The student is responsible to ensure that the chair and committee has the proper dissertation forms to sign.)
11. Detailed feedback by Doctoral Committee Chair immediately, or within 1-2 days, regarding any corrections, necessary changes, elaborations, and any additional work required for dissertation.
12. Assure that Committee delegates authority to Chair to determine whether or not the necessary revisions are successfully completed.

**Chair responsibilities for the Defense:**

1. Assure that all Committee members are on board ahead of the final defense. If a favorable outcome, albeit with minor changes or elaborations, is not a forgone conclusion then do not hold defense.
2. Run defense efficiently, fairly, and comprehensively.
3. Take notes during defense of all Committee member (and audience) questions in order to provide feedback to Candidate. This is particularly important regarding corrections, changes, elaborations, and any additional work required.
4. Celebrate completion and congratulate completion of doctoral studies!
Note: Candidates must be registered during the semester they defend. If the student plans to defend during the summer, he or she must be registered for dissertation credit hours during the summer session.

(Source: adapted from John Paul, PhD)

Progress Report for Students Enrolled in Dissertation Hours (HPM 994)

Students registered for HPM 994 must complete a bi-annual progress report and submit it to their dissertation chair and the DrPH program director at the end of June and December every year. It is the student's responsibility to keep their dissertation chair and DrPH program director informed of their progress and any situations that cause deviations from their dissertation timeline. There is no specialized form on which to submit the report; students are expected to send the information via a detailed email message covering the items noted below. (Note: It is generally good practice to keep in touch with the chair more regularly than once a semester. Often, students set up regular meeting times with their chair—such as once/month—to check in and report on progress. What is listed here is the minimum requirements.)

For students who have not defended their dissertation proposal, the annual progress report should include specific progress on their dissertation proposal during the past year, timeline for scheduling their dissertation proposal defense and an explanation of delays in progress.

For students who have defended their dissertation proposals, the annual progress report should include the date of the dissertation proposal defense, names of dissertation committee members and progress to date on dissertation research, including status of the IRB application, data collection and overall status of work compared to the dissertation timeline.

Students are expected to move in lock-step with their cohort and to defend their dissertation within three-four years of matriculation. Extension of the program beyond five years is not guaranteed and is subject to the discretion of the program director and dissertation chair. When there are extenuating circumstances, it may be possible to extend work in the program to not more eight years from matriculation.

Should the dissertation chair determine that sufficient progress has not been made, a grade of L (low pass) or F (fail) for HPM 994 may be assigned. Failure to provide progress reports to the dissertation chair and program director or repeated failure to make sufficient progress may result in removal from the program. In the event that a student's performance in the program leads to academic ineligibility to continue, the student must follow the reinstatement procedures as outlined in “Reinstatement and Readmission Procedure for Graduate Students” (DrPH Handbook pg.9) if he/she wishes to be considered for reinstatement.

ETHICS, DISCRIMINATION, INSTITUTIONAL REVIEW BOARD, AND HIPAA

Ethics and Honor Code

The Policies and Procedures chapter of the Graduate School Handbook contains detailed information about amorous relationships, illegal drugs, ethics, the Family Educational Rights and Privacy Act, the Honor Code, non-discrimination, racial and sexual harassment, and the alcohol policy.
Harassment and Discrimination
The University’s Policy on Prohibited Harassment and Discrimination 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 (https://unc.policystat.com/policy/4514917/latest/). The policy document 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 & Compliance 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.

Institutional Review Board (IRB) and Research Involving Human Subjects
The University’s Office of Human Research Ethics (https://research.unc.edu/human-research-ethics/) is responsible for protecting human subjects and oversees the School of Public Health’s Institutional Review Board (IRB). The School’s IRB must review all research involving human subjects (including dissertations and class research projects). As described previously, students must submit to the IRB, even if they believe that their research may be exempt as defined for certain human subjects research by the Code of Federal Regulations. Only the IRB can determine whether research is exempt.

It is essential to receive approval prior to beginning research. Approval will not be given retroactively for any research. Additionally, in the not-so-distant future, the University will track the IRB status of all dissertations and theses submitted to fulfill degree requirements; those not approved/reviewed will not be accepted for graduation.
Conflict of Interest
Additionally, all UNC Gillings School of Global Public Health faculty, staff and students involved in research must complete Conflict of Interest (COI) training. COI is a set of situations in which financial or personal considerations, circumstances, or relationships may compromise, may involve the potential for compromising, or may have the appearance of compromising an individual’s objectivity in the pursuit of their research, teaching or administrative duties. The bias that such conflicts may impart can affect many decisions – including the collection, analysis, interpretation of data, the sharing of research results, the choice of research protocols, the use of statistical methods and the mentoring and judgment of student work.

