REVIEW FOR ACCREDITATION
OF THE
SCHOOL OF PUBLIC HEALTH
AT THE
UNIVERSITÉ DE MONTRÉAL
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Introduction

This report presents the findings of the Council on Education for Public Health (CEPH) regarding the School of Public Health at the Université de Montréal. The report assesses the school’s compliance with the Accreditation Criteria for Schools of Public Health, amended June 2011. This accreditation review included the conduct of a self-study process by school constituents, the preparation of a document describing the school and its features in relation to the criteria for accreditation, and a visit in January 2017 by a team of external peer reviewers. During the visit, the team had an opportunity to interview school and university officials, teaching faculty, students, alumni and community representatives and to verify information in the self-study document by reviewing materials provided in a resource file. The team was afforded full cooperation in its efforts to assess the school and verify the self-study document.

The Université de Montréal, founded in 1878, is comprised of 16 schools/colleges and is home to more than 67,000 students. It is the only institution in Canada that includes study in all the health sciences, including animal health. The institution has a long history of public health training, tracing to hygienists’ training in 1911.

The university operated an independent school of public health from 1946 to 1971, at which point public health merged with the faculty in medicine. Three public health related departments emerged: Hygiene, Social and Preventive Medicine and Health Administration. The health administration program has been accredited by the Commission on Accreditation of Healthcare Management Education (CAHME) since 1967. A PhD in public health was established in 1978, the international health unit started in 1989 and the university maintained several MSc degrees in public health disciplines.

Discussions about re-establishing an independent school of public health emerged in 2008. Strategic discussions centered on developing new programs in global health, epidemiology, biostatistics, bioethics and existing programs were considered for expansion. The École de Santé Publique de l’Université de Montréal was officially created in 2013 with a 10-year business plan in place to support its evolution. A commitment was also made at that time to seek CEPH accreditation. The 2013 plan was revisited in 2015, and that process culminated with the school’s self-study document.

The school offers the Master of Science in Public Health (MSc) degree, which is equivalent to the Master of Public Health (MPH) degree. The school offers the MSc in seven professional specializations representing the traditional core knowledge areas and some additional knowledge areas such as global health. The school also offers an MSc as an academic degree, offered as a generalist specialization with a thesis.
The community health master’s program (MSc) has been CEPH accredited since 2005 as a generalist program. The Université de Montréal was accepted as a CEPH school applicant in September 2014. The school seeks to accredit the Master in Science of Public Health, other professional master’s degrees, other academic master’s degrees and several public health doctoral degrees. This is the school’s first accreditation review.

As a program, the Université de Montréal had a full review in 2010. Based on this review, the Council requested an interim report due in 2012. After the program failed to come into compliance with three out of the five issues related to evaluation (one issue) and assessment procedures (four issues), the Council put the program on probation. In the 2012 interim report, the program had failed to come into compliance with 1) developing and implementing an evaluation and planning system that defines desired outcomes, collects data and analyzes data on all significant aspects of the program’s research, teaching and service (criterion 1.2); 2) implemented means for tracking graduates’ employment destination and collected data (criterion 2.7); and 3) implemented means for collecting data on alumni and employer impressions of students’/graduates’ competence and collected analyzed data (criterion 2.7). The program had a focused review in 2013 and another full review in 2016.
Characteristics of a School of Public Health

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

a. The school shall be a part of an institution of higher education that is accredited by a regional accrediting body recognized by the US Department of Education.

b. The school and its faculty shall have the same rights, privileges and status as other professional schools that are components of its parent institution.

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

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

e. The school shall have faculty and other human, physical, financial and learning resources to provide both breadth and depth of educational opportunity in the areas of knowledge basic to public health. As a minimum, the school shall offer the Master of Public Health (MPH) degree in each of the five areas of knowledge basic to public health and a doctoral degree in at least three of the five specified areas of public health knowledge.

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

These characteristics are evident in the school of public health at the Université de Montréal. The Université de Montréal is an institution of higher learning, established by the Province of Quebec’s Parliament, with appropriate quality control mechanisms equivalent to regional accreditation. The school and its faculty have the same rights, privileges and status as other professional schools at the Université de Montréal.

The school offers master’s degrees in the five public health core areas and also offers a PhD degree in three of the five core areas. The school has adequate faculty and resources to fulfill its stated mission, goals and objectives and to offer its degrees. The faculty have diverse backgrounds that support interdisciplinary collaboration and students’ development of professional public health values.
1.0 THE SCHOOL OF PUBLIC HEALTH.

1.1 Mission.

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

This criterion is met. The Université de Montréal School of Public Health has articulated a clear mission statement that was developed as part of the strategic planning process that began with discussions around the development of the school’s founding document in February 2013. The founding document shaped the school’s initial four year action plan (2013-2017) and the inaugural dean’s four year roadmap. During the 2015-2016 academic year (AY), this plan was revisited and a larger constituency was included in the review process, including faculty, staff, students, alumni and employers. An enlarged set of performance indicators were constructed at this time as well.

The school’s mission statement is as follows:

The mission of the École de Santé Publique de l’Université de Montréal (ESPUM) is to contribute to the improvement of planetary health through innovation and leadership in education, research and service at local and global levels.

The school’s definition of planetary health incorporates issues such as well-being, equity, and human systems (political, economic and social) that shape our capacity to flourish. The school’s values include health, well-being, equity, professionalism, innovation, diversity and responsiveness.

The school promotes four goals: The instructional goal addresses the quality and diversity of the faculty and students as well as the strength of the academic programs and seeks success in graduation rates, employment and workforce development. The research goal targets student engagement in faculty research in all key areas of public health and references funding dollars, knowledge translation and scholarly productivity. The service goal seeks to establish faculty and student service activities that improve the public’s health locally and globally. The organizational goal seeks to establish an environment grounded in respect, transparency and good governance, including ensuring access to adequate resources to establish and continuously improve the school’s operations and activities.

The initial plans for the school were formed from a mainly internal group of university leaders. During AY 2015-2016, planning review activities integrated a wider lens as community members, faculty, staff, students, alumni and employers participated in the process. The mission and values statements were formally adopted in June 2016 and are publicly available on the school’s website and student handbook. Bi-annual meetings are now held to examine the previous year’s performance and chart plans for the coming year. Town hall meetings, designed to provide updates and seek input from community partners, also occur twice annually.
1.2 Evaluation and Planning.

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

This criterion is partially met. The Université de Montréal has developed a wide array of data-driven tools to inform evaluation and improvement. The university has recently established use of an integrated resource planning system called Synchro to link financial, research, HR, payroll, academic and student-related data for strategic purposes. The school uses updated faculty CVs, five surveys (student entrance, student exit, alumni, employer and personnel) and student course and internship evaluations as primary data sources.

There is ample evidence that these data have directly informed the self-study process, but it is not clear that this was the case when the original strategic planning process occurred. The self-study notes that the school created a Monitoring Committee in October 2016 to develop the various dashboards and protocols to use the data for planning purposes in the future. The committee includes the following members: the self-study coordinator; the associate academic dean, the associate research dean and the senior administrative officer. The committee collaborates with the school’s academic and research committees. It is charged with building the dashboards to monitor school performance on its metrics and ensuring that findings are used to influence practice.

The data, where there are sufficient data elements in place, provide a positive picture of institutional performance. Performance on indicators related to research and scholarly productivity and student engagement in research provide evidence of a strong faculty contingent. Many of the measurable objectives were established during the 2015 revisit of the school’s strategic plan and have generated only one data point. The process of creating a self-study document and collecting data allowed the school to recognize areas for improvement. For example, the self-study document process helped inform the Monitoring Committee of potential revisions to the internship component of the practical skills experience for master’s students in public health programs, adding portfolios, given that this inclusion would assist graduates in their transition from school to work.

The school has instituted multiple informal and formal mechanisms to elicit feedback from stakeholders. To improve the student experience, the school created new surveys that seek information on areas identified as needing more timely data, such as satisfaction with service opportunities and advising. Alumni feedback remains a valuable data source, despite low response rates to the current survey format. The school is revising the surveys, including the timing of when they are distributed, to enhance
The school has also implemented regular town hall meetings where all school constituents are welcome to attend, raise concerns and provide feedback.

The concern relates to the lack of data regarding the school's performance on many of the measurable objectives identified and the corresponding lack of evidence of use of evaluation data in ongoing planning and decision making. This was an observation of the site visit teams in both the 2013 and 2016 reviews as well. Several of the proposed metrics are new; and many of the metrics have only one year of data. In most cases, the lack of data can be attributed to that the majority of the schools metrics emerged not from the initial strategic planning of the school, but from the AY 2015-2016 assessment processes aligned with the self-study and accreditation procedures. There is little evidence of the use of metrics findings to regularly influence school improvement initiatives. This is linked more to the fact that the Monitoring Committee, charged with implementing these data driven improvement processes, was officially chartered in October 2016, three months prior to the on-site visit. Site visitors confirmed that processes are in place to meet this evaluation criterion, but ample data is not yet available for the school to demonstrate compliance. The implementation of Synchro will also improve future evaluation efforts.

1.3 Institutional Environment.

The school shall be an integral part of an accredited institution of higher education and shall have the same level of independence and status accorded to professional schools in that institution.

This criterion is met. The school is an integral part of the Université de Montréal, which is established by the Province of Québec's Parliament, with appropriate quality control mechanisms equivalent to regional accreditation. The school enjoys the same level of autonomy and authority as all other schools within the Université de Montréal. A total of 104 programs at the Université de Montréal are currently accredited, including the Master in Health Services Administration, which has been accredited by the Commission on Accreditation of Healthcare Management Education (CAHME) since 1967.

The Université de Montréal is the leading research institution in Quebec province, offering 16 faculties (equivalent to US schools/colleges), including the School of Public Health. Within the school, there are three departments: the Department of Health Management, Evaluation and Policy; the Department of Social and Preventive Medicine; and the Department of Environmental and Occupational Health. The school also includes the International Health Unit. The International Health Unit was created in 1989 and supports the school's mission, providing opportunities for faculty and students to engage in global health activities, particularly providing assistance to low and intermediary income countries.

The Université de Montréal is organized around four major governing bodies: 1) the University Council, which adopts the university budget, approves audits and is chaired by the university chancellor; 2) the Executive Committee, which is chaired by the university rector (president) and ensures that the University Council's decisions are implemented; 3) the University Assembly, which is chaired by the rector and
includes over 100 university stakeholders as members. The Assembly helps the university establish general principles for the direction of the university and makes recommendations to the University Council; and 4) the Academic Commission, which is also chaired by the rector and is responsible for coordinating the university’s training and education mandate.

In terms of reporting lines, the school of public health dean reports directly to the rector and meets with the rector at least twice a month. The dean also reports to the vice presidents and to the dean of the faculty of graduate and postdoctoral studies, as needed. For instance, the dean may report to the vice president of research, discovery, creation and innovation; the vice president of international relations, francophone and philanthropy; the vice president of academic development and institutional transformation; the vice president of human resources and planning; the vice president of finance and infrastructure; or the vice president of student affairs and academics. The dean, acting as chief administrative officer of the school, has full authority over the budget and decisions related to resource allocation; personnel recruitment, selection and advancement among faculty, after approval from the necessary university officials; and overseeing, in collaboration with program leaders, the development and oversight of each school degree program’s curriculum.

The Université de Montréal’s rector and the school’s founding dean confirmed the high priority given to the school of public health, including a ten-year plan to create the school and position it so that it can grow and sustain its operations independently. Faculty and community stakeholders also spoke highly of the interaction between the school and the greater university community, particularly the research centers.

1.4 Organization and Administration.

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

This criterion is met. The school provides an organizational setting conducive to public health learning, research and service. The school has a dean and two associate deans, for research and academic affairs. The school also has a secretary, senior administrative officer, communications officer and three department chairs to assist the dean in the school’s development, activities and management.

Faculty who met with site visitors provided numerous examples of how the school facilitates interdisciplinary communication, cooperation and collaboration, contributing to achieving the school’s mission, goals and objectives. The university provides the school with access to four research centers and institutes to help achieve the school’s mission, including 1) the Institut de Recherché en Santé Publique, 2) Centre Hospitalier Universitaire de l'Université de Montréal, 3) Centre de Recherché du Centre Hospitalier Universitaire Ste-Justine and 4) the Centre de Recherché Léa-Roback.
At the time of the site visit, the site visit team was informed the founding dean will be retiring in May 2017. The university and school are interviewing qualified candidates and anticipate that the new dean will assume the role beginning in June 2017. School leaders are appointed by the dean, and they serve four year terms. With the transition of a new dean, the individuals filling school leadership roles may change, at the discretion of the new dean.

Community stakeholders, alumni and students stated that the school’s success is due to the dedication and commitment of its leadership, faculty and staff. They also acknowledged the great partnership exhibited between the school and the Montréal community.

1.5 Governance.

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

This criterion is met. The school has clearly defined rights and responsibilities concerning school governance and academic policies. The dean and department chairs are primarily responsible for reviewing and periodically amending the school’s policies and development.

The school has the following standing committees: 1) Faculty Council; 2) Faculty Assembly; 3) Academic Committee; and 4) three departmental assemblies. These committees meet regularly, at least once a month, except for the Faculty Assembly, which meets at least once a year. The dean can add additional meetings as necessary. All of these committees include the dean, primary faculty and student representatives, when appropriate.

The school also has several additional standing committees that may function as ad-hoc committees, meeting as needed, varying from several times a year to once annually. These committees include the Dean’s Executive Committee; Faculty Board; Research Committee; Appointments Committee; Promotions Committee; Plagiarism Committee; Academic Integrity Workgroup; Competency Development Committee; and Student Life Workgroup. These committees also include the dean, school leaders, primary faculty and students when appropriate.

The Dean’s Executive Committee, Faculty Board, Competency Development Committee, Academic Committee and Research Committee are responsible for general program policy development, planning, evaluation, and academic standards and policies. The Appointments and Promotions Committees as well as the Faculty Council are responsible for faculty recruitment, retention, promotion and tenure, and
research and service expectations. The Dean’s Executive Committee is responsible for budget and resource allocation. The Academic Committee is responsible for student recruitment and admissions.

Community stakeholders, alumni and students are well represented throughout the school’s committees including the Faculty Council, Academic Committee, Academic Integrity Workgroup and the Student Life Workgroup. The school solicits feedback on a regular basis through formal and informal means. For example, the school established a Student Life Workgroup to enhance the student experience. This committee is composed of current students and discusses activities aimed at improving the student experience at the school and at the Université de Montréal.

In addition to serving as student representatives on committees, students are actively engaged in student governance. All students are eligible to participate in the Association of Université de Montréal’s Public Health Students, which represents all enrolled graduate students, with the exception of those in the bioethics program, who have their own student association. Students may also participate in the Association of Université de Montréal’s Bioethics Students or in the Global Health Student Community.

Students who met with site visitors said that they have an important role in the school’s governance and are engaged by faculty for feedback on a regular basis. Alumni and community stakeholders expressed similar sentiments, stating that their opinions and perspectives are valued. Faculty, students, alumni and community stakeholders have witnessed improvements and quick responses on the school’s behalf based on the feedback provided. The school’s willingness to include feedback received to improve the school’s effectiveness is a strength acknowledged by its constituents.

The rights and obligations of faculty, staff and students are outlined in the student handbooks and are made available on the school’s and university’s website.

1.6 Fiscal Resources.

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

This criterion is met. The school has financial resources adequate to fulfill its stated mission and goals and its instructional, research and service objectives. The funding for the school has been relatively stable in the face of some provincial funding cuts, which affected all provincial public universities. Despite the reduced funding, the university established a ten-year business plan, including sufficient financial resources to create the school of public health. Four primary sources of funds exist:

(1) Operating funds support instructional programs, administration, and general operations—including occasional internal research support. These funds come primarily from the Quebec Ministry of Education and student tuition and fees. Stimulus money and some revenues from various university clinics (e.g., dental clinic, eye clinic).
(2) Restricted funds generally come from research grants and contracts and are restricted to related project costs.

(3) Capital funds provide support for construction, renovation, property acquisition and technology support.

(4) Philanthropic funds, whether from a foundation, business or individual, support a wide array of initiatives including scholarships, faculty endowments to capital initiatives and specific research projects.

The school’s operating budget is determined annually (May 1 – April 30). See Table 1. Three factors contribute to the budget allocation: the previous year’s historical base budget, variations in generated revenues (eg, grants and contracts) and institutional priorities (eg, the 10-year plan to build the school). The base budget is primarily influenced by changes in student enrollment. Adjustments can be made twice a year. Several other adjustments are made to the budget at least annually. For example, 2.5% is allocated to a university fund for institutional priorities; 1.5% is targeted to deficit reduction and debt repayment; and a premium is provided for the number of master’s students who graduate in two years and doctoral students in five years. The research indirect cost rate is 40%, 20% of which is transferred to the university’s research centers.

Each April, the vice president of finance and infrastructure creates a budget plan that considers faculty positions and this is followed by detailed forecasting of all revenue streams. Departments prepare expenditure estimates for non-permanent faculty and staff, and the dean meets with departments to discuss and finalize requests. The university aims for all of its schools/colleges to be self-sufficient.

While all universities in Quebec absorbed a 1.1% cut in 2013-2014, the school’s budget has been stable the past three years because of a combination of university priorities (the 10-year plan to start the school) and an increasing enrollment base. The current annual budget is $21.3M. It reflects a $4M drop in grants and contracts since 2013-2014. While these are meaningful cuts in overall budget figures, they do not directly impact the general operations of the school.

The school considers three key metrics when assessing adequacy of its annual budget. (1) The school seeks a balanced budget annually and has met that target the past three years. (2) The school seeks to grow the total number of FTE weighted credits, which includes students in degree and non-degree programs, enrolled at Université de Montréal or at another university, taking courses taught by ESPUM faculty and is weighted by governmental financing rules across program areas. The school has grown these FTE figures about 15%, with most of the growth in the most recent year. (3) The school seeks to grow the external FTE weighted credits, which includes students in degree and non-degree programs who are enrolled at another school at the Université de Montréal or at another university but are taking courses at the school of public health at the Université de Montréal. Only two years of data exist here, and the number dropped 5%. 
### Table 1. Source of Funds and Expenditures By Major Category 2013-2014 to 2015-2016

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<tr>
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<tr>
<td><strong>Initial operating budget</strong></td>
<td>$7,081,181</td>
<td>$7,263,000</td>
<td>$7,198,766</td>
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<td><strong>Adjustments</strong></td>
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<td><strong>Total operating budget</strong></td>
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<td><strong>Salary awards</strong></td>
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<td>$320,545</td>
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<td><strong>Student support</strong></td>
<td>$227,000</td>
<td>$234,000</td>
<td>$220,000</td>
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<tr>
<td><strong>Contracts</strong></td>
<td>$8,653,527</td>
<td>$7,476,368</td>
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<td><strong>Endowments</strong></td>
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<td>-$50,378</td>
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<td><strong>Unrestricted philanthropic funds</strong></td>
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<td>$113,038</td>
<td>$220,399</td>
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<td><strong>Total</strong></td>
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<td><strong>$22,298,145</strong></td>
<td><strong>$21,326,142</strong></td>
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**Expenditures**

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<td><strong>Faculty salaries</strong></td>
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<td><strong>Part-time teaching</strong></td>
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<td><strong>Staff salaries</strong></td>
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<td><strong>Operations</strong></td>
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<td><strong>Social benefits</strong></td>
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<td>$1,616,549</td>
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<td><strong>Total expenditures on operating budget</strong></td>
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<td><strong>$9,254,110</strong></td>
<td><strong>$9,298,724</strong></td>
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<td><strong>Salary awards</strong></td>
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</tbody>
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1. **Faculty and Other Resources.**

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

This criterion is met. The school has adequate personnel and other resources to fulfill its stated mission and goals and its instructional, research and service objectives.
For fall 2016, the school had a total of 47 primary faculty. The complement of core faculty exceeds the minimum requirements needed for each of the five core concentration areas. For core concentration areas in which both a master’s degree and doctoral degree are offered, the primary faculty headcount was between seven and thirteen. For the core concentration area that does not offer a doctoral degree (biostatistics), the primary faculty headcount was five for all reporting years.

The student to faculty ratios (SFR) meet or exceed the minimum threshold of 10:1 for the past three years. There has been a steady increase in the number of students in the Department of Epidemiology, and this has been accompanied by a decrease in the primary faculty. While this may not be a current problem, it could have a negative impact if the trend continues. Financial difficulties at the university level prevented the school from replacing retiring faculty, but they are in the process of hiring four new faculty members. The university rector indicated his full support to assure that the school has the faculty that they need as the school develops.

The school is supported by six administrative and professional personnel, along with 15 support staff, for a total of 20 FTE.

The school has space in multiple locations, including facilities on the main campus and rented space off campus. The school acknowledges that this is a challenge, as it limits interaction among faculty and students in the program. During the site visit, students and faculty raised concerns about the school being split between multiple locations. As the school is developing, stakeholders note that would be highly desirable to have the school located in a single building or contiguous space to encourage interdisciplinary interaction among faculty and students. The school plans to continue to advocate at the university level for a single geographic location. The university rector stated that a plan was in place to have the school of public health located in a building on the main campus. He indicated this building would be available in the next four to five years. Stakeholders perceive contiguous space as a critically important factor in fostering the academic mission of the school as it continues to grow and develop.