The training will inform the individual of the University’s policies on conflict of interests, individual disclosure responsibilities and the federal regulations on financial conflict of interests. Training must be reviewed and completed at least every four years. Log in at: http://coi-training.unc.edu.

The Gillings School COI Committee will assist in identifying, managing, reducing or eliminating COI related to your dissertation work. For COI management questions, visit http://sph.unc.edu/research/ris/sph-conflict-of-interest-committee/.

HIPAA
The Health Insurance Portability and Accountability Act (HIPAA), which regulates the exchange of health information that is often critical to research, became law in 1996. HIPAA privacy regulations do not replace existing human research participant protections. Rather, HIPAA presents additional requirements. The regulations apply to personal, health and demographic information in the records of health care providers, health plans and health care clearinghouses (so-called "covered entities)," which include the UNC Health Care System, the School of Medicine and other health care providers such as private clinics and hospitals. These entities will refuse to share health records without demonstrated HIPAA conformity, such as a patient’s signed authorization or a waiver of authorization from the researcher’s Institutional Review Board (IRB). Researchers whose work involves clinical trials, patient surveys, retrospective chart reviews, patient database mergers or other information from medical records should therefore know the HIPAA regulations. Online training is available at http://research.unc.edu/offices/research-compliance-program/privacy/

By the end of the first semester each student should obtain training in the University’s approved ethics training course. The OHRE website http://research.unc.edu/offices/human-research-ethics/getting-started/training/ provides instructions about how to obtain ethics training and certification. After completing the online course, the student will be listed in the UNC Human Research Ethics Training Database. Should an actual certificate of training be required, this can automatically be generated from this database. The database can be accessed from the same OHRE URL listed above.

The length of time needed to complete the IRB approval process depends on the type of dissertation research. For example, approval of secondary data analysis or a study involving minimal risk to human subjects may be approved relatively quickly (e.g., within a week or two). Approval for collecting sensitive data about human subjects may require several revisions before IRB approval is granted (e.g., 1-2 months). If dissertation research will involve PHI, then a student may also be required to complete HIPAA training. Information about HIPAA can be found at this URL: http://research.unc.edu/offices/research-compliance-program/privacy/

Therefore, plan ahead so that the research is not delayed. In general, the process is:
1. Complete the proposal.
2. Submit completed IRB application online. This should be submitted either immediately after successfully defending the proposal, or after it is in relatively final form. Note: If significant modifications are made to the proposal, then IRB approval of the modification is required.

The IRB for the School of Public Health is the Non-Biomedical IRB (Committee E). For questions about the IRB process or how to complete particular aspects of the application, please contact the IRB office at 919-966-3113 or by email, irb_questions@unc.edu. To check the status of your review, go to irbis.unc.edu.

FORMS

Required Forms
A number of forms must be completed and submitted to the Graduate School during the doctoral program. All required forms are available from the Academic Coordinator. Students should check with the Academic Coordinator to ensure that the appropriate forms are filed on their behalf and at the appropriate times. **Students are responsible for initiating and ensuring follow through for all relevant forms. ALL FORMS SHOULD BE SUBMITTED TO THE HPM ACADEMIC COORDINATOR, Kim Sieler (krsieler@email.unc.edu, CB# 7411, School of Public Health, HPM, UNC-Chapel Hill, 27599). STUDENTS SHOULD NOT SUBMIT FORMS DIRECTLY TO THE GRADUATE SCHOOL.**