Space available for student needs includes classrooms (over 5,000 square feet), common space and offices for student associations. The school also has over 30,000 square feet of office space for faculty plus additional laboratory space. In the current space configuration, students have access to at least one computer lab in each building. Faculty have a professional allowance that can be used for computer purchase and have support from the Office for Information and Communication Technology Services. An online learning platform is available (StudiUM). Public health resources are available at three of the university’s 18 libraries. Resources include remote access to online materials and there is access to interlibrary loan from other libraries in Quebec and Canada. At the site visit, there was positive student input on the quality and accessibility of online library services. In surveys, students are satisfied with the
physical and technological facilities, with 83% reporting a high level of satisfaction, consistent with the target of ≥ 75%.

The school has identified nine performance indicators. Assessments for eight of the indicators have been implemented and measures appear to be appropriate for tracking resource adequacy. Targets for seven of the eight tracked indicators have been met. The target for SFR for the Master of Public Health Program, set at ≤ 5, was not met during AY 2015-2016. The SFR was 5.32 or 6.00 depending on whether the bioethics faculty were included. This is still a strong SFR and again, students during the site visit reported that the faculty were available and effective. It will be important to continue to monitor the SFR moving forward, especially as enrollment continues to increase. In meetings with students and alumni, they highly praised the quality and availability of the faculty.

The school has set a goal of ≥75% of faculty and non-teaching personnel reporting high levels of satisfaction, but this has not yet been measured. There is a plan to measure this in the current academic year.

While faculty workloads vary by department and specialization, the current compliment of faculty is adequate for the school to fulfill its stated mission and goals. However, several new programs are set to launch in the next two years, including a DrPH and an undergraduate program. The Rector indicated a personal commitment to grow the school and fully honor the spirit of the 10-year development plan. Faculty and department chairs that met with site visitors, expressed the need for increased administrative support in order to maintain the same quality of instruction, research and service provided by the school to its students and its constituents, as the school continues to grow and add to its degree program offerings.

1.8 Diversity.

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

This criterion is met. The school demonstrates a commitment to diversity and demonstrates evidence of ongoing practice of cultural competence in learning, research and service practices.

The school describes diversity based on the Public Health Agency of Canada’s definition and includes the following: ethno-cultural background, disciplinary background and expertise, work experience, career perspectives, language, gender and disability. The school also considers geographic diversity, supported by the number of countries of origin represented. Enrolled students represent 23 different countries of origin and primary faculty represent 13 different countries of origin. The school states that diversity is also reflected by the diversity of perspectives and backgrounds among faculty and students. Faculty that met with site visitors stressed that multidisciplinary aspects and the multiethnic composition of staff and
students are important to the university; however, the university application process and Canadian legislature prevents collection of race/ethnicity data.

The school includes diversity as a core value. The school established four goals concerning diversity and cultural competence: 1) educate all members on the value of diversity within our school; 2) increase student diversity through a recruitment plan targeting new populations, namely candidates from other Canadian provinces and outside Canada; 3) integrate cultural competence in a more structured way in academic curricula; and 4) support the success of foreign students and permanent residents. The school also incorporates diversity into the instructional and organizational goals via five objectives utilizing 13 indicators/measures.

Site visitors were told that race/ethnicity information is not available because Canadian laws and policies do not support collection of this data.

The school uses four measures to define student diversity: female to male ratio among newly enrolled students (no target); percent of newly enrolled students aged 26 years or older (target ≥ 70%); percent of newly enrolled foreign students with a student visa (target ≥ 15%); number of countries of origin among all enrolled students (target ≥ 20). The school has met or exceeded these measures the last three years. In AY 2016-2017, the school’s recruitment plan will have a greater focus on Canadian students outside Quebec and foreign students.

The school established seven measures to define faculty diversity, including the percent of primary faculty with a PhD degree from a university other than Université de Montréal (target ≥ 15%), percent of primary faculty with degrees in two or more different fields (target ≥ 30-50%), and percent of primary faculty who are foreign-born (target ≥ 30%). The school began tracking these measures in AY 2015-2016 and have met or exceeded all targets.

The school set three measures to define multidisciplinary and cultural competence: 1) multidisciplinary in compulsory courses by percent of courses with students from at least two degree programs (target ≥ 30%); 2) average number of Université de Montréal degree and non-degree programs represented (target ≥ 5%); and 3) percent of compulsory courses covering issues related to cultural competence (target ≥ 25%). The school met or exceeded the targets for the first two targets in the past two years. The school began tracking the third measure in AY 2015-2016 and did not meet the specified target (21%).

The Université de Montréal has clearly defined policies on cultural diversity, and the integration of students with disabilities. The school follows the university’s equity and diversity polices to create a diverse work and learning environment. The school implemented a communications plan that integrates
the schools values and a code of ethics for students and states intentions to develop a code of values for teaching and non-teaching personnel, students and staff. The school follows provincial and university policies to create a diverse and inclusive employee environment. Specifically, the school implements The Act Respecting Equal Access to Employment in Public Bodies as adopted by the Government of Quebec on April 1, 2001 and enforced by the Commission for Human Rights and Youth Rights (CDPDJ). Université de Montréal’s policies comply with the Federal Contractor’s Program for employment equity as administered by Canada’s Ministry of Human Resources and Social Development. Finally, the university’s collective bargaining agreements represent teaching and non-teaching personnel and contain statements on opportunity, equity and non-discrimination.

The Université de Montréal has three committees to monitor diversity including the Standing Committee on Women’s Status at the University, the Committee for the Integration of Disabled Students and the Advisory Committee Regarding the Policy on Cultural Diversity.

The school has plans in place to recruit, develop, and retain a diverse faculty, staff and student body. Faculty position advertisements include diversity as a specified criteria. Faculty are expected to provide training and research opportunities internationally and in equitable collaboration with marginalized or vulnerable populations and settings and supervise and monitor students from disadvantaged contexts and diverse disciplinary and cultural backgrounds.

Recruitment of non-teaching personnel is governed by Quebec’s laws on equal employment. Advertising for support and administrative staff is conducted internally and non-discrimination policies applied during interviews. Success and integration into the public health school are managed during the probation period evaluations.

During AY 2016-2017, the school intends to implement a Personnel Survey to assess faculty and staff perception of organizational climate. Site visitors confirmed that the school has implemented the mentorship program for new and junior faculty referenced in the self-study. The purpose is successful inter-disciplinary collaboration and integration of faculty with diverse disciplines and cultural backgrounds. To address diversity and inclusion in educational programs, the school completed a review and inventory of competencies that target diversity and cultural competence. The school’s future plans are to ensure that required curricula in each program allow students to develop this competency.

The school’s future plans also include: 1) analyze curricula and make adjustments to incorporate knowledge and skills for development of cultural competence; 2) modify the student exit survey to measure the adoption of the school’s values and perceived level of mastery of cultural competence; 3) modify the personnel survey to measure the adoption of values and assess organizational climate; and 4)
conduct a rigorous needs assessment of the diverse student population to identify the best means to meet their needs. Finally, the Université de Montréal is developing a program called Réussite étudiante (Student Success), which will be implemented in September 2017, to track real-time student performance and provide additional student record accessibility. This will allow program directors to identify students with low grade point averages. This tracking will help the school in their student retention efforts with populations that may be at greater risk of non-completion.

2.0 INSTRUCTIONAL PROGRAMS.

2.1 Degree Offerings.

The school shall offer instructional programs reflecting its stated mission and goals, leading to the Master of Public Health (MPH) or equivalent professional master's degree in at least the five areas of knowledge basic to public health. The school may offer other degrees, professional and academic, and other areas of specialization, if consistent with its mission and resources.

This criterion is met. The school offers instructional programs reflecting its stated mission and goals. Table 2 presents the school’s degree offerings.

The school offers a wide range of master’s degree programs, including the Master of Science in Public Health. This program comprises seven professional concentrations, incorporating the five traditional core public health concentrations. The school offers an academic Master of Science in Public Health as a generalist degree with a thesis. The school offers six academic doctoral degrees, with four of the core concentrations represented.

The school also offers other master’s degrees, both professional and academic specializations, in Health Services Administration; Patient Safety and Quality Management; Health Technology Assessment; Environmental and Occupational Health and Bioethics. The school offers both academic and professional tracks for each of the four specializations included in the Master of Arts in Bioethics. The academic track is more research based with a thesis, focusing on promoting research and designed for those who plan to pursue a doctorate. The professional track is designed for working professionals who wish to deepen their understanding of the respective field, through formal training.

The school offers a Master of Science in Environmental and Occupational Health as a non-public health degree given that this program is aimed at a different student population and has its own set of competencies that makes this degree function differently than the Environmental Health specialization included as part of the Master of Science in Public Health. The non-public health environmental and occupational degree is aimed for those without prior professional experience with an educational background in biomedical or natural sciences. This degree prepares students to work in the field of environmental health, however not necessarily in a public health context or setting.
<table>
<thead>
<tr>
<th>Master's Degrees</th>
<th>Academic</th>
<th>Professional</th>
</tr>
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<tbody>
<tr>
<td>Master of Science in Public Health, Health Promotion and Prevention specialty</td>
<td>MSc¹</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Public Health, Environmental Health specialty</td>
<td>MSc¹</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Public Health, Epidemiology specialty</td>
<td>MSc¹</td>
<td></td>
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<tr>
<td>Master of Science in Public Health, Practice of Biostatistics specialty</td>
<td>MSc¹</td>
<td></td>
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<tr>
<td>Master of Science in Public Health, Health Policy and Management specialty</td>
<td>MSc¹</td>
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<tr>
<td>Master of Science in Public Health, Global Health specialty</td>
<td>MSc¹</td>
<td></td>
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<tr>
<td>Master of Science in Public Health, One Health specialty</td>
<td>MSc¹</td>
<td></td>
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<tr>
<td>Master of Science in Public Health, General with Thesis specialty</td>
<td>MSc</td>
<td></td>
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<tr>
<td>Master of Science in Health Services Administration, Health Systems and Management specialty</td>
<td>MSc²,³</td>
<td></td>
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<tr>
<td>Master of Science in Health Services Administration, Global Health specialty</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Health Services Administration, Evaluation of Services, Organization and Health Systems specialty</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Health Services Administration, Analysis of Health Systems and Organizations specialty</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Patient Safety and Quality Management</td>
<td>MSc³</td>
<td></td>
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<tr>
<td>Master of Science in Health Technology Assessment, Evaluation Practice specialty</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Health Technology Assessment, Evaluation Use</td>
<td>MSc³</td>
<td></td>
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<tr>
<td>Master of Science in Environmental and Occupational Health, Risk Assessment specialty</td>
<td>MSc³</td>
<td></td>
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<tr>
<td>Master of Science in Environmental and Occupational Health, General Toxicology specialty</td>
<td>MSc³</td>
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<tr>
<td>Master of Science in Environmental and Occupational Health, Environment, Health and Disaster Management specialty</td>
<td>MSc³</td>
<td></td>
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<tr>
<td>Master of Science in Environmental and Occupational Health, Occupational Hygiene specialty</td>
<td>MSc³</td>
<td></td>
</tr>
<tr>
<td>Master of Science in Environmental and Occupational Health, Global Environmental Health specialty</td>
<td>MSc³</td>
<td></td>
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<tr>
<td>Master of Science in Environmental and Occupational Health, General with Thesis specialty</td>
<td>MSc</td>
<td></td>
</tr>
<tr>
<td>Master of Arts in Bioethics, Personalized Path specialty</td>
<td>MA</td>
<td>MA³</td>
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<tr>
<td>Master of Arts in Bioethics, Clinical Ethics specialty</td>
<td>MA</td>
<td>MA³</td>
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<tr>
<td>Master of Arts in Bioethics, Research Ethics specialty</td>
<td>MA</td>
<td>MA³</td>
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<tr>
<td>Master of Arts in Bioethics, Ethics and Population Health specialty</td>
<td>MA</td>
<td>MA³</td>
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<tr>
<td>Doctoral Degrees</td>
<td>PhD</td>
<td></td>
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<tr>
<td>Healthcare Management</td>
<td>PhD</td>
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<tr>
<td>Epidemiology</td>
<td>PhD</td>
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<tr>
<td>Health Systems Analysis and Policy</td>
<td>PhD</td>
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<td>Health Promotion</td>
<td>PhD</td>
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<tr>
<td>Toxicology and Risk Assessment</td>
<td>PhD</td>
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<tr>
<td>Global Health</td>
<td>PhD</td>
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</table>