<table>
<thead>
<tr>
<th>Report</th>
<th>Filed after</th>
<th>Responsible party</th>
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</thead>
<tbody>
<tr>
<td>1 <em>Curriculum vitae</em></td>
<td>Each year</td>
<td>Student</td>
</tr>
<tr>
<td>2 <em>Preliminary Doctoral Written Examination</em></td>
<td>Taking written comprehensive exams</td>
<td>Program Director</td>
</tr>
<tr>
<td>3 <em>Doctoral Committee Composition</em></td>
<td>Assembling a dissertation committee</td>
<td>Student, with Program Director approval</td>
</tr>
<tr>
<td>3.1 Note: When applicable, students are responsible for submitting forms to have non-UNC faculty appointed to the HPM Academic Coordinator to serve on their committees.</td>
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<tr>
<td>4 <em>Approved Dissertation Project</em></td>
<td>Defending the dissertation proposal (first oral examination)</td>
<td>Student, with chair approval</td>
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<tr>
<td>5 <em>Oral Examination</em></td>
<td>Defending the dissertation proposal (first oral examination)</td>
<td>Committee Chair</td>
</tr>
<tr>
<td>6 <em>IRB Approval</em></td>
<td>Getting IRB approval</td>
<td>Student</td>
</tr>
<tr>
<td>7 <em>Application for Graduation</em></td>
<td>Completing all requirements (except dissertation defense), about 3 months before graduation</td>
<td>Student</td>
</tr>
<tr>
<td>8 <em>Final Oral Examination</em></td>
<td>Defending the final dissertation</td>
<td>Committee Chair</td>
</tr>
</tbody>
</table>
1. **Curriculum Vitae:**
   **Filed by July 1 of each year:** Students must provide a copy of their current curriculum vitae to their advisor and to the DrPH Program Director. The curriculum vitae should describe students’ research, teaching, and service activities.

2. **Report of Preliminary Doctoral Written Examination**
   **(Part I: Doctoral Exam Report Form)**
   **Filed after taking written comprehensive exams:** This form reports the results of the written comprehensive exam, and is filed regardless of whether the outcome of the examination is a pass or fail. The Director of the DrPH Program is responsible for filing this form for DrPH students.

3. **Report of Doctoral Committee Composition**
   **Filed after assembling a dissertation committee:** The doctoral dissertation committee must be approved by the Director of the DrPH Program, the chair of the dissertation committee, and the Graduate School. Often this form is completed at the same time as the oral defense of the dissertation proposal. The student is responsible for filing this form with the HPM Academic Coordinator.

4. **Report of Approved Dissertation Project**
   **Filed after defending the dissertation proposal (first oral examination):** The dissertation committee signs this form indicating approval of the proposed dissertation project. The working title of the dissertation is filed with the Graduate School. The student is responsible for filing this form with the HPM Academic Coordinator, or must ensure that the Chair submits the completed form to the HPM Academic Coordinator.

5. **Report of Oral Examination**
   **(Part II: Doctoral Exam Report Form)**
   **Filed after defending the dissertation proposal (first oral examination):** This form reports the results of the dissertation proposal defense, and is filed regardless of whether the student passes or fails the examination. The Graduate School does not consider a student to have passed the oral examination, and therefore to be eligible for doctoral candidacy, until it receives this report. The dissertation committee chair is responsible for filing this form.

6. **IRB Approval**
   **Filed after defending the dissertation proposal:** See section on IRB.

7. **Application for Graduation**
   **Filed after completing all requirements (except dissertation defense), about 3 months before graduation (please check University calendar for the exact filing date):** Degrees are awarded three times a year; May, August, and December. A student who expects to finish soon must notify the department and the Graduate School of her/his intention to graduate by submitting an application for graduation on a specific date. **A student will not be eligible for graduation until a copy of the approved dissertation, properly formatted, is received by the Graduate School.** (Note: students need to
submit their dissertation directly to the graduate school, not to the HPM Academic Coordinator).

8. Report of the Final Oral Examination
   (Part III: Doctoral Exam Report Form) Filed after defending the final dissertation: The final oral examination takes place at the time of the dissertation defense. The dissertation committee chair is responsible for filing this form.

Additional Forms
   Change of Advisor Request

This form is filed whenever the student requests a change in a dissertation committee member.

Graduation

Submission of Final Dissertation to Graduate School

Students must submit a completed copy of their dissertation to the graduate school by the submission deadline (which will vary depending on when the student is planning on graduating). There is a check list, formatting information, and information on the submission process on the Graduate School site at: http://gradschool.unc.edu/academics/thesis-diss/guide/submission.html.
### Appendix A: Degree Specific Competencies

**Department:** HPM  
**Degree:** DrPH (2020-22)

<table>
<thead>
<tr>
<th>Competencies</th>
<th>Course Number and Name</th>
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<th>Other Learning Experience</th>
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<tbody>
<tr>
<td><strong>Data and Analysis</strong></td>
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<tr>
<td>1. Explain qualitative, quantitative, mixed methods and policy analysis</td>
<td>HPM 953 Essentials of Practice-based Research (P)</td>
<td>HPM 963 Program Evaluation for Health Leaders (R)</td>
<td>HPM 945 Dissertation Planning and Prep (P)</td>
<td>HPM 956 Fundamentals of Research and Analysis (R)</td>
<td>Dissertation</td>
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<td>research and evaluation methods to address health issues at multiple (individual, group, organization, community and population) levels</td>
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<tr>
<td>2. Design a qualitative, quantitative, mixed methods, policy analysis or</td>
<td>HPM 945 Dissertation Planning and Prep (P)</td>
<td>HPM 956 Fundamentals of Research and Analysis (P)</td>
<td>HPM 759 Health Policy Development &amp; Advocacy (P)</td>
<td>HPM 963 Program Evaluation for Health Leaders (R)</td>
<td>Dissertation</td>
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<td>evaluation project to address a public health issue.</td>
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<td>3. Explain the use and limitations of surveillance systems and national</td>
<td>HPM 967 Quality Improvement (P)</td>
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<td>surveys in assessing, monitoring, and evaluating policies and programs and</td>
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<td>to address a population's health</td>
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<td>4. Propose strategies for health improvement and elimination of health</td>
<td>HPM 969 Program Planning (P)</td>
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<td>Dissertation</td>
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<td>inequities by organizing stakeholders, including researchers, practitioners,</td>
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<td>community leaders and other partners</td>
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<td>Competencies</td>
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<tr>
<td>5. Communicate public health science to diverse stakeholders, including individuals at all levels of health literacy, for purposes of influencing behavior and policies</td>
<td>HPM 962 Marketing and PR for Health Leadership (P)</td>
<td>HPM 860 Population Perspectives for Health/ The Research Process (R)</td>
<td>HPM 963 Program Evaluation for Health Leaders (R)</td>
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<tr>
<td>6. Integrate knowledge, approaches, methods, values and potential contributions from multiple professions and systems in addressing public health programs</td>
<td>HPM 966 Systems thinking (P)</td>
<td>HPM 860/950 Population Perspectives for Health/ The Research Process (R)</td>
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<td>Dissertation</td>
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<td>7. Create a strategic plan</td>
<td>HPM 959 Strategic Management in Health Leadership (P)</td>
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<tr>
<td>8. Facilitate shared decision making through negotiation and consensus building methods</td>
<td>HPM 957 Crisis Leadership (P)</td>
<td>HPM 759 Health Policy Development &amp; Advocacy (R)</td>
<td>HPM 820 Leadership Theory and Practice (R)</td>
<td>3 hour module when on campus</td>
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<tr>
<td>9. Create organizational change strategies</td>
<td>HPM 940 Leadership in Health Informatics (P)</td>
<td>HPM 820 Leadership Theory and Practice (R)</td>
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<tr>
<td>10. Propose strategies to promote inclusion and equity within public health programs, policies and systems</td>
<td>HPM 965 Cultural Competence for 21st Century Health Leaders (P)</td>
<td>HPM 950/860 Population Perspectives for Health (P)</td>
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<tr>
<td>11. Assess one's own strengths and weaknesses in leadership capacities including cultural proficiency</td>
<td>HPM 965 Cultural Competence for 21st Century Health Leaders (P)</td>
<td>HPM 820 Leadership Theory and Practice (P)</td>
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<tr>
<td>12. Propose human, fiscal, and other resources to achieve a strategic goal</td>
<td>HPM 959 Strategic Management in Health Leadership (P)</td>
<td>HPM 968 Human Resources (P)</td>
<td>HPM 958 Financial Leadership (P)</td>
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<tr>
<td>Competencies</td>
<td>Course Number and Name</td>
<td>Other Learning Experience</td>
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<tr>
<td>13. Cultivate new resources and revenue streams to achieve a strategic goal</td>
<td>HPM 959 Strategic Management in Health Leadership (P)</td>
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<td>HPM 958 Financial Leadership (P)</td>
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<tr>
<td>14. Design a system-level intervention to address a public health issue</td>
<td>HPM 969 Program Planning (P)</td>
<td>Dissertation</td>
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<tr>
<td>15. Integrate knowledge of cultural values and practices in the design of public health policies and programs</td>
<td>HPM 969 Program Planning (P)</td>
<td>Dissertation</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>16. Integrate scientific information, legal and regulatory approaches, ethical frameworks, and varied stakeholder interests in policy development and analysis</td>
<td>HPM 759 Health Policy Development &amp; Advocacy (P)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>HPM 810 Leadership in Public Health Law and Ethics (P)</td>
<td></td>
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<tr>
<td>17. Propose interprofessional team approaches to improving public health</td>
<td>HPM 966 Systems Thinking (P)</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>HPM 968 Human Resources (R)</td>
<td></td>
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<td></td>
<td>HPM 957 Crisis Leadership (R)</td>
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<tr>
<td>18. Assess an audience's knowledge and learning needs</td>
<td>HPM 970 Education &amp; pedagogy for health leaders (P)</td>
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<tr>
<td></td>
<td>HPM 759 Health Policy Development &amp; Advocacy (P)</td>
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<tr>
<td>19. Deliver training or educational experiences that promote learning in academic, organizational, and community settings</td>
<td>HPM 970 Education &amp; pedagogy for health leaders (P)</td>
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<tr>
<td>20. Use best practice modalities in pedagogical practice</td>
<td>HPM 970 Education &amp; pedagogy for health leaders (P)</td>
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<tr>
<td>21. Integrate ethics and professionalism into organizational and community settings</td>
<td>HPM 810 Leadership in Public Health Law and Ethics (P)</td>
<td></td>
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<tr>
<td></td>
<td>HPM 820 Leadership Theory and Practice (R)</td>
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<tr>
<td>22. Apply systems thinking approaches to learn about and inform collaborative action targeting complex public health problems</td>
<td>HPM 966 Systems Thinking (P)</td>
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</tr>
<tr>
<td>Competencies</td>
<td>Course Number and Name</td>
<td>Course Number and Name</td>
<td>Course Number and Name</td>
<td>Course Number and Name</td>
<td>Other Learning Experience</td>
</tr>
<tr>
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<tr>
<td>23. Apply the principles of implementation research and practice to successfully integrate evidence-based public health practices into community settings.</td>
<td>HPM 964 Implementation Science (P)</td>
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<tr>
<td>24. Use quality improvement techniques to evaluate and improve health systems, programs and practices</td>
<td>HPM 967 Quality Improvement (P)</td>
<td>HPM 963 Program Evaluation for Health Leaders (R)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Develop policy advocacy strategies at the legislative, administrative, or judicial levels to influence health policies</td>
<td>HPM 759 Public Policy Development &amp; Advocacy (P)</td>
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<td></td>
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<tr>
<td>26. Assess informatics needs in organizations and community-based settings to improve population health</td>
<td>HPM 940 Leadership in Health Informatics (P)</td>
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<tr>
<td>27. Assess WHO health systems building blocks in an international context and identify system elements from different countries that could be used to improve access, quality or health outcomes in home/work country</td>
<td>HPM 823 Global Health (P)</td>
<td></td>
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</tr>
</tbody>
</table>