¹Equivalent to the Master of Public Health (MPH)
²Equivalent to the Master of Health Administration (MHA)
³Non-public health professional degree
The Master of Bioethics and the Master of Health Technology Assessment are also considered non-public health degrees since they are both also aimed at a different student population. The academic degrees are aimed for students who wish to pursue research in these fields, including pursuing a doctoral degree, without prior professional experience and without a public health background. The professional degrees are aimed for students with prior professional experience, who wish to strengthen their professional experience with formal education. Similar to the Master of Science in Environmental and Occupational Health, both tracks (academic and professional) for these degrees prepare students to work in each respective field, however not necessarily in a public health context or setting.

The Master of Science in Health Services Administration comprises a Health Systems Management specialization that is equivalent to the Master of Health Administration (MHA). This degree also includes three academic specializations in Global Health; Evaluation of Services, Organizations and Health Systems; and Analysis of Health Systems and Organizations.

The school will begin offering a new academic master’s program in Epidemiology and a PhD in Bioethics beginning September 2017. The school is also nearing completion of development work on a DrPH degree and an undergraduate program. Students that met with site visitors expressed excitement and great interest in these new degree programs.

Site visitors reviewed the curricula for the degree programs and verified that the school offers an appropriate depth of coursework.

2.2 Program Length.

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

This criterion is met. The academic year is divided into three semesters, with a summer, fall and winter term. A standard three-credit course is delivered over a period of approximately 15 weeks (fall and winter term), including 45 contact hours and 90 hours of personal work.

The Master of Science in Public Health is a 45-credit program. No student has completed the degree with less than 45 credits over the last three years.

2.3 Public Health Core Knowledge.

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

This criterion is met. The students in the Master of Science in Public Health concentrations all take a course sequence that provides ample exposure to core public health principles. Master of Science in
Public Health students take three-credit courses in each of the five traditional core courses in public health. Table 3 illustrates the required courses addressing public health core knowledge.

<table>
<thead>
<tr>
<th>Core Knowledge Area</th>
<th>Course Number &amp; Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biostatistics¹</td>
<td>MSO 6060: Basic Concepts in Biostatistics or MSO 6061: Introduction to Biostatistics</td>
<td>3</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>MSO 6011: Introduction to Epidemiology</td>
<td>3</td>
</tr>
<tr>
<td>Environmental Health Sciences</td>
<td>MSN 6115: Health and Environment 1</td>
<td>3</td>
</tr>
<tr>
<td>Health Promotion and Prevention²</td>
<td>MSO 6612: Health Promotion and Prevention or MSO 6613: Lifestyle and Promotion-Prevention &amp; MSO 6614: Public policy and Promotion-Prevention</td>
<td>3</td>
</tr>
<tr>
<td>Health Policy and Management</td>
<td>ASA 6754: Population Health and Health Systems</td>
<td>3</td>
</tr>
</tbody>
</table>

¹MSO 6060 is required for all concentrations except Epidemiology and the Practice of Biostatistics. These students enroll in MSO 6061.
²MSO 6612 is required for all concentrations except those in the Health Promotion and Prevention. These students enroll in both MSO 6613 and MSO 6614.

Site visitors reviewed the core course syllabi. Syllabi adhere to a standard format and list competencies. They syllabi demonstrate adequate evidence of the sufficiency of depth and breadth of coverage of the five core areas of public health knowledge.

Core courses are not waived unless transfer credit is approved. Transfer credits are restricted to a maximum of nine semester credits taken at the graduate level. The department chair, with the assistance of the instructor for the course where the transfer credit is wanted, are responsible for approving transfer credit and for confirming equivalency based on competency analysis.

2.4 Practical Skills.

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

This criterion is met. The Master of Science in Public Health professional degree requires a full-time practical experience in the form of an internship with variable length of 8 – 16 weeks dependent on the specialization.

Information and procedures regarding the internship are available in the ESPUM Internship Guide and in the Master of Public Health Internship Handbook. Program-specific handbooks complement the school’s guidebooks. The 2016-2017 Master of Public Health Internship Handbook is posted on the school’s website. Commencing AY 2016-2017, the school posts internship opportunities on its website. The internship coordinator explained that two months lead time is given to match the student with a site and
confirmed that winter internships were posted October 1st and the fall 2017 internship data is ready and available for posting in February 2017. Forty-nine internships were completed over the last two academic years.

The school has an internship coordinator who oversees the process, including site selection, appointing supervisors, developing internship policies and procedures and guiding the student and internship supervisor. The supervisor must have an appointment with the school or with the faculty of another university offering a public health degree, and the appointment process serves to validate that the individual has appropriate qualifications. Occasionally, a professional that does not have an appointment with the school can serve as site supervisor, but in those instances a faculty member is assigned as co-supervisor and provides joint supervision.

Sites are required to provide a stimulating practical learning environment. The primary sites selected for internships in all but two of the concentrations are the regional public health agencies, the National Institute of Public Health and the Public Health Agency of Canada. Additional sites were added in the past two years to serve the global health and health policy and management students.

Three clinical professors serve as site coordinators (in addition to the internship coordinator) and meet with the supervisor to discuss issues such as competencies, internship requirements and supervisors' roles and responsibilities. Commencing AY 2016-2017, supervisors are invited to participate in a community of practice workshop to discuss support needs and to share intervention, analysis and evaluation tools and models. This workshop will be offered twice per year. Twenty supervisors attended the first workshop and discussed the importance of theoretical and conceptual frameworks underlying student projects. Two follow-up meetings occur during the internship to support the supervisor and student. The first meeting is within the first three weeks to validate mandates and objectives. The second meeting occurs midway through the internship with a group of three to four students and supervisors, the site coordinator and primary program faculty member to review the various interns’ project progress.

The supervisor mentors the student for the duration of the internship. The supervisor’s role is clearly outlined and delineated in the Internship Guide. Responsibilities include the following: project outline, mandates, integration into the host site, at least one weekly meeting with the student, progress assessment, competency review and evaluation of the student’s final written report and oral presentation.

The internship evaluation process has formative and summative components. The supervisor conducts three formal assessments of competency attainment, a formative assessment at mid-course and two summative assessments at the end of the internship. Five evaluation forms are used by the supervisor and provided in the resource file. These evaluations use a five-point scale or a three-level designation.
and provide a qualitative feedback response section. The evaluations assess, at a minimum, behavior in
the training environment, active participation in group dynamics, review of the learning achieved,
knowledge acquired and shared and strengths and strategies for improvement. Summative evaluations
contribute to the internships overall grade. The student’s project is given to the site supervisor at the end
of the program. The written report and oral presentation associated with the internship placement serve
as components in the culminating experience and are discussed in Criterion 2.5.

Students provide a confidential evaluation of the internship site and supervisor’s qualifications. The
evaluation is quantitative, including 27 questions on a five-point scale. The student evaluation provides
feedback on the project and for continuous improvement of the internship experience. During lunch with
students, students effectively explained the internship process, competency attainment and evaluation
components.

The school does not allow waivers for the practice experience. However, in extreme situations, faculty
may modify the experience to suit the needs of the student in the context of the situation. In the past three
years, this has occurred once. The student could not physically go to the practice site due to medical
health reasons, so faculty provided a modified practice experience, called a practicum, consisting of
quantitative and qualitative data analysis on the availability of mental health services for teenagers in
youth centers. The student then presented his findings and recommendations for improvement to an
expert panel in addition to creating a report.

Students indicated that the internship is an integral component to the curricula, allowing them the
opportunity to engage in a real world work setting. Some students that met with site visitors added that
their internships led to employment opportunities after graduation. Preceptors that met with site visitors
also confirmed the high quality work produced by the interns as well as satisfaction with the level of
competency attainment demonstrated by the students in the internship.

2.5 Culminating Experience.

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

This criterion is met with commentary. There is a robust, three part culminating experience for students in
the Master of Science in Public Health program in the professional specializations. This includes a three-
credit Public Health Practice course. It is an integrative, case- and problem-based course designed to
bring students to leverage the skills and knowledge they acquired in other courses. Its main purpose is to
make students aware of important issues in public health, develop critical consciousness and reflexivity
and use data. The school employs public health professionals to teach courses using case studies.
Students address the case studies with the expectation that they will review and interpret statistics and epidemiological data, discuss ethics and reflect on the adoption of certain policies.

Students also deliver a 15 minute oral presentation at the end of their internship that summarizes the public health goals and the specific objectives of the project, the methods used, the deliverables to the host organization, the results and their impact.

The third component of the culminating experience is the internship report. The first part of the report is a detailed account of the project. The second part is the essay in which the student critically reflects on the overall internship experience in terms of the difficulties encountered, the strategies used to overcome those difficulties and the competencies that require improvement in order to be an effective public health practitioner. As part of the essay, the student must also reflect on competencies acquired throughout the program and competencies for continuing learning.

Clearly delineated instructions for the culminating experience requirements are made available to students on the school's website as well as in student handbooks. The requirements for the culminating experience are also presented during new student orientation.

The commentary relates to the lack of clarity on the distinction between the practical skills internship and the culminating experience among students and faculty. The school has integrated these experiences, which appears to result in a very positive, longitudinal experience for students. However, students were not able to distinguish between the practical skills training and the integrative nature of a culminating experience. There seemed to be some lack of distinction on this among faculty as well. Moving forward it will be important to more explicitly recognize the separate educational functions between the practical skills experience and the culminating experience, to be certain that both types of expectations are met.