P=Primary, R=Reinforcing.
APPENDIX B: Academic Schedule and Course Sequence: 2020-2022 (Cohort 16)

**FALL 2020 (CLASSES ON TUESDAY NIGHTS FROM 4:00-7:00 EST)**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPM 810</td>
<td>Leadership in Public Health Law and Ethics</td>
<td>2</td>
</tr>
<tr>
<td>HPM 820</td>
<td>Leadership Theory and Practice</td>
<td>2</td>
</tr>
<tr>
<td>HPM 860</td>
<td>Population Perspectives for Health/Research Process</td>
<td>2</td>
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<tr>
<td>HPM 970</td>
<td>Training and Pedagogy for Health Leaders</td>
<td>1</td>
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</table>

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration</td>
<td>(Academic Coordinator will notify)</td>
</tr>
<tr>
<td>Campus Visit (online)</td>
<td>August 10 - 14, 2020</td>
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<tr>
<td>First Day of Classes (online)</td>
<td>August 18, 2020</td>
</tr>
<tr>
<td>Last Day of Classes (online)</td>
<td>December 8, 2020</td>
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</table>

**SPRING 2021 (CLASSES ON TUESDAY NIGHTS FROM 4:00-7:00 EST)**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credit Hours</th>
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<tbody>
<tr>
<td>HPM 966</td>
<td>Systems Thinking/Collective Impact</td>
<td>1</td>
</tr>
<tr>
<td>HPM 951</td>
<td>Literature Review and Appraisal</td>
<td>2</td>
</tr>
<tr>
<td>HPM 953</td>
<td>Essentials of Practice-based Research</td>
<td>2</td>
</tr>
<tr>
<td>HPM 965</td>
<td>Cultural Awareness and Competency</td>
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</table>

<table>
<thead>
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<tbody>
<tr>
<td>Registration</td>
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<tr>
<td>Campus Visit <em>(tentative)</em></td>
<td>January 2-5, 2021</td>
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<tr>
<td>First Day of Classes (online)</td>
<td>January 12, 2021</td>
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<tr>
<td>Last Day of Classes (online)</td>
<td>April 27, 2021</td>
</tr>
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**SUMMER 2021: CLASSES DURING SUMMER ON TUESDAY NIGHTS FROM 4:00-7:00 EST**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
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</thead>
<tbody>
<tr>
<td>HPM 945</td>
<td>Dissertation Preparation and Planning I</td>
<td>2</td>
</tr>
<tr>
<td>HPM 969</td>
<td>Program Planning and Design</td>
<td>1</td>
</tr>
<tr>
<td>HPM 823</td>
<td>Global Health Systems</td>
<td>1</td>
</tr>
<tr>
<td>HPM 963</td>
<td>Program Evaluation</td>
<td>2</td>
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</table>

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration</td>
<td>(Academic Coordinator will notify)</td>
</tr>
<tr>
<td>Campus</td>
<td>May 10-14, 2021</td>
</tr>
<tr>
<td>First Day of Classes (online)</td>
<td>May 18, 2021</td>
</tr>
<tr>
<td>Last Day of Classes (online)</td>
<td>August 3, 2021</td>
</tr>
</tbody>
</table>
APPENDIX B (continued)

Tentative Academic Schedule and Course Sequence: 2020-2022 (Cohort 16)*

**FALL 2021 (CLASS ON WEDNESDAYS)**

HPM 956: Fundamentals of Research Analysis (3 credit hours)
HPM 958: Financial Leadership (3 credit hours)
HPM 964: Implementation Science (1 credit hour)

Registration (Academic Coordinator will notify)
Campus Visit August 9-13, 2021*
First Day of Classes August 17, 2021*
Last Day of Classes (online) December 7, 2021*

**SPRING 2022 (CLASS ON WEDNESDAYS)**

HPM 759: Health Policy Analysis and Advocacy for Leaders (2 credit hours)
HPM 967: Quality Improvement (1 credit hour)
HPM 957: Crisis Leadership (1 credit hours)
HPM 959: Strategic Management in Health Leadership (2 credit hours)

Registration (Academic Coordinator will notify)
Campus Visit To be determined
First Day of Classes To be determined
Last Day of Classes (online) April 27, 2022*

**SUMMER 2022 (CLASSES ON WEDNESDAYS)**

HPM 962: Marketing and PR for Health Leaders (2 credit hours)
HPM 940: Leadership in Health Informatics (1 credit hour)
HPM 968: Human Resources (1 credit hour)

Registration (Academic Coordinator will notify)
Campus Visit/(International visit) May 9 - 13, 2022*
First Day of Classes May 18, 2022*
Last Day of Classes (online) August 3, 2022*

**FALL 2022 – SUMMER 2023 (NOTE: STUDENTS ONLY NEED TO REGISTER FOR DISSERTATION CREDIT HOURS IN FALL AND SPRING, UNLESS PLANNING TO DEFEND PROPOSAL OR DISSERTATION IN SUMMER).**

HPM 994: Doctoral Disseration (3 credit hours)
Elective course #1 (optional)
Elective course #2 (optional)

Registration (Academic Coordinator will notify)

*Dates for onsite meeting, as well as the start and ending dates for the online classes in 2021-22 subject to change, based on University calendars. Check with program director before making travel plans.
APPENDIX B:  Academic Schedule and Course Sequence:  2020-2021 (Cohort 15)

**FALL 2020 (CLASSES WEDNESDAYS FROM 4:00-7:00 EST)**

- HPM 956: Fundamentals of Research Analysis (3 credit hours)
- HPM 958: Financial Leadership (3 credit hours)
- HPM 964: Implementation Science (1 credit hour)

  Registration  (Academic Coordinator will notify)
  Campus Visit (Webinar)  August 10-14, 2020
  First Day of Classes (online)  August 19, 2020
  Last Day of Classes (online)  December 9, 2020