2.6 Required Competencies.

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

This criterion is met. The school has clearly stated competencies that guide the development of two of their degree programs, the Master of Science in Public Health (seven professional specializations and one academic specialization) and the Master in Health Services Administration (MHA, one professional specialization and three academic specializations). The school has a defined set of 28 core public health competencies divided into the following domains: expertise in public health, professionalism, communication and collaboration.
The school also has a set of competencies that mirror the core competencies for the Master of Science in Public Health, appropriately specialized for each concentration and are adapted for the eight concentrations. Though each competency set has some variation in the level of knowledge and skills expected, competencies are generally written at levels appropriate to the degree.

The 2014 reform of the public health program included revising and creating new competencies that reflect the mission of the new school of public health in addition to assessing relevancy to public health knowledge and furthering public health practice. This reform was led by the Competencies Committee and included feedback from faculty, students, alumni and community partners. Competencies are regularly reviewed in this committee as well as during monthly faculty meetings.

Competencies are made available to both faculty and students through each department’s website. Competencies are also made available in the Internship Handbook as well as listed on each core course syllabi.

Faculty and preceptors expressed satisfaction with the level of competency attainment demonstrated by their students. Alumni also expressed satisfaction with their competency attainment, feeling well prepared for successful post-graduation outcomes. Students conveyed the same sentiments, stating that the program allows them the opportunity to interact with the community and attain competencies through real-world settings.

During the site visit, concern was raised related to the other professional and academic degrees, including the academic public health doctoral degrees. The school has subsequently provided information to show that competencies have been identified and courses mapped with competencies for all degree programs that did not already have a competency-based curriculum. At the time of the site visit, the school’s other academic and professional degree programs, both masters and doctoral degrees, were in the process of integrating a competency-based approach. A school-wide effort is underway, to be completed by June 2017, to optimize the development and assessment of relevant targeted competencies and to post these competencies on the school’s website. Each degree program will have at least one revised course syllabus available for fall 2017, according to the school’s June 2017 deadline. This has been identified has a high priority among faculty in the school.

2.7 Assessment Procedures.

There shall be procedures for assessing and documenting the extent to which each professional public health, other professional and academic degree student has demonstrated achievement of the competencies defined for his or her degree program and area of concentration.
This criterion is partially met. The school has implemented four procedures for monitoring and evaluating student progress in achieving expected competencies including grades and coursework; practicum and culminating experiences; and student exit surveys.

Classroom activities such as midterms, final exams, oral presentations, research projects and group projects provide mechanisms to evaluate student performance and competency attainment, since courses are mapped to competencies for Master of Science in Public Health students.

During the internship, both students and the site supervisor evaluate competency attainment and these assessments contribute to the student’s grade.

Master of Science in Public Health students completing the culminating experience are assessed on their competency attainment through various methods. Students enroll in a three-credit Public Health Practice course which is structured around competencies. The internship report includes a reflective essay where students comment and evaluate their competency attainment. Site supervisors and faculty complete assessments that include their perceptions of the student’s competency attainment.

The first concern relates to the lack of competency attainment measures in the culminating experience for students enrolled in the PhD in public health specializations. The current evaluation measures do not include assessments of student attainment of competencies. Faculty and school administration that met with site visitors stated the competency-based structure needs to be fully implemented before the school can use competencies in their evaluation efforts, such as to evaluate the culminating experience of the doctoral degree programs based on student competency attainment. They also mentioned this is a high priority for the school.

The student exit survey is given to students upon graduation. This survey assesses the graduate’s perceived level of attainment of the four school-wide competency domains: 1) expertise in public health, 2) professionalism, 3) communication, and 4) collaboration.

The school also provides alumni an alumni survey to be completed one year post-graduation. This survey collects data on alumni perception of competency attainment and their level of preparedness in a workplace setting, well as feedback on the program’s overall effectiveness.

The maximum time to graduate for all of the master’s degree programs is five years. The school has met or exceeded the minimum threshold for graduation rates in the Master in Science of Public Health degrees for the past three years (70%, 77.8% and 69%). The last cohort reported still has one student continuing in the program, which will make the school meet the minimum established threshold of 70%.
The other master’s degrees (an aggregate of the other non-public health professional and academic degrees) who have met their maximum time to graduate, have also met the minimum threshold in the past three years (78.1, 84.9% and 81.3%).

The maximum time to graduate for the PhD in Public Health is seven years. The school has only met the minimum threshold of 60% for three out of four cohorts that have met the maximum time to graduate. The school has made doctoral student progress a priority and is closely monitoring current students’ progress. The school has also implemented several changes in the program as of last year that they expect will improve doctoral students’ timely graduation. For example, the school is now providing additional support for protocol development through workshops, since protocol development seemed to be a roadblock for some doctoral students. Site visitors were informed that the other doctoral degree programs at the Université de Montréal use nine years as their maximum time to graduate. If the school were to use nine years, their doctoral graduation rates would exceed the minimum threshold of 60% (61.9% and 68% for the two cohorts who have reached nine years, AY 2005-2006 and AY 2006-2007).

The school has met or exceeded the minimum of 80% for job placement rates for all of their degree programs, both master’s and doctoral programs, in the last three years.

The program has met or exceeded its identified targets for student outcomes for the past three years, with the exception of the school’s doctoral graduation rates and the level of satisfaction among alumni for successful post-graduation outcomes (71% with a target of 75%). Faculty and the communications director that met with site visitors confirmed the school has already implemented new procedures to increase the response rates on the alumni survey which contributed to the low satisfaction data gathered. For instance, in addition to emailing the alumni survey, the communications director is also using social media such as LinkedIn to connect with alumni. This has already proven to be successful and the school anticipates higher response rates going forward. Department chairs and school leadership were aware of the doctoral graduation rates not meeting their targets and have also implemented new procedures that have also demonstrated success among their doctoral students.

The second concern relates to the lack of a systematic process for collecting and reporting employer feedback regarding graduates’ attainment of competencies in a workplace setting. This was an observation of the site visit teams in both 2013 and 2016. Employers that met with site visitors confirmed that their feedback on graduates’ attainment of competencies and their performance has not been solicited and that such information would be useful in evaluating the quality of the school’s instruction. At the time of the site visit, the school is developing a bi-annual key informant electronic survey to collect this information. The survey is expected to be implemented during the next academic year.
2.8 Other Graduate Professional Degrees.

If the school offers curricula for graduate professional degrees other than the MPH or equivalent public health degrees, students pursuing them must be grounded in basic public health knowledge.

This criterion is partially met. The school offers five other graduate professional degrees:

- Master in Health Services Administration (accredited by CAHME; Health Systems Management specialization)
- Master in Patient Safety and Quality Management (Collaborative program with Ecole des Hautes etudes de Sante publique de Rennes (EHESP) in France)
- Master in Health Technology Assessment (Evaluation Use specialization)
- Master in Environmental and Occupational Health (five areas of specializations)
- Master in Bioethics (four areas of specializations)

These degree programs existed before the transition to the school, and one is accredited by another agency (CAHME). With the transition to accreditation as a school of public health, the faculty began a process to define what material should be included in the broad public health exposure for all students. These other professional degree programs are also undergoing a transition to a competency-based structure.

Currently, rather than having a standard course requirement for all degree programs, each program identifies multiple courses and learning components where individual public health concepts are included. In the self-study, the school states that the content and breadth of exposure to fundamentals of public health through coursework varies across the programs, with some programs needing greater exposure.

The concern relates to the inconsistent and deficient coverage of the broad introduction to public health in the other professional degree programs. With material spread out among different courses without a clear map of content and competencies, it is impossible to verify that all students in all programs are receiving sufficient exposure to broad public health principles. The faculty and administration are actively continuing in the process of developing and implementing a clear, consistent approach to assuring appropriate public health curricular coverage in other graduate professional degree programs. This strategy includes seeking formal approval for a course which will cover basic notions of public health; adjustment contents of this course to ensure coverage of the specific topics outlined in the 2016 CEPT criteria; developing detailed syllabi for modified and new course credits; and modifying all degree programs that will be incorporated into these new courses. It will be important to complete this process in the current academic year and clearly identify the assessment approach moving forward.
2.9 Bachelor’s Degrees in Public Health.

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

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

**Elective Public Health Coursework:** in addition to the required public health core knowledge courses, students must complete additional public health-related courses. Public health-related courses may include those addressing social, economic, quantitative, geographic, educational and other issues that impact the health of populations and health disparities within and across populations.

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

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

This criterion is not applicable.

2.10 Other Bachelor’s Degrees.

If the school offers baccalaureate degrees in fields other than public health, students pursuing them must be grounded in basic public health knowledge.

This criterion is not applicable.

2.11 Academic Degrees.

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

This criterion is partially met. The school offers the following academic masters degrees:

- Master in Public Health (General with thesis)
- Master in Health Services Administration (three areas of specialization)
- Master in Health Technology Assessment (Evaluation Practice specialization)
- Master in Environmental and Occupational Health (General with thesis)
- Master in Bioethics (four areas of specialization)
In addition, the school offers a PhD in Public Health with six areas of specialization including healthcare management, epidemiology, health systems analysis and policy, health promotion, toxicology and risk assessment and global health.

There is a culminating experience for all the academic master’s degrees as well as the PhD in Public Health. The PhD in Public Health requires a written qualifying exam, an oral qualifying exam and a thesis defense. The thesis approach for the culminating experience appears to be appropriate for these degrees.

The first concern relates to the inconsistent and deficient coverage of the broad introduction to public health for other academic degrees. Consistent with the issues described in 2.8 for the other professional degrees, there is not a common approach across the academic degrees for ensuring that all students receive an introduction to the breadth of public health. As discussed in 2.8, the school acknowledges, that the content and breadth of exposure to fundamentals of public health through coursework varies across the programs, with some programs needing greater exposure. As noted in Criterion 2.8, the faculty and administration are actively continuing in the process of developing an approach to assuring appropriate coverage in all programs.

The second concern relates to the inconsistent and deficient coverage of basic principles and application of epidemiology in the other academic degree programs. A review of the self-study, the program structures on the website and discussions with faculty indicate that the equivalent of a three-credit course in epidemiology is not consistently required in academic degree programs. For the doctoral programs, the self-study suggests that these students have completed epidemiology, but not all programs explicitly require epidemiology as a pre-requisite.

### 2.12 Doctoral Degrees.

The school shall offer at least three doctoral degree programs that are relevant to three of the five areas of basic public health knowledge.

This criterion is partially met. The school has operated a single doctoral (PhD) degree since 1978 that currently has six specializations: healthcare management; epidemiology; health systems analysis and policy; health promotion; toxicology and risk assessment; and global health. A DrPH program is currently under review, and the school will add a PhD in bioethics in fall 2017.

The PhD degree program enrolls 121 students across the six specializations. The management degree program has nine students. Global health, the newest of the programs (in its second year of operation) has 11. The other specializations range in student count from 16 to 33. About 15 students graduated from the doctoral program each of the last two years. Between 20 to 25% of the population of doctoral students transition to candidacy each year.
The doctoral degree is a research degree. There are four courses that are common to all specializations—a research ethics course, a general public health seminar and two readings courses. The program requires 90 credit hours, of which 78 are research thesis credits. Students take two to five doctoral seminars specific to their chosen specialization and a complement of qualitative and quantitative research methods courses, often shared with masters programs. Some, depending upon the content of their master’s coursework, may take leveling courses to meet requirements for success in the PhD specializations.

Students take the first part of their qualifying exam following completion of required coursework for their specialization, typically at the end of the first year in the program. This first part of the exam focuses on the shared coursework common to all doctoral students. The second part of the exam focuses on the specialization. Students can retake either part only once or they are dropped from the program. They then orally present their research proposal and enter candidacy and complete thesis work. Minimal time to course completion is six trimesters (two years). Students have up to 15 trimesters (five years) to submit their thesis, not including didactic coursework that must be completed first. However, many students take longer than the prescribed timeline to finish. The maximum time to graduate is seven years.

Students select thesis advisors and research topics their first semester in the program. This may be a barrier to those who come to the program with little familiarity with the faculty and no firm research foci in place. This timeline is being reconsidered and will likely be pushed to the second semester.

Student financial support takes several forms. $118,000 in scholarship funds were distributed in AY 2015-2016 to 16 students (average $8500) based on academic excellence. One of the university’s institutes supported seven students’ travel to academic conferences. Other students routinely compete for external research scholarship funding. Many students are supported through teaching and research assistantships, although these often take the form of three hours of teaching support per week and serve more as a work study experience than a traditional teaching assistant position. Doctoral students who met with site visitors expressed the need for additional funding to assist them in their program. Students identified lack of funding as one of the reasons they are taking longer than prescribed to graduate. Some students are forced to work full-time/part-time to fund their education or others are forced to enroll part-time so that they take longer than the recommended time to graduate.

The concern relates to the balance between didactic course work (12 credit hours) and research hours (78 credit hours). While the self-study and on-site interviews suggested that the program was a sort of midpoint between German and British philosophies of doctoral training, this balance does not comport with this criterion’s expectations. The school’s response to the site visit team’s report notes that all PhD
students take other courses in addition to the required credits of doctoral-level courses and many students enter with master’s degrees in relevant fields, which reduces the requirement for didactic credits. These informal and non-standardized practices do not provide a consistent assurance, required by this criterion, that all students complete an appropriate depth of didactic coursework beyond what is required at the master’s level.

2.13 Joint Degrees.

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

This criterion is not applicable.

2.14 Distance Education or Executive Degree Programs.

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

This criterion is not applicable.

3.0 CREATION, APPLICATION AND ADVANCEMENT OF KNOWLEDGE.

3.1 Research.

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

This criterion is met. The university ranks second among research universities in Canada for research funding awarded from peer-reviewed competitions. The school ranks third in total research expenditures at the university, behind much larger and longstanding schools of medicine and arts and sciences.

While research funding across Canada has dwindled just as in the USA, the faculty members at the school continue to be successful, though total awards and expenditures have declined measurably in the past two years. University and school leaders believe that provincial and national investments in research are likely to grow again in the coming years.
The foci of research at the school crosses basic and applied paradigms, incorporates a wide array of methodologies and targets a wide array of foci in public health from environmental risk assessment and toxicology to health promotion, community engagement, occupational safety and inequities and policy change. The school and university have strong ties to many community, provincial, national and international partners, providing many research opportunities for their faculty and students.

There is little research support infrastructure within the school. Rather, faculty with active research portfolios have traditionally been aligned with one of four research centers/institutes at the university: (1) the Public Health Research Institute of the University of Montreal; (2) the Research Center of the University of Montreal Hospital Center; (3) the Research Center of the Sainte-Justine Mother and Child University Hospital Center; and (4) the Lea-Roback Research Center on Social Inequality in Health in Montreal. The institutes have been in place at the university for a long time, and each provides the full array of research infrastructure support. The school’s research dean and research committee work with the university research administration in developing some strategic initiatives.

Traditional tenure-track faculty are generally full-time. Research faculty often hold salary awards from provincial or federal granting agencies. They are typically not tenure-track positions but have parallel working conditions and benefits and have equal political rights as their tenured colleagues. However, they typically devote more time to research. Often departments may seek to expand their faculty in a particular research area and seek federal or provincial research funds to support an incoming junior faculty member. These funds allow the faculty member to develop their research portfolio while transitioning to a more traditional faculty role. The department must commit to moving the faculty member to a tenure track position, typically within five years. Both groups of faculty belong to the same union (the Syndicat general des professeurs et professeures de l’Université de Montréal). Provisions allow for research faculty to transition to tenure track positions within five years.

Canada amasses funds to support a Research Chairs program that underwrites faculty time and some expenses for up to 2,000 faculty research chairs nationally. About 1,600 are currently filled and the Université de Montréal currently holds 98. Ten are within the public health school (of 47 faculty).

The self-study notes that, among projects have public health faculty as PIs, 80% include students actively engaged in the research project. Students are also invited to attend scientific research conferences and seminars hosted by the university and by the school. Students are encouraged to conduct their own research projects with the assistance of faculty. Development of scientific research literacy is also emphasized within all programs at the school.
The school has currently met all of its research goals except research expenditures. That figure, both total awards in place and expenditures per FTE faculty member, declined over 10% two years ago and again last year. These figures mirror the experiences of other universities across the country.

3.2 Service.

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

This criterion is met with commentary. The school pursues active services activities, consistent with its mission, through which both faculty and students are engaged. The school commits to providing professional expertise and promoting community service and engagement at the local, national and international levels. Forty-five primary faculty reported approximately 400 unfunded service activities and 14 primary faculty reported a total of 25 funded activities between AY 2013-2016.

Individual faculty activities encompass knowledge translation and exchange at professional events, thesis committees for other universities, acting as scientific officers and providing expert consulting services. Community service encompasses participation in scientific, cultural, professional, governmental or social organizations. Faculty routinely evaluate manuscripts, but the self-study indicates the lack of a concise mechanism to track service activity. Some faculty are involved in funded service activities with the International Health Unit (USI) for the production of sustainable improvements in public health through capacity building initiatives. The International Health Unit provides projects in low and intermediary income countries in fields of health policy, hospital reform, health information systems, public health interventions and health and the environment.

In May 2016, the school established a partnership with the Welfare Center for Immigrants (CSAI), a non-profit community organization devoted to the reception and integration of immigrants and refugees. This formal agreement enables students, alumni, staff and faculty to volunteer and provide general assistance, translation services, medical support services, French language courses and homework assistance for children.

The school evaluates five performance indicators for service such as the number of service activities organized by student associations (target ≥ 2); the number of service activities per primary faculty (target ≥ 5); percent of primary faculty reporting at least one service activity (target ≥ 90%); percent of primary faculty involved in international service activities (target ≥ 50%); and total contract value (target ≥ $3 million). All measures exceeded the target.

Primary faculty performance is evaluated during the review process for reappointment, promotion or tenure application. The service component is especially important when applying for promotion to the
rank of full professor. During the self-study development, the school realized the need to create a better tracking mechanism for faculty service.

Students participate in service activities through Université de Montréal's Action humanitaire et Communautaire, a branch of the university’s student service that focuses on solidarity and mutual aid and student organizations. The school encourages students to join university associations especially the Association of Universite de Montreal’s Public Health Studies (AEESPUM). Three student organization events are highlighted in the self-study: AEESPUM annual colloquium on public health, student associations’ round table discussion event and the 3rd annual student-led colloquium on ethics and citizen participation in health policy decision-mailing. To foster student involvement, the school created a dean’s award (Prix du Doyen) to promote volunteerism, student mentorship and involvement in the school, university or community. The first award was given in November 2016 at the commencement ceremony.

The Global Health Student Community (CESM) provides student space to meet and exchange ideas, organized round tables and conferences on global health. Students that met with site visitors expressed that they were unaware of opportunities for community based service activities. After some discussion, one student did recall the opportunity to assist Syrian refugee children with homework assignments and students indicated the weekly newsletter provides opportunities to volunteer, but no specific community-based service examples and activities or events were given.

The first comment relates to an opportunity to strengthen organized service activities to allow students additional avenues to cultivate professionalism and conscious responsibility toward the profession, fulfilling the school’s mission and providing public health service to communities, agencies, underserved populations and organizations.

The self-study indicates the school’s plan to increase awareness of the value of community engagement, increase opportunities for service activities and development of a primary faculty electronic reporting system for service activities by type. The school’s Monitoring Committee has begun the process of developing and pre-testing an electronic form to be used by faculty during their CV annual report update on May 1st.

The second comment relates to lack of long-term data collection for student community service which is reflective of the lack of formal metrics and data collection processes for student service activities.

3.3 Workforce Development.

The school shall engage in activities other than its offering of degree programs that support the professional development of the public health workforce.
This criterion is met. The school engages in activities other than its degree offerings to support the professional development of the public health workforce. The school provides four types of non-degree offerings, offers customized workforce training programs upon request and collaborates with the *Quebec National Institute of Public Health* (INSPQ) to provide workforce development trainings.

The collaboration with INSPQ encompasses three initiatives: 1) a formal agreement on the provision of public health education to practitioners which led to the development of the microprogram in public health for managers and practicing professionals in 2007; 2) a formal agreement that the school will participate in the development of activities that meet the needs identified by public health decision makers, ensure quality control, ensure that enrolled physicians can obtain medical continuing education credits (CEUs), maintain a record of the medical CEU's and authorize INSPQ to issue certificates of participation. 3) The third initiative from 2004 – 2015 stemmed from the large provincial consortium of partners called the *Initiative on Knowledge Sharing and Workforce Development* (IPCDC) based on the 2004 law of populational responsibility aimed at capacity building of the workforce of the individual and organizational level. Community partners that met with site visitors included an INSPQ representative who was very positive about recent interactions between the agency and the school.

In April 2016, the school created a Professional Development Unit to conduct needs assessments, coordinate professional development initiatives, adapt existing programs to meet the needs of local and international clientele and monitor customer satisfaction. During 2015, major transformations in the health and public health system lead to significant changes, restructuring and retirements in the local workforce. In response, the professional development unit plans to sponsor two training events in AY 2016-2017 to address these issues: one in the patient health and safety field and one in occupational hygiene. Currently, the school is engaged in the development of online courses or content and funds faculty who need technopedagogical assistance. One project is the collaboration with European universities as part of the G3 partnership (three leading French speaking universities) to foster the development of inter-university innovative academic or research projects.

The school provided seven customized workforce development training programs upon ad-hoc requests from various agencies and organizations between fall 2011 and fall 2016. In conjunction with INSPQ, the *Change Management and Population Responsibility* program was held once in fall 2011 – summer 2013 and again in winter 2015 – fall 2016 for middle managers in the health and social services centers. There were a total of 17 attendees in both cohorts. A Managerial Succession program titled, *Relève des cadres intermédiaires de la Montérégie*, was developed for a Montérégie health and social services agency and targeted middle managers. This program commenced in winter term and then a subsequent fall term and was hosted three times between winter 2013 – fall 2016 with approximately 26 participants per cohort. A one day training program in occupational hygiene was given three times with 20 participants each at the
annual conference for the Association québécoise pour l'hygiène, la santé et la sécurité au travail (AQHSST). A one-week training program to prepare for the Canadian Registration Board of Occupational Hygienists (CRBOH) exam organized by the Association québécoise pour l'hygiène, la santé et la sécurité du travail (AQHSST) was hosted four consecutive years 2013-2016 with five to ten participants per class.

The school offers 22 different non-degree programs categorized into four types. These programs target current students, working professionals or individuals looking for knowledge and skills in a specific domain. The programs are designed as nested programs which allow students to transfer from one program to another and can eventually lead toward a MPH degree. Two of the offerings are in the distance learning format. Total enrollment across all programs equaled 289 in 2014 and 286 in 2015.

The four types are detailed below:

- Diploma of Advanced Professional Studies in Public Health (Diplôme d'études professionnelles approfondies en santé publique (DEPA)): one 30 credit program offered to refine knowledge and skills in one of four areas: health systems analysis, epidemiology, toxicological risk assessment and global health;
- Specialized Graduate Studies Diplomas (Diplôme d'études supérieures spécialisées (DESS)): eight 30 credit programs in the public health specializations;
- Graduate Microprogram – 11 programs of 15 to 18 credits; and
- Complementary Diplomas – two programs designed for current students, 1) a nine credit program in the Master of Health Services Administration program to gain knowledge in health systems management or 2) a 12 credit program for doctoral students to develop advanced knowledge and skills to conduct evaluative research in health and public health fields.

The microprograms are designed to transfer knowledge and skills similar to the United States model of obtaining a minor and allow easy transfer into the master's program. Faculty indicated that the 30 credit DEPA offering is a foundation for students to transfer into the DrPH program, once it's created and approved by the university.

In spring 2016, the school conducted key informant surveys for each of the professional degree offerings. The school intends to use this information to alter workforce offerings. Faculty spoke about personal engagement with local and regional agencies, organizations and employers about workforce needs. Likewise, community representatives commended faculty’s efforts to interact, appreciated the linkages and long-term perspective the school provides to the community and indicated that public health is embedded in the Montreal and Quebec communities.

The school expects growth in terms of professional development opportunities and initiatives. Future plans include expanded course and program offerings in a distance-learning format and the development and implementation of a standardized questionnaire to assess the adequacy of professional development programs. Site visitors were given a copy of the newly created instrument. It is a five-point Likert scale.
quantitative (four question) and qualitative (three question) instrument that will be used for evaluation purposes.

Consistent with observations noted by the site visitors on Criteria 1.2, the school may benefit from developing a more systematic approach and plan for consistent and long-term data collection and analysis about attendance and workforce development activities to better assess effectiveness as well as inform useful and appropriate amendments to future programming.

4.0 FACULTY, STAFF AND STUDENTS.

4.1 Faculty Qualifications.

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

This criterion is met. The school has a clearly defined faculty, which is able to support its mission, goals and objectives. For AY 2016-2017, there are 50 primary faculty, using the school's definition. Forty-two of these individuals meet CEPH's definition of primary faculty, with 100% appointments in the school. Most are tenured/tenure-track (46).

There are over 90 non-primary faculty from a broad range of disciplines and work settings. This includes a current CEO of a provincial health and social services network and a former Quebec Minister of Health and Social Services. Most have a limited percent time in the school. Together the primary and secondary faculty have training in diverse disciplines and are qualified to support the school's academic and professional programs and its research and service activities.

The school has 11 performance indicators on faculty qualifications. For nine of these performance measures the target was met in AY 2015-2016. This includes having 90% faculty members with a PhD degree, 100% success in promotion applications and 92% of graduates reporting a high level of satisfaction with the competence of the faculty. Further evidence of the strength of the faculty is the high level of student satisfaction for compulsory courses and all courses.

Only two of the 11 indicators did not reach the target in AY 2015-2016. The percent of graduates reporting a high level of satisfaction (satisfied or very satisfied) with their program was 74%, barely under the target of ≥75%. The percent of graduates reporting a high level of satisfaction (satisfied or very satisfied) with their internship/thesis supervisor was 62%, below the target of ≥75%, which may be an aspirational goal that could be met in future years. The school is currently assessing this indicator to tailor a response.
During the site visit, students and alumni spoke very positively about the faculty for their availability and helpfulness, including in the internship and thesis process. The consistent, enthusiastic expression of gratitude toward the faculty by students and alumni during the site visit was impressive, as was the enthusiasm and dedication that was evident in meetings with the faculty.

Alumni and students who met with site visitors expressed their appreciation for the highly qualified faculty complement. They also expressed this as a reason for applying and enrolling at this school of public health.

4.2 Faculty Policies and Procedures.

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

This criterion is met. The university publishes a guide for faculty and there is a collective agreement between the faculty unions and the Université de Montréal. Procedures are in place for the recruitment, appointment and promotion of faculty.

On the web portal, faculty can access services available to them. The university also has teaching support services with three goals: 1) supporting and sharing best practices in teaching and the creation of new programs; 2) supporting the continuous improvement of education and curricula; and 3) encouraging communities of practice and learning networks in order to promote sharing. This includes helping faculty with the development of online courses, which is also supported by in house expertise. Faculty also have access to research support, information technology support and professional development. This includes one year sabbaticals every 7th year and an annual stipend of $2,192 to purchase books, computer hardware/software or career development activities.

Formal procedures are in place for evaluating faculty. This includes student course evaluations, which are mandatory. Faculty and department chairs receive a report from the student course evaluations. There is also a student exit survey which assesses instructional effectiveness. Faculty members complete an annual activity report and meet with their department chair annually for a review and to establish their teaching and administrative responsibilities for the upcoming year. Evaluations for appointment, renewal and promotion are also important evaluation opportunities for tenure track-faculty.

Meetings with community-based faculty demonstrated their investment in the school's educational mission, but the school plans to develop a standardized annual activity report for clinical faculty and internship preceptors that will allow for a more robust assessment of this group of faculty.
In meetings with faculty during the site visit, there was clarity on school policies and procedures, with regular assessments of faculty progress and their needs.

4.3 Student Recruitment and Admissions.

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

This criterion is met. Since its establishment, the School of Public Health has made substantial efforts to inform the public and current Université de Montréal students about the public health programs. The school’s communications officer incorporated recruitment plans for academic years 2014-2015 and 2015-2016 into the school’s annual communication plan. The main 2015-2016 recruitment objectives were: 1) advertise public health and the training programs and career opportunities in the field; 2) convey the image of an organization that has a positive impact on the world and in student’s lives; and 3) encourage students to enroll. In AY 2015-2016, the school developed a comprehensive promotional pamphlet about the public health programs and fact sheets describing the various training programs. The training posters were reviewed on site with the interpreter. The posters were professionally developed, attention-grabbing and representative of workshops to assist students, such as job interview skills and CV development.

The school works in conjunction with the Université de Montréal’s Admissions and Recruitment Office (SAR) for recruitment and admission activities locally and internationally. The Université de Montréal has a comprehensive admission webpage that offers visitors activities and resource information, informs students of the application requirements and deadlines and provides a four-step interactive procedure to facilitate admission for prospective students.

The school’s recruitment efforts target undergraduate and post-graduate students with a variety of science related backgrounds, recent graduates, working professionals and international students. Recruitment materials are located in a clearly marked section of the school’s website. An extensive Domaine d’etudes (Field of Study) webpage lists all public health programs by field or level of study and targets students with specific academic and professional backgrounds. The school’s student handbook provides students with the academic calendar, grading scale and academic rules and links to admission policies, grading policies, degree completion requirements and tuition fees.

Between 2014 – 2016, the School of Public Health sponsored over ten recruitment activities, such as the public health training webinar (n=105), pizza party (n=42), university-wide open houses (n=3,000), public health program wine and cheese events (n=81/90), launched the school website (15,988 sessions over 3 month period), attended a global health conference (n=500), public health days information booth and
digital campaigns on Google Search campaign, Facebook advertising and SAR blog posts (n=2,252 clicks/238,944 impressions).

The school applies the university-wide admissions standards and policies as outlined in the Academic Rules for Post-Graduate and Post-Doctoral Studies for master’s and PhD programs. Applicants must possess 1) a satisfactory level of written and spoken French and 2) possess a satisfactory level of English. Post-graduate program applicants must also 3) hold an undergraduate degree or a degree deemed equivalent for international students, and 4) have obtained a grade point average (GPA) of 3.0 (on a 4.3 scale at most) for an undergraduate degree from Université de Montréal or for international students, have a GPA deemed equivalent by the Dean of the Faculty of graduate and Postdoctoral Studies (FESP), or by the Dean for an undergraduate degree from another university depending on the situation. To be admissible to a doctoral program, the applicant must also 3) hold a diploma equivalent to a master’s degree from Université de Montréal that was obtained with at least a 3.3 GPA (on a of 4.3 scale at most) or provide proof of an education deemed equivalent by the program’s Dean, or for international students, by the Dean of the FESP. In only the most extreme cases, the appropriate Dean will allow an applicant who holds a bachelor degree to register in a doctoral program with additional coursework. In addition to these basic criteria, each program has its own requirements that may include: a different GPA, prerequisite courses or diplomas, letters of recommendation, a letter of motivation, a letter of acceptance from a research director or an outline for a research project.

Applicants must apply online by submitting personal information and state which program they desire to pursue. Then, the program specifies what additional information is necessary. The academic technician reviews the application for admissibility then sends the information to the program director and, when applicable, the chair to review the application materials. The decision to admit or not to admit is forwarded to the Registrar’s Office which officially informs the applicant of the university’s decision. Site visitors spoke with the academic technician (administrative support personnel) who was very knowledgeable about the application and admission process and succinctly summarized application processes. Faculty clarified that the online system automatically generates the secondary admission requirements and that the potential applicant can easily access each program’s required documentation on the website(s).

For fall 2016, the Master of Public Health program had 208 applicants of whom 102 (49%) were accepted and 67 enrolled (33.3%). For fall 2016, the other master programs had 175 applicants of whom 88 (50 %) were accepted and 58 (69%) enrolled. The fall 2016 PhD program had 62 applicants of whom 32 (51.6%) were accepted and 22 (68.8%) enrolled.
The total AY 2015-2016 student enrollment is reported at 397 FTEs and the fall 2016 enrollment increased to 425 (~7%). During the fall 2016, the MSc academic general with thesis had 39 students enrolled.

The school identified seven performance measures on student recruitment and admissions. The targets have been met for the past three years.

The school plans to focus recruitment efforts on the lesser known programs, design and implement a more efficient process to improve the enrollment rate to ensure top prospective students enroll and review the specializations currently offered to ensure they reflect the mission, goals and objectives of the school in the context of enrollment data.

4.4 Advising and Career Counseling.

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

This criterion is met. The school uses a three-tiered approach to orientation and advising, including welcoming and orientation activities, student handbook and personal resource assistance. All programs email students orientation materials two to four months prior to the start of the academic year. To facilitate orientation and integration, the Université de Montréal and the school host orientation activities the week before the academic year starts. During these events students meet professors, administrative staff and representatives for the student association. Resources and information provided to students include: the School’s student guide/handbook, the StudiUM learning platform and the International Student’s office (BEI). According to the university’s website, BEI staff focus exclusively on the needs and requests of foreign students. This webpage is available in French and English versions and contain information such as: a calendar, student exchange programs, admissions at Université de Montréal, scholarships and financial aid, tuition and fees, living in Montreal and working in Quebec.

On May 19, 2016, the school held an early orientation meeting for new students in the public health programs. Program directors, heads of master specializations, and administrative personnel gave short presentations and provided one-on-one meetings with students to explain program requirements, answer questions and assist with course selection and registration. Sixty percent of invited students accepted their invitations, and 75% completed their course selection on-site.

Each student is assigned a faculty advisor. Academic advisors mentor students from orientation to graduation. The school provides five academic technicians who advise and support students with administrative issues pertaining to university-wide and program-specific requirements, course registration and modification of registration. Site visitors met the academic technicians and faculty praised this
administrative support. The student association also provides fellow students with advice and support on any matter or concern. Students confirmed that advising begins at orientation.

Career counseling services are provided by the university, school and department/program level. The university career counseling service (SAE) provides current students and alumni within two years of graduation with job alerts, a job posting bulletin board and one-on-one counseling.

Last March, 200 students participated in the school’s first annual Careers in Public Health Week. Since 2015, the school has sponsored career counseling events during lunch hours to reach a broad student base. These activities are posted on the schools calendar and cover topics such as: creating a curriculum vitae, preparing a grant application, conducting a job search, professional networking and job interviewing. The self-study indicates 112 students attended career events in 2015-2016. The resource files contains a AY 2015-2016 activity list of approximately 20 events with topics such as public health grant agencies, scholarships, resume and curriculum vitae, a coaching series, a learning skills workshop, research publication advice, cultural characteristics specific to Quebec for networking and planning, job search workshop, a first impressions workshop and a workshop about internships and employment opportunities at the Public Health Agency of Canada. The attendees completed a satisfaction survey and reported a high level of satisfaction. In addition, the occupational hygiene program reported that each job posting on in their Facebook page generates 100-300 views. Every fall students in academic programs, especially PhD students, can participate in a scholarship/grant craft workshop.

At the department and program level, professors assist students through their professional networks and provide letters of recommendation upon request. Students and alumni expressed gratitude and appreciation for assistance by faculty and acknowledge that students are encouraged to meet with multiple faculty members and referred to personal contacts for internship and employment opportunities.

Several programs provide specialized services to their public health students. The Department of Health Management, Evaluation, and Policy (DGEPS) alumni offer mentoring and counseling to matriculated students through the Health Service Administration Alumni Association. The bioethics program webpage has career information and provides job alerts via social media and listservs. The Department of Environmental and Occupational Health (DSEST) use the programs webpage and LinkedIn group and provides one scholarship to support a student’s preparation for the Canadian Registration Board of Occupational Hygienists (CRBOH) exam.

Since June 2015, the school has collected information on student satisfaction with advising and career counseling through the Student Exit Survey. As of May 2016, data on 60 students surveyed (40.3% response rate) indicate a moderate to high level of satisfaction with advising services (Target ≥ 75% -
orientation 82%; communication 78%; course selection support 68%) but a low level of satisfaction with career counseling services (Target ≥ 75% - counseling services – 41%). The school attributes the low career counseling ratings to lack of student participation in sponsored events during the AY 2015-2016.

The school plans to analyze the adequacy of the department/program advising and career counseling services, revise the student exit survey to better measure students’ needs and satisfaction, obtain a second email address for matriculating students and explore possibilities to enhance contacts and mentorship opportunities with alumni and non-primary faculty. Students and alumni confirmed the school’s efforts to maintain contact especially via alternate email addresses.

Students and alumni that met with site visitors expressed the high satisfaction with the advising received from faculty and their internship supervisors, despite the data which can be attributed to the low response rates.

Public health students follow Université de Montréal’s formal complaint procedure for academic appeals (exam review, program suspension and deadline extensions). These procedures are outlined in the Academic rules for Post-Graduate and post-Doctoral Studies. There is a specific policy to address sexual harassment complaints which are handled directly by the Bureau d’intervention en matière de harcèlement (BIMH).

The university also promotes an internal conflict resolution process. Students are encouraged to address conflict on an individual personal level first. Student elections are held each September, and student representatives use these forums to address concerns communicated to them by groups of students.

If the matter is not resolved by more informal mechanisms, or this is not an option, the student must follow the institution’s hierarchy: the Program Director, the Head of their department, the Secretary of the faculty or Associate Academic Dean and the Dean. The Association of Universite de Montreal's Public Health Students (AEESPUM) provides student support and actively invites students to seek their assistance.

Université de Montréal’s disciplinary committee is used if the complaint goes as far as the rector. The Disciplinary Rules for Teaching Staff Students details this committee’s involvement in a complaint. The university Ombudsman’s Office assists all students. This office provides counseling, assists with complaint process and appeal and is the student’s last resort if they feel wronged by a final decision after exhausting all other options. The 2016-2017 ESPUM Student Handbook was updated to include the complaint procedures.
Over the past three years, the dean received five formal complaints. Two academic complaints in AY 2013-2014 concerned the doctoral exam and resulted in a review of the doctoral exam correction process. One academic appeal in AY 2014-2015 for an exam review was handled within the department. There were two academic appeals in AY 2015-2016: one is still under investigation by the disciplinary committee and the other was a master’s thesis refusal that the Dean used his prerogative to allow the student a second chance to submit the thesis.

Over the past three years, the Ombudsman’s office received 33 information or consultation requests from students (degree and non-degree programs). Among these cases, one grievance was lodged in AY 2013-2014 and one in AY 2014-2015. For AY 2015-2016, the Ombudsman’s office is combing the data for requests and grievances in order to preserve the confidentiality of information concerning grievance cases. The self-study coordinator indicated that the number of outreaches to the Ombudsman office is reflective of students and occasionally faculty, not fully using the policy and procedures manuals and seeking information that is eventually referred back to the school for investigation.
Agenda
COUNCIL ON EDUCATION FOR PUBLIC HEALTH
ACCREDITATION SITE VISIT
Université de Montréal
School of Public Health
January 25-27, 2017

Wednesday, January 25, 2017

8:30 am  Request for Additional Documents
Michèle Rivard

8:45 am  Team Executive Session

9:30 am  Meeting with Core Leadership Team
Pierre Fournier
Lise Gauvin
Lise Lamothe
Michèle Rivard
Michèle Bouchard
Nicole Leduc
Christina Zarowsky

10:45 am  Break

11:00 am  Meeting with Self-study Committee
Pierre Fournier
Lise Gauvin
Lise Lamothe
Michèle Rivard
Louise Bossé
Maryève Tassot

11:45 am  Break

12:00 pm  Lunch with Students
Adelina Arténie
Jacques Balayla
Emmanuelle Batisse
Odenigbo Chukwudum
Monia Cordeau
Claudio Del Grande
Farah Islam
Élise Joly-Émond
Marie-Pier Larose
Chloé Le Guillou-Gagnon
Muriel Mac-Seing
Axelle Marchand
Charles Marsan
Thu Hanh Ngo Nguyen
Krystle North
Audrey Jade Paris-Migneault
Marie Christine Roy
Céline Signor
Érik Simard
Vanessa Sit
Jacqueline Wassef

1:30 pm  Break

1:45 pm  Meeting with Instructional Programs Group 1: Professional Public Health Degree
Nicole Beaudet
Maryse Bouchard
Réjean Hébert
Lise Lamothe  
Bernard Simon Leclerc  
Christina Zarowsky  
Michèle Rivard  

3:00 pm  Break  
3:15 pm  **Team Executive Session**  
3:30 pm  **Meeting with Instructional Programs Group 2: Other Professional Degrees**  
Maryse Bouchard  
Lise Lamothe  
Marie Pascale Pomey  
Claude Sicotte  
Bryn Williams-Jones  
Michèle Rivard  

4:15 pm  **Team Executive Session**  
5:00 pm  **Adjourn**

**Thursday, January 26, 2017**

8:30 am  **Meeting with University Leadership**  
Guy Breton  
Louise Beliveau  
Pierre Fournier  
Michèle Rivard  

9:15 am  **Break**  

10:00 am  **Meeting with Instructional Programs Group 3: Academic Degrees**  
Francois Beland  
Michèle Bouchard  
Francois Champagne  
Lambert Farand  
Sami Haddad  
Lise Lamothe  
Vardit Ravitsky  
Marie Pierre Sulvestre  
Helen Trottier  
Michèle Rivard  

11:15 am  **Meeting with Michèle Rivard**  

12:00 pm  **Lunch with Alumni and Community Stakeholders**  
Ariane Adam-Poupart  
Isabelle Bisailon  
Claudia Bojanowski  
Vanessa Brunetti  
Raphaëlle Dupras-Leduc  
Dominic Falconi  
Jesse Menard  
Mendy Sananikone-Thavonekham  
Andrea Van Hulst  
Caroline Barbir  
Nicole Beaudet  
Luc Boileau  
Jacques Couillard  
Nicole Damestoy  
Marie Line Gilbert  
Islene Lazo  
Richard Massé  
Julien Michaud  
Nolwenn Noisel  
Philippe Sarazin  
Julio Soto  
Mathieu Valcke  

1:30 pm  **Break**
1:45 pm  Meeting with Faculty Related to Research, Service and Workforce Development
Michèle Bouchard
François Champagne
Laurent Duchastel
Lise Gauvin
Sami Haddad
Pascale Lehoux
Jennifer O-Loughlin
Valery-Ridde
Marc Andre Verner
Michèle Rivard

2:20 pm  Break

3:00 pm  Meeting with Faculty Related to Faculty Issues, Student Recruitment, Advising
Michèle Bouchard
Michèle Rivard
Geetanjali Datta
Julien Michaud
Nolwenn Noisel
Marie Pierre Sulvestre
Marc Andre
Bryn Williams-Jones
Christina Zarowksky

4:00 pm  Break

4:15 pm  Team Executive Session

4:30 pm  Adjourn

Friday, January 27, 2017

9:00 am  Team Executive Session

11:30 am  Working Lunch, Report Preparation

12:30 pm  Exit Briefing

1:15 pm  Team Departs/Adjourn