**SPRING 2021 (CLASSES WEDNESDAYS FROM 4:00-7:00 EST)**

- HPM 759: Health Policy Analysis and Advocacy for Leaders (2 credit hours)
- HPM 967: Quality Improvement (1 credit hour)
- HPM 959: Strategic Management in Health Leadership (2 credit hours)
- HPM 957: Leading Organizational Change (1 credit hours)

  Registration  (Academic Coordinator will notify)
  Campus Visit or webinar  January 2-5, 2021
  First Day of Classes (online)  January 13, 2021
  Last Day of Classes (online)  April 28, 2021

**SUMMER 2021: CLASSES DURING SUMMER ON WEDNESDAYS FROM 4:00-7:00 EST**

- HPM 962: Marketing and PR for Health Leaders (2 credit hours)
- HPM 940: Health Informatics (1 credit hour)
- HPM 968: Human Resources (1 credit hour)

  Registration  (Academic Coordinator will notify)
  Campus visit or webinar  May 10-14, 2021
  First Day of Classes (online)  May 19, 2021
  Last Day of Classes (online)  August 4, 2021

**FALL 2021 – SUMMER 2022**

- HPM 994: Doctoral Disseration (3 credit hours)

  Students must register for HPM 994 for each fall and spring semester until they defend their proposal. Students need at least two semesters of HPM 994 to graduate. Students do not need to register for HPM 994 in the summer unless they plan on defending their proposal or final dissertation in the summer session.

  Elective course #1 (optional)
  Elective course #2 (optional)
APPENDIX C: Degree Requirements Checklist (Cohorts 15, 16)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
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<tbody>
<tr>
<td>Prerequisite</td>
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<tr>
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<td>SPHG 600/FLO*</td>
<td>Foundation Learning Objectives</td>
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<td>Fall , Year 1</td>
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<tr>
<td>Leadership/PH</td>
<td>HPM 970</td>
<td>Training and Pedagogy for Health Leaders</td>
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<tr>
<td>Leadership/PH</td>
<td>HPM 810</td>
<td>Leadership in Public Health Law and Ethics</td>
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</tr>
<tr>
<td>Leadership</td>
<td>HPM 820</td>
<td>Organizational Leadership Theory and Practice</td>
<td>2</td>
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<td>Public Health</td>
<td>HPM 860</td>
<td>Population Perspectives for Health/Research Process</td>
<td>2</td>
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<tr>
<td>Dissertation</td>
<td></td>
<td>Identification of dissertation topic (general description)</td>
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<tr>
<td>Spring, Year 1</td>
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<tr>
<td>Research</td>
<td>HPM 951</td>
<td>Literature Reviews &amp; Appraisal</td>
<td>2</td>
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<td>Research/PH</td>
<td>HPM 953</td>
<td>Essentials of Practice-based Research</td>
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<tr>
<td>Leadership/PH</td>
<td>HPM 965</td>
<td>Cultural Competence for 21st Century Health Leaders</td>
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<tr>
<td>Public Health</td>
<td>HPM 966</td>
<td>Systems Thinking and Collective Impact</td>
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<tr>
<td>Dissertation</td>
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<td>Dissertation topic finalized, first draft of literature review completed</td>
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<td>Summer, Year 1</td>
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<td>Leadership/PH</td>
<td>HPM 823</td>
<td>Global Health</td>
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<td>Research</td>
<td>HPM 945</td>
<td>Dissertation Preparation and Planning</td>
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<td>Research/PH</td>
<td>HPM 963</td>
<td>Program Evaluation for Health Leaders</td>
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<td>Public Health</td>
<td>HPM 969</td>
<td>Program Planning and Design</td>
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<tr>
<td>Dissertation</td>
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<td>Draft Chapter 1 (Background and significance), revised Chapter 2 (Literature review)</td>
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<td>HPM 956</td>
<td>Fundamentals of Research Methods and Analysis</td>
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<td>Financial Leadership</td>
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<td>HPM 964</td>
<td>Implementation Science</td>
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<td>HPM 957</td>
<td>Crisis Leadership</td>
<td>1</td>
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<tr>
<td>Leadership</td>
<td>HPM 959</td>
<td>Strategic Planning for Public and Non-Profit Organizations</td>
<td>2</td>
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</table>
*Students who do not have a degree from an accredited school/program of public health will take the one 3-credit Foundational Learning Objective (FLO) course. Students can seek a waiver based on their work history, if they can show they have work experience that meets all the foundational learning objectives.